



**REPUBLIC OF GHANA**

# Assessment of Ghana's Social Protection System Readiness for Shock Responsiveness

**MINISTRY OF GENDER,  
CHILDREN AND SOCIAL  
PROTECTION**

# Assessment of Ghana's Social Protection System Readiness for Shock Responsiveness

*Final Report*

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**Commissioned by:**

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## Contributors

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## Acronyms

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AIR	American Institutes for Research
CADRI	Capacity for Disaster Reduction Initiative
CAP	Common Alerting Protocol
CHPS	National Community Health Planning and Services
CLIC	Community LEAP Implementation Committee
DIC	District Implementation Committee
DRM	Disaster Risk Management
DSWO	District Social Welfare Officer
EPP	Emergency Preparedness Plan
EWS	Early Warning System
FCDO	Foreign Commonwealth and Development Office
GBV	Gender Based Violence
GES	Ghana Education Services
GhiPSS	Ghana Interbank Payment and Settlement System
GMet	Ghana Meteorological Agency
GNHR	Ghana National Household Registry
GSFP	Ghana School Feeding Programme
GoG	Government of Ghana
HCT	Humanitarian Cash Transfers
IDP	Internally Displaced Persons
IAWGE	Inter-Agency Working Group for Emergencies
ISS	Integrated Social Services
KII	Key Informant Interview
LEAP	Livelihood Empowerment Against Poverty
LIPW	Labour-Intensive Public Works
MIS	Management Information System
MLGDRD	Ministry of Local Government, Decentralization and Rural Development
MoGCSP	Ministry of Gender, Children, and Social Protection

NADMO	National Disaster Management Organization
NCPD	National Council on Persons with Disability
NDPC	National Development Planning Commission
NHIA	National Health Insurance Authority
NHIS	National Health Insurance Scheme
NIA	National Identification Authority
PMT	Proxy Means Testing
SEIP	Secondary Education Improvement Programme
SHEP	School Health Education Personnel
SIC	School Implementation Committee
SRSP	Shock Responsive Social Protection
SWCD	Social Welfare and Child Development
SWCES	Single Window Citizen Engagement Service
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children’s Fund
WB	World Bank
WFP	World Food Programme

## Executive Summary

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## Introduction

Recent and ongoing shocks, such as the COVID-19 pandemic, the effects of the Ukraine-Russian war on the global economy, floods, droughts, and threats of extremism put communities socially and economically at risk. For vulnerable households, including those affected by poverty, female-headed households, people living with disabilities, migrants/refugees, and the elderly, these shocks may have lasting effects on health, well-being, and accrued debts.<sup>1</sup> While effective social protection support is essential to minimize these effects and build resilience for future shocks, national social protection systems often lack the flexibility and agility to adjust to crises and rapidly reach those in need with an adequate level of support (UNICEF, 2020; World Bank, 2021). In Ghana, for example, the national social protection system faced challenges in effectively supporting vulnerable populations during the COVID-19 pandemic, including operational difficulties and inadequate data for effective targeting (UNICEF, 2022; Osei-Boateng & Vlamincx, 2021).

There is increasing recognition of the importance of strengthening social protection systems to enable more effective responses to shocks (UNICEF, 2020; World Bank, 2021; CADRI, 2022). In line with Sustainable Development Goal Target 1.3, which calls for the implementation of “nationally appropriate social protection systems” by 2030, the Government of Ghana (GoG), the Foreign, Commonwealth and Development Office (FCDO), the United Nations Children’s Fund (UNICEF), the World Bank, the World Food Programme (WFP) and other partners requested an assessment to understand the opportunities and challenges of providing social protection services during crisis in Ghana. The American Institutes for Research (AIR) and our local counterpart, Dr. Clement Adamba, were contracted by UNICEF Ghana, with leadership from the Ministry of Gender, Children, and Social Protection (MoGCSP), to conduct this assessment of Ghana’s social protection system shock responsiveness. The assessment is guided by the UNICEF Social Protection System Readiness Assessment Tool, the World Bank Stress and Risk tool, as well as key focus areas of the World Food Programme Shock Responsive Social Protection tool and highlights potential gender- and age-responsive approaches that the GoG and development partners can consider as they respond to the needs of populations affected by emergencies such as climate change and man-made disasters.

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<sup>1</sup> We understand that vulnerability in Ghana is multi-faceted, including gender, age, poverty status, disability status, ethnic identity, migrant/refugee status, and geographic location (MoGCSP, 2022).

## Study Objectives

The assessment aims to accomplish the following:

- Assess the political, technical, operational, and financial feasibility of Ghana’s social protection system to adapt to new situations and provide assistance to people affected by shocks and disasters in a more gender-responsive manner.
- Identify opportunities for links with Ghana’s social sector strategies and for developing or supporting a ‘cash plus’ approach, alongside social transfers, in emergencies.
- Identify and compare possible options for ways that the programme(s) of interest or their systems can be used to build resilience before shocks and to meet age- and gender-specific needs at times of shock or disaster, including role(s) for each stakeholder.
- Assess the gender-responsiveness of emergency preparedness plans in social protection, as well as the role of the gender machinery to provide advisory support for the design of gender-responsive emergency interventions.
- Propose age- and gender-responsive efficient measures to address the identified issues and gaps.

## Summary Methodology

The assessment was led by AIR working in close partnership with the Technical Working Group (TWG) made up of representatives from government and development partners, under leadership of the MoGCSP. A desk review of secondary data was completed followed by consultations with the TWG to understand the social protection and disaster risk management (DRM) context in Ghana, stakeholders' role and their needs/requirements. During the inception phase, AIR engaged in discussions with the TWG to refine the focus and priorities for the assessment. Together, AIR, and the TWG identified the Livelihood Empowerment Against Poverty (LEAP) programme and the Ghana School Feeding Programme (GSFP) for more detailed analysis, along with the 30 key stakeholders in social protection and DRM spheres to be interviewed for the assessment. LEAP and GSFP were identified as the social protection programmes with the most reach and potential to be leveraged for emergency response. In addition, AIR, and the TWG selected the regions of Upper East, Western, and Greater Accra for the regional sampling of the assessment to represent various regional contexts and types of shocks in Ghana. These contexts include urban and rural, refugee, and internally displaced settings. This informed the planning for data collection and in-person interviews in the country.

AIR's approach included two main methods: key informant interviews and an online survey with the selected informants. AIR's partner, Dr. Clement Adamba, from the University of Ghana, led a team of Ghanaian researchers who conducted key informant interviews (KIIs). AIR developed tailored data collection protocols based on the questions included in the Assessment Tool. Interviews were conducted in English, and the majority was conducted in-person, except for cases in which the respondent requested a virtual interview. Interview findings and additional secondary data shared by key informants were used to complete the Assessment Tool template. In addition to the KIIs, the AIR team developed two online surveys, one with a broad set of questions which was sent to all the key stakeholders who were included in the KIIs, and one specific survey with targeted questions about the GSFP and the LEAP programmes. The surveys focused on indicators from the Assessment Tool that could be answered by multiple choice answers. In total, the AIR team reached out to 35 participants from 30 organisations or government institutions. For the survey specific to the GSFP and LEAP programmes the team received a 100% response rate (n=2), while for the broader survey the responses covered 79% of the selected institutions (n=22). The AIR team achieved these response rates by sending at least three (personalized) reminders to the stakeholders. UNICEF staff were instrumental in reaching out and following up with programme and government entities to complete the survey.

Based on the desk review, online survey and qualitative findings, AIR systematically reviewed and analysed the findings from each module of the assessment tool. This ensured a systematic analysis of the current social protection and DRM systems in the country, their respective strengths and weaknesses for providing cash-based assistance during emergencies, and the country's capacity to support the same. Based on the findings of this analysis, the AIR team then systematically considered a range of possible programme options for providing cash assistance through the social protection system during shocks and disasters and assessed the related enablers and constraining factors to determine which could potentially be feasible and appropriate for the context. With consultation from the social protection TWG, AIR examined which programme options and recommendations would be possible to accomplish, and appropriate to utilize in the given context. A small number of feasible programme options were then taken forward to a final stage, examining a range of preparedness actions required and their implications for the government of Ghana and other actors. After the mission the AIR team further developed the comparative analysis, programme options and preparedness actions.

## Summary of Assessment Findings

This section presents the headline findings and main conclusions from each module of the system readiness assessment. The findings focus on the LEAP and GSFP programmes, both of which have been used to some extent to respond to shocks such as the COVID-19 pandemic and other emergencies. While there is a high degree of support for the programmes from government agencies and development partners, there are also challenges in its system and application in emergency contexts. Disruptions to coordination, funding issues, and a lack of a cohesive legal framework have made it difficult for actors to adapt social protection to adequately meet the needs of vulnerable populations in the face of shocks. Structures exist to help facilitate the issuance of cash transfers to a wider network of vulnerable beneficiaries, and have been used to respond to some recent shocks, but are not consistently leveraged in the current operations framework. Opportunities for scaling cash assistance is also often stymied by limited and delayed access to contingency funds for emergency response. Addressing these challenges can improve the capacity of key actors and programmes to effectively adapt or continue programming during future emergencies.

## ***Module 1: Mapping of Social Transfer Programmes***

A number of government and non-government actors are involved in the design, coordination, and implementation of social protection programmes in Ghana. Key flagship programmes, such as LEAP and the GSFP provide assistance to a high number of vulnerable beneficiaries in the country. Both programmes utilize the Ghana Interbank Payment Settlement Systems (GhIPSS) to disburse cash payments to beneficiaries and food caterers. While the system is generally successful, there are gaps in its implementation and accessibility. ID requirements for registering with GhanaPay (via GhIPSS) can further exclude particular vulnerable populations, particularly refugees, displaced individuals, individuals with disabilities, and individuals in hard-to-reach areas.

## ***Module 2: Data and Evidence***

There is a strong correlation between multidimensional poverty and vulnerability to shocks. These populations, which largely include women, children, the elderly, informal workers, low-income individuals, persons with disabilities, displaced individuals, and individuals living in rural areas are also more likely to face exclusion and thus be less resilient in the face of shocks. Though LEAP (directly) and the GSFP (indirectly through feeding students) serve a significant number of households living in poverty, existing systems in other sectors can be leveraged to increase coverage during shocks. Systems such as the NHIA and CHPS in particular could help horizontally expand programmes to reach shock-affected populations.

### ***Module 3: Readiness of Policy, Legislation and Finance***

The possibility of coordinating between social protection and disaster management programming exists but would require a clear legal framework to guide actors in their efforts. The lack of a comprehensive disaster response strategy and framework for coordination makes it difficult for the MoGCSP and NADMO to work alongside one another and adapt interventions. The two institutions, in the absence of a comprehensive disaster response strategy, do cooperate in various areas. Having the DRS will improve how they work and coordinate. Government financing of emergency response efforts also poses issues for scaling-up social protection and cash-based interventions during shocks. Though NADMO and the MoGCSP are currently leading efforts to formalize such policies into Ghana law, it will require buy-in and financial support from the GoG to ensure efficient and effective implementation of shock-responsive social protection. The Ministry is working on finalizing the social protection bill (which makes provisions for emergency financing).

## ***Module 4: Readiness of Programme Design***

LEAP's programme design has a moderate level of readiness for shock responsiveness. Though LEAP criteria appear to be effective in targeting the poorest populations, there is room for improvement in targeting vulnerable populations, especially people with disabilities and those more vulnerable to disasters. Additionally, a recent gender assessment (Kuss, 2023) identified the need for LEAP to strengthen its response to GBV, address harmful gender norms, and provide greater support to elderly women.

LEAP was successfully modified to respond to shocks such as the COVID-19 pandemic by vertical expansion (top-up payment for existing beneficiaries) and horizontal expansion (temporary inclusion of new beneficiaries). Nonetheless, LEAP relied on Ghana National Household Registry (GNHR) data to identify expansion beneficiaries. GNHR data<sup>2</sup> are not comprehensive for all of Ghana and may exclude some vulnerable populations. Therefore, continuing with the ongoing efforts to increase GNHR coverage is crucial to improve expansion targeting for LEAP. Further, securing contingency funding was reported by key informants as a challenge to rapidly expanding LEAP. In addition, LEAP has relevant social service linkages for shock response, such as the National Health Insurance Scheme (NHIS), but the operational and coordination challenges with these linkages may hinder this potential. Nonetheless, the Integrated Social Services (ISS) approach is being harnessed to overcome such operational and coordination challenges. Lastly, topping up the transfer value may be more feasible than increasing its frequency, given the transactional costs with payment disbursement.

GSFP's design has a moderate level of readiness for shock responsiveness. The selection process for schools involves considering poverty indicators, enrolment rates, and community infrastructure. Gender-related factors like low enrolment and issues such as child marriage are also considered. However, disabilities, refugee status, and disaster-affected areas are not explicitly targeted. The programme faces challenges in adhering to targeting criteria, notably related to a lack of transparency in the school and caterer selection process. The expansion of targeting criteria to include more beneficiaries seems feasible, including the availability of potential beneficiary data through GES, though the costs may be prohibitive. GSFP also has potential linkages, such as the NHIS and the Ghana Health Service (GHS), that can benefit shock-affected populations.

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<sup>2</sup> The GNHR is an example of a social registry, or an attempt to streamline and make more efficient the beneficiary identification process for social protection by avoiding duplicate data collection and using a common Proxy Means Test. Data collection started in the north of the country where poverty and vulnerability levels are the highest. Before the onset of the COVID-19 pandemic, GNHR had collected a census in the two northern regions of the Upper East and Upper West. GNHR data collection efforts are ongoing (Scott and Ammoun, 2021).



## *Module 5: Readiness of Administrative Systems*

LEAP's administration has a low to moderate level of readiness for shock responsiveness. Regular registration/enrolment of beneficiaries into LEAP (in the absence of a shock) is not demand-driven, and re-verification does not occur frequently.<sup>3</sup> Rapidly enrolling new beneficiaries in response to shocks could pose a challenge for LEAP, since the current process usually requires using existing GNHR data (which does not currently cover all regions of Ghana) or conducting rapid data collection to identify additional beneficiaries. LEAP has previously been expanded to include a larger benefit and a wider range of beneficiaries during COVID-19 and in response to specific disasters, such as "Black Wednesday" flood and explosion in Accra in 2015. While LEAP successfully included 125,000 additional beneficiaries during COVID-19, this required rapid data collection through GNHR. This additional data collection can be time consuming and delay emergency response. For LEAP beneficiaries, the E-zwich platform seems to work well during emergencies and shocks, though it requires beneficiaries to have accessible transport to cash out points. For non-LEAP beneficiaries, mobile money seems to be more feasible as a mode of payment, since it does not require in-person enrolment/distribution or E-zwich cards. However, mobile money adds potential barriers for beneficiaries (especially women) who share phones or do not have access to phones and requires additional verification to prevent fraud. LEAP's communication system and grievance mechanism through the Single Window Citizens Engagement Service (SWCES) also require attention, given previous challenges in building awareness of the grievance process and resolving beneficiary complaints. The SWCES was also designated as the main channel for grievances for expansion beneficiaries.

Based on the available data, GSFP administration seems to have a low to moderate level of readiness for shock response. Registration and enrollment in the GSFP are primarily based on specific criteria, but the inclusion of new schools depends on available funds. Caterers undergo a contracting process and are paid via E-zwich cards, although delays in payments have been reported. Further, the process of contracting caterers seems lengthy, and the method of payment through invoicing at the end of the term does not seem to lend itself well to rapid expansions in scale. Communication is channeled through various levels, including District Desk Officers, Zonal Coordinators, and the National Secretariat, with WhatsApp audios being the main channel for communication with illiterate caterers; however, previous assessments point to challenges in community engagement. The Case Management Unit handles complaints and grievances, but there are concerns about the length of the process and the need for more sensitization. Monitoring of the program is conducted at different levels, but limited resources and operational challenges pose constraints. Key informants expressed concerns about the human resource capacity of the GSFP in times of crisis, although the payment service provider, GhIPSS, is considered to have surge capacity.

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<sup>3</sup> Though the LEAP Operations manual provides for re-verification/reassessment every four years, this has not been done. A pilot reassessment has been initiated in ten selected districts in 2023, and results are yet to be released to inform national rollout of the reassessment.

## Identifying Potential Programme Options

Based on the analysis of the different modules, the AIR team identified potential programme options to enhance the shock responsiveness of Ghana's social protection system. The analysis explored each of the various ways that the LEAP and GSFP programmes, as well as Ghana's social protection system as a whole, could potentially be leveraged to respond to shocks. The AIR team used all evidence from the assessment, and the typical benefits and challenges of each option, to guide decision making on potential programme options and the likely enablers and constraining factors/challenges in the Ghanaian context. The analysis also considered differences according to the type of disaster or shock, and scale of the emergency, focusing on the three regions selected for the study (Upper East, Western, and Greater Accra) and the main types of emergencies prioritised in Module 1 - floods, landslides, macroeconomic instability, epidemics, intra-communal violence, tidal waves, and refugee influx.

Based on this, the AIR team made a preliminary determination of the feasibility and appropriateness of each programme option, and which have greater priority for the government. The analysis considered whether the programme option could potentially be possible (feasibility) and the appropriateness of responding in this way (appropriateness), including the potential added value for programmes and benefits to affected populations. Further, the feasibility and appropriateness analysis also considered the type and scale of disaster, and whether government can have a role (priorities/capacities/skillset).

The AIR team also made conclusions about the need for additional Humanitarian Cash Transfers (HCTs) through parallel, but aligned systems to fill gaps, especially in the event of a large-scale disaster. Findings are presented in Table I. Based on this analysis, three options, identified as providing greatest opportunity/priority for the government in the short term, were taken forward to the next step. The AIR team verified the proposed programme options and obtained inputs on their prioritization in a validation workshop with the TWG on August 14<sup>th</sup>, 2023.

**Table I: Analysis of programme options**

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
1	System-wide	Develop a system-wide shock responsive social protection strategy to define roles and responsibilities and identify contingency funding; Improve coordination between DRM and social protection systems	<ul style="list-style-type: none"> <li>-Lack of emergency response framework</li> <li>-Challenges in securing contingency funding in timely manner</li> <li>-Challenges in coordination between DRM and social protection</li> </ul>	<ul style="list-style-type: none"> <li>-Buy-in from NADMO and key actors in SRSP landscape</li> <li>-Current consideration of the Social Protection Bill (yet to be enacted)</li> </ul>	<ul style="list-style-type: none"> <li>-Coordination between actors in the social protection landscape</li> <li>-Limited financial support</li> <li>-Need to satisfy multiple development agendas</li> </ul>	<ul style="list-style-type: none"> <li>-High feasibility for framework, moderate feasibility for funding</li> <li>-High appropriateness</li> </ul>	-High priority
2	LEAP + GSFP	<b>Design tweak</b> - Develop programme-level shock response plan and ensure contingency funds for shock response	<ul style="list-style-type: none"> <li>-Lack of programme-level shock response plan</li> </ul>	<ul style="list-style-type: none"> <li>-Buy-in from the MoGCSP and other partners</li> </ul>	<ul style="list-style-type: none"> <li>-Funding</li> <li>-Need to satisfy multiple development agendas</li> <li>-Adjustment could divert programmes from core objective</li> </ul>	<ul style="list-style-type: none"> <li>-High feasibility for framework, moderate feasibility for funding</li> <li>-High appropriateness</li> </ul>	-High priority
3	System-wide	<b>Design tweak</b> – Increase coverage of GNHR and ensure that it is updated more regularly and link it with databases of other systems (such as NHIS) to allow for improved identification of vulnerable populations, including during emergencies	<ul style="list-style-type: none"> <li>-Gaps in GNHR coverage poses targeting challenges for LEAP, especially during shocks.</li> </ul>	<ul style="list-style-type: none"> <li>-Would feed into existing targeting systems for LEAP and GSFP</li> <li>-Plans ongoing to extend coverage of the GNHR</li> </ul>	<ul style="list-style-type: none"> <li>-Coordination with GNHR</li> <li>-Cost and time associated with data collection</li> <li>-Funding</li> </ul>	<ul style="list-style-type: none"> <li>-Moderate feasibility</li> <li>-High appropriateness</li> </ul>	-High priority

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
4	LEAP	<b>Design tweak</b> – Improve mechanisms and develop standard guidelines to identify vulnerable populations, including people with different types of vulnerabilities, for example, elderly women, multidimensionally poor.	- Room for improvement in identifying vulnerable populations, such as women and people with disabilities, multidimensionally poor for LEAP.	- Buy-in from key actors, e.g. MoGCSP. - Would feed into existing targeting and programme administering system	- Coordination with GNHR and National Council on Persons with Disability - Would require additional data collection efforts	- Moderate feasibility - High appropriateness	- Medium priority; the TWG believes this is already being done to some extent.
5	LEAP + GSFP	<b>Design tweak</b> – Include disaster risk as targeting criteria for beneficiary/school selection to strengthen resistance of populations in disaster-prone regions.	- Lack of consideration of disaster risk as a targeting category for beneficiary selection for LEAP and school selection for GSFP.	- Would strengthen resilience of populations in disaster-prone regions prior to emergencies - Would not require changes in programme administration	- Coordination with GNHR and GES - May require additional data collection - Would potentially require expansion in geographic coverage - Funding	- LEAP: low to moderate feasibility - GSFP: Moderate feasibility - High appropriateness	- High priority
6	LEAP + GSFP	<b>Design tweak</b> – ensure regular re-verification of beneficiaries/recertification of schools to allow for exit & graduation, as well as enrolment of new beneficiaries/selection of new schools.	- Lack of regular verification, exit & graduation of beneficiaries and schools. - Enrolment of new beneficiaries and schools not done on a regular basis.	- Buy-in from LEAP and GSFP key stakeholders and line ministries (i.e. MoGCSP, MoE)	- Requires updated data from GNHR and/or GES - Requires staff resources and time - Requires funding	- Low feasibility - Moderate appropriateness	- High priority

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
7	LEAP + GSFP	<b>Vertical expansion</b> – Increase the amount of the transfer/benefit (temporarily) to better support the resilience of beneficiaries in the face of macroeconomic instability	- Previously successful emergency response to COVID-19 pandemic by the GoG.	- Builds on existing administrative systems and programme infrastructure. - Requires minimal changes from implementors. - Plans to index LEAP transfer amount to inflation are ongoing	- Limited fiscal space	- High feasibility (LEAP transfer value increase recently accomplished) - High appropriateness	- Medium priority; the TWG believes this is already being done to some extent.
8	LEAP	<b>Horizontal expansion</b> – Temporarily include beneficiaries who have not answered the PMT questionnaire but are affected by a rapid onset disaster or shock in specific geographic areas. - Develop linkages with databases from other social protection programmes to identify beneficiaries. - Enable potential beneficiaries to request to be considered for the payments via a call to SWCES or an app	- Previously successful approach to COVID-19 emergency response by the GoG, albeit with some delays.	- Would reach broader spectrum of affected population quickly - Would leverage existing GhIPSS/mobile money systems - Can potentially be done remotely	- Lack of cohesive data collection strategy on affected populations during shocks - Requires establishing criteria for temporary inclusion and rapid data collection, which may cause delays - GhIPSS requirements (may mean those who are not already registered will not be able to receive payments)	- Moderate feasibility - High appropriateness	- High priority

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
9	GSFP	<b>Vertical expansion</b> – If caterers have the ability to scale up production quickly, temporarily increase the benefit by increasing caterers’ orders and sending students with additional food to take home in times of crisis.	- School feeding programmes can be crucial entry points to provide additional benefits and services to vulnerable households.	- Would leverage existing contracts with caterers - Would reach larger number of beneficiaries without requiring an expansion in targeting	- Caterers may not be able to scale up production quickly - The invoicing payment system may not lend itself to an increase in production	- Moderate feasibility - Low to moderate appropriateness	- Medium to low priority
10	GSFP	<b>Piggybacking</b> – Use GSFP infrastructure to distribute non-perishable food items and gender-related complementary services (such as menstrual health items) to schools (see Kuss 2023).	- School feeding programmes can be crucial entry points to provide additional benefits and services to vulnerable households.	- Would leverage existing GSFP school lists and systems	- Would require additional transportation logistics	- Low feasibility - Moderate appropriateness	- Low priority
11	LEAP	<b>Design tweak</b> – Streamline linkage with NHIS to ensure that expansion beneficiaries have access to health services during crisis, especially women and the elderly.	- Operational challenges in the linkages between LEAP and NHIS that hinder the full potential of synergies between these two programmes in emergency response	- Would allow health service access to populations affected by shocks - Would work within the current operations of LEAP	- Coordination with NHIS - Communication about NHIS benefits	- Moderate feasibility - Moderate appropriateness	- Medium to high priority

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
12	EWS	<b>Design tweak</b> – develop more holistic approach to early warning in the country, find ways for EWS to better coordinate with LEAP and GSFP programme specific needs.	- While EWS exists in Ghana, there is room for improvement in its linkages to the social protection system.	- Buy-in from SRSP stakeholders	- Coordination between NADMO and social protection system - Funding	- Moderate feasibility - High appropriateness	- High priority





## Conclusions:

Programme options to take forward from the above	1. Develop shock responsive social protection strategy, defining roles and responsibilities; improve coordination between DRM and social protection systems	Need for parallel HCT in the short to medium term?
	2. Include disaster risk as targeting criteria for beneficiary/school selection	Yes, a parallel HCT may be needed if a disaster were to occur in an area that is not currently covered by the GNHR, making LEAP coverage difficult.
	3. Temporarily include beneficiaries who have not answered the PMT questionnaire but are affected by a rapid onset disaster or shock in specific geographic areas.	

## Recommended Preparedness Actions

For the potential programme options that were prioritized in Section 3, the AIR team identified a series of concrete actions for government and its partners to take forward. This analysis took into consideration:

- The main constraints identified in Section 3 and what is needed to overcome these.
- The type of support that development partners, philanthropic institutions, and civil society organizations can provide the government with (e.g., technical assistance for programme and policy design; financial resources; advocacy; system strengthening; capacity building; evidence building; provision of complementary services/ ‘cash plus’; coordination; etc).
- Actions required of different stakeholders (government and non-governmental).
- Proposed timeline for implementation (0-2, 2-5 or 5+years).

The recommended actions are summarised in Table II. This can serve as a basis for discussion with other actors in the country and development of a multi-stakeholder collaboration plan.

**Table II: Planning recommended preparedness actions**

Programme Option	Recommended Preparedness Action	Actions needed by government partners	Timeframe (0-2, 2-5, 5+ years)
<b>Develop system-wide social protection shock responsive strategy defining roles and responsibilities and contingency funding; improve coordination between DRM and social protection systems</b>	Develop a National Social Protection Shock Response Strategy, and policy/operational manual defining roles and responsibilities	Draft and approve National Disaster Response Strategy	0-2
	Strengthen existing Social Protection working group to incorporate DRM	Engage in social protection working group activities	0-2
	Advocate for contingency funds for emergency response	Consider funding emergency response	2-5
<b>Include disaster risk as targeting criteria for beneficiary/school selection in LEAP/GSFP</b>	Coordinate with NADMO, GNHR, and GES to collect disaster risk targeting data that can be leveraged for each programme	Facilitate coordination; contribute to disaster risk targeting discussions	0-2
	In addition to existing targeting criteria, include disaster risk and the needs of vulnerable populations (women, girls, people with disabilities, the elderly, etc.) as part of targeting criteria	Amend targeting processes for both programmes	2-5
	Conduct selection/targeting of beneficiaries/schools in disaster-affected regions	Provide funding for additional beneficiaries to be selected	2-5

Programme Option	Recommended Preparedness Action	Actions needed by government partners	Timeframe (0-2, 2-5, 5+ years)
<b>Temporarily include beneficiaries who have not answered the PMT questionnaire but are affected by a rapid onset disaster or shock in specific geographic areas.</b>	Collaborate with NADMO or other relevant agencies to determine processes to identify areas/populations affected by rapid onset disaster	Provide inputs on processes to identify areas/populations affected by rapid onset disaster; incorporate these processes in programme operations	0-2
	Develop rapid data collection strategy to deploy in response to unexpected shocks – establish roles and reporting structure	Provide inputs and agree on data collection strategy in response to shocks. Develop clear systems and train staff on timely and sensitive data collection.	0-2
	Determine expanded criteria for eligibility that can be activated in the event of a shock (e.g.: gender, disability, refugee status, etc.)	Contribute to the development of expanded criteria. Following these criteria, conduct beneficiary targeting and assessment when disasters emerge.	2-5
	Review and modify the registration system to accommodate and provide secure and timely access to potential beneficiaries to participate in the targeting, including mobilisation and sensitisation.	Contribute to discussions around how to modify the registration system. Provide funding for registration system changes.	2-5
	Integrate mobile money (can be Ghanapay – owned by GhiPSS as long as registration does not require address and Ghana card) to ensure more affected individuals/households who do not have an e-zwich can receive funds. Consider delivering handsets to vulnerable groups who may be prevented from using mobile money payment systems.	Coordinate with GhiPSS to develop mobile money strategy, provide funds for any additional resources (such as handsets) needed.	2-5
	Strengthen linkages with productive/climate adaptation programmes and additional benefits and services (such as GBV prevention, psychosocial support, housing support) via ISS to strengthen resilience of vulnerable households.	Coordinate between the different relevant agencies providing these services.	2-5



# 1. Introduction

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Recent and ongoing shocks, such as the COVID-19 pandemic, the effects of the Ukraine-Russian war on the global economy, floods, droughts, and threats of extremism put communities socially and economically at risk. For vulnerable households, including those affected by poverty, female-headed households, people living with disabilities, migrants/refugees, and the elderly, these shocks may have lasting effects on health, well-being, and accrued debts.<sup>4</sup> Indeed, UNICEF (2021) found that the COVID-19 pandemic exacerbated gender inequalities in employment and household income and increased the amount of unpaid time women spent caring for children and elderly or sick family members. While effective social protection support is essential to minimize these effects and build resilience for future shocks, national social protection systems often lack the flexibility and agility to adjust to crises and rapidly reach those in need with an adequate level of support (UNICEF, 2020; World Bank, 2021). In Ghana, for example, the national social protection system faced challenges in effectively supporting vulnerable populations during the COVID-19 pandemic, including operational difficulties and inadequate data for effective targeting (UNICEF, 2022; Osei-Boateng & Vlamincx, 2021).

There is increasing recognition of the importance of strengthening social protection systems to enable more effective responses to shocks (UNICEF, 2020; World Bank, 2021; CADRI, 2022). In line with Sustainable Development Goal Target 1.3, which calls for the implementation of “nationally appropriate social protection systems” by 2030, the Government of Ghana (GoG), UNICEF, the World Bank, WFP and other partners requested an assessment to understand the opportunities and challenges of providing social protection services during crisis in Ghana. The American Institutes for Research (AIR) and our local consultant, Dr. Clement Adamba, have been contracted by UNICEF Ghana on behalf of the MoGCSP, with funding from the UK government through FCDO to conduct an assessment of Ghana’s social protection system shock responsiveness. The assessment is guided by the UNICEF Social Protection System Readiness Assessment Tool, the World Bank Stress and Risk tool, as well as key focus areas of the World Food Programme (WFP) Shock Responsive Social Protection tool, and highlights potential gender- and age-responsive approaches that the GoG and development partners can consider as they respond to the needs of populations affected by emergencies such as climate change and man-made disasters.

This report details the assessment objectives, methodologies, and findings, including an analysis of programme options and recommended preparedness actions to strengthen the shock responsiveness of Ghana’s social protection system. Following this introduction, section 1a. describes the background and context in which the assessment took place, including an overview of the main shocks that affect vulnerable populations in Ghana, the role of social protection in responding to these shocks, and the current national social protection system. Sections 1b. and 1c. outline the study objectives, methodology, and limitations. Section 2 presents a summary of assessment findings based on five modules of the UNICEF Assessment Tool (mapping, data and evidence, readiness of policy, legislation, and finance, readiness of programme design, and readiness of programme administration). Section 3 presents options for social protection programmes to be leveraged during disasters. Finally, Section 4 describes

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<sup>4</sup> We understand that vulnerability in Ghana is multi-faceted, including gender, age, poverty status, disability status, ethnic identity, migrant/refugee status, and geographic location (MoGCSP, 2022).

recommended preparedness actions for the government of Ghana and development partners related to three priority programme options.

## a. Background and Rationale for the Study

The development of this assessment within Ghana's national social protection system is in response to the recognition of the importance of strengthening social protection across the humanitarian, emergency, and development nexus. Shocks and disasters are becoming more frequent and severe, driven by factors including environmental degradation and climate change, and humanitarian crises are becoming more protracted. There is a need to change the 'business as usual' approach to conceiving and delivering emergency assistance (as short-term, siloed, standalone responses, through parallel systems), and to build links between emergency assistance, disaster risk management and development programming to more effectively address the drivers of crises, build resilience and respond to the needs of populations in crisis prone areas.

In 2016 UNICEF and other actors agreed major collective commitments with the aim of increasing the scale, volume and quality of humanitarian cash transfers (HCT). Within this context there is growing interest about the potential of leveraging national social protection programmes and their underlying systems (such as programme design, delivery, and administrative systems) to provide support in emergencies, and for ways in which social protection systems can be supported to become more 'shock responsive'.

Social protection is a promising solution to bridge the humanitarian-development divide due to several factors. Social protection helps households to manage risk and can build the resilience of households that are vulnerable to disasters, preventing a fall into poverty and negative impacts for children. There are also commonalities in the way that emergency assistance (in the form of HCTs) and social protection programmes (in the form of cash-based social transfers) are designed and implemented. While evidence is still emerging, experiences (of UNICEF and others) in supporting national social transfer systems to respond to emergencies suggest that in the right context this approach has potential to enhance resilience to disasters, improve response times, reduce costs of delivering emergency assistance, reduce duplications and gaps and improve national capacities to manage disasters.

### Key Terms

**Social Protections:** *Social protection covers a range of policies and programmes intended to reduce the lifelong consequences of poverty and exclusion*

**Disaster Risk Management:** *The systematic process of using administrative directives, organizations, and operational skills and capacities to implement strategies, policies and improved coping capacities in order to lessen the adverse impacts of hazards and the possibility of disaster.*

**Emergency Response:** *Actions taken to mitigate the impact of a dangerous incident on the public or the environment.*

**Humanitarian Assistance:** *Resources used to fund actions that are designed to ensure the safety, wellbeing, and human dignity of those suffering during, and in the aftermath of, shocks and crises. Includes resources used to prevent and strengthen preparedness for the occurrence of emergencies.*

**Shocks:** *Covariate shocks affect large numbers of people and/or communities at once. Covariate shocks may be natural, economic or political. They include, for instance, drought, floods, typhoons and earthquakes; locust invasions; high food prices and economic downturns; political crises and armed conflict; high numbers of refugees; or outbreaks of disease.*

**Shock Responsive Social Protections:** *Shock-responsive social protections encompass the adaptation of routine social protection programmes and systems to cope with changes in context and demand following largescale shocks*

Source: UNICEF, 2019. Programme Guidance: Strengthening Shock Responsive Social Protection Systems.

At the same time, as with any programme approach, there will be challenges to address. For example, because of the static nature of registries, social transfer programmes may not effectively include those most vulnerable to disasters and any programme deficiencies may be exposed to a greater extent by a disaster or crisis. The Building Gender-Responsive and Inclusive Social Protection Shock Responsive Systems in Ghana report found that "COVID-19 as a particular shock highlighted the limitations...especially for the poor, women, and other socio-economically disadvantage groups" (Anyidoho, et al., 2023). Meanwhile where national systems are inflexible, bureaucratic processes and systems and institutions lacking in capacity, or where there is a lack of political willingness, this can create barriers to effective programming. In some countries, large-scale national social transfer programmes are completely non-existent. The enabling factors and potential barriers in national social transfer programmes and their underlying systems must be well understood, to inform the feasibility of using these at times of shock and to effectively prepare for these interventions. Further, it is important to understand the conditions under which leveraging social protection for shock response is appropriate, and when HCTs are more effective.

Both gender and age are essential elements to consider when assessing shock responsiveness. As reported in the recent "Roadmap for Strengthening the Gender and Shock-responsiveness of Ghana's Social Protection System" (Kuss, 2023), women are disproportionately harmed by economic shocks in Ghana and face additional vulnerabilities in old age. Gender- and shock-responsive social protection must consider not only whether women are covered by programmes but also whether the support is adequate given the disproportionate effects of shocks on women (Kuss, 2023). Similarly, for social protection programmes targeting the elderly (such as LEAP and NHIS), both age and gender-related risks and vulnerabilities must be considered to ensure a fully gender-, age- and shock-responsive approach (Kuss, 2023). Given the importance of the UNICEF tool and its ability to identify existing administrative and operational gaps in social protection schemes, the GoG requested UNICEF's assistance in assessing ways to make Ghana's social protection system more shock and gender-responsive; recognizing the need to address vulnerabilities in crises.



## **b. Study Objectives**

The GoG, together with UNICEF, the World Bank, the World Food Programme and other government partners, including CSOs, seeks to strengthen understanding of the opportunities and challenges of providing social protection services during crisis through an assessment of the national social protection system's readiness for shock responsiveness. The assessment aims to accomplish the following:

- Assess the political, technical, operational, and financial feasibility of Ghana's social protection system to adapt to new situations and provide assistance to people affected by shocks and disasters in a more gender-responsive manner.
- Identify opportunities for links with Ghana's social sector strategies and for developing or supporting a 'cash plus' approach, alongside social transfers, in emergencies.
- Identify and compare possible options for ways that the programme(s) of interest or their systems can be used to build resilience before shocks and to meet age- and gender-specific needs at times of shock or disaster, including role(s) for each stakeholder.
- Assess the gender-responsiveness of emergency preparedness plans in social protection, as well as the role of the gender machinery to provide advisory support for the design of gender-responsive emergency interventions.
- Propose age- and gender-responsive efficient measures to address the identified issues and gaps.

### c. Summary Methodology

The assessment was led by AIR working in close partnership with the Technical Working Group (TWG). A desk review of secondary data was completed followed by consultations with the TWG to understand the social protection and disaster risk management (DRM) context in Ghana, Government's role and their needs/requirements.

During the inception phase, AIR engaged in discussions with the TWG to refine the focus and priorities for the assessment. The AIR team first compiled a modified version of the UNICEF Assessment tool which included relevant questions from the World Bank and World Food Programme (WFP) tools. The UNICEF Ghana team filled in certain sections of the Assessment Tool template in Excel, based on secondary data and their own knowledge. This focused primarily on the introductory mapping module, which was then shared with the AIR team, and used to define the focus and priorities for the assessment mission. It identified the Livelihood Empowerment Against Poverty (LEAP) programme and the Ghana School Feeding Programme (GSFP) for more detailed analysis, along with the key external actors to consult with in social protection and DRM spheres. In addition, AIR, and the TWG selected the regions of Upper East, Western, and Greater Accra for the regional sampling of the assessment to represent various regional contexts and types of shocks in Ghana. These contexts include urban and rural, refugee, and internally displaced settings. This informed the planning for data collection and in-person interviews in the country.

Given the extensive amount of material included in the Assessment Tool and the need to keep interviews to a reasonable length, AIR employed two different methods to collect data from key informants: online surveys and key informant interviews.

#### **Key informant interviews:**

The AIR team developed tailored data collection protocols based on the questions included in the Assessment Tool. AIR's partner, Dr. Clement Adamba, from the University of Ghana, led a team of Ghanaian researchers who conducted key informant interviews (KIIs) with a range of stakeholders listed in Figure 1.<sup>5</sup> AIR conducted a thorough data collection training with Dr. Adamba's team to ensure that they understood the social protection context, shock responsive framework, and content of the data collection tools. The AIR team also reviewed interview notes and provided feedback to ensure the quality of the interview data. Interviews were conducted in English, and the majority was conducted in-person, except for cases in which the respondent requested a virtual interview. Interview findings and additional secondary data shared by key informants were used to complete the Assessment Tool template.

#### **Online surveys:**

In addition to the KIIs, the AIR team developed two online surveys, one with a broad set of questions which was sent to all the key stakeholders who were included in the KIIs (see Table 1), and one specific survey with targeted questions about the GSFP and the LEAP programmes which was filled out by a stakeholder at each programme with knowledge of the programmes' management. The surveys focused on indicators from the Assessment Tool that could be answered by multiple choice answers. The surveys complemented the desk review and KIIs and allowed to reduce the length of the KIIs. In total, the AIR team reached out to 35 participants from 30 organisations or government institutions (see Table 1). For the specific

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<sup>5</sup> In addition to the 30 key informants listed, we also contacted the Office of the Head of Local Government Services (OHLGS) for an interview, but were not able to secure an interview with the organisation during the data collection period.

survey the team received a 100% response rate (n=2), while for the broader survey the responses covered 79% of the selected institutions (n=22). The AIR team achieved these response rates by sending at least three (personalized) reminders to the stakeholders.

### Analysis:

Based on the desk review, online survey and qualitative findings, AIR systematically reviewed and analyzed the findings from each module of the assessment tool. This ensured a systematic analysis of the current social protection and DRM systems in the country, their respective strengths and weaknesses for providing assistance during emergencies, and the government's capacity to support the same. Analysis centred on the creation of visual 'typologies' of readiness using a 'traffic light' 1-3 scale, to facilitate a rapid understanding of the situation, to highlight key barriers and to support quick decisions.

Based on the findings of this analysis, the team then systematically considered a range of possible programme options for providing cash assistance through the social protection system during shocks and disasters and assessed the related enablers and constraining factors to determine which could potentially be feasible and appropriate for the context. A small number of feasible programme options was then taken forward to a final stage, examining a range of preparedness actions required and their implications for the government and other actors. After this, the AIR team further developed the comparative analysis, programme options and preparedness actions.

**Table 1: List of Key Informant Agencies**

Organisation
Department of Social Welfare and Community Development
Ghana Health Services (GHS)
Ghana Interbank Payment and Settlement System (GhIPSS)
Ghana Meteorological Agency (GMet)
Ghana National Household Registry (GNHR)
Ghana School Feeding Programme (GSFP) Secretariat
Livelihood Empowerment Against Poverty (LEAP) Management Secretariat
Ministry of Finance
Ministry of the Interior
Ministry of Local Government, Decentralization and Rural Development (MLGDRD)
Ministry of Gender, Children, and Social Protection (MoGCSP)
National Council for Persons with Disabilities (NCPD)
National Development Planning Commission (NDPC)
National Disaster Management Organization (NADMO)
National Health Insurance Authority (NHIA)
Single Window Citizen Engagement Service (SWCES)
United Nations Children's Fund (UNICEF)

Organisation
Foreign Commonwealth and Development Office (FCDO)
Inclusion Ghana
Social Protection Consultant/Specialist
United Nations High Commissioner for Refugees (UNHCR)
University of Ghana, Center for Social Policy Studies
World Bank (WB) Ghana
World Food Programme (WFP) Ghana

## **Limitations**

The assessment approach has the following limitations:

- We were only able to include a limited number of respondents at the regional level. While the selected regions enabled us to capture different types of shocks and social protection responses within Ghana, the limited number of respondents per region creates some concerns about the ability to reach saturation. We mitigated this by triangulating with the online survey and desk review whenever possible. Further, the validation workshop is an opportunity to get additional perspectives on the main findings of the various modules of the Assessment Tool.
- While the online survey was an innovative way to collect additional information about the Assessment Tool, using online surveys comes with some limitations. First, the small sample size does not allow for statistical inference for a broader population. Instead, the interpretation of the results aimed to complement the data from the qualitative interviews which were conducted among the same sampling frame. Second, the AIR team had less control over the response and completion rate of the survey. Due to consistent virtual and in-person reminders the team managed to mitigate the non-response rate to 21%.
- Due to time constraints and availability of data, we were not able to apply the three assessment tools in their entirety. For the UNICEF tool, there were some portions of modules that we were not able to fully address (such as the capacity assessment of agencies involved with shock responsive social protection). In addition, our ability to answer some of the more complex questions in the Programme Design module (such as whether the targeting criteria are effective to meet the programme's stated objectives) depended on existing evaluations and reports. In addition, inclusion of the WFP tool was a later suggestion, and we were unable to fully incorporate it within the scope of the current project. We identified key areas of the WFP tool that were not included in the other two tools, such as school feeding programmes, to incorporate in the research instruments. Nonetheless, the AIR team was still able to provide an overall assessment of shock responsiveness based on the completed items in the tools.

## **Ghanaian Context:**

Ghana is a middle-income country with one of the world's fastest growing economies (World Bank, 2022). However, nearly one quarter of the population, 23 percent in 2017 and more than 28 percent of children still live below the monetary poverty line and 73 percent are multidimensionally poor (UNICEF, 2016; World Bank, 2016; National Development Planning Commission, 2020). Women also face economic disadvantages, as they are much more likely to be poor (time and financially) and less likely to own land than men (OXFAM, 2022). According to the Understanding Vulnerability and Exclusion in Ghana report, gender is a key driver of vulnerability to shocks due to their disproportionate role in child rearing, their financial reliance on their husbands, and general discrimination (MoGCSP, 2012). Different demographics of women face different types and intensities of disadvantages. Young women/adolescent girls face the prospect of early marriages and/or pregnancies and older women generally have lower incomes and assets from the lifelong discrimination they face (Kuss, 2023).

These disparities have been exacerbated by regional, national, and international shocks. Ghana is rated "high" for several climate-related shocks, including extreme heat, water scarcity, and urban, river, and coast flooding (GFDRR, 2020). Flooding in the north of Ghana (International

Federation of Red Cross and Red Crescent Societies, 2019), possible spillover from the ongoing turmoil in Burkina Faso and Mali (World Food Programme, 2020; UNICEF, 2022), mining disasters in the west of Ghana, and unfavorable weather conditions along its southern coast, among other disasters have exposed the inadequacies in the nation's social protection capabilities and response to disasters (UNICEF 2022). The shocks, along with the COVID-19 pandemic and rise in food and energy prices, have hit the poorest Ghanaians the hardest (UNICEF, 2022). This study focused on the Upper East, Western, and Greater Accra regions, with the understanding that all of Ghana is vulnerable to a variety of shocks. By focusing on these three regions, each of which has unique vulnerabilities, we hope to generate findings that are relevant to stakeholders in all of Ghana.

The most vulnerable populations to shocks are mostly in the northern regions, where wealth inequality, food insecurity, and financial struggles are the highest in the nation, population density is lower, access to quality health care and transport is inadequate, the arid environment is susceptible to droughts, and educational attainment is lower (Ghana Statistical Service, 2015; UNICEF, 2016; Ghana Statistical Services, 2020; Ghana Statistical Service, 2022). For example, the Ghanaian regions with the two highest rates of multidimensional child poverty are Upper East and Northern (87% each) (NDPC, 2020). Ghanaians living in the Upper East region are extremely vulnerable to any exogenous shock due to their lower standard of living. According to a World Food Programme's 2021 Comprehensive Food Security and Vulnerability Analysis report, 18 percent of Ghana's food insecure live in the Upper East region – the highest proportion in the country.

The Western region of Ghana is prone to a number of climate-related shocks due to its coastal location. The area is at a comparatively high risk for flooding (see Figure 1) and coastal erosion (Coastal Resource Center, n.d.). The Western Region has also faced an increase in artisanal illicit mining, known as *galamsey*, which has had severe impacts on the environment and health of civilian communities (UN Ghana, 2018; Emmanuel, Jerry, & Dzigbodi, 2018; Owusu-Nimo et. al., 2018). It is estimated that 5-6 million Ghanaians (about 19% of the population) are dependent on these mines for their livelihoods (UNU-INRA, 2020). Unregulated mining processes have polluted crucial sources of clean water and destroyed essential crops in the region. Increased exposure to toxic minerals, such as mercury, has led to communities reporting significantly higher chronic diseases and health issues (Emmanuel, Jerry, & Dzigbodi, 2018; Owusu-Nimo et. al., 2018).

The Greater Accra region is less directly vulnerable to external shocks however, as the most populous region in Ghana, those who live there are at a considerable risk to shocks that hit the surrounding – more agriculturally productive – regions of Ghana and to shocks that affect the global trade system. For example, the Russia-Ukraine war led to increased petroleum and food prices (food inflation in Ghana was up 48% near the end of 2022) (Ghana News Online, 2023; Inveen & Akorlie, 2022). As Accra is the largest population center in Ghana, the increases in prices have an outsized effect there. Additionally, as shown in bottom maps in Figure 1, the number of people affected by drought is higher in the Greater Accra region than anywhere else even though most of the agricultural productivity does not take place there. Flooding is also another major shock that displaces many people in the Greater Accra region.

### **Ghana's Social Protection System:**

The GoG, development partners, and humanitarian agencies in the country currently implement several social protection programmes as a response to development needs, manmade and natural emergencies. Beginning in 2007, the National Social Protection Strategy was



implemented to help carry out this mission and streamline social protection efforts in the country (Abrebrese, 2014; MoGCSP, 2015). The strategy has led to the development of multiple flagship social protection and cash transfer programmes. The strategy was updated or revised in 2012. But a policy was developed and approved by Cabinet in 2015 to establish a firm, poverty-alleviating trajectory for the country's social protection (MOGCSP, 2015). A primary goal of the 2015 National Social Protection Policy is to promote the wellbeing of all Ghanaians through an inter-sectoral and integrated system of effective social assistance initiatives, including “income support, livelihoods empowerment, and improved systems of basic services” (MoGCSP, 2015). In 2022, GoG dedicated GH1.08 billion to social protection programs, including expenditure for five flagship programmes i.e. LEAP, GSFP, LIPW, NHIS, and the Education Capitation Grant (MOGCSP, 2022b). Additionally, in May 2023, the International Monetary Fund gave Ghana a 3-year, approximately USD \$3 billion loan in which one of the priorities is to support Ghana's social protection programs (IMF, 2023). One of Ghana's flagship social protection programmes, the Livelihood Empowerment Against Poverty (LEAP) programme, provides cash transfers to populations living in extreme poverty<sup>6</sup>, including vulnerable populations such as elderly people, persons with disabilities, households with orphans and vulnerable children (OVCs), pregnant women and mothers with young children below the age of one (UNICEF, 2022; Pouw & Bender, 2022). The evaluation of the programme found that household expenditures on food and productive livelihood activities increased among participants of the programme (UNC Chapel Hill, LEAP Endline Evaluation Report, 2017), a reduction in emotional, physical and combined intimate partner violence (Peterman, Valli & Palermo, 2022) and related studies found evidence for increased enrolment in health insurance (Palermo et al., 2019) and strengthened social support due to the programme (de Milliano et al., 2021). Since these evaluations, the LEAP programme has been adjusted in two ways. First and in line with national policy, LEAP aims to further strengthen linkages with other social services. The integrated social services (ISS) initiative has been piloted since 2021 and seeks to improve and align access between complementary services, such as social protection programmes, social welfare, community development and the Ghana Health Service and National Health Insurance (Government of Ghana, 2022). While it is too early to assess the impact of this new component the design is aligned with improving the integrated service provision for the most vulnerable. Second, previous evaluations indicated that the purchasing power of the LEAP transfer had declined over time. To address this the Government of Ghana has doubled the transfer size since January 2023. This meant, for example, that households with one eligible member received an increase from GHS 32 to GHS 64 per month, and households with four or more eligible members saw an increase from GHS 53 to GHS 106 per month. Additional efforts include the Ghana School Feeding Program, which aims to bolster school enrolment and reduce hunger among children. During the school year 2020/2021, the GSFP reached over 3.4 million children nationwide (Government of Ghana, 2023). Together, these programs focus on Ghana's poorest communities and cover about 15% of the population. While other programs exist, such as the Labour-Intensive Public Works (LIPW) initiative, the national health insurance coverage and productive inclusion components, the coverage still remains low and/or only provides a narrow set of services. Ghana is rated as “high” risk for its susceptibility to drought, flooding, and heat waves given the limited mitigation measures (Nxumalo & Raju, 2022) suggesting the continued need for enhanced social protection, especially for populations prone to shocks.

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<sup>6</sup> Poverty is measured by a proxy-means test for which the score is set between the extreme poverty and poverty line (Ghana LEAP Evaluation Team, 2018).

## **Governance:**

Ghana boasts a largely decentralized government with local districts charged with tackling the day-to-day issues of their constituents. Despite the decentralization, the central government has a lot of authority over the local governments by controlling a large portion of assembly member appointments and the distribution of funds (Debrah, 2014).

Ghana's national social protection programmes are managed differently depending on the type of social transfer and the implementation structure. Programmes are typically designed, managed, and directed at the national level and implemented by local stakeholders. LEAP specifically is moderately decentralized with local activities managed by the Regional Social Welfare Directors and implemented by District Social Welfare Officers, Community LEAP implementation Committees, and Community Focal Persons while national-level actors retain decision making responsibilities around design, direction, payment, and policies.

The GSFP is also moderately devolved in design and implementation. It is managed by the MoGCSP at the national level. The national-level GSFP Secretariat oversees project implementation and direction, but the actual implementation is carried out by regional, district, and municipality-level officials. The Municipality Implementation Committees have broad oversight responsibilities for all activities implemented within their region/locality.

## **2. Summary of Assessment Findings**

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This section presents the headline findings and main conclusions from each module of the system readiness assessment. The findings focus on the LEAP and GSFP programmes, both of which have been used to some extent to respond to shocks such as the COVID-19 pandemic and other emergencies, such as the “Black Wednesday” flood and explosion in Accra in 2015 and alleged “witch camps” in northern Ghana.<sup>7</sup> While there is a high degree of support for the programmes from government agencies and development partners, there are also challenges in its system and application in emergency contexts. Disruptions to coordination, funding issues, and a lack of a cohesive legal framework have made it difficult for actors to adapt social protections to adequately meet the needs of vulnerable populations in the face of shocks. Structures exist to help facilitate the issuance of cash transfers to a wider network of vulnerable beneficiaries, but these systems are not leveraged in the current operations framework. Opportunities for scaling cash assistance is also often stymied by limited and delayed access to contingency funds for emergency response. These challenges have made it difficult for key actors and programmes to effectively adapt or continue programming during emergencies.

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<sup>7</sup> Throughout the modules, we draw extensively on the COVID-19 emergency response since it is the largest, most recent emergency response from the GoG and therefore the best reflection of current emergency response systems (see Anyidoho et al., 2023). Further, since the assessment focuses on LEAP and GSFP, we focus on the past responses that leveraged those programmes. Though there are other cases of emergency response in Ghana, the leveraging of programmes such as LEAP and GSFP in response to these shocks has been inconsistent (Anyidoho et al., 2023).



## Module 1: Mapping of Social Protection Programmes

The mapping module delves into the risks associated with Ghana, the stakeholders affected, the social protection programmes responsible for responding to such risks, how they respond, and what they require to target participants.

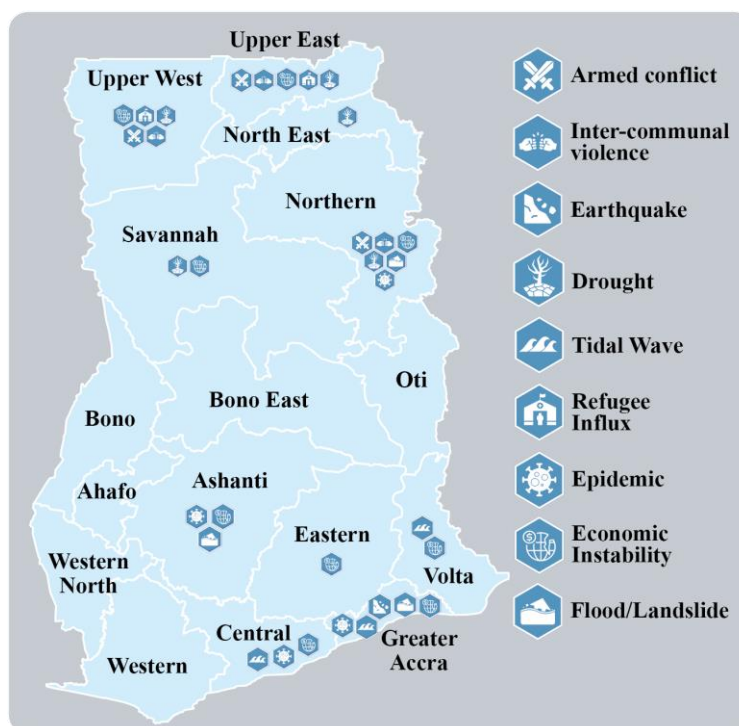
### Module 1 Key Takeaways

- A number of government and non-government organizations are involved in the design, coordination, and implementation of social protections and disaster risk management in Ghana.
- The Technical Working Group (TWG) members are especially active in the shock response and social protection space.
- Ghana is home to a number of flagship social protection programmes, of which the LEAP and Ghana School Feeding programmes provide services to a variety of beneficiaries across the country.
- GhIPSS is the primary financial service provider in the social protection landscape, and operates several systems—including the e-zwich and GhanaPay mobile money systems—to disburse payments to beneficiaries and local food procurers.

### Disaster risk:

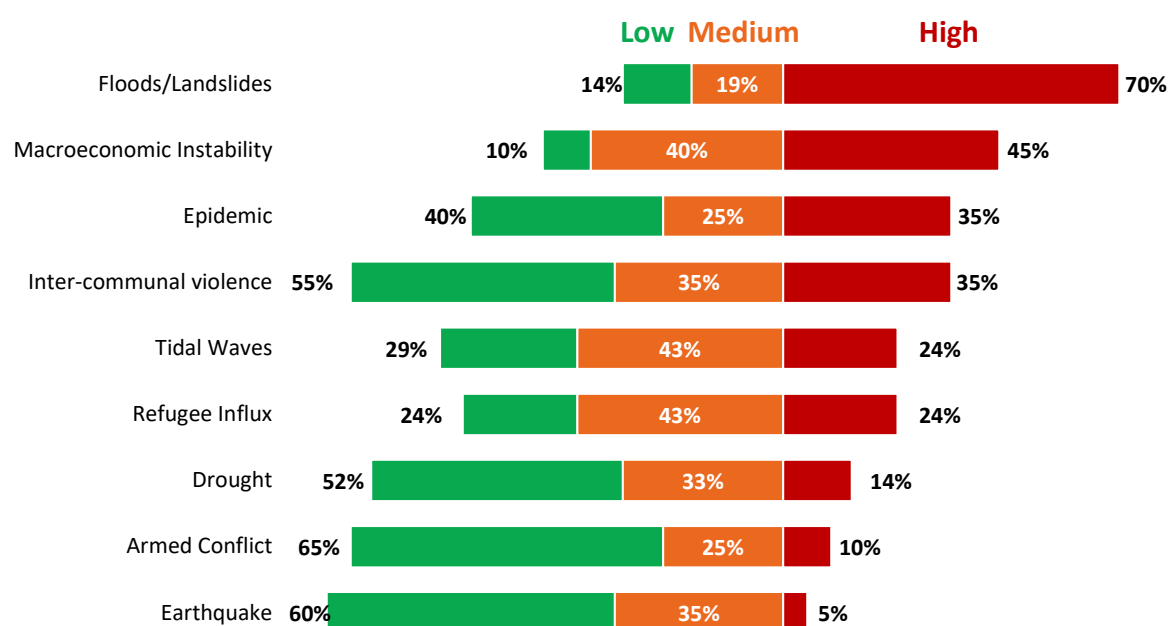
Ghana's Emergency Preparedness Plan (EPP) outlines three risks, i.e. floods/landslides, epidemic/pandemics and (inter-) communal violence and classifies the risk level as 'high'. The risks mentioned are consistent across other risk profiles (UNDRR & CIMA, 2019; GFDRR, 2020) and aligns with responses from key stakeholders in the online survey, which rank floods (70%), macroeconomic instability (45%), epidemic (35%) and inter-communal violence (35%) as the most likely to happen (*Figure 2*), and macroeconomic instability (59%), epidemic (59%) and floods/landslides (50%) as potential high impact risks (*Figure 3*). Overall, the latest World Risk Report ranks Ghana as 'low' risk (Bündnis Entwicklung Hilft, 2022)<sup>8</sup> using a holistic index which includes e.g. exposure, coping, susceptibility and adaptive capacity. Figure 1 above shows the geographical areas considered at most risk to shocks according to key informants.

Figure 1: Regional Risk Map

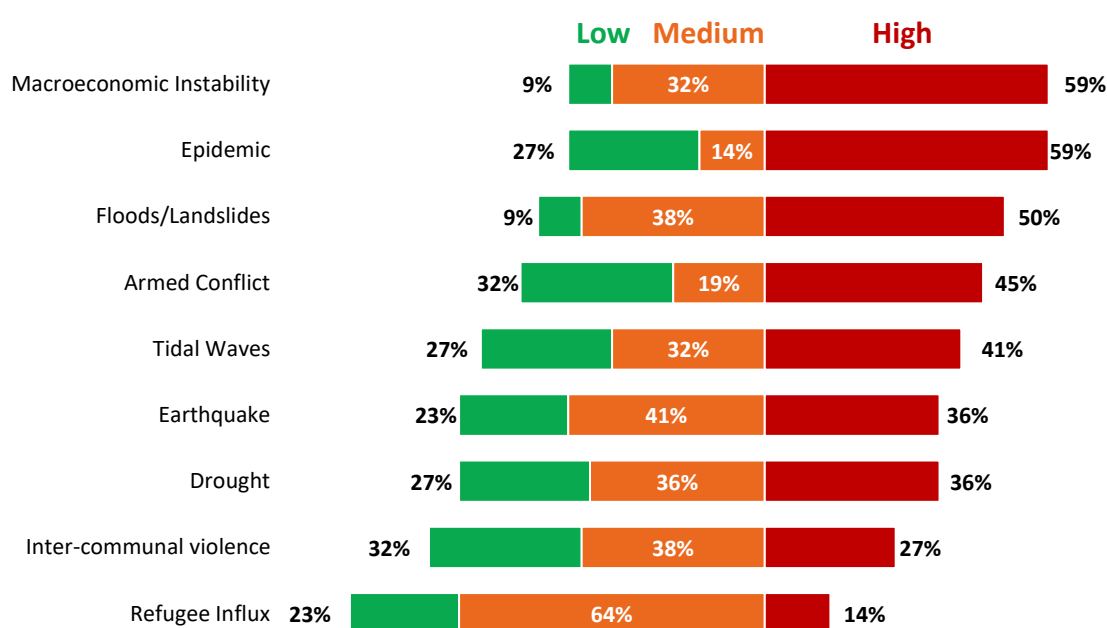


<sup>8</sup> Note that the World Risk Index underwent significant methodological changes, and previously Ghana was classified as a 'high' risk country (Bündnis Entwicklung Hilft, 2019, 2021).

**Figure 2. Key Stakeholders' Responses on Likelihood of Risks**



**Figure 3. Key Stakeholders' Responses on Impact of Risks**



### Mapping social protection programmes:

The selected social protection programmes for this assessment are LEAP and the GSFP.

Both the LEAP and GSFP are flagship social protection programmes in the country. The programmes are well-established (i.e. LEAP since 2008 and GSFP since 2005), have extensive geographical nationwide coverage (Government of Ghana, 2022; Hamel, R. 2018) (i.e. both are in all 261 districts) and a high proportion of coverage of the entire population (LEAP:

345,613 beneficiary households (resulting in 1.5 million individuals) in June 2023 (Ghana Business News, 2023); GSFP: 3.4 million children in the 2020/2021 school year and about 3.8 million for 2022/23 (Global Child Nutrition Foundation, 2021; Government of Ghana, 2023).

The GSFP provides one hot meal per day for school students from KG to Basic 6, encouraging parents to enrol their children in school, while simultaneously addressing food security, boosting agriculture by giving small-scale producers a market. A cost-benefit analysis of the programme (Dunaev & Corona, 2019) shows high economic value for the beneficiaries with every GHS 1 having a GHS3.3 return over the lifetime of the beneficiary (total cost per beneficiary is estimated at GHS 1,708.8 with a total GHS 5,630.40 discounted value to each beneficiary over their lifespan).

The Ghana LEAP programme is a cash transfer for extremely poor and vulnerable households with eligible members, including orphans and vulnerable children (OVCs), elderly persons, persons with severe disability and unable to work, pregnant women or mothers with a child below the age of one. As of June 2023, 345,613 households are included in LEAP with the majority of the recipients (56%) being female. Moreover, households with OVCs constitute the largest eligibility category (45%), followed by households with persons of 65 years and older (27%). The transfer size ranges from GHS 64 to 106 per month based on the number of eligible people in the household. The payments are made in cycles of two months resulting in payments between GHS 128 and GHS 212. The transfer value has recently been increased in June 2023 for the first time since 2015 to adjust for the loss in purchasing power. Aside from a cash payment, beneficiaries are provided with free health insurance through the National Health Insurance Scheme (NHIS). Existing linkages with another GPSNP initiative also allow for connections between LEAP communities and the labour-intensive public works programme. Lastly, more recently, under the integrated social services programme, the LEAP programme has further strengthened linkages with other social services such as social welfare (for child protection concerns) and GHS.

Apart from the programme's main objective of smoothening consumption, it aims to improve basic household consumption and nutrition, increase access to health care services and increase basic school enrollment among vulnerable populations and facilitate access to complementary services. An early impact evaluation of the programme (Handa et al., 2014) showed positive effects on increasing school enrollment for secondary school aged children and reducing absenteeism among primary school children, results on morbidity were mixed but there was a large increase in NHIS enrolment, no impacts on consumption, but households were happier and have strengthened social networks. The LEAP also had a positive economic spillover effect on the income of non-beneficiaries in the same community (Thome et al., 2013). A more recent evaluation on LEAP's component for pregnant women or women with a child below the age of one in 2018 showed that the LEAP had protective impacts on consumption and food spending while general trends showed a decrease in expenditure (UNICEF Office of Research, 2018, LEAP 1000 Programme: Endline Evaluation Report). Both impact evaluations happened prior to the recent increase in benefit size and the increase in purchasing power.

### **Mapping Social Protection and Disaster Response Stakeholders:**

Social protection and emergency preparedness and response involve a coalition of actors from ministries and agencies within the Ghana government, international development partners, and local NGOs who are collectively involved in the design, implementation, and coordination of

relevant initiatives. Here we outline stakeholders' roles in both social protection and emergency preparedness/response:

The MoGCSP takes the lead in directing and coordinating these programmes, ensuring their compliance with national policies and frameworks. The Department of Gender within the MoGCSP oversees gender-based initiatives, ensuring that social protection efforts, including cash-based programs, adhere to gender-inclusive policies and frameworks. Development partners such as UNICEF, the World Bank, the Foreign Commonwealth and Development Office (FCDO), and the WFP play crucial roles in assisting with program design, implementation, and coordination. These development partners also provide financial support, technical assistance, and monitoring and evaluation (M&E) aid to specific MoGCSP programmes.

Collaboration extends to other entities as well. The Ghana Health Service (GHS) works closely with the MoGCSP to integrate health and nutrition services into social protection programs. MLGDRD develops policies to bridge gaps identified in social protection assessments. The Ghana National Household Registry collects data across the country, advising the MoGCSP on policy directions related to data collection. The National Council on Persons with Disability (NCPD) ensures the inclusion and representation of persons with disabilities in social protection initiatives.

The Ministry of Finance (MoF) monitors government funding streams, including transfers to sub-national entities, while overseeing budgeting and finance aspects of social protection programs. Finally, the National Development Planning Commission (NDPC) supports the MoGCSP's Social Protection Directorate in the overall and intersectoral coordination of social protection initiatives.

The MoGCSP works closely with the National Disaster Management Organization (NADMO) to respond to shocks and coordinate emergency relief. NADMO plays the primary role in emergency response, with a key focus on relief support for those affected by disasters. The GMet serves as an important partner, providing early warning and near-real-time data to support emergency response efforts. Their close collaboration with NADMO ensures the timely delivery and validation of high-quality data. Additionally, the Department of Social Welfare and Community Development, works in collaboration with other agencies and data collection systems to provide support to vulnerable groups during emergencies, including women, children, the elderly, and persons with disabilities. These actors coordinate to respond to emergencies, mitigate the impact of disasters, and provide support to affected communities.

Both social protection and emergency response actors noted that integration of shock preparedness and rapid response post-shock were essential to adaptive social protections in the country. Some key social protection programmes, such as LEAP, do have contingencies to respond to emergencies or shocks. However, respondents noted that financial, legal, and operational obstacles made it difficult to mainstream shock response into the social protection framework. In other words, most respondents and actors recognize the need for integrating social protection (or disaster management) across the nexus but lack the resources to operationalize it.

### **Knowledge and attitude to SP and Shock Responsive Social Protection (SRSP):**

Categorically, there is a high level of government support and buy-in for social protection programmes across ministries. Cash and in-kind disbursement programmes that aim to alleviate

poverty, in particular LEAP and the GSFP, garner significant support and interest from a wide range of stakeholders. Almost all respondents highlighted that government ministries take on a strong leadership role in the social protection landscape. This is reflected in the national-level social protection policy and development strategy, as well as government financing of key social protection initiatives. Donors and development partners also typically play a supporting, but highly involved, role in the coordination and implementation of social protection. Though some stakeholders, such as Catholic Relief Services and UNHCR, conduct their own cash transfer programmes, these programmes are typically well-integrated into ministry sector frameworks and involve a high degree of collaboration with national or regional government agencies.

The GoG has experience scaling social protections to respond to shocks and emergencies. In the aftermath of COVID-19, the GoG worked with UNICEF Ghana and the World Bank to expand the LEAP programme both vertically and horizontally. In other words, GoG not only increased the LEAP payment amount to existing beneficiaries who had been impacted by the pandemic, but also expanded payments to new beneficiaries who were most vulnerable to shocks and exclusion—including women living in “witch camps,” homeless individuals, porters, persons with disabilities, and extremely poor individuals (UNICEF, 2021). To adapt to the context, the GoG also implemented alternative payment delivery methods which included accessing cash disbursements in banks (instead of collection points) for existing beneficiaries, and using mobile money for temporary or newly enrolled beneficiaries (UNICEF, 2021).

While the GoG has previously provided cash assistance during emergencies, social protection experts and government agencies noted that government interest and experience in leading cash-based emergency response initiatives remains low. Though minor improvements were made through recently allocated targeted cash payments with LEAP and COVID-19 pandemic stimulus payments, government respondents said these initiatives faced challenges that rendered them less effective:

*But in terms of backing the policies with the needed tools for their implementation, the level of support is quite poor. The amount or funds allocated for the programmes are very inadequate for the desired purposes and the delivery or releases of the amount are also not timely. There are a lot of delays in the release of the funds so by the time they reach the beneficiaries, they have basically lost their essence.*

Additionally, the government is less inclined to provide cash assistance and “prefers to supply items that cannot be diverted and misused” in emergency situations, as one government respondent reported. As such, respondents noted that the government does not prioritize or adequately finance emergency cash transfers, despite significant support and interest in its potential for disaster relief and management. Donor-led programmes, on the other hand, reportedly have more flexibility and experience to rapidly respond to crises and provide cash assistance in emergencies.

### **Mapping Financial service providers (FSPs):**

According to respondents, government-led social protection programmes use GhIPSS as the primary financial service provider. GhIPSS is a wholly owned subsidiary of the Bank of Ghana and manages both banks and non-bank financial institutions in the country. GhIPSS operates several systems, of which the National Switch and Biometric Smart Card Payment System,



also known as e-zwich, is used to transfer funds for both LEAP and the GSFP. Key programme representatives and development partners stated that GhIPSS releases funds to its vast network of rural banks and individual GhIPSS agents to access hard-to-reach areas and populations. These banks and agents act as the pay-out points for beneficiaries or food caterers who use their e-zwich cards to access the funds. E-zwich cards function similarly to a debit card and can reportedly be used across GhIPSS financial institutions.

While respondents generally noted that GhIPSS's e-zwich is an effective system for cash transfers, it is unclear how adaptable it is to both shocks and the needs of specific vulnerable populations. For example, one programme representative reported that the current e-zwich "process of enrolment and payment may be laborious" possibly leading to delays of assistance during shocks. The requirements for enrolment and registering an e-zwich account—which reportedly involves simple fingerprinting of beneficiaries—are straightforward, but respondents reported accessing sites to register were more challenging. Additionally, accessing pay-out sites and funds were reportedly difficult for vulnerable beneficiaries, particularly in remote and hard to reach areas. However, respondents said that when GhIPSS scaled its services during the pandemic, it utilized its mobile money system—GhanaPay—to disburse payments to new beneficiaries. The GhIPSS's mobile money platform was seen as being much more efficient and wide-reaching than the e-zwich system. As such, though GhIPSS is the primary financial service provider within the social protection landscape, it has different modes and systems of payment that direct the methods of cash disbursement and implementation of cash transfers.

Respondents reported other stakeholders and programmes, such as the UN-led cash transfer programme for refugees in Ghana, use mobile money systems to support cash transfers. Though respondents did not specify whether these payment systems were through the GhIPSS or through other mobile money providers (MTN, AirtelTigo, and Vodafone), they were widely impressed with the easy and efficiency of cash disbursements using mobile money.

Given the level of mobile penetration in the country, as well as the increasing use of mobile money instead of cash, utilizing mobile systems may provide an opportunity to scale-up cash assistance during shocks. However, all telecommunication companies in Ghana are currently required to collect Ghana Cards from customers before registering. Given that vulnerable populations are less likely to have access to Ghana Cards this could be a major barrier to using mobile money for disbursements.

### **Personal ID:**

The main recognised forms of ID in the country are the Ghana Card (national identification card), passports and driver's license. To open a bank account or access financial services additional proof of residence is also required. For programs such as the LEAP identity of the household members also needs to be established. Besides aforementioned ID forms, LEAP also accepts identification that is based on personal ID information such as voter's ID or NHIS cards for the household head and immunisation cards or birth certificates for eligible children.

According to the National Identification Authority (NIA), as of March 2023, 17,385,548 people are registered, of which 16,111,846 (around 48% of total population) have been issued Ghana Cards. Vulnerable populations are at higher risk of missing personal ID, however the NIA did not have information publicly available on the breakdown by sub-populations. While there is no data available in Ghana, there is evidence from other countries that show women are less likely to possess important IDs like the Ghana Card (O'Donnell, 2016; World Bank, 2019).

**Key conclusions:**

A number of government and non-government actors are involved in the design, coordination, and implementation of social protection programmes. Key flagship programmes, such as LEAP and the GSFP provide assistance to a high number of vulnerable beneficiaries in the country. Both programmes utilize GhIPSS to disburse cash payments to beneficiaries and to the food caterers who prepare the school meals. While the GhIPSS e-zwich system is generally successful, there are gaps in its implementation and accessibility. GhIPSS and other mobile money systems are seen as more efficient, however, ID requirements for registering an account can exclude vulnerable populations, particularly refugees, displaced individuals, individuals with disabilities, and individuals in hard-to-reach areas.

## Module 2: Data and Evidence

### *Module 2 Key Takeaways*

- There is a strong correlation between multidimensional poverty and vulnerability to shocks in the country.
- Populations that are vulnerable to shocks and exclusion include: women, children, the elderly, informal workers (including Kayayei and Galamsey workers), low-income individuals, persons with disabilities, displaced individuals, and individuals living in rural areas.
- Ghana is home to a small population of refugees, of which many have legal residency. Refugees with legal residency have access to basic services and almost all social protection schemes in the country.
- Refugees are not beneficiaries of the LEAP programme but receive cash assistance from other donor-led initiatives.
- Linkages to other sector programmes and systems, such as the NHIA and CHPS could be leveraged in emergencies to reach those affected by disasters including IDPs and refugees.

### **Evidence on poverty and vulnerability to disasters:**

Poverty has decreased substantially over the past few decades, but people living in poor households are still at higher risk of being vulnerable and excluded in economic, social and political areas.

According to the latest statistics 23.4% of the population were living below the national poverty line in 2016, which is equal to about 6.6 million people down from 24.2% in 2012/13, 31.9% in 2005/06, and 43.9% in 1998/1999 (World Bank, 2019). Extreme poverty is 8.2% in 2016/17 (GLSS, 2018). Poverty profiles indicate that the poverty headcount rate is considerably higher in rural areas compared to urban (37.9% versus 10.6%) and the Northern Region, Upper West, Upper East are the most deprived (Cooke, Hague, McKay, 2016). Multidimensional child poverty is high in Ghana with 73.4% of children below the age of 17 being deprived in at least 3 dimensions. Multidimensional child poverty is most prevalent in the Northern (now Northern, Savannah and North-East), Upper East and Volta (now Volta and Oti) regions, showing some similarity with the geographical concentration of monetary poverty. The multidimensional child poverty rates are driven by deprivation in e.g. sanitation, dietary diversity for younger children and educational attainment for older children. Children living in larger households or households with a mother or household head with no or lower education have a higher probability to be multidimensionally poor.

Multidimensional and monetary poverty are key drivers of vulnerability and risk of exclusion in economic, social and political environments, making people living in poverty susceptible to be highly affected by shocks. Research on vulnerability in Ghana from 2022 indicated that girls and women, especially orphans, elderly and those who work as kayayei (female porters) or work in galamsey (illegal mining), low-income individuals, people living with a disability, pastoralist communities (i.e. Fulani), internal migrant workers, people from Nigerian or Yoruba descent, people living in areas without public services are the most vulnerable and are at high risk of exclusion (ODI, 2022).

### **Refugees and IDPs:**



Ghana has a relatively small population of refugees and displaced individuals, with varying numbers across different regions. As of 2023, the UNHCR reported 9,862 refugees and asylum seekers in Ghana. The majority of refugees in the country are migrants who have fled conflict in Burkina Faso and sought refuge in the Upper East Region of Ghana. While the precise number of internally displaced persons (IDPs) is unknown, the displacement of local residents within Ghana is considerably higher than migrants and refugees. According to data from the 2021 Housing Census and the Internal Displacement Monitor, there were approximately 17,000 displacements in Ghana between 2020 and 2022, primarily due to conflict and natural disasters. Over 60% of IDPs have been displaced for five years or more, with a concentration in the Greater Accra, Northern, Ashanti, and Central Regions. IDPs are dispersed throughout the country, and their numbers tend to fluctuate, particularly during certain seasons such as the rainy season when incidents of flooding occur. A recent example is the Apiate disaster, which displaced roughly 50,000 Ghanaians.

The Department of Social Welfare collaborates closely with the UNHCR and WFP to establish shelters for the growing number of IDPs and refugees. The Ghana Refugee Board also plays a role in providing assistance and coordinating temporary camps or shelters for displaced populations across the country.

Although Ghana has not yet ratified the Kampala Convention, agencies involved in refugee and IDP affairs reported that they adhere to its guidelines for supporting displaced communities. This includes ensuring access to essential services such as healthcare, education, food security, protection from gender-based violence, and relief assistance programs. Respondents have indicated that refugees are not excluded from social protection systems in Ghana, as the law stipulates that all Ghanaians and legal residents, which includes registered refugees, are eligible for enrollment in these programs. Approximately 70% of refugees and IDPs have access to basic services in the country, including psychosocial support. The National Health Insurance Scheme (NHIS) works in coordination with local IDP and refugee camps to ensure their enrollment in the health insurance scheme and subsequent support services. However, it is important to note that refugees are not eligible for or enrolled in the Livelihood Empowerment Against Poverty (LEAP) program, but instead receive cash assistance through an independent program managed by the UNHCR.

### **Sector linkages:**

A key component to Ghana's social protection programmes is its long-term poverty alleviation strategy for the country's most vulnerable populations. However, social protection programmes, such as the GSFP, have not typically been leveraged to continue or expand during shocks. Though LEAP has previously scaled its operations, increasing payment amounts and expanding the programme's reach, during the COVID-19 pandemic, it did so in the absence of a comprehensive shock-response strategy. Respondents noted that for LEAP, in particular, the limited programme budget and eligibility criteria often exclude crucial populations in need of assistance. As such, respondents identified the need to integrate cross-sector programmes and systems that could be leveraged to support cash transfers to reach vulnerable populations in emergencies.

A central theme within sector linkages was the ability to adapt existing systems to shock contexts. Respondents highlighted that programmes and systems within education, health, nutrition, and protection or cash transfer programming could be scaled or utilized by LEAP, the GSFP, and disaster response in general to reach a wider population more effectively.

Regarding education, a government agency respondent noted that, previously, cash transfers had been infused with the Secondary Education Improvement Programme (SEIP) to support vulnerable high school students continue education. Though cash transfers were used during “peacetime” the representative respondent noted that “once something like this has been done before, it shouldn’t be difficult to implement it in emergencies,” particularly when such programmes have internal databases to track beneficiaries. Systems such as the SEIP could thus be utilized to reach students who may be vulnerable to dropping out or not continuing education during emergencies.

Respondents generally felt that utilizing their existing networks for identifying vulnerable populations in times of shock would best support cash programming in emergencies. According to a government health representative, programmes such as the Community Health Planning Services (CHPS), that is not currently integrated into social protection programmes, has more access to hard-to-reach populations and could facilitate social transfers:

*However, I think we need to strengthen those links by liaising with these stakeholders through our CHPS programme to link, that is, identify and refer vulnerable people to care because we have a wider coverage in terms of access to people. We have presence in about 120 districts and virtually every community in the country through our CHPS programme but most of these stakeholders only have access at the districts.*

Two separate government agencies also noted that, while distributing cash to beneficiaries through the NHIA would not likely be effective, cash transfers could be sent to NHIA and health providers in disaster-stricken areas so that they could provide free healthcare to affected populations. The NHIA also supports a larger number of beneficiaries than the LEAP or GSFP and, like the CHPS, could be used as a database to reach beneficiaries during shocks. Utilizing systems like the CHPS and the NHIA will subsequently allow emergency transfers to target vulnerable populations, such as pregnant and breastfeeding women, individuals with disabilities, and food insecure households. Moreover, a significant number of refugees are already registered within the NHIS system, allowing programmes to further access networks of potential beneficiaries.

Finally, government representatives and development partners highlighted that social protection programmes could coordinate with “telcos” mobile money providers to quickly disburse cash payments in emergencies. UNHCR’s cash transfer for refugee programme provides a model for disbursing cash to targeted vulnerable populations during emergencies.

## **Conclusions:**

There is a strong correlation between multidimensional poverty and vulnerability to shocks. These populations, which largely include women, children, the elderly, informal workers, low-income individuals, persons with disabilities, displaced individuals, and individuals living in rural areas are also more likely to face exclusion and thus be less resilient in the face of shocks. Though LEAP and the GSFP serve a significant number of households living in poverty, existing systems in other sectors can be leveraged to increase coverage during shocks. Systems such as the NHIA and CHPS in particular could help horizontally expand programmes to reach shock-affected populations, including refugees and IDPs.

## Module 3: Readiness of Policy, Legislation and Finance

### Module 3 Key Takeaways

*Existing policies, legislation, and financing plans have a low to moderate level of readiness for coordinating and backing shock-responsive social protections.*

### Challenges

- Existing policies and legal frameworks do not adequately guide social protection and emergency response initiatives
- Minor and contingency funds allocated in the budget for shock response make it difficult for relevant agencies to properly provide relief during disasters
- Coordination between government agencies (intra-government coordination) is often challenging and decision-making is often siloed within working groups and committees.

### Successes

- The Ghana Meteorological Agency (GMet) operates a widely praised early warning system for specific risks and disasters
- Collaboration between government agencies and development partners is strong
- The newly proposed Social Protection Bill may provide some legal support for SRSP and allow government agencies to better coordinate with one another

### Legal and policy context for SP in emergencies:

Basic legal and regulatory frameworks exist to help guide social protection efforts in the country. Nevertheless, these frameworks do not encompass emergency response and are typically narrow in scope, implementation, or even enforcement at the national and ministry level. Regarding legal frameworks, the Ghana Constitution (1992) contains provisions that require the government to provide social protection to vulnerable populations in the country (Kaltenborn et al., 2017). These provisions, however, are said to only “guide” institutions in their design and implementation of social protection programmes, not enforce them (Kaltenborn et al., 2017). Requirements for providing social protection can also be circumvented if the state does not have adequate resources to fund it. Additionally, there are no formal legal structures to support many of the social protection programmes in the country (with the exception of the NHIS and the National Pension). This means, according to government agencies and social protection experts, operating programmes such as LEAP and GSFP are based on their own programme policy frameworks with no formal, legal backing.

There are existing policy frameworks that aim to guide social protection and emergency response, but these policies and frameworks are not well-coordinated or obligated to relevant agencies in shock-responsive social protections. For example, Ghana has implemented the National Social Protection Policy (NSPP) and the NADMO Act, which both outline clear guidelines and goals of each agency (MoGCSP and NADMO), but it does not include a strategy for emergency social protections, disaster risk management, and coordination of emergency relief efforts. Government agencies, including NADMO, said that the lack of a clear, cohesive legal framework made it difficult for them to comply with international standards and frameworks for emergency response:

*NADMO for instance needed to have had by now a National Disaster Management Strategy, but we don't have. We are currently working towards*

*that with the support of the UN agencies but we don't have one yet. So we need an action plan that works and we don't have it. It's a requirement under the Sendai Framework. It's a global framework for disaster risk reduction and countries that are signatories are required to have a National Disaster Management Strategy and not the ad hoc response strategy we employ currently.*

As such, according to respondents, there are no current existing policies that adequately guide social protection and emergency preparedness/response initiatives. However, NADMO and the MoGCSP, along with their partners, are working towards formalizing shock-responsive social protection frameworks and policies into law. Most notably, key stakeholders have drafted and are pushing to enact the new Social Protection Bill which, according to the Social Protection Directorate, aims to: provide efficient and effective social assistance to reduce poverty; streamline structures to support implementation of interventions that “can help people exit poverty and guarantee them with sustainable alternative income opportunities”; and promotes social security initiatives. Respondents noted that the bill, which is expected to be passed in 2023, will also offer legal backing to support plans for providing social protections, particularly cash-transfers, during emergencies. When and if the Bill passes, it will create formal opportunities to fund shock-responsive social protection:

*The Social Protection Bill needs to be passed as the first step to give social protection activities a much more authority and legal basis. This would also help mobilize funds for social protection and emergency social protection, because it will enable government to budget for social protection and make funds available.- Gender and Social Protection Expert, University of Ghana*

Nevertheless, some government respondents also felt that the pending Social Protection Bill was not sufficient and would need other supporting frameworks to ensure emergency response initiatives are adequately funded and implemented across the nexus:

*The legal and regulatory environment is not sufficient and that explains why NADMO is looking at their own laws to strengthen them. There are issues of the contingency funds, the disaster funds and the implementation. They also need a Legislative Instrument (LI) and this clearly shows that they have no adequate legal and regulatory framework backing their operations.*

According to key agencies in disaster management, the integration and implementation of these frameworks would markedly improve the ability for disaster management and social protection organizations to scale-up their services during emergencies.

### **Early Warning System:**

GMet and NADMO work together to formulate a functioning EWS for the country. According to the GMet, their system provides “forecasts on weather patterns in the country and forewarns of impending disasters likely to be occasioned by the weather such as droughts, floods, storms, etc.” Outside of supporting emergency response, GMet uses several systems to share early warning data to the general public, including the “My Flood Risk Accra” app and the Common Alerting Protocol (CAP). The flood risk app, as stipulated, provides early warning and real-time alerts on floods within the Greater Accra Region. The flood risk app is currently a pilot programme GMet has implemented in a high flood-risk zone, but they eventually hope to expand the app to other regions within the country. AIR was not able to collect data on whether the GMet flood risk app incorporates gender- or disability- related risks into its measurement

and early warning system. AIR could not capture whether gender- and disability- sensitive messaging was used when GMet disseminates its warnings, however, GMet uses a comprehensive dissemination system that likely targets vulnerable populations. The CAP system allows GMet to have instant access to all radio and tv stations within the nation to announce sudden expected shocks. This efficiently allows them to provide early warning information to regions and districts and help them prepare their emergency and protection response.

GMet feeds early warning data to NADMO who then utilize their internal systems to promulgate that information to relevant ministries, government agencies, and response organizations. According to a government representative, once the GMet data is validated to the extent possible, NADMO then coordinates with local police, the Ghana army, and other disaster management organizations to “stand by” for response efforts. NADMO also uses the CAP and similar systems to alert relevant radio and tv stations of potential shocks.

Regarding how well the Early Warning System (EWS) functions, most respondents said that though limited in scope the GMet’s EWS is well developed and implemented. As one government representative said: “These are systems that have been in existence for years and are tried and tested. They’ve proven reliable on a lot of occasions.” GMet’s systems are also effective for targeted warnings and seasonable preparedness. A respondent familiar with GMet’s EWS, highlighted that the GMet’s draught tracking system helps inform farmers of “dry spells” to help them cultivate essential crops and “ensure continuous supply of food for the nation.”

Though the GMet has done well to provide EWS and triggers in the country, respondents said the organization needs further support and coordination from stakeholders to scale-up the EWS; enabling it to cover more shocks and help integrate it into the emergency response plan:

*We should have indicators and a contingency plan, and we should harmonize and coordinate our data to support response actions during emergencies. In times of disaster, some government agencies need to give signals like Meteorological services is doing on flooding. But we require a holistic approach to dealing with early warning in the country. –*

Respondents highlighted that NADMO should develop a more comprehensive management, coordination, and dissemination plan to support GMet reach relevant stakeholders and government ministries to prepare for shocks.

### **Institutional arrangements/coordination for social protection, emergency preparedness and response:**

In Ghana, a number of coordination structures exist for social transfers and emergency response. The National Disaster Management Organization (NADMO) is the primary government agency tasked with coordinating emergency preparedness and response in Ghana. Its central mandate is to build resilience in communities for disaster risk reduction. NADMO is a coalition of key ministry, regional, and civil society representatives that formulate Disaster Management and technical committees. At the regional level, NADMO committees comprise District Chief Executives (DCEs) and representatives from key ministries and agencies such as the MoGCSP, Department of Social Welfare, local government authorities, and the police, among others. These committees are responsible for attending to disasters that occur within their respective districts and report disaster events to the regional level. The regional



committee, in turn, reports to the national level ensuring a flow of information and coordination throughout the system. This information sharing network triggers national-level disaster and emergency response.

NADMO works closely with other ministries, such as the MoGCSP, and development partners to coordinate response and relief efforts across sectors. Various committees and working groups involving these actors, including the Inter-Agency Working Group for Emergencies (IAWGE), are in place to facilitate coordinated emergency response. Disaster management committees, social protection working groups, and cash and grant groups (within the Social Protection Intersectoral Working Committee) operate to address different aspects of emergency and relief efforts. These structures also involve key infrastructure groups such as banks, social welfare officers, financial service providers, and national data collection partners.

Coordination with government agencies and external stakeholders was widely praised by respondents. Ministry and government agency representatives typically noted that development partners, such as the FCDO, the WB, WFP, and UNICEF were strategically impactful within social protection programmes and emergency response tactics. Development partners and NGOs were crucial in providing emergency relief in local shocks, such as the western regional Apiaite disaster, and provided long-term support during the COVID-19 pandemic.

On the other hand, while coordination between government ministries/agencies, particularly NADMO and the MoGCSP, were generally acknowledged, respondents also reported there are key challenges for facilitating emergency relief and response. Coordination within the government is stymied, with social protection agencies and emergency response units often working independently or “in silos” as one government representative said. Respondents also reported that there was limited inclusion of stakeholders during the response efforts, and a lack of coordination and response from key DRM agencies.

Structures for coordination and leadership exist including the Social Protection Steering Committee and the Social Protection Sector Working Group, but respondents said these coordination structures have limited influence and effectiveness during emergencies:

*The partners are not speaking to each other enough. From the experience that we got from COVID-19 pandemic, there should be better coordination and leadership. In the Local Government Act (ACT 936) there is provision for coordination among partners and concrete provisions for emergency preparedness. But this has never been implemented. There is a Social Protection Steering Committee, but its influence is not felt. There is a Social Protection Sector Working Group that brings together donors and people with technical experience such as researchers. The structures are available but not sufficient when it comes to emergencies, preparedness, and response.*

Other respondents supported this by indicating that emergency steering committees do not efficiently discuss appropriate means of assistance before providing relief (such as vouchers, food items, or cash transfers). Government representatives recognized that the lack of coordination likely stems from operating without a formal national emergency response strategy and legal framework:

*It's poor. The primary purpose of disaster management is to have an agile response and the only way this can be achieved is when the actors involved in the landscape are well coordinated in peacetime... Disaster management should*

*be seen as a critical need in our national development and not be given ad hoc responses as pertains now. There is currently no Disaster Management Strategy so we undertake ad hoc responses to disasters and since there is no document specifying the role of each agency, the various agencies, and Ministries act as they please.*

However, as previously mentioned, supporting frameworks will have to be implemented to help bridge the gaps in coordination between government agencies.

### **Financing disaster response and SP:**

According to key stakeholders, government financing of emergency preparedness and response is not sufficient or protected. A recent Fiscal Space Analysis on social protection financing in Ghana (Government of Ghana, 2020) highlighted that government spending on social protections is under its development target, and far below similarly situated countries. The report highlights that the allocated budget for social protections does not meet the needs to scale programmes according to the NSPP and Ghana’s development strategy, and more fiscal space is needed in the SP landscape to address emerging needs—including emergency preparedness and response.

Currently, the GoG primarily sources from internal revenues, loans and credits from the international community, and revenues from the treasury bill to fund emergency response. There are minor funds allocated in the budget for small shocks and disasters but are not equipped to deal with larger shocks. As one government representative reported, this has made it difficult for the government and relevant social protection or DRM agencies to effectively provide services to vulnerable populations in times of crisis:

*So if the emergency is of a high magnitude, then we do not have the financial capacity to handle it but if it is on a small scale, then we are financially prepared to handle it. An example is the covid-19 pandemic, we basically had to fall on the international community to help us because we do not have the financial resilience and therefore were not financially prepared to handle that kind of emergency.*

For larger shocks that require more financing, the government uses a “contingency voting” system in which a contingency fund is earmarked in the national budget for shock response and disaster management. Government agencies can request these funds, which is then taken to a vote in parliament. However, these funds and systems rarely exist:

*However, in situations where the budgetary allocations prove insufficient for the emergency being handled, they request for more funds from the MoF and we supplement the funds released to them from the contingency funds or contingency vote as pertains now. We’re supposed to have a contingency fund, which is funds approved by Parliament for emergency but for a long time, we haven’t had any so we fall on the contingency vote (budget).*

Key government representatives said organizations and relief efforts often face challenges to accessing these contingency funds. For example, organizations are forced to go through a rigorous administrative process in order to access (or release) funds that were initially allocated for other programmes/purposes:

*We have a very disciplined public financial management systems, so we stick to the budgets we have made. When an amount is earmarked for one thing in our budget, changing the purpose of that allocation to use it for another purpose requires a rigorous process including seeking Parliamentary approval in most cases... So once the money has been appropriated and earmarked for a specific purpose, re-appropriating it and using it for another programme, even in the case of emergency, has to go through a number of processes.*

Respondents did not provide further details on how the contingency funds were accessed or utilized over the past years.

The government may also be less inclined to finance disaster response given current debt and taxation issues, which were exacerbated by COVID-19 (UNICEF, 2022). Respondents highlighted that while the GoG is interested in supporting and financing disaster response, they are cautious to do so given the current challenges in servicing their debts. Additionally, the GoG was reportedly “not in favour” of the proposed method of financing social protection with levies (such as they do with the NHIS) because of existing taxes for social assistance initiatives. Nevertheless, though typically reported as insufficient amounts, respondents recognized that the government is the primary donor and financer of social protection programmes in the country. According to a government respondent, funds within the national budget are earmarked for flagship social protection programmes such as LEAP and the GSFP. The amount allocated for social protection programmes varies by year; the MoF estimated that roughly GH¢ 300,000,000 was appropriated to LEAP and GH¢1,000,000,000 was appropriated to the GSFP in 2023. However, the amount allocated does not always lead to the amount disbursed. In 2021, LEAP received only 48% of the promised funds from the Government (UNICEF 2022). A ministry representative highlighted that government financing of programmes could offer a solution to scaling-up services and funding of emergency response efforts:

*Government funds for social protection interventions in times of emergencies is very little. So what we have done is to setup contingency funds for the projects during shocks and emergencies. For example, a programme like the Productive Safety Net had a contingency funds for shocks but that does not cover all programmes.*

Because programme funds are built-into the national budget, this could provide an alternative to ensuring emergency relief efforts are appropriately financed. However, national contingency funds for emergency and relief efforts should be protected in the budget to ensure that these programmes and stakeholders are adequately supported when responding to shocks.

## **Conclusions:**

In summary, the possibility of coordinating between social protection and disaster management programming exists but would require a clear legal and policy framework to guide actors in their efforts. The lack of a comprehensive disaster response strategy and framework for coordination makes it difficult for the MoGCSP and NADMO to work alongside one another and adapt interventions. Government financing of emergency response efforts also poses issues for scaling-up social protection and cash-based interventions during shocks. Though NADMO and the MoGCSP are currently heading efforts to enshrine such policies into Ghana law, it will require buy-in and financial support from the GoG to ensure efficient and effective implementation of shock-responsive social protection.



## Module 4.1: Readiness of Programme Design - LEAP

### Module 4.1 Key Takeaways

*LEAP's programme design has a moderate level of readiness for shock responsiveness*

#### Strengths

- LEAP's use of Proxy Means Testing is effective in targeting the poorest populations.
- LEAP was successfully leveraged to respond to previous shocks—most notably, the COVID-19 pandemic.

#### Challenges

- Inadequate targeting data and lack of contingency funding are challenges to rapidly expanding LEAP during shocks.
- Operational and coordination challenges with NHIS (such as low presence of NHIS in payment points and NHIS renewal issues) hinder potential synergies in shock response.
- There is a need to improve identification and targeting of vulnerabilities and strengthen gender-responsive linkages both during emergencies and in regular programming.

### Programme Objectives:

The main objective of LEAP is to empower the extremely poor population of Ghana to “leap” out of extreme poverty (MoGCSP, 2019). The LEAP programme seeks to use cash and access to Social Services as a catalyst to improve the welfare of the extreme poor and to foster long-term human capital development of the population. The programme also seeks to support the Government's HCTs by providing a delivery system for emergency cash transfers when the need arises. The broad objective of the LEAP Programme is to reduce poverty by smoothing consumption and promoting human capital development among extremely poor households. Specific objectives of the programme include:

- Improving basic household consumption and nutrition.
- Increasing access to health care services.
- Increasing basic school enrolment, attendance, and retention.
- Facilitating access to complementary services to improve welfare, livelihoods, and labour productivity, through linkages to the National Health Insurance Scheme (NHIS), the Ghana Health Services (GHS), the Ghana Education Services (GES), the Ghana School Feeding Programme (GSFP), and the Labour Intensive Public Works (LIPW).

### Targeting:

As explained by the LEAP Operations Manual (2019), LEAP periodically targets households living in extreme poverty based on data from the Ghana National Household Registry (GNHR).<sup>9</sup> First, there is a geographic selection of regions, districts, and communities with a large concentration of extremely poor, vulnerable, and excluded sections of the population. Once the geographic selection is finished, GNHR provides data on the characteristics of extremely poor households in each selected community using a standardised Proxy Means

<sup>9</sup> The GNHR is an example of a social registry, or an attempt to streamline and make more efficient the beneficiary identification process for social protection by avoiding duplicate data collection and using a common Proxy Means Test. Data collection started in the north of the country where poverty and vulnerability levels are the highest. Before the onset of the COVID-19 pandemic, GNHR had collected a census in the two northern regions of the Upper East and Upper West. GNHR data collection efforts are ongoing (Scott and Ammoun, 2021).

Testing (PMT) questionnaire. Additional categories of vulnerability previously played a role in the targeting process, including people aged 65 and above, people with disabilities, OVCs, and pregnant women and lactating mothers with babies under 1 year. It is important to note that while these categories of vulnerability are idiosyncratic (affecting individuals and households), they have implications for identifying groups that are particularly vulnerable to covariate shocks (those that affect a large part of the population, such as a natural disaster or pandemic). In other words, people in these categories will also be more vulnerable to large-scale shocks.

In some cases Community-Based Targeting complements the PMT assessment to ensure that people with disabilities and other socially excluded groups, such as vulnerable women, caregivers to OVCs, and elderly populations have the opportunity to be enrolled. After this, there is a community validation process in which the selected households are verified as eligible for LEAP. Consideration of groups directly affected by rapid-onset disasters seems to be indirect in the targeting, insofar as people over 65, people with disabilities, and OVCs living in extreme poverty are generally at greater vulnerability to disasters and shocks. Key informants noted that while the programme does not directly target women (beyond pregnant and lactating mothers), most of its beneficiaries were women given their disproportionate representation among the extremely poor households, and there was a recent addition to the targeting criteria of women living in alleged “witch camps.” In addition, the key respondents indicated that LEAP targeting does not include refugee populations because it is not within MoGCSP’s mandate to serve these populations.

**Some key informants believed that LEAP’s targeting of vulnerable groups was insufficient, pointing to potential exclusion through both CBT and PMT approaches.** For example, one key informant noted that while people with disabilities and the elderly had been identified through GNHR data, there were errors of exclusion and inclusion, especially for those who did not have transport to enrolment points. *“There are those who really need LEAP assistance but cannot be identified because they are in rooms and cannot be included.”* Other key informants highlighted that the LEAP program did not target people with mental health issues. In addition, a recent gender assessment (Kuss, 2023) identified shortcomings in the programme’s responsiveness to the needs of elderly women and the heightened needs of women during economic shocks.

**The programme criteria appear to be effective in targeting the poorest populations.** The LEAP Integrated Social Services evaluation (2021) found that LEAP targeting is twice as effective in reaching the poorest populations as random targeting. However, we do not have enough information to determine the effectiveness of the targeting criteria for identifying other dimensions of vulnerability to shocks (such as disability status or age).

**There were mixed opinions as to whether the targeting criteria could be relaxed or modified to include other affected and vulnerable groups during times of crisis.** Some key informants stated that this was possible and had happened before, citing examples such as the response to the Circle-Odawna flood in 2015/2016, LEAP emergency payments given to women living in alleged “witch camps” in 2020, and emergency payments for the COVID-19 pandemic. These emergency responses usually involved liaising with NADMO and conducting a rapid data collection exercise to identify affected populations.

**However, key informants also mentioned challenges to relaxing targeting criteria in response to shocks, including inadequate data and lack of contingency funding.** When the

Emergency LEAP cash transfer was expanded to non-LEAP beneficiaries during the COVID-19 pandemic, the GNHR conducted rapid data collection to inform the expansion targeting. However, this process was time consuming and resulted in delayed emergency payments. Key informants highlighted that the process of collecting data on populations affected by shocks and enrolling them in the payment systems hinder a rapid crisis response but sidestepping this process could result in inclusion errors. As one key informant noted,

*For example, if the Bagre Dam in Burkina Faso is open, there is a disaster and people are affected, you have to move in and support. Already money is not available, and you can't even think of going to pay them because, how do you pay them? Again, we have to liaise with NADMO to get the data of those affected so if we are going to use the Ghana Interbank Payment Settlement System (GhiPSS) system we will first of all enroll them, whether we are using momo or the e-zwich then we have to enroll them into our time table. So we need to validate the data and this takes time, and cannot be that fast during disaster as expected unless we have to sidestep the enrolment and say we give them mobile money... We want to have credible data, if not, people may take advantage of the system. When there is a flood, before you know people will run in, and before you know there is an inclusion error.*

**There is a need for data on potential beneficiaries in case of a shock because people affected by shocks may not be included in the GNHR registry.** Key informants pointed to the GNHR as a potential source of this data, but noted that its coverage needed to be expanded, and the data collection format may need to be adjusted (for example, a shift to individual data collection). Reflecting on the COVID-19 emergency cash transfer, one respondent noted,

*During the COVID-19 outbreak we noticed we didn't have data on potential beneficiaries because the household registry did not cover the entire nation, so we undertook a rapid data collection, and it was the same registry that did the data collection. All they needed to do was adjust their tools slightly because the register is originally designed to collect data on households, but we were focusing on individuals, that is why they had to adjust the tools to fit our needs. So, for the targeting in times of a shock, there is a gap because we do not have data, but there is a system that can do the work... The systems are there but we need to strengthen them to be able to use them as and when needed. The registry collecting data is good but it could happen that a disaster happens and the data is not relevant because shocks happens and affect differently, so if we have different sources for collecting data it will be helpful.*

**In addition, key informants highlighted challenges related to the lack of funds set aside for emergencies and lack of a formal emergency response protocol,** which could impact the timeliness of emergency response. For instance, a key informant indicated the need for contingency funds and clear protocols to ensure that agencies are not starting from scratch when implementing shock response efforts. *“It is very important that all the SP programmes have in place a shock response programme so that when shocks happen, we would not now go and look for help, we will know if there is a contingency fund or if there is emergency fund somewhere. If we know that the shock is affecting this particular group of people, how do we go about it and how do we reach out to them. There should be a protocol for everyone to follow.”* While LEAP funding usually comes from the Ministry of Finance, the Emergency LEAP payments made during the COVID-19 pandemic were partly funded by the international community due to lack of emergency response funds. As a government stakeholder noted,

*[During] the covid-19 pandemic, we basically had to fall on the international community to help us because we do not have the financial resilience and therefore were not financially prepared to handle that kind of emergency.*

#### **Use of conditions:**

Not applicable, as there are no conditions for participating in the LEAP programme.

#### **Transfer value, frequency:**

Key informants indicated that the current LEAP transfer value ranges from GHS 64-106 per month based on the number of eligible people in the household and is supposed to be reviewed every year to adjust for inflation. This value represents a doubling of the former LEAP transfer value, which occurred in 2023, during the course of data collection for this assessment. The frequency of the LEAP cash transfer is bi-monthly, though there were some payment delays and irregularities during the COVID-19 pandemic according to key informants and the LEAP ISS baseline evaluation. **There was a strong feeling from key informants interviewed for this assessment, as well as beneficiaries interviewed by the LEAP ISS baseline evaluation, that the former transfer value (prior to the increase that occurred in 2023) was insufficient to achieve the programme's objectives.** Before the increase, the median transfer represented just 5% of the consumption of beneficiaries, an extremely low value compared to international standards, which suggest that cash transfers representing at least 20% of total consumption achieve greater impacts (LEAP ISS Baseline; Handa and Davis, 2015). The transfer value has been topped up previously, for example, during the COVID-19 LEAP emergency payment, when over 332,000 beneficiary households received extraordinary payments (equal to four months' social assistance in one single payment) (UNICEF, 2021). As one key informant noted,

*During COVID, what we did was by using the same wallet, we doubled the amount for them to buy sanitizers and other stuff. Payment was made through the same cash transfer system. Targeting LEAP beneficiaries, yes, we can still do it and top up because it is an emergency and expenditure goes high and people need more cash.*

In addition, during COVID-19 LEAP was temporarily expanded to an additional 125,000 vulnerable people, including people with disabilities, homeless people, women living in alleged witch camps, mostly female head porters, and women and children living in the street (UNICEF, 2021).

Key informants also noted that there is a high transactional cost to disbursing the transfers, so increasing transfer frequency can be costly. However, this can potentially be reduced if e-zwich can be linked to mobile money or used at ATMs/POS devices, so that cash out operations are no longer necessary. Furthermore, addressing both supply and demand-based bottlenecks in payment during regular disbursement is key to reduce payment delays during emergencies.

#### **Risks in the design:**

There is room for improvement in LEAP's targeting of vulnerable groups, for example, people with disabilities and the elderly. In addition, a recent gender assessment (Kuss, 2023) identified shortcomings in the programme's responsiveness to the needs of elderly women and the heightened needs of women during economic shocks. Additionally, the assessment found that

LEAP should do more to challenge harmful gender norms and address GBV through linkages in its programming.

### **Linkages to services/ ‘cash plus’:**

The LEAP programme includes direct linkages to the National Health Insurance Scheme (NHIS). With the proposed ‘cash plus’ component of LEAP and Integrated Social Services, the Government of Ghana aims to provide fully integrated social protection. The LEAP+ISS seeks to establish linkages between LEAP and e.g. the Ghana Health Services (GHS), social welfare (for child protection concerns), (Government of Ghana, 2022). In selected geographical areas (42 districts in the 5 regions of Northern Ghana), there are also linkages to the LIPW for able-bodied LEAP beneficiaries through the Productive Inclusion component. This includes plans e.g. to improve tracking of NHIS-card validity of LEAP households, using LEAP payment days for health sensitization and promotion, improving online case management for social welfare management, improving referral systems between the various services (Government of Ghana, 2022). However, there are several reported challenges with operationalizing these linkages. The LEAP ISS Baseline Evaluation showed limited presence of GHS and NHIS at payment points, low engagement of LEAP beneficiaries with Social Welfare and Community Development (SWCD), and low level of interaction with the participants in general. At the time of the evaluation (2019), SWCD faced numerous challenges, including insufficient resources, centralized bureaucracy, access to community focal persons, transportation, and office space. There were also challenges with NHIS enrollment renewal.

### **Conclusions:**

LEAP’s programme design has a moderate level of readiness for shock responsiveness. Though LEAP criteria appear to be effective in targeting the poorest populations, there is room for improvement in targeting vulnerable populations, especially women, the elderly, people with disabilities and others that are more vulnerable to disasters. LEAP was successfully modified to respond to shocks such as the COVID-19 pandemic by vertical expansion (top-up payment for existing beneficiaries) and leveraged on for horizontal expansion (temporary inclusion of new beneficiaries). Nonetheless, inadequate targeting data and lack of contingency funding present challenges to relaxing targeting criteria in response to shocks. There is a need for data on potential beneficiaries because people affected by shocks may not be included in the GNHR registry. LEAP has relevant social service linkages for shock response, such as the NHIS linkage, but the operational and coordination challenges with these linkages may hinder this potential. There is also need to strengthen gender-responsive linkages such as GBV prevention and sexual and reproductive health. Lastly, topping up the transfer value may be more feasible than increasing its frequency, given the transactional costs with payment disbursement.



## Module 4.2: Readiness of Programme Design - GSFP

### **Module 4.2 Key Takeaways**

*GSFP's programme design has a moderate level of readiness for shock responsiveness*

#### **Strengths**

- The selection process for schools considers poverty indicators and community infrastructure or vulnerability factors.
- Gender-related factors, such as low enrolment of girls in school and the prevalence of early marriage are also considered in the targeting and selection criteria.
- There are feasible opportunities to scale targeting during emergencies, using GES school data.

#### **Challenges**

- Some vulnerabilities are not considered in the targeting and selection criteria, including prevalence of children with disabilities, refugees, and areas that are more prone to shocks or disasters.
- There are concerns with the lack of transparency of the school and caterer selection process.
- Payments to food procurers are insufficient for providing quality meals to students.

### **Programme Objectives:**

The main objective of the GSFP is to provide children in public primary schools (Kindergarten – class 6) in the poorest areas of the country with one hot, nutritiously adequate meal per day, using locally-grown food (Government of Ghana, 2023). The long-term goal is to contribute to poverty alleviation and food security through the following short term objectives: 1) increasing school enrolment, attendance, and retention; 2) reducing hunger and malnutrition; and 3) boosting domestic food production.

### **Targeting:**

According to the draft GSFP Operations Manual (Government of Ghana, 2023), the process of selection of districts and schools for the GSFP is as follows: 1) The National Secretariat (NS) of the GSFP ranks districts within a region using poverty indicators from the GNHR (where data is available), the Ghana Living Standards Survey (GLSS), WFP vulnerability and Food Security Data, and the National Development Planning Commission (NDPC) poverty profile. Then, the NS selects expansion districts based on criteria such as: deprivation, budget constraints, and economies of scale. The NS allocates communities/schools per district using district poverty ranking until the regional quota is exhausted; 2) The District Desk Officer obtains a list of schools in the selected district by the District Education Officer and removes schools already on GSFP. The District Implementation Committee (DIC) then meets to review and rank schools based on a series of criteria, including low enrolment, attendance, and retention rates (especially for girls), willingness of the community to install infrastructure, access to potable water, high food insecurity, high dropout rates, and low literacy levels. The DIC ranks schools from most vulnerable to least, and this list is validated by the District Coordinating Director and certified/approved by the District Assembly. Pupil/student enrolment figures are obtained from the Education Management Information System for each eligible school and verified by the Ghana Education Service (GES).

In addition, the draft GSFP Operations Manual outlines the process of procuring caterers to provide meals for GSFP schools, which is currently being revised. The process stipulated in the manual is as follows: Once GSFP schools are selected, DIC is expected to advertise for the recruitment of caterers in local radio stations, notice boards, District Assemblies' Notice Boards, and other relevant outlets. Caterers should formally apply to the advertisement by submitting a written application along with a series of accompanying documents. Applications should then be reviewed by an evaluation panel at DIC, and short-listed candidates should be interviewed following set guidelines and rateable criteria. DIC is expected to document the evaluation and outcome of the interview and report this information to the GSFP NS.

**The GSFP Operations Manual indicates that gender is considered in the GSFP school selection criteria in terms of rates of low school enrolment and/or attendance rate for girls and gender parity index.** A key informant also added that other gender-related factors, such as child marriage and teenage pregnancy rates, are considered in GSFP selection. *“We consider the number of girls enrolled in the school, whether it is low or high, and also issues such as high teenage pregnancy in the community, incidence of child marriages, girl child marriages to be precise. So, if any of these situations are issues that plague the community, then the GSFP would be introduced to serve as an incentive or pull factor for the girls to enrol in schools.”* Evidence suggests that the GSFP led to positive learning gains for the average pupil, with larger impacts for girls (Aurino et al., 2023) and increased height-for-age during mid-childhood in girls (Gelli et al., 2019). Disability and refugee/IDP status are not currently part of the selection criteria for GSFP. Further, disaster-affected areas are not explicitly targeted by the programme.

**In terms of the potential to relax or modify targeting criteria to include other affected groups in times of crisis, several key informants believed this was possible and had been done previously.** For example, a government representative described how targeting was relaxed during COVID to include more schools, albeit at some cost:

*[The GSFP] can be amended because when the COVID came, we had to feed children who were in school. We were able to change the programme to feed those children, that cost made it around Gh¢3.50 pesewas per child and it was a lot of cost and we have paid, but it has taken us some time. The programme can be amended, just that sometimes the amendment takes time and it is costly.*

**Key informants suggested that these criteria such as disability, refugee status, and disaster risk be considered in the GSFP school selection process.** As a key informant from government suggested *“I believe that areas that are impacted by disasters or are prone to disasters should have priority in the selection criteria over other areas. So for instance the needs of a school in Zabzugu Tatale which is affected by the Bagre dam spillage should be given priority over a school in for instance Accra where no disaster has occurred.”* A programme respondent noted, *“I believe the policy is too strict in the selection criteria of the beneficiary population. It should be relaxed to include children living with disabilities, children in early childhood facilities and even pupils in [junior high school] who are from vulnerable schools and communities.”* In addition, children who drop out of school permanently or temporarily are excluded from receiving the programme benefits. Another respondent added that while GSFP school selection criteria could be modified, this would require policy changes to protect the GSFP from potential lawsuits and legal action.

**An independent assessment of GSFP** (Associates for Change, 2016) **as well as other studies** (Iddrisu et al., 2022; Botchwey, 2021) **found that targeting the school and caterer selection process lacked transparency.** At the time of the assessment, researchers found that the DICs

and school implementation committee (SIC) did not play enough of a role in school selection and caterer selection, and final decisions were taken mainly by District Chief Executives who decided which schools were selected to benefit from the programme, and which caterers were hired and fired. Further, the assessment found that some hired caterers were party officials with no previous experience in catering services (Associates for Change, 2016). There may have been improvements in these issues since the assessment was conducted, and new guidelines for school selection and caterer procurement have been developed. **Nonetheless, a few key informants did mention the politicization of the school selection process as a challenge for Ghana School Feeding Programme (GSFP) implementation.** A programme informant noted, *“The political involvement in the programme is simply too much. This has led to politicization of the scheme and every action that the scheme undertakes is viewed by the public in political party colours. The political involvement should be reduced or completely removed.”* Studies suggested that the GSFP had a positive impact on enrollment rates, grade attainment, and students devoting more time to their schooling (Goldsmith et al. 2019)

#### **Use of conditions:**

Not applicable, as there are no conditionalities in the programme.

#### **Transfer value, frequency:**

The value of the GSFP is based on the Daily Feeding Allowance per child, or 1.00GHS per child per school going day. **There is a general agreement that the current Daily Feeding Allowance rate is insufficient to provide high quality meals for children.** One development partner stated, *“On the School Feeding Programme with regards to the legal environment, we know that the Gh¢1 and now reduced to about 0.97 pesewas per child per day due to tax is not enough.”* In 2017, during a national dissemination workshop of a nutritional survey of the School Feeding Programme, there was a consensus that the feeding grant should be increased to 1.50-2.00GH per child per school going day on the basis of real expenditures reported by caterers (Dunaev & Corona, 2019). However, this increase has not been accomplished yet.

Regarding potentially adjusting the GSFP benefit to better respond to shocks, some key informants suggested that the GSFP could potentially transition into a cash-based programme that would allow beneficiaries to purchase food directly, rather than hiring caterers to prepare food.

**Risks in the design:** Since the GSFP targets school going children, it may exclude others in need of support if school places are limited or if children are out of school.

**Linkages to services/‘cash plus’:** According to key informants, GSFP beneficiaries are eligible to register for the NHIS for free. There are also linkages between GSFP and the GHS, including deworming, vitamin A and polio immunization exercises at the schools and Girl Iron Folate Tablet Supplement which they give to female students in schools. In addition, the Ghana Education Service (GES) carries out the Nutrition Friendly School programme, in collaboration with UNICEF, GHS, and GSFP.

#### **Conclusions:**

GSFP’s design has a moderate level of readiness for shock responsiveness due to the potential of expanding targeting criteria, though the school selection criteria in practice lacks transparency. The selection process for schools is multi-faceted and involves considering poverty indicators, enrolment rates, and community infrastructure. Gender-related factors like



low enrolment and issues such as girls' education and child marriage are taken into account, though there is room for improvement in providing gender-responsive services through linkages such as NHIS. In addition, disability, refugee status, and disaster-affected areas are not explicitly targeted. The programme faces challenges in adhering to targeting criteria, notably related to politicization of the school and caterer selection process. The expansion of targeting criteria to include more beneficiaries seems feasible, including the availability of potential beneficiary data through GES, though the costs may be prohibitive. GSFP also has potential linkages that can benefit shock-affected populations, such as the National Health Insurance Scheme (NHIS) and receive support from the Ghana Health Service (GHS).

## Module 5.1: Readiness of Administrative Systems - LEAP

### Module 5.1 Key Takeaways

*LEAP's administrative systems have a low to moderate level of readiness for shock responsiveness*

#### Strengths

- LEAP has previously expanded horizontally—increasing the number of beneficiaries—and vertically—increasing the transfer amount—during the pandemic.
- The programme used a hybrid of GhIPSS' e-zwich platform (for existing beneficiaries) and mobile money platform (for new beneficiaries).

#### Challenges

- Registration is not demand-driven, and re-verification of beneficiaries does not occur frequently
- Rapidly enrolling new beneficiaries is challenging given that GNHR data is not comprehensive across all regions in Ghana.
- Mobile money platforms are sometimes challenging for beneficiaries who may share phones within their family or do not have access to smartphones, such as women.
- There is a lack of awareness around the grievance management process—beneficiaries need to be made aware of the system and encouraged to submit feedback.
- There are delays in resolving beneficiary complaints.

### Administrative processes:

Processes of targeting, enrolment, payment, communication, case management, and monitoring are clearly laid out in the LEAP Operations Manual. For each of these processes, the Operations Manual clearly lays out roles and responsibilities for each organization/agency.

### Registration/Enrolment:

The registration/enrolment process includes the following steps: 1) community sensitization and verification of selected households; 2) collection of household enrolment data; 3) sensitization on rights, duties and responsibilities; 4) enrolment onto the LEAP Payment Platform; and 5) registration onto the payment instrument by payment service providers. The personal identification data required for registration include name, biometric data (fingerprint authentication), and identification documents such as National ID card, NHIS card, or Voters ID. Relying on biometric verification may pose challenges for elderly women and people involved in farming activities due to physical damage of their hands and age. LEAP ID cards are then issued to all registered households, and payment cards are given to caregivers to enable households to access LEAP grants once they are put on the payment platform.

**The registration/enrolment process does not appear to be demand-driven, but rather a periodic mass assessment of populations by programme teams.** As one key informant described,

*For LEAP, the process starts with the data collection exercise by the GNHR after which the data is categorized into poor, non-poor and extreme poor. The data from the extreme poor category is given to the LEAP Secretariat who then go to the individual communities to undertake a validation of the persons captured under that category to ensure conformity to the required standards or*

*eligibility criteria. Thereafter, they return the data to us to effect the necessary changes and once that is done, they are enrolled unto the intervention and the cash disbursement starts.*

This static registry is not well equipped to recognise changes in poverty and vulnerability status either as a result of life course events or covariate shocks.

**However, another key informant added that if an eligible person is not captured by the enrolment process, they can contact the SWCES** which offers a toll-free line in which vulnerable persons can call and ask for help.

After initial enrolment, there is a reassessment process in which the extreme poverty status of all LEAP households are reviewed using data that is up to date. Reassessment is supposed to happen every 4 years. This process is partly automated and partly relies on checks by staff. In some cases, it requires the use of GNHR data, either through data collection by GNHR or third-party contracted firms. There is a possibility of recertification being triggered by a major event or shock affecting the community. Those found to be ineligible are supposed to be either exited or graduated from the program. **However, key informants indicated the reverification of LEAP beneficiaries does not happen very often.** Though the LEAP operations manual provides for recertification every 4 years, this has never been done since the programme's inception in 2008. Key informants noted that there was an ongoing reassessment of LEAP data which would update beneficiary lists. Though key informants did not mention barriers to registration and enrolment, existing evaluations noted challenges related to interference from politicians in certain regions during enrolment processes and some remote communities incurring costs for transportation to enrolment venues (LEAP ISS Baseline Evaluation, E-Payment Assessment). **Key informants stated that these registration and enrolment processes could be used during shocks, though they would still rely on GNHR data and would require participants to have ID cards in order to be enrolled.**

### **Payment delivery:**

The financial service provider for LEAP is GhiPSS. Beneficiaries can receive payment through E-zwich (a secure smart card issued by GhiPSS). They can then cash out their E-Zwich payments at a bank or at a designated cash out point (bank representative, mobile money vendor, or GhiPSS agent) with or without supervision of the District Social Welfare Officer (DSWO). The steps involved in the payment process include: 1) Payroll Creation; 2) Direct Electronic Transfers to Bank Accounts or E-Zwich; 3) Payment through E-Zwich; 4) Payment Reconciliation. In order to receive their payments, beneficiaries must present E-zwich card (bank-issued electronic biometric card) and undergo biometric verification.

**Key informants interviewed for this assessment noted that the E-zwich platform has been used previously to transfer funds during emergencies, and the E-zwich card can be issued quickly once the beneficiaries are identified.** Further, a key informant noted that during emergencies, beneficiaries can receive money immediately after issuing the E-zwich card. However, there would still be a need to offer cash out points for beneficiaries in remote communities who may not be able to access banks or mobile money vendors.

**During the COVID-19 response, payments were made to non-LEAP beneficiaries through a different platform of mobile money payment systems.** While key respondents pointed to mobile money as the fastest way to reach beneficiaries (even internally displaced populations [IDPs]) in case of an emergency, they also pointed to **potential barriers of phone**

**access and usage, especially for women.**<sup>10</sup> Further, there were additional steps required to verify the contact numbers of non-LEAP beneficiaries who received the COVID-19 emergency funds. As one key government respondent described,

*During COVID, we needed to validate the contact numbers because we paid through mobile money and there were most people who were not on LEAP. For the leap people they already had the e-zwich card, but the non-beneficiaries of LEAP who were also identified during the covid period, they were paid through mobile money. You need to validate or verify the contact numbers sometimes to ensure that the money gets to the actual recipients, because of the chaos, everybody wanted to support. Let's say I don't have a phone, I can give my friend or wife's contact, so sometimes we need to validate and call them back to be able to ensure that this number is for them. Then we are sure that if the money is sent to them, they will receive it.*

Respondents also noted that the monetary payments could be modified to include in-kind or food benefits, as was done with the COVID-19 pandemic. As one respondent noted,

*Depending on the kind of disaster, the monetary payments could be modified to include in-kind or food benefits depending on the needs of the affected persons. For instance, during the covid-19 pandemic, we distributed food, blankets, water etc. because that is what people needed, money was of little value to them because they couldn't use it anyway, due to the lockdown.*

In addition, in-kind assistance may be relevant for gender-responsive emergency response, since women and girls may have specific support needs.

### **Communication:**

The main channels of communication with LEAP beneficiaries include the DSWOs, the community focal persons, and the Community LEAP Implementation Committee (CLIC). The CLIC mobilize people for payments and share information about the programme. Communication between DSWOs and focal persons is mainly through telephone calls, and communication with beneficiaries is done through information centres in the communities. In addition, communication between the LEAP Secretariat and DSWOs is done through letters or Whatsapp messages. **Key informants were generally satisfied with communication processes and considered them effective.** One key informant involved with LEAP implementation stated, “Currently, our communications channels are effective and social welfare officers and focal persons are able to visit communities to engage beneficiaries. I will [say] yes, they are effective for use during any disaster. Again, the focal persons are with some of the beneficiaries, they know them and communication is easier.”

**Nonetheless, existing evaluations of the LEAP programme point to some communication challenges, especially related to grievance mechanisms.** About 85% of the respondents from the LEAP-ISS baseline evaluation considered the LEAP selection process clear (Government of Ghana, 2022). About 15% of HHs were either neutral or did not consider the program selection process clear, indicating a need to reinforce the communication.

### **Complaints, feedback and monitoring:**

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<sup>10</sup> Ghanaian women are still less likely than men to own internet-enabled devices, use the internet, access government e-services, or make digital payments (Jeffrie, 2023). [Jeffrie, N. (2023). The Mobile Gender Gap Report 2023. GSMA.]

The LEAP Operations Manual explains that claims, complaints, and beneficiary updates may be lodged with the SWCES through a toll-free number or directly to the LEAP Case Management Unit by beneficiaries or DSWOs. All claims and complaints received and categorised as the responsibility of LEAP to resolve, will be forwarded to the LEAP Case Management Team, who will investigate, resolve, and provide feedback to the complainant. All updates to any LEAP cases received will also be posted to the Single Window Case Management System as required by the system. DSWOs are expected to address some of the challenges at the district level before escalating it to the office. SWCES also call beneficiaries to find out if their issues were resolved and whether they are satisfied.

Key informants explained that the SWCES facilitated the lodging of complaints as well as follow up. Complaints were usually forwarded to the Case Management Unit for resolution.

*[The SWCES] coordinates grievances of the social protection interventions especially the flagship ones of which LEAP and the Ghana School Feeding Programme are part. When their beneficiaries have any issue, they call the Helpline of Hope Call Center then we refer the issue to the Case Management Officers of the various SP interventions and they get in touch with the beneficiaries, resolve the issues and get back in touch with us that the issue is resolved. We also call the beneficiaries to find out whether they are satisfied and if their issue has really been resolved.*

Existing evaluations (DAI Europe, 2018) indicated some **challenges with accessing and resolving complaints**. As of 2018, 32% of the cases of the grievance system in LEAP were still pending. The main issues reported were damaged or missing cards, non-crediting of cards, and inability to capture fingerprints. Although the DSWOs filled in case management forms and try to address some of these issues at their level, their field evidence and the number of cases received by the LEAP Management Secretariat CM team suggest that most cases have to be referred to LMS and GhIPSS, which were rather slow in responding. The assessment recommended decentralizing this process and giving more autonomy to DSWOs to resolve some issues at their level.

Data from key informants appears to indicate that some of these suggestions were taken into account with the implementation of the single window. **A key informant familiar with the grievance management system stated that the call center has been effective in managing grievances and ensuring that they are resolved in a timely manner.** In addition, the SWCES collaborates with the National Council on Persons with Disabilities and the World Bank to ensure that any complaints from people with disabilities and/or women are properly channelled. However, this key informant did mention challenges with administrative procedures and contacting clients for follow-up.

The LEAP internal monitoring relies on data from the management information system (MIS), e-reporting and the LMS spot checks. The external monitoring uses tools such as the independent monitoring checks, impact evaluations and operational reviews as a complement tool for internal monitoring. The LMS conducts quarterly and annual review meetings to assess progress on their annual work plan and develop action plans based on lessons from their M&E activities. **According to the LEAP operations manual, the monitoring process is tailored to track coverage of people with disabilities as well as other vulnerable groups. It is also supposed to monitor case management, linkages, co-responsibilities on a bi-monthly basis.** The latter occurs through data collected by the community focal person, which



undertakes regular visits to beneficiary households, and through BWAs, which monitor co-responsibilities and access to complementary services.<sup>11</sup> Key informants indicated that LEAP monitoring collects data that could be of use in identifying vulnerable groups that are a priority for the Government of Ghana, such as identifying children that are at risk of dropping out of school, monitoring attendance at child health monitoring centers, and monitoring high-risk protection cases. The World Bank fully funds four spot check activities a year, and tools are provided at the subnational level to help officers with e-reporting. In addition, the GoG separately funds monitoring by the MoGCSP for each payment cycle.

**Nonetheless, monitoring appears to be irregular.**

Key informants mentioned challenges with monitoring, including inadequate logistics and funding. A programme informant described the monitoring process as follows,

*We go for spot checks to be sure the payments go to the right beneficiaries. We ask questions and educate beneficiaries on their responsibilities and rights. We have an M&E unit that make quarterly field visits sometimes after payments. However, due to unavailability of funds, monitoring is not regular. Welfare officers are also supposed to monitor and report to the office.*

Another key informant expanded on the monitoring challenges, stating, “*We have given... tablets or motor bikes to district welfare officers because they need some transportation to monitor the beneficiaries but it is inadequate. The funding too in terms of mobilization is not adequate enough particularly with the focal persons. It is voluntary work, so we don't give them enough funds.*”

**Institutions – governments/payment service providers/linked services/surge capacity:**

Key informants noted concerns about LEAP’s human resource capacity to continue business as usual in the event of a crisis, but believed that it could be possible to scale up assistance in the event of a crisis. In particular, they noted that LEAP staff have an understanding of humanitarian response and support humanitarian response efforts. In terms of the surge capacity of the payment service provider, key informants agreed that GhIPSS has the capacity to scale up its operations to provide more assistance in the event of a crisis.

**Conclusions:**

Overall, LEAP’s administration has a low to moderate level of readiness for shock responsiveness. Registration/enrolment of beneficiaries is not demand-driven, and re-verification has never been done, though arrangements are in place to carry out a national reassessment. Rapidly enrolling new beneficiaries could pose a challenge for LEAP, since the current process usually requires either existing GNHR data (which does not currently cover all regions of Ghana) or some sort of data collection. LEAP has previously been expanded to include a larger benefit and a wider range of beneficiaries during COVID-19 and in response to specific disasters using GNHR data. For LEAP beneficiaries, the E-zwich platform seems to work well during emergencies and shocks, though it requires beneficiaries to have accessible cash out points. For non-LEAP beneficiaries, mobile money seems to be more feasible, since it does not require in-person enrolment/distribution or e-zwich cards. However, mobile money adds potential barriers for beneficiaries who share phones or do not have access to phones, and requires additional verification to prevent fraud. LEAP’s communication system and grievance

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<sup>11</sup> BWAs were previously piloted in selected districts, and the LEAP program is considering reintroducing the concept.

mechanism also require attention, given previous challenges in building awareness of the grievance process, encouraging and enabling beneficiaries to report feedback, and resolving beneficiary complaints.

## Module 5.2: Readiness of Administrative Systems - GSFP

### Module 5.2 Key Takeaways

*GSFP's administrative systems have a low to moderate level of readiness for shock responsiveness*

- The GhiPSS' ezwich system, used to pay caterers, was largely reported as smooth, however, there were reports of delays in payments which could impact the procurement of food for students.
- Registration and enrolment of schools into the GSFP largely depends on the available programme funds, and selection of new schools does not happen often.
- There were concerns about the awareness of the grievance management system, and the lengthy time it took to respond to concerns and feedback.

### Administrative processes:

Processes of district and school selection, caterer procurement, payment, communication, case management, and monitoring are clearly laid out in the draft GSFP National Operations Manual (2023). For each of these processes, the Operations Manual clearly lays out roles and responsibilities for each organization/agency.

### Registration/Enrolment:

Aside from the mass selection of district/schools the programme based on criteria such as being in a poverty rates, low enrolment rates, low attendance rates, etc., Head Teachers from schools that meet the eligibility criteria can write a letter to the GSFP asking to be considered. However, key informants noted that the inclusion of new schools depends on available funds. Re-verification/re-targeting of schools is supposed to happen every ten years to phase out schools that are no longer deemed deprived, but it depends on the funds allocated by the Ministry of Finance. As a programme informant noted, “[Registration of new schools] *basically depends on the funds available. If we have increased funds, we recruit or register new schools but if not, then we simply don't. There are some years that the Ministry of Finance would increase our funding and in other years, they don't. So, we don't really have a time frame.*” This indicates that it may be challenging to enroll new schools in the programme in the absence of available funding for re-verification.

After being selected, Caterers must undergo a contracting process. This includes registering them in the GSFP digital platform, which facilitates payment, monitoring, and validation of contact details. Each contract lasts for two years, and there is a renewal process for caterers who qualify and wish to stay on.

### Payment delivery:

Similar to LEAP, the financial service provider for GSFP is GhiPSS. Caterers are paid via E-zwich card, which they can use at banks and payment outlets. Caterer payments are usually made at the end of the term requiring upfront investments from caterers. However, existing evaluations and key informants pointed to the prevalence of delays in payments to caterers. One government respondent noted,

*For the school feeding programme... as the caterer cooks, the number of days they cook, they are supposed to have cooked for at least a term, and government would re-imburse, but... the payments are not becoming regular as result of the current economic situation, so we owe caterers some money. But we have tried,*



*so now we only owe them 2 terms so we are hoping that we will be able to fully pay them off.*

The independent assessment of GSFP (Associates for Change, 2016) found that payment delays could ultimately impact students' access to meals since some caterers stopped producing food when payments were delayed. If payment delays are still prevalent, this could affect the ability of the payment process to be scaled-up at times of crisis.

### **Communication:**

According to key informants, communication is channelled through the District Desk Officers in charge of GSFP at the District Assemblies, then Zonal Coordinators who are in charge of approximately five districts in every region, and then regional coordinators who conduct routine monitoring, then the National Secretariat. At the community level, GSFP often employs the public address system (information centers) and communication vans to provide information to the general public. The main channel of communication with caterers is WhatsApp audios, since many of the caterers are illiterate. These channels are supposed to be two-way, but the independent assessment of the GSFP found that there was little engagement and communication with communities (Associates for Change, 2016). In addition, the draft GSFP Operations Manual mentions the organization of community dialogue sessions, but it is unclear if these are being implemented yet. Key informants noted that the communication system could easily be used or modified during emergencies.

### **Complaints, feedback and monitoring:**

The main mechanism for filing complaints and grievances about the GSFP is the Case Management Unit (CMU). Beneficiaries/caterers can lodge complaints with the SIC or School Health Education Personnel (SHEP) at the community level, or with the District or Zonal Coordinators. A case may be made either in person or by e-mail, post, text message or using a telephone. If the specific issue cannot be resolved by these actors, the claim is forwarded to the Regional Coordinator and National Secretariat as needed. GSFP beneficiaries and caterers can also contact the SWCES, which coordinates all grievances of social protection programmes under the MoGCSP. However, since the main beneficiaries of the GSFP are school children/pupils who do not own phones, calling a toll-free number and channeling grievances through digital means/phones will not be within the reach of the pupils. There is need for sensitization with parents/guardians to report grievances on behalf of the children.

Key informants pointed to bottlenecks related to the grievance mechanism, especially for more complicated cases. One respondent noted, *"The bottlenecks include the long processes for seeking redress and feedback from the programme. It's just too long, especially when the issue is not resolved at the first levels of contact and these often cause unnecessary delays."* In addition, one respondent noted that the SWCES does not receive cases from GSFP very often, suggesting the need for more sensitization around the various forms of filing grievances or a more simplified way of lodging complaints.

*With the GSFP, we usually don't receive cases from them and I think it is because the caterers are not aware of the call center so they end up calling the officials and the various offices instead. Just a few people call in so we want to do more sensitization. We collaborate with them alright and have even informed GSFP directorate to share our toll-free numbers with their people (headteachers, teachers, pupils, caterers) instead of going to the radio stations to complain, they can just call to save them time and energy. Whenever they*

*call, it goes straight into the system and whatever it is, we probe and the issue is resolved.*

The draft GSFP Operations Manual outlines a comprehensive monitoring approach, including implementation monitoring on a daily, quarterly, and biannual basis by different actors, spot checks, and school-level data collection. Key informants mentioned daily monitoring at the school level by the SHEP and headteacher, periodic monitoring by Zonal Coordinators and Regional Coordinators, and occasional nutritional spot checks by nutritionists from the NS. Furthermore, key informants noted that the M&E department at the NS were expected to conduct monitoring on a biannual basis, but this depended on available funds and was not always followed. There was also mention of a pilot monitoring system implemented in conjunction with WFP that gives real time information on the GSFP in a subset of schools.

The independent assessment of GSFP (Associates for Change, 2016) cited several challenges/constraints related to monitoring, including limited monitoring of the programme at all levels due to lack of staffing capacity, operational challenges, and inadequate monitoring resources. The latter was echoed by key informants interviewed for this assessment, who noted that inadequate monitoring resources were one of the main challenges of GSFP implementation. *“The first challenge would be funding, currently to even get fuel for the vehicles and allowances for the officers who undertake the monitoring exercises is a challenge. The second would be logistical constraints such as cars to transport the officers to the field.”*

#### **Institutions – governments/payment service providers/linked services/surge capacity:**

Key informants noted concerns about GSFP’s human resource capacity to continue business as usual in the event of a crisis but believed that it could be possible to scale up assistance in the event of a crisis. GSFP also uses GhIPSS to pay caterers, so the assessment of surge capacity of the payment service provider is similar to LEAP’s.

#### **Conclusions:**

Based on the available data, GSFP seems to have a low to moderate level of readiness for shock response. Registration and enrollment in the GSFP are primarily based on specific criteria, but the inclusion of new schools depends on available funds. Caterers undergo a contracting process and are paid via E-zwich cards, although delays in payments have been reported. Further, the process of contracting caterers seems lengthy, and the method of payment through invoicing at the end of the term does not seem to lend itself well to rapid expansions in scale. In addition, caterers and local food producers may not have capacity to deliver at scale. Communication is channeled through various levels, including District Desk Officers, Zonal Coordinators, and the National Secretariat, with WhatsApp audios being the main channel for communication with illiterate caterers; however, previous assessments point to challenges in community engagement. The Case Management Unit handles complaints and grievances, but there are concerns about the length of the process and the need for more sensitization. Monitoring of the program is conducted at different levels, but limited resources and operational challenges pose constraints. Key informants express concerns about the human resource capacity of the GSFP in times of crisis, although the payment service provider, GhIPSS, is considered to have surge capacity.

### **3. Identifying Potential Programme Options**

## a. Analysis Process

Governments and their partners worldwide have tested various approaches for using social protection as a mechanism during disasters. Existing social protection programmes and systems can be leveraged in different ways to provide cash assistance to people affected by crises. The UNICEF tool (UNICEF, 2020) suggests four main ways in which governments and partners can use social protection systems to provide cash assistance to those affected by disaster. Please note that these programme option types are not exhaustive, and the AIR team is also open to other lenses of analysis.

1. **Government social protection ministry** makes ‘**design tweaks**’ to a social transfer programme to ensure it can more effectively meet needs during and following a shock or disaster
2. **Government social protection ministry** or **disaster management ministry** or **other humanitarian actors** make use of (‘**piggyback**’ on) parts of the government’s social protection administrative systems, to provide emergency cash assistance in response to a shock.
3. **Government social protection ministry** scales-up cash assistance they provide in response to a shock by **expanding vertically**, for example, by topping up the amount of existing cash transfers
4. **Government social protection ministry** scales-up cash assistance they provide in response to a shock by **expanding horizontally**, for example, by including additional beneficiaries in existing cash transfer programmes

This is founded on the typology of approaches to SRSP developed by Oxford Policy Management [OPM]/the Foreign, Commonwealth & Development Office (FCDO) in the United Kingdom. Note that the options presented here are not mutually exclusive and the best potential may well involve implementing a combination of these options. It is neither an exhaustive or prescriptive list of ways that social protection systems can be used, or activities that can take place across the nexus in humanitarian settings.

Evidence from other contexts highlights that even where such options are feasible and appropriate, more traditional programming approaches (i.e. standalone humanitarian responses) are still needed – in the short term whilst the capacity of national systems is further developed, to address potential gaps in coverage of national social transfer programmes. However, in national social protection programmes there may be opportunities to design and implement disaster responses in a way **that aligns with, strengthens or supports the development of** emerging social protection programmes or systems, to facilitate social protection approaches in future crises.

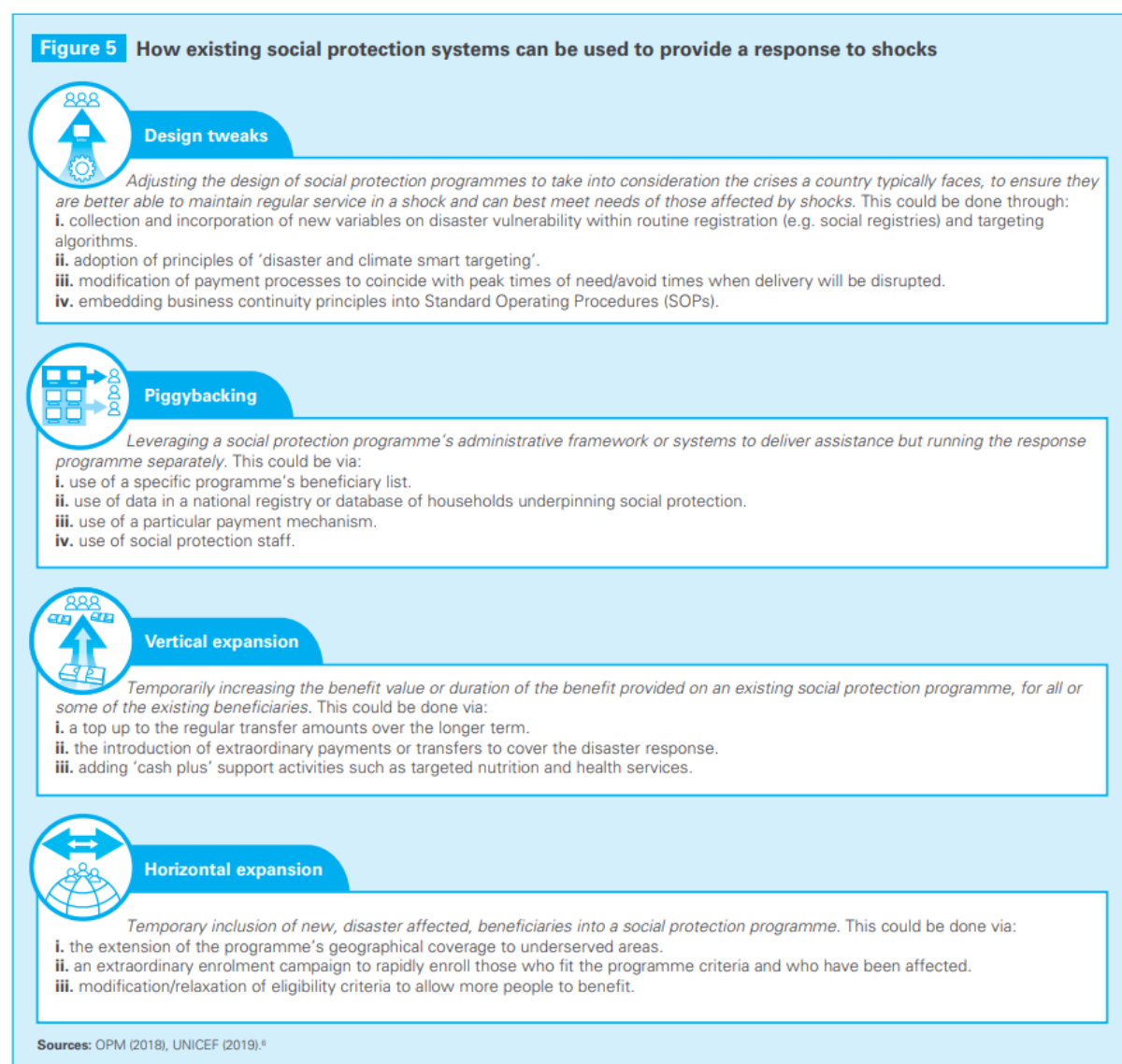
## **b. Analysis of Programme Options**

The analysis explored each of the various ways that the LEAP and GSFP programmes, as well as the social protection system as a whole, could potentially be leveraged to respond to shocks. The AIR team used all evidence from the assessment, and the typical benefits and challenges to each option, to guide decision making on the likely enablers and constraining factors/challenges in the Ghanaian context. This also considered differences according to the type of disaster or shock, and scale of the emergency, focusing on the three regions selected for the study (Upper East, Western, and Greater Accra) and the main types of emergencies prioritised in Module 1 - floods, landslides, macroeconomic instability, epidemics, intra-communal violence, tidal waves, and refugee influx.

Based on this, the AIR team made a preliminary determination of the feasibility and appropriateness of each programme option, and which have greater priority for the government. The analysis considered whether the programme option could potentially be possible (feasibility) and the appropriateness of responding in this way (appropriateness), taking into account the Ghanaian policy context, the findings of the study, and general constraining and facilitating factors for each option. Further, the feasibility and appropriateness analysis also considered the type and scale of disaster, and whether government can have a role (priorities/capacities/skillset), and the potential added value for programmes and benefits to affected populations. The programme options presented below are organized by programme (either LEAP or GSFP), except for the cases where the suggested action would involve the entire social protection programme. In these cases, we designate the option “system-wide.”

The conclusions describe the likelihood that additional HCT through parallel systems will be needed to fill gaps, especially in the event of a large-scale disaster. The main findings on programme options are presented in Table 2. Based on this analysis, three options, identified as providing greatest opportunity/priority for the government in the short term, i.e. developing a system-wide emergency response framework and plan; including disaster risk as targeting criteria for beneficiary/school selection; temporarily including beneficiaries who have not answered the PMT questionnaire but are affected by a rapid onset disaster or shock in specific geographic areas were taken forward to the next step. The AIR team verified the proposed programme options and obtained inputs on their prioritization in the validation workshop with the TWG on August 14<sup>th</sup>, 2023. Programme options and recommendations were generated from the UNICEF Shock Response Assessment Tool Guide, which highlights each category of programme adaptation (Figure 1).

**Figure 1: Social protection systems responses to shocks**



**Table 2: Analysis of programme options**

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
1	System-wide	Develop a system-wide shock responsive social protection strategy to define roles and responsibilities and identify contingency funding; Improve coordination between DRM and social protection systems	<ul style="list-style-type: none"> <li>-Lack of emergency response framework</li> <li>-Challenges in securing contingency funding in timely manner</li> <li>-Challenges in coordination between DRM and social protection</li> </ul>	<ul style="list-style-type: none"> <li>-Buy-in from NADMO and key actors in SRSP landscape</li> <li>-Current consideration of the Social Protection Bill (yet to be enacted)</li> </ul>	<ul style="list-style-type: none"> <li>-Coordination between actors in the social protection landscape</li> <li>-Limited financial support</li> <li>-Need to satisfy multiple development agendas</li> </ul>	<ul style="list-style-type: none"> <li>-High feasibility for framework, moderate feasibility for funding</li> <li>-High appropriateness</li> </ul>	-High priority
2	LEAP + GSFP	<b>Design tweak</b> - Develop programme-level shock response plan and ensure contingency funds for shock response	<ul style="list-style-type: none"> <li>-Lack of programme-level shock response plan</li> </ul>	<ul style="list-style-type: none"> <li>-Buy-in from the MoGCSP and other partners</li> </ul>	<ul style="list-style-type: none"> <li>-Funding</li> <li>-Need to satisfy multiple development agendas</li> <li>-Adjustment could divert programmes from core objective</li> </ul>	<ul style="list-style-type: none"> <li>-High feasibility for framework, moderate feasibility for funding</li> <li>-High appropriateness</li> </ul>	-High priority
3	System-wide	<b>Design tweak</b> – Increase coverage of GNHR and ensure that it is updated more regularly and link it with databases of other systems (such as NHIS) to allow for improved identification of vulnerable populations, including during emergencies	<ul style="list-style-type: none"> <li>-Gaps in GNHR coverage poses targeting challenges for LEAP, especially during shocks.</li> </ul>	<ul style="list-style-type: none"> <li>-Would feed into existing targeting systems for LEAP and GSFP</li> <li>-Plans ongoing to extend coverage of the GNHR</li> </ul>	<ul style="list-style-type: none"> <li>-Coordination with GNHR</li> <li>-Cost and time associated with data collection</li> <li>-Funding</li> </ul>	<ul style="list-style-type: none"> <li>-Moderate feasibility</li> <li>-High appropriateness</li> </ul>	-High priority



#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
4	LEAP	<b>Design tweak</b> – Improve mechanisms and develop standard guidelines to identify vulnerable populations, including people with different types of vulnerabilities, for example, elderly women, multidimensionally poor.	- Room for improvement in identifying vulnerable populations, such as women and people with disabilities, multidimensionally poor for LEAP.	- Buy-in from key actors, e.g. MoGCSP. - Would feed into existing targeting and programme administering system	- Coordination with GNHR and National Council on Persons with Disability - Would require additional data collection efforts	- Moderate feasibility - High appropriateness	- Medium priority; the TWG believes this is already being done to some extent.
5	LEAP + GSFP	<b>Design tweak</b> – Include disaster risk as targeting criteria for beneficiary/school selection to strengthen resistance of populations in disaster-prone regions.	- Lack of consideration of disaster risk as a targeting category for beneficiary selection for LEAP and school selection for GSFP.	- Would strengthen resilience of populations in disaster-prone regions prior to emergencies - Would not require changes in programme administration	- Coordination with GNHR and GES - May require additional data collection - Would potentially require expansion in geographic coverage - Funding	- LEAP: low to moderate feasibility - GSFP: Moderate feasibility - High appropriateness	- High priority
6	LEAP + GSFP	<b>Design tweak</b> – ensure regular re-verification of beneficiaries/recertification of schools to allow for exit & graduation, as well as enrolment of new beneficiaries/selection of new schools.	- Lack of regular verification, exit & graduation of beneficiaries and schools. - Enrolment of new beneficiaries and schools not done on a regular basis.	- Buy-in from LEAP and GSFP key stakeholders and line ministries (i.e. MoGCSP, MoE)	- Requires updated data from GNHR and/or GES - Requires staff resources and time - Requires funding	- Low feasibility - Moderate appropriateness	- High priority



#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
7	LEAP + GSFP	<b>Vertical expansion</b> – Increase the amount of the transfer/benefit (temporarily) to better support the resilience of beneficiaries in the face of macroeconomic instability	- Previously successful emergency response to COVID-19 pandemic by the GoG.	- Builds on existing administrative systems and programme infrastructure. - Requires minimal changes from implementors. - Plans to index LEAP transfer amount to inflation are ongoing	- Limited fiscal space	- High feasibility (LEAP transfer value increase recently accomplished) - High appropriateness	- Medium priority; the TWG believes this is already being done to some extent.
8	LEAP	<b>Horizontal expansion</b> – Temporarily include beneficiaries who have not answered the PMT questionnaire but are affected by a rapid onset disaster or shock in specific geographic areas. - Develop linkages with databases from other social protection programmes to identify beneficiaries. - Enable potential beneficiaries to request to be considered for the payments via a call to SWCES or an app	- Previously successful approach to COVID-19 emergency response by the GoG, albeit with some delays.	- Would reach broader spectrum of affected population quickly - Would leverage existing GhIPSS/mobile money systems - Can potentially be done remotely	- Lack of cohesive data collection strategy on affected populations during shocks - Requires establishing criteria for temporary inclusion and rapid data collection, which may cause delays - GhIPSS requirements (may mean those who are not already registered will not be able to receive payments)	- Moderate feasibility - High appropriateness	- High priority

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
9	GSFP	<b>Vertical expansion</b> – If caterers have the ability to scale up production quickly, temporarily increase the benefit by increasing caterers’ orders and sending students with additional food to take home in times of crisis.	- School feeding programmes can be crucial entry points to provide additional benefits and services to vulnerable households.	- Would leverage existing contracts with caterers - Would reach larger number of beneficiaries without requiring an expansion in targeting	- Caterers may not be able to scale up production quickly - The invoicing payment system may not lend itself to an increase in production	- Moderate feasibility - Low to moderate appropriateness	- Medium to low priority
10	GSFP	<b>Piggybacking</b> – Use GSFP infrastructure to distribute non-perishable food items and gender-related complementary services (such as menstrual health items) to schools (see Kuss 2023).	- School feeding programmes can be crucial entry points to provide additional benefits and services to vulnerable households.	- Would leverage existing GSFP school lists and systems	- Would require additional transportation logistics	- Low feasibility - Moderate appropriateness	- Low priority
11	LEAP	<b>Design tweak</b> – Streamline linkage with NHIS to ensure that expansion beneficiaries have access to health services during crisis, especially women and the elderly.	- Operational challenges in the linkages between LEAP and NHIS that hinder the full potential of synergies between these two programmes in emergency response	- Would allow health service access to populations affected by shocks - Would work within the current operations of LEAP	- Coordination with NHIS - Communication about NHIS benefits	- Moderate feasibility - Moderate appropriateness	- Medium to high priority

#	Programme	Programme option	Supporting finding	Enabling factors	Constraining factors	AIR team conclusion on feasibility and appropriateness	TWG prioritization
12	EWS	<b>Design tweak</b> – develop more holistic approach to early warning in the country, find ways for EWS to better coordinate with LEAP and GSFP programme specific needs.	- While EWS exists in Ghana, there is room for improvement in its linkages to the social protection system.	- Buy-in from SRSP stakeholders	- Coordination between NADMO and social protection system - Funding	- Moderate feasibility - High appropriateness	- High priority

## Conclusions:

Programme options to take forward from the above	1. Develop shock responsive social protection strategy, defining roles and responsibilities; improve coordination between DRM and social protection systems	Need for parallel HCT in the short to medium term?  Yes, a parallel HCT may be needed if a disaster were to occur in an area that is not currently covered by the GNHR, making LEAP coverage difficult.
	2. Include disaster risk as targeting criteria for beneficiary/school selection	
	3. Temporarily include beneficiaries who have not answered the PMT questionnaire but are affected by a rapid onset disaster or shock in specific geographic areas.	

## 4. Recommended Preparedness Actions

For the potential programme options that were prioritized in Section 3, the AIR team identified a series of concrete actions for the Ghana government and its partners to take to move forward. This analysis took into consideration:

- The main constraints identified in Section 3 and what is needed to overcome these.
- The type of support that Development Partners, philanthropic institutions, and civil society organizations can provide government with (e.g. technical assistance for programme and policy design; financial resources; advocacy; system strengthening; capacity building; evidence building; provision of complementary services/’cash plus’; coordination; etc).
- Implications for Ghana, nationally and at the decentralised level (i.e. which actions require higher level organisational support).
- Actions required of different stakeholders (including government and non-governmental)
- Proposed timeline for implementation (0-2, 2-5 or 5+years).

The recommended actions are summarised in Table 3. This can serve as a basis for discussion with other actors in the country and development of a multi-stakeholder collaboration plan.

**Table 3: Planning recommended preparedness actions**

Programme Option	Recommended Preparedness Action	Actions needed by government partners	Timeframe (0-2, 2-5, 5+ years)
<b>Develop system-wide social protection shock responsive strategy defining roles and responsibilities and contingency funding; improve coordination between DRM and social protection systems</b>	Develop a National Social Protection Shock Response Strategy, and policy/operational manual defining roles and responsibilities	Draft and approve National Disaster Response Strategy	0-2
	Strengthen existing Social Protection working group to incorporate DRM	Engage in social protection working group activities	0-2
	Advocate for contingency funds for emergency response	Consider funding emergency response	2-5
<b>Include disaster risk as targeting criteria for beneficiary/school selection in LEAP/GSFP</b>	Coordinate with NADMO, GNHR, and GES to collect disaster risk targeting data that can be leveraged for each programme	Facilitate coordination; contribute to disaster risk targeting discussions	0-2
	In addition to existing targeting criteria, include disaster risk and the needs of vulnerable populations (women, girls, people with disabilities, the elderly, etc.) as part of targeting criteria	Amend targeting processes for both programmes	2-5

Programme Option	Recommended Preparedness Action	Actions needed by government partners	Timeframe (0-2, 2-5, 5+ years)
	Conduct selection/targeting of beneficiaries/schools in disaster-affected regions	Provide funding for additional beneficiaries to be selected	2-5
<b>Temporarily include beneficiaries who have not answered the PMT questionnaire but are affected by a rapid onset disaster or shock in specific geographic areas.</b>	Collaborate with NADMO or other relevant agencies to determine processes to identify areas/populations affected by rapid onset disaster	Provide inputs on processes to identify areas/populations affected by rapid onset disaster; incorporate these processes in programme operations	0-2
	Develop rapid data collection strategy to deploy in response to unexpected shocks – establish roles and reporting structure	Provide inputs and agree on data collection strategy in response to shocks. Develop clear systems and train staff on timely and sensitive data collection.	0-2
	Determine expanded criteria for eligibility that can be activated in the event of a shock (e.g.: gender, disability, refugee status, etc.)	Contribute to the development of expanded criteria. Following these criteria, conduct beneficiary targeting and assessment when disasters emerge.	2-5
	Review and modify the registration system to accommodate and provide secure and timely access to potential beneficiaries to participate in the targeting, including mobilisation and sensitisation.	Contribute to discussions around how to modify the registration system. Provide funding for registration system changes.	2-5
	Integrate mobile money (can be Ghanapay – owned by GhiPSS as long as registration does not require address and Ghana card) to ensure more affected individuals/households who do not have an e-zwich can receive funds. Consider delivering handsets to vulnerable groups who may be prevented from using mobile money payment systems.	Coordinate with GhiPSS to develop mobile money strategy, provide funds for any additional resources (such as handsets) needed.	2-5

Programme Option	Recommended Preparedness Action	Actions needed by government partners	Timeframe (0-2, 2-5, 5+ years)
	Strengthen linkages with productive/climate adaptation programmes and additional benefits and services (such as GBV prevention, psychosocial support, housing support) via ISS to strengthen resilience of vulnerable households.	Coordinate between the different relevant agencies providing these services.	2-5

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