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Social Protection Responses to COVID-19: Building a Better Future for Every Child in East Asia and Pacific

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10.1. INTRODUCTION

The COVID-19 pandemic is a public health and development crisis that has dealt a colossal shock to economies and societies worldwide. The East Asia and Pacific region was the site of the first outbreak of the COVID-19 pandemic in December 2019 and, until the first half of 2021, witnessed successes in containing morbidity and mortality through early interventions in a number of countries, compared to other regions. East-Asian and Pacific countries were nonetheless strongly impacted by the pandemic, both economically and socially, especially in the third wave which started in February 2021.

As the UN Secretary-General stated in *The Impact of COVID-19 on Children* (UN, 2020a), “Children are not the face of this pandemic, but they are at risk of being among its greatest victims.” To understand the complex socio-economic impact of COVID-19 on children and their families, UNICEF has worked in three different directions. The first stream is that of the virus itself. Despite low rates of infection in children, the impact is still being felt today. The second stream is the containment measures, such as closing schools and locking up children. While these measures have reduced the rate of infection, they have had severe consequences for children in terms of loss of education, loss of income and psychological trauma. The third stream is the economic crisis triggered by containment measures, a crisis that has pushed millions of children and their families back into poverty and drastically exacerbated inequalities and disparities in the region.

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The COVID-19 pandemic triggered an extraordinary social protection response to support households withstand its socioeconomic effects. Despite its relative success, the social and economic reverberations of the pandemic have been severe. Countries in the region have taken different approaches towards adapting or scaling up existing systems and programmes to meet the sudden and expanded needs of larger numbers of households in the context of the pandemic. Countries have developed new systems that build on different levels of the existing programmatic infrastructure for social protection. All cases are in turn dependent on the different stages of maturity of social protection systems and the ability to fill previous gaps in coverage.

The momentum brought on by the pandemic has accelerated pre-existing work on establishing a basic social protection floor as part of their emergency response, or otherwise strengthened political resolve towards expanding shock-responsive social protection programmes to the most vulnerable segments of the population. In others, the pandemic has shed light on the existing gaps in coverage, adequacy, efficiency, and financing of systems and programmes. In the Pacific for example, the historical focus on contributory social protection was challenged during the COVID-19 crisis, and the need for more comprehensive and responsive systems has become evident (Beazley et al., 2021).

This article draws on a systematic review of social protection responses to the COVID-19 pandemic in East Asia and Pacific from January 2020 to August 2021 (de Neubourg et al., 2021a).²⁶ It also takes stock of the evidence-based policy influence and advocacy undertaken by UNICEF to reimagining social protection systems in East Asia and Pacific post COVID-19 (UNICEF, 2020a; UNICEF, 2020b). The systematic approach examined social protection interventions in East Asian and Pacific countries using a conceptual framework that conceptualises pandemic-related and shock-responsive social protection interventions in terms of their adequacy, design, appropriateness, financing and timeliness. The aim of the review was to assess the programmes and identify lessons learned, best practises and opportunities for scaling up investments in comprehensive, child-sensitive and shock-responsive social protection in the region (de Neubourg et al., 2021b).

²⁶ Countries included in this review are Cambodia, China, Cook Islands, Fiji, Indonesia, Lao PDR, Malaysia, Myanmar, Mongolia, Papua New Guinea, Philippines, Samoa, Solomon Islands, Thailand, Timor Leste, Tonga, Vanuatu, Viet Nam. Note that this review excludes DPR Korea and some of the smaller Pacific Island countries (Kiribati, Marshall Islands, Federated States of Micronesia, Niue, Nauru, Palau, Tokelau and Tuvalu) due to limited information available at the time of the review.

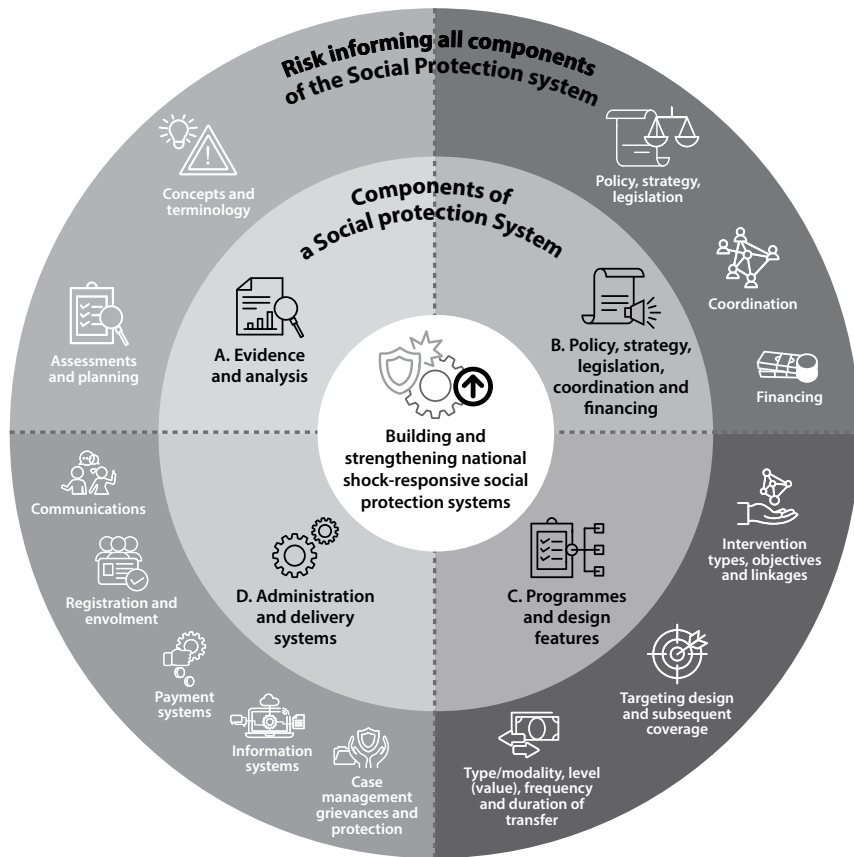
The article is structured into five sections, including this introduction. Section 2 presents the conceptual framework and methodology. Section 3 synthesizes the findings from social protection responses to COVID-19 as well as key insights from UNICEF's work. Section 4 focuses on the child-sensitivity of social assistance responses. Finally, section 5 presents the conclusion drawing on the lessons learnt from COVID-19 and the policy implications for the future of social protection in East Asia and Pacific.

10.2. CONCEPTUAL FRAMEWORK AND METHODOLOGY

Social protection responses during times of shocks and emergencies require an adapted focus compared to social protection responses that can be planned, tested and implemented over a long period of time. The success of respective interventions is consequently evaluated against their sustained positive impact on the poverty and deprivation levels of households, children, women, and vulnerable groups, compared to a situation wherein social protection interventions had been absent. This sustained impact should be assessed against the immediate effect during the crisis and the long-term effects in terms of reducing poverty and deprivations as well as in terms of preparing the social protection system for adequately reacting to the next shock. This is for example, the approach that UNICEF took in the Philippines (UNICEF, 2021a) and Mongolia (UNICEF, 2020c).

In the context of a shock, three features of any social protection response are crucial: reaching out to those most in need for assistance, providing them with adequate assistance and providing assistance in a timely manner. Other pre-conditions of an adequate response to shocks include a sufficient financing capacity as well as an adaptive governance environment. The governance environment needs to be sufficiently adaptive to meet the demand for expanded social programmes and services, and to avoid administrative bottlenecks in the rollout of interventions (*see Figure 10.1*).

Figure 10.1 Shock-responsive social protection across the four components of a social protection system



Source: UNICEF, 2019.

Using this conceptual framework, the article seeks to address three fundamental questions. On the one hand, find out the main characteristics of the COVID-19 induced social protection interventions in East Asia and Pacific. On the other hand, grasp the extent to which temporary or sustained interventions aim towards a more universal, child-sensitive and shock-responsive system design. Lastly, understand the conditions under which social protection responses to the COVID-19 pandemic would and should be sustained beyond the pandemic period, in the context of increasing fiscal consolidation and compounding crisis (such as the current global hikes in fuel and food prices).

The analysis draws on multiple sources, including available literature and administrative data, to consolidate evidence on the nature and character of social protection measures from January 2020 to August 2021. In addition, the analysis reflects a specific point in time, as the pandemic COVID-19 and responses have evolved throughout 2022, albeit at a much slower pace. It is noteworthy that the global average of weekly social protection measures introduced after August 2021 was minimal – i.e. 17, compared to 87 by May 2021 (Gentilini et al., 2022) – which maintains the relevance of the resulting social policy principles in the current post-COVID-19 context.

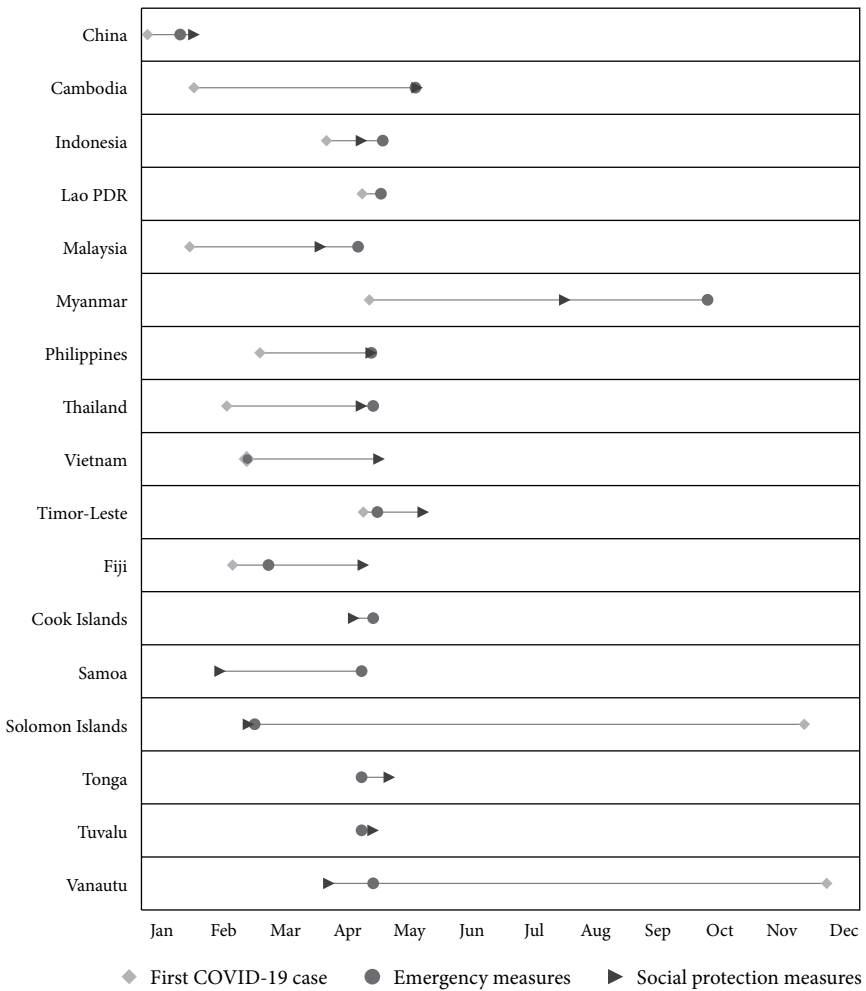
The review provided the literary basis from which to synthesise evidence to provide summary responses to the research questions. While the review covered four types of social protection interventions (i.e., social assistance, social insurance, labour market and other programmes like subsidies, childcare support, loan payment deferrals, etc.), only social assistance and social insurance interventions are discussed in detail in this article. There were a few data gaps and limitations for the most countries and programmes identified little to no information was available publicly on plans for continuation or expansion beyond the designated period (in many cases, between March and December 2020). Some of this information became available from the 2021 state budget announcement. This is consistent with other sources (Gentilini et al., 2022) that were able to identify information about the programme status of only 49 percent (or 468 measures) of the COVID-19 cash transfers globally, 20 per cent out of which were still active in early 2022.

Finally, interventions are considered *directly* child-sensitive if they are child-focused and explicitly target children or households with children for the receipt of social transfers, refer to children within eligibility criteria for social programmes, or otherwise explicitly ensure that children's rights are met within the context of the national COVID-19 social protection response. *Indirect* child-sensitive instruments refer to responses which are not explicitly child-focused but have a high probability of having a positive impact on children's livelihoods via intra-household transfers. Examples include universal emergency social transfers to households which prevent households with children from falling into poverty, compensate household income losses, and reduce financial pressure in the event of shocks to ensure children's continued access to nutritious meals, learning, and avoid negative coping mechanisms which put children at risk of exploitation and abuse. *Not child-sensitive at all* interventions are those that do not account for the protection of children's livelihoods, are highly targeted thus reaching only select segments of the population, or otherwise have complex eligibility criteria with high exclusion of vulnerable groups including children.

10.3. OVERVIEW OF SOCIAL PROTECTION RESPONSES TO COVID-19

Since the beginning of the outbreak, governments in East Asia and Pacific were among the first in the world to implement a wide range of emergency social protection responses. With the first wave of infections in January 2020, countries enacted unprecedented emergency measures to slow the spread of the pandemic (see Figure 10.2).

Figure 10.2 Timeline of COVID-19 outbreak and response measures announced in selected countries during the first 12 months of the pandemic



Source: UNICEF, 2020a.

By March 2020 (about 20 days after the first cases on average), most of the countries in the region announced the first social protection measures to counter the socioeconomic impact of the containment measures, which were pushing millions of children and their families back into poverty. Notably, Mongolia and Pacific countries put forward pre-emptive social protection measures (38 days before the first case in Mongolia and 10 days in advance on average in the Pacific) to provide economic stimulus and protection.²⁷ Responses were therefore overall timely with majority of the programmes introduced between March and May 2020 (see Table 10.1). This is consistent with other calculations that have set the average number of days between announcement of social protection programmes and date of first payment at 25 days in East Asia and Pacific (Gentilini et al. 2022).

Table 10.1 Average number of days between COVID-19 outbreaks and announcement of social protection responses, by country grouping

East Asia and Pacific region	South-East Asia and East Asia	Pacific island countries and territories
19	39	-10

Note: due to its anticipatory nature, the average in the Pacific is based on either the number of days since the first case of COVID-19 or since the first pre-emptive emergency measures were enacted. For the rest of the countries, the average is based on the number of days since the first case of COVID-19.

Source: UNICEF, 2020a.

By the end of the first year of the pandemic, and despite all the efforts to control the spread of new infections, Mongolia and Myanmar had to take new drastic emergency containment actions. By then, populations had suffered the consequences of the global slowdown for almost a year, and many of their coping mechanisms had already eroded. A number of new cash transfer programmes were introduced between January and June 2021, mostly in response to the second and third waves of COVID-19 outbreak. Notably, and as mentioned in various studies (Beazley et al., 2021; Gentilini et al., 2021), the rollout dates of the programmes, as announced by the respective governments, have limitations. They indicate the start of the disbursement, but not when disbursements were completed or reached all of the beneficiaries.

²⁷ Only a few countries in the Pacific have recorded community infections, with many countries having no local transmission of the virus and cases mostly detected in people arriving in the country. Most Pacific countries enacted containment measures very rapidly and announced border closures in March 2020. Another notable trigger is the outbreak in Fiji in April 2021 after one year of no community transmission, which prompted strict measures and significant social protection responses in Fiji (Beazley et al., 2021).

10.3.1. Leveraging UNICEF-supported evidence for policy and operational responses

As soon as the first COVID-19 cases were identified outside China, UNICEF Social Policy teams throughout East Asia and Pacific swiftly developed a threefold strategy for action to assess and address the impact of the crisis on children and households (UNICEF, 2020b). First, measuring the direct and indirect impact of COVID-19 on children and households. Secondly, mapping and assessing the social protection responses to guide UNICEF in providing technical advice to governments. Third, assessing the impact of macroeconomic scenarios on countries and possible implications for Social Policy.

From the onset, UNICEF assessed the responses to COVID-19 according to strengths, weaknesses and readiness of pre-existing social protection systems in the region and analysed the circumstances that led so many countries to consider the use of their social protection systems to mitigate the impacts of the global pandemic. Cutting-edge, bold collective thinking and feedback from countries across the region were critical to effectively protect all children as well as the most vulnerable.

The first challenge UNICEF encountered was the lack of updated and detailed information on the impact of the pandemic on children. The dramatic effects of fast and hard containment measures, such as lockdowns, and the consequent economic crisis, had a deep impact on households. Regular national household surveys did not capture those dynamic changes, and a series of rapid data collection or simulation exercises provided only a partial set of information to guide the expansion and design of social protection interventions. Secondly, it was clear from the beginning that only state-provided social protection would be able to mitigate the unprecedented scale of COVID-19 impacts on the region. Such systems have the potential to form a core component of wider recovery plans that seek not only to provide relief but also to influence a path to more sustainable and equitable economic and social development in East Asia and Pacific.

The major challenge of how to design a system that can respond to the compounding current and future crises remains to date. If something UNICEF has learned from past crises is that the expansion of social protection interventions doesn't last long. UNICEF works therefore to identify and propose policy approaches that last beyond the immediate crisis and better prepare countries for future shocks. Countries must strengthen public finance for social protection, and to do so will require prioritized allocation of resources to protect children's rights and meet their basic needs. Conversely, this pandemic has made it much easier for many governments and stakeholders to understand shock-responsive social protection, which has resulted in an increased appetite for it among policymakers and greater political will for systemic reforms and

adaptation. UNICEF is working with governments, partners, and other United Nations agencies to grab the opportunity presented by this crisis to review and reform social protection systems to build back better.

10.3.2. Navigating the storm: Lessons from the social assistance responses

There were many lessons learnt from the social protection responses to COVID-19 in the region. The pandemic-induced crisis confirmed the urgent need to not only build, but to also maintain, a social protection baseline to continuously guarantee at least a basic level of social security within national social protection systems for all throughout their lives. Nevertheless, even in countries where the response was timely, multisectoral, and diverse (i.e., where stimulus packages were designed to fund a portfolio of social assistance and social insurance transfers, labour market responses, social services and other programmes), the COVID-19 pandemic has still underlined many remaining challenges.

10.3.2.1. Major achievements

Social protection responses to the COVID-19-induced socioeconomic crisis have been unprecedented across the globe, spurring higher investments in the social protection sector than in all previous large-scale economic crises. Countries in East Asia and Pacific have shown a significant mobilization of resources and, on average, the differences in the size of the stimulus packages corresponded to the size of the economy of the respective countries, with several notable exceptions. Excluding China and the Pacific countries, Indonesia, Malaysia, and Thailand have rolled out the largest stimulus packages in the region, at above USD99 billion, Philippines and Viet Nam at over USD27 billion, and Mongolia, Cambodia, and Lao PDR at USD4 billion or less. Among Pacific countries, Papua New Guinea (PNG) and Fiji have rolled out the largest stimulus packages (between USD0.6 and USD1.6 billion), with the remaining countries having total stimulus packages at under USD0.3 billion (ADB, 2021).

Countries with more comprehensive social protection systems were able to respond more efficient and effectively, while other countries had difficulty putting measures in place because of lacking the basic infrastructures of a social protection system. For instance, having pre-existing registries or other administrative facilities (i.e., payment or distribution methods, national ID systems, etc.) has helped in the implementation of social protection measures. Notable examples of countries whose established national (social) registries and pre-existing social protection schemes facilitated the COVID-19 response included Malaysia, Mongolia, Indonesia, Philippines, and Thailand.

An example of a disadvantaged country in terms of essential pre-existing administrative structures is Samoa. Samoa lacked a comprehensive ID registry

system, preventing the government to articulate policies in a more timely and efficient manner. To solve that, the government incentivised individuals to register through the provision of SAT 50 (USD19) one-off pay-out for each citizen who registers for the national ID. The long-term goal was to establish an accurate and comprehensive registration system that could provide the basis for rapid and effective assistance to vulnerable people in the event of future economic shocks or natural disasters and for the further development of the social protection system in Samoa. This example shows that governments have realised the benefits of having strong administrative structures, such as digital tools for social protection delivery, digitised registers and interoperable databases to deliver services efficiently and effectively.

Approximately 70 percent of the social protection measures taken by East-Asian and Pacific countries have been novel programmes. This figure shows that the vast majority of measures have been designed from scratch, probably due to the fact that many of these countries have social protection systems which had not achieved maturity upon the onset of the pandemic. Conversely, the countries that were able to implement social protection responses through horizontal or vertical expansions of existing programmes, showed that the already existing social protection infrastructure was sturdier so it could be built upon. For instance, Viet Nam was able to upscale benefits relatively smoothly to reach informal workers since it had already extended social insurance coverage to informal garment factory workers, who could then avail of unemployment insurance when the crisis struck.

The majority of schemes in the region have remained targeted or limited in duration. However, in a number of countries, a tendency has been seen towards universality as a key feature or policy goal, to achieve better results in mitigating the worst socioeconomic effects on livelihoods, especially of the most vulnerable. Timor-Leste for example, erected the first quasi-universal cash transfer in the country, the Uмба ba Kain programme (UNICEF, 2020d). This contrasts with other existing and less comprehensive social assistance schemes such as Bolsa da Mae, a cash transfer designed for poor female-headed households with children, or the benefits for veterans of the independence war of the country (ILO, 2014). Similarly, the Cook Islands' child benefit or Mongolia's Child Money Programme (CMP), were both significantly expanded, approaching universal coverage of children. Mongolia's CMP experienced an initial increase from April to June 2021 of MNT 10,000. However, the government soon realized this was inadequate to tackle the real needs of vulnerable families and ended up topping up the programme to MNT 100,000 (USD32.8). The Child Money Programme top-up in Mongolia has been projected to have had the most positive effect on reducing poverty and inequality in the country, compared to other existing and emergency relief measures, with positive implications for children's livelihoods even during times of crisis (ADB, 2020). The government of Thailand has also committed to universalising its existing Child Support Grant, to cover all children under 6 years of age.

Many of the implemented measures needed to be adjusted as time proceeded, lasting longer than what it was initially planned, due to expanded needs of the targeted population. For instance, Thailand's Khon La Khrueng economic package, which had the objective to stimulate domestic consumption through obtaining 50 percent daily discounts at shops and stalls, had three phases since October 2020. This is also the case in Cambodia, where the duration of monthly benefits for garment and tourism workers was extended, as well as the COVID-19 Emergency Cash Transfer Programme for poor and vulnerable households, which was initially planned to last for six months but ended up being extended several times due to a prolongation of the beneficiaries' needs. The responses have shown that special attention needs to be paid to vulnerable groups such as people with disabilities or informal workers.

For example, in Myanmar, a programme directed to support the workforce members with disabilities was created from the ground up, although it consisted of a one-off MMK 30,000 payment to around 5,000 people with disabilities (Centre for Inclusive Policy, 2021). In China, the Dibao Minimum Living Standard Scheme, was notably horizontally expanded to temporarily extend income and social support to migrant workers. Other examples are Fiji, which issued a one-off sick leave payment provided also to informal workers, Thailand, which covered the medical bills of everyone infected with COVID-19, and Indonesia, which subsidized health insurance premiums for informal sector. Viet Nam's and China's horizontal expansion of the contributory insurance scheme to those who lost their jobs because of the pandemic but were not eligible for unemployment benefits are also examples of this approach (Gentilini et al., 2021).

Overall, the expansion of social protection systems and programmes, or the installation of new programmes to deal with the crisis, set the stage for more inclusive and comprehensive social protection in the long-term. Experiences such as the BLT Dana Desa (BLT DD) in Indonesia seem to be likely to last in time after 2021. BLT DD, the new unconditional cash transfer funded from the village funds of Indonesia and launched in April 2020, was expected to last for three months and was later extended for an additional six months. Nevertheless, the programme continued in 2021, and is currently considered as a new mechanism for addressing future social protection needs. This programme has been seen as effective in encouraging public consumption and the government has pushed for it due to the importance given to financial stimulus to cope with the weakened economy (Sabtu, 2021).

Finally, social protection responses to COVID-19 have also shown that child-sensitive programmes are highly effective in protecting children and families from the worst impacts of the pandemic (see next section).

10.3.2.2. Major challenges

Even in countries where the response was swift, multisectoral, and diverse, the benefits received were not necessarily adequate. Some countries designed the stimulus packages with the anticipation that the pandemic would last only 3 or 4 months, therefore a lot of their programmes were one-off benefits (e.g., Malaysia, Viet Nam) or top-ups to existing benefits (e.g., Malaysia, Indonesia). While this may not be problematic for countries that introduced additional packages over time (e.g., Malaysia, Thailand), for countries that endorsed only one stimulus package (such as Myanmar), the effects of interventions remain limited and vulnerable populations remain at risk.

“Quick fixes” such as one-off payments or top-ups to existing benefits are not very conducive to improving the long-term resilience of social protection systems. The introduction of short-term schemes and one-off payments (especially in the context of limited social protection systems and programmes) also compromises their effectiveness, as new implementation processes need to be designed and applied. Going forward, governments in the region need to learn lessons from these emergency programmes and link them to ongoing work to modernise and consolidate their social protection systems. In the case of Cambodia, for example, this is being done through the Family Package, which is currently being developed.

In several countries, benefit levels were inadequate in meeting the actual needs, given both the scope and intensity of the socio-economic impact on individuals and households. Furthermore, interventions suffer from a high exclusion of vulnerable groups including the new poor as a result of the pandemic (e.g., Myanmar and Viet Nam). The schemes designed to cover informal workers or those in precarious forms of employment, do not adequately or appropriately respond to the realities of the different groups that make up this category of workers: migrants, especially those undocumented, are often not covered (e.g., Malaysia).

Many schemes are not gender-sensitive as they neither take into consideration the fact that women are overrepresented among part-time workers and workers in precarious employment and among workers with an interrupted career, nor that women, as caregivers, usually inherit an increased burden of care when schools close or when the healthcare sector is overwhelmed. Moreover, requirements to apply to various schemes require administrative forms to be completed online, which in practice prevents important groups of the population, who have limited internet access or lack digital literacy, to apply.

The COVID-19 response shed a light on opportunities for expanding existing social protection programmes, maintaining crisis-response expansions, or building a more comprehensive and shock-responsive social protection system (e.g., Mongolia, Lao PDR, Indonesia and Tonga, among others). This means

not returning to the pre-pandemic status quo but instead being proactive and systemic (Archibald et al., 2020). This requires attention across a raft of issues, including governance, institutional coordination, administrative structures and capacities, and delivery systems, together with sustained political will to deliver the necessary fiscal space. In this sense, the pandemic presents a narrow opportunity for bold reforms that will require making important trade-offs and choosing among different urgent priorities due to increased political momentum or higher national and international consensus (Ibid). However, countries in East Asia and Pacific have experienced, or are projected to experience, severe economic contraction in 2022 and beyond, not only because of the effects of the pandemic but also because of the current international fuel and food price crisis (SPIAC-B, 2022).

Increased public social spending on stimulus packages, rising budget deficits, government debt because of the COVID-19 and the current food price crises, especially in countries with high budget deficits and weak economic performance prior to the outbreak of the pandemic, have focused the political discourse on comprehensive fiscal consolidation as a top priority. This has implications for the discourse around fiscal space and political acceptance for the sustainability of spending on social protection measures, including sustained system expansion. Fiscal consolidation is incompatible with implementing long-term social protection measures, and with moving away from the pre-pandemic status quo. Building up comprehensive and sustainable social protection systems might be helped by contraction in some activities but overall will require budgetary and policy planning efforts. Investing in human capital and social protection is, however, key to sustained economic growth, resilience and development. This is especially pertinent during the aftermath of a crisis that needs forward-looking recovery and a smart use of resources.

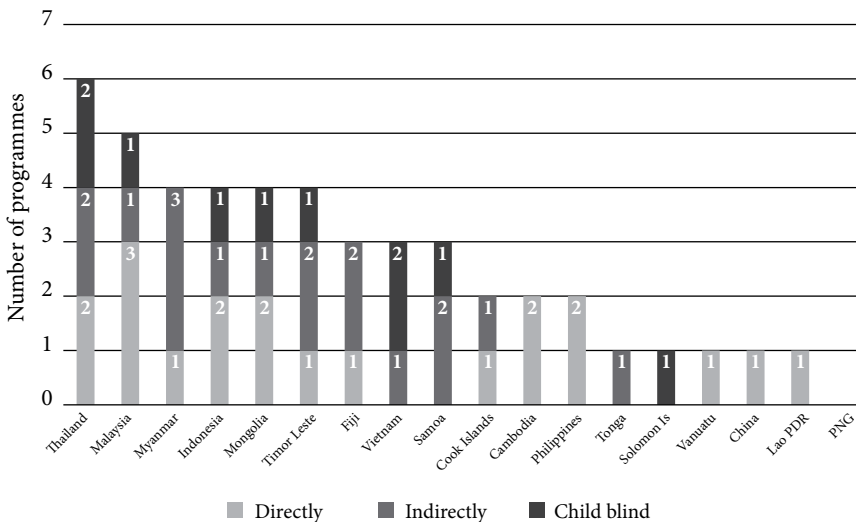
10.4. CHILD-SENSITIVE SOCIAL PROTECTION RESPONSES TO COVID-19

Children are disproportionately represented among the poor and have been indirectly affected by the wide-reaching impact of the pandemic and related policy measures, including movement restrictions and school closures. These have led to disruptions of children's access to essential goods and services in the areas of health, nutrition, and education, while increasing their vulnerability to protection violations, alongside other gender and age-specific risks. Rapid assessments in several countries estimated that child poverty in the Asia-Pacific region could increase for the first time in 20 years, with an additional 35 million children in the region likely to fall into poverty in 2020 (UNICEF, 2020e). Multiple dimensions of poverty and inequality, particularly in the areas of education, health care, nutrition and childcare, are also expected to worsen.

As even temporary shocks to household income levels and service disruption can have devastating effects on children’s wellbeing and long-term outcomes, social protection responses to the COVID-19 pandemic that are child-sensitive are better equipped to minimise the short- and long-term erosion of physical and human capital in times of crisis. Child-sensitive social protection interventions refer to those which avoid, reduce and/or mitigate social and economic risks to children, at the earliest possible stage of the risk; account for specific risks related to age, gender, and other vulnerabilities that children face throughout the life cycle; mitigate the impacts of shocks, exclusion and poverty on children and their families; and ensure equity and inclusivity among families and children, including for those belonging to marginalised groups.

This section primarily focuses on child-sensitive social assistance interventions in response to the COVID-19 pandemic in East Asia and Pacific (see Figure 10.3 and the full list of interventions in Table 10.2 of the Appendix). Interventions are broadly categorized by the extent to which they are child-sensitive: *directly*, *indirectly*, or *not at all*. It is important to note that these criteria serve to identify major gaps and reflect on opportunities to stimulate national dialogue around making social protection interventions more child-sensitive in the context of current and future crises.

Figure 10.3 Number of major social assistance programmes in East Asia and Pacific by level of child-sensitivity



Source: Authors.

Child-focused social assistance measures played a critical role in protecting children and their families from the social and economic fallout of the pandemic in East Asia and Pacific, despite its mixed coverage and adequacy across countries. Non-contributory child-focused schemes, which existed before the pandemic period, were horizontally or vertically expanded in response to the pandemic and laid the groundwork for new emergency relief measures, were present in Cambodia, Malaysia, Myanmar, Mongolia, the Philippines, and China.

Maternal and early childhood benefit schemes providing conditional cash and in-kind transfers to pregnant mothers and young children were heightened during the pandemic in Myanmar, Cambodia, Indonesia (as part of the country's flagship conditional cash transfer scheme, Programme Keluarga Harapan – PKH), and the Philippines (as part of the country's Pantawid Pamilyang Pilipino Program – 4Ps). These schemes enabled families to meet the minimum needs of young children and provided a registry of vulnerable households for fast and flexible access to additional emergency relief measures for which they are eligible. Except for Cambodia, beneficiaries in these three countries received an emergency top-up to the existing monthly transfer, delivered through the existing programme administration. Myanmar was the only country to implement the scheme universally for pregnant mothers and children under the age of 2 in selected regions, while schemes in the other countries determined eligibility via (proxy) means-testing.

Unconditional child grants in Cook Islands, Malaysia, Indonesia, Mongolia, Thailand, and China were vertically and/or horizontally expanded in response to the pandemic. In Malaysia, Indonesia, and China, these grants are anchored in existing welfare schemes for poor and vulnerable households, identified by means testing or categorical targeting, while Cook Islands' child benefit, Thailand's Child Support Grant and Mongolia's Child Money Programme are standalone schemes which approached universality for children of select age cohorts. The targeted nature of the majority of these schemes (broadly covering children living in households that are identified as poor or vulnerable or who became poor or vulnerable as a result of the pandemic), nevertheless excluded a significant share of children with varying experiences across countries.

Moving forward, these schemes are likely to miss the new poor due to COVID-19. For example, in Thailand, families with children who became financially destitute during the pandemic but were not considered poor at the time of registration were not able to access the Child Support Grant (UNICEF, 2020f). In Malaysia, those without necessary identification documents, migrant workers, displaced and refugee families were not able to access this financial assistance (UNICEF, 2020g). In comparison, China's Dibao Minimum Living Standard Scheme was notably horizontally expanded to temporarily extend income and social support to migrant workers (Gentilini et al., 2020).

Mongolia and the Cook Islands remain the only two countries in the region that approached universal coverage of children in their flagship child benefits during COVID-19. On the one hand, the Cook Islands have one of the most extensive formal universal social protection systems in the Pacific region (UNICEF, 2021b). Recognition for the critical role of social protection to social and economic development came as early as 1965, when the formal social protection system was introduced. The Cook Islands is the only country in East Asia and Pacific currently providing any form of non-contributory universal child grant backed by enacted legislation. Against this backdrop, the Government's response to COVID-19 reached out to all children in the country.

Mongolia's universal Child Money Programme, which covers up to 99 percent of the country's child population and more than two-thirds of all households, was significantly expanded in response to the pandemic (UNICEF, 2020c). The top-up in Mongolia has been projected to have had the most positive effect on reducing poverty and inequality in the country, compared to other existing and emergency relief measures, with positive implications for children's livelihoods even during times of crisis (ADB, 2020). Simulations suggest that, on average Mongolia would have reduced households' income by 10 percent if no social protection policies had been implemented. However, with government policies in place, a reverse in the negative effect was observed, and household income would have increased by an average of 16 percent, with both inequality and poverty reducing significantly. Specifically, with the social protection measures effectively implemented, the poverty rate would have decreased from 36.7 percent to 17.6 percent, and the Gini index would have dropped from 0.330 to 0.306 respectively (Ibid).

In a number of countries, the scale and severity of the socioeconomic impact of the pandemic highlighted critical vulnerabilities and coverage gaps, and therefore provided the necessary political and economic impetus for expanding and strengthening child-sensitive social protection. In Cambodia, Thailand, Lao PDR, and Fiji, social assistance responses were enacted in response to the COVID-19 pandemic, which has laid significant groundwork for a more inclusive, comprehensive, and shock-responsive national social protection framework. In Cambodia, the pre-existing Cash Transfer Programme for Pregnant Women and Children under Two, in combination with the pre-existing social registry of poor and vulnerable populations (the IDPoor) were notably scaled up into the nationwide emergency COVID-19 Cash Transfer Programme for Poor and Vulnerable Households. Lao PDR did not enact any significant social protection response in the first year of the pandemic, and social protection coverage in the country remains low despite negative economic projections and a significant poor and vulnerable population. Consequently, the government of Lao PDR launched the National Social Protection Strategy 2025 by the end of 2020, which was followed by the launch of a pilot Mother and Early Childhood Grant in June 2021 (UN, 2020b). The pilot grant targets pregnant women and

infants up to age 6 months in selected provinces and, as one of the flagship programmes of the National Social Protection Strategy, is planned to be scaled up nationwide. In Thailand, spurred on by the pandemic and consequent social protection response, the government has committed to universalise the existing Child Support Grant, to cover all children under the age of 6, with an additional two-month benefit top-up (UNICEF, 2020h).

The role of non-government actors was important to fill gaps in government provision of support in a few Pacific countries. The UnBlocked Cash programme implemented in Vanuatu through Oxfam provided substantial support that would have otherwise not been available, particularly in remote locations (Beazley et al., 2022). Similarly in Fiji, a public-private partnership has rolled out an innovative digital cash programme, and Fiji's largest cash assistance programme to date, to provide emergency assistance (FJD 100) to vulnerable groups including elderly, women, children, and people living with disabilities for a period of four months (Save the Children, 2020).

Pandemic-related social assistance delivered to households which were not child-specific varied in terms of their child-sensitivity and exposed significant coverage gaps which may leave a significant share of children vulnerable. Social assistance responses in the majority of countries in East Asia and Pacific were not directly child-sensitive, in that they were targeted at the household level. This was the case (for select programmes or sub-programmes) in Malaysia, Myanmar, Viet Nam, Samoa, and China.

Evidence suggests that children benefit from household-level cash assistance in terms of reductions in child poverty and positive nutrition, health, and education outcomes. However, in many cases restrictive targeting and complex eligibility criteria have excluded children from the most vulnerable groups, such as children with disabilities, children living in institutions, and children with a migration background or those lacking legal identity documents. In Viet Nam, rapid assessment findings suggest the COVID-19 social assistance packages targeted at vulnerable and poor households, including those who became vulnerable due to the pandemic, were deemed to be not child-sensitive. The package was not adequate nor appropriate in offsetting the cost of child-specific expenditures during the pandemic, and eligibility criteria were highly administratively cumbersome and not child-sensitive. As a result, many vulnerable groups of children were unaccounted for, including children living in care centres, children from remote areas, ethnic minority children, migrant children, children of parents who have become unemployed, children of informal workers, families with young children (UNICEF, 2020i; UNICEF, 2020j).

Similarly, Thailand's relief package Rao Chana, or We Win, cash transfer programme could be considered child blind. This cash transfer is part of Thailand's 2021 stimulus package and makes up its biggest economic relief programme, targeting individuals who were considered to have been financially

affected by the COVID-19 pandemic. However, the programme data has no information on family, and its existing Management Information System (MIS) excludes persons over the age of 18. Coupled with a flat benefit, the programme does not account for the extra burden on children's caregivers and their families during the pandemic. The Government of Thailand has committed to improving the MIS and is considering a benefit top-up for individuals with children in the future. Making this programme child-sensitive, in addition to the existing support provided through the country's Child Support Grant, would contribute greatly to improving the wellbeing of children in Thailand during the COVID-19 pandemic.

10.5. CONCLUSIONS AND POLICY IMPLICATIONS

The uneven character of the economic recovery in East Asia and Pacific pushes for the need for a systematic review and reconsideration of social protection policies. The protracted character of the health and the socio-economic crises and the unevenness in the recovery internationally and within countries, both point to the need for systematically reconsidering the role and content of adequate social protection reactions in the region and globally.

10.5.1. Opportunities to be seized when re-designing social protection instruments and setting up comprehensive systems

Four main features will contribute to making social protection interventions less "ad-hoc" and more responsive during and in the aftermath of a shock: adopting a life-cycle approach; harmonising social protection instruments in an integrated system; and making the system growth-oriented and shock-responsive.

The life cycle approach to social protection makes sure that risks, needs and vulnerabilities are recognized as changing with age and that social protection instruments need to be designed to provide protection against specific risks linked to particular age groups. In many East-Asian and Pacific countries, the core social protection instruments remain associated with the active population (often limited to those in formal economic activities). Yet, the pandemic has shown that children and the elderly are particularly vulnerable to shocks. Consequentially, child benefits and social pensions have proved to be useful instruments to mitigate the effects of the pandemic. The fact that policymakers can easily understand the universalistic life-cycle nature of child benefits and social pensions (since all children below a certain age or elderly above a certain age are vulnerable) has fairly contributed to its unprecedented (temporary) expansion.

Forced by cyclical financial, and economic crises as well as other potential pandemics, an increasing number of countries in the region are trying to move

towards better integrated systems. On the one hand, truly integrated social protection systems are based on the economic inevitability of risk pooling, and on the other hand, on the recognition that long-term social stability rests on a minimal form of social and financial solidarity. A systematic approach to social protection is also meaningful because it provides an overview of risks and parts of the population that could be covered at lower costs by avoiding duplications and inconsistencies and thus making those countries' systems both more effective and more efficient. Embarking on the path towards comprehensive coverage, should be helped by sustainable fiscal plans, by measures supporting long-term inclusive economic growth and by a systematic approach to social protection. Investing in human capital as early as possible in the life cycle yields the best returns on investment for economic growth and society.

In this context, child-sensitive policies need to be framed and understood as an investment in human capital to promote economic growth, resilience and development which is especially pertinent during times of crisis and urgent need for recovery. Ensuring the adequacy, efficiency, and sustainability of public spending toward human capital outcomes is key. A stable and long-lasting recovery needs to centre on restoring and promoting human capital in any plan to achieve resilient and inclusive development.

One of the most pertinent lessons learned during COVID-19 in all countries around the world, is that the percentage of the population potentially hit by an external shock can be very large, nearly affecting the entire population. The rationale for having routine social protection to begin with, is similar to the rationale for having a shock-responsive one –nearly everybody is vulnerable to risks as nearly anyone can be hit by a shock at any given moment. In both cases, social protection is meant to provide protection to the person once a risk materialises. It is not only for the poor but for all of those who are vulnerable to risks and shocks, either idiosyncratic or covariate. The underpinning mechanisms are the same in both cases, namely risk pooling and solidarity.

Risk pooling ensures that the financial risks associated with income shocks are shared by all members of the pool and not by each contributor individually; social solidarity ensures that those who are less prone to shocks or those who have more resources to withstand a shock are contributing to covering the higher risk level and lower resilience of others. This conclusion is echoed by the World Social Protection Report (ILO, 2021a), which states that “collective financing, broad risk-pooling and rights-based entitlements are key principles in supporting effective access to social protection for all in a shock-responsive manner. The principles set out in international social security standards are more relevant than ever in making progress towards universal coverage”.

10.5.2. After shock: Options for building back better and more sustainable social protection systems in East Asia and Pacific

Resolving the inefficiencies and inadequacies of schemes that existed before the pandemic and were erected as a response should be part of a building back better strategy with a focus on long-term objectives. COVID-19 should be harnessed as the catalyst for creating social protection systems that are comprehensive, resilient, adaptive and inclusive. This means not returning to the pre-pandemic status quo but instead being proactive and systemic and paying attention to the building blocks such as governance, institutional coordination, administrative structures and capacities, and delivery systems, together with the sustained political will to deliver the necessary fiscal space (Archibald et al., 2020). The pandemic presents a narrow opportunity for bold reforms that will require making important trade-offs and choosing among different urgent priorities due to the existence of the momentum or higher national (and global) consensus (Ibid). In the current context of international fuel and food crises, the contending priorities are more competing than ever.

Governments need to advocate for universal and comprehensive social protection systems as a tool for economic growth. In this sense, they need to recognize social protection as an investment in human capital and productivity growth and not a cost, and to gradually advance towards the scale of expenditure of OECD countries, where public spending on social protection averages 20 percent of GDP. While countries in East Asia and Pacific are far away from this figure, the substantial rise in public spending on social assistance (estimated to be around 2.0 percent of GDP compared with around 0.5 percent of GDP pre-COVID) challenges old tenets about fiscal space and political will. In the Philippines, the government authorized incremental spending of around 1.5 percent of GDP compared to a total of 0.5 percent of GDP pre-COVID-19. It is estimated (de Neubourg, 2021a) that Indonesia, Mongolia, and Viet Nam did also more than double their pre-crisis social protection spending levels as a share of GDP in response to the crisis, while in Timor-Leste, spending would have tripled. However, in order to achieve long-lasting protective and promotive effects, (some of) these expansions should be continued after the pandemic.

Investing in social protection has impressive returns, making it cost-effective. However, not all investments are adequate. Universal social protection systems reduce poverty and inequality to a higher extent, usually have greater budgets and therefore are more redistributive in absolute numbers (Oxfam, 2022). Countries such as Timor-Leste are trying to follow this approach through the introduction of quasi-universal policies such as a cash transfer which was 10 times larger than any previous programme (ILO, 2021b). Even though the country's recovery will still be gradual due to COVID-19's high impact, these programmes are steps towards universality and indicate a change in previous more inefficient policies such as Bolsa da Mae. The way to universality has somehow also been cleared

in Thailand. The country has made another step forward by extending financial protection against health expenses to both nationals and foreign residents with a valid work permit by granting access of COVID-19 patients to its universal coverage system for emergency patients and has committed to approaching universality for all children under age 6 years under its Child Support Grant programme (UNICEF, 2020h).

Undoubtedly, the COVID-19 pandemic continues to cause human suffering across the globe. It has also made our views of the economic future qualified by more uncertainties and risks. However, addressing uncertainties and risks is at the very heart of what is social protection policy about. By pooling risks and resources, individuals are better prepared to survive and thrive even when risks materialise. By definition, unemployment benefits, pensions, child grants, sick leaves and minimum income schemes are designed to protect everyone from shocks, including systemic shocks and co-variate ones. Moreover, the countercyclical nature and effects of almost all social protection interventions make economies better able to face unfortunate developments even if they arrive as a global crisis. Reducing inequalities and poverty through social protection increases societies' protection against the spreading of disease by including the most vulnerable (or everybody for that sake) in medical care. Reduced inequalities, alleviated poverty and countercyclical benefits also boost economic resilience through keeping at least consumption (demand) partially ongoing and preventing economies from fully closing down or collapsing.

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10.7. APPENDIX

Table 10.2 Major social assistance programmes in EAP and respective level of child-sensitivity

Country	Child-sensitive Category	Pre-COVID-19	COVID-19 response	Description
Cook Islands	Directly	Child Benefit	Top-up and horizontal expansion	Additional 100\$ on top of the current child benefit of 50\$ every fortnight during closure of school outside of the school holidays. Also, horizontal expansion to children who were not benefiting from the benefit.
	Indirectly	Care-Givers Allowance	One-off CT	One off payment to be added on top of one welfare payment. 400\$.
Cambodia	Directly	Maternal and Child Health CCT	Continued delivery	CCT for poor and pregnant women and children under 2Y
	Directly		Scale up of MCH-CCT and IDPoor social registry into nationwide emergency C19-CCT including top-up	Social registry of poor and vulnerable households. Includes criteria identifying households with out-of-school children aged 6–11 years. C19 emergency top-up
Malaysia	Directly	Welfare assistance programmes	Vertical expansion	Increased benefit amount of welfare assistance including means-tested child grant (FKK).
	Indirectly	CT for low-income households (Bantuan Sara Hidup (BSH), Bantuan Prihatin Rakyat (BPR))	Advance payments + horizontal expansion + 2021 top-up	Advance payment of benefits to existing beneficiaries; lowered eligibility criteria.

Country	Child-sensitive Category	Pre-COVID-19	COVID-19 response	Description
	Directly		Food assistance programmes	Food support and vouchers for eligible households and for vulnerable groups including children in alternative care.
	Directly		Categorical cash transfer	CT to vulnerable groups including registered single mothers.
	Child blind		Categorical one-off CT	One-off CT to select groups of workers, pensioners, higher-education students.
Myanmar	Directly	Maternal and Child CT	Emergency top-up	One-off top-up of USD20 to existing recipients (mothers and children <2Y) of monthly USD11.
	Indirectly		Emergency relief CT	CT to vulnerable households and pandemic-affected workers.
	Indirectly	Social pension	Emergency top-up	One-off top-up of USD20 for individuals aged 85+ years and new beneficiaries aged 80–84 years.
	Indirectly		Food support	Emergency food essentials to vulnerable households and at-risk populations.
Indonesia	Directly	Programme Keluarga Harapan (PKH) Flagship CCT for poor and vulnerable populations	Horizontal and vertical expansion	Beneficiaries expanded to 15 percent of population, benefit amounts tripled. Includes education, health and nutrition support for children and pregnant women.
	Directly	Food assistance programmes	Horizontal and vertical expansion; new programmes	Flagship food support programme (Sembako) vertically and horizontally expanded; food support for recipients of PKH and residents of Greater Jakarta.

Country	Child-sensitive Category	Pre-COVID-19	COVID-19 response	Description
	Indirectly		Emergency CT for low-income formal workers	CT for workers with salary <IDR 5,000,000 and registered on the national social security programme (BPJS TK).
	Child blind		Utility waivers	Electricity fee waiver.
Fiji	Directly		Digital CT targeting vulnerable groups	CT targeting vulnerable groups including elderly, women, children, and people living with disabilities; FJD 100/month for 4 months.
	Indirectly		One-off transfers	Pension top-up; UCT for informal workers in lockdown areas
	Indirectly		Wave 2 emergency CT	Emergency CT for individuals in lockdown areas (FJD90) and those who became unemployed during the second wave (FJD50).
Mongolia	Directly	Child Money Programme	Emergency top-up of CT.	5x top-up of universal child grant for 6 months, from 32,000 MNT to 100,000 MNT.
	Indirectly	Food stamps	Emergency top-up, doubling the number of food stamps.	Proxy means-tested food stamp programme with allowances per adult and child household member.
	Directly	Social pension	Top-up transfer.	USD32 transfer to pensioners (including those not regularly entitled), citizens with disabilities, orphaned or half-orphaned children, and single parents.
	Child blind		Utility waivers.	Water, heat, waste disposal and electricity fee waivers.

Country	Child-sensitive Category	Pre-COVID-19	COVID-19 response	Description
Thailand	Directly	Child Support Grant CT	CT universalisation + emergency top-up.	Monthly USD19 cash grant for poor and near-poor households with children under age 6 years was horizontally expanded to cover all children under age 6 years. 2-month USD32 emergency-top up.
	Directly		CT schemes for welfare card holders, farmers, vulnerable populations.	CT and top-up of social transfer schemes to registered members of existing schemes targeting welfare card holders, farmers, vulnerable populations.
	Child blind		Rao Chana (2021) CT	Emergency CT to registered, eligible financially affected persons.
	Indirectly		Rao Mai Ting Gung (2020) CT	Emergency CT to informal or self-employed workers who are not normally covered by the social security system.
	Indirectly		Mor33 Rao Rak Khan (2021) CT	CT scheme for financially vulnerable non-recipients of other emergency CT schemes.
	Child blind		Utility waivers.	Water and electricity fee waivers.
Philippines	Directly		Emergency Subsidy Programme (ESP) under Banyanihan 1 and 2	Emergency CCT of PT5,000–8,000 to low income households who have lost their source of income due to the pandemic, have been displaced by the pandemic, or are living in lockdown-affected areas.
	Directly	Pantawid Pamilyang Pilipino Program	Top-up to match emergency subsidy amount.	CCT providing health and education grants for poor households, households with pregnant women, and households with children.

Country	Child-sensitive Category	Pre-COVID-19	COVID-19 response	Description
Viet Nam	Indirectly		CT SP package	CT of USD43 to means-tested poor and near-poor households, and to workers who have lost income or become unemployed during the pandemic and do not qualify for existing unemployment schemes.
	Child blind		Food support	Daily food allowance for individuals in quarantined areas.
	Child blind		Utility waivers	3-month 10% reduction in electricity prices.
Timor Leste	Indirectly		CT for poor and vulnerable households	Cash transfer of USD100 per month per households, provided for two months. Households are eligible if no individual in the household earn more than \$500 per month.
	Indirectly		CT for staple foods for poor and vulnerable households	Eligible households benefit from USD25/month for 2 months.
	Directly		Education subsidy	Internet subsidy for secondary and tertiary school students.
	Child blind		Utility waivers	Water and electricity fee waivers.
Samoa	Indirectly		One-off CT	Emergency CT of \$20 for all citizens registered for a national ID.
	Indirectly	Social pension	Top-up of Social pension	Top up of up to 300 SAT between May-July 2020; permanent increase of social pension by 15.
	Child blind		Utility subsidies	Reduction in domestic electricity and water prices.

Country	Child-sensitive Category	Pre-COVID-19	COVID-19 response	Description
PNG	N/A	N/A	N/A	N/A
Tonga	Indirectly	Social pension	Top-up of social pension	Top up of TOP 100 made to Elderly Benefit and Disability Benefit in April, 2020, in addition to regular benefit (currently TOP75 per month for those aged 70 and above; and TOP 80 per month for aged 80 and above).
Solomon Islands	Child blind		Utility waiver	Electricity rates reduced by 16 percent.
Vanuatu	Directly		Tuition fee waiver	Secondary school tuition fees are suspended for 2020. The fee of 42,000 vatu per student is paid directly to schools
China	Directly	Minimum Living Standard Scheme (MLSS/Dibao)	Horizontal and vertical expansion to include temporary/migrant (Hukou) workers, increase the amount of cash benefit, suspension of means testing in select areas.	Conditional cash and in-kind support to families that fall below the respective urban/rural living standards, including educational assistance and emergency relief.
Lao PDR	Directly		Mother and Early Childhood Grant (MECG) CCT	As of June 2021, a cash benefit launched for pregnant women and newborns up to age 6 months, integrated with antenatal and postnatal care services and support for birth registration

Note: SP= Social Protection; CT = Unconditional Cash Transfer; CCT = Conditional Cash Transfer; Y= years; C19 = COVID-19

Source: Authors.