Photo: E. Millstein, Mercy Corps/ Iraq 2019

FROM ALIGNMENT TO INTEGRATION

Lessons from Iraq on Linking MPCA and Social Protection Programming

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THE WORLD BANK
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CLCI
CASH AND LIVELIHOODS
CONSORTIUM FOR IRAQ
الاتحاد النقد وسبل العيش من أجل العراق

MERCY CORPS

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Acronyms

CLCI	Cash and Livelihoods Consortium for Iraq (formerly Cash Consortium for Iraq)
CTP	Cash Transfer Programming
CWG	Cash Working Group
FCDO	Foreign, Commonwealth and Development Office
GoI	Government of Iraq
HRP	Humanitarian Response Plan
MoLSA	Ministry of Labour and Social Affairs
MPCA	Multi-Purpose Cash Assistance
NGO	Non-Governmental Organisation
PMT	Proxy Means Test
PPMT	Pseudo-Proxy Means Test
PRS	Poverty Reduction Strategy
SMEB	Survival Minimum Expenditure Basket
SP	Social Protection
SPN	Social Protection Network
SSN	Social Safety Net
UNHCR	United Nations High Commissioner for Refugees

Foreword

Cash transfer programming (CTP)[1] has experienced a sea change over the course of the last decade. Across the humanitarian architecture, funding for cash transfers has increased several fold; in 2016, an estimated $2.8bn in humanitarian assistance was disbursed through CTP, an increase of 40% from 2015 and a full 100% since 2014. It then grew by nearly 70% from 2016 to 2018 to a total of $4.7 billion.[2] As an instrument of humanitarian intervention, it has been used in famines, displacement crises, natural disasters, and crises the world over. As the effects of Covid-19 wreak economic devastation and enflame poverty, food insecurity, and recession across the globe; the use of CTPs as an instrument of economic stimulus and as a safety net for the most vulnerable continues to grow, too.

In state-led social protection programmes, the delivery of cash transfers at nationwide and regional scale has been the norm for some time. What has changed is the speed at which transfer programmes have expanded and adjusted to the economic devastation wrought by COVID-19. As of May 2020, 190 countries and territories have planned, introduced or adapted social protection measures in response to COVID-19.[3] Of these, unconditional cash transfer programs account for over half of interventions by governments, with a total of 283 overall programmes, and over 180 COVID-19-related measures.[4]

Transfers delivered by governments are now bigger, coverage is greater, and access simpler; the suspension or removal of conditionality is a trend observed from Austria to Cambodia, from Colombia to the United Kingdom. Whilst COVID-19 has accelerated the rethinking of and demand for both state-led and non-governmental assistance, it has also highlighted the need to better understand how these two forms of cash transfers – one state-led through the institutions of social protection, the other more transient and delivered through aid agencies – can be better integrated where they have traditionally been wholly separate.

As some governments struggle to expand social protection systems, whether through lack of capacity, presence, or fiscal constraints, non-governmental actors, including local and international NGOs, continue to deliver assistance, and often face fewer restrictions to expansion. Determining how the two systems can collaborate is a long debated topic, and this paper offers insights into how this could best be done by documenting lessons from a bold and on-going collaboration between the humanitarian community, the World Bank, the Foreign, Commonwealth and Development Office (FCDO) and the Government of Iraq.

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1   CTP refers to all programs where cash (or vouchers for goods or services) is directly provided to beneficiaries.
2   The Grand Bargain, accessible at: https://www.grandbargain4ngos.org/workstreams/increase-the-use-and-coordination-of-cash-based-programming/
3   Gentilini, U., et al, "Social Protection and Jobs Responses to COVID-19: A Real-Time Review of Country Measures", Living Paper version 10, May 2020.
4   Gentilini, U., et al, "Social Protection and Jobs Responses to COVID-19: A Real-Time Review of Country Measures", Living Paper version 10, May 2020.

Acknowledgements

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5   The Cash Consortium for Iraq includes the International Rescue Committee, the Norwegian Refugee Council, the Danish Refugee Council, Oxfam, and Mercy Corps as lead agency.

1. SUMMARY

As the use of CTP grows, demands on its effectiveness and capacity to support humanitarian reform continue to grow in equal measure. Originally envisioned as a means of stemming the backslide to poverty and servicing basic needs at scale, efforts to explore linkages with longer-term and locally-owned programmes to enhance impact as well as coordination across the humanitarian and development nexus are now at the forefront. Amid the many proposed reforms, Grand Bargain-led efforts to better integrate transient aid programmes with national, government-led social protection systems present the aid community with a unique opportunity to deploy CTPs to strengthen integration responsibly and effectively.

A large and growing body of research conceptualizes the goals and value of different models of alignment and integration, and commitments have been enshrined in various initiatives including the Grand Bargain, the UN's Common Cash Platform, the Collaborative Cash Delivery Network, and the Sustainable Development Goals. However, learning that documents "how" linkages have been approached in different contexts is relatively sparse. This paper seeks to contribute to that important, and growing, body of literature by documenting learning from efforts to enable linkages between the aid community and a social protection system in a crisis setting.

Efforts to accomplish this in Iraq have proven ground-breaking. In a fragile, post-conflict environment with a highly competitive, sprawling aid architecture, the community of NGOs delivering CTP achieved notable scale and harmonisation amidst an acute crisis. This cohesion came the recognition of impact and credibility that enabled humanitarian actors to engage the federal Iraqi government in efforts to design and plan a transition to a component of the federal Social Protection Network (SPN).

The objective was to use the common tenets of the respective services [6] – targeting and the wealth of evidence gathered from humanitarian programme data – to develop an empirical foundation for two potential transitions: a wholesale handover of the aid community's MPCA caseload to the social safety net (SSN), or a co-administered intake and referrals process which specified when a MPCA recipient was eligible for SSN transfers, too. This would directly inform the expansion of the SSN at the household level, limit exclusion and expand coverage across some of the most crisis-stricken areas of Iraq. The scale of the MPCA intervention, coupled with restricted access for central authorities as a result of the war, meant that the MPCA programme became a makeshift safety net in its own right, giving the humanitarian community the space to be able to deliver services on this scale.

Though it has not yet been possible to put the findings of this initiative into practice and establish formal linkages, the exercise is exceptional in the innovative methods that it used, and the lessons it holds for others attempting the same. Efforts to launch the next step in the process began in early 2020 and updated results should be available in late 2021. Meanwhile, the unique collaboration between the aid community and the World Bank spawned a wealth of knowledge that is still being documented, distilled and used, but a set of potent lessons can already be gleaned.

These include the need for and importance of ongoing government engagement; scale, harmonisation and rigor within the international aid community; a powerful mediator such as the World Bank to deploy its convening power; and donor commitments to fund and support transitions beyond conventional and short-term humanitarian funding cycles. The process also underscores the importance of incrementalism and early harmonisation in establishing linkages. More than anything, it was this early harmonisation in targeting and programme design across the humanitarian community that laid the groundwork for the collective efforts towards transition we document here. Similarly, recognising the complexity of the task in the early stages of the collaboration with the World Bank and the Government of Iraq, it was essential to begin with a technical dialogue, free of the thornier issues of political economy, mandates and funding that often derail collaborative efforts early on. More than anything, a harmonized approach to targeting across the humanitarian community, and convergence with the GoI's approach to targeting developed by the World Bank, laid the groundwork for the collective efforts towards transition we document here. Each of these lessons, and more, are elaborated upon in greater detail later in this report.

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6   Hereafter, the two services we refer to are the MPCA programme administered by the partner agencies of the CLCI and the CWG on the one hand, and the cash transfers delivered by the federal MoLSA, on the other.

Report Structure

What follows is an account of this innovative partnership, what it achieved, and the conditions that allowed it to prosper. We document what was done and why, as well as the conditions and circumstances which enabled the partnership in the first instance. We finish with a set of lessons from the vantage points of the aid community, FCDO as the primary donor and supporter, and the World Bank as the convening agency. In these lessons and processes, we see a model of integration and collaboration which not only offers a blueprint for strengthening linkages between two overlapping and remarkably similar systems - MPCA delivered by the international community, and social protection cash transfers delivered by the GoI's MoLSA - but also a means of overcoming the challenges which conventional humanitarian and development programmes present us with. These are many: decentralisation and duplication, high turnover, siloed humanitarian and development systems, a paucity of data and targeting and design based on intuition, not empirical analysis.

Section two begins with an overview of the two systems at hand: an account of the growth and success of cash transfer programmes implemented by the aid community in Iraq, and an account of the evolution of the social safety net administered by the federal MoLSA. Though the two are analogous, they have historically been wholly separate. Here, the authors examine and summarise the key events and factors which contributed to the development of each system. This is then couched in a broader conceptual framework, where we situate and explain the transitional model developed in Iraq. We finish by bringing the two together on a single timeline to demonstrate the degree of convergence, how and why this model worked and could be applicable to comparable contexts.

The third section of the report centres on the lessons we have learned and continue to process. Given the diversity of stakeholders, mandates and interests involved, we felt it important to document the lessons as seen by each grouping of stakeholders; the aid community, the donor community and the World Bank. **Neither this section nor this report review other means of integrating aid programmes with social protection systems; it only seeks to document progress made in Iraq towards an innovative means of doing so.**
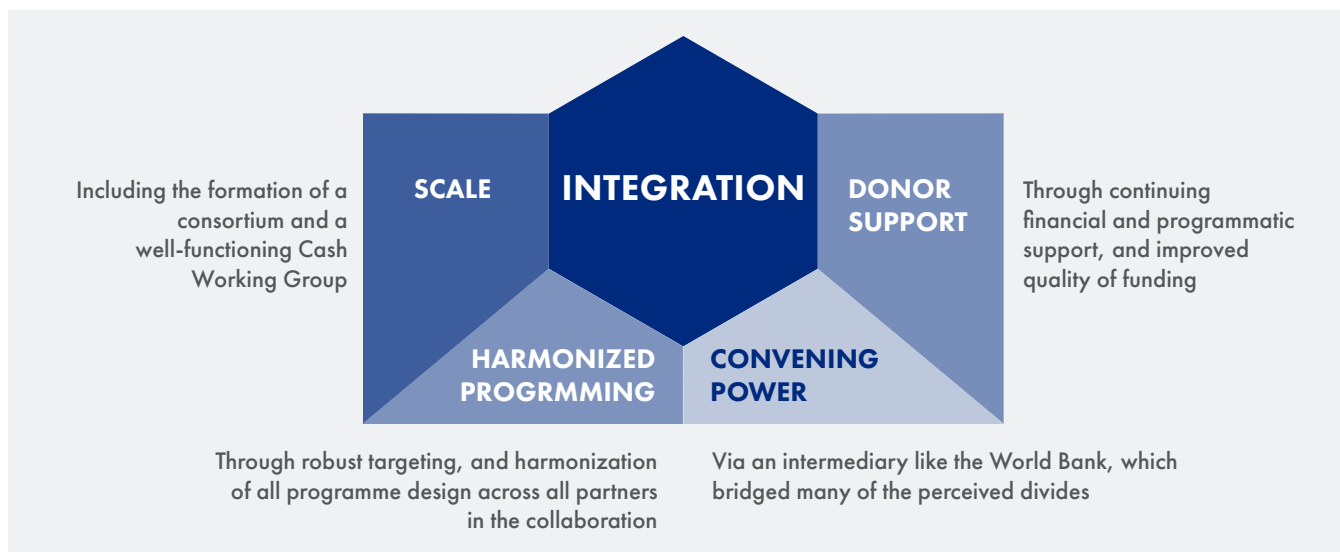
Figure 1: The four pillars of MPCA-SSN integration

For the purpose of this summary, the lessons and underlying success factors are distilled into four broad themes, including scale, harmonisation, donor support and convening power. These broader categories are then used to extrapolate a more detailed set of lessons later in the analysis. These can take varying forms, but the basic tenets remain the same and are transferable, including: a harmonised and cohesive approach to delivering cash transfers at scale across the aid community; common targeting and quality assurance mechanisms across the aid community and the SSN; the ability to fund and plan long-term transitions, with the donor support to do so; and participation by powerful, established partners like the World Bank, FCDO and others to mediate the process, engage the government, and couch the transition.

Though these are essential, they are not the only lessons that this collaboration has taught the authors. Beyond these four factors, we also find an array of lessons available to all, including practitioners in the field, the donor community which increasingly funds and plans for such transitions, and policy and academic audiences who study them. These range from understanding specific differences in data protection standards, for example, to differing government, intergovernmental, and NGO mandates. Perceptions of what is feasible and appropriate also matter; issues which government social workers are able to broach are not necessarily appropriate for NGO field teams, for instance. Equally, there are often as many perceived as actual differences in the manner in which we deliver services, as well as the purpose of these services. Misconceptions about respective ways of working can be an impediment, but efforts documented here have shown that there are clear pathways around them. This is done by initially working on a limited set of technical issues to build trust and understanding, and broadening the remit of the collaboration in increments. This requires patience, a willingness to understand and adjust to the established approaches of each party to the collaboration, and sustained, long-term engagement on all sides.

Finally, this paper establishes a robust empirical basis for the integration as it was envisioned. By conducting an analysis of how our respective targeting models overlapped, the team in Iraq was able to determine the proportion of the aid community's cash transfer caseload that could be eligible for SSN transfers, to varying degrees of confidence, and help to inform household-level identification.

Though this analysis is probabilistic, it demonstrates clear proof of concept. More than anything, it demonstrates how similar these two systems are, and how clear a path forward can be, under the right conditions. Field tests focused on further validation are underway, but the technical section of this report clearly shows that this integration is feasible and a prudent means of transition.

2. THE GOALS AND REALITIES OF INTEGRATION

The remainder of this report will offer an in-depth account of the model of collaboration, covering the evolution of context, the convergence, and the conditions, both internal and exogenous, which enabled this integration to take hold. Before exploring the theory and practice of collaborating, it is important that the report grounds the succeeding sections in an account of how this integration could have looked upon completion, compared against what was actually accomplished.

To that end, this section offers a succinct summary of how the integration between a social protection network and a MPCA programme was designed in theory, followed by an explanation of the progress made in practice. Drawing on recent political developments, we finish the section with a brief analysis of why this important work remains incomplete. This is then addressed in greater detail in the final section documenting lessons learned.

2.1 Our Integration Model

This section offers a systematic account of the mechanics of integration. It outlines the key steps and decisions which made collaboration, and progress towards integration, possible.

Photo: A. Martins, Mercy Corps/ Iraq 2016

It then specifies where this process has paused and why. Neither this section nor this report review other means of integrating aid programmes with social protection systems; it only seeks to document progress made in Iraq towards an innovative means of doing so.

Using data from overlap analysis, contact made with legacy MPCA beneficiaries to offer support for SSN registration.

Registration for both MPCA and SSN conducted simultaneously as part of normal intake for MPCA.

Demarcates actual progress made.

Using common PMT criteria, overlap analysis conducted to estimate overlap in eligibility between MPCA and SSN households.

Humanitarian actors offer direct support for registration to SSN-eligible households.

Field experiment, where both PMTs are administered to each surveyed household.

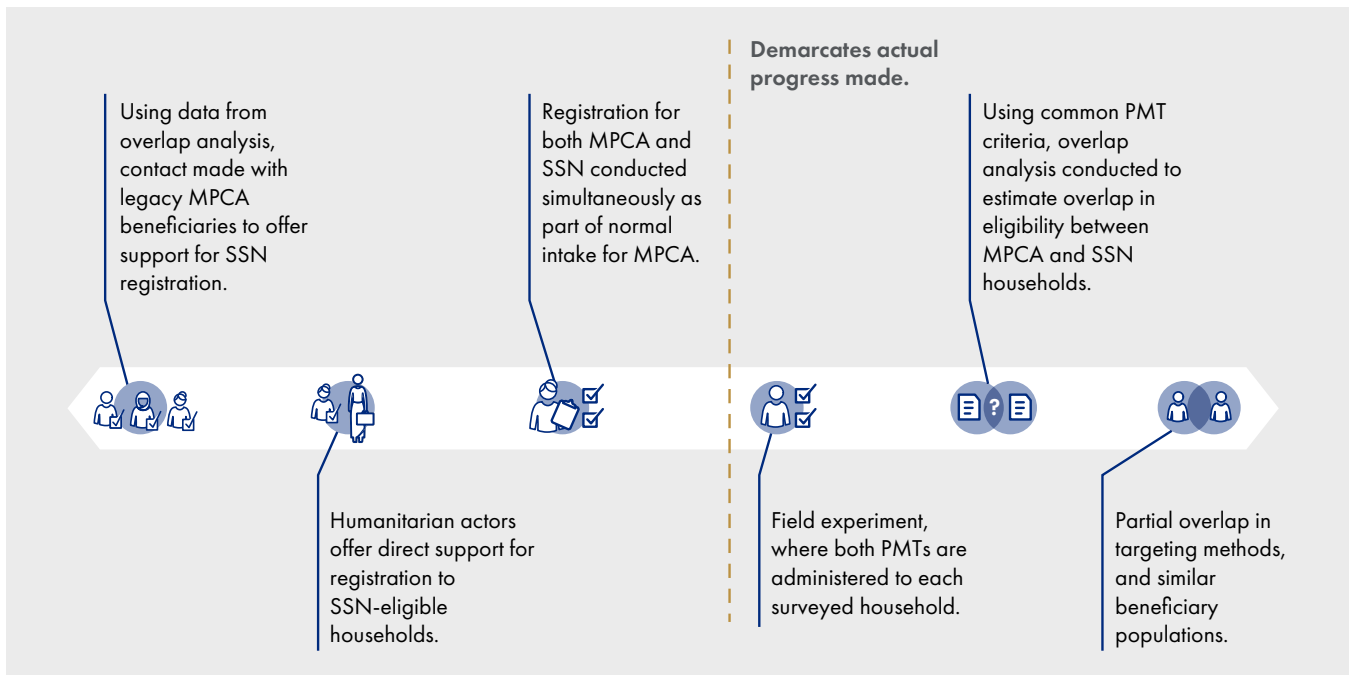Partial overlap in targeting methods, and similar beneficiary populations.

Figure 2: The Mechanics of Integration

Both the aid community's MPCA and government safety net programmes in Iraq use targeting developed through proxy means tests (PMTs) to determine a household's eligibility to receive cash transfers. It is the mutual use of PMTs and convergence around targeting more broadly that formed the basis of the integration model discussed here.[7] Although the PMTs were applied to different data sets, at different points in time, with different sample sizes, different questions and different targeting criteria, the methodologies which underpinned them were the same, yielding some overlap between criteria.

Both PMT's identified the socio-economic characteristics that suggest a household's ability to consume basic goods and services is limited, which would indicate that cash would be an appropriate response and thus inform household eligibility. Moreover, the results proved remarkably similar. Several selection criteria identified through the application of the PMTs (across household attributes, demographics and behaviours) are common to both targeting/eligibility criteria for the SSN and the aid community's cash transfer programme, and enable overlap analysis in the form of a 'pseudo-PMT'. Here, overlap analysis is defined as the probability, expressed as a percentage, that a household eligible for MPCA is also eligible for the SSN. With a sizable dataset of legacy recipient data within the aid community, this overlap analysis enables analysts to estimate the proportion of the MPCA caseload which could be eligible for SSN transfers, with varying degrees of confidence. This serves as proof of concept that this type of targeting-based integration is feasible, laying the groundwork for further collaboration.

Given the limits of a probabilistic analysis, the next step in the process is a field test, whereby both PMTs are administered to the same households. This will produce actual overlap figures, strengthening the probabilistic analysis and providing more accurate eligibility overlap figures. The data will then be used to accompany the targeting criteria in the MPCA programme, enabling humanitarian actors to administer a joint intake process and determine the likelihood of eligibility for both MPCA and SSN over the course of a normal programme cycle. The aid community's household survey process will enable the application of their own, unchanged, eligibility criteria; at the same time as indicating likely eligibility for the SSN. Here, if a given household is eligible for the SSN regardless of MPCA eligibility status, humanitarian actors would then offer access to legal support and counselling to obtain missing civil documentation (a prerequisite for registration for government services), and the administration of an offline SSN registration survey.

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7   A PMT is a statistical method which creates an estimate of household consumption (or expenditure) by applying weights to household proxies for welfare, such as housing characteristics, household demographics, behaviours, and asset ownership. These characteristics can generally be easily collected and verified for a large number of households by government officials to develop a targeting database. For more details, including strengths and weaknesses, see Grosh, Leite, Tesliuc and Wai-Poi (forthcoming) New Dilemmas for Old Problems: Revisiting Targeting of Social Assistance.

Finally, using the initial overlap analysis figures, humanitarian agencies are able to contact their respective legacy caseload of MPCA recipients and offer the same support for SSN registration as newly registered recipients to address issues of exclusion from the integration process. There are practical challenges with this component of the process, however; contact details change over time, the poorest are often the most mobile, and many simply do not want to be referred, complicating transition planning efforts for this legacy caseload.

It is also important to note that the intention was never for the humanitarian community to conduct intake and registration for the government SSN, which is an important process to be administered by government representatives in accordance with their own procedures. However, the aid community's geographic coverage of hard-to-reach areas heavily affected by conflict, could help to enable the government's team of social workers to efficiently expand outreach to households that were: (1) deemed likely eligible for the SSN through administration of the overlap analysis; (2) registered as willing to have their SSN eligibility assessed in- full by the government and (3) holding the requisite civil documentation (with/ without support provided by the humanitarian community). In addition, the process would promote greater accountability to vulnerable households provided with short term humanitarian aid but in need of longer term assistance.

2.2 Integration in Practice

Though the model had clear objectives and benchmarks towards the integration of the two programmes, changes in circumstance have postponed progress. By late 2018, the joint efforts of the World Bank, Cash and Livelihoods Consortium for Iraq (CLCI, formerly Cash Consortium for Iraq) and CWG teams had allowed for a full PMT overlap analysis and reached the planning stages for a field test, at which point progress had stopped.

Iraq had held federal elections earlier in the year, leading to a change in government and with it, a change in policy and priorities. As a result, the field test and next steps were postponed. Though couching the initial stages of the collaboration in a technical dialogue enabled the launch of this initiative in the first place, this underscores the fact that evolution beyond a technical analysis is not possible without political support.

Regardless, the authors do feel that the model of integration, as initially conceptualised, offers a roadmap for similar efforts elsewhere. At the time of writing, the field test data have been collected and are currently being analysed with results expected in late 2021.

3. AN ACCOUNT OF THE COLLABORATION

3.1 Multi-Purpose Cash Assistance in Iraq

As an instrument of aid, MPCA has been a pillar of the Iraq humanitarian response from as early as 2014. Since the onset of hostilities, an estimated one million vulnerable individuals have been provided with MPCA across the eight most conflict-affected governorates of Iraq. This is at a time when the conflict against IS strained government capacity and coffers in these same locations. Though the use of MPCA was limited at first, totalling approximately $15 million in 2015, it grew exponentially by 2019, reaching an estimated $114 million and constituting a rudimentary safety net in its own right. With this exponential growth came greater maturity through improved harmonisation, scale and effectiveness, which in turn supported prudent transition planning in 2018. Overall, three factors are key to the success of MPCA in Iraq:

1. **Robust coordination,** through the Iraq Cash Working Group (CWG). Formed in 2014 with the explicit support of the Humanitarian Country Team and Humanitarian Coordinator as a 'semi-cluster' [8] to coordinate the growing use of MPCA, the CWG was given a seat at the ICCG [9] and, following sustained advocacy, was granted a standalone chapter in the 2015 Iraq Humanitarian Response Plan (HRP). MPCA has had a standalone chapter in the HRP every year since, with its own sectoral objectives on basic needs, targets, and indicators. This has helped generate resources for the CWG, institutionalise its coordination, and drive fundraising for its objectives by formalising donor support.

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8   Within the humanitarian system, a 'cluster' is a unit that coordinates the implementation of programmes within particular sectors of intervention. There is typically both UN and NGO representation within the cluster's leadership. The leadership will produce operational guidance, set sector objectives, monitor areas of implementation, and coordinate with other clusters to ensure consistency.

9   The ICCG (inter-cluster coordination group) is a unit comprised of the leadership of the various sectoral clusters, mandated to coordinate the wider humanitarian response and the development of Humanitarian Response Plans.

2. **The formation of a consortium to improve the efficiency, geographic reach, and effectiveness of MPCA.** The CLCI was formed in 2015 with the express purpose of enhancing the impact of MPCA by designing and mandating a harmonised approach to the management and delivery of MPCA, fostering closer operational coordination, and expanding geographic reach. Since 2015, the CLCI has reached over 80,000 households (or over 500,000 individuals) and has served as a hub of technical expertise and evidence to enhance the response as a whole. In 2017, the CLCI developed a three-year operational strategy that prioritised increased scale, research, and highlighted the importance of prudent transitional planning through MPCA-SSN linkages. The formation of a consortium comprised of large international NGOs enabled the non-UN community to garner a critical mass and achieve scale. With this scale came enhanced voice across the aid community, cost efficiency, [10] and improved capacity to advocate for a fully harmonised approach within the humanitarian architecture. The formation of a consortium also ensured much improved quality of funding, including dedicated research and innovation resources and assured continuity. Combined, these helped the humanitarian community overcome the conventional challenges of turnover and limited project cycles.

3. **Sector-wide, harmonised programme design for transfer values and targeting.** All MPCA actors used a CWG-endorsed, harmonised transfer value derived using the Survival Minimum Expenditure Basket methodology [11] which was crucial to cohesion. Moreover, in 2016, the CLCI developed a PMT, utilizing its own extensive programme data set, to inform its own targeting model. The targeting model also formed the basis of the CLCI's monitoring and evaluation (M&E) framework. Both approaches were subsequently shared with the other CWG members as public goods, and endorsed and adopted by CWG members in 2017, promoting consistency in programme quality, data collection, targeting, and M&E across the MPCA response. This is the first and only instance of an entire MPCA response, including relevant UN agencies, acting in unison with common tools, surveys and programme design, enabling unprecedented scale. Although coordination and harmonisation is voluntary at the CWG, members formed a critical mass of standardised approaches that incentivised other CWG members to adopt the same tools and ways of working. Donors also harmonised their approach to funding MPCA to enable sustained, institutionalised support that survived and minimised turnover, and encouraged funding for actors who administered services using the CWG blueprint. This also ensured that relevant UN agencies altered their own approach to harmonise with CWG recommendations.

4. **Institutionalised commitment.** From the outset, the CLCI had institutionalised a strategic commitment to linking with the SSN, also adopted by the CWG in 2017. This commitment formed the basis of the rationale for a maximum of 3 transfers and drove the establishment of integrated referral pathways to provide households missing civil documentation with legal support to obtain replacements, given that this represented an access barrier for households attempting to register with the SSN. When the actual integration effort was launched, it did so on a pre-existing strategy of complementarity and transition that was: 1) already socialised, and 2) widely recognised to have been imperfectly addressed prior to the overlap analysis since vulnerable households were still not connected to the SSN system.

To the knowledge of the authors of this report, this was the first instance of a PMT's adoption by all CWG members across the MPCA response. It was this early harmonisation in targeting and programme design that laid the groundwork for the collective efforts towards transition documented in this report. In a system where decentralisation and deviation are the norm, harmonisation on this scale enabled the humanitarian community to engage with the government and the World Bank with a common voice and a common understanding of the underlying tenets of MPCA programming. It also pre-empted fragmented and competing communication with the government, ensuring engagement on a set of clearly defined parameters: the commonality between our respective PMTs, and the geographic coverage of any attempt at integration, above all.

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10   See https://reliefweb.int/report/iraq/evidencing-value-money-cci-s-cash-and-legal-programmes-cash-consortium-iraq-november for the CLCI's "Evidencing the Value for Money of the CLCI's Cash and Legal Programmes".

11   The Survival Minimum Expenditure Basket is an approach to arriving at a transfer value. The value of the 'basket' is arrived at by summing the prices of basic food and non-food items that an average household needs to consume over a set period, typically one month. For an overview of the 2018 SMEB revision, see the report by the Iraq CWG.

3.2 The Social Safety Net in Iraq

The Iraq SPN provides a range of benefits for households and individuals, including non-contributory food assistance (the Public Distribution System, or PDS), health subsidies for women, some cash and in-kind assistance for displaced households, pensions for the retired, assistance to the families of military personnel, and the SSN, which provides unconditional cash transfers targeted at poor households.

Poverty reduction efforts were formalised in Iraq in 2006, culminating with the first Poverty Reduction Strategy (PRS) by the Ministry of Planning (MoP) in 2010. This strategy refocused social welfare expenditure away from very large government subsidies for consumption to an expanded investment in human productivity and targeted transfers to the poor. The second PRS, covering 2018-2022,[12] focuses on creating opportunities for sustainable income, empowerment and building human capital and establishing an effective SSN encompassing a dedicated Social Protection outcome which aims at,

> *"improving the targeting for the existing programs and reforming the social protection system, especially the Public Distribution System [PDS; ration card system] and the social safety net."*

The new strategy recognises the unique needs of a post-conflict Iraq, including the welfare and recovery of Internally Displaced Persons (IDPs) and returnees. The vision for the Iraqi SPN is also contained in the Iraq Social Protection Strategic Roadmap 2015-19, which was developed in November 2014 by the GoI's MoLSA and with support from the World Bank. The Roadmap states that the GoI,

> *"...aims to have a comprehensive, integrated, and efficient social protection system for Iraq covering social safety nets, social insurance, and labour market policies."* [13]

This was accompanied by another important development for poverty reduction in 2014 through the passing of the Social Protection Law of Iraq (11/2014), which reformed eligibility for social assistance through the use of proxy means testing (PMT),[14] and funded more robust case management by an expanded cadre of social workers to serve as front line staff.

Despite significant ongoing GoI efforts to provide for poor Iraqis and improve the Social Protection system, challenges remain. The online system for SSN registration has only been opened twice, both for limited periods, and has not been re-opened since June 2016 due to fiscal constraints. This has led to a waiting list of approximately 340,000 individuals (or an estimated 56,000 households) still to undergo MoP verification and enrolment. Using a recent poverty rate estimate of 20.0%[15], an estimated 7.3 million Iraqis fall below the poverty line, meaning the SPN currently only reaches around 15% of those deemed poor. Despite the remaining coverage gap, this is still an improvement over the previous categorical targeting approach, where it was estimated that only 11% of the poor (or those in the bottom 20% of Iraqi society) received assistance.[16] After passage of the 11/2014 Social Protection Law and the development of the PMT, around 43% of existing beneficiaries were deemed ineligible and approximately 750,000 new households were found to be eligible. [17] The SSN now reaches 1.1 million households with electronic cash transfers delivered on a quarterly basis.

3.3 Framing the Iraq Transition

Three models help to frame the Iraq integration of humanitarian relief programmes with the social protection system. These are 1) the maturity of the hosting social protection programmes in the transition, 2) the transitional scenario, and 3) the activities that define the aims of the transition. Analysis of the maturity of the social protection systems is a necessary first step in planning the type and scope of transition that can be accomplished, if any. For clarity, **Table 1** on the next page summarises the diversity and varying levels of maturity of social protection programmes.

The categories depicted merely summarise the degree of maturity, and cannot address the complex context a given social protection system may be embedded within. Often, entrenched issues of conflict, social and political cleavages and institutional dynamics determine the success of a transition; here, the objective is to convey that a degree of maturity is a

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12   Government of Iraq (2018) Strategy for the Reduction of Poverty in Iraq, 2018 – 2022, Baghdad, Iraq.

13   World Bank & GoI (2015) 'Pro-Poor Targeting in Iraq: Tools for Poverty Reduction'.

14   A PMT is a statistical method which creates an estimate of household consumption (or expenditure) by applying weights to household proxies for welfare, such as housing characteristics, household demographics, behaviours, and asset ownership. These characteristics can generally be easily collected and verified for a large number of house-holds by government officials to develop a targeting database. For more details, including strengths and weaknesses, see Coady, Grosh and Hoddinott (2004).

15   This may be higher in the IS-held areas; a full revision of the poverty line and poverty rate will be conducted following the 2021 IHSES survey.

16   Alkhoja, G., et al. (2016) 'Social Safety Nets in Iraq: Reform in a time of Fragility, Conflict, and Violence', World Bank Group, Washington DC.

17   Ibid.

necessary condition for transition to take place. Within this spectrum, we situate the Iraqi SPN in Category 4, or 'State-led Commitment'. This depicts a range of available services and government commitments to the expansion of different programmes, as stated in the PRS and Roadmap discussed above. It is important to note that the GoI already puts on-budget financial contributions to the programme for 1.1 million households, but the actual expansion of the service has proven more difficult, given insecurity and diminished capacity in conflict-affected governorates. The Iraqi SPN is also locally funded, with donors and multilaterals offering mostly technical assistance, making the country's SPN relatively mature. Maturity does not guarantee that priorities will remain the same, however. Changes in government composition and policy, including individual ministers, will naturally impact integration efforts. Such changes are precisely why efforts paused in building a durable linkage between the MPCA and social protection systems.

Table 1: Categorising the Maturity of Social Protection Systems

CATEGORY OF MATURITY		DESCRIPTION
1	NON-EXISTENT	No state interest in developing long-term social protection, and only ad-hoc foreign aid / humanitarian interventions.
2	INTERNATIONALLY-LED	No clear progress in state policy, but emerging foreign aid interventions shaping up towards a system with some elements of harmonisation or coordination.
3	STATE-LED INTEREST	Some state interest to expand social protection (to the most vulnerable), with some elements shaping up, e.g., scaled-up aid-supported interventions or an outline of what could become a national flagship programme.
4	STATE-LED COMMITMENT	Commitment to expand social protection (as articulated in e.g., national strategy), with some flagship initiatives for the poor (co-)funded by the state.
5	STATE-LED EXPANDING	Clear state policies / laws and a growing set of social protection schemes.
6	STATE-LED MATURE	Well established system with high coverage of populations and needs.

Source: Oxford Policy Management (2015)

Assuming a transition is feasible, the next factor is the transitional scenario itself, which is shaped by the government's capacity and willingness to engage with aid agencies, the capacity and willingness of aid agencies to engage with the

government, and donor capacity to convene and support collaboration. In our integration and transition model, the transitional scenario trends towards national leadership and nationally-led development programming (outlined in **Figure 3**), whereby the international humanitarian footprint is gradually tapered or subsumed under a more coordinated, centralised effort to administer social protection services. Here, international assistance is either less autonomous (central government determines where aid is delivered) and serves underserved caseload, serves as a pipeline of recipients into nationally administered systems such as the SSN, or a combination of both.

When the aim is to connect internationally led, short-term CTPs with national social protection systems, an array of activities and methods could define that transition. These range from minimalist programmatic analysis, without any transitional commitments, to a full handover
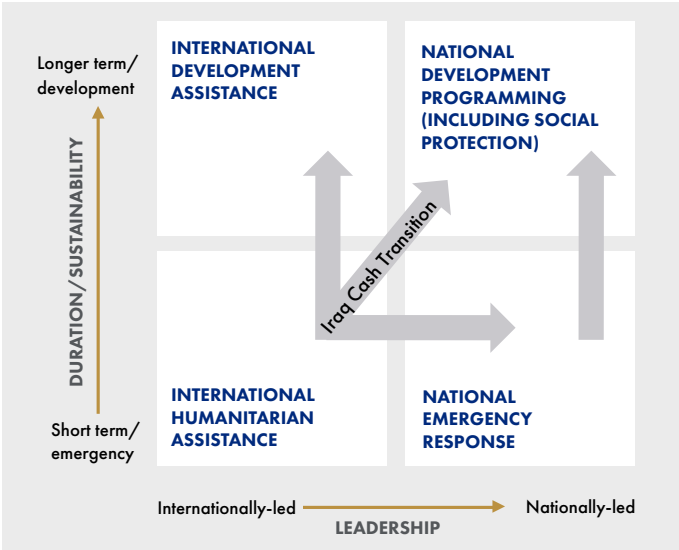
Figure 3: Transitional Scenarios   Source: Gentilini et al (2018) [modified by author].

of the service and caseload to national systems. In Iraq, the initial impetus towards a full commitment began with policy-level discussions that highlighted similar objectives between the GoI's SSN and the humanitarian community's MPCA, as well as complementary expertise and geographic coverage. This provided the space to launch a technical dialogue to develop a transitional model, which could continue without undue external pressure. As a part of this process, technical teams conducted overlap analysis between the two services, and designed a method by which full field integration or co-administration of intake would take place. The range of models available to planners are depicted in **Figure 4** below.

INTERNATIONAL HUMANITARIAN ASSISTANCE		International Development Assistance	
INTERNATIONAL HUMANITARIAN ASSISTANCE			National Social Protection
Programmatic Analysis: Eligibility analysis (e.g., social protection eligibility criteria, programme requirements) Systems analysis, including data protection protocols	**Programmatic Alignment:** Targeting models (e.g., PMT, PMT+, community-led) Target area/s (districts, towns, villages)	**Programme Support:** Civil documentation recovery Social protection programme registration Capacity- building	**Programmatic Handover:** Transferral of beneficiary databases On-going complementary programmes (e.g., financial literacy)

Figure 4: Transitional Actvities   Source: Authors.

What makes the Iraq case unique is the specific combination of sufficient differences and similarities between humanitarian and social protection services, including their design, the scale and geographic coverage of humanitarian programming and the maturity of federal social protection systems. Whereas the usage of similar PMTs allowed for a common method of conceiving and planning around the respective programmes, enabling convergence, the differences in geographic coverage reduced the risk of friction and competing claims. Whereas the government was unable to deliver assistance in the governorates most affected by the conflict, the entirety of the humanitarian community's caseload of recipients was drawn from these specific locations. This made planning for a horizontal expansion much easier, given the assumed absence of duplication on a large scale.

Moreover, the World Bank recognised the SSN reform process would benefit from the humanitarian community's experience with communication and accountability mechanisms, and monitoring and evaluation, as well as complementary programming such as legal support for missing civil documentation, which represented an access barrier to the SSN. More broadly, there were hopes that the humanitarian community's widespread reach and capacity in underserved areas would contribute to efforts to build a social registry. Meanwhile the humanitarian community was looking for local systems to support continued access to assistance for households most in need. Ultimately, there was enough convergence for both actors to engage with each other, geographic overlap was limited, and opportunities for collaboration were mutually beneficial.

3.4 Cash Collaboration Timeline

In early 2018, MPCA actors had begun designing a transitional model away from internationally funded humanitarian assistance. One of the driving factors of these conversations was the size and location of the MPCA caseload enabled by the scale of harmonisation. At this time, the combined efforts of all CWG partner agencies had provided transfers to over one million individuals or nearly 200,000 households across the eight most conflict-affected governorates. While it was assumed that not all MPCA beneficiaries would qualify for longer-term assistance, the size of the potentially eligible humanitarian caseload in territory where the government's reach was limited was significant enough to warrant a careful examination of how referrals to the safety net might be facilitated safely and effectively. This launched policy-level discussions that provided the space to start building trust and understanding among the World Bank, and the humanitarian community, of their respective mandates and associated cash transfer programs.

In April 2018, transition planning began to build momentum through a two-day MPCA and Social Protection Network Linkages workshop convened by FCDO, UNHCR and the World Bank. The workshop was attended by key stakeholders across technical and policy roles from MoLSA, the World Bank, the CLCI, the CWG, key UN agencies (UNHCR, UNICEF, and WFP) as well as representatives from ECHO, Global Affairs Canada and the US Government. It was acknowledged that among Iraq's myriad of SPN services, the MoLSA SSN was the programme best placed to meet the basic needs of the poorest subset of households drawn from the humanitarian community's areas of intervention. This important event provided the space for all actors to explain their objectives, reach and approaches to delivering this service. During the workshop, the World Bank presented the PMT targeting models used for the SSN and the CLCI presented the humanitarian PMT used for MPCA, allowing for a basic initial overlap analysis to be conducted. The variables in the two targeting models were shown to have a common methodology and a degree of overlap in indicators used which offered a rigorous basis on which to pursue closer engagement through analysis of programme eligibility.

Technical staff initially collaborated through the development of the pseudo-proxy means test (PPMT), which allowed stakeholders to estimate the size of the MPCA caseload that would be eligible for longer-term cash transfers through the SSN. It also enabled a more detailed analysis of the households deemed to be eligible for the SSN, including demographics, consumption, income, coping strategy usage, and the like. While the specifics of the PPMT are detailed in the accompanying **Iraq PPMT Technical Report, the analysis found that a majority of MPCA recipients would also qualify for SSN support. If targeting the poorest 35% of households, nearly three quarters or 73.5% would be eligible with, 50% confidence. At the national poverty line, just over half or 54.1% would be eligible, at 50% confidence.**

The timeline in Figure 5 below plots the key milestones for SP and MPCA sectors that led to the collaboration and the development of the pseudo-proxy means test (PPMT), from the passing of the Social Protection Law in 2014, the introduction and growth of MPCA, through to the April 2018 workshop.
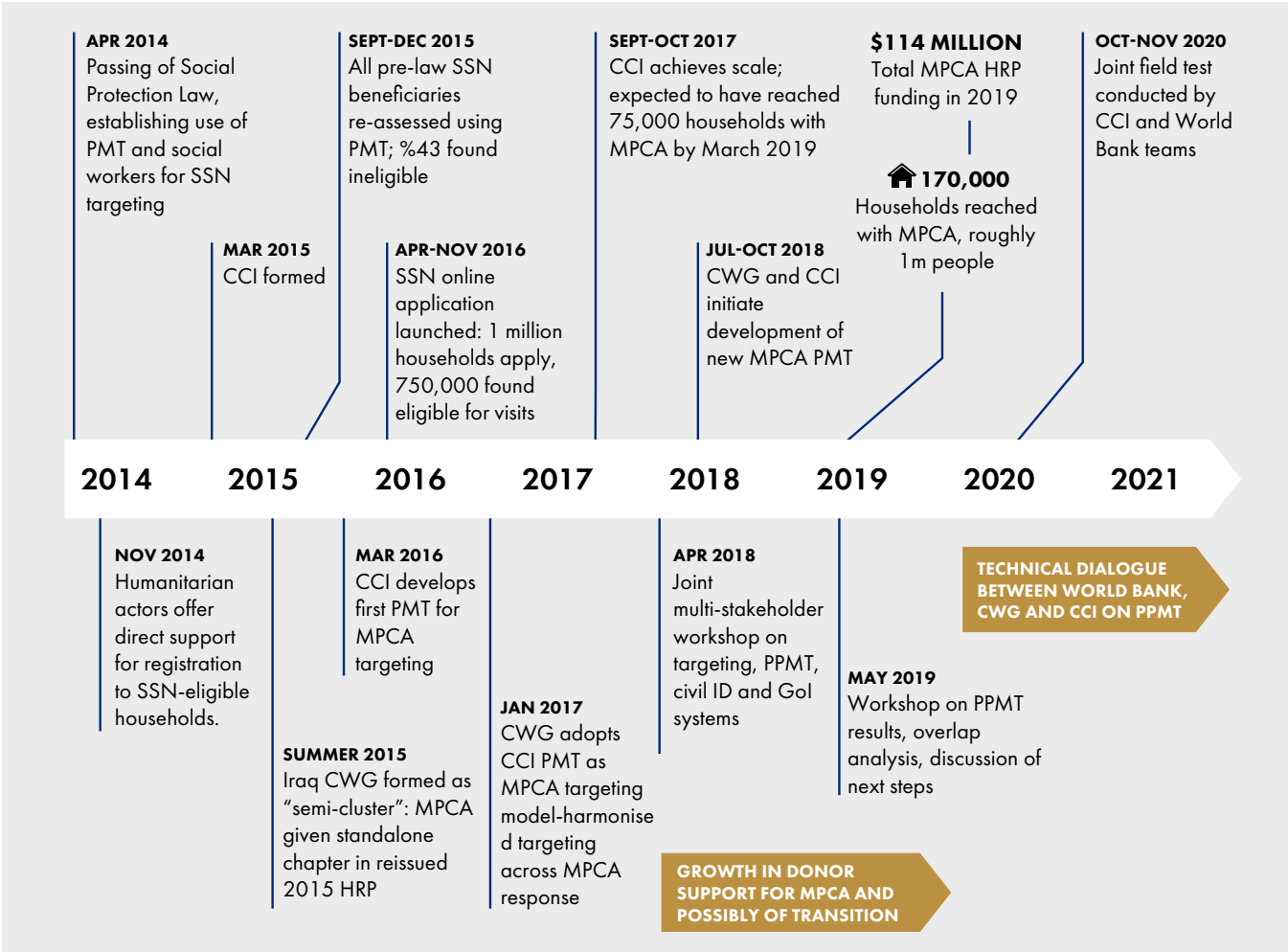

Figure 5: Timeline of Key Activities

This unique collaboration has resulted in several lessons for humanitarian and development actors and donors. These lessons are important at a time when the humanitarian response in Iraq is commencing a scale-down in an accountable and responsible manner, and development actors are yet again ramping up efforts towards longer-term poverty reduction. It is also key to the aid community's broader, policy-level efforts to better institutionalise linkages between CTPs and social protection systems in similar crises. Against this backdrop, the effort to build this linkage in Iraq is offered to inform policy both within the Iraq response and through the relevant Grand Bargain work-streams. Before we detail the lessons for and from each cohort of partners, two key lessons, applicable to all, are noteworthy.

Trust building and information sharing to promote greater understanding of different UN/NGO, multilateral and government mandates, guiding principles, and ways of working are crucial: In Iraq, many of the key stakeholders had experience in both the development and humanitarian spheres across different entities and in different capacities. Hiring practices that recognise the value of both development and humanitarian expertise are helpful, regular opportunities for stakeholders to communicate and understand each other's work are important, and an iterative approach to engagement designed to explore, test, and build towards a bigger goal over time are crucial for identifying meaningful opportunities to link aid and social protection systems. In Iraq for instance, other proposed approaches to collaboration, such as adopting the GoI's PMT, bulk exporting household data, or serving households on the government's wait-lists, were not appropriate or feasible for the humanitarian community. The eventual collaboration came to fruition due to the existence of strong relationships between stakeholders at the technical, policy at strategic levels that ensured trust, respect for each stakeholder's mandate and guiding principles, and facilitated the prolonged engagement that was required to identify a safe and effective transition model that would be feasible for all.

Government support is essential. Policies and officials can change, and an iterative approach to Government engagement is required by all stakeholders. Despite the broad support this partnership managed to elicit from the federal MoLSA, a change in government following a federal election in 2018 led to a change in cabinet and a change in policy priorities. The new Ministerial team is currently focused on different priorities, and while it is hoped that the initiative may proceed, continued engagement is not guaranteed and it is likely that a renewed effort to build trust, understanding and awareness of the potential opportunities posed by continued collaboration will be required. This process would benefit from documentation outlining the process thus far (as reflected in this report), translated, and accessible to policy-makers.

4.1 Lessons for Humanitarians

Robust programme quality standards are key, including rigorous monitoring and evaluation standards, a well-maintained database, robust data security (governed by data-sharing agreements), and data privacy protocols were necessary to undertake an exercise such as this in a safe and ethical way, in which data and analysis will need to be shared and made accessible to multiple stakeholders (more on which below). Programme quality also allowed the humanitarian community to engage with both the World Bank and MoLSA teams confident in the understanding of the range of quality controls the MPCA programme had in place.

Targeting methodologies provide an entry point for efforts to align/link aid with social protection systems: In the Iraq case, the use of PMTs for targeting, although typically uncommon among humanitarian actors, helped lower the barriers to engagement by fostering a common understanding of the issues the technical teams were grappling with, ensuring there was a shared language between stakeholders, as well as encouraging donor funding of the work. While not essential, [18] a robust, empirically grounded approach to targeting was the cornerstone of the exercise. The use of the PMT for both humanitarians and MoLSA meant that: (i) an existing humanitarian database with PMT indicators already existed and did not need to be retrospectively collected to conduct the overlap analysis. The analysis could thus be done without committing additional

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18   In theory, similar analysis can be conducted even when the humanitarian and government targeting models are not based on a similar methodology. For example, a govern-ment programme could still target using a PMT while a humanitarian programme is categorically targeted (e.g. to households with children, elderly, and the disabled) or even universally available. In this case, as long as the humanitarian intake process recorded some or all of the indicators used in the government PMT models, an eligibility overlap analysis would be feasible. Alternatively, if the government programme was targeted in another fashion (e.g. categorically), information on the government eligibility criteria just needs to be collected by humanitarians.

resources for additional fieldwork; (ii) a humanitarian technical team knowledgeable and experienced with PMT models was in place to work with the World Bank's Poverty and Equity team; (iii) donors were more willing to continuously fund the analysis, knowing there was sufficient common ground on which to collaborate; and (iv) both technical teams (at the World Bank and from the humanitarian community) understood the determinants of poverty and vulnerability in the same manner.

Scale is a must: if it weren't for the scale of harmonised MPCA programming in Iraq the activities aimed at linking MPCA to the SSN would have had less credibility and may not have been possible. This speaks to the benefit of expanding reach through consortia and well-coordinated and influential cash working groups in a highly decentralised aid system, the significance of technical harmonisation, and the importance of funding to make this possible. Combined, these allowed the humanitarian community to attain scale, which in turn enabled investment in technical standards and expertise, evidence gathering and credibility. As noted above, the legacy MPCA caseload was larger than the SSN waiting list, generating a strong impetus to find a transitional solution. In addition, the CLCI's development and advocacy for the adoption of the PMT and associated tools and surveys through the CWG meant that the targeting model was used at scale, compelling the World Bank and GoI to take notice and engage in good faith.

Quality of funding is essential. For the purpose of this report, quality is defined as budgetary growth, continuity in funding and proper resourcing for research and innovation, all of which were available to the CLCI and CWG members. This had the dual effect of limiting the adverse effects of high turnover rates, and allowing for the institutionalisation of programme standards across the response. It also allowed for sustained engagement with the World Bank team, which conventional, shorter term humanitarian funding streams would have prevented.

The MPCA community had the leadership, through both the CWG and the CLCI, to engage with the varied policy-level and technical stakeholders as one community, to speak on behalf of the humanitarian system and to pursue long-term engagement to execute the roadmap put forward by the stakeholders involved. Similarly, due to the scale of the MPCA response, the leadership team had the credibility, access to information and the technical expertise to embark on this collaboration.

Diversity of stakeholders: it is not common for a community of humanitarian NGOs or the UN to engage and collaborate on technical initiatives with multilateral agencies such as the World Bank, and with federal authorities, on a project of this nature. Often, the differences in the types of data and evidence gathered, the technical terminology used, and the programmatic timeframes associated with shorter term humanitarian funding, act as barriers to multi-stakeholder collaboration. This exercise has shown that, with certain facilitating factors and core prerequisites in place, these barriers can be overcome.

The model for linking CTPs is agnostic to context: while the exercise was Iraq-specific, the model of collaboration itself – technical collaboration and the application of an overlap or PPMT analysis – could be applied in any setting where the aim is to move towards longer-term assistance. This is the true significance of what was accomplished in Iraq; scale and convergence are what made this collaboration possible, both of which can be attained in other humanitarian crises.

4.2 Lessons for Development Agencies

The **World Bank**, as a multilateral intermediary, had the mandate, relationships and convening power to secure MoLSA's initial engagement, as well as the considerable and well-documented expertise in establishing or reforming poverty reduction programmes and social protection systems in diverse contexts, meaning the technical expertise was present throughout the exercise. This convening power shielded the analyses conducted by the World Bank and humanitarian teams from undue influence and allowed the partnership to grow and develop on a technical footing. This also speaks to the limits of the model; without political support from the relevant government agencies, the collaboration is at risk of remaining within the confines of a probabilistic, technical analysis. Although this ultimately paused at the technical dialogue phase, it required engagement and support from the World Bank and donor policy teams, which created the requisite space.

The humanitarian community's reach is often complementary to the government's and can strengthen shock-responsive expansion. Integrating two disparate systems is hard work, but easier and quicker than laboriously expanding government reach into insecure areas. Often, the humanitarian community has broad experience working in areas where the government is less present due to conflict, as well as experience engaging with local authorities in those areas of intervention. This is valuable given the complexities of navigating integration outside of the central government.

Data protection standards and regulations differ: the standards held by all relevant stakeholders must be made clear for this type of exercise to be conducted safely and ethically. During the collaboration it emerged that data collection and privacy requirements differ for humanitarian actors, government and development agencies. For example, the sharing of even anonymised household-level data from humanitarian databases and surveys (for PMT and PPMT analysis) was problematic without a data sharing agreement (DSA) and the requisite consent in place, however data sharing practices within the World Bank are different. In practice, the PPMT model itself overcame this: the coefficients and formulas could be shared with the humanitarian technical team, who applied it to their own household-level data.

There are pathways around conceptual differences in program eligibility between development and humanitarian actors, but these differences have practical implications. It is important to have detailed technical discussions as the basis for collaboration in order to try to find mutually agreeable and operable approaches. For example, in designing longer-term poverty-reduction programmes, asset ownership is a common indicator because the lack of assets (wealth) is strongly associated with being in poverty. Humanitarians have traditionally tended to focus on vulnerability – whether to future shocks or poverty caused by prior shocks, usually conflict or a natural disaster – which results in a focus on short-term behaviours such as negative coping strategies. This results in the differences in the types of data collected noted above: in Iraq, humanitarians did not collect data on asset ownership (in part because enumerators do not have the same mandate), but did collect data on coping strategy usage, which were found to be closely related to per capita consumption in the revised MPCA PMT. Seeking core areas of conceptual alignment can help to overcome this. In Iraq, this was per capita consumption being used to identify household vulnerability *and* poverty by humanitarians and MoLSA, respectively. The PPMT is then a model to overcome exactly these conceptual differences by drawing on the common indicators to analyse eligibility.

4.3 Lessons for Donors

There was a **supportive donor** in FCDO, who had the requisite engagement with both social protection and MPCA programming partners to understand and identify opportunities for collaboration (which can range from political economy incentives, to technical operational barriers). There was emerging policy space to continue to pursue linkages between humanitarian and development work, in addition to mounting pressures to search for solutions to transition away from internationally funded humanitarian work in the future, which also spoke to the wider donor community. FCDO used its convening power and funding streams to organise the initial workshop and possessed the leadership and vision to bring a broader range of stakeholders together (including WFP and UNICEF, who it was not funding directly). Their personnel had sufficient time available to prioritise this workshop and coordinate a subsequent action plan, during a time where there was a clear gap in terms of dedicated leadership within Iraq, particularly deemed "neutral" enough to engage government, World Bank, UN, and INGOs.

Donor funding had itself harmonised. The degree of harmonisation across the humanitarian community was high because donors had also come together to jointly decide on a common framework for how they would fund MPCA. This exercise recognised the significant coordination and harmonisation that had been attained, as well as the different donor interests and requirements that either maintained or facilitated a degree of fragmentation, and sought to ensure shared understanding of a common way forward. Although led by FCDO and the European Civil Protection and Humanitarian Aid Operations (ECHO) agency, it engaged all other major humanitarian donors and ensured even greater harmonisation, scale, and support for engagement with the Iraqi SSN.

Necessary resourcing: Initial support funded work (i.e. human resource time) in this space within the aid community and the World Bank Technical Assistance team. This was necessary to ensure dedicated time and necessary technical expertise was on board. At the outset, the form of collaboration was not clear so space was included in projects to facilitate future collaboration with a necessary level of flexibility to adjust activities and results according to what the partnership would recommend (in this case, the PPMT). As this was a complex and long-term exercise, with atypical risks (primarily, a change in government during the exercise and the involvement of multiple stakeholders with differing mandates and rates of staff turnover), time was required to form relationships and work through initial periods of vision-building and planning. To be seen through to completion, including the design and implementation of the field test, continuous funding ensured that a) the necessary human resources were in place for the duration of the exercise (with plans in place for managing turnover), and b) the necessary core safety net systems strengthening work through the World Bank and humanitarian CTPs could continue at a sufficient scale to generate meaningful results for an operable transition plan. As a necessary evolution, a future programme would fund this work collectively instead of piecing it together from existing projects.

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