

BRC Food Security & Livelihoods approach for COVID-19 response in Africa

British Red Cross

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The COVID-19 pandemic has led to significant socio-economic impacts and it is expected that these will increase over the coming months, mainly loss of income, disruption of livelihoods, and increasing numbers of people experiencing food insecurity. This builds on an already fragile situation, with a record number of people in Africa facing food insecurity IPC3¹ prior to COVID-19 pandemic: 17 million people in the Sahel region² and 45 million in Southern Africa³ need immediate food assistance, and the expected acute malnutrition caseload has increased by 46% in some places in Burkina Faso, Niger and Chad, and by 25% in Southern Africa. The COVID-19 pandemic has exacerbated a critical situation on a background of concomitant multiple crises, including conflict, displacement, climate change, locust invasion and chronic poverty. The State of global food security and nutrition report released in July 2020, suggests that the COVID-19 pandemic may add between 83 and 132 million people to the total number of undernourished in the world in 2020 depending on the economic growth scenario⁴.

The initial stage of the COVID-19 response has focused on the public health crises. The second response phase will focus on the recovery of food security and livelihoods (FSL).

¹ IPC3: Integrated food security phase classification 3- Acute food and Livelihoods Crisis

² PREGEC press release: <http://www.cilss.int/index.php/2020/06/23/avis-sur-la-situation-alimentaire-et-nutritionnelle-dans-un-contexte-de-pandemie-de-covid-19-au-sahel-et-en-afrique-de-louest-pregec-virtuel-juin-2020/>

³ Southern Africa Development community (SADC) food security quarterly update Jan – Mar 2020

⁴ <http://www.fao.org/3/ca9692en/online/ca9692en.html#>

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1. Background

BRC has supported the global response to COVID-19. Whilst the priority of BRC International support is the multilateral response and support provided through IFRC and ICRC, BRC is also providing bilateral support directly to partner National Societies (NS), such as the reorientation of programmes and long-term priorities to support the response.

To meet the ambition of the International Directorate Chronic Hunger (CH) strategy, the BRC CH steering group have agreed that BRC must increase our FSL response in Africa. A large proportion of funding has been diverted to address the COVID-19 pandemic: as most resources are now mobilised through this channel, the response presents an opportunity to create a greater FSL footprint. To facilitate this the FSL technical team seconded one adviser to be fully dedicated to the response under the CH umbrella, to maximise the impact of our support on people's food and economic security working with our partners.

BRC country and programme managers based in BRC cluster offices in Eastern Africa, Southern Africa, Sahel region, Sierra Leone and Nigeria, were consulted to:

- Understand how BRC partner NSs have responded to COVID-19 to date through FSL activities
- Understand the challenges that FSL programming faces in the field (whether they are technical, linked to resource mobilisation or partner engagement etc.)
- Understand opportunities for FSL interventions (scaling up of ongoing programmes or new opportunities) and for influencing the FSL agenda in the region

Informed by this the BRC FSL approach for COVID-19 response in Africa has been developed providing regional teams with an analysis of the current FSL response to COVID-19 and guidance on how to adjust existing FSL programming to address the challenges currently faced. The document presents FSL response options informed by challenges and capacities of NS noting these will need to be adapted by countries to their specific context, capacities and the priority needs of communities. This document will support decision-making of BRC contributions towards livelihoods recovery in COVID-19 response plans and may also feed into the revision of the BRC Africa Regional Action Plans, planned in November 2020 re the Chronic Hunger pillar.

2. Analysis of the FSL response of BRC Partner NS in Africa during COVID-19 and support provided by BRC

The Emergency Plans of Action (EPoA) of BRC partner NSs in Africa were analysed to understand the FSL components which are included. **The detailed analysis table can be found in Annex 1.**

2.1 Key points on what NSs are doing

Phase 1: January to March 2020: First IFRC Emergency Appeal (EA) and NS EPoAs focused on primary health response with FSL excluded. Nevertheless, most NSs have been mandated by their Government to provide food assistance in quarantine sites or to migrants in isolation (mainly returned students and migrants, although this does not always appear in the responses plans). All NS staff, including FSL focal points (who often have DM or PMEAL responsibilities) were mobilised to support the health response.

Phase 2: mid-April until July 2020: IFRC revised the EA and has included an FSL component and outlined what FSL interventions could look like. The IFRC EA has considered the response to the secondary impacts of COVID-19 under **Priority 2: Tackle poverty & exclusion- addressing socio-economic impact.** The FSL component of the appeal sits under the Livelihoods & Household Economic Security pillar of priority 2. To date NSs have submitted revised country response plans. Most NSs are planning to provide multipurpose cash to meet basic needs, particularly to those affected by the economic impacts of COVID-19 including migrants and displaced populations. NSs are then planning livelihoods assessments to inform longer-term FSL recovery plans. Where the operation coincides with the planting season, NSs ensure distribution of basic agriculture inputs to ensure communities do not miss the season.

Based on this, IFRC released the revised EPoA in mid-July which gives greater detail of the operation and the budget: 15.6% of the budget (CHF 12.5m) is allocated to the Livelihoods and Household Economic Security Pillar.

The current **IFRC Africa COVID-19 EPoA** covers 48 NSs in the region and is for CHF 80m (Global IFRC/ICRC EA is CHF 450m). Under the Livelihoods and Household Economic Security pillar, the target is to support 28 NSs with an allocation of CHF 12.5m (15.6% of the total). The approach is outlined according to the 5 objectives of IFRC livelihoods programming. Each NS will adapt their plans according to their context, needs and response capacities. The 5 objectives are as follows:

- **REPLACE Livelihoods (LLH):** meet basic food and household needs.
- **PROTECT LLH:** protect livelihoods through cash and voucher assistance (CVA) or in-kind assistance (e.g. agriculture / livestock). It also includes support for particularly vulnerable families at risk of losing homes or basic services, particularly in urban areas, providing cash for rent, utility bills and debt payment.
- **RESTART:** replenish assets; re-skill people to improve employability.
- **DIVERSIFY LLH:** give people the skills to improve employability and meet new demands; give start-up kits for small businesses.
- **STRENGTHEN:** strengthen social protection schemes; advocate for access to financial institutions and government mechanisms / safety nets.

IFRC will provide technical assistance to design and implement these activities through Livelihoods Resource Centre and surge HR deployment.

In the longer-term, IFRC will support NSs to carry out local assessments to develop and adapt recovery and resilience programming to address future needs as they evolve.

2.2 Key points on how BRC is supporting

From the beginning of the pandemic British RC has been responsive:

- Multilateral support was given to IFRC EA after mobilisation of donors; funds were not earmarked to FSL but were to support the global response (to date GBP 38m).
- The FSL team was mobilised together with the IFRC Livelihoods Resource Centre (LRC) to provide remote technical advice and guidance to the whole Red Cross Red Crescent Movement (RCRCM) through the Livelihoods and COVID-19 Helpdesk and the development of guidance documents, infographics and webinars⁵ to support RCM to adapt their FSL activities to this extraordinary situation and to respond to new challenges.
- Bilateral support was provided to BRC partner NS in Africa: beyond technical support, BRC has repurposed available funds to adapt ongoing programmes to COVID-19 containment measures and to support the primary health response. Funds were also received from donors, such as Standard Chartered for targeted countries. A total of GBP 2.2 million has been channelled to the COVID-19 response, including GBP 1.4 million for multipurpose cash to meet basic needs.

⁵ for more details refer to the LRC website: <https://www.livelihoodscentre.org/covid-19-help-desk>

In the ESA region, prior to the COVID-19 pandemic, several FSL projects were ongoing with BRC support and funds. BRC has:

- Enabled the expansion of ongoing programmes, such as in Zimbabwe, by increasing the number of beneficiaries, length of assistance, or inclusion of additional geographical areas.
- Contributed to mitigating the impact of multiple crises in Kenya due to simultaneous locust invasions, floods, drought and COVID-19.
- Contributed to RCRCM consortiums for FSL projects, such as in Eswatini with the Finnish RC and Namibia with Spanish RC, where funds were provided as co-funding for ECHO and other donor grants.

In the Sahel region, the existing support to the FSL technical group and the FSL preparedness and cash preparedness programmes, enabled NSs to be ready to understand the FSL impacts of COVID-19 and to advocate and propose FSL actions in the regional coordination mechanisms (PREGEC, Regional FSL working group, humanitarian country teams). BRC has recently shifted to more operational interventions requesting funds to support Chad, Mauritania and Burkina Faso to provide multipurpose cash to meet basic needs in urban areas. BRC is also in discussion with the French RC to implement a regional plan of action, to meet basic needs, nutrition treatment and prevention and livelihoods recovery.

3. Challenges

National Societies and the wider RCRCM face different challenges when implementing the FSL response to COVID-19. The most common challenges seen in BRC priority countries in Africa are summarised below.

Refer to **Annex 2** for more details: **Minutes of the discussions with the different Country Managers (CMs) and Programme Managers (PMs).**

3.1 Challenges related to the context

- The primary response to COVID-19 focussed on health and epidemic control measures but the second phase will focus on economic recovery: how can NSs adapt quickly and transition from health to socio-economic interventions? How can resources be rebalanced?
- This is not about shifting from one type of response to another but integrating both considerations. The number of COVID-19 cases in Africa is increasing and the virus will remain present until a vaccine or treatment are available, although it is not known when this will be achieved. There is a need to find a good balance between containment of the COVID-19 pandemic in health terms whilst ensuring appropriate support for those affected by the socio-economic impacts of the COVID-19 prevention measures. Currently the revised IFRC EPoA has allocated 25% of the budget to address secondary impacts, including 12.5% for livelihoods and household economic security, while 37% of the budget is allocated to the health response.
- **Multiple crises** are ongoing in Africa, leading to significant food crises and chronic deterioration of LLH due to drought, water scarcity, locusts, floods and protracted conflicts. COVID-19 has exacerbated the issue. In WCA, three scenarios were developed by WFP to estimate the food insecurity at-risk population in the context of COVID-19. In total, the population at-risk could feasibly double compared to the figures prior to the pandemic, increasing from 21.9 million to

51 million people in need of immediate food assistance (IPC3).⁶ **The magnitude of the requested response** exceeds any scale.

- **Funding opportunities** to tackle food insecurity in Africa were already limited prior to COVID-19, especially to address chronic food insecurity. Today, competition for resources is much more evident as funds are channelled to the COVID-19 health emergency response.
- The COVID-19 pandemic has impacted two areas that NSs are less familiar with:
 - **Urban settings:** in the FSL sector, NSs in Africa often work in rural areas, while COVID-19 pandemic containment measures have mainly affected urban settings, **especially the informal sector, which poses challenges for targeting and selection, making it hard to identify and prioritise the invisible and extremely vulnerable.** Many people have been affected by both loss or reduction of their incomes, and increasing prices of basic commodities such as food, water and sanitation products.⁷
 - **Massive disturbance of market systems** and more specifically food supply systems, from production to consumers. NSs are familiar with targeting individual support but less so with working with a whole market system. All market sectors have been impacted including WASH and health services. Health inequalities related to environmental risk prevailed prior to COVID-19 and are now further exacerbated, due to limited access to funds, access to facilities (reduced due to lockdowns or diverted resources) and shortages in medicine supply (shortage of antiretroviral in 73 countries, according to WHO). In urban settings (particularly in informal settlements and low-income communities), water and sanitation services are provided by the informal market that is not regulated. WASH is key in epidemic control and it is important to understand how the market functions in urban areas, user demands for WASH services and commodities and supply chains. This will help the design and implementation of livelihoods interventions related to WASH.
- **Rises in unemployment and reductions of household and individual incomes mean that the risk of human trafficking is heightened.** Organisations have highlighted the increased risks to trafficking for labour exploitation once restrictions are lifted and economic production resumes. Incentives for companies to rapidly scale up production can create demand pressure that drives unauthorised subcontracting, wage reduction and increases risk to exploitation.
- **Increased separation of family members** and people going missing due to quarantine, medical transfers, border closure and death from COVID-19 can add to loss of income in particular for people with vulnerabilities such as unaccompanied children, elderly, those with disabilities or insecure immigration status who were dependent on breadwinning family members. Closure of Internet cafes or lack of access to data may also limit people's ability to transfer funds to family

⁶ [http://www.food-security.net/wp-](http://www.food-security.net/wp-content/uploads/2020/05/WFP_Regional_West_Africa_Market_Impact_Covid19_Update_21042020.pdf)

[content/uploads/2020/05/WFP_Regional_West_Africa_Market_Impact_Covid19_Update_21042020.pdf](http://www.food-security.net/wp-content/uploads/2020/05/WFP_Regional_West_Africa_Market_Impact_Covid19_Update_21042020.pdf)

⁷ The disruption of the market (i.e. increasing prices, shortage of products) for cleaning and disinfection material, soap, water disinfection products and PPE, places the most vulnerable people at highest risk of contamination as they have lost their livelihood and income generation capacity due to COVID-19 and cannot afford protection measures. In addition, access to health care for preventative or curative services are likely to have been affected due to COVID-19 especially for the urban population.

members. Loss of remittances has been a major shock for families and countries who depend on them.

3.2 Challenges related to organisational & operational capacities of NSs

- Multiple crises have impacted households across all sectors, not only livelihoods, and reduced household income. There are **multiple needs that require a multisectoral approach** to have significant impact.
- NSs are already overwhelmed with ongoing responses; they often operate in **emergency mode** and may not have time to think longer-term.
- NSs may **have limited implementation capacities** or they may operate at a smaller scale, due to their capacity, resources or degree of organisational development. In addition, the COVID-19 situation has limited human resources because of insurance issues for staff and volunteers and travel restrictions (volunteers from one region may not be able to travel to another region to support).
- Some NSs have **limited technical capacities in FSL**. One exception is in the Sahel region where the capacity building programme of BRC has contributed to build a technical FSL HR pool, but funding opportunities and capacities limit the scale of operations. NSs have limited capacity to prevent, identify and respond to **protection concerns**, including trafficking and restoring family links (RFL).

4. Strengths of NSs and opportunities to cope with some of the challenges

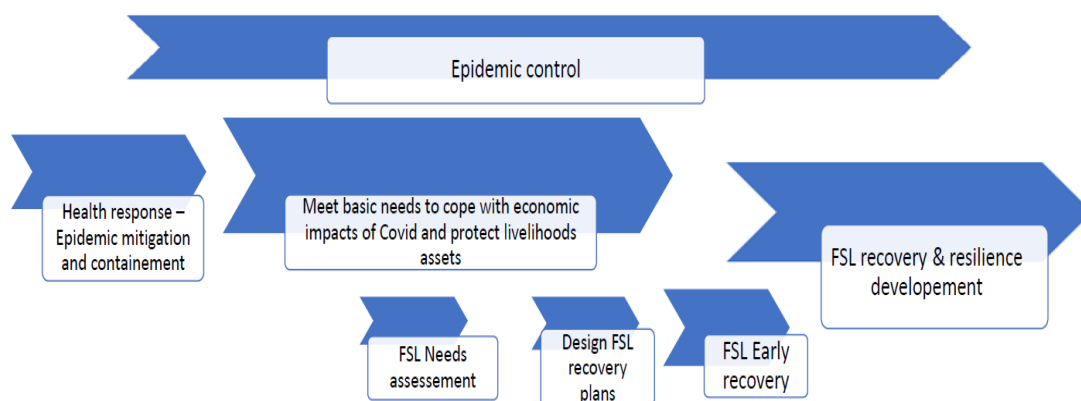
Refer to **Annex 2** for more details: Minutes of the discussions with the different CMs and PMs

<p>Strength</p>	<p>Cash readiness: CVA is a prioritised modality of response for the NSs and has the advantage that it can be used throughout the disaster management cycle, from emergency response to recovery and development. Several NSs in Africa are part of cash readiness programmes to build their capacity for the use of CVA. Some NSs are stronger than others but there is a general acceptance of cash as a modality at institutional levels.</p>
<p>Opportunities to address challenges and to implement FSL interventions</p>	<p>Addressing multiple needs in concomitant crises: The use of cash assistance represents an opportunity for NSs to address the multiple needs faced by communities (food, access to healthcare, access to WASH services, shelter, education etc.). Indeed, CVA is a mechanism to manage multiple crises, should it be through multipurpose cash, letting households decide on their priorities (see example 1 from Kenya below), or through integrating cash and livelihoods to meet health or WASH objectives (see example 2 below).</p> <p>Example 1: Kenya RC are dealing with multiple consequences of the 2019 drought, locust invasion at the beginning of 2020, recent floods and the COVID-19 pandemic. Kenya RC decided to map and overlay the areas affected by these hazards and has proposed a unique response through multipurpose cash transfers to meet basic needs.</p> <p>Example 2: One of the key actions in COVID-19 pandemic control is WASH IPC.⁸ This has created growing demand in the sector and BRC is working on a position paper on how to support income generating activities in the WASH sector through cash grants such as local production of handwashing units⁹, desludging and human waste transport, private water vendors (local kiosks etc..) and solid waste.</p>
	<p>From public health response, to a simultaneous health and food security and livelihoods response: Support to basic needs represents an opportunity for an integrated approach, including both health/epidemic control measures and addressing secondary socio-economic impacts of the pandemic, using cash as modality to provide assistance. Through a transition phase to meet basic needs and protect livelihoods, multipurpose cash can be the most appropriate modality to support people in need and can bridge the period required to conduct a more in-depth assessment and design the recovery strategy. The diagram below summarises the pathway to reposition the resources:</p>

⁸ WASH IPC: WASH infection, prevention and control

⁹ For more information about production of local handwashing unit by social enterprise, please contact WASH team: Debora Bonucci: DBonucci@redcross.org.uk

Fig 1. Suggestion: from health response to FSL response during Covid19 context



Strength

Community network in urban settings:

Although NSs are not familiar with the FSL sector in urban areas, **they can count on a wide presence of their network** with most of their volunteers and most active branches based in urban areas. Therefore, there is strong **capacity of mobilisation for sensitisation, advocacy and close monitoring of activities.**

Opportunities to address challenges and to implement FSL interventions

Faster community mobilisation and targeting:

Many NSs have some experience in emergency response in urban areas, e.g. flood response. They can build on their experience of **targeting in urban settings** and use their continuous presence for rapid assessments and **community mobilisation.** *For more details on targeting and specific challenges in urban settings, please see [chapter 7.](#)*

Use of new technologies:

Urban settings are favourable areas **to use technology and ITC¹⁰ as most people own a mobile phone and can access the internet.** This is an opportunity to build the capacities of communities and NSs. New technology can be used for remote assessments, to facilitate data collection and analysis. If the CVA modality and use of innovative technologies (for example mobile payment, e-transfers, e-catalogue) are combined, small businesses can better adapt to physical distance and no/low touch principle. FSL, WASH and Health could also be integrated and at the same time strengthen NS capacity on the use of new technologies.¹¹ However, it must be noted that those who are digitally excluded are particularly vulnerable, especially where COVID-19 has reduced opportunities to meet in person or use Internet Cafes.

¹⁰ ITC: information, technology and communication

¹¹ Some NS already have experience, e.g. Kenya, Uganda, Malawi, also to some degree Nigeria and Zimbabwe. In Kenya the 121 personal cash aid programme (use of mobile payment) could be great to roll-out and maybe expand to other countries.

Strength	<p>Familiarity with agriculture-based livelihoods: Typically, NSs in Africa are more experienced working in rural areas as these areas have been traditionally the most affected by food crises. FSL projects used to focused on improving food production, with less focus on the development of other components of the food value chain. Within DRR activities and climate change adaptation components of resilience initiatives, rural livelihoods have been core to the work of NS.</p>
Opportunities to address challenges and to implement FSL interventions	<p>Fostering development of climate-smart agriculture and autonomous local production: NSs can use this experience to promote local food independence, nutrition improvement and to support HH engagement with new market linked activities to contribute the economic stability and improved income sources. NSs can build on and promote national agriculture policies that foster local production, processing and consumption.</p>
Strength	<p>Presence in coordination mechanisms: Active participation gives NSs visibility and credibility, while NSs can use these platforms to play an advocacy and influencing role. Their community network represents a comparative advantage for many other organisations and Government.</p>
Opportunities to address challenges and to implement FSL interventions	<p>Compensating for limited resources (funds and expertise): influencing policies To overcome limited funds, limited expertise and to reach a larger scale, NSs can make the most of partnerships with other organisations, using their comparative advantages to have an advocacy role and influence decision-making mechanisms to channel funding to relevant plans and actions. This approach has led to positive impacts in the Sahel (PREGEC-Cadre harmonise mechanism), Eswatini (social protection) and the Southern Africa Regional Food Security Nutrition Working Group.</p>
Strength	<p>Membership of global Red Cross/Red Crescent Movement NSs are part of the global RCRCM and can count on different Partner National Societies and technical reference centres such as Livelihood Resource Centre, Cash Hub, CEA hub, Trafficking Response hub, Central Tracing Agency and the Climate Centre.</p>
Opportunities to address challenges and to implement FSL interventions	<p>Compensating for limited HR and expertise: peer to peer technical support within RCRCM Organisational development is an integral part of PNS support within FSL programming. This is reinforced by the capacity of partners and peers to deploy technical assistance such Global Surge and Rapid Response delegates. This surge support is available not only for FSL technical support but also in other programmatic areas, finance and logistics management.</p> <p>All NS are obliged to have an RFL service, but RFL capacity will vary depending on priority given by the NSs. As a key protection activity RFL should be integrated into the COVID-19 response (prevention of separation messages, provision of means for families to keep in contact) and recovery (tracing missing family members, facilitating family reunion).</p>

5. How can BRC approach FSL programming in Africa in the context of COVID-19?

BRC, IFRC and LRC have recently developed a detailed matrix with response options that can be implemented under the Livelihoods and Households Security Economy pillar of the EA. This is not exhaustive, but it gives recommendations to guide NSs and their partners on possible activities that can be implemented in the context of COVID-19. The matrix can be found [here](#).

The present document does not intend to duplicate this list of response options but to provide BRC regional teams with a more tailored approach, based on the considerations highlighted above. The proposed approach has been developed based on community needs analysis from secondary data (F&N clusters or FSL working groups, UN Humanitarian response plans, IFRC monitoring and updates, NSs' observations), opportunities and challenges raised from the consultations with Country and Programme Managers and NSs response plans.

Another point to consider is the paradoxical situation of lockdown relaxing while the COVID-19 caseload is increasing in most African countries. The future evolution of the pandemic is uncertain, and it is important not to lose focus on the infection, prevention and control (IPC) approach in addressing COVID-19 while implementing FSL interventions. DM preparedness of NSs should thus be well-thought through.

5.1 Overall BRC FSL approach in COVID response

Country and Programmes Managers emphasised the need to consider limited capacities and challenges that our partners are facing, and therefore any strategy or approach **must be simple, easy to implement and not require a lot of HR and expertise**.

The proposed approach may respond to two objectives

1. Meet the basic needs of people affected by primary and secondary impacts of COVID-19 containment measures
2. Support economic recovery of communities and preparedness for other health and/or economic crises

The initial BRC FSL Strategy to achieve the Directorate Chronic Hunger strategic objectives elaborated in 2018, agreed that the added value of BRC is focusing on the ACCESS pillar of the food security conceptual framework¹² while not diverting efforts that promote increased food availability and utilisation (nutrition sensitive).

¹² 170901 FS strategy in brief.pdf- It was noted that many organisations working on food security focus on sustainable livelihoods to increase availability through improved production. Such activities are often a key component of resilience programming. This has also been the primary focus of food security related interventions by the RCRC Movement including BRC. There are also other organizations including WFP that focused on food assistance and agencies such as UNICEF specialise on utilisation through nutrition programmes. This initial scan, while not comprehensive, indicated that there were fewer organisations focusing attention on improving access. It suggested an opportunity for BRC and the RCRC Movement to explore that could capitalise on current aspects of its FSL and resilience programming, the established local presence and unique auxiliary role of national societies, and the recognised status and ability of ICRC to gain access and provide assistance in complex situations. A potential focus on food access would not detract from existing BRC programming that promotes increased food availability. Similarly, there is a recognised need for more nutritional sensitive approaches for FSL interventions although leaving technical nutritional based interventions to specialised agencies, and seeking operational partnerships where such activities are required.

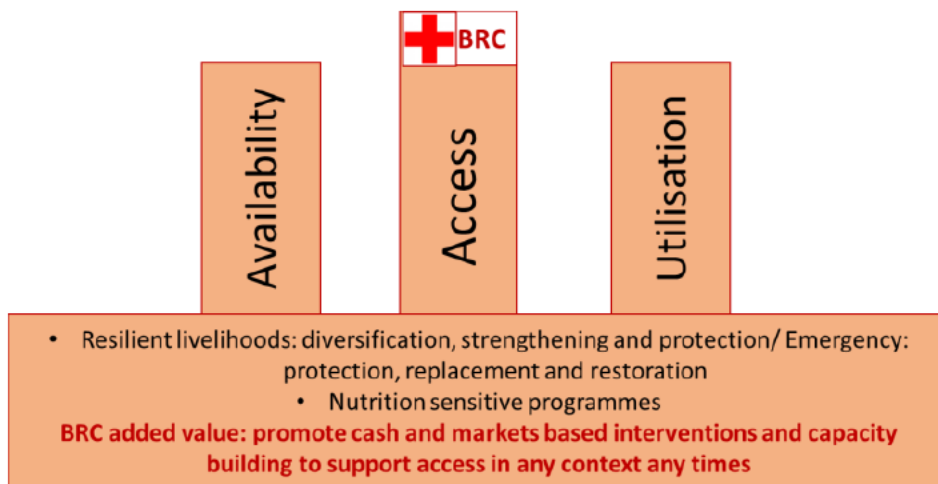


Figure 3: Potential added value of a focus on access

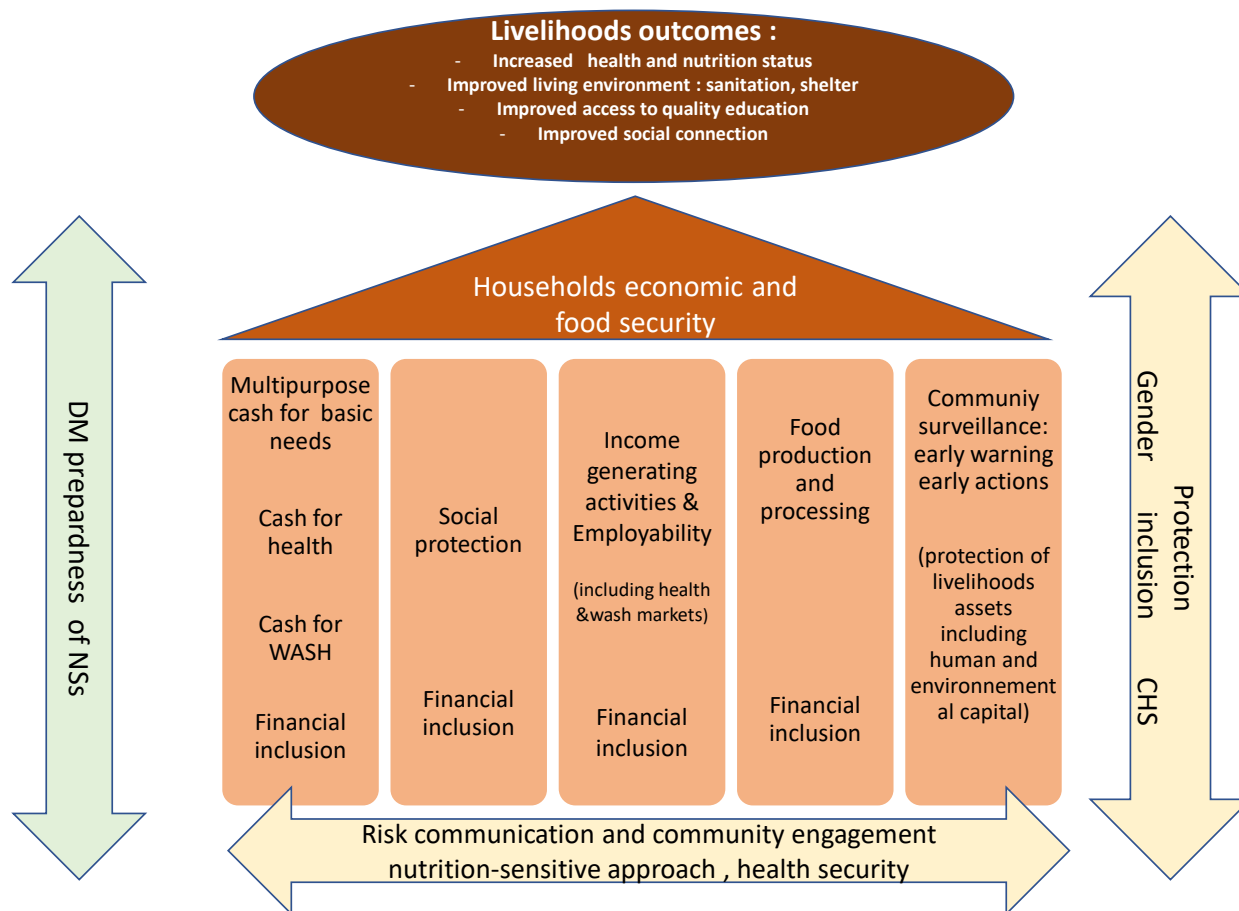
With the COVID-19 situation, this approach is more relevant than ever as the main drivers of food insecurity due to COVID-19 are reduced incomes, weakened economies and difficulties with physical access to food. In addition, integration of

WASH, Health and DRR is crucial not only to ensure protection of staff and communities against the spread of the virus but also to protect the socio-economic capital of livelihoods. Ensuring economic recovery while protecting health and enabling a safe environment is the pivot of the COVID-19 secondary response and business continuity. WASH, Health and DRR components should be encompassed in FSL interventions to achieve sustainable food and economic objectives. Cross cutting issues must also be considered, especially protection, gender, diversity and inclusion.

Hence seven workstreams have been identified where BRC could channel support to FSL:

1. Respond to basic needs, respond to concurrent crises and protect livelihoods through CVA, *(replace and protect)*
2. Recover/develop income generation activities and employability in rural and urban areas: promoting CVA and market-based programming, *(restart, replace and diversify)*
3. Strengthen food production and food processing, *(replace, restart, diversify)*
4. Link with social protection programmes in place by Governments, *(protect and strengthen)*
5. Ensure financial inclusion of marginalised communities, *(protect and strengthen)*
6. Develop community surveillance and early warning, early action protocols and preparedness *(protect)*
7. Continue RCCE (risk communication and community engagement), *(protect)*

The overall approach can be structured in the following way:



The proposed approach is designed in three segments, considering the timing of the IFRC COVID-19 EPoA, the current available resources (G funds, Standard Chartered, DEC funds) within BRC to contribute to multilateral and bilateral support to COVID-19 response, and opportunities for new funds in the future for longer term programming. **The 3 phases are:**

- a) **July 2020 to December 2021** (timeframe of the EPoA): through **BRC multilateral support**, there are opportunities to influence IFRC EPoA and country plans
- b) **BRC bilateral support** for FSL programming in BRC priority countries with **available resources**
- c) **BRC bilateral support** in case of **new funding opportunities**, (FSL long-term programming)

For each of these three phases, the table below outlines the FSL workstreams that are most applicable. Following this table, **sections 5.2 to 5.8** explain in detail each of the workstreams; how they align to the three phases of support, and some key points that should be considered to ensure the technical quality and efficiency of the programmes.

BRC multilateral FSL support to IFRC EPoA, July 2020 to December 2021	BRC bilateral support for FSL programming in BRC priority countries with available resources	BRC bilateral support for FSL programming in BRC priority countries in case of new funding opportunities
<p><u>Workstream 1</u> (see section 5.2): Multipurpose cash for basic needs and livelihoods protection, including health and WASH</p> <p><u>Workstream 2</u> (see section 5.3): Restart income generating activities in urban and rural areas</p> <p><u>Workstream 4</u> (see section 5.5): Increase linkages between humanitarian assistance and Social protection (SP) programmes</p> <p><u>Workstream 6</u> (see section 5.7): Community surveillance for early warnings for food and nutrition security</p> <p><u>Workstream 7</u> (see section 5.8): RCCE</p>	<p><u>Workstream 1</u> (see section 5.2): Multipurpose cash for basic needs and livelihoods protection, including health and WASH</p> <p><u>Workstream 2</u> (see section 5.3): Recover and develop market-oriented income generating activities and improve employability</p> <p><u>Workstream 3</u> (see section 5.4): Strengthen food production and food processing (market-oriented)</p> <p><u>Workstream 4</u> (see section 5.5): Increase linkages between humanitarian assistance and Social protection (SP) programmes</p> <p><u>Workstream 5</u> (see section 5.6): Develop financial inclusion of vulnerable and marginalised communities</p> <p><u>Workstream 6</u> (see section 5.7): Community surveillance- develop early warning, early action protocols (anticipate food crises) and FbA pilots</p> <p><u>Workstream 7</u> (see section 5.8): RCCE</p>	<p><u>Workstream 1</u> (see section 5.2): Multipurpose cash for basic needs and livelihoods protection, including health and WASH</p> <p><u>Workstream 2</u> (see section 5.3): Develop market-oriented income generating activities and improve employability</p> <p><u>Workstream 3</u> (see section 5.4): Strengthen food production and food processing (market-oriented/more complex value chain)</p> <p><u>Workstream 4</u> (see section 5.5): Increase linkages between humanitarian assistance and Social protection (SP) programmes</p> <p><u>Workstream 5</u> (see section 5.6): Develop financial inclusion of vulnerable and marginalised communities</p> <p><u>Workstream 6</u> (see section 5.7): Community surveillance- develop early warning, early actions protocols (anticipate food crises) and FbA scale up</p> <p><u>Workstream 7</u> (see section 5.8): RCCE</p>

5.2 Workstream 1

Respond to basic needs, respond to concomitant crisis and protect livelihoods through CVA

Ensure that basic needs are met, using a gender, age and diversity lens, reduce the risk of using negative coping strategies and protect livelihoods assets. When CVA is not feasible, NSs must consider the use of in-kind distributions. SOPs for CVA and in-kind distributions in the COVID context are available: see resources on the IFRC Livelihoods Resources Centre (LRC) website:

- [Tip sheet: Cash and Voucher Assistance and COVID-19](#)

- Distributions in COVID-19 contexts

Nevertheless, if the support provided is not well aligned with the needs, assistance may be inadequate to meet the objectives and people still cannot meet their basic needs or protect livelihoods. The minimum expenditure basket (MEB) does not always include secondary costs related to health (travel to seek healthcare, medicines) or costs of a balanced nutritious diet.¹³ Often, the support does not cover 100% of the gap in the needs and therefore is not enough to protect livelihoods assets. Alongside the appropriate transfer value, the duration of the assistance is key to achieving objectives. Ideally, this assistance should cover and relieve people in need from the stress of covering their basic needs to prevent assets depletion, until they are self-reliant.

Key points to consider:	⇒ Transfer value of multipurpose cash based on the analysis of the uncovered gap of the minimum expenditure basket (MEB) and appropriate duration to be defined considering people’s recovery timeliness
	⇒ In-kind support inclusive, adapted to the needs of different groups and enough duration to allow people recover their self-sustainment capacity
	⇒ Consider the use of cash for work for infrastructure activities that may improve access to sanitation for specific vulnerability groups while providing incomes
	⇒ Advocate to include health costs in the MEB and factor in increased health costs to account for inflated prices related to supply chain disruptions, increased transport costs due to movement restrictions, less availability of health care services (non-covid) as resources have been diverted
	⇒ Advocate to include balanced-diet costs in the MEB. Promote nutritious diets through conditional vouchers for traders providing fresh produce, and explore the possibility of integrating fresh food from local producers in the food parcels distributed in-kind
	⇒ Target priority HH with children under 5, pregnant and lactating women, and elders and people living with HIV, as they are most at risk of malnutrition
	⇒ A Cash & Nutrition decision making tool has recently been developed by a consortium in WCA, including French RC – this tool aims to identify key factors of malnutrition and opportunities to use cash to address these causes. <i>For more detail please contact BRC FSL team.</i>

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This is the response option that corresponds to BRC priority areas. Support can be earmarked to this type of programme in the EPoA, or non-earmarked depending on the context.	In East & Southern Africa and Sierra Leone, BRC is already supporting this type of programme through CVA (linking with CEA and health). This also corresponds to BRC donor priorities. In the Sahel region, BRC is in discussion with French RC to support a regional approach that includes CVA to meet basic needs, protect livelihoods and ensure nutrition care. Home-based nutrition care for non-complicated malnutrition cases are promoted to ensure care continuity.	The recommendation is to scale up cash and livelihoods preparedness programmes for all NSs, to contribute to making all African NSs cash ready and with increased capacity for needs assessment.
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¹³ MEB includes costs of common hygiene items

5.3 Workstream 2

Recover/develop income generation activities and employability in rural and urban areas: promoting CVA and market-based programming

To meet the desired objective of economic recovery, income generating activities need to be market oriented. Individual support has shown limitations if individuals are not supported to be included in the whole market system. Working on inclusion to the market or market systems is a new area for most of NSs in Africa. Therefore, **capacity building in market-based programming** is needed to understand market dynamics and the system.

There is a need to better define the expected outcomes of the interventions to ensure the intervention will impact food, economic and nutrition objectives independently of the modality of support. The use of cash as preferred modality shouldn't undermine the analysis of the intended outcomes. Cash grants can be used to support livelihoods recovery in both rural and urban areas, through conditional cash for assets replacement or farming inputs. Cash can be also the transfer modality of assistance to support skills for increased employability or capital start up for self-employment. For example, "livelihoods recovery" is mentioned as a goal in some EPoAs, whereas the cash distribution is only planned in 2 or 3 instalments and covers less than half of the MEB without any other additional interventions. The provision of cash alone may not result in the broader impact intended, if it's not appropriately designed to meet the objectives. A good balance between **flexibility and conditionality** must be found.

Key points to consider:

In rural areas:

- ⇒ **Support assets replacement: when feasible prioritise CVA, for agriculture-based livelihoods: seeds, tools, drip-irrigation systems, animal food; and cash for work (high labour-intensive work).**
- ⇒ **Use this opportunity to promote climate adaptation capacity building. Some basic climate smart agriculture practices are explained in the Easy Volunteer Action handbook¹⁴ (e.g. organic fertiliser, composting/mulching, intercropping, water conservation methods) that can be disseminated by volunteers.**
- ⇒ **Analyse the food value chain to identify blockages and support market functionality to ensure enough food is available; support farmers to engage with processes and trade for incomes diversification**
- ⇒ **Support farmers and small rural businesses to adapt to COVID-19 protection measures; explore innovative, easy technology: seeds delivery services, e-transfers for daily worker salaries**

In urban areas:

- ⇒ **Identify critical markets that are expanding and provide opportunities for entrepreneurship and develop value chain analysis to support decision making business support**
- ⇒ **Support recovery and preparedness for small business: Cash grants to restart activities and to adapt to COVID protection and prevention measures, provide capital start-up for new businesses based on market analysis, including new opportunities in COVID-19 context (e.g. local production of masks, soap, tippy taps, roof rainwater harvesting installation, waste management, FSM etc)**
- ⇒ **Support innovative adaptation for small businesses with innovation, easy technology to adapt to COVID-19 protection measures (e.g. delivery services, e- and digital payment, e-payment at water kiosk, small solar chargers to allow e-payment)**
- ⇒ **Identify market opportunities/innovations in WASH and Health to develop income generating activities in this sector and to reach double objectives of FSL and WASH/Health. Further details on Cash transfer and markets-based programming in support to**

¹⁴ Action: a handbook for supporting disaster prone communities with food security and livelihoods activities
<https://www.livelihoodscentre.org/web/livelihoods-centre/-/easy-volunteer-actions>

	<p>WASH interventions can be found here. For Cash and Health, the document is under development and will be available soon.¹⁵</p> <p>⇒ Advocate for certification of COVID safe businesses and support entrepreneurs to adapt</p>		
	BRC multilateral FSL support to IFRC EPoA, July 2020 to December 2021	BRC bilateral support for FSL programming in BRC priority countries with available resources	BRC bilateral support for FSL programming in BRC priority countries in case of new funding opportunities
	Generally simple income generating activities (businesses) are considered in IFRC EPoAs, taking into account the timeframe for training, implementing and the need to have results within the EPoA timeframe.	Ongoing programmes in Sahel region with FRC, in Kenya with the End of Chronic Hunger project where cash grants for income generating activities are core of the intervention. Skills-improvement to increase employability of self-entrepreneurs or employees must be part of the support (vocational training) based on market assessments, identification of growing sectors and new opportunities created by COVID-19 adaptation.	Given that the programmes are longer-term (more than 18 months), several market sectors or more complex markets can be considered. Employability component can be developed, based on labour market assessments, identification of growing sectors and new opportunities created by COVID-19 adaptation.

5.4 Workstream 3

Strengthen food production and food processing	
<p>Local production, food autonomy and independence have become a global concern more than ever and specifically for vulnerable communities, not only because of climate change but also because the COVID-19 pandemic has highlighted the limits of the globalisation of food systems. In addition, the COVID-19 situation has revealed the need for diversifying distribution channels thanks to food conservation and processing, to avoid loss of harvest and fresh food that were distributed through the tourism industry.</p>	
Key points to consider:	<p>⇒ Promotion of climate smart agriculture through permagardens, keyhole gardens, sack gardening and vertical gardening¹⁶ in urban areas, drought resistant seeds/small grain seeds, drip irrigation and seedling nurseries. In areas affected by locust invasion, promote nets to protect the gardens</p> <p>⇒ Promotion of the Easy Volunteer Action: a handbook for supporting disaster prone communities with food security and livelihoods activities¹⁷ (especially sections on garden, seedling nurseries, fertilizer, compost, water conservation, improved farming practices)</p>

¹⁵ For further technical tips for WASH & Cash: contact DBonucci@redcross.org.uk For Health & Cash contact: VOLivetto@redcross.org.uk

¹⁶ <https://www.theguardian.com/global-development-professionals-network/2015/may/18/how-to-grow-food-in-a-slum-sack-farmers-kibera-urban-farming>; Vertical gardening with plastic bottle feeders <https://www.youtube.com/watch?v=7BPuKPB3oAE>
<https://theconversation.com/africa-needs-its-own-version-of-the-vertical-farm-to-feed-growing-cities-74929>

¹⁷ *Action: a handbook for supporting disaster prone communities with food security and livelihoods activities* <https://www.livelihoodscentre.org/web/livelihoods-centre/-/easy-volunteer-actions>. This handbook describes 12 activities that Red Cross and Red Crescent volunteers can easily carry out by themselves using resources already available in the community. Developed in partnership with the Livelihood Resource Centre, each activity has been carefully selected to increase the ability of people to produce more food and income and to stay safe and healthy in areas where there are challenges such as droughts and floods and other hazards related

	<p>⇒ Support capacity building at HH level for post-harvest management to reduce loss and waste of food</p> <p>⇒ Support linkages between farmers and processing units for alternative manufactured products (encourage establishment of partnerships with local processing units or private sector such as ASPUNA¹⁸)</p>		
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	Given the timeframe, priority support should go to existing initiatives aimed at reinforcing the activities and optimising ongoing processes thanks to value-chain analysis and integration of improved techniques.	Depending on the timeframe of programmes, building on existing or creating new agriculture-based livelihoods must be analysed considering marketing and partnership opportunities.	Given the longer term, more complex food value chains can be explored, and long-term partnerships built with external actors.

5.5 Workstream 4

Link with social protection programmes in place by Governments

Depending on the country political and development context, the government led social protection programmes are different, and in some countries also humanitarian and development actors and UN agencies are implementing social safety nets. Where programmes exist, NS can decide to engage and complement the support provided by other actors. Most of the social protection related programmes use cash as modality for assistance, yet still there are others that include in kind distributions. NS with experience using CVA and capacity, thanks to cash readiness, could have a leading role. For example, Eswatini RC advocated for their Government to use CVA in their social safety nets for COVID-19 response, and then Eswatini RC became “consultant of their Government” for CVA.

Engaging with Social Protection is an opportunity for NS that want to play an increasingly active role as auxiliary to their Governments. BRC International strategy for CH is a commitment to explore and support partner NSs develop these relations with their Governments: this is even more appropriate as more and more countries and donors are considering the use of social protection systems to address the needs of seasonal or humanitarian crises (shock responsive social protection programme).

BRC partners in Kenya, Eswatini, Namibia are already engaging with social protection systems. The IFRC as co-chair of Grand Bargain workstream on cash and social protection is committed to this. And a new Movement technical working group on cash and social protection has been created to support the development of this area.

to changing climate. Most of the activities in the handbook will be very useful right now for households facing the impact of COVID19 including simple WASH practices, backyard gardens and nutrition, while also promoting environmentally friendly activities such as simple energy efficient cookstoves, organic compost and fertilizer, and water harvesting and conservation.

¹⁸ BRC is in discussion with ASPUNA group, an international social enterprise providing consultancy and engaged in local processing as a powerful vehicle for socio-economic development. They build strong and fair partnerships with local suppliers and producers placing great emphasis on socially responsible processing and trading <https://www.aspuna.com/>

There are several strategies that may be employed to scale up the system’s overall level of support to vulnerable people, which is the concept of shock responsive social protection programmes. Here is a one pager which explains the strategies:

ipcig.org/pub/eng/OP344_Conceptualising_shock_responsive_social_protection.pdf

However, the role of NSs in this space will depend on the context and the compliance with the humanitarian principles. BRC aim at having a leading role in the Movement and will continue its co-leading role within the IFRC cash and social protection working group to build the approach. In WCA, the Sahel region have not yet endorsed the pathway, contrary to Sierra Leone, and needs more outreach. *For more information, please contact the FSL team.*

Key points to consider:	<ul style="list-style-type: none"> ⇒ When supporting people affected by crisis, NSs can consider filling gaps in the coverage of the social protection programmes ⇒ Kenya RC experience can provide guidance for engaging with existing programmes and the role of NS in targeting and registration ⇒ Build on the Eswatini experience in advocacy towards their Government to use cash in the social protection programmes ⇒ NS to become the voice that advocates for the inclusion of most vulnerable, especially women, undocumented population, migrants or displaced, elderly and other vulnerable groups ⇒ In regions/ countries where this is not yet a relevant objective, RCRC Movement can be the lead agency to take social protection into discussions for humanitarians 		
	BRC multilateral FSL support to IFRC EPoA. July 2020 to December 2021:	BRC bilateral support for FSL programming in BRC priority countries with available resources	BRC bilateral support for FSL programming in BRC priority countries in case of new funding opportunities
	As much as possible, explore how humanitarian support could be complementary to existing social protection programmes.	NS to be part of the coordination groups/ working groups for cash and social protection as part of the capacity building programmes. BRC UKO to continue working with IFRC in the RCM social protection and cash working groups. Continue the pilot for shock-responsive social protection programmes in Namibia, Eswatini and Sahel in order to scale the approach.	Continue advocacy and capacity building work and scale up the pilot experiences.

5.6 Workstream 5

Ensure financial inclusion of marginalised communities

During the COVID-19 response it has been noted that people who work in the formal sector, who are registered, who have a bank account or are connected, have received assistance faster than those who were not registered and still needed to be identified and accompanied to get a mean to receive the assistance.

In addition, those who had a saving scheme such as insurance, bank savings or membership of formal or informal saving groups, have coped better and adopted fewer negative coping strategies. Ensuring financial inclusion of marginalised people and informal workers is a key preparedness activity.

Key points to consider:

- ⇒ **Support marginalised people and non-registered people to obtain formal identity documentation**
- ⇒ **Accompany marginalised people, non-registered people and informal workers to get bank accounts. If these groups cannot get a bank account, it is still possible to include them in CVA programmes by putting in place a system for mobile payment and mobile money transfer (mobile phone)**
- ⇒ **Support the development of community saving and loans groups (Mothers Clubs or VSLA model), based on the experience of HCR.¹⁹ This could apply to refugees and IDPs too.**

BRC multilateral FSL support to IFRC EPoA. July 2020 to December 2021:	BRC bilateral support for FSL programming in BRC priority countries with available resources	BRC bilateral support for FSL programming in BRC priority countries in case of new funding opportunities
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Ensuring financial inclusion takes time and given the EPoA timeframe, priority should be given to find alternative distribution schemes to ensure that the non-registered are receiving humanitarian assistance, through mobile or e-transfers.	Financial inclusion goes beyond having means to receive assistance, to include supporting individual or group saving and insurance schemes. Ongoing programmes: Mothers clubs in Sahel, Namibia and Kenya. To be explored: Innovative community currencies in Sierra Leone for insurance.	Financial inclusion should be linked with the work in social protection capacity building. This timeframe allows NSs to play a role in civil registration Saving groups (such as mothers Clubs or VSLA) should be encouraged as much as possible. It could be an opportunity to reinforce local NS branches supporting volunteer capacity building to develop savings and loans groups and to disseminate it to the communities (many local volunteers are as vulnerable as the targeted communities)
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5.7 Workstream 6

Develop community surveillance and early warning, early action protocols and preparedness

NSs have an emergency response mandate and are part of national early warning systems. They have community proximity and volunteer networks and are therefore expected to provide real-time surveillance of the humanitarian situation. Volunteer networks could monitor key FSL indicators to provide a quick overview of the evolution of the situation (qualitative information) and raise warnings to engage in deeper assessment or analysis. In the Sahel region, the PREGEC mechanism has established this surveillance at the national level through the National early warning systems, and NSs can be the link at the local level. Kenya is about to pilot a community FSL monitoring table, Burkina RC has developed an MoU with their Government to ensure data collection in remote areas (protracted areas especially). Indicators on health, WASH and protection issues can also be included.

¹⁹ HCR: High Commissioner for Refugees (UN)

Food security early warning national systems are working quite well: information related to extreme weather, food prices, production and availability, levels of food and nutrition insecurity are monitored to support governments, humanitarian organisations and communities to effectively anticipate and prepare for humanitarian needs. However, reliability, timeliness and up-to-date information can be improved, as well as planning and financing anticipatory actions. In addition, at a time when health systems and economies are overwhelmed by the pandemic, early action is evidenced to be better value for money than response and more effective at saving lives.

Key points to consider:

- ⇒ **Expand the experience of FSL community monitoring indicators in Kenya and Burkina**
- ⇒ **Develop community surveillance mechanisms, collection and monitoring of data & indicators on food insecurity, to feed into/alert government systems and advocate for early action**
- ⇒ **Continue to pilot programs on FbA for drought in Niger, Kenya, Namibia and Eswatini and scale up to other countries in the Sahel so that NSs are eligible to access FbA by the DREF funding, or other anticipatory funding mechanisms especially in the context of compounding risks, including COVID-19 related risks**
- ⇒ **Linkages with cash preparedness (tailored CVA for early action)**
- ⇒ **Linkages with social protection (shock-responsive social protection programming and advocacy)**

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Community surveillance is generally a weak component in the EPoAs. BRC should advocate for more inclusion of this component, especially in the DRR pillar.	Ongoing programmes: FSL surveillance during COVID-19 pandemic in Sahel, Kenya, Burkina Faso. Reinforce the Sahel experience in the Cadre harmonise/IPC analysis mechanism and support linkages with operations. FbA for drought piloted in Namibia, Eswatini and Sahel countries. Retake plan of community surveillance in Zimbabwe and other countries in SA when feasible Further studies may be done to incorporate epidemic dimension in the analysis (triggers? Impact?).	Continuing and scaling up the forecast based action (FbA) approach that has started to be piloted in different countries for drought or floods, makes sense now more than ever, as epidemic and climate related hazards repeat one after another. Integration of livelihoods protection as Early Action as part of Emergency Action protocols and shock responsive social protection as early action in the EAP.

5.8 Workstream 7

Continue RCCE (risk communication and community engagement)

All response options represent opportunities for RCCE, and the dissemination of key messages on health, WASH and nutrition practices. Built on the community network of the NSs, this should be coordinated according to analysis of the context and identified priorities (issues that can harm health and impede epidemic control). Feedback mechanisms are key to feed into the content of the RCCE approach.

Key points to consider:	<p>⇒ Coordinate RCCE communication with the risk analysis conducted by WASH, Health, Nutrition and Protection sectors (see the TA Global Technical Guidance on COVID-19)</p> <p>⇒ Include nutrition messages and awareness sessions in all interventions: How to promote nutrition</p> <p>⇒ Disseminate extreme weather warnings and season specific household preparedness messaging (heatwave, floods, drought, locust, etc.)</p> <p>⇒ Link with CEA department for adapting messages to communities</p> <p>⇒ Link with RFL department to ensure prevention of separation messages included for communities. Provide RFL services through existing RFL and non-RFL programmes e.g. access to making telephone calls, ensuring family members are informed of admission to healthcare facilities, providing persons in quarantine/hospital a means to maintain family contact.</p> <p>⇒ Disseminate Emergency Contact Cards and RFL prevention of separation messages (UK emergency contact cards can be found in 36 languages at redcross.org.uk/trace and could be adapted to the local context by the NS) and contacts for local RFL services (contact details can be found on familylinks.icrc.org). ICRC has created a dedicated RFL in COVID page on the RFL FLExtranet where NS exchange learning and practice on RFL COVID responses, as well as publishing various guidance including an Emergency Contact Card template.</p>		
	BRC multilateral FSL support to IFRC EPoA, July 2020 to December 2021:	BRC bilateral support for FSL programming in BRC priority countries with available resources	BRC bilateral support for FSL programming in BRC priority countries in case of new funding opportunities
	RCCE for epidemic control is core of the EPoA and is the component which is well-received by most donors. BRC must continue to advocate and raise funds for this component.	RCCE is part of the most ongoing FSL programmes and BRC should reinforce the context analysis to tailor the content of RCCE.	In longer-term programming, RCCE represents an opportunity to achieve deeper social behaviour change.

6. Cross-cutting issues

a) Implementation must be compliant with Sphere and Core Humanitarian Standards (CHS) and must integrate commitments and minimum standards relating to gender-equity and Protection Gender and Inclusion (PGI), to which BRC and their partners have subscribed. Below are some infographics on how to include gender equity and PGI considerations, understand and mitigate the risks of trafficking, and include migrants and displaced people in COVID-19 responses. More resources can be found in on Livelihoods Resource Centre website²⁰ (click to follow links):

- Gendered impact on Livelihoods COVID-19: [LRC infographic EN](#) and [WFP factsheet EN](#)
- PGI in Livelihoods interventions COVID-19 [EN](#)
- COVID-19 Livelihoods response options for migrants and displaced people [EN](#)
- Impact of COVID-19 on Trafficking in Persons factsheet [EN](#) and technical guidance [EN](#)
- Resources relating to Protection, Gender and Inclusion can be found on the [IFRC GO Platform](#)
- Protection of Family Links during COVID-19 [EN](#)

²⁰ <https://www.livelihoodscentre.org/covid-19-resources>

- b) BRC has duty of care and “do no harm” principles towards their staff and volunteers and communities they serve. Specific awareness-raising methods and equipment will be used in order to protect and mitigate the risks to staff, volunteers and recipients of interventions. Each sector and activity have developed sanitary protocols based on barrier measures to limit COVID-19 contamination. Programme managers should refer to these protocols, which are usually country specific.

Regarding duty of care to staff and volunteers, refer to the following guidance on PPE, including procurement, stocking, supply chain and rational use, to make PPE available to all staff and volunteers working in roles that require it. Psychosocial resources should also be made available:

- Personal Protective Equipment (PPE) supplies for COVID-19 - specifications and users (25/3/20) - [EN](#) *
- WHO: Rational use of personal protective equipment for coronavirus disease 2019 (COVID-19) (27/2/20) - [EN](#)
- Mental Health and Psychosocial Support for Staff, Volunteers and Communities in an Outbreak of Novel Coronavirus (2019-nCov) (3/2/20) - [EN \(Simplified\)](#) [JA](#)

- c) As part of the Epidemic control component simultaneous to livelihoods recovery, continuity of health and nutrition care should continue to be promoted through sensitive activities integrated in FSL programming. **ACF has published a research-paper** to show the impact of the COVID 19 pandemic on health systems in West Africa and to warn of the importance of ensuring the continuity of primary health services in the context of COVID-19 in order to avoid managing public health problems whose consequences could be more serious in terms of morbidity and mortality. This note should make it possible to initiate a prospective reflection on how best to deal with another similar crisis.²¹

7. Vulnerability criteria and targeting

Defining vulnerability criteria in the context of the multiple impacts of COVID-19 at the global level is a hard exercise, even more so when it comes to targeting and selecting those most in need. The pandemic has pushed 39 million people into extreme poverty in Sub-Saharan Africa (out of 71 million at the global level).²² Usual criteria and targeting methodology are challenged to narrow down the number programme aid recipients, while ensuring efficiency of impact and commitment of participants. Here some recommendations of key points to consider when targeting but further thinking is needed.

- **Urban informal sector: identifying those most at need and innovative approaches to find them.** IFRC has developed some tips for thinking URBAN while responding to the COVID-19 crises, to make sure that our targeting and service delivery modalities are “fit for urban” and contribute to building capacities of National Societies and communities to be better prepared for future disasters and crises in urban areas. In addition to a wealth of guidance documents on the [IFRC GO Platform](#), see additional tips developed for responding in urban areas and informal settlements in the COVID-19 context: <https://www.preparecenter.org/resource/thinking-urban-in-the-context-of-covid-19/>

²¹ [COVID 19: IMPACT ON HEALTH SYSTEMS AND THE CONTINUITY OF ESSENTIAL HEALTH SERVICES INCLUDING NUTRITION](#) , ACF, WCA, July 2020

²² <https://blogs.worldbank.org/opendata/updated-estimates-impact-covid-19-global-poverty>

- Livelihoods resource centre has developed a guidance note **for targeting potential participants in medium and small businesses development projects: Targeting entrepreneurs**. Households are targeted according to their socio-economic vulnerability, the impact of the crisis and their capacity to restart their income generation activity. It requires a good analysis around the different wealth group characteristics in a given context.
- **New technology** presents opportunities to develop innovative approaches that enable **remote needs assessment (such as use of SMS or online surveys), PDM, e-training, etc., offering opportunities to reach the most vulnerable** (on condition of equipping them if needed). Mobile transfer and mobile payment provide the opportunity to reach marginalized communities that are not registered with the government system (ID cards, bank accounts, birth registration etc.).
- **Discriminatory gender norms – which privilege men and boys** – can put women and girls at risk of (or worsen their) food insecurity and malnutrition. With fewer economic resources than men, lesser access to technology, lesser access to information (including knowing what assistance is available or access to it), women may be excluded from the decision-making process and this will mean that women’s needs may be overlooked.²³ Hence it is important to apply a gender lens to planning and targeting, to include both women and men in the discussions and livelihood interventions according to their different needs and capacity.
- As unemployment increases, the risks of trafficking and exploitation increase also: **it is crucial to prioritise livelihood interventions for those most at risk of trafficking and exploitation, especially those in high-risk employment situations**, those in the informal labour market, those who are dependent on their work for immigration/residency status, and those who live with their employer. Separation from family members can also take away family livelihoods and increase protection needs. Restoring family links services and advice should be provided to address separation concerns, including dissemination of emergency contact cards, RFL prevention of separation messages (see a UK example that can be adapted at [redcross.org.uk/trace](https://www.redcross.org.uk/trace)) and contacts for local RFL services (contact details can be found on [familylinks.icrc.org](https://www.familylinks.icrc.org)).
- Generally, to avoid duplication, benefitting from social protection programmes excludes an individual from receiving additional RCRCM programme aid. Nevertheless, often social assistance is inadequate to meet needs, that is the case of a recent experience in Namibia in response to the food security crisis in the country. By definition the beneficiaries of social protection programmes are the most vulnerable and the assistance they receive is limited to the survival threshold, so it is normal that these people will be part of the poorer groups and thus fulfil the vulnerability criteria, despite the social assistance support. NS can decide to support the temporary vertical expansion of social protection programmes and top up the assistance the most vulnerable receive to support them meet their needs in the new circumstances of the COVID-19 crisis. Exclusion shouldn’t be automatic but decided on a case by case basis depending on the context and programme objectives.

²³ https://fscluster.org/sites/default/files/documents/wfp_-_gender_covid19_-_en.pdf

Acronyms

ACF: Action Against Hunger International	IPC3: Integrated Food Security Phase Classification 3
BRC: British Red Cross	ITC: Information, Technology and Communication
CEA: Community Engagement & Accountability	LLH: Livelihoods
CH: Chronic Hunger	LRC: IFRC Livelihoods Resource Centre
CHF: Swiss Francs	MEB: Minimum Expenditure Basket
CHS: Core Humanitarian Standards	MoU: Memorandum of Understanding
CM: Country Manager	NS: National Society
CVA: Case & Voucher Assistance	PDM: Post Distribution Monitoring
DEC: Disasters Emergency Committee	PGI: Protection, Gender & Inclusion
DM: Disaster Management	PM: Programme Manager
DREF: Disaster Relief Emergency Fund	PMEAL: Planning, Monitoring, Evaluation, Accountability & Learning
DRR: Disaster Risk Reduction	PNS: Partner National Society
EA: Emergency Appeal	PPE: Personal Protective Equipment
EPoA: Emergency Plan of Action	RCCE: Risk Communication & Community Engagement
ESA: East & Southern Africa	RCRCM: Red Cross Red Crescent Movement
FBA: Forecast based action	RFL: Restoring Family Links
FSL: Food Security & Livelihoods	SOP: Standard Operating Procedure
FSM: Faecal Sludge Management	UKO: UK Office
GBP: Great British Pounds	VSLA: Village Savings & Loan Association
HH: Household	WASH: Water, Sanitation & Hygiene
HR: Human Resources	WCA: West & Central Africa
ICRC: International Committee of the Red Cross	WFP: World Food Programme
IFRC: International Federation of the Red Cross	WHO: World Health Organisation
IPC: Infection Prevention and Control	