

# The Saint Lucia National Social Protection Policy (NSPP 2022-2030)



Towards a Strengthened and Resilient Social Protection System

September 2022 | Ministry of Equity, Social Justice and Empowerment

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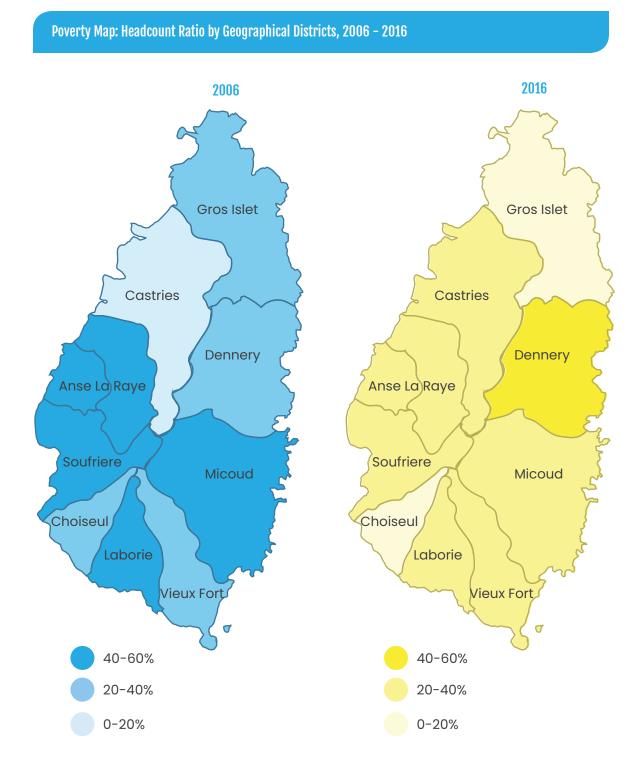
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Map by De Andre Albert using SLC/HBS 2016 Poverty Report Data by Edwin St. Catherine 2017

# **Ministerial Foreword**

Like many other Caribbean islands, Saint Lucia's social sector, over the last couple of years, has been under extreme pressure to deliver on social benefits and services to meet the needs of an expanding vulnerable population owing to the prolonged impact of the CoVID-19 pandemic and other external factors which have negatively impacted the island's economy. The sector is further strained given high levels of poverty – 25% in 2016<sup>1</sup>, high unemployment – 17.1% in 2020 (which undoubtedly has increased post pandemic) and manifestations of anti-social behaviours, particularly among the youth. Additionally, given its location and the impacts of climate change, the island is highly vulnerable to natural hazards which have the potential for significant loss of lives and destruction of livelihood assets.

Given those realities, the Government of Saint Lucia is committed to the adoption of people-centered approaches to reduce vulnerabilities and address prevailing social issues. These approaches will focus, in part, on strengthening livelihoods and building resilience against growing economic uncertainty and inequalities, as well as protecting the population against increasing environmental and social risks. Consequently, the Government of Saint Lucia, through the Ministry of Equity, Social Justice and Empowerment, has increased its focus on strengthening the capacity of the national Social Protection System to deliver effective social benefits and services to address those issues and, in that regard, since 2020 has embarked upon a Social Protection Reform with intense momentum and purpose. The reform is intended to improve Saint Lucia's Social Protection System to effectively contribute to poverty and vulnerability reduction, build human capital, stimulate productive economic activity, and create resilience to economic, climate-related and other shocks.

<sup>1</sup> Saint Lucia National Report of Living Conditions 2016 (Summary Report) - 2016

The provision of social protection is also deeply rooted in the Sustainable Development Goals (especially within Goals 1 "ending extreme poverty", 5 "achieving gender equality" and 10 "reducing inequalities") to which countries globally, including Saint Lucia, have subscribed. In particular, clearly articulated in Target 1.3 is the commitment to implement nationally appropriate social protection systems that increase coverage among the poor and the vulnerable by 2030.

As part of the Social Protection Reform agenda, the Ministry of Equity, Social Justice and Empowerment embarked upon the review and update of the 2015 National Social Protection Policy in an effort to enhance the policy framework for social services delivery. The updated National Social Protection Policy 2022-2030 represents a renewed commitment to the poor and vulnerable population of all ages. It emphasizes the life cycle approach to the delivery of social services to all who are in need of equitable and integrated Social Protection Services, with a gender-sensitive approach. In the face of scarce resources, the policy also seeks to promote and maintain a social protection system that works to deliver interventions that are Preventative, Protective, Promotive and Transformative in nature.

Priority Area 1:	Harmonise the initiatives of key stakeholders/actors within the Social Protection System and Strengthen the Capacity to Deliver Services in an Efficient and Effective Way.
Priority Area 2:	Reform and Strengthen Interventions for Protection and Equity.
Priority Area 3:	Rationalize, Reform and Strengthen Preventive/Preventive/ Promotive/Transformative Interventions and strategies, giving due consideration to ASP mainstreaming and capacity building
Priority Area 4:	Review, Strengthen and Develop the Institutional, Financial, and Legal frameworks for Enhanced Transformation and Coordination of Social Protection Services giving due consideration to ASP mainstreaming and Capacity Building.

To this end, the National Social Protection Policy and Action Plan proposes a combination of social protection measures around four core priority areas for action as follows:

Additionally, the updated policy pursues approaches that are cognizant of the social and environmental risks facing individuals, families, groups, and communities in Saint Lucia and as such, implementation will be guided by the following:

a. A well-defined Social Protection Sector made up of 4 pillars which focus on improve service delivery in the areas of Social Insurance (Pillar 1), Social Assistance (Pillar 2), Social Care and Support (Pillar 3), and Livelihoods and Labour Market Support Programmes (Pillar 4).

- b. Commitment to an inclusive life-cycle approach to facilitate the progressive realization of a Social Protection Floor as a first step towards Universal Social Protection.
- c. A Gender-Sensitive and Rights Based Perspective to the Lifecycle looks at how to make social protection serve the goal of gender equality in all respects, rather than looking at the differential impacts on women and men only. This policy also incorporates legally binding obligations to fulfil the rights of the needy, vulnerable, and deprived citizens to care and protection.
- d. An Integrated Systems Approach is embraced in this policy to ensure that individuals, families, and groups are appropriately protected throughout the life cycle by way of a sufficient range of programmes to cover their risk profile. A client-driven approach is at the centre of this approach, emphasizing putting people first.
- e. An Adaptive Social Protection (ASP) Framework which accommodates four functions as previously mentioned and explained below:

The updated Policy is complemented by a revised Operations Manual for the Public Assistance Programme (PAP) and Koudemein Sent Lisi (KSL) which speaks to all steps in the delivery system, from outreach and intake to benefit and service delivery, referral, case management, feedback and redress mechanisms, graduation & exit etc. for persons accessing social protection services; a Communication Strategy to support the implementation of the Policy; a Graduation Strategy which provides a framework and pathway options to enable persons to graduate from Social Assistance, as well as improved social protection legislative framework. The NSPP also clearly outlines the recommended institutional framework for the efficient and effective delivery of Social Protection Services in Saint Lucia.

The Government of Saint Lucia through the Ministry of Equity, Social Justice and Empowermentlooksforwardtostrong and coordinated partnerships with all stakeholders – Development Partners, International and Regional Organizations, Private sector, Civil Society organizations – in the implementation of this Policy towards achieving short and medium-term poverty reduction and long-term sustainable development for the children, youth, the working population and elderly of Saint Lucia.

#### Abbreviations and Acronyms

ARISE	Accelerated, Resilient, Inclusive, Sustainable and Equitably (A.R.I.S.E.) Shared Economic Growth.
ASP	Adaptive Social Protection
BTC	Boys Training Centre
CASP	Community After School Programme
CCAP	Climate Change Adaptation Policy
CCRIF SPC	Caribbean Catastrophe Risk Insurance Facility Segregated Company
CTG	Cash Transfer Grant
DRF	Disaster Risk Financing
DRM	Disaster Risk Management
DSPS	Division of Social Protection Services
ECE	Early Childhood Education
EDF	Emergency Disaster Fund
FCP	Foster Care Programme
FSP	Foundational Social Protection
GoSL	Government of Saint Lucia
HEAT	Human Economic and Assessment Impact
HOPE	Holistic Opportunity for Personal Empowerment
ICSECR	International Convention in Social Economic and Cultural Rights
ILO	International Labour Organization
KSL	Koudmein Sent Lisi
LAC	Latin America and the Caribbean
MoEq	Ministry of Equity, Social Justice and Empowerment
MTDS	Medium-Term Development Strategy
NELP	National Enrichment and Learning Programme
NEET	Not in Education Employment and Training
NAP	National Adaptation Plan
NBSAP	National Biodiversity Strategy and Action plan
NCD	Non-Communicable Disease
NCF	National Community Foundation
NEMAC	National Emergency Management Advisory Committee

NEMO	National Emergency Management Organization
NEAP	National Environmental Action Plan
NEMS	National Environmental Management Strategy
NFNSP	National Food and Nutrition Security and Policy
NGO	Non-Government Organization
NIC	National Insurance Corporation
NIS	National Insurance Scheme
NSPPAP	National Social Protection Policy and Action Plan
OECS	Organization of Eastern Caribbean States
PAP	Public Assistance Programme
PAP-CTG	PAP Cash Transfer Grant
PDHA	Post Disaster Household Assessment
RCP	Roving Caregivers Programme
SBDC	Small Business Development Centre
SIDs	Small Island Developing States
SLC-HBS	Survey of Living Conditions-Household Budget Survey
SMEs	Small and Medium Enterprises
SPF	Social Protection Floor
SSN	Social Safety Net
TVET	Technical Vocational Education and Training
UCT	Unconditional Cash Transfer
UGGC	Upton Gardens Girls' Centre
UNICEF	United Nations Children's Fund
WB	World Bank

- \* 2012: GoSL adopted the recommendation to progressively establish a national social protection floor as a long- term goal of national development.
- \* Four social protection floor guarantees over the life cycle identified in keeping with ILO Social Protection Floor Recommendation 2012 (No.202) - (i) health care (ii) basic income security for children, (iii) working age, (iv) elderly access to essential goods and services at the national level.
- \* The Social Protection Services Division introduced within the Ministry of Equity to enhance the efficiency and effectiveness of social services.
- \* 2014 Child Disability Grant Scheme introduced.
- **\* 2018** Cabinet adopted National Protocol for the Management of Child Abuse.
- \* 2018: Two of the five Family Law Bills enacted.
- \* Review and revision of the Maintenance of Children & Status of Children Bills ongoing.

- TROMVESON TO ACTION: \* D. Draft Standard Operating Procedures for elderly ursing care developed,
  - Vulnerability Index for Saint Lucia is
  - development of a PAP beneficiary re-certification process.
  - Public Assistance Programme (PAP) payments now mainly issued via electronic bank transfer.
  - SP now fully funded domestically
  - **\* 2020:** Child Disability Grant Scheme expanded as part of COVID-19 response.
  - **\* 2020:** PAP beneficiaries increased by 1000 in response to the impact of COVID-19.
  - \* COVID-19 impact research conducted as part of the Human and Assessment Impact (HEAT) series.
  - \* Targeting mechanisms enhanced with the introduction of and utilization of SL-NET 3.0 by all public sector protection schemes and programmes.
  - **\* 2022:** Social Protection Policy revision to ensure an Integrated Systems Approach in service delivery and an Adaptive Social Protection framework for enhanced resilience of individuals. households, and communities.

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# Background

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#### 1. Background and Introduction

The Government of Saint Lucia (GoSL) has formulated and continues to implement policies and programmes intended to result in socio-economic transformation and improved livelihoods of its citizens in keeping with its commitment to the 2030 Sustainable Development Agenda. The 2015 Social Protection Policy demonstrated Government's commitment to reducing poverty and deprivation among households, and mitigate the various risks and vulnerabilities faced by older persons, adults of working age, youth, children, women, and persons with disabilities, which negatively impact their quality of life. It also sought to enhance the resilience of communities against natural disasters.

The ultimate long-term goal of the 2015 policy was the progressive realization of a Social Protection Floor (SPF)<sup>2</sup> for Saint Lucia. Actions taken to date represent small steps towards realizing this goal.<sup>3</sup> These include the introduction of a non-contributory tax-financed Child Disability Grant Scheme targeting persons up to the age of 21 years with a moderate to severe disability for income support and the publication of research findings on Saint Lucia's ability to finance and sustain a social protection floor (SPF). Policy intent included the provision of social insurance for unemployed youth and the establishment of an Integrated Social Protection Programme within the Ministry of Equity. Importantly, the Government's short-term response to the impact of COVID-19 provided lessons learnt in considering the establishment of an SPF (HCRP NSPP Stakeholder Consultation, 2021).

COVID-19 has further exposed gaps in the Social Protection System. Existing social protection initiatives are selective and target a few people. For example, public contributory

<sup>3</sup> See Section 2 for a list of accomplishments and outstanding priorities.

<sup>&</sup>lt;sup>2</sup> See Section 2.1 of the 2015 Policy. The social protection floor concept should be taken as a minimum, not a maximum, level of social protection. Establishing a social protection floor means first and foremost horizontal expansion of coverage, making coverage universal on the guaranteed level. This does not preclude the vertical expansion in terms of further increasing benefit levels or services above the level that has been defined in the guarantee, but this is not the focus of the social protection floor.

social security under the National Insurance Scheme provides social protection coverage only to the working population in the formal sector, leaving about 84.2 percent of the labour force, 37.1 percent of whom are employed in the informal sector, without access to social security benefits (Khondker 2021).

The Lack of implementation of planned actions in the 2015 policy agenda has resulted in further fragmented and un-coordinated implementation of social protection interventions. As a result, there remains duplication of interventions, incoherence between flagship programmes, wastage of resources and limited impact on the beneficiaries (Khondker 2021: Key Informant Interviews, 2022). This policy, therefore seeks to harmonize and promote effective coordination and implementation of interventions that address risks and vulnerabilities facing persons of different age groups. In this regard, this updated policy adopts the life-cycle, rights-based, and integrated approaches<sup>4</sup> as pathways to address these shortcomings.

A framework for addressing those gaps emphasizes a strong focus on the readiness of Foundational Social Protection (FSP) to facilitate appropriate Adaptive Social Protection (ASP) actions designed to respond to various climatic, economic, income and health/pandemic shocks. As a Small Island Developing State (SIDS) existing within the context of climate change, groups and populations most likely to be negatively impacted by shocks – natural or anthropogenic – are those with limited resources to cope with the consequences. Therefore, a social protection policy that seeks to link social, environmental, and economic policies to address the multi-dimensional nature of poverty with an emphasis on ASP represents a more holistic and comprehensive approach geared towards achieving the policy goals. Saint Lucia's Medium Term Development Strategy 2020 – 2023 is equally instructive in this regard.

#### **1.1.** Organization of the Policy

The policy is divided into ten (10) sections. Section 1 is the background and introduction to the policy. Section 2 provides a summary of the status of implementation of the 2015 National Social Protection Policy and Action Plan and an abbreviated situational analysis of Social Protection (SP) provisions to life-cycle groups. Section 3 outlines the policy direction – defining SP, policy rationale, vision statement, mission statement, policy goal, policy objectives, policy scope, policy outcomes, policy mandate, and guiding principles. Section 4 identifies the population groups to be targeted by the policy. Section 5 describes the policy approach – a well-defined SP sector, alignment with the national Medium Term Development Strategy 2020 – 2023, commitment to a life-cycle and rights-based approach, and an integrated systems approach. Section 6 presents the legal, policy, and planning framework supporting the policy, while Section 7 outlines the priority areas for action under the policy. Sections 8 and 9 focus on policy implementation and the institutional framework, respectively. Section 10 on Institutional Components, identifies the key stakeholders and their proposed roles. A glossary of key terms is also included to provide clarity. A strategic action plan is appended to the policy.

<sup>&</sup>lt;sup>4</sup> The approaches are elaborated in Section 4.



#### 2. Summary of the Situation Analysis

#### 2.1. The 2015 Action Plan

A rapid review of the 2015 Action Plan revealed that 11 percent of the planned activities were accomplished, 18 percent were initiated, and 60 percent remain outstanding.

Table 2-1: Key Accomplishments of the 2015 Action Plan

<b>Dimensions</b> <sup>5</sup>	Accomplishments
Institutional	• Two of the five Family Law Bills were enacted in November 2018.
	• The new Domestic Violence Act was passed in March 2022.
	<ul> <li>Preparatory activities are ongoing for review and revision of the Maintenance of Children &amp; Status of Children Bills.</li> </ul>
Delivery	<ul> <li>Targeting mechanisms have been enhanced with the introduction of and intended utilization of SL-NET 3.0 by the flagship social assistance programmes.</li> </ul>
	• PAP payments have transitioned from mostly cash to mostly electronic through bank and credit union accounts in recent years
	• Draft Standard Operating Procedures have been developed for elderly nursing care that is consistent with international standards.
	• The Foster Care Programme was reviewed, and recommendations were put forward for the strengthening of the Programme.

<sup>5</sup> The 4 broad dimensions of the social protection system (World Bank 2021).

<b>Dimensions</b> <sup>5</sup>	Accomplishments
Delivery (cont.)	• A first step towards the development of a PAP beneficiary registry is being taken, through the re-certification process which started in 2020. Information collected through the PAP revalidation exercise using SL-NET 3.0 is being entered into the PAP registry.
	<ul> <li>The intake process for information on the eligible population for the PAP changed from paper-based to tablets/mobile devices with Computer-assisted Software used in Survey Solutions.</li> </ul>
	• The number of beneficiaries under the Public Assistance Programme (PAP) has increased from 2400 to 3600 in 2020 reflecting the government's positive response to the impact of COVID-19 on indigent households.
	• A Child Disability Grant Scheme was introduced in 2014. In 2020 as part of the response to the impact of COVID-19, payments were increased from \$200 to \$300 for 6 months.
Financing	• The progress in the development of the social protection systems is driven by substantial public spending on SSNs and overall national social expenditure.
	• Social protection interventions and programmes are for the most part domestically funded. Funding is consistent, reliable, and sustainable and does not rely on external sources. Foundational social protection programs, (except social insurance) are, for the most part, financed annually by recurrent budget expenditures which maintain beneficiary quotas without disruptions.
Knowledge	<ul> <li>Several research initiatives were undertaken including simulated research on the impact of COVID-19 under the Human and Assessment Impact (HEAT) series.</li> </ul>
	<ul> <li>Research findings are available on child well-being, budget analysis for investments in children, and multi-dimensional poverty and deprivation.</li> </ul>
	<ul> <li>Recent research has provided recommendations regarding fiscal sustainability for the implementation of social protection initiatives and advancing disaster risk financing.</li> </ul>
	<ul> <li>Various recommendations have been put forward on child- sensitive, shock and adaptive- response, and gender-responsive social protection.</li> </ul>

Notable outstanding priorities include:

- Development of a policy and strategy for graduation from social assistance programmes.
- Official launch of the St Lucia Integrated Social Protection Programme.
- Establishment of a Social Protection Network to facilitate and co-ordinate the optimal range of social protection services that Koudmein Sent Lisi (KSL) and PAP clients require to lift their households out of poverty in a sustainable way.
- National Policy for Older Persons to be reviewed and updated. The review commenced in March of 2022.

The following insights from stakeholders suggest reasons for the status of implementation of the policy and action plan.

- It was an overambitious initiative to be completed in four years.
- The Welfare Services Unit is inadequately staffed to carry out the social protection mandate of the Ministry of Equity (MoEq).
- Financial resources were inadequate to undertake the planned activities.
- Institutional fragmentation in the Social Protection Sector impeded implementation.
- The various institutional structures that could have provided needed momentum and oversight of the policy mandate were not operationalized and sustained.
- Lack of follow-up contributed to some initiatives not being accomplished.
- The Action Plan was not broken down into annual work packages to facilitate periodic implementation and review.

Insights from stakeholders on the 2015 NSPPAP - philosophy, vision statement, policy goals, principles, key policy statements and reform, suggest the following:

- The policy should incorporate adaptive measures among those articulated in Sections 2 and 4.
- The policy statement of philosophy should reflect the principles of inclusiveness, equity, and meritocracy as outlined in the GoSL's Medium-Term Development Strategy (MTDS).
- Some of the policy objectives should be refined considering COVID-19 and some may become redundant considering current efforts to achieve them, for example, the review of the legislative framework.
- Harmonization of the Public Assistance Programme (PAP) and Koudmein Sent Lisi (KSL) is a critical reform measure which should be given priority consideration based on the voices from the field which highlight "duplication of effort, waste of scarce resources, and the need for better integration of services." (Focus Group Discussants, September 2021).

#### 2.2. The 2015 Institutional Framework for Implementation

An institutional framework for implementation of the 2015 social protection policy was clearly articulated. However, the proposed framework was not applied as several of its features were not operationalized. The framework should incorporate key stakeholders including NEMO, private sector representation, the NIC, and other key development partners.

#### 2.3. The 2015 Monitoring and Evaluation Framework

A monitoring and evaluation framework was outlined to allow for the assessment of the reform process. A rapid review of the utilization of the system revealed that most of the mechanisms outlined were not operationalized and applied. Reporting requirements as featured in recent GoSL Estimates of Expenditure were not fulfilled in the case of a few programmes which have a bearing on social protection services.

#### 2.4. Summary Assessment of SP Provisions for Life-cycle Groups

SI	There is no public social security coverage for poor unemployed pregnant women.
SA	Poor and unemployed pregnant women are not specifically targeted for support under the PAP or KSL.
SC	There is no identifiable public scheme that provides social care services for pregnant women before they give birth and after they give birth.
ALMP	No identifiable scheme is in place. Pregnant women are not debarred from participating in schemes. Extent of participation is not known.
Intended Outcome	In the first 1000 days, children achieve age-appropriate physical and cognitive development levels that will facilitate success in later life.

#### Table 2.2: Children 0 to 4 years/Pregnant Mothers

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SI	No provision. No coverage. • Benefits are not transferrable to children of contributors of NIC.
SA	<ul> <li>A school Feeding Programme caters to needy students in 70 out of 74 public primary schools; however, most secondary schools are not covered by the Programme.</li> </ul>
	• The Child Disability Grant targets persons up to 21 years at which age they are required to exit from the Programme. The programme does not extend to the other life-cycle groups which leaves over 90% of the population of Persons with Disabilities uncovered.
	• There is currently no arrangement in place to ensure that children attending school who are members of PAP beneficiary households have direct access to the School Feeding Programme, the Education Assistance Scheme, or the Transport Assistance Programme.
SC	• Early Childhood Education-(ECE) is not compulsory, but voluntary.
	<ul> <li>Early Childhood Education is not universal. Approximately 12% of 3 and 4-year-olds are currently not enrolled.</li> </ul>
	<ul> <li>The Roving Caregivers Programme (RCP) has been suspended for the last 3 years.</li> </ul>
	<ul> <li>Child Labour matters are addressed separately by at least 7 agencies including MoEq, the Department of Labour, the Vulnerable Persons Unit of the Royal Saint Lucia Police Force, and the Department of Gender Affairs.</li> </ul>
	<ul> <li>Currently, there is no legal definition for child labour in Saint Lucia to guide the work of the various agencies involved.</li> </ul>
	<ul> <li>Expenditure on scattered programmes to address child labour poses difficulties in undertaking comprehensive analysis of the situation.</li> </ul>
ALMP	NA
Intended Outcome	Children demonstrate better educational participation and achievement status.

Table 2-4: Adolescents and Youth 15 to 29 years

SI •	In the absence of an unemployment scheme, the unemployed in this category are not entitled to short-term benefits under the NIC, which may include Injury, Sickness Benefits, Maternity Allowance, Maternity Grant, Medical Expenses which their contributing employed counterparts enjoy.
SA •	Access to the School Feeding Programme, the Education Assistance Scheme, or the Transport Assistance Programme. The Child Disability Grant targets persons up to 21 years at which age they are required to exit from the Programme. The programme does not extend to the other life-cycle groups which leaves over 90% of the population of Persons with Disabilities uncovered.
SC •	<ul> <li>Currently, there is no residential facility for girls on the island. There is limited capacity at the Upton Gardens Girls Centre – a day-care rehabilitation Centre for girls which can only accommodate 25.</li> <li>The Boys' Training Centre which is a residential facility for boys still suffers from stigmatization as a jail house. Most graduates return to dysfunctional and problematic households.</li> </ul>
ALMP •	The James Belgrave Microenterprise Development Fund (BELFUND) - not reaching the poorest of the poor. Lack of decentralization of the Fund is restricting more coverage.
	Regional outreach efforts employed.
•	No formal assessment has been done.
•	Employment Support Schemes – Existing schemes are characterized by low coverage accounting for 14% of unemployed youth and less than 4 % of all youth. Coverage is constrained by limited funding which in turn limits intake and capacity. Lack of coordination and duplication among agencies hinder their effectiveness.
•	The near absence of apprenticeship or internship opportunities as part of the programmes offered by the main tertiary provider is a cause for concern.

# Intended Adolescents and youth demonstrate better, higher and more relevant educational qualifications and have greater and more labour market participation and access.

#### Table 2-5: Working Age Population 30 to 64 years

SI	<ul> <li>Low coverage of the employed. The NIC design favours the employed non-poor.</li> </ul>
	<ul> <li>Missing middle comprises approximately 84.2% of the labour force (formal and informal sector workers).</li> </ul>
	<ul> <li>Participation of the unemployed and informal sector workers in social insurance schemes is low.</li> </ul>
	<ul> <li>There is no unemployment relief programme for working persons who are non-contributors to the NIC.</li> </ul>
SA	<ul> <li>PAP Coverage gap becomes wider as new vulnerabilities emerge among current beneficiaries who remain on the Programme.</li> </ul>
	<ul> <li>There is a PAP waiting list of over 500 persons, the majority of whom have been waiting for more than a year.</li> </ul>
SC	<ul> <li>The privately run Saint Lucia Crisis Corporation and the NGO Raise Your Voice Saint Lucia, as well as the state- run Women's Support Centre provide emergency shelter, free counselling, and psycho- social and legal support to mainly women in crisis and difficult circumstances.</li> </ul>
	Main issue is inadequate funding to undertake their respective mandates.
ALMP	<ul> <li>The James Belgrave Microenterprise Development Fund (BELFUND)</li> <li>– not reaching the poorest of the poor.</li> </ul>
	<ul> <li>Lack of decentralization of the Fund is restricting more coverage.</li> <li>Regional outreach efforts employed.</li> </ul>
	<ul> <li>No formal assessment on the BELFUND has been done.</li> </ul>
	<ul> <li>National Skills Development Centre (NSDC) has a variety of skills training (CVQ) offerings but is constrained by limited space.</li> </ul>
	• NELP is a community outreach facility with a wide range of course offerings.
Intended Outcome	Adults of working age have greater and more effective labour market participation and access.

SI	<ul> <li>NIC benefits go to employed or retired public sector and private sector workers only.</li> </ul>
SA	<ul> <li>KSL was not implemented in 2021 as resources were diverted by the GoSL to address the impact of COVID-19 on households.</li> </ul>
	<ul> <li>The low/slow rate of graduation from the KSL programme prevents intake of eligible households.</li> </ul>
	<ul> <li>PAP benefit level appears inadequate as new vulnerabilities emerge among current beneficiaries who remain on the Programme. This has resulted in a waiting list of over 500 persons, the majority of whom have been waiting for more than a year.</li> </ul>
	<ul> <li>The low/slow rate of graduation from the PAP prevents the intake of eligible households onto the Programme.</li> </ul>
SC	Public and Private Adult Day Centres provide care.
	• Full-time Adult Care Facilities: There is one government-run facility and 3 privately run facilities providing such care.
	<ul> <li>Adult Day Care Centres: HELPAGE Saint Lucia is the main NGO providing such care.</li> </ul>
	<ul> <li>The SSDF Home Care Programme is constrained by inadequate human resources and a limited budget which restricts wider coverage.</li> </ul>
	• State run elderly homes are quite limited. The gap is partially addressed by Faith-based Organizations, who undertake elderly home care activities of their own volition.
	<ul> <li>National Council of and for Persons with Disabilities is a key provider of voluntary home care to PWDs.</li> </ul>
	<ul> <li>Absence of an updated National Policy on the Elderly and National Protocols on Standards of Care for the Elderly.</li> </ul>
ALMP	<ul> <li>Those who are able to participate in activities (productive, leisure etc.) designed for their involvement.</li> </ul>
Intended Outcome	People of older age are more productive and engaged members of their communities and are more able to contribute to the overall well- being of their households.

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Table 2-7: Persons with Disabilities (for all life cycle groups above)

SI	No measure is in place under the NIC for PWDs who are not contributors to the scheme.
SA	GoSL provides annual transfers to the Saint Lucia Blind Welfare Association and the National council of and Persons with Disabilities. PWDs are part of the waiting list to access PAP and KSL. A Child Disability Grant provides monthly cash transfers to households to provide care and other needs for children with disabilities.
SC	Households with PWDs are targeted for care and assistance under the Home Care Programme administered by the SSDF. Absence of National Protocols on Standards of Care for PWDs.
ALMPs	There are no specific programmes for PWDs. Those who are capable participate in programmes such as NELP. The programmes do not use methodologies and establish competency levels to accommodate the disability of the individual.
Intended Outcome	PWDs have greater and more effective participation in interventions designed to contribute to overall improvement in their well-being and quality of life, irrespective of age.

#### 2.5. Summary Overview of the Social Protection System

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The review of the SP System revealed systemic issues and gaps in foundational as well as adaptive social protection which show a lack of readiness of the social protection system to effectively respond to natural disasters and economic, income, health, and psycho-social shocks. Its lack of readiness is characterized by low social assistance coverage, a small and fragmented programme mix and inadequate complementary interventions for beneficiaries, a weak MIS and absence of well-established beneficiary and social registries, weak co-ordination within and among agencies aligned to the SP sector, absence of an all-encompassing legal framework, inadequate human resource capacity within the MoEq, outdated operational processes attending programmes' execution, low benefit adequacy, low but consistent spending. A promising reform is the introduction of a new targeting mechanism designed to reduce inclusion and exclusion errors in the selection of eligible beneficiaries for social assistance. However, other reforms are needed to strengthen the readiness of the foundational SP so that ASP can be facilitated. Several recommendations are contained in Section 7 (Priority Areas for Action) of the policy and further elaborated in the Strategic Action Plan appended to this policy.

## 3. Policy Direction – Towards a Strengthened and Resilient Social Protection System

Policy Direction is described under the following captions: (i) Defining Social Protection, (ii) Rationale, (iii) Vision Statement, (iv) Mission Statement, Policy Goal, Policy Objectives, Policy Scope, Policy Outcomes, Policy Mandate, and Guiding Principles.

3.1. Defining Foundational Social Protection – The Social Risk Management Perspective<sup>7</sup>

The 2015 Social Protection Policy defined social protection, in a broad sense. In part, it states that social protection is:

"a set of public and private actions<sup>8</sup> that aim to address the vulnerability of people's life via social insurance, which offers protection against risk and adversity throughout life; via social assistance, which offers payments, in-kind grants, social services and psychosocial interventions to support and enable the poor; via labour market interventions, which offer improved prospects for participation by the poor in employment..." p. 22.

This definition was premised on the impact of the global financial, fuel, and food crisis which began in 2007 / 2008. This triple crisis created severe difficulties for financial institutions throughout the Caribbean. Many households lost savings and retirement benefits and were forced to reduce consumption while coping with higher prices of

<sup>7</sup> In the Social Risk Management Framework, 'risk' refers to the risks to individuals and households of suffering losses of income or assets or falling into poverty.

<sup>&</sup>lt;sup>8</sup> Non-state social protection includes all forms of informal community and family safety nets such as cooperatives, social welfare associations, burial associations, rotating savings and credit associations, and traditional solidarity networks. While non-state social protection is more prevalent than state provided social protection, there is growing evidence that direct, regular and more predictable transfers by the state are more effective in the long run. The state remains the main actor able to mobilize sufficient resources to enable distributive and redistributive policies (Holmes & Jones, 2013; UN Women, 2015).

food and goods. The crisis brought about an increase in unemployment resulting in reduced income and stifled economic growth. The overall impact was more severe for the poor and the vulnerable (UNDP, 2010).

The COVID-19 health situation which reached pandemic proportion during the first half of 2020 resulted in an unprecedented economic downturn due to the closure of borders negatively affecting landed and cruise tourism which is the mainstay of the economy, closure of businesses, and job losses, particularly in the tourism and related sectors (more women than men were impacted).

The crisis also brought about an increase in unemployment particularly among the youth, loss of household income and reduced consumption leading to food insecurity in many indigent, poor and vulnerable households. The overall impact was more severe for these segments of the population, and in particular, for those in the various life cycle groups within those segments. Individuals who face risks, not due to age (e.g. PWDs) were also severely impacted.

GoSL responded with short-term social protection measures through cash transfers to contributors as well as non-contributors to national social insurance to cushion the impact on the poor, vulnerable and those at risk. This response was also complemented by measures undertaken by private sector entities, local NGOs, as well as donor agencies including UNICEF Caribbean Area Office, and the World Food Programme Barbados Office for Emergency Preparedness and Response in the Caribbean.

GoSL also provided tax incentives to selected business operations to facilitate business continuity, as well as moratoria on housing loans. The aim of the overall response was to deal with both the absolute deprivation and vulnerabilities of the poorest and with the need of the currently non-poor for security in the face of shocks and life-cycle events.

Based on the preceding narrative, defining social protection in the Saint Lucian context is premised on past experiences which have sought to address levels of vulnerability, risk, and deprivation deemed socially unacceptable in society. Therefore, the social protection that Saint Lucia wants to aspire to is that:

Indigent, poor and vulnerable people are protected against life-cycle and livelihood risks as well as shocks through access to public (social assistance / non-contributory) and private (social insurance / contributory) income transfer schemes, social care services, livelihoods and labour market opportunities, and complementary support services, all of which are backed by legislative measures, for them to achieve income security, and a dignified standard of living.

#### 3.2. Defining Adaptive Social Protection – The Disaster Risk Management Perspective<sup>9</sup>

Saint Lucia has experienced the devastating effects of natural hazards such as hurricanes, floods, and landslides which have negatively impacted households and communities resulting in loss of housing stock, livelihoods, income, and the onset of instant and protracted poverty, increased risks and vulnerability and deprivation. Features of climate change including sea level rise, increases in heat temperature and more frequent droughts are part and parcel of the risks and vulnerabilities facing the population, especially the poor and the indigent.

Adaptive Social Protection (ASP) is an approach to reduce the negative impacts of global challenges such as poverty, food insecurity and climate change, as well as their increased interaction with natural hazards, such as floods, hurricanes, or earthquakes. ASP involves combining social protection, disaster risk management and climate change adaptation. In practice, this means that social protection programmes, such as health or unemployment insurance, are adapted to cover injuries, income losses, and other impacts resulting from natural hazards and climate change<sup>10</sup>

At the same time, it is necessary for climate change adaptation and disaster risk management programmes to explore the role of social protection mechanisms to adapt to climate change more effectively and to prevent, prepare, respond and recover from disasters. This applies to communities which, as a collective, are impacted in several ways. The role of community members is central to the process of adaptation.

Defining adaptive social protection in the Saint Lucian context is premised on past experiences which have sought to address the impact of shocks created by natural hazards and disasters which, if not addressed, will result in more entrenched poverty, risk, vulnerability, and deprivation (Oxford Policy Management: World Food Programme, 2019). The notion that guides the adaptive social protection that the people of Saint Lucia want are that:

Extremely poor and vulnerable people and communities are protected against the negative impacts of various types of shocks (for example income and health) brought about by pandemics, natural disasters or climatic events, through disaster risk management interventions (risk reduction, risk absorption and risk transfer actions and activities) backed by legislative measures designed to build resilience geared towards their ability to prevent, prepare, respond and recover from the impacts, thereby facilitating the achievement of a dignified and improved standard of living.

<sup>&</sup>lt;sup>9</sup> In the disaster risk management approach, we are starting further upstream, with the risk of the disaster event occurring in the first place.

<sup>&</sup>lt;sup>10</sup> Adapted from "Five Facts on Adaptive Social Protection (ASP)", United Nations University, Institute for Environment and Human Security.

#### 3.3. Policy Rationale - The Cost of No Social Protection

This policy acknowledges that there are several sets of costs and impacts resulting from neglect or abandonment of social protection.

- Poverty and Vulnerability. Impoverished populations not only suffer exclusion from essential goods, services and rights, but also suffer the loss of potential for individual development to contribute positively to social, political, and cultural development.
- Economy or economic development. If there is a situation where many people are living in poverty or are unemployed, then this is a productive loss to the economy. No social protection or any means of support results in a heightened demand for an increase in wages the cost of which must be borne by employers and/or the state. Cutbacks in social and health services can lead to greater costs for the state in the long term.
- Human capital. A lack of investment in public benefits and services means a decrease in life expectancy, health, education and skills, and a lack of investment in the younger generation. Hence the current and future stock of a country's human capital is diminished.
- Loss of social capital. Cutbacks and withdrawal by the state put at risk the future sustainability of the family (which is already under huge pressure because of the impact of COVID-19). Values such as social trust, social solidarity, etc., are now widely recognized are essential for the functioning of democratic societies.
- Political costs. Neglecting or abandoning social protection reduces the legitimacy of the state and therefore endangers the functioning of democracy.

#### 3.4. Vision Statement

The long-term vision of the Government of Saint Lucia is the provision and fulfilment of the needs and rights of individuals, in particular at-risk children, PWDs, poor and vulnerable elderly, youth, men and women, families and communities, and the development of the full potential of citizens paying particular attention to the poorest and most vulnerable populations, through a comprehensive, integrated and sustainable social protection system. The needs and rights include the following:

- Basic income security in the form of various social transfers (in-cash or in-kind), such as pensions and stipends for the elderly and persons with disabilities, child benefits, income support benefits and skill development and/or employment guarantees and services for the unemployed and underemployed.
- Available and affordable access to essential social services in the areas of health, water and sanitation, education, food security, housing, welfare, and others defined according to national priorities.

• Strengthening the resilience of poor, vulnerable, and deprived individuals, groups, and communities facing economic, social, climatic, and health risks and shocks through enhanced adaptive social protection.

This vision for social protection incorporates four important aspects. The integration of the protective, preventive, promotive and transformative aspects of social protection will be critical to the success of this policy and strategy.

**Aspect 1:** Social protection is **protective** in that it provides essential support to those living in poverty, protecting them from the worst consequences of poverty.

**Aspect 2:** Social protection is also **preventative and resilient** in that it puts in place a safety net that can be activated to 'catch' people in danger of falling into poverty because of idiosyncratic and covariate shocks.

**Aspect 3:** Social protection is **promotive** and facilitates access to opportunity in that it supports poor people's investment so that they can pull themselves out of poverty and graduate from the need to receive social assistance.

**Aspect 4:** Social protection is **transformative** in that it reverses social exclusion and economic marginalization and focuses on addressing underlying causes of social vulnerability. It addresses social concerns about social and gender equity, and social justice.

#### 3.5. Mission Statement

The mission of this policy is to provide comprehensive, relevant, timely, and adequate social protection services to address risks, vulnerabilities, and deprivations among the population especially the indigent and the poor.

#### 3.6. Policy Goal

The overall goal of this Policy is to provide a framework for efficient integrated service delivery and the efficient use of resources across the social protection sector that promotes equity and enhances the well-being and capacity of poor and vulnerable households and populations in Saint Lucia, and by so doing protect their consumption, invest in their future, thus enabling them to contribute meaningfully to national sustainable development.

#### 3.7. Policy Objectives (POs)

#### Increase in coverage of the poor, vulnerable, and deprived (PVDs) citizens to cash and non-cash non-contributory transfers/benefits from the government.

This PO is premised on the observation that coverage of the PVDs is low, relative to the number identified as poor in 2016. While 25% of the population (approximately 41,000 persons were identified as poor in 2016, (of which 0.7 percent were indigent), to date, 3600 households or approximately 11.000 beneficiaries, (representing approximately 2% of the population), are covered under the government's PAP (Cash Transfer Grant- PAP CTG). There is a long waiting list (approximately 500 potential households as of December 2021) for entry into the PAP, qualified using the national eligibility tool, SL-NET 3.0. Issues with the intake process, as well as the lack of adequate financial resources, restrict the pace of beneficiary entry into the PAP. Measures to increase coverage and reduce the gap between the identified poor and the poor being served, in addition to a well-designed exit/graduation strategy, should assist in achieving this objective.

#### Increase in coverage of working adults in the private and informal sectors to the NIC.

This PO is premised on the fact that coverage among public sector workers through the NIC is quite high (97.5 % in 2017/2018), while coverage among private sector workers and workers in the informal sector is quite low or almost negligible (15.8% in 2017/2018). An intense communications campaign directed at private sector workers on the benefits to be derived from registering with the NIC is expected to contribute to the achievement of the objective in the short to medium term.

#### Increase in access, coverage and quality of care and protection to children, adolescents and young persons, persons of working age, the elderly, and persons with disabilities.

Public social care policies are non-existent. Some measures and arrangements are in place to provide social care for boys and girls at risk, for women (and men), PWDs in poor households, and the elderly, who experience various forms of abuse. Over 70% of children experience some form of violence. Girls 12 – 16 years are among those who report sexual abuse. There is a lack of data on the extent of child labour. This hampers the design of adequate interventions. Current social care and support services are patchy, limited in scope and geographical coverage and are mainly provided by the GoSL and a few private establishments, civil society, and faithbased organizations. Current social protection provision for persons with disabilities is not available across all life cycle groups as provision is made only for children with disabilities who qualify by way of an eligibility system. While persons with disabilities

and the elderly do receive some social care services, it may be noted that generally, access to social care services provided by state and non-state institutions is restricted due to space and funding limitations. A key priority action is designing and strengthening social care policies taking into consideration the impact and lessons learnt from the COVID-19 crisis regarding the situation of individuals needing care and the needs of institutions providing social care. As such, measures need to be put in place to improve the well-being of children, older adults, the elderly, persons with chronic illnesses, and PWDs. It, therefore, becomes necessary to mainstream rights-based, gender, equity, and child-sensitive perspectives in the design of public as well as private social care programmes.

### • Increase labour market inclusion for poor and vulnerable young / working-age women who engage in unpaid care and unpaid domestic work in the home.

Women are still the main care providers in the home and do more of the unpaid work. The lack of recognition of the economic value of social care provided by women tends to perpetuate the current gender division of paid and unpaid work at the level of the household. This limits their participation and taking up opportunities in the labour market. The 2015 NSPPAP emphasizes various transformative measures specifically aimed at "addressing social equity concerns...". Key transformative interventions include the creation of pathways through ALMPs to secure opportunities to participate in capacity-building activities, access to decent work, and the creation of income-earning activities. Supporting interventions include the provision of care services for young children, access to schooling for older children, and women's access to general health care including sexual and reproductive health care. The enforcement of labour legislation on equality of opportunity will be instrumental in achieving this objective.

For this social protection policy to achieve its transformative potential and address inequality, it must take into account all forms of discrimination and how they intersect with other social dimensions, apart from gender, which prevent women from achieving the same level of socioeconomic rights as men across their lifecycle. For instance, women's role in unpaid care and domestic work is well acknowledged as an obstacle to their ability to enjoy rights to work, rest, leisure, education and health.

#### • Provision of social insurance for unemployed youth.

While there may be a multiplicity of interventions<sup>11</sup> to address youth's weak labour market outcomes, poverty and unemployment in this group are unacceptably high. This PO is premised on the fact that in 2020 adolescents/ youth constituted 38% of the population of which 33% are poor. The impact of COVID-19 has resulted in youth unemployment rising from 37% in the first quarter of 2020 to 41% in the 4th quarter of the same year. Additionally, 32% of youth are NEET. Currently, there are no social insurance schemes for unemployed youth. A social insurance scheme proposal prepared by the ILO is being reviewed by the NIC which is currently in consultation with key stakeholders, to advance the recommendation to the Cabinet for its consideration and adoption as a reform measure to be introduced in Saint Lucia.

### • Progressive maturity<sup>12</sup> of Foundational Social Protection (FSP) and Adaptive Social Protective (ASP) Systems.

Saint Lucia's FSP is still emerging. Some dimensions are more advanced than others while some are still in a nascent form. For example, in terms of coverage, social assistance (SSNs) is pro-poor, but with substantial room for improvement in terms of reaching the poorest (emerging). On the other hand, St Lucia does not yet have a national foundational and reliable ID system in place (nascent). There are systemic issues and gaps in ASP including the inoperability of FSP registries and other risk information systems such as post-disaster household assessment, and the lack of ASP funding mechanisms informed by ex-ante quantification of post-shock SP financing needs and methods. The maturity of the FSP and ASP systems is a progressively long-term prospect.

### • Strengthen the institutional framework for social protection planning and service delivery.

The delivery of social protection services requires the establishment of systems, structures and building capacity of duty bearers and other service providers. Several key institutional partners were omitted from the institutional framework in the 2015 NSPPAP. To achieve greater FSP and ASP coverage, supporting institutions such as NEMO and NIC must be incorporated as key partners. To this end, incorporating flexibility into the design of future institutional frameworks, based on the needs to be addressed and the decisions that are required, is fundamental. The recommendation for Social Protection Institutional framework are illustrated below in Figure 9.

<sup>&</sup>lt;sup>11</sup> At least 13 interventions have been implemented in Saint Lucia to promote youth employment (Khondker 2021, p. 30).

<sup>&</sup>lt;sup>12</sup> The World Bank (2020a) has outlined a typology for assessing social protection system maturity. It is known as the flag system with specific qualitative descriptors for each stage of maturity (nascent - red, emerging – orange, and established - green). For example, under the SP system Human Resource Capacity can be assessed as nascent meaning that this dimension is very limited, or emerging meaning that HR Capacity is adequate for some roles, and is assessed as established when HR capacity is available for all roles.

• Strengthen the M & E framework to assess and measure the impact of social protection interventions.

The M&E system is intended to provide crucial information for accountability and transparency which are vital in maintaining the legitimacy of the Social Protection System among the many stakeholders and the general public. M&E will also promote evidenced based policy making, which is key to inform decision makers and improve programmes. It is envisaged that a strengthened M & E framework will consider requirements for FSP and ASP.

#### 3.8. Policy Scope

This encompasses 3 phases spanning 8 years (2022 to 2030) geared towards achieving an enhanced state of readiness for Saint Lucia's social protection system that can (i) effectively facilitate regular delivery of foundational social protection services (FSPS), and (ii) effectively respond to the onset / impact of natural disasters, economic, income, health, and psycho-social shocks, through adaptive social protection services (ASPS). Desired elements of FSPS and ASPS identified for action are outlined in Section 3.10 (Policy Mandate).

- In Phase 1 (2022 to 2025) the focus of this policy will primarily be on the development and implementation of effective and sustainable FSPS. This takes into account social safety nets and complementary measures, active labour market programmes and social care targeted to poor and vulnerable households, and special vulnerable groups (e.g., children, adolescents, and women in difficult circumstances, older persons, PWDs, and people living with HIV). Structures and processes required to facilitate the delivery of ASPS will be put in place. In this Phase, specific attention will be paid to institutional reform/strengthening of the MoEq, building the capacity of its staff, and providing the necessary support to other key stakeholders involved in the delivery of or facilitating the delivery of social protection services. Additionally, the exit/graduation strategy will be operationalised.
- In Phase 2 (2026 to 2028), the focus of this policy will primarily be on progressively extending social protection provisions to life-cycle groups. Section 3 highlights the current gaps in state and non-state provision under social insurance, social assistance, social care and support services, and active labour market programmes which need to be addressed. In due course, appropriate social protection measure/s for Children 0 to 4 years / Pregnant Mothers, Children of School Going Age, Adolescents and Youth, Working Age Populations, Persons in Old Age, Persons with Disabilities, will be adopted. Extending social security to the informal sector and ensuring access to universal health care for the poor and vulnerable will be prioritised.
- In Phase 3 (2029 to 2030) an evaluation of the 2022 National Social Protection Policy and Action Plan will be undertaken to assess the results of implementation and to inform the post 2030 policy and programming period.

#### 3.9. Policy Outcomes

Based on the narrative presented above, the following constitutes the core outcomes of this policy.

- Enhanced foundational and adaptive social protection systems.
- Strengthened institutional collaboration and coordination for efficient service delivery.
- Reduced poverty, vulnerability, and deprivation in the overall population and among individuals belonging to life-cycle groups.
- Increased social protection coverage for the poor, vulnerable and deprived population in the society, including informal economy workers and their families.
- Enhanced resilience of individuals, households, and communities.
- Accelerated graduation of individuals and households from flagship social assistance programmes.
- Heightened involvement of civil society organizations in social protection provision.

#### Stronger institutional collaboration, More Coverage



#### 3.10. Policy Mandate

The Government, working with all other stakeholders, shall strive to actualize the following under the Institutional, Delivery, and Financing dimensions for FSP and ASP, in keeping with the multi-dimensional approach to poverty reduction.

Table 3-1: Policy Mandates under the Institutional, Delivery, and Financing Dimensions

Dimension	Mandates
Institutional – Policy, Strategy, Legal.	Ensure that SP national law, policy and strategy are up to date, have legal foundations and are fully operational.
	Ensure that SP's national strategy includes resilience strengthening as a key objective.
	Ensure that DRM national strategies establish roles for SP.
	Advocate for adequate Social Protection as integral to national development.
	Build capacity to mainstream the lifecycle approach to Social Protection and plan to adopt measures towards establishing a Social Protection Floor.
	Promote gender and child-sensitive approaches to social protection policy planning and service delivery.
	Make the necessary provisions to support the functions of legal assistance in ensuring its availability to vulnerable persons on civil and criminal matters.
	Review the existing legislation and mechanisms with respect to low-cost housing with a view to making the service affordable to the most vulnerable of the population.
	Define and enhance the pro-poor focus of health services and ensure their financial sustainability.
	Rationalize, reform, and strengthen interventions and regulations concerning education services.
	Embark on the continuous review of legislation relevant to Social Protection.
	Ensure that the poor and vulnerable are protected by appropriate safety net programmes during periods of economic contraction, exposure to social, climatic, health, and environmental risks and shocks.
	Ensure that detailed ASP considerations are mainstreamed in DRM and SP regulations and mandates.

Institutional – Coordination	Acknowledge Civil Society Organizations (CSOs), Faith-based Organizations (FBOs) and other relevant non-state actors as legitimate and vital providers of social Protection services. Establish an institutional framework for coordinating Social Protection to ensure consistent and adequate levels of support.
	Increase collaboration and forge stronger partnerships with CSOs, FBOs and other relevant non-state actors in the coordination and delivery of Social Protection programmes.
	Ensure that the design and implementation of programmes and development approaches are coordinated, including within social assistance and between social security and active labour market interventions.
	Ensure that Social Protection in Saint Lucia is coordinated and overseen through specialised institutional arrangement coordinated by the MoEq.
	Ensure that SP delivery is well-coordinated with limited overlap and effective information sharing and governed by legal structures.
	Institute a national forum where Social Protection stakeholders can meet regularly.
	Ensure that there is effective horizontal co-ordination between SP and DRM agencies, between the government and non- Government actors, and vertically at different levels.
	Strengthen interagency coordination with MoF to develop financing strategies for SP and ASP.
Institutional – HR Capacity	Ensure that HR capacity for all roles in regular SP delivery is adequate.
	Ensure that contingency measures are in place to ensure adequate HR capacity for post-disaster operations.
	Ensure adequate capacity (human and financial) of leading DRM agencies.
Delivery	Adopt a social assistance regime comprising a mix of targeted transfers, utilizing approaches considered necessary and feasible.
	Ensure that SP programmes effectively support all SP primary objectives of equity/protection, opportunity/promotion, resilience/prevention, and transformation.
	Ensure increased coverage for the poor and the vulnerable under foundational social protection and adaptive social protection interventions.

Strengthen and scale-up existing social assistance programmes while ensuring comprehensive geographical and demographic coverage.
Strengthen the existing social security regime and establish comprehensive social security arrangements that will extend legal coverage to all workers, whether in the formal or informal sectors and their dependents.
Explore the feasibility of introducing a conditional cash transfer system with appropriate conditionalities.
Strengthen social protection tools including a management information system, a beneficiary registry, and a social registry.
 Strengthen Post-Disaster Household Assessment tools to collect data to inform post-disaster SP response.
Develop and implement the appropriate referral, graduation and exit strategies for the different interventions.
 Develop appropriate linkages and two-way referral mechanisms between the ministries and among social protection providers.
Embark on a campaign to ensure that more of the self-employed become regular contributors to the existing national social security regime.
 Help facilitate adaptations to post-shock environments through multiple and accessible benefit delivery systems and beneficiary choice.
Improve the existing operations manuals and ensure their regular updating to reflect new procedures.
Ensure that operational manuals are in place and include protocols for shock- responsive SP and that there are effective protocols for adjustments that include alternative delivery mechanisms.
 Ensure that accompaniment and case management measures are well-established for SP beneficiaries and that their impact is routinely assessed.
Regarding complementary measures to support resilience ensure that risk is (risk reduction, risk absorption and risk transfer) comprehensively integrated into flagship programmes;
Promote productive and economic inclusion interventions for SP beneficiaries which are well coordinated with other sectors.

post-disaster support is systematically deployed for affect households.         Continue to promote an approach to targeting based on objecti and transparent methods with few inclusion and exclusion error Promote data privacy and security legislation and protocols at ensure the enhancement of broad interoperability information facilitate effective verification and beneficiary monitoring.         Make SP registries risk-informed and interoperable with other r information systems including those for PDHAs, ensuring that DF actions are informed by SP data such as risk maps develop using SP data.         Ensure that in periods of economic contraction, exposure to soci climatic, health and environmental risks and shocks, the poor an vulnerable are protected by appropriate safety net programmed Financing         Provide tax exemptions to all credible and properly constitut CSOs and other relevant non-state actors to facilitate Soc Protection initiatives by these organizations.         Periodically adjust the value of cash benefits to maintain t value and relevance of the benefit.         Ensure that SP spending compares favourably with comparati regions (e.g., Latin American region) and countries and domestically funded, consistent, reliable and sustainable.         Establish funding mechanisms informed by ex-ante quantificati of post-shock financing needs and ensure that those metho are in place for systematic use to inform ASP financing.         Ensure that an ASP financing strategy which includes sectoral an programmatic financing, as well as complementary financinf for agriculture, fisheries, small business, infant nutrition, etc. is place.         Ensure that different DRF instruments are combined and optimizi </th <th></th> <th></th>		
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with respect to ASP financing needs.		Ensure that different DRF instruments are combined and optimized with respect to ASP financing needs.

#### 3.11. Guiding Principles of the Policy

The achievement of the goal, objectives, outcomes and mandates of this policy shall be guided by the following principles:

- Adaptiveness: Appropriate measures shall be put in place to help build the resilience
  of poor and vulnerable households by investing in their capacity to prepare for, cope
  with, and adapt to shocks, ensuring that they do not fall (deeper) into poverty. These
  measures ensure flexibility to respond to shocks.
- Equity: Fairness and justice shall underpin the provision of social protection services across all different demographic categories and geographic locations regarding the indigent, poor, and vulnerable.
- Inclusiveness: Appropriate measures shall be put in place to protect persons living in poverty, the vulnerable, and persons with disabilities residing in Saint Lucia from risks and shocks.
- Human Rights-Based Approach to Service Delivery: Individuals shall be empowered to know and claim their rights and demand accountability from duty bearers and institutions implementing social protection interventions.
- Gender Sensitivity / Responsiveness / Mainstreaming: All social protection interventions shall address specific risks and vulnerabilities that affect boys and girls, men, and women.
- Dignity: All beneficiaries of social protection interventions shall be treated with respect regardless of their gender orientation, cultural, and religious practices, and socio-economic status.
- Individual, family and community involvement: Whereas the Government at all levels shall take leadership in the implementation of this policy, communities, target groups and duty-bearers shall be actively involved in the design, implementation, monitoring and evaluation of social protection interventions.
- Timeliness, reliability, and sustainability: Systems shall be strengthened to facilitate the timely delivery of social protection services and generate reliable information for decision-making.
- Social Transformation: The State shall have an obligation to eliminate, or reduce as much as possible, all systemic as well as other barriers faced by the poor and vulnerable in accessing social services. Social Protection shall embrace, therefore, the lowering of transaction costs associated with the uptake of Government services; the continuous improvement of public access to institutional and legal mechanisms of redress; and the institutionalization of State-led campaigns aimed at changing entrenched attitudes that are discriminatory and injurious to the poor and vulnerable.

### 4. Target Groups

This policy shall target the following groups:

4.1. Persons living in poverty including poor and vulnerable young persons and poor and vulnerable older persons aged 60 years and above.

4.2. Workers in the formal sector – employed in public and registered private sector workplaces that are at risk and/or face multiple social deprivations.

4.3. Workers in the informal sector – working individually or in family businesses, working in unregistered workplaces that are at risk and/or face multiple social deprivations.

4.4. Orphans and other vulnerable children such as abandoned children, foster children, children in contact with the law, and child labourers.

4.5. Labour constrained individuals and households who have no capacity to work and earn a living.

4.6. Unemployed persons who are at risk are able to work and/or enhance their labour market skills and are actively seeking employment.

4.7. Persons with severe disabilities or persons with disabilities from poor or low-income households.

4.8. Disaster-affected persons - individuals affected by natural or manmade calamities as well as health pandemics that disrupt their normal functioning and livelihoods.

4.9. Marginalised and vulnerable migrants from other countries within the OECS Contingent Rights Protocol Member States.

4.10. Homeless persons – individuals made homeless as a result of disasters, destitution, repatriation, victims of domestic violence and intimate partner violence, and by a court ruling.

#### 5. Policy Approach

This policy shall adopt the following approaches to social protection provision in Saint Lucia.

- A Well-defined Social Protection Sector.
- Alignment with the Medium-Term Development Strategy 2020 – 2023 which sets out to achieve "A Sustainable and more Inclusive Saint Lucia by 2023".
- Commitment to a Lifecycle and Rights-based Orientation.
- An Integrated Systems Approach for key social protection stakeholder agencies/institutions.
- A Gender-Sensitive Approach to Adaptive Social Protection.

#### 5.1. A Well-defined Social Protection Sector

This policy acknowledges that social protection, while essential, is not sufficient to enable poor people to move out of poverty. The most effective way is through a healthy labour market, given that most households make most of their income from productive activities in the labour market. Furthermore, equitable and sustainable economic growth is what will ultimately contribute the most to the transitioning of individuals/households out of poverty. As such, the GoSL will ensure that national policies are developed that outline how specific vulnerable groups, in particular persons with disabilities and older persons, will be supported by the relevant public services. This calls for incorporating social protection provisions in the investments that are being made in a wide range of public sector initiatives including health and social care, training and job creation, as well as an expressed commitment to protect the basic rights and entitlements of all citizens.

Two essential roles are envisaged for the Social Protection Sector which should be regarded as an aspect of public service provision, as well as a cross-cutting and accessenhancing element of all public services. They are: (i) Ensuring the provision of regular and predictable social assistance (cash and non-cash transfers) financed by the government that will provide support to citizens living in poverty and those vulnerable to poverty. Examples of this include the PAP and KSL programmes.

(ii) Ensuring access by the poor, vulnerable and deprived to other public services such as health and education services, labour market support and employment services, to enable economic inclusion and reduce social risk. Examples include access to livelihood opportunities provided by other public sector programmes as well as non-governmental and private sector initiatives.

In keeping with the MTDS 2020 – 23, Saint Lucia aspires to a high standard of living for its citizens. The provision of social protection services to the distinct categories of the population is one of the strategic actions to achieve this national vision. This policy focuses on four (4) pillars that characterize the social protection sector, namely, (1) social insurance, (2) social assistance, (3) social care and support services, and (4) livelihood strengthening and active labour market programmes.

- Social Insurance (social security): This pillar is characterized by contributory schemes targeting the working population in both the formal and informal sectors. The aim is to achieve consumption-smoothing and a minimum standard of living through the provision of income support. The NIC is the main provider of public social insurance.
- Social Assistance and direct income transfers (social security): This pillar is characterized by non-contributory transfers targeting vulnerable children, youth, women & men, persons with disabilities and older persons. The aim is to achieve consumption-smoothing and a minimum standard of living through the provision of income support. The PAP and Koudemein Ste Lisi are two key government funded social security schemes.

• Social Care and Support

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This pillar is non-contributory and focuses on aspects of care, support (inclusive of psychosocial support), protection, and empowerment of the most vulnerable individuals who are unable to fully care for and protect themselves. These individuals include children and young persons, the elderly, and PWDs who are victims of various circumstances such as abuse, neglect, and conflict with the law, which render them helpless and in need of care and protection. There are several government and non-government providers supporting this pillar.

Livelihood Strengthening and Active Labour Market Programmes

This pillar focuses on several provisions aimed at improvement in the beneficiaries' prospects of finding gainful employment or otherwise increasing their earnings capacity. It includes spending on public employment services and administration,

labour market training, special programmes for at-risk youth when in transition from school to work, programmes to provide or promote employment for unemployed persons, and special programmes for persons with disabilities. It also involves livelihood strengthening or enhancement programmes that facilitate microenterprise projects for individuals, families and groups among the vulnerable sectors through the provision of low-cost loans, enterprise training, re-entry into the labour market and retooling/the acquisition of new TVET skills to take advantage of emerging labour market needs. Services under this pillar support the creation of employment through enterprise creation, technical assistance and other support services which encourage small-scale enterprise projects. It also involves programmes which provide inputs for small scale-farmers, piloting sustainable livelihood schemes for vulnerable women (especially single women of working age 30 to 64) to graduate from coping to adaptation, given the life-changing impact of the COVID-19 pandemic. Sub-component 1.1 of the Human Capital Resilience Project will be providing support to further actualize the aims and objectives of this pillar.





Providing coverage to vulnerable children, youth, women, persons with Disabilities and older persons

Income support for a stable standard of living dilivering aspects of care support, protection, and empowerment to the mor vulnerable individuals

Improving beneficiaries employment prospects and earnings capacity through public employment services, labour market training and certification: special programmes for youth at risk and persons with disabilities, and micro enterprise development support, enterprise training and other labour market re-entry schemes.

These pillars will be further strengthened through various complementary initiatives as well as legal and regulatory measures. Complementary interventions may be articulated in policies for agriculture, health, education, employment, and finance sectors, and aligned with prospects in the Green Economy, the Blue Economy, the Orange Economy, and the Youth Economy.<sup>13</sup> They are also intended to support the priority objectives, one of which is "to strengthen support for households and communities affected by disasters and shocks." Legal and regulatory measures will focus on (i) ensuring that economic, social and cultural rights are upheld (ii) improving employment opportunities and standards within the formal and informal sectors (iii) living wage legislation and decent work legislation is enacted (iv) worker's rights (e.g., maternity leave) are upheld (v) child rights, eradication of child labour policy and strategy are addressed and (vi) various other dimensions that make up the social protection system are given due attention.

#### 5.2. Alignment with the National Medium-Term Development Strategy (MTDS) 2020 – 2023

The MTDS 2020 -2023 highlights three (3) reforms that are related to the provision of social protection designed to achieve the overall outcome stated as "A Sustainable and more Inclusive Saint Lucia by 2023" (GoSL 2019).

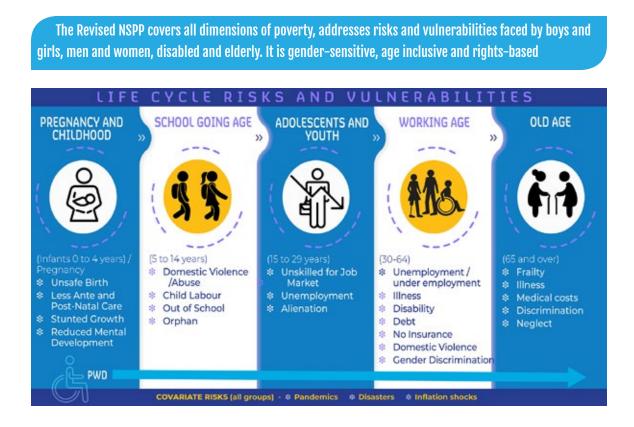
- Social protection services will be strategically reformed to support the productive sector of the economy. The reform efforts will focus on building the human capital of poor and vulnerable households, creating avenues for their increased participation in the labour market with emphasis on technical and vocational skills, enhancing digital skills and supporting entrepreneurship (GoSL 2019, p.26).
- Reform activities taking place in the health sector are guided by Government's policy that healthcare must be universally accessible, affordable, equitable and sustainable, and of the highest international quality standard for the populace. The Government's vision for the healthcare sector is to ensure that every Saint Lucian will have full access to affordable healthcare coverage and efficient health services nationwide (GoSL 2019, p. 47).

<sup>&</sup>lt;sup>13</sup> The main goal of the Green Economy is to foster changes from the current economic development paradigm to an economy which generates economic profits while ensuring environmental sustainability and social inclusion. The "blue economy" refers to the decoupling of socioeconomic development through oceans-related sectors and activities from environmental and ecosystems degradation. The Orange Economy, also known as the Creative Economy, is the bringing together of sectors of the economy "whose main purpose is the production or reproduction, promotion, dissemination and/or the marketing of goods, services and activities that have cultural, artistic or patrimonial content." The Youth Economy is a thrust towards livelihood strengthening and the provision of labour market opportunities and options to harness skills and realize growth in the level and type of support provided to youth enterprise. (Part of footnote 11 on the previous page)

 The government intends to develop gender-responsive policies and strategies such as mainstreaming gender-sensitive budgeting that will contribute towards an equitable labour market, reduced unemployment, safer communities, and an overall improved socio-economic dynamic in the country (GoSL 2019, p.47).

#### 5.3. Commitment to a Lifecycle and Rights-Based Approach

This policy remains committed to pursuing an inclusive lifecycle approach to social protection as a pathway to the progressive realization of a Social Protection Floor (SPF) in the long term, and the human rights approach to social protection, not only to respond to international obligations and commitments, but also to tackle the various dimensions of poverty and improve the effectiveness of poverty reduction efforts.



## 5.3.1. Building and Strengthening an Inclusive Lifecycle Approach to Progressively Establish a Social Protection Floor (SPF)

This policy sets out proposals for the building and strengthening inclusive life-cycle social protection support to a) pregnant mothers and children; b) children of school-going age; c) adolescents and youth; d) the working-age population; e) the elderly; (including special focus on persons with disabilities within each life cycle group), with

a view to the progressive establishment of an SPF in Saint Lucia in the future. The logic behind the SPF is that, if the vulnerable categories of the population are covered, then a social security floor will provide protection to poorest families as well as those who are vulnerable to falling into poverty.

In building an inclusive lifecycle system<sup>14</sup>, this policy will adopt the following three characteristics: (i) the design of a system with critical consideration for coverage, organisation, financing and administration of benefits, (ii) the eligibility and selection criteria, which will determine the size of the covered population and, (iii) the adequacy of the transfers.

#### 5.3.2. Incorporating Gender-Sensitive and Rights-Based Perspectives in the Lifecycle Approach and ASP

This policy embraces the shift towards a promotive and transformative agenda recognizing that financial resource transfers alone are not sufficient to ensure that the marginalized and vulnerable can equally benefit from the opportunities created through growth, but that a gender lens is also required. This entails looking both within the household to understand who benefits from various instruments, particularly how they address different practical and strategic needs, as well as beyond households and communities towards the structures of inequality that influence the different risks and opportunities experienced by women and men at different points in their lifecycle. Consequently, a gender analysis is key to understanding how women's and men's socially-constructed roles influence their exposure to different risks, their ability to respond and, consequently, how they benefit (or not) from social protection.

This policy adopts the view of UN Women (2017) that a human rights approach to social protection should emphasize that eligibility criteria be transparent and gender sensitive and should minimize the exclusion of potential beneficiaries. UN Women also advocates for a focus on improving beneficiary targeting in ways that would enhance women's access to social protection. In scaling up gender sensitivity in Proxy Means Test (PMT), the GoSL eliminated sex-differentiated equivalence scales and raised the weight assigned to children – a measure that also benefits women, because they are more likely to live with and care for children.



<sup>&</sup>lt;sup>14</sup> For example, in building child benefits systems, ILO and UNICEF (2021) has recommended starting with the youngest cohorts, and gradually increase the age of eligibility by one year each year, until all children are included, thereby ensuring that no child is ever removed from benefits. In this way, the first cohort of beneficiaries would continue to receive the benefit until they reach the exit age. Overall, inclusive child benefits, disability allowances and old-age pensions would go a long way toward addressing a wide range of vulnerabilities.

This policy will adopt a gender-sensitive approach to adaptive social protection because environmental and climatic change, as well as economic and health crises, affect women and men differently. It has been noted that more women than men are involved in or reliant on formal tourism sector activities and the informal sector. It is also widely perceived that women are more negatively affected compared to men in the event of a disaster or crisis. It has been observed that poor women are more likely to suffer from the following adversities: (i) increased workloads, income losses and negative health impacts, following disaster events; and (ii) feeling the effects of rising food prices. Therefore, this approach emphasizes promoting women's special capabilities and participation in ASP suggesting that women play an important role in providing support to households and communities in mitigating and adapting to climate change.

#### 5.4. An Integrated Systems Approach (ISA)

This policy adopts an IS approach because Social Policy is conceptualized as a crosscutting theme given that various social protection programmes are planned, designed, and executed by various public sector departments and non-state institutions, all of which make up the Social Protection Sector. An IS approach facilitates the long-term establishment of a Social Protection Floor, whereby individuals are appropriately protected throughout the lifecycle. This is achieved not only by ensuring a sufficient range of programmes to cover a population's risk profile, but also by sharing information on individuals to ensure they are linked to appropriate programmes.

Integrated Systems also minimize costs, both from the government side (by sharing infrastructure and achieving economies of scale) and at an individual level (by reducing the transaction costs associated with applying for various social protection programmes). This approach is in line with Sustainable Development Goals Target 1.3: "implement nationally appropriate social protection systems and measures for all".

An IS approach also aims to reduce multi-dimensional poverty, related to both monetary poverty and other vulnerabilities. Empowering families to more effectively function will contribute to the achievement of Sustainable Development Goal 1 (SDG 1): End poverty in all its forms everywhere. An integrated social protection system should provide holistic and seamless services, reduce fragmentation, contribute to the more efficient application of resources and ultimately to better outcomes for users. Integration can also contribute to the prevention of shocks and thus reduce the burden on acute social protection services.

The following guiding principles will be adopted to facilitate an IS approach in implementing this policy.

- Inclusion to improve access to services through interventions that are responsive to different dimensions of vulnerability, such as gender, ethnicity, disability and migration status and different requirements across the life-cycle.
- A client-driven approach, ensuring that people are included in policy formulation and design, implementation and monitoring and evaluation.
- Overall coherence across policies, programmes, activities, and stakeholders and levels of Government is established facilitating horizontal and vertical coordination.
- The design of each programme (in terms of, for instance, eligibility rules, number of transfers, duration of support, conditions and incentives, exit/graduation, and standards of services) is coherent and harmonized across programmes.
- Requirements for actual implementation of the policy and effective delivery of social protection services should be put in place.<sup>15</sup>
- A robust evidence base is a necessary foundation for all elements of a social protection system.<sup>16</sup>
- Taking steps towards the progressive realisation of universal coverage through a mix of policies and programmes.

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<sup>&</sup>lt;sup>15</sup> This includes institutional, organisational and individual capacity for the identification and enrolment of the eligible population, payments/service provision, management of enrolled beneficiaries, dealing with grievances, and Case Management to ensure access to complementary services, communication, and elements of budgeting and planning, etc. Implicit in this is the requirement for data systems, financing mechanisms and workforce planning. At this level, integration can address both barriers to access on the demand side and improving efficiency on the supply of services.

<sup>&</sup>lt;sup>16</sup> Having a clear understanding of poverty and vulnerability among lifecycle groups, as well as of the effectiveness of existing social protection programmes and remaining gaps in programme areas and coverage is critical. Poverty and vulnerability analysis, systems assessment and evaluations are critical elements that must be considered.

### 6. Legal and Policy Framework

This Social Protection Policy is premised on the provisions of the Constitution of Saint Lucia, laws that address issues of risks and vulnerabilities, as well as Regional and International Instruments to the country is a party. It is also consistent with other National Policies and Plans. An overview of the current body of national laws, policies, and planning frameworks, and the regional and international obligations to which Saint Lucia is a party revealed that the Government of Saint Lucia is committed to providing social protection to address risks, vulnerabilities, and deprivations among citizens living in Saint Lucia.

6.1. Legal Framework

#### Constitutional

• The CONSTITUTION OF SAINT LUCIA makes provisions for equality before the law and entitlement to fundamental rights. There are other specific laws that provide for various aspects of social protection.

#### Legal

• The new Social Protection legislation<sup>17</sup> will provide the legislative framework for the implementation of the updated social protection policy.

#### Institutional

- DISASTER MANAGEMENT ACT NO. 30 of 2006 establishes a National Emergency Management Organization to provide a more effective organization for the mitigation of, preparedness for, response to and recovery from emergencies and disasters.
- NON-GOVERNMENTAL ORGANISATIONS ACT, CAP 13.33 (NGO ACT), Revised Laws of Saint Lucia, seeks to promote and protect the recognition of Non-Governmental Organizations, and to provide for the monitoring and regulation of Non-Governmental Organizations.

<sup>17</sup> The 2015 National Social Protection Bill is currently being revised and updated for enactment



- NATIONAL COMMUNITY FOUNDATION ACT NO. 26 OF 2002 provides for the granting of funds to deserving citizens in the following areas: education scholarships, healthcare, youth at risk, older persons, and persons with disabilities. Thereby, facilitating the empowerment of individuals and groups living in difficult and challenging circumstances.
- CONSTITUENCY COUNCILS ACT NO. 1 OF 2012 seeks to improve the delivery of services to constituencies (15 out of 17), and to improve the management of resources for the development of constituencies.

#### **Social Security**

- NATIONAL INSURANCE CORPORATION ACT (Act 18 of 2000) Benefits to contributors under this Act comprise— (a) sickness benefit; (b) invalidity benefit; (c) maternity benefit, comprising: (i) maternity grant, and (ii) maternity allowance; (d) hospitalization and medical treatment, (e) survivors benefit including (I) widow's allowance, (ii) widower's allowance, (iii) widow's pension, (iv) widower's pension; (v) survivor's grant; (f) retirement benefit including (i) retirement grant, (ii) retirement pension; (g) funeral grant; (h) employment injury benefit, including disablement benefit and medical expenses (Section 41).
- NATIONAL INSURANCE CORPORATION (Amendment) ACT No.2 of 2020. This Act amends the National Insurance Corporation Act, Cap.16.01 to empower the Board of the National Insurance Corporation to establish an economic empowerment programme if 30 per cent or more of insured persons suffer loss because of a pandemic declared by the World Health Organization (WHO).

#### Social Care and Support

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- SAINT LUCIA SOCIAL DEVELOPMENT FUND ACT CAP 16.05 aims to establish an efficient, complimentary and demand-driven mechanism for delivering basic services and infrastructure to disadvantaged citizens and marginalized communities that will facilitate their highest social and economic well-being, towards social cohesion and national prosperity.
- CHILD JUSTICE ACT NO. 9 OF 2018 repeals the Children and Young Persons Act (Cap. 3.01) and sets out to protect the rights of the child. Among other objectives, the Act seeks to ensure that the best interest of the child, the safety, welfare, and well-being of a child are of paramount consideration and that a child has equal access to available services if the child is lacking in (a) Family Support (b) Education Support or (c) employment services, if the child is between the ages of sixteen years and eighteen years.

<sup>&</sup>lt;sup>18</sup> A.R.I.S.E stands for Accelerated, Resilient, Inclusive, Sustainable, Equitable Shared Economic Growth

- CHILD CARE (PROTECTION AND ADOPTION) ACT NO. 11 OF 2018. The main purpose of the Act is to provide for the care, protection and adoption of a child and, like the Child Justice Act, to ensure that the child's best interest is of paramount consideration.
- COUNTER-TRAFFICKING ACT, 2010 (NO. 7 OF 2010) prescribes measures to prevent and combat trafficking in persons with particular regard to victims who are women and children, by:

(a) protecting and assisting victims of trafficking, having due regard to their human rights;

(b) facilitating the efficient investigation of cases of trafficking in persons.

• LEGAL AID ACT NO. 6 OF 2008 provides for the State to grant of legal aid and advice to persons of insufficient means in civil and criminal cases in Saint Lucia.

#### Labour and Employment

- EQUALITY OF OPPORTUNITY AND TREATMENT IN EMPLOYMENT AND OCCUPATION ACT (ACT 9 OF 2000) provides for equality of opportunity and treatment in employment and occupation and protection against discrimination.
- The LABOUR ACT (No. 37 of 2006) Part IV of the Act addresses occupational safety and health.

#### 6.2. Policy / Plans / Strategic Framework

There are several national policies and plans relevant to social protection and the social protection sector. Some of them have had limited success due to the absence of supporting legislation. Key national policies of relevance to social protection and the social protection sector are listed below.

#### National Development Strategy

- National Medium Term Development Strategy 2020 2023 entitled "Economic Growth on the A.R.I.S. E<sup>18</sup>. – Nou Tout Ansanm" is a clarion call for collective action to drive Saint Lucia's development agenda. It seeks to accentuate the interconnected nature of development planning by ensuring that economic, social, and environmental considerations are incorporated and mainstreamed into Saint Lucia's national planning framework.
- National Environment Policy (NEP) and National Environmental Management Strategy (NEMS) provide the broad framework for environmental management in Saint Lucia and establish links with policies and programmes in all relevant sectors of economic and social development.
- Saint Lucia National Emergency Management Plan. The National Emergency Management Organization (NEMO) in Saint Lucia is responsible for having the Nation in a state of preparedness in case of an emergency as well as responding to the needs of the Nation after a disaster and coordinating the response at local, regional and international levels.

Saint Lucia's National Adaptation Plan (NAP 2018 - 2028) is a 10-year plan with key cross-sectoral and sectoral adaptation measures presented for 8 sectors/areas. The NAP will be complemented with Sectoral Adaptation Strategies and Action Plans (SASAPs) for water, agriculture, fisheries, infrastructure and spatial planning, natural resource management (terrestrial, coastal, and marine), education and health sectors/areas.

#### **Climate Change and Disaster Management**

- Climate Change Adaptation Policy (CCAP) 2013. Central to the CCAP is building capacities at the individual, household, community, enterprise, and sectoral levels. It operates on the premise that addressing the underlying drivers of poverty and vulnerability will help people and communities to respond more generally to changing shocks and trends, including climate change.
- Disaster Management Policy Framework for Saint Lucia (2009). The fundamental purpose of this policy is to advance an approach to disaster management that focuses on reducing risks - the risk of loss of life, economic disruption and damage to the environment and property, especially to those sections of the population who are most vulnerable due to poverty and a general lack of resources.
- Government of Saint Lucia Hazard Mitigation Policy (Draft 2006). The two main goals of this policy are to:

i. Develop social, economic, and environmentally sustainable measures that minimize the risks of hazards

ii. Incorporate hazard risk reduction in everyday activities at every level of society.

#### **Education and Training**

- Saint Lucia National Technical and Vocational Education and Training (TVET) Policy & Strategy 2019 2025. The vision of the TVET policy and strategy is to contribute to the development of competent, certified, and globally competitive citizens equipped with knowledge, skills, and attitudes for personal and national advancement.
- ICT in Education Policy and Strategy for Saint Lucia 2019–2022. The vision of this Policy speaks to a literate, creative, productive, inclusive, and competitive society engendered through the use of appropriate digital technologies.
- Education Sector Development Plan 2015. This sector development plan identifies education as a pillar for self-respect and respect for others. It also recognizes that education must promote and defend the rights of all citizens, and must promote fairness, justice, and equality for all.

#### Livelihoods

• The National Biodiversity Strategy and Action Plan of Saint Lucia 2018 is guided by 4 strategic outcomes: (i) Biodiversity and ecosystems valued into national planning and development; (ii) Biodiversity benefits generated for all citizens; (iii) Genetic

and biological resources managed and used sustainably; (iv) Behavioural change effected through knowledge management and capacity development.

• The Livelihood Protection Policy (LPP) under the Climate Risk Adaptation & Insurance in the Caribbean (CRAIC) is a weather index-based insurance policy designed specifically to help vulnerable, low-income individuals recover from the damage caused by strong winds and/or heavy rainfall during hurricanes and tropical storms.

#### Social Care, Health and Well-being

- The National Action Plan to Combat Trafficking in Persons (2016–2019) identifies the strategic goals and objectives for combating human trafficking, and the means to achieve them. It establishes the coordination of counter-trafficking measures and adequate cooperation between all actors through the National Framework for Combating Trafficking in Persons.
- The National Health Sector Policy (NHSP Draft) builds upon the commitment of the Government of Saint Lucia to providing a healthcare system that is accessible, affordable, equitable, sustainable and of the highest international quality standard for the populace of the country.
- The development goal of the Food and Nutrition Security Policy (FNSP) for Saint Lucia (2013). (NFNS) is to contribute to ensuring long-term food and nutrition security in Saint Lucia.
- Saint Lucia's National Energy Policy (2010) emphasizes the establishment of an appropriate regulatory framework to set clear guidelines for investors and protect the interests of consumers and the protection of certain customer groups.

#### 6.3. Regional Commitments.

Saint Lucia has committed to the following with respect to SP and ASP.

- The OECS DEVELOPMENT STRATEGY 2019-2028 (ODS) which outlines key strategies that will be pursued by the Member States of the Eastern Caribbean Economic Union (ECEU) over the ten-year period ending 2028. The strategies are developed around 3 mutually reinforcing pillars: 1. Generating Economic Growth; 2. Promoting Human and Social Well-being; 3. Sustainable Use of Natural Endowments. Under Pillar 2 some key interventions include:
  - Strengthen the systematic production and use of measures of multidimensional poverty and vulnerability in policy design and programming.
  - Develop an advocacy plan for the more disadvantaged and vulnerable in society.
  - Provide opportunities for the exchange of ideas, and information on issues affecting the social development of citizens.
  - Improve the life chances of children, youth and persons living with disabilities.

- Provide training in Targeting and Means-Testing, Central Beneficiary Registries/ Management Information Systems.
- Increase the poverty reduction focus of social safety net policy design and programming.
- Pillars 1 and 3 mutually reinforce Pillar 2.
- The Revised Treaty of Basseterre Article 13.3 outlines the programme areas which include incomes, social, and environmental programmes, among others. Article 13.4 calls for the co-ordination of policies towards the harmonization and optimal development of the education, health, agriculture, and services sectors among others and the mobilization, development, and efficient allocation of labour across the Economic Union through education and skill training arrangements.
- OECS Policy on Rights Contingent on the Right to Freedom of Movement within the Economic Union, (November 2015) articulates various Social Rights afford to vulnerable members of the principle beneficiary, spouse, and dependents to ensure their protection These include access to the resources allocated through cash advances, labour market schemes, and other social safety net mechanisms, the right to primary and secondary education on the same terms and conditions as citizens of the host Protocol Member State, the right of children of the principal beneficiary, whether above or below the age of majority, to access scholarships, bursaries and assistance offered by the Government of the host Protocol Member State, the right to Social Security and the right to healthcare on the same terms and conditions as citizens of the host Protocol Member State country.
- The OECS Education Sector Strategy (OESS) 2012 to 2026. The overarching goal of education within the OECS and in the OESS, is to contribute to the socio-economic advancement of the OECS through a quality education system that enables learners of all ages to reach their true potential.
- OECS Education Sector Response and Recovery Strategy to Covid-19 Partnership Against Covid-19. The strategy is anchored firmly in the OECS Education Sector Strategy (OESS), which seeks to address disaster risk reduction as a cross-cutting theme to reduce inequalities and build resilience to crises and shocks in its Member States. One of the four key focus areas is Strengthen Safety Nets for students/ ensuring the well-being of students both in and out of school. Schools have always had a responsibility for the physical, psychological, and socioeconomic needs of students and educators, in and out of school.
- OECS Inclusion and Social Protection Strategic Framework give guidance on supporting the most disadvantaged and those at risk for exclusion with the necessary resources and support services to enable active participation and meaningful contribution to society. The strategy takes a lifecycle approach to address the vulnerability. At all stages of the human lifecycle, there are various social and economic distresses and provisions are required to militate against the most disastrous effects. The OECS Social Inclusion and Social Protection Strategic Framework is informed by several regional policies.

- OECS Regional Strategy for the Development of Statistics (RSDS) 2019–2030: Revolutionizing Our Statistics, Developing Our Societies - A Transformative Agenda for Official Statistics for the OECS Region 2017 to 2030. The vision of this Strategy is anchored in five strategic priorities, one of which is to "Design and formalize the OECS Regional Statistical System (RSS). This priority envisions a regional statistical system regulated by an apex authority for the development, production, and dissemination of official statistics. It would require national statistical legislation to be updated, appropriate governance arrangements to be institutionalized and professional values and principles to be adopted" (p.2).
- Revised OECS Regional Plan of Action for Agriculture 2012 2022. Agriculture is
  one of the critical areas balancing the integration of poverty considerations in
  commercial supply chains and strategies to address the impacts of climate change
  and climate variability. Objective 2, Programme Priority 1 of this Plan of Action seeks
  to: alleviate Poverty and Food Insecurity through policy and incentives regimes that
  encourage the transition of rural populations out of poverty and vulnerability to
  poverty.
- Caribbean Development Bank Youth Policy and Operational Strategy (YPOS) YPOS is built on six strategic pillars of action, one of which is designed to, among other things, support youth awareness, education and action on climate change, disaster mitigation, environmental sustainability, and food security.

#### 6.4. International Social and Environmental Commitments

Saint Lucia has signed, ratified, or acceded to several multilateral environmental and social conventions/agreements. Those considered relevant to social protection and the social protection sector are listed below.

#### 6.4.1. International Commitments – Social

- Universal Declaration of Human Rights (1948)
- International Convention on the Elimination of All Forms of Racial Discrimination
- The Convention on the Rights of the Child (1989)
- The Optional Protocols on the Convention on the Rights of the Child
- The Optional Protocol on the sale of children, child prostitution and pornography
- The International Labour Organization's Minimum Standards for Social Security
- The UN Convention on the Rights of Older Persons
- United Nations Convention on the Rights of Persons with Disabilities
- International Covenant on Civil and Political Rights (1966)
- The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) (1979) and General Recommendation No. 19 (1992)

- Sustainable Development Goals. Refer to Microsoft Word N1604524-LIST ONLY REVISED.docx (un.org) for the full listing of the goals, targets, and indicators.
- The Discrimination (Employment and Occupation) Convention, 1958 (No. 111) adopted by the International Labour Organization (ILO)
- International Covenant on Social, Economic and Cultural Rights (1966)
- Inter-American Convention on the Prevention, Punishment and Eradication of Violence Against Women ("Convention of Belem do Pará")
- UNESCO Convention against Discrimination in Education (1960)

#### 6.4.2. International Commitments – Environmental

- The Paris Agreement Under the United Nations Framework Convention on Climate Change also called Paris Climate Agreement or COP21
- United Nations Framework Convention on Climate Change
- Kyoto Protocol to the United Nations Framework Convention on Climate Change
- Protocol on Marine Pollution from Land-Based Sources and Activities (LBS Protocol)
- The Sendai Framework for Disaster Risk Reduction 2015 2030.

### 7. Priority Areas for Action

Given the need to incorporate previously proposed and ongoing interventions from the 2015 Policy and Action Plan, as well as embrace a stronger focus on adaptiveness and resilience, gender sensitivity, greater inclusion, and a life-cycle integrated systems approach, and, bearing in mind lessons learned from the government's response to COVID-19, 4 priority areas have been identified to meet the goal, objectives, outputs, and outcomes of this policy.

7.1. Priority Area 1: Harmonise the initiatives of key stakeholders/actors within the Social Protection System and Strengthen the Capacity to Deliver Services in an Efficient and Effective Way

This priority area addresses the revision and adjustment of the Social Protection system. A harmonised system aims to establish clear identification of key players (state and non-state), outlining their roles and responsibilities and establishing clear guidelines for collaboration to deliver services under the 4 social protection pillars. It aims to re-define the selection criteria for each intervention and operationalize its use by all programme implementing agencies; unify and improve the effectiveness and efficiency of the targeting and registration processes; develop guidelines and instruments for more harmonized service delivery among and between state and non-state agencies and build institutional capacities for adaptive social protection. Special emphasis will be placed on designing and implementing research plans and M&E systems for evidence-based programming and policy implementation.

**Strategic Objective:** A coordinated social protection system with appropriate mechanisms for the effective and efficient delivery of interventions to the poor, vulnerable and marginalised, to address deprivations, strengthen livelihoods and reduce vulnerability to shocks.

Activity Objective 1.1: Define, document and systematize operations and processes for all major Social Protection institutions and respective interventions to ensure a standard code of conduct and quality service delivery. Activity Objective 1.2: Streamline and adjust case management approaches, targeting and registration mechanisms inclusive of referral systems to increase objectivity, efficiency, equity and transparency for all key social protection interventions.

Activity Objective 1.3: Establish effective coordination mechanisms at all government levels and across sectors and organizations.

**Activity Objective 1.4:** Strengthen the institutional capacity of key Social Protection institutions and agencies to increase efficiency and effectiveness in policy and programme design and implementation.

**Activity Objective 1.5:** Develop integrated and interoperable social protection information systems, with strategies for ensuring data quality checks and capacity building for use of good-quality data.

Activity Objective 1.6.: Develop M&E systems for all Social Protection interventions and ensure the effective implementation of redress mechanisms as well as the efficient utilization of data, results and findings.

#### 7.2. Priority Area 2: Reform and Strengthen Interventions for Protection and Equity.

This priority area aims at reforming the main social assistance interventions (State and non-state) to assist the poorest and most vulnerable populations in Saint Lucia. The focus is on integrating objectives and goals, rationalizing available resources, and ensuring that those most in need are reached with quality and effective services. It entails strategic reforms mainly for the Social Assistance programmes that serve the indigent and poor (mainly through the Public Assistance Programme (PAP), the Koudmein Sent Lisi Programme (KSL), school feeding programmes and other relevant civil society programmes). Strategic reforms should target housing assistance for the poor and vulnerable and provisions for emergency housing interventions to protect against shocks, for the poor and vulnerable.

**Strategic Objective:** Alleviate economic, social, and environmental deprivation among citizens including relief from chronic and extreme poverty, as well as economic, and environmental shocks.

**Activity Objective 2.1:** Review, harmonize, and strengthen the existing poverty and vulnerability interventions (such as cash transfers, school feeding, and housing programmes).

Activity Objective 2.2: Develop strategies that expand coverage of protective social assistance programmes, particularly of the poor, and scale up/improve benefit adequacy.

Activity Objective 2.3: Develop, reform and strengthen social assistance to include adequate housing assistance and complementary services to include utilities, internet, water and sanitation for the poor, indigent, and those at risk.

**Activity Objective 2.4:** Develop, reform and strengthen the emergency housing interventions for the poor, vulnerable and those at risk (Disaster Assistance Programme).

**Activity Objective 2.5:** Expand and consolidate the provision of complementary measures and links to resilience.

Activity Objective 2.6: Develop, reform, and strengthen the interventions and regulations concerning family well-being, child protection, at-risk youth, and gender-based violence.

## 7.3. Priority Area 3: Rationalize, Reform and Strengthen Preventive / Promotive / Transformative Interventions and strategies, giving due consideration to ASP mainstreaming and capacity building

This priority area proposes reforms of the main social safety net and social insurance interventions oriented at preventing foreseeable life-cycle risks (e.g., health and nutrition, disability, sickness and unemployment), enabling access to social insurance for low-income and vulnerable groups, ensure that the required investment in the children's human capital takes place (e.g., education support services for at-risk children), enable access to education and training for poor and vulnerable youth and adults and stimulate economic independence by building labour market resilience and increasing labour market support programmes, thereby increasing self-sufficiency and capacity to overcome the inter-generational transmission of poverty.

**Strategic Objective:** Enhance human capital, social capital, capabilities and physical assets of the poor and vulnerable.

**Activity Objective 3.1:** Define and enhance initiatives that enable equitable access to health services (including mental health services), reduce barriers to access, support access to care services and ensure financial sustainability of Health Assistance services.

Activity Objective 3.2.: Rationalize, reform, and strengthen interventions and regulations concerning education support services (especially those that enable equitable access to early childhood development (ECD) and other school-based social safety net services – books, uniforms, transportation, and community-after-school-programmes).

**Activity Objective 3.3:** Rationalize, reform and strengthen the interventions and regulations related to Employment services. An initial reform phase will adjust and ensure adequate coordination among the public sector interventions. Other phases could consider the work of private sector interventions and agencies of similar purpose.

**Activity Objective 3.4:** Operationalize recertification, exit and graduation strategies for state social assistance programmes.

**Activity Objective 3.5:** Empower beneficiaries of social assistance to be able to contribute to human capital formation.

# 7.4. Priority Area 4: Review, Strengthen and Develop the Institutional, Financial, and Legal Frameworks for Enhanced Transformation and Coordination of Social Protection Services giving due consideration to ASP mainstreaming and Capacity Building.

This priority area proposes the revision and further development of the institutional, legal and financial frameworks that will facilitate the provision of more coordinated, equitable and transformative Social Protection services. A customized institutional structure, together with an adequate legal framework will foster increased Social Protection Policy coherence and inter-agency engagement. In addition, modern financial systems and mechanisms will facilitate the timely delivery of services in a transparent way and be responsive to facilitating the expansion of financing required in response to shocks. Actions to build capacity to attract and disperse financing in emergency situations are of paramount importance. Finally, to ensure accountability and informed stakeholder participation, a comprehensive Communication Strategy will ensure the flow of adequate information among the institutional structures, the communities, and the beneficiary households, as well as the public.

**Strategic Objective:** Facilitate the modernisation of financing provisions for the social protection system to enable timely response to the needs of the poor and vulnerable, especially in times of disasters or shocks and to enable optimal scale-up and functioning of social protection service providers.

**Activity Objective 4.1** Promulgate national social protection policy in national law and regulations.

**Activity Objective 4.2:** Develop and establish institutional arrangements and coordination mechanisms for effective Social Protection Policy management and implementation.

**Activity Objective 4.3:** Develop effective and sustainable financing mechanisms for Social Protection.

**Activity Objective 4.4:** Develop effective communication strategies for the implementation of the Social Protection Policy.

**Activity Objective 4.5:** Improve the financial, and institutional policy, integration, coordination and capacity for ASP.

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#### 8. Policy Implementation Road Map

The policy is presented as an eight (8) year programme consistent with current project management principles and practice and will be executed in 3 phases during the period 2022 to 2030. It will seek to achieve the desired established state of the various dimensions of the Social Protection system guided by the World Bank maturity metrics. Actions should be implemented based on logic and imperatives.

The implementation strategy seeks to achieve the desired established state of the various dimensions of the social protection system based on World Bank (2021) maturity metrics (see Section 3.7 (6), Foot Note 10). The implementation of the 8-year programme will take into consideration the need to be flexible based on the needs and circumstances to be addressed.

#### 8.1. Phase 1: 2022 to 2025

The following activities are identified for implementation during the period 2022 - 2025

- Undertake institutional reform geared toward strengthening the capacity of MoEq staff and other key actors in the social protection sector to facilitate the effective and efficient delivery of existing and new priority social protection initiatives and programmes. Notable actions to be taken include ensuring that DRM legislation and National Strategy are up-todate; establishment of formal structures to monitor institutional arrangements; establishment of MoUs for MoEq and other public agencies as well as CSOs / NGOs; scaling up human resource capacity in the Department responsible for social protection services; operationalize the Action Plan; finalize the resultsbased framework; review and adopt the institutional framework for the social protection policy.
- Strengthen family accompaniment and case management paying particular attention to social care and case management post shocks.

- Define and document strategies to increase coverage of social protection flagship programmes (PAP, KSL, Child Disability Grant, School Feeding Programme)
- Strengthen methodologies/approaches for undertaking post-disaster household assessments.
- Review the benefit adequacy of cash transfers and non-contributory transfers.
- Upscale current operational manuals used for the PAP designing them to cover delivery processes for shock response.
- Continue to rationalize the use of the National Eligibility Test as the main targeting tool for use by other public social assistance programmes such as the School Feeding Programme. Take steps to develop an Adaptive Social Protection tool which all agencies involved in disaster response activities would be required to use.
- •Upgrade information systems and management to facilitate interoperability between public and private / NGO social protection agencies.
- Finalize and implement the beneficiary and social registries, to improve efficiency in the delivery of social protection services (payment), especially in relation to disaster response.
- Undertake the preparation of projects for implementation during this phase and phases 2 and 3 as outlined in the Action Plan.
- Undertake an end-of-period evaluation to assess the state of institutional reform/ strengthening for implementation of the policy as well as inform implementation activities in Phase. 2.

#### 8.2. Phase 2: 2026 to 2028

Key activities under Phase 2 include:

- (a) Consolidate implementation of the actions and interventions outlined in Phase 1.
- (b) Address gaps in state and non-state social protection provision to life cycle groups taking into account FSPS and ASPS.
- Children 0 to 4 years and Pregnant Women. The focus will primarily be on putting in place public social security for poor unemployed pregnant women; targeting poor and unemployed pregnant women for support under the PAP and KSL; providing social care services for poor pregnant women before they give birth; making provisions for poor pregnant women's participation in ALMPs.
- **Children of School-going Age.** The focus will primarily be on making the benefits of NIC contributors transferrable to children of school-going age; ensuring that Early Childhood Education is made compulsory and universal; establishing a legal definition for child labour in Saint Lucia to guide the work of the various agencies involved in child protection.

- Adolescents and Youth. The focus will be on exploring social insurance; identifying and upscaling youth employment support schemes to increase coverage; taking steps towards the establishment of a residential facility for girls in difficult circumstances; incorporating boys at primary schools in the Our Boys Matter Programme; undertaking an impact assessment of the James Belgrave Microenterprise Development Fund (BELfund).
- Working Age Population. The focus will primarily be on exploring the possibility of putting in place an unemployment relief programme for working persons who are non-contributors to the NIS; rolling out the PAP exit/graduation strategy; reinstating the KSL programme; providing additional support to agencies involved in providing support to women in crisis and difficult economic, social, and emotional circumstances.
- Old Age. The focus will primarily be on exploring the introduction of a social pension programme for the elderly; finalizing the policy on the elderly; determining the kind of support needed by elderly care providers; upscaling the SSDF Home Care Programme to increase coverage.
- **Persons with Disabilities.** For persons living with disabilities in each life cycle group, the focus will primarily be on exploring the possibility of PWDs securing benefits from the NIS Scheme; providing adequate support to agencies enabling them to execute their mandate effectively and efficiently; putting in place National Protocols and Standards of Care for PWDs; tailoring ALMPs to facilitate the participation of PWDs.
- Undertake an end-of-period evaluation to assess the extent to which gaps in the social protection provisions of life-cycle groups were addressed as well as to inform implementation activities in Phase 3.

#### 8.3. Phase 3: 2029 to 2030

In this phase the focus will primarily be on:

- Consolidating implementation of the actions and interventions outlined in Phases 1 and 2.
- Undertaking an end-of-period (2022 to 2030) evaluation to determine the extent to which the actions of the 2022 National Social Protection Policy and Action Plan were implemented, and to inform the post-2030 national social protection policy and action plan.

#### 8.4. Implementation Tools

Implementation of this policy shall be undertaken through the following:

- An Action Plan for Phase 1 which is appended to this policy. The Plan includes:
  - An Implementation Framework which specifies the Strategic Objectives, Activity Objectives, Tasks, Activities, Outputs, Output Indicators, Outcomes, Outcome Indicators, Indicative Budget, and Actors.
  - A Results-based Monitoring and Evaluation System Framework designed to facilitate the assessment of outcomes and the impact of policy implementation. It specifies the Policy Outcomes, Outputs, Output Indicators, Unit of Measure, Baseline, Target for 3 years, Periodicity required for reporting, and the Agencies Responsible for the production and distribution of the findings.
  - An Institutional Framework outlines the roles and responsibilities of the various state and non-state actors involved in the delivery of social protection services in Saint Lucia.

#### 9. Institutional Framework Design

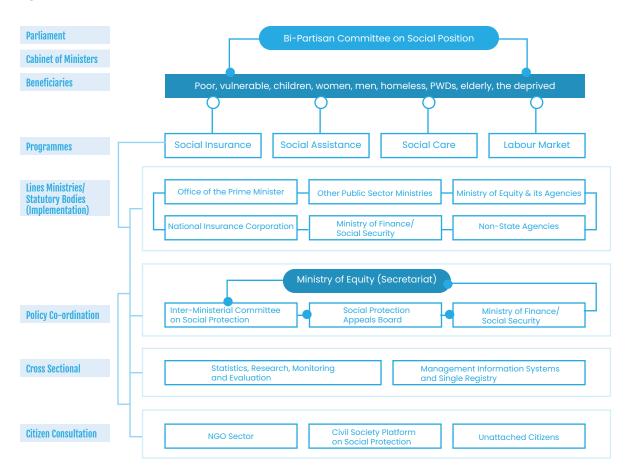
As outlined in Priority Area 4 (Activity Objective 4.2) reform of the institutional framework is needed to ensure coordination and successful integration of the Government's Social Protection provisions in Saint Lucia. Given that there are multiple Ministries and agencies implementing different Social Protection interventions, institutional arrangements and coordination mechanisms are needed to facilitate harmonized decision-making, implementation and service delivery.

This framework will cover all Social Protection activities and programmes of the GoSL. Monitoring and evaluation will be in-built into the Institutional Framework to allow for timely assessment of the reform process. This will include the utilization of indicators to track the achievement of specific objectives under each priority area included in the Action Plan. In addition, reporting mechanisms will be established to determine how the results of M & E activities will be disseminated and ensure that the different users receive all relevant information and analysis in time to fulfil their various roles.

The M&E system will provide crucial information for accountability and transparency, which is vital in maintaining the legitimacy of the Social Protection System among the many stakeholders and the public in general. The Institutional Framework outlines the level (vertical and horizontal) of interaction among stakeholders including the public and private sector, and other nongovernmental actors involved in the provision of Social Protection services in Saint Lucia (See Section 10). The inclusion of non-government actors acknowledges that these actors may enjoy comparative advantages over public sector providers in some areas, such as, better access to information on the homeless. The key elements of the Institutional Framework are depicted in Figure 9.1.



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#### **10.** Institutional Components

Several institutional components in keeping with the Institutional Framework depicted in Figure 9.1 will be established and operationalized with specific mandates/ roles to facilitate the implementation of the policy and action plan.

- A Bi-Partisan Parliamentary Committee on Social Protection will be created to protect the integrity of the Social Protection provision in Saint Lucia and strategically influence its resource allocation. It will also play a key role in legislating and transforming the existing legislation to address power imbalances and ensure the reduction of social, cultural, political, or economic barriers that create or sustain inequalities and exclude potential beneficiaries from accessing Social Protection services.
- An Inter-Ministerial Committee on Social Protection will be created to provide overall Policy guidance to the Social Protection System and the institutions involved in it. The Inter-Ministerial Committee will periodically consult the Civil Society Platform on Social Protection and advise the Secretariat.
- Establish a Social Protection Commission "SPC" that is coordinated through the Ministry of Equity. Its role is to be a Secretariat to the government in regard to research, leadership, monitoring, promoting, evaluating, reporting and coordinating with relevant Ministries, organizations, local authorities, and NGOs etc. in implementing the National Social Protection Policy and Graduation Strategy.
- The Ministry Responsible for Social Protection and the Ministry responsible for Finance and Social Security will have the ultimate responsibility for ensuring that the National Social Protection Policy is implemented, as well as for its monitoring, evaluation, and review processes. They will fulfil these obligations in collaboration with all relevant stakeholders, and report to the Bi-Partisan Parliamentary Committee on Social Protection.

- The Ministry Responsible for Social Protection will play the primary coordination role, serving as the Secretariat for Social Protection, ensuring timely information flows between Ministerial bodies and agencies involved in social protection service delivery, and will direct appeals and redress requests to the National Social Protection Appeals Board. The Ministry will have at its disposal the Integrated/ Interoperable Social Information System (ISIS) developed for these purposes and will be responsible for populating the system in collaboration with the Statistics Department.
- The Ministry responsible for Finance and Social Security will, subject to the availability of funds, ensure sustainable financing for the implementation of the Social Protection policy in the short, medium, and long-term.
- Other Social Protection Implementing Ministries and Key Non-State Agencies will assume both leadership and collaborative roles associated with the implementation of relevant provisions of the Policy, including service delivery, and information management and reporting roles.
- **Private Sector** representative bodies including humanitarian groups will collaborate with the government and other NGOs in sharing financial and other resources that will enhance the efforts of the state in the provision of social protection.
- Civil Society Organizations (CSOs), including community-based organizations, faith-based organizations, and other non-governmental organizations, provide a range of Social Protection services to vulnerable citizens. These organizations are sometimes better able to reach vulnerable categories, and/or to offer interventions appropriate for them. The CSOs will collaborate with, and be supported by the government in undertaking these interventions.
- A Civil Society Platform on Social Protection will be established to allow a formal means for civil society and beneficiaries to participate in shaping Social Protection policy and programming for Saint Lucia.
- Beneficiaries are individuals or households who benefit from or access specific Social Protection services at a specific point in time or during a period. As such they are entitled to programme benefits and services and have the responsibility to follow rules and regulations and to provide prescribed information honestly and in a timely fashion to designated Social Protection administrators for the purposes of determining continued programme eligibility, compliance, and possible graduation from programmes, as well as for monitoring and evaluation purposes. Beneficiaries can submit appeals and complaints related to their entitlements, including eligibility, selection and registration through the National Social Protection Appeals Board. Beneficiaries can participate in shaping Social Protection policy and programming through the Civil Society Platform on Social Protection.

- A National Social Protection Appeals Board will be created to process and channel all Social Protection appeals and complaints related to beneficiary selection, quality service delivery or other areas. The appeals mechanism will have clear processes and instruments and time limits for lodging and response.
- **Regional Bodies** such as the Caribbean Community and Common Market (CARICOM) and the Organization of Eastern Caribbean States (OECS) Commission and the Caribbean Development Bank (CDB) will provide opportunities for the hedging of risks associated with country-specific macroeconomic volatility through measures such as regional Stabilization Funds and Regional Social Protection Funds. Regional bodies will also facilitate regional goal setting, monitoring of progress, sharing of experience and regional accountability.















# Glossary

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#### **Social Protection Terms**

Active Labour Market Programs (ALMPs) include interventions which are aimed at the improvement of the beneficiaries' prospect of finding gainful employment, in other words, to enhance their employability.

Adaptive Capacity refers to the combination of all strengths, attributes, and resources available within an organization, community or society that can be used to manage and reduce disaster risks and strengthen resilience, e.g., individual and community access to government health and social protection services.

Adaptive Social Protection is a specific focus area within the wider field of social protection that helps to build the resilience of households that are vulnerable to shocks through direct investments that support their capacity to prepare for, cope with, and adapt to shocks: protecting their well-being and ensuring that they do not fall into poverty or become trapped in poverty because of the impacts.

It is concerned with how SP programs, services and systems can contribute to addressing covariatel shocks through preventive, preparedness, and response actions: that is, adapting and using the capacity of the SP sector, typically developed for addressing idiosyncratic shocks, to enhance the resilience of households – and the poor in particular.

**Adequacy.** A program is adequate if it provides sufficient benefits to enough people for long enough.

**Beneficiaries.** Individuals, families, or households who are enrolled in a program are recipients of a benefit or service.

**Beneficiary Registry.** A database of beneficiaries of a social protection program. Beneficiary registries contain information on program beneficiaries. Registries that contain information on beneficiaries of multiple programs are known as integrated beneficiary registries.

**Benefits.** Something tangible that is given by social protection programmes to individuals, families, or households. They may be in the form of cash transfers or in-kind (such as food stamps, food rations, subsidies etc.).

**Cash transfer Programmes** are programmes that provide monetary benefits to individuals or households. They can be conditional (meaning an action needs to be completed to receive them, such as sending children to school) or unconditional. Since some countries implement a variety of cash transfer programmes at the same time, this report uses the term 'flagship' cash transfer programme to refer to the programme with the highest coverage, which is typically targeted based on poverty.

**Categorical Targeting** is a targeting method in which all individuals in a specific category (for example, a particular age group, geographic location, gender, or demographic composition) are eligible to receive benefits.

**Chronic Poverty** is poverty that endures year after year, usually because of long-term structural factors faced by the household, such as low assets or location in a poor area remote from thriving markets and services.

**Community-Based Targeting** is a targeting method in which a group of community members or leaders (whose principal functions in the community are not related to the transfer program) decide who in the community should benefit.

**Conditional Cash Transfers** provide money to poor families, contingent on them making investments in human capital, such as keeping their children in school or taking them to health centres on a regular basis.

**Conditionalities (or Co-responsibilities).** The set of obligations that each beneficiary household must comply with to continue receiving cash benefits. Common examples include school attendance, health visits, and labour/work efforts.

**Covariate Shock.** An uncertain (in realization, timing, or magnitude) event that affects many or all members of a group or community, such as drought, earthquake, or macroeconomic crisis.

**Delivery Chain.** Social protection (including labour) benefits and services pass through common implementation phases along the delivery chain, including Outreach; Intake & Registration; Assessment of Needs and Conditions, Eligibility and Enrolment Decisions; Determination of Benefits or Service Package; Notification and On-Boarding; Provision of Payments or Services; and Beneficiary Monitoring and Management.

Demographic Targeting. A targeting method in which eligibility is based on age.

**Eligibility.** A state in which individuals, families, or households are entitled or qualified to receive a benefit or service because they satisfy certain criteria.



**Eligibility Criteria.** Factors used to determine whether an individual, family, or household is eligible (inclusion criteria) or not eligible (exclusion criteria) to participate in a programme.

**Equity.** Concept of fairness in economics. Equity analysis examines the distribution of benefits across pertinent groups (poor/non-poor, men/women, rural/urban, and so on).

Error of Exclusion. The exclusion of a person who meets eligibility criteria from a program.

**Error of Inclusion.** The inclusion of an ineligible person in a program. Foundational Social Protection relates to what is often characterized as the 'regular' delivery of SP (World Bank, 2020).

**Generosity.** The level of a program benefits as a share of the poverty line or other type of indicator, such as the minimum wage, the average wage, or the total consumption of beneficiary households.

**Geographic Targeting** is a targeting method in which a location determines eligibility for benefits or allocates a budget to concentrate resources on poorer areas. Idiosyncratic Shock. An uncertain (in realization, timing, or magnitude) event that affects one individual or household, such as illness or the loss of a job.

**In-Kind Food Transfers** provide additional resources to households by making food available when they need it most in the form of food rations, supplementary and school feeding programs, or emergency food distribution.

**Intake** is the process of initiating contact, engaging the client(s) and gathering information for the purposes of assessing their needs and conditions for potential eligibility for benefits or services. The point of entry may be via a specific program or a multi-program access point (such as a social welfare agency, public employment service, or social registry). On-demand intake approaches allow anyone to apply and register their information to be considered for potential inclusion in one or more programs.

**Intended Population.** The group of individuals, families, or households who are meant to be included as potential beneficiaries of a program. Also referred to as Target Group.

**Interoperability.** The ability of different functional units—e.g., systems, databases, devices, or applications—to communicate, execute programs, or transfer data in a manner than requires the user to have little or no knowledge of those functional units.

**Labour Markets** include actual pools of skilled or unskilled labour available within local, national, or global economies, and activities intended to reduce risk and improve the efficiency of the labour market and to increase the employability of workers, including employment security and protection.

**ISIS - Interoperable Social Information System** includes all the databases kept by the various program units in the performance of their functions—registry of beneficiaries, payments, and so on.

**Means Test.** A targeting method based on income that seeks to collect comprehensive information on household income and/or wealth and verifies the information collected against independent sources.

**Near Cash Transfers** include food stamps, coupons, or vouchers that may be used by households to purchase food at authorized retail locations.

**Non-Contributory Pensions (or Social Pensions).** Benefits paid to the elderly from tax-financed (rather than contribution-financed) sources and without regard to past participation in the labour market.

**Notification** involves informing applicants of their enrolment decisions (viz: in, waitlisted, out). Onboarding (or Enrolment). Involves finalizing the enrolment process for those who have been selected (conducting orientation, collecting additional information, providing the option to opt out, etc.)

**Outreach.** Deliberate efforts to reach and inform intended populations and vulnerable groups about social protection programs and delivery systems in ways that they will comprehend so that they are aware, informed, able, and encouraged to engage. Passive Labour Market Programs. Programs that provide income replacement to unemployed workers without requiring any job-search or work-related activation efforts.

**Poverty Gap.** The mean difference between the poverty line and household income divided by the poverty line (the non-poor have a gap of zero) calculated over the whole population. The income gap multiplied by the headcount equals the poverty gap.

**Poverty Lines.** Cut-off points separating the poor from the non-poor. They can be monetary (for example, a certain level of consumption) or nonmonetary (for instance, a certain level of literacy).

**Proxy Means Test (PMT).** A targeting method by which a score for applicant households is generated based on fairly easy-to-observe household characteristics, such as the location and quality of the household's dwelling, ownership of durable goods, demographic structure, education, and so on.



**Public Works Program.** Where income support for the poor is given in the form of wages (in either cash or food) in exchange for work effort.

**Quintile.** One-fifth of an ordered population; for example, the poorest or richest one-tenth of the population.

**Risk and Vulnerability Analysis.** Complements poverty analysis by providing insights into the risks the poor face, as well as the size and characteristics of the population at risk of becoming poor in the event of a shock.

**Shock-Responsive Social Protection** is concerned with how social protection programmes and systems can be adapted, prepared, and used to mitigate the impacts of shocks (e.g., natural hazards, economic crisis, conflict and forced migration) that affect people's well-being, including building resilience to shocks. Some use the term 'adaptive social protection' to describe the role of social protection in building resilience and responding to covariate shocks.

**Social Safety Nets (or Social Assistance).** Non-contributory transfer programs targeted in some manner to the poor and those vulnerable to poverty and shocks.

School Feeding Programs. In-kind food transfers that provide meals or snacks for children at school to encourage their enrolment and improve their nutritional status and ability to pay attention in class. Self-Targeted Programs (or Self-Selection). Self-targeted programs are technically open to everyone but are designed in such a way that take-up is expected to be much higher among the poor than the nonpoor, or the level of benefits is expected to be higher among the poor.

**Social Assistance** is a type of social protection that provides transfers to people or households in need. These transfers are typically provided to the elderly, children, and/ or the poor, either in cash or in kind. Social assistance is non-contributory, tax-financed, and usually implemented as a complement to social insurance

Social Insurance is a type of contributory social protection programme that provides protection against various economic risks (e.g., loss of income due to sickness, old age, maternity, and unemployment). It is a mechanism for risk pooling that operates based on solidarity between individuals who are vulnerable to a specific risk. These individuals pay contributions into a pool or fund, which is then used to pay benefits according to specified rules to indemnify those participants who suffer the occurrence of the relevant risk. Social insurance contributions are normally shared between employers and workers, sometimes with supplementary contributions from or subsidies by the government (ILO, 2015).

**Social Pensions** are social assistance schemes that provide unconditional cash transfers to older persons. These programmes are sometimes universal – meaning that they target all the population above a certain number of years of age – and sometimes the age eligibility is combined with further targeting through means or pensions tests.

**Social Protection.** The set of public interventions aimed at helping individuals, families, households, and communities especially the poor and vulnerable, cope with crises, manage risk, find jobs, invest in the health and education of their children, and protect the ageing population. Social protection includes safety nets (social assistance), social insurance, labour market policies, and social services.

**Social Protection Delivery Systems.** The operating environment for implementing social protection (including labour) benefits & services, including the implementation phases and processes along the Delivery Chain, main actors (people and institutions), and enabling factors (communications, information systems, and technology).

Social Protection Floors are nationally-defined sets of basic social security guarantees that secure protection aimed at preventing or alleviating poverty, vulnerability and social exclusion.

**Social Registry.** Information systems that support the processes of outreach, intake and registration, and assessment of needs and conditions to determine potential eligibility for social programs. They contain and maintain information on all registered households regardless of whether they eventually benefit from a social program. Social Services. Includes a wide variety of programs made available by public or private agencies to support individuals or families in addressing their risks and improving their overall well-being.

Target Group (or Target Population). The intended beneficiaries of programme benefits.

**Targeting.** The effort to focus resources among those most in need of them. Unconditional Cash Transfers. Provides cash transfer benefits to individuals, families, or households without imposing any conditions on the beneficiaries

**Unemployment Benefits**. Unemployment compensation, includes all forms of cash benefits to compensate for unemployment, including unemployment assistance (non-contributory) or unemployment insurance (based on contributions and earning history).

**Vulnerability.** The likelihood or probability that a household will pass below the defined acceptable threshold of a given indicator and fall into poverty.

Vulnerable Groups. Typically includes the elderly, orphans, widows, people with disabilities, people with HIV/AIDS, refugees, or internally displaced persons, among others. Vulnerable groups face special difficulties in supporting themselves because of some aspects of their situation.

#### DISASTER RISK MANAGEMENT TERMS

**Climate Change.** A change in the state of the climate that can be identified (e.g., by using statistical tests) by changes in the mean and/or the variability of its properties and that persists for an extended period, typically decades or longer. Climate change may be due to natural internal processes or external forces, or to persistent anthropogenic changes in the composition of the atmosphere or in land use.

**Disaster.** Severe alterations in the normal functioning of a community or a society due to hazardous physical events interacting with vulnerable social conditions, leading to widespread adverse human, material, economic, or environmental effects that require an immediate emergency response to satisfy critical human needs and that may require external support for recovery.

**Disaster Risk.** The likelihood over a specified time of severe alterations in the normal functioning of a community or a society due to hazardous physical events interacting with vulnerable social conditions, leading to widespread adverse human, material, economic, or environmental effects that require an immediate emergency response to satisfy critical human needs and that may require external support for recovery. Disaster Risk Financing and Insurance. Aims to increase the resilience of vulnerable countries against the financial impact of disasters.

**Disaster Risk Management** consists of the consideration and adoption of necessary planning processes to strengthen capacities that allow a country to prepare for and respond to future disasters in a timely, efficient, and equitable manner thereby reducing their environmental, social, and economic impact.

**Disaster Risk Reduction** refers to measures that seek to reduce the damage caused by natural hazards through prevention efforts and strategies that reduce vulnerability and increase the adaptive capacity of communities.

**Disaster Risk Management.** Processes for designing, implementing and evaluating strategies, policies, and measures to improve the understanding of disaster risk, foster risk reduction and transfer, and promote continuous improvement in disaster preparedness, response, and recovery practices, with the explicit purpose of increasing human security, wellbeing, quality of life, and sustainable development.

**Early Warning System.** The set of capacities needed to generate and disseminate timely and meaningful warning information to enable individuals, communities, and organizations threatened by a hazard to prepare and to act appropriately and in sufficient time to reduce the possibility of harm or loss. Exposure. People, property, systems, or other elements present in hazard zones are thereby subject to potential losses.

**Hazard.** The potential occurrence of a natural or human-induced physical event that may cause loss of life, injury, or other health impacts, as well as damage and loss to property, infrastructure, livelihoods, service provision, and environmental resources. Mitigation. The lessening or minimizing of the adverse impacts of a hazardous event. Natural Hazard. The potential occurrence of a natural physical event that may cause loss of life, injury, or other health impacts, as well as damage and loss to property, infrastructure, livelihoods, service provision, and environmental resources.

**Preparedness.** The knowledge and capacities developed by governments, professional response and recovery organizations, communities, and individuals to effectively anticipate, respond to and recover from, the impacts of likely, imminent, or current hazard events or conditions.







# **NSPP Action Plan**

### **Priority Area 1:**

## Harmonise the initiatives of key stakeholders/actors within the Social Protection System and Strengthen Capacity to Deliver Services in an Efficient and Effective Way

Strategic Objective: A coordinated social protection system with appropriate mechanisms for the effective and efficient delivery of interventions to the poor, vulnerable and marginalised, to address deprivations, strengthen livelihoods and reduce vulnerability to shocks.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
1.1 Define, document and systematize operations and processes for all major Social Protection institutions and respective interventions involved in social assistance, social care and ALMPs to ensure standard code of conduct and quality service delivery.	1.1.1 Develop Operations Manuals (OM) for all major Social Protection interventions involving social assistance, social care, and ALMPs.	1.1.1.1 (a) Draft Operations Manual for all major social Protection interventions undertaken by public private, NGOs, CSOs, FBOs agencies to clearly define processes and instruments for all actors involved in their programme cycle implementation.	1.1.1.1 (a) Operations Manuals or major public flagship programmes (PAP, KSL, CDG, SFP, Education Assistance, ALMPs) and for other stakeholder/ agencies involved in the implementation of social assistance, social care and ALM Programmes drafted.	1.1.1.1 (a) # of Operations Manuals developed by social protection agencies (public/private/ CSOs)	1.1.1.1 (a) Service delivery enhanced through use of standardised Operational Manuals and operating procedures.	1.1.1.1 (a) Number of operations manuals operationalised by social protection agencies (public/private/ CSOs)	MoEq.
		1.1.1.1 (b) Merge the Operations Manuals of PAP and KSL for Integration of Services.	1.1.1.1 (b) An Integrated Operations Manual for PAP and KSL.	1.1.1.1 (b) An Integrated Operations Manual for PAP and KSL available for guidance.	1.1.1.1 (b) # of Operations Manuals adopted by social protection agencies (public/private/ CSOs)	1.1.1 (b) Reports on initiatives utilizing the integrated approach to SP services	Public, private, NGO, FBO CSO entities.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.1.1.1 (c) Validate and finalize proposed Operations Manuals.	1.1.1.1 (c) Operations Manuals validated and finalized.	1.1.1 (c) Report on validation exercises.	1.1.1. (c) Knowledge and awareness of Operations Manuals.	1.1.1 (c) Improvement in the operations of social protection agencies.	
		1.1.1.1 (d) Training workshops for technical staff, managers, line staff, and social workers in the new processes and procedures.	1.1.1 (d) Training Workshops conducted	1.1.1 (d) # of training sessions	1.1.1.1 (d) Application of knowledge and skills acquired from training reflected in work programmes and implementation.	1.1.1.1 (e) Increased # of persons with knowledge of OMs.	
		1.1.1.1 (e) Design and Implement Change Management for Integration.	1.1.1.1 (e) Change Management Programme for Integration Strategy Designed and Implemented.	1.1.1.1 (e) Change management processes tools and techniques developed.	1.1.1.1 (e) Application of knowledge and skills acquired from training reflected in work programmes and implementation.	1.1.1.1 (e) (a) Reports reflecting adherence to operational guidelines in programme cycle implementation.	
		1.1.1.1 (f) Mapping of Social Protection service providers, (in alignment with the 3Ps – Protection, Prevention,	1.1.1.1 (f) All Social Protection institutions / services mapped and positioned with the Social Protection	1.1.1.1 (f) Registry of Social Protection service providers.	1.1.1.1 (f) Social Protection framework strengthened with key service providers identified.	1.1.1.1 (f) Interoperable Social Protection Stakeholder data base platform.	MoEq.
		Promotion and Transformation), ensuring adequacy of provision to address the needs of poor and vulnerable under all 4 SP pillars).	System.	1.1.1.1 (f) # of institutional mapping activities conducted.	1.1.1.6 (f) SP framework strengthened with key service provider service capacity documented.	1.1.16 (f) Social Protection service capacity quantified.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	1.1.2. Revise and establish the National Social Protection Framework (with clear policies, actors and beneficiary target groups identified).	1.1.2.1 Revise existing framework and define the National Social Protection Framework.	1.1.2.1 National document on the social Protection Framework adopted.	1.1.2.1 (a) National document on the social Protection Framework adopted.	1.1.2.1 (a) SP framework strengthened with policies, key service providers and beneficiaries identified and coordinated	1.1.2.1 Social Protection Framework revised, harmonized and distributed	MoEq. Stakeholders.
				1.1. 2.1 (b) # of beneficiary target groups identified through standardized means/eligibility test (SL-NET 3.0; Vulnerability index; Disability Assessment).	1.1. 2.2 (b) Social protection agencies apply eligibility test and classification (tests available and used) to target beneficiaries.	1.1.2.2 Number of beneficiaries reached using tool.	MoEq. Stakeholders.
	1.1.3 Utilize Operations Manuals (OM) and utilize it to regularly train all actors involved in the programme's implementation.	1.1.3.1 (a) Define operations of major social protection interventions/ institutions	1.1.3.1 (a) Operations manuals available and utilized in training of relevant actors.	1.1.3.1 (a) # of SP actors trained and familiar with the operations manuals	1.1.3.1 SP framework strengthened with key service providers identified and coordinated.	1.1.3.1 (a) Operations manuals widely utilized	MoEq All SP service providers
			1.1.3.1 (b) OM adopted by Social Protection (SP) service providers. A # of SP providers trained.	1.1.3.1 (b) OM Guidelines are utilized by a number of SP Providers.		1.1.3.1 (b) Number of SP providers using the OM in coordinating services to program beneficiaries.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.1.3. 2 Undertake continuous capacity building of stakeholders involved in the implementation of each process using the OM's guidelines and instruments.	1.1.3.2 Continuous capacity building undertaken.	1.1.3.2 Capacity Building Plan (CBP) for OM in place.	1.1.3.2 Service delivery improved across Social Protection interventions.	1.1.3 2 # of capacity building sessions conducted.	All SP service providers MoEq All SP service providers
1.2: Streamline and adjust case management approaches, targeting and registration mechanisms (inclusive of referral systems) to increase objectivity, efficiency, equity and transparency for all key social protection interventions.	1.2.1 Review the existing Social Protection interventions (to rationalize, merge, reduce or expand) and re-define their target populations as part of a harmonized Framework.	1.2.1.1 Reinstate the Social Protection Network (SPN/ Board).	1.2.1.1 Social Protection network established and Case management approaches, targeting, recertification and registration mechanisms streamlined and adjusted.	1.2.1.1 (a) SOPs for case management approaches established.	1.2.1.1 (a) Harmonised approach to case management for social protection agencies support efficient service delivery.	1.2.1.1 (a) No. agencies with updated SOPs.	Stakeholders MoEq MoH
				1.2.1.1 (b) SOPs for Registration and recertification of beneficiaries established.	1.2.1.1 (b) Standardized approach to Registration and recertification of beneficiaries adopted.	1.2.1.1 (b) # of agencies utilizing standardized approach and availability of up to date Database with beneficiary information	MoEq

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	1.2.2 Selection criteria for social assistance reviewed,	1.2.2.1 Establish the Inter-Ministerial Committee (IMC) on Social	1.2. 2.1 Number of meetings held; # of participants.	1.2.2.1 (a) Availability of Minutes of Meetings of IMC.	1.2.2.1 (a) Fully Functioning IMC	1.2.2.1 Number of agencies participating and contributing to	МоЕq МоН
	clarified, adjusted and harmonized.	Protection (a Sub-Committee of the Social Reform Council.		1.2.2.1 (b) Key decisions taken at meetings are documented and acted upon.	1.2.2.1 (b) commendations and support are reinforced by committee's activities and decisions to SP service providers.		
		1.2.2.2 Objectives and roles of the IMC are defined and established.	1.2.2.2 IMC provides change management oversight for harmonisation of social service delivery system.	1.2.22 No. of agencies engaged in reform.	1.2.2.2 Integrated social service delivery mechanisms implemented/ operationalised	1.2.2.2 Number of IMC reports on progress towards and outcomes of harmonisation of service delivery	MoEd
		1.2.2.3 Develop codes of conduct, supporting legislation etc. for Network and Committee.	1.2.2.3 Administrative and implementation structures have the capacity to implement the programmes in a coherent, efficient and effective way.	1.2.2.3 ToRs, Codes of Conduct, Legislation documents.	1.2.2.3 Operations of service delivery agencies informed by ToR, Codes of Conduct and Legislation.	1.2.2.3 Number of agencies adopting and adhering to code of conduct, etc.	MoEq MoH MoEd

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.2.2.4 Oversee harmonisation of registration mechanisms.	1.2.2.4 Homogeneous training procedures, instruments and processes for delivering quality services for flagship Programmes.	1.2.2.4 (a) Training manuals.	1.2.2.4 (a) Manuals adopted and inform programme targeting and quality service delivery.	1.2.2.4 (a) Percentage of poor and vulnerable population covered by the Social Protection System.	
		1.2.2.5 Oversee adjustment of case management approaches.	1.2.2.5 Clearly defined processes and instruments for case managers involved in the implementation of the flagship Programmes.	1.2.2.4 (b)7Revised SoPs.	1.2.2.4 Case management services enhanced.	1.2.2.4 Number of agencies adopting new case management procedures.	
		1.2.2.6 Oversee the linking of operation manuals.	1.2.2.6 Manuals integrating activities (workshops and consultancies).	1.2.2.6 Number of integrated Manuals.	1.2.2.6 Manuals enable integrated service delivery and case management approaches.	1.2.2.6 No. of updated manuals in use.	
		1.2.2.7 Oversee establishment of referral systems (priority access support-based services and social intermediation services.)	1.2.2.7 Referral processes outlined in operation manuals.	1.2.2.7 Number of agencies updating manuals to include referral procedures.	1.2.2.7 Agencies adopt and implement referral systems.	1.2.2.7 No. of agencies adopting and implementing referral systems.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	1.2.3 Increase objectivity and transparency of the beneficiary selection and registration processes for all key Social Protection interventions.	1.2.3.1 Based on the initial design of the SL-NET (St Lucia's Proxy Means Test), implement the already developed Road Map for the development of a Common Targeting Mechanism (CTM), including its pilot	1.2.3.1 (a) A more efficient, transparent and effective targeting mechanism for the main Social Protection interventions in place.	1.2.3.1 (a) Number of SP agencies utilizing the SLNET for access to SP interventions	1.2.3.1 (a) # SP agencies achieve increase transparency and demonstration of increased objectivity and reduced exclusion	1.2.3.1 Number of planned Social Protection interventions utilizing the Common Targeting Mechanism (CTM) and Single Registry (SR) to select	MoH MoEq MoEd NGOs
		process.			1.2.3.1 (b) Social Protection agencies adopt and utilizing the CTM and increased sharing among collaborating SP agencies (inclusive of NGOs, etc.)	and record their beneficiaries.	
					1.2.3.1 (c) Increase in the number of applicants being approved or non-approval utilizing the SL-NET mechanisms.		
			1.2.3.1 (b) Reduced inclusion and exclusion errors in key Social Protection interventions.	1.2.3.1 (b) Reports on # of beneficiaries approved using the Single Registry.	1.2.3.1 (b) Availability of data as Evidence of % of reduced errors of inclusion and exclusion.	1.2.3.1 # of errors recorded and details shared among agencies	MoH MoEq MoEd NGOs

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.2.3.2 Create a National Social Protection Appeals Board (NSPAB) to review reported cases on selection and registration of Social Protection interventions´ beneficiaries.	1.2.3.2 A National Social Protection Appeals Board established with ToRs and official mandate.	1.2.3.2 (a) # of meetings convened by the Board.	1.2.3.2 Appeals board review reported cases and % increase in messages to beneficiaries and agencies.	1.2.3.2 (a) Percentage of beneficiaries of key Social Protection interventions that are not among eligible households according to the adjusted SL-NET and the relevant threshold for a particular programme.	MoH MoEq MoEd NGOs
				1.2.3.2. (b) Minutes of meetings of the NSPAB and outcomes documented		1.2.3.2 (b) Number of appeals registered with the Board and number of appeals dealt with.	
	1.2.4 Development of a Communication Plan	1.2.4.1 Staff of Social Protection Agencies are trained in utilizing the communication plan.	1.2.4.1 # of SP agencies utilizing communication plan to sensitize beneficiaries	1.2.4.1 No. of public sensitization messages sent out by each programme.	1.2.4.1 Increased public awareness on SP agencies, their services and interventions	1.2.4.1 Assessment of public knowledge and awareness of SP agencies and programmes.	MoH MoEq MoEd NGOs

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
1.3 Establish effective coordination mechanisms at all government levels and across sectors and organizations.	1.3.1 Strengthen coordination between government and non- government agencies involved in Foundational and Adaptive Social Protection provisions.	1.3.1.1 Policy level: undertake actions to ensure that SP and ASP policies are coherent and complement each within and across social protection functions/life- cycle avoiding duplication, gaps and inefficiencies and where appropriate also establishing links to other relevant sectors (e.g. health, education, agriculture, commerce etc.)	1.3.1.1 Coherent and complementary FSP and ASP policies and links are established within and across social protection functions / life cycle.	1.3.1.1 Number of policies integrated within and across social protection functions / lifecycle areas.	1.3.1.1 Greater efficiencies realized within and across sectors.	1.3.1.1 Number of links established within and across sectors.	MoEq NEMO
		1.3.1.2 Policy level: Put in place clear and detailed legal provisions, strategies and related institutional arrangements to ensure coordination, integration, and complementarity across the social protection sector (clear, shared priorities) including planning and resourcing.	1.3.1.2 Clear and detailed provisions, strategies and arrangement are established to ensure coordination, integration and complementarity across the social protection sector.	1.3.1.2 Number of provisions, strategies, and institutional arrangements, clear priorities, plans and resources acquired.	1.3.1.2 Enhanced institutional arrangements within and across social sectors.	1.3.1.2 Number of MoUs established within and across sectors.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.3.1.3 Policy level: Put in place mechanisms and procedures to ensure coherence and mutual accountability within the social protection sector and other sectors.	1.3.1.3 Mechanisms and procedures are in place to ensure coherence and accountability within the social protection sector and other sectors.	1.3.1.3 MoU operationalized.	1.3.1.3 Coherence and mutual accountability enhanced.	1.3.1.3 Audit reports and recommendations on coherence and accountability.	
		1.3.1.4 Programme Level: Undertake actions to ensure that existing programmes are well aligned to overall policy in social protection and there is a recognized, functional coordination unit.	1.3.1.4 Existing programmes are well aligned and a coordination unit is established.	1.3.1.4 (a) Programme document outlining alignment. 1.3.1.4(a) Reports on the work of the Coordination Unit.	1.3.1.4 Greater alignment of existing programmes with social protection policy.	1.3.1.4 Reports and recommendations.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.3.1.5 Administrative Level: Act to ensure that roles and responsibilities are defined through formalized processes for linking (SOPs, protocols of co- operation) and there is systematic backing in OMs, service standards, SOPs which are comprehensive.	1.3.1.5 Roles and responsibilities are defined and formalized and there is systematic backing in other key document (e.g. OMs, SOPs etc.).	1.3.1.5 Alignment of key documents outlining roles and responsibilities.	1.3.1.5 Enhanced administration of social protection services.	1.3.1.5 Increased levels of satisfaction among beneficiaries.	
		1.3.1.6 Administrative Level: Develop a network of social workers with case management as standard practice.	1.3.1.6 Network of social workers established.	1.3.1.6 Social workers involved in standard case management practice.	1.3.1.6 Improved approaches to standard case management practice.	1.3.1.6 Number of cases utilizing case management standard practice.	
		1.3.1.7 Build multi- disciplinary teams to work together in needs assessment and development of programmes / services.	1.3.1.7 Multi- disciplinary Team established.	1.3`1.7 Number of meetings held by the Team.	1.3.1.7 Greater collaboration in production of needs assessment reports.	1.3.1.7 Utilization of assessment reports.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	1.3.2 Establish effective co- ordination between FSP and DRM agencies, government and non- government actors, and vertically at various levels of government.	1.3.2.1 Develop and operationalize MoUs between and among sectors horizontally and vertically.	1.3.2.1 MoUs developed at vertical and horizontal levels within and among key FSP providers (government and non- government) and DRM agencies (e.g. NEMO)	1.3.2.1 Number of MoUs signed.	1.3.2.1 More effective coordination between FSP and ASP Agencies and providers.	1.3.2.1 Real time adaptive response.	
		1.3.2.2 Establish information sharing between SP and DRM agencies to ensure risk-informed and risk responsive SP programs and services are considered.	1.3.2.2 Information sharing mechanisms in place.	1.3.2.2 Frequency of information sharing between SP and DRM agencies.	1.3.2.2 Collaborative practices among SP and DRM agencies	1.3.2.2. Reports on collaborative practices. Evidence of Information sharing among agencies.	MoEq NEMO
		1.3.2.3 Undertake ex-ante and ex- post assessment of SP and ASP initiatives to determine their appropriateness in responding to different risk scenarios.	1.3.2.3 Ex-ante and ex-post assessments of SP and ASP initiatives.	1.3.2.3 Ex ante and ex-post assessment reports.	1.3.2.3 SP and ASP Programming adaptable and adjustable to different risks.	1.3.2.3 Reports on adjustments made in response to risks.	MoEq

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.3.2.4 Develop contingency capacity to perform the activities envisioned such as back-up delivery mechanisms, and fulfilment of stand- by agreements with services providers.	1.3.2.4 Contingency capacity plan developed.	1.3.2.4 No of personnel and activities in place to undertake contingency.	1.3.2.4 Adaptive capacity to deliver SP response functioning optimally.	1.3.2.4 Reports on activities outlined in the capacity plan.	MoEq NEMO
		1.3.2.5 Develop accompanying systems such as PDHA arrangements for assessing post- disaster household needs and data sharing across sectors to inform different sector responses.	1.3.2.5 Accompanying systems developed.	1.3.2.5 Number of reports on accompanying activities.	1.3.2.5 Accompanying response systems operational across all sectors.	1.3.2.5 Availability of Periodic reports on Sectoral response systems.	MoEq NEMO
		1.3.2.6 Continue the ongoing transition to electronic payments, and develop multiple options to facilitate choice depending on post-shock contexts.	1.3.2.6 Transition to electronic payment is on- going.	1.3.2.6 Transition to electronic payment is on- going.	1.3.2.6 Increase in payments by electronic means.	1.3.2.6 Electronic payment system fully operational.	MoEq MoF

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
1.4.: Strengthen the institutional capacity of key Social Protection institutions and agencies to increase	1.4.1 Undertake institutional assessments and develop Capacity Building Plans (CBPs) for all	1.4.1.1 Undertake institutional assessments and develop Capacity Building Plans (CBPs) (in respect of	1.4.1.1 Social Protection agencies and institutions have full complement of resources required and are	1.4.1.1 (a) % Increase of agencies programmes and projects successfully implemented	1.4.1.1 Institutional capacity of SP institutions and agencies strengthened (Human resource and	1.4.1.1 Biannual Assessment of service delivery and client contact of SP agencies and institutions	MoH MoEq MoEd NGOs
efficiency and effectiveness in policy and programme design and implementation.	major Social Protection interventions and agencies.	human resources, infrastructure, systems and equipment requirements).	strengthened for more efficient and effective service delivery.	1.4.1.1 (b) % increase in client service delivery	service delivery)		
	1.4.2 Develop a Capacity Building Plan (CBP) to strengthen the M&E and research for Social Protection.	1.4.2.1 (a) Develop a Social Protection M&E and Research Capacity Building Plan (CBP)	1.4.2.1 The capacity of the CSO to coordinate Social Protection Research and M&E activities and functions and providing the necessary	1.4.2.1 Availability of M&E and Research, CBP	1.4.2.1 (a) Utilization of CBP and relevant reports for decision making in SP policy programmes and activities and quality assurance	1.4.2.1 (a) # of Decisions made based on reports on CBP and M&E reports by SP agencies and institutions	МоН МоЕq
		1.4.2.1 (b) Data through the CSO (Central Statistics Office)	support to the Social Protection agencies and institutions is strengthened and scaled up.		1.4.2.1 (b) Sharing of M & E reports (findings) among SP agencies and institutions	1.4.2.1 (b) Data through the CSO (Central Statistics Office)	MoE CSO NGOs

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.4.2.2 Identify and undertake regular M&E and evidence- based trainings for key technicians, policy makers and program managers.	1.4.2.2 The capacity of key technicians, policy makers and programme managers to utilize relevant evidence-based information for policy and programme decision making is strengthened and scaled up.	1.4.2.2 # of Key technicians, policy makers and programme managers trained in utilizing relevant evidence-based information in decision making.	1.4.2.2 Increased utilization of data to develop and expand RBM tools in decision making.	1.4.2.2 # of activities and programmes provided by SP agencies utilizing a RBM framework increased.	SP Agencies MoH MoEq MoEd NGOs
		1.4.2.3 Plan and implement timely budgetary reviews, and operational and financial audits.	1.4.2.3 The capacity to plan and implement timely budgetary reviews, and operational and financial audits is strengthened and scaled up.	1.4.2.3 # of trained personnel to undertake SP budgetary review, operational and financial audits.	1.4.2.3 (a) increased efficiency and effectiveness in policy and programme design and implementation.		MoH MoEq MoEd NGOs
1.5: Develop integrated and interoperable social protection information systems, with strategies for ensuring data quality checks and capacity building for use of quality data.	1.5.1 Design and develop a Management Information System (MIS) to work as Single Registry (SR) for all key Social Protection Interventions.	1.5.1.1 (a) Develop TOR and Request for Proposal Documents (with clear technical requirements and specifications, selected procurement mechanisms, and scoring methods) for the development of a Management Information System (MIS) to work as SR, following the CTM's processes, methods and data requirements.	1.5.1.1 (a) TOR and Request for Proposals Documents developed and circulated.	1.5.1.1. (a) # Responses to Request for Proposal documents received and shortlisted.	1.5.1.1. (a) Selection of consultant for MIS.	1.5.1.1 (a) MIS System is developed and functioning as a Single Registry	MoEq

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.5.1.1 (b) Training of SP Service Providers in use of SP MIS.	1.5.1.1 (b) # of training sessions conducted across SP service providers.	1.5.1.1 (b) # of SP providers trained	1.5.1.1 (b) Better trained SP providers	1.5.1.1 (b) Training provided to SP providers utilized	МоЕq
		1.5.1.1 (c) Establish nation-wide unique IDs and digital registries	1.5.1.1 (c) # of training sessions conducted across SP service providers in the use of SP MIS	1.5.1.1 (c) # of SP providers trained	1.5.1.1 (c) Better trained SP providers	1.5.1.1 (c) Training provided to SP providers utilized	
		1.5.1.1. (d) Develop protocols and mechanisms for data sharing and data protection within and between the SP and DRM sectors, to make program designs and operations more risk informed and to enhance coordination.	1.5.1.1 (d) Nation-wide unique IDs and digital registries established	1.5.1.1 (d) Number of nation-wide IDs created and registries established	1.5.1.1 (d) SP MIS Utilization, Integration, and operationalize across and among SP Service Providers for intended purposes.	1.5.1.1 (d) # of SP programmes utilizing Information Systems	
		1.5.1.1 (e) Put mechanisms in place for frequent data updates in order to ensure that the data is current, relevant and of good quality.	1.5.1.1 (e) Protocols and mechanism for data sharing established between SP and DRM sectors.	1.5.1.1 (e) MoUs	1.5.1.1 (e) Information systems supporting SP programmes improved	1.5.1.1 (e). Quality data from SP MIS available and utilized.	_

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.5.1.1 (f) Document and update key operational processes where outdated or absent (e.g. updating operations manuals etc.), and developing objective and transparent methods for program outreach, eligibility determination, beneficiary selection, electronic payment delivery etc.	1.5.1.1 (f) Mechanisms for frequent data updated in place.	1.5.1.1 (f) Reports on updated data.	1.5.1.1 (f) Coordination enhanced and operations of programmes adhering to risk guidelines and mechanisms established.	1.5.1.1 (f) Availability of periodic reports on coordination of data sharing.	MoEq
		1.5.1.1 (g) Establish information sharing between SP and DRM agencies to ensure risk-informed and risk responsive SP programs and services.	1.5.1.1 (g) Operational processes documented and updated.	1.5.1.1 (g) Number of revised and updated operational processes.	1.5.1.1 (g) Availability of current and relevant data on foundational SP programmes	1.5.1.1 (g) Frequency of updates and Accessibility of data	
			1.5.1.1 (gg) Information sharing mechanisms in place.	1.5.1.1 (gg) Frequency of information sharing between SP and DRM agencies.	1.5.1.1 (gg) Delivery mechanisms and operational processes for SPIS are adaptable	1.5.1.1 (gg) Periodic reports on SP delivery mechanisms and operational processes engaged	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
					1.5.1.1 (ggg) Collaborative practices among SP and DRM agencies	3.1.1.1 (ggg) Reports on collaborative practices Evidence of Information sharing among agencies	
		1.6.1.1 Implement the M&E and Research Capacity Building Plan.	1.6.1.1 Implementation Plan being rolled out with participation from key professionals in CSO's and other relevant agencies.	1.6.1.1 (a) M & E Implementation plan adopted 1.6.1.1 (aa) Research Capacity Building Plan adopted.	1.6.1.1 Capacity building training undertaken # of persons trained.	1.6.1.1 Number of capacity building sessions planned vs actual undertaken.	
1.6 Develop M&E systems for all Social Protection interventions and ensure the effective implementation of redress mechanisms as well as the efficient utilization of data, results and findings.	1.6.1 Design and develop respective M&E and research plans to include identification of all key social protection interventions and ensure availability of documented criteria for access to various SP services.	1.6.1.2 Develop specific research plans, and Monitoring and Evaluation (M&E) Systems for improved evidence-based decision-making processes for all key Social Protection interventions.	1.6.1.2 (a) The main Social Protection interventions utilize a unified and efficient Beneficiary / Social Registration mechanism.	1.6.1.2 Research Plans developed.	1.6.1.2 Data available on beneficiaries.	1.6.1.2 Percentage of total Social Protection beneficiary households that benefit from more than one (1) key Social Protection intervention (as established in the Social Protection Framework) through the SR. To be disaggregated by geographic area.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
			1.6.1.3 Poor and vulnerable households benefit from more than one Social Protection intervention	1.6.1.3 Increase in the number of (eligible) beneficiaries within household.	1.6.1.3 (a) More means tests undertaken.	1.6.1.3 Number of key Social Protection interventions with a functional M&E System that produces	
			(as established in the Social Protection Framework) through the SR where appropriate.		1.6.1.3 (aa) Increase in budgetary allocations for new and revised Social protection programmes	quarterly reports and utilizes them for day-to-day decision making (documented in quarterly reports and Agency minutes).	
	1.6.2 Develop specific research plans, and Monitoring and Evaluation (M&E) Systems for improved	1.6.2.1 Develop a Social Sector Data Collection Action Plan (in line with the CARICOM / OECS Regional Working Plan).	1.6.2.1 Systematic production of pertinent M&E data, research and analysis for Social Protection policy and	1.6.2.1 Number of survey instruments designed and administered. Number of new (potential)	1.6.2.1 Improved service delivery.	1.6.2.1 (a) Percentage increase of beneficiaries in the national beneficiary registry.	
	evidence-based decision-making processes for all key Social Protection interventions.		programming decision making.	beneficiaries targeted.		1.6.2.1 (aa) Increase in contact hours of Welfare Officers with clients (beneficiaries).	
		1.6.2.2 Regularize the production of poverty assessments and situation analysis.	1. 6.2.2 Production of schedule for M&E Plans at 3-year intervals.	1.6.2.2 Inclusion of research programme as cost centre in the budget of Ministry of Equity.	1. 6.2.2 Training workshops for enumerators/ data. collection. Improvements in the quality of life of beneficiaries	1. 6.2.2 Schedule for production of assessment reports at regular intervals. Production of trend analyses, and appropriate remedial action plan where necessary.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		1.6.2.3 Develop the M&E frameworks and systems for each key social protection intervention.	1.6.2.3 Terms of reference / mandates for each intervention.	1.6.2.3 (a) Number of internal review meetings by staff, Ministry of Equity.	1.6.2.3 Endorsement by Cabinet of revised Social Protection Policy and	1.6.2.3 Lower dependency ratios. Decrease in the burden of care by families and policy	
				1.6.2.3 (aa) Number of presentations by consulting team to social partners.	Implementation plan.	makers.	
		1.6.2.4 Develop and implement comprehensive Reporting Mechanisms to disseminate the findings from the Research exercises and the M&E Systems to the respective users and audiences.	1.6.2.4 Completed training workshops, consultations; developed reporting format.	1.6.2.4 Number of trainees, from Non- Government Organizations; and Public and private sectors.	1.6.2.4 Increase in staff motivation; grater worker/ client interface; heightened public awareness of provisions of the Social Protection Policy	1.6.2.4 (a) Number of high- quality reports produced by reporting mechanism(s). number of persons trained to produce these reports. 1.6.2.4 Appropriate hardware and software acquired for this purpose.	
						1.6. 2.4 (aa) Timely production and dissemination of the reports.	

### Priority Area 2:

### Reform and Strengthen Interventions for Protection and Equity

Strategic Objective: Alleviate economic, social, and environmental deprivation among citizens including relief from chronic and extreme poverty, as well as economic and environmental shocks.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
2.1: Review, harmonize, and strengthen the existing poverty and vulnerabilities reduction interventions (such as cash transfer, feeding and housing programmes).	2.1.1 Harmonize PAP and Koudmein, School Feeding, Social Care, and ALMP service delivery.	2.1.1.1 Clearly define the services provided by the PAP and Koudmein, School Feeding, Social Care, and ALM Programmes.	2.1.1.1. Services provided by the PAP and Koudmein, School Feeding, Social Care, and ALM Programmes are clearly defined.	2.1.1.1 (a) Approved official written agreement on services to be delivered by PAP, Koudmein, School Feeding, Social Care and ALM Programmes.	2.1.1.1 (a) MoU established between services stakeholders.	2.1.1.1 (a) Number of MoUs established between service stakeholders.	MoEq.
				2.1.1 (b) Processes defined and instruments developed for referral and joint service delivery between Programmes.	2.1.1.1 (b) Enhanced integration and harmonization of service delivery.	2.1.1.1 (b) OM outlining defined processes and instruments for referral and joint service delivery between Programmes.	
		2.1.1.2 (a) Select a secure and efficient cash payment service provider.	2.1.1.2 (a) A secure and efficient cash payment service provider selected.	2.1.1.2 (a) Cash payment service providers always available and providing service.	2.1.1.2 (a) Increase in timely payments of cash transfers.	2.1.1.2 (a) Less complaints from beneficiaries of cash transfer payments.	MoEq.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		2.1.1.2 (b) Define convergence and divergence between PAP and Koudmein services and establish processes and instruments for referral and joint service delivery.	2.1.1.2 (b) Processes defined and instruments developed for referral and joint service delivery between PAP and Koudmein Programmes.	2.1.1.2 (b) Number of beneficiaries jointly benefitting from provisions under PAP and KSL.	2.1.1.2 (b) Greater converge between PAP and KSL.	2.1.1.2 (b) More eligible persons are covered under PAP and KSL.	
		2.1.1.2 (c) Utilize existing MIS to harmonize service delivery.	2.1.1.2 (c) The MIS supports roll-out and scale-up processes for protective SP initiatives.	2.1.1.2 (c) Supporting roles are clearly activated.	2.1.1.2 (c) Enhanced service delivery	2.1.1.2 (c) Increased beneficiary satisfaction	
2.2 Develop strategies that expand coverage of protective social assistance programmes, particularly of the poor, and scale up/ improve benefit adequacy.	2.2.1 Expand coverage and adequacy of social assistance programmes.	2.2.1.1 (a) Develop agreements between PAP, Koudmein and other Social Protection interventions to ensure coordination and referral mechanisms.	2.2.1.1 (a) Clear referral and joint delivery mechanisms developed and implemented regularly with other Social Protection interventions.	2.2.1.1 (a) Percentage of Koudmein beneficiaries that benefit from PAP's services (review against defined targets). To be disaggregated by geographic area.	2.2.1.1 (a) Enhanced coordination and referral systems.	2.2.1.1 (a) Number of agreements developed between PAP, KSL and other SP interventions.	Relevant State and Non-State actors.
		2.2.1.1 (b) Enhance the pro-poor, gender-responsive and child sensitive focus of the PAP and Koudmein Programmes	2.2.1.1 (b) The PAP and Koudmein Programmes utilize a more objective, pro- poor, gender and child sensitive targeting mechanism.	2.2.1.1 (b) (Approved official written agreement on services to be delivered by PAP, Koudmein, School Feeding, Social Care and ALM Programmes.	2.2.1.1 (b) Enhanced pro-poor and gender- responsive, and child-sensitive focus of the PAP and KSL.	2.2.1.1 (b) Number of actions taken that facilitate pro- poor, gender- sensitive, and child sensitive approach to provisioning of PAP and KSL.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
				2.2.1.1 (bb) Percentage increase in Koudmein beneficiary households that is classified as extremely poor (according to the adjusted SLNET and other poverty indicators). To be disaggregated by geographic area.	2.2.1.1 (bb) Enhanced pro-poor and gender- responsive, and child-sensitive focus of the PAP and KSL.		
				2.2.1.1 (bc) Percentage increase in PAP beneficiary households that have children under 18 years old.	2.2.1.1 (bc) Enhanced pro-poor and gender- responsive, and child-sensitive focus of the PAP and KSL.		
				2.2.1.1 (bd) Percentage increase in Koudmein beneficiary households that have children under 18 years old.	2.2.1.1 (bd) Enhanced pro-poor and gender- responsive, and child-sensitive focus of the PAP and KSL		
		2.2.1.1 (c) Ensure that existing obstacles related to beneficiary selection identified by the PAP and Koudmein Programmes are overcome with the development of the Single Registry.	2.2.1.1 (c) Single Registry of beneficiaries developed and operational.	2.2.1.1. (c) List of beneficiaries under PAP and KSL available in Registry.	2.2.1.1 (c) Enhanced and improved beneficiary selection processes.	2.2.1.1 (c) The poorest and most vulnerable households eligible for PAP and KSL covered by two interventions.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		2.2.1.1 (d) Re- define the target population for the most common emergency response needs and increase the transparency and equity of the selection processes and criteria	2.2.1.1 (d) Clearly defined target population for the most recurrent emergency and disaster situations established.	2.2.1.1 (d) Targets identified in OMs	2.2.1.1 (d) Improved targeting of households for ASP.	2.2.1.1 (d) Number of affected vulnerable persons / households receiving assistance during each emergency situation.	
		2.2.1.1 (e) Review the criteria selection for PAP and Koudmein and consider prioritizing poor sole parent households as part of the development of the CTM.	2.2.1.1 (e) Revised criteria for selection PAP and Koudmein interventions established.	2.2.1.1 (e) List of selection criteria outlined in OMs and SoPs.	2.2.1.1 (e) Enhanced transparency in selection of beneficiaries.	2.2.1.1 (e) Number of sole-parents households selected based on revised eligibility criteria established.	
		2.2.1.1 (f) Review contributory cash transfer benefit adequacy to facilitate ability of households to adapt in the event of a crisis or shock.	2.2.1.1 (f) Revised contributory cash transfer benefit.	2.2.1.1 (f) Increase in cash transfer benefit.	2.2.1.1 (f) Improve ability to adapt in the event of a crisis or shock.	2.2.1.1 (f) Access to goods and services post disaster	
		2.2.1.1 (g) Review non-contributory cash transfer benefit adequacy to facilitate ability of households to adapt in the event of a crisis or shock.	2.2.1.1 (g) Revised non-contributory cash transfer benefit.	2.2.1.1 (g) Increase in cash transfer benefit.	2.2.1.1 (g) Improved ability to adapt in the event of a crisis or shock.	2.2.1.1 (g) Access to goods and services post disaster	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
2.3 Develop, reform and strengthen social assistance to include adequate housing assistance and complementary	2.3.1 Strengthen the housing and basic services programmes for the poor and vulnerable population.	2.3.1.1 (a) Create a temporary Inter- sectoral Task Force to analyse the housing and basic services situation for the poor and vulnerable in Saint	2.3.1.1 (a) Inter-sectoral Task Force established.	2.3.1.1 (a) Analytical reports with recommendations on integration.	2.3.1.1 (a) MoU established between public housing and other housing services stakeholders.	2.3.1.1 (a) Number of joint interventions undertaken among stakeholders.	Dept. of Housing
services (including utilities, internet, Water and Sanitation) for the indigent, poor and at risk		Lucia and define integration, joint collaboration and coordination mechanisms between the various housing and basic services stakeholders.		2.3.1.1 (aa) Joint collaboration between various actors in the housing market.	-		Dept. of Infrastructure MoH
		2.3.1.1 (b) In line with the Housing Policy (2008) establish effective mechanisms for financing low-income households.	2.3.1.1 (b) Financing mechanisms for low income households rolled out.	2.3.1.1 (b) No. of low-income households which have accessed the financing mechanism.	2.3.1.1. (b) Increase access to low income housing.	2.3.1.21. (b) Number of beneficiaries accessing low income housing and utilities / amenities.	
	2.3.1.1 (c) Review, clarify, adjust and harmonize the selection criteria, benefits and conditions for existing programmes that can support poor and vulnerable households in a more systematic and transparent way in respect of housing and basic services.	2.3.1.1 (c) Selection criteria reviewed, clarified, adjusted and harmonized.	2.3.1.1 (c) Reports and recommendations.	2.3.1.1 (c) Incentives created for access to housing programmes.	Number of beneficiaries accessing low income housing and utilities /	MoF	
		can support poor and vulnerable households in a more systematic and transparent way in respect of housing and basic	2.3.1.1 (c) Package of benefits and conditions for existing housing programmes established.				

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		2.3.1.1 (d) Explore the possibility utilizing the Common Targeting Mechanism (CTM) to select beneficiary households for Safe and Decent Housing interventions	2.3.1.1 (d) Concept Note on utilizing the CTM to select households for safe and decent housing interventions.	2.3.1.1 (d) Reports and recommendations.	2.3.1.1 (d) CTM adopted and operationalized.	2.3.1.1 (d) Number of beneficiaries based on CTM.	
		2.3.1.1 (e) Define mechanisms to periodically monitor and assess programmes' performance and changing safe and decent housing needs, and react accordingly.	2.3.1.1 (e) Mechanisms defined to monitor and assess programmes' performance.	2.3.1.1 (e) Reports and recommendations.	2.3.1.1 (e) Safe and decent housing needs identified and incorporated in housing plans and programmes.	2.3.1.1 (e) Number of adjustments facilitated based on needs identified by assessments.	
		2.3.11 (f) Define effective dissemination and communication mechanisms for the Safe and Decent Housing interventions and regulations.	2.3.1.1 (f) Mechanisms defined.	2.3.1.1 (f) Communication strategies and products. 2.3.1.1 (ff) Reports and recommendations.	2.3.1.1 (f) Increased awareness of interventions in safe and decent housing programmes and regulations.	2.3.1.1 (f) Survey results of knowledge and awareness of safe and decent housing interventions.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
2.4 Develop, reform and strengthen the emergency housing interventions for the poor, vulnerable and at risk (Disaster Assistance Programmes)	2.4.1 Strengthen emergency housing and basic services programmes for the poor and vulnerable population.	2.4.1.1. Review the Housing Emergency Policy and adjust the provisions to ensure the construction of houses in the aftermath of disasters and assist households in replacing their damaged goods. The revision includes eligibility criteria, nature and amount of Emergency Housing Assistance, procedures, inspection and monitoring, reconstruction, insurance and relocation issues, among others.	2.4.1.1 Emergency Housing Policy reviewed.	2.4.1.1 Reports and recommendations.	2.4.1.1 Enhanced provisioning for emergency housing.	2.4.1.1 Number of emergency housing units provided.	
		2.4.1.2 Undertake an assessment of the existing emergency response services and interventions.	2.4.1.2 Clearly defined emergency services and interventions for the most recurrent emergency and disaster situations.	2.4.1.2 Approved list of emergency services and interventions for the most recurrent emergency and disaster situations.	2.4.1.2 Emergency response services enhanced.	2.4.1.2. Increase in the number of responses to emergencies.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		2.4.1.3 Define which of the existing Social Protection programmes could be quickly and temporarily scaled-up to respond to emergency situations.	2.4.1.3. Existing programmes which could be quickly scaled up to respond to emergency situations identified and defined.	2.4.1.3 Preparedness, response, and recovery plans in place.	2.4.1.3 Agencies and communities are aware of the plans in place for emergency response.	2.4.1.3 Number of emergencies effectively and efficiently responded to in real time	
		2.4.1.4 Define coordination mechanisms among the emergency response agencies and interventions.	2.4.1.4 Strengthened, efficient and effective emergency response agencies.				
		2.4.1.5 Develop Capacity Building Plans (CBPs) for the emergency response agencies and interventions.	2.4.1 5 More informed and prepared actors for recurrent emergency situations.	2.4.1.5 Capacity Building plans in place.	2.4.1.5 Enhanced capacity within emergency response agencies.	2.4.1.5 No. of actors prepared for recurrent emergency situations.	
		2.1.4.6 Develop an M&E Framework and System to assess the performance of the emergency response agencies and interventions.	2.4.1.6 M & E System developed and functioning.	2.4.1.6 Criteria for performance established against which reports are provided.	2.4.1.6 Enhance M & E Framework and System to assess performance of the emergency response and interventions.	2.4.1.6 More informative and detailed assessment reports.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		and implement i	2.4.1.7 Strategy in place and is operational.	n place and is sessions held by	2.4.1.7 Enhanced awareness of emergency preparedness protocols and increased response capability.	2.4.1.7 Number of communication protocols developed and disseminated.	
				2.4.1.7 No. of public sensitization messages sent out by each sector.			
		2.4.1.8 Undertake Post-Disaster Household Assessment (PDHA).	2.4.1.8 Reports on PDHA.	2.4.1.8 Information on number of households impacted by disaster and the nature of the impacts.	2.4.1.8 More accurate information available for response actions.	Number of response actions based on assessment.	
2.5 Expand and consolidate the provision of complementary measures and links to resilience.	complementary collaborative measures the respe- and links to line minis resilience are departme consolidated private se and sustained. agencies NGOs, FB	2.5.1.1 Explore, in collaboration with the respective line ministries/ departments, private sector agencies, NGOs, FBOs and Humanitarian	2.5.1.1 A more diversified programme mix with appropriate complimentary measures.	2.5.1.1 Number of complimentary measures attached to foundational SP programmes and to ASP Programmes.	2.5.1.1 Productive and economic interventions are well coordinated with other sectors.	2.5.1.1 Number of MoUs established.	
		entities various productive and economic interventions to support beneficiary households of cash transfer programmes (PAP and KSL).			25.1.1 Improved resilience among the poor and vulnerable.	-	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
2.6 Develop, reform and strengthen the interventions and regulations concerning family wellbeing, child protection, at risk youth, and gender-based violence support.	2.6.1 Ensure that national Law, policy and strategy concerning family well- being, child protection, at risk youth, and gender-based violence are up to date and fully operational.	2.6.1.1. Undertake a thorough review / assessment of existing national laws, policies and strategies pertaining to family well-being, child protection, at risk youth, and gender- based violence.	2.6.1.1 Review / assessment of existing national laws, policies and strategies pertaining to family well- being, child protection, at risk youth, and gender- based violence undertaken.	2.6.1.1 Report on gaps and shortcomings in existing national laws, policies and strategies pertaining to family well-being, child protection, at risk youth, and gender-based violence.	2.6.1.1 Revised laws, policies and strategies pertaining to family well- being, child protection, at risk youth, and gender-based violence.	2.6.1.1 Number of laws, policies and strategies pertaining to family well- being, child protection, at risk youth, and gender-based violence enacted / adopted and fully operational.	Attorney General Chambers MoEq Dept. of Youth MoH Dept. of Gender Affairs Key stakeholders
	2.6.2 Improve the efficiency and effectiveness of the flagship programmes (PAP, KSL, Child Disability, Social Care)	2.6.2.1 Review the Institutional Structure and Management Framework for the implementation of the flagship programmes.	2.6.2.1 The Institutional Structure and Management Framework for the implementation of the flagship programmes reviewed.	2.6.2.1 Reports on the review process and recommendations for improved efficiency.	2.6.2.1 (a) Enhanced efficiency and effectiveness of the flagship programmes. 2.6.2.1 (aa) Clear management and implementation structures for PAP Programme defined and implemented.	<ul> <li>2.6.2.1 (a)</li> <li>Improved</li> <li>delivery of social</li> <li>protection</li> <li>services.</li> </ul> 2.6.2.1 (aa) Number of management <ul> <li>and</li> <li>implementation</li> <li>structures put</li> <li>in place and</li> <li>operational.</li> </ul>	MoEq MoEd MoH Key Stakeholders

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	2.6.3 Acknowledge and fully incorporate non-state actors as legitimate and	2.6.3.1 Examine the current mandates and institutional arrangements between state and non-state providers of social	2.6.3.1 The current mandates and institutional arrangements between state and non-state providers of	2.6.3.1 Situation Analysis / SWOT / Gap Analysis Report outlining gaps, challenges, recommendations.	2.6.3.1 Greater synergies and integration of services between state and non-state providers of	2.6.3.1 (a) Number of MoUs established between state and non-state providers of FSP and ASP services.	MoEd Stakeholders – state and non-state.
	vital providers of FSP and ASP services.	protection.	social protection examined.		social protection	2.6.3.1 (aa) Consistent and adequate levels of support.	
	2.6.4 Develop and implement appropriate referral, graduation / exit strategies for different FSP interventions.	2.6.4.1 Determine which FSP interventions should be earmarked for graduation / exit.	2.6.4.1 The FSP interventions selected for graduation / exit have been clearly justified.	2.6.4.1 List of interventions identified for graduation / exit.	2.6.4.1. A Graduation / Exit Strategy developed for specific FSP interventions.	2.6.4.1 Number of persons who have graduated or exited Social Assistance programmes.	MoEq and other key public stakeholders / agencies Non-State / private and NGO stakeholders
		2.6.4.2 Develop a referral system to facilitate access	2.6.4.2 Referral system based on transparent	2.6.4.2 Referral system protocols incorporated in	2.6.4 2 Access to appropriate interventions by	2.6.4.2 (a) Number of referrals made.	MoEq and agencies MoH
		to appropriate interventions.	methods developed.	OMs and SoPs.	beneficiaries.	2.6.4.2 (aa) Appropriate linkages and two-way referral mechanisms between Ministries and among non- state social protection providers.	MoEd Stakeholders

## Priority Area 3:

## Rationalize, Reform and Strengthen Preventive / Promotive / Transformative Interventions and strategies, giving due consideration to ASP mainstreaming and capacity building.

Strategic Objective: Enhance the human capital, social capital, capabilities and physical assets of the poor and vulnerable.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
3.1 Define and enhance the pro-poor focus of health services, reduce barriers to access, support access to care services and ensure the financial sustainability of health and social care SP	3.1.1 Define the Universal and Health Assistance Services and improve the targeting mechanisms utilized by the public Health System.	3.1.1.1 Based on the health profile of the population in St Lucia, the infrastructure available and the human resource and financial capacities of the Public Health System, define which services and trootropy of the services and	3.1.1.1 (a) Services for universal health coverage clearly defined. 3.1.1.1 (aa) Targeted health	3.1.1.1 (a) List of services for universal health coverage. 3.1.1.1 (aa) List of services for	3.1.1.1 Enhanced pro-poor focus of health services	3.1.1.1 More eligible beneficiaries	MoH. MoEq and affiliated agencies. Private Sector Health Agencies and Institutions. Medical
social care SP provisions.		treatments are to have universal coverage and which ones are to be provided for free, as targeted Health Assistance Services.	assistance services clearly defined.	targeted health assistance.			Medical Educational Institutions.
		3.1.1.2 Define eligibility and selection criteria for the targeted Health Assistance Services.	3.1.1.2 Eligibility and selection criteria clearly defined.	3.1.1.2 List of eligibility and selection criteria.	3.1.1.2 Enhanced pro-poor focus of health services	3.1.1.2 More eligible beneficiaries receiving targeted health assistance services	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.1.1.3 Identify relevant variables to be included in the Common Targeting Mechanism (CTM) to select eligible households and individuals as beneficiaries of the targeted Health Assistance Services.	3.1.1.3 Variables to be included in CTM identified.	3.1.1.3 List of variables.	3.1.1.3 Enhanced pro-poor focus of health services	3.1.1.3 More eligible beneficiaries receiving targeted health assistance services	MoH, MoEq, Dep of Stats.
	3.1.2 Establish clear coordination and referral mechanisms between the Ministry responsible for Health and the Ministry leading the Social Protection Sector and between the other relevant state and non- state agencies.	3.1.2.1 Categorize cases for referral between the Ministry Responsible for Health and the Ministry leading the Social Protection Sector.	3.1.2.1 Mechanisms established and processes and instruments developed for categorization of cases for referral.	3.1.2.1 No. of cases categorized for referral between the responsible Ministries.	3.1.2.1 Enhanced coordination and clearer referral processes established between state and non-state agencies.	3.1.2.1 MoUs between state and non-state agencies / institutions.	MoH MoEq and allied agencies. Private Sector / Non- state health agencies. Medical Educational Institutions.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.1.2.2 Define processes and instruments for the implementation	3.1.2.2 Processes and mechanisms defined.	3.1.2.2 (a) No. of instruments and content prepared and used.	3.1.2.2 Enhanced coordination and clearer referral	3.1.2.2 MoUs between state and non-state agencies /	
		of the referral mechanisms.		3.1.2.2 (aa) Clear co-ordination and referral mechanisms between the Ministries and between these agencies and other relevant authorities in place.	processes established between state and non-state agencies.	institutions	
	3.1.3 Explore the possibility of including health variables as conditionalities for the delivery of cash subsidies.	3.1.3.1 (a)Identify strategic low performance health indicators and explore the viability of including them as conditionalities in the PAP Programme.	3.1.3.1 (a) Strategic low performance indicators and the viability of their inclusion as conditionalities in the PAP identified.	3.1.3.1 Reports and recommendations for consideration and implementation.	3.1.3.1 A reformed PAP providing targeted social assistance.	3.1.3.1 Improvement in selected health indicators.	MoEq and allied agencies (e.g., SSDF) MoF MoH
		If conditionalities are agreed, define the necessary design and implementation arrangements	3.1.3.1 (aa) Design and implementation arrangement defined.				

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.1.4 Develop and implement a Monitoring and Evaluation (M&E) Framework	3.1.4.1 Develop a Monitoring and Evaluation (M&E) Framework and System for the Health Assistance	3.1.4.1 M & E System developed and functioning.	3.1.4.1 Reports and no. of recommendations being implemented by policy makers	3.1.4.1 Up to date information on performance criteria.	3.1.4.1 (a) Number of programmes monitored and evaluated.	MoEq MoH Statistics Dept.
	and System for the Health Assistance services.	Services and Integrate the Health Assistance M&E System into the wider Health M&E System.		and programme managers.		3.1.4.1 (aa) Evidence of collaboration between key actors (MoEd, MoEq).	υ υ υ μι.
	3.1.5 Develop and implement a comprehensive Health Reform	3.1.5.1 Develop a comprehensive Communication Strategy for the Health Reform	3.1.5.1 Comprehensive Communication Strategy developed.	3.1.5.1 List of tactics in Communication Strategy applied by various actors and frequency.	3.1.5.1 Greater awareness of PAP reform by service providers and	<ul> <li>3.1.5.1 (a) No. of inquiries on PAP reform measures.</li> <li>3.1.5.1(aa) No. of communication messages dispatched over periods of time.</li> </ul>	МоЕq МоН
	Communication Strategy.	objectives, reach and adjusted regulations.			beneficiaries/ rights holders.		
		3.1.5.2 Ensure that adequate dialogue takes place between the MoH and the beneficiary households and the communities on the Health Assistance Services.	3.1.5.2 Constant dialogue.	3.1.5.2 No. of meetings held between beneficiaries and reports on meetings.	3.1.5.2 Enhanced participation of beneficiaries in the decision- making process.	3.1.5.2 Recommendations provided by beneficiaries.	MoEq MoH

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.1.6 Reform and strengthen interventions and regulations concerning care and support	3.1.6.1 Develop schemes, interventions and regulations concerning care and protection	3.1.6.1 Schemes, interventions and regulations established for the care protection of	3.1.6.1 No. of schemes and interventions developed and operational.	3.1.6.1 (a) Enhanced support to poor pregnant women and children 0 – 4.	3.1.6.1 Increase in number of poor pregnant women and children 0 – 4 receiving interventions.	MoF, MoEq, MoH, Ag Chambers, Dept. of Gender Relations,
	services across the life cycle.	for poor pregnant mothers and children 0 -4 years.	poor pregnant mothers and children 0 – 4 years.		3.1.6.1 (aa) State and non- state actors incorporate support to pregnant mothers and children 0 – 4 in their mandate.		Dept. of Labour, Dept. of Youth and Sports, in collaboration with the relevant NGO Sector Agencies, the private sector and other key stakeholders.
		3.1.6.2 Strengthen, develop, enforce and sustain interventions and regulations concerning child labour and other forms of abuse, and psycho-social support.	3.1.6.2 Interventions and regulations concerning child labour, other forms of abuse, and psycho- social support developed, strengthened, enforced and sustained.	3.1.6.2 Legal and other measures adopted and operational.	3.1.6.2 Enhanced measures to care and protect children.	3.1.6.2 Reduction in child abuse overall.	
		3.1.6.3 Strengthen, develop, enforce and sustain interventions and regulations concerning care and protection for adolescence and youth.	3.1.6.3 Interventions and regulations concerning adolescents and youth developed, strengthened, enforced and sustained.	3.1.6.3 Legal and other measures adopted and operational.	3.1.6.3 Enhanced measures to care and protect adolescents and youth.	3.1.6.3 No. of adolescents and youth in care and protection.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.1.6.4 Strengthen, develop, enforce and sustain interventions and regulations concerning care and protection for working age adults.	3.1.6.4 Interventions and regulations concerning working age adults developed, strengthened, enforced and sustained.	3.1.6.4 Legal and other measures adopted and operational.	3.1.6.4 Enhanced measures to care and protect working age adults.	3.1.6.4 No. of working age adults in care and protection.	
		3.1.6.5 Strengthen, develop, enforce and sustain interventions and regulations concerning care and protection for the elderly.	3.1.6.5 Interventions and regulations concerning the elderly developed, strengthened, enforced and sustained.	3.1.6.5 Legal and other measures adopted and operational.	3.1.6.5 Enhanced measures to care and protect the elderly.	3.1.6.5 No. of elderly in care and protection.	
		3.1.6.6 Strengthen, develop, enforce and sustain interventions and regulations concerning care and protection for PWDs.	3.1.6.6 Interventions and regulations concerning PWDs developed, strengthened, enforced and sustained.	3.1.6.6 Legal and other measures adopted and operational.	3.1.6.6 Enhanced measures to care and protect PWDs.	3.1.6.6 No. of PWDs in care and protection.	
	3.1.7 Propose ways to ensure the financial sustainability of health and social care provision.	3.1.7.1 Develop short, medium, and long-term plans / programmes based on priorities and strategic objectives taking into consideration recommendations pertaining to life- cycle.	3.1.7.1 Short, medium- and long-term plans based on priorities and strategic objectives developed.	3.1.7.1 Programme / project documents.	3.1.7.1 A more standardized approach to enhancing financial sustainability.	3.1.7.1 Number of plans and programmes / plans developed taking into consideration life-cycle recommendations.	MoF Key public stakeholders. Key non- state actors.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.1.7.2 Undertake financial forecasting in collaboration with MoF and other public providers of health and social care services.	3.1.7.2 Financial forecasts prepared.	3.1.7.2 Reports and recommendations.	3.1.7.2 A more strategic approach to financial health and social care provision.	3.1.7.2 Financial forecasts available to guide resource mobilization efforts.	MoF Consultants MoF Consultants Public sector personnel involved in
		3.1.7.3 Develop a Capacity Building Plan in financial resource mobilization and management for state and non- state agencies involved in the provision of health and social care services.	3.1.7.3 Capacity Building Plan developed.	3.1.7.3 Capacity Building Plan operational.	3.1.7.3 Enhanced capacity of finance personnel within the MoEq and other key Ministries and Departments to engage in financial forecasting.	3.1.7.3 Number of persons with enhanced knowledge and skills in financial forecasting.	budget and finance.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
3.2 Rationalize, reform and strengthen interventions and regulations concerning education support services (especially those that enable equitable access to early childhood development (ECD) and other school-based social safety net services – books – uniforms – transportation – after-school community programme)	3.2.1 Rationalize the Education Social Assistance Programmes, including those relating to School books, uniforms and transportation services.	3.2.1.1 Review Education Assistance Programmes and identify duplication (in purpose, target population or coverage) and explore the possibility of rationalizing (closing, expanding, reducing, or merging) where duplication	3.2.1.1 Activities 2,3,4,5: Education Social Assistance Programmes rationalized and strengthened facilitating improved services, wider coverage, and increased efficiency in the utilization of available scarce resources	3.2.1.1 Activities 2,3,4,5: Reports and recommendations.	3.2.1.1 Activities 2,3,4,5: Enhanced and strengthened interventions and regulations.	3.2.1.1 Activities 2,3,4,5: List of regulations mandating the strengthening and enhancement of interventions.	MoEq, Moe, Dep of Youth and Sports. Private Sector, Constituency Councils
		3.2.1.2 Re-define the framework for the Education Social Assistance Programmes, establishing the inter- relations among interventions.					

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Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.2.1.3 Based on the adjusted framework, assess the capacity of the agencies that are to deliver the remaining services and review the institutional arrangements necessary for their coordination and supervision at the Student Support Services Unit.					
		3.2.1.4 Review and redefine the processes for each one of the remaining services, address existing bottlenecks, and produce Operations Manuals (OMs) with clear guidelines and instruments for each actor involved in implementation.					
		3.2.1.5 Develop a Capacity Building Plan (CBP) for the Education Social Assistance Programmes.					

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.2.2 Revitalize the Community After-school Programme (CASP).	3.2.2.1 Undertake a review of the CASP	3.2.2.1 Review of CASP undertaken.	3.2.2.1 Reports and recommendations.	3.2.2.1 An enhanced and sustainable CASP in the target communities.	3.2.2.1 CASP well re-established with increased attendance.	MoEq, Constituency Councils, MoEd, Non-state actors, Dept. of Youth and Sports.
	3.2.3 Implement the Early Childhood Development Policy and its minimum standards for service delivery.	3.2.3.1 Re- introduce the Roving Caregivers Programme (RCP) to national scale.	3.2.3.1 A New RCP.	3.2.3.1 Policy operationalized and minimum standards being achieved.	3.2.3.1 Increased opportunities for early stimulation.	3.2.3.1 No. of RCPs operating in urban and rural areas.	MoEq, MoEd, MoF
			3.2.3.2 Define the necessary mechanisms to increase access to Child Care Centres (CCC) for poor and vulnerable children from 3 to 5 years old, including the reduction of fees and ensuring priority for these children in public funded centres.	3.2.3.2 Mechanisms established to increase access to CCCs.	3.2.3.2 Increased opportunities for early stimulation.	3.2.3.2 No. of children attending CCC. and no. of additional CCCs established.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.2.3.3 Develop a Capacity Building Plan (CBP) for the expansion and standardization of the RCP and CCC services.	3.2.3.3 Capacity Building Plan developed.	3.2.3.3 Criteria for standardization of RCP and CCC services enhanced.	3.2.3.3 Enhanced approaches to RCP and CCC services.	3.2.3.3 No. of persons trained in ECE and Care.	Early Childhood Teachers Association
		3.2.3.4 Undertake a Qualitative Assessment to identify the barriers to attendance to Day Care and ECD.	3.2.3.4 Qualitative research undertaken.	3.2.3.4 Report and recommendations.	3.2.3.4 Barriers to attendance identified and addressed.	3.2.3.4 Increase in attendance at Day Care and ECD facilities.	PTAs. Community- based Organizations
		3.2.3.5 Respond to the research findings and recommendations and sensitize parents to receive the RCP services and send their children to Child Care Centres.	3.2.3.5 Identification / selection of recommendations for implementation.	3.2.3.5 Action plans for implementation.	3.2.3.5 New approaches to facilitate services identified and operational.	3.2.3.5 Increase in attendance at Day Care and ECD facilities.	
	3.2.4 Improve the targeting of Education Assistance Programs.	3.2.4.1 Define which Education Assistance Programmes are to utilize the Common Targeting Mechanism (CTM) and Single Registry (SR) to identify their beneficiaries.	3.2.4.1 Education Assistance Programmes to utilize CTM and SR to identify beneficiaries defined.	3.2.4.1 List of criteria for CTM and SR identified.	3.2.4.1 Improved targeting.	3.2.4.1 Increase in beneficiaries for Education Assistance.	MoEd

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.2.4.2 Review the eligibility and selection criteria for each of the selected programmes.	3.2.4.2 Eligibility criteria for each of the selected programmes reviewed.	3.2.4.2 List if criteria available.	3.2.4.2 Greater objectivity in the selection process.	3.2.4.2 Programmes have established criteria to be applied.	MoEq
	3.2.5 Explore the possibility of including education related behaviour as conditionalities for the delivery of cash subsidies and/or for the benefits to be transformed from in kind to cash (or almost cash) benefits.	3.2.5.1 Identify strategic low performance education indicators (e.g., ECD enrolment and attendance, or secondary retention and completion) and explore the viability of including them as conditionalities in the PAP Programme.	3.2.5.1 Strategic low performance education indicators identified.	3.2.5.1 List of indicators available and being used.	3.2.5.1 Improved education performance.	3.2.5.1 Reports on education performance available showing improvements.	MoEq; Statistics Dept.; OECS Commission
		3.2.5.2 Explore the possibility of transforming into cash transfers or integrating into the PAP various education interventions (Transportation Programme, Examination Fee Waivers, and School Feeding for secondary students).	3.2.5.2 Strategy to integrate into PAP various interventions.	3.2.5.2 Report and recommendations.	3.2.5.2 Improved education performance.	3.2.5.2 Reports on education performance available showing improvements.	MoEq, MoE

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.2.5.3 Develop the necessary design and implementation arrangements for service delivery.	3.2.5.3 Implementation arrangements designed.	3.2.5.3 Documentation on processes and protocols incorporated in OMs.	3.2.5.3 Standardized arrangements and improved access to services.	3.2.5.3 Number of arrangements put in place.	
	3.2.6 Develop and implement a Monitoring and Evaluation (M&E) System for the Education Assistance Programmes.	3.2.6.1 Develop and implement a Monitoring and Evaluation (M&E) Framework and System to assess the performance of Education Assistance Programmes.	3.2.6.1 M & E framework and system developed and implemented.	3.2.6.1 Reports and no. of recommendations being implemented by policy makers and programme managers.	3.2.6.1 Up to date information on performance criteria.	3.2.6.1 Number of programmes monitored and evaluated. Evidence of collaboration between key actors (MoEd, MoEq).	MoEq
		3.2.6.2 Integrate the Education Assistance M&E System into the wider Education M&E System	-				
	3.2.7 Develop and implement a comprehensive Communication		3.2.7.1 Comprehensive Communication Strategy developed.	3.2.7.1 List of tactics in Communication Strategy to be applied by	3.2.7.1 Greater awareness of education assistance services.	3.2.7.1 No. of inquiries regarding education services.	MoEq, MoEq, Key Stakeholders, Private Sector
	Strategy for Education Assistance Programmes.	Services.		various actors and frequency.		3.2.7.1 No. of communication messages dispatched over periods of time.	-

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
3 Rationalize reform and strengthen the interventions and regulations related to Employment services. An initial reform phase will adjust and ensure an adequate coordination among the public sector interventions. Other phases could consider the work of private sector interventions and agencies of similar purpose.	3.3.1 Implement the Labour Market Information System (LMIS) to support evidence- based decision making for employment initiatives and Active Labour Market Programmes (ALMPs) for the poor and vulnerable population.	3.3.1.1 With support from ILO, implement the Labour Market Information System (LMIS).	3.3.1.1 LMIS developed and implemented.	3.3.1.1 No. of LMIS quarterly reports. No. of agencies utilizing the LMIS data. No. of policies informed by LMIS.	3.3.1.1 Enhanced up to date information	3.3.1.1 Up to date reports to inform employment policy.	MoEq, Development Partners (ILO, WB)
		3.3.1.2 Undertake regular Labour Market Surveys.	3.3.1.2 Regular Labour Market Surveys.	3.3.1.2 No. of surveys conducted.	3.3.1.2 Increased frequency of labour market information.	3.3.1.2 Reports available.	MoEd
				3.3.1.2 No. of requests for survey data.	-		
		3.3.1.3 Collect and analyse all data disaggregated by gender and for different age	3.3.1.3 Disaggregated data by age and gender.	3.3.1.3 No. of requests for disaggregated age / gender data.	3.3.1.3 Enhanced quality of data (disaggregated by gender).	3.3.1.3 Reports reflecting gender disaggregated data and gender analysis across	
		groups.		3.3.1.3 Reports and recommendations.		the life cycle.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.3.2 Review the existing Active Labour Market Programs (ALMPs) and interventions (to rationalize, merge, reduce or expand).	3.3.2.1 Undertake a Rapid Assessment (given the urgency of the matter) of the processes, effects and impacts of the main ALMPs interventions.	3.3.2.1 Rapid Assessment of current ALMPs.	3.3.2.1 Recommendations on rationalization (merge, reduce or expand).	3.3.2.1 Results - Gaps and shortcomings identified.	3.3.2.1 Proposed plan of action for reform.	MoLab, MoEq, Statistics Dept.,
		3.3.2.2 Based on the results from the Rapid Assessment and additional basic information (target population, services, coverage, costs, etc.), define substitute and complementary ALMPs and determine which ones can be rationalized, merged, reduced or expanded.	3.2.2.2 Substitute and complementary ALMPs defined and determined for rationalization, merging, or expansion.	3.3.2.2 List of ALMPs for reform available.	3.3.2.2 Plan for reform adopted.	3.3.2.2 Rationalized, merged or expanded ALMPs operational.	MoEq, MoL, NSDC, NCPD, MoEd.
		3.3.2.3 Adjust the ALMPs according to the decisions made and integrate them under a framework of services for training, job creation, and job search that can facilitate coordination and referral mechanisms.	3. 3.2.3 Recommendations on adjustments of ALMPs implemented.	3. 3.2.3 Framework of services established and operational.	3. 3.2.3 Enhanced and improved functioning of ALMPs for quality and timely service delivery.	3. 3.2.3 Reports on successful achievement of mandates of the various service providers.	MoL, MoEq, Development Partners (WB, ILO).

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.3.2.4 Review the targeting mechanisms of all Active Labour Market	3.3.2.4 Review and adjust the selection criteria and registration requirements	3.3.2.4 Selection criteria and registration requirements for main ALMPs	3.3.2.4 List of criteria available.	3.3.2.4 No. of cases meeting new selection and registration criteria.	
		Programmes (ALMPs)	of main ALMPs to enhance transparency and pro-poor focus.	reviewed and adjusted.	3.3.2.4 Improved compliance with new selection and registration criteria.		
		3.3.2.5 Explore the possibility of utilizing the CTM and Social Registry (SR) to identify poor and vulnerable households and individuals as potential beneficiaries of the ALMPs.	3.3.2.5 Strategy to utilize CTM and SR to identify poor and vulnerable households as beneficiaries of ALMPs.	3.3.2.5 Protocols and processes defined and incorporated in OMs for public sector ALMPs.	3.3.2.5 Poor households and individuals identified as beneficiaries of ALMPs.	3.3.2.5 No. of new households registered as beneficiaries of ALMPs.	
		3.3.2.6 Develop referral mechanisms among the ALMPs and between	3.3.2.6 Referral mechanisms established with other social	3.3.2.6 MoUs established among providers in the social	3.3.2.6 Enhanced coordination among ALMP service	3.3.2.6 No. of MoUs established.	
		those and other Social Protection agencies and interventions.	protection agencies and actors.	protection sector.	providers.	3.3.2.6 No. of referrals made of a period of time.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.3.3 Develop Operations Manuals (OMs) for each ALMP	3.3.3.1 Develop Operations Manuals (OMs) for each ALMP	3.3.3.1 OMs developed for each ALMP intervention.	3.3.3.1 OMs in use.	3.3.3.1 Standards and processes enhance quality service delivery	3.3.3.1 Reports on mandates and activities associated	MoEq, Development Partners (ILO, WB, UNDP,
	with clearly defined procedures and instruments for selecting beneficiaries, delivering services and undertaking Monitoring and Evaluation (M&E).	intervention.		3.3.3.1 Reports reflecting the standards and requirements of the OMs.	among ALMPs providers.	ALMPs.	UNICEF, WFP)
		3.3.3.2 Develop simplified Monitoring and Evaluation (M&E) mechanisms to assess performance and effects of the interventions.	3.3.3.2 M & E mechanism developed to assess performance and effects of implementation.	3.3.3.2 Reports emanating from the M & E process.	3.3.3.2 Performance and effects of the interventions documented for review and action.	3.3.3.2 Reports of M&E on interventions.	MoEq. MoEd MoLab, MoF
		3.3.3.3 Regularly train all actors involved in the implementation of the ALMPs, utilizing the OM.	3.3.3.3 Training plan developed for implementation.	3.3.3.3 No. of persons trained in the implementation of ALMPs.	3.3.3.3 Increased and enhanced knowledge, skills, and capacity.	3.3.3.3(a) Quality of service renders to beneficiaries. Level of beneficiary satisfaction.	MoEq, MoL, MoF
						3.3.3.3(aa) Quality of reporting on performance of the ALMPs interventions.	-

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.3.3.4 Periodically review and up- date the OMs to integrate lessons learned and respond to new requirements.	3.3.3.4 Updated OMs based on lessons learned.	3.3.3.4 No. of OM reviews and updates.	3.3.3.4 Regularly updated OMs	3.3.3.4 Lessons learnt and recommendations presented for OM updates.	
		3.3.3.5 Develop a Capacity Building Plan (CBP) for each ALMP.	3.3.3.5 Capacity Building Plan developed for each ALMP	3.3.3.5 No. of plans developed.	3.3.3.5 Enhanced human resource capacity.	3.3.3.5 No. of persons trained in matters pertaining to the effective implementation of ALMPs.	
		3.3.3.6 Implement the CBPs and ensure their periodic revision to adapt to new requirements.	3.3.3.6 CBPs Implemented and periodic revisions undertaken.	3.3.3.6 Utilization and implementation rates. No. of periodic revisions.	3.3.3.6 Regularly updated CBPs.	3.3.3.6 Lessons learnt and recommendation to respond to new requirements.	
		3.3.3.7 Incorporate PWDs in ALM Programming	3.3.3.7 ALM Programming constitute provisions made for inclusion and participation of PWDs.	3.3.3.7 Areas identified for PWDs inclusion and participation.	3.3.3.7 Increased inclusion of PWDs in ALMPs	3.3.3.7 Number of PWDs involved in ALMPs.	
		3.3.3.8 Enhance awareness and utilization of ALMPs through a comprehensive Communication Strategy.	3.3.3.8 Develop and implement a comprehensive Communications Strategy for the ALMPs' services and interventions.	3.3.3.8 A two-way Communication Strategy and Action Plan designed for ALMPs' services and interventions.	3.3.3.8 Communication Strategy targets and milestones as established in its M&E framework.	3.3.3.8 Familiarization among the population regarding g the availability of ALMPs.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.3.4 Increase coverage of the Contributory Pension Scheme.	3.3.4.1 Review and adjust the pension scheme regulatory framework	3.3.4.1 Adjustments and revision of pension scheme regulatory framework undertaken.	3.3.4.1 Revision and adjustments approved.	3.3.4.1 Increase in benefit adequacy.	3.3.4.1 Vertical expansion of transfer amount.	MoF, MoLab MoEq NIC
		3.3.4.2 Define strategies to enforce the Contributory	3.3.4.2 Strategies to enforce coverage defined.	3.3.4.2(a) No. of strategies defined and enforced.	3.3.4.2 New compliance measures adopted.	3.3.4.2 Provision of incentives to beneficiaries.	MoF, NIC, MoEq
		Pension Scheme´s coverage.		3.3.4.2 (aa) Percentage increase in coverage of the Scheme.			
		3.3.4.3 Develop and implement a Communications Strategies to increase awareness and incentivize registration and regular contributions to the Contributory Pension Scheme.	3.3.4.3 A two-way Communication Strategy and Action Plan designed to increase awareness and incentivize registration and regular contributions to Contributory Pension Schemes.	3.3.4.3 Communication Strategy targets and milestones as established in its M&E framework.	3.3.4.3 Increased awareness of incentives to encourage regular contributions to the contributory pension scheme.	3.3.4.3 Increase in informal and self-employed persons making regular contributions to the contributory pension scheme.	MoEq NIC MoF MoLab
		3.3.4.4 Periodically review the effectiveness of the measures taken in order to adjust strategies and communication mechanisms	3.3.4.4 Impact Study	3.3.4.4 Recommendations on measures taken to adjust strategies.	3.3.4.4 New measures adopted.	3.3.4.4 New measures actualized.	NIC, MoF, MoLab,

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.3.5 Increase coverage of the various non- contributory social security Schemes.	3.3.5.1 Consolidate, strengthen, and sustain existing non-contributory social security schemes.	3.3.5.1 Existing non-contributory schemes retained.	3.3.5.1 Suite of non-contributory schemes	3.3.5.1 Suite of non- contributory schemes earmarked for reform.	3.3.5.1 Reform measure instituted.	MoEq, MoF, Development Partners (ILO, WB)
		3.3.5.2 Explore and define strategies to introduce and sustain non- contributory Pension Scheme's for unemployed youth and the elderly.	3.3.5.2 Strategies explored and defined.	3.3.5.2 Non- contributory Pension Scheme's for unemployed youth and the elderly rolled out and operational.	3.3.5.2 Improvement in well- being.	3.3.5.2 Number of youth and elderly persons covered under the scheme.	MoF, NIC, MoEq
		3.3.5.3 Develop and implement Communications Strategies to increase awareness and incentivize access to non- contributory social security	3.3.5.3 A two-way Communication Strategy and Action Plan designed to increase awareness and incentivize registration and access to non-contributory social security.	3.3.5.3 Communication Strategy targets and milestones as established in its M&E framework.	3.3.5.3 Increased awareness of incentives to encourage access to non- contributory pension scheme.	3.3.5.3 Increased frequency of messages disseminated in a variety of ways.	MoEq
	3.3.6 Develop a graduation / exit programme	3.3.6.1 Align the social insurance scheme for unemployed youth to complementary interventions to facilitate / encourage graduation / exit from the scheme.	3.3.6.1 Pathways in the green, blue, and orange economy, skills training, and entrepreneurship identified and programmed.	3.3.6.1 Participation in the various pathways to graduation / exit from social insurance.	3.3.6.1 Enhance resilience, choice and autonomy.	3.3.6.1 Number of youth who successfully graduate / exit from the scheme.	MoEq

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
3.4 Operationalize recertification, exit and graduation strategies for state social protection	3.4.1 Facilitate transition of beneficiaries of social assistance to opportunity, economic	3.4.1.1 Develop a policy on graduation and give it legal title.	3.4.1.1 Policy on graduation established with legal title.	3.4.1.1 (a) Targets and milestones established in its M & E framework.	3.4.1.1 (a) National law, policy and strategy are in place, up to date and utilized effectively.	3.4.1.1 ASP considerations are mainstreamed in DRM and SP regulations and mandates.	MoEq, MoAgric, MoLab, Dept. of SD, Private Sector, NEMO,
programmes.			-		3.4.1.1 (aa) National SP strategy includes resilience strengthening as a key objective.		
		3.4.1.2 Engage with other public sector agencies involved provision of livelihood opportunities in the green, blue, and orange economies to identify options for participation by members of poor and vulnerable households.	3.4.1.2 Livelihood opportunities for poor and vulnerable households in the programmes of other public sector agencies aligned with the green, blue, and orange economies identified.	3.4.1.2 No. of households engaging in livelihood opportunities as a gateway to graduation / exit.	3.4.1.2 Enhanced coordination and integration of services and complementary measures.	3.4.1.2 No of MoUs established and operational.	MoEq, MoAgric, MoLab, Dept. of SD, Private Sector, NEMO,
	3.4.2 Institutionalize graduation strategy with conditionality features.	3.4.2.1 Review recent recommendations on this proposal.	3.4.2.1 Reliable and valid research findings to inform decision-making.	3.4.2.1 Qualitative and quantitative information available.	3.4.2.1 Conditionalities articulated and applied to selected non- contributory flagship social assistance programmes / schemes.	3.4.2.1 Level of compliance with conditionalities.	MoEq, MoEd, MoH

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.4.2.2 Undertake additional necessary research to inform decision-making on conditionality features in light of lessons learnt from response to the impact of COVID-19 on the poor and the vulnerable.	3.4.2.2 Reliable and valid research findings to inform decision-making.	3.4.2.2 Qualitative and quantitative information available.	3.4.2.2 Conditionalities articulated and applied to selected non- contributory flagship social assistance programmes / schemes.	3.4.2.2 Level of compliance with conditionalities.	MoEq, MoEd, MoH
	a pac incen incluc insurc	3.4.2.3 Create a package of incentives that includes social insurance and decent work.	3.4.2.3 (a) Incentives to facilitate graduation established.	3.4.2.3 (a) No. of individuals registered for incentive package.	3.4.2.3 Increased participation with potential for graduation / exit.	3.4.2.3 Uptake in incentives and programmes.	MoF, MoEd, Dept. of Labour
			3.4.2.3 (aa) Programme to promote decent work established.	3.4.2.3 (aa) No. of reports on the implementation of the decent work programmes.	-		
		3.4.2.4 Develop policies and programmes that promote labour inclusion and enable young unemployed	3.4.2.4 Policies and programmes to promote labour inclusion and build paths of inclusion	3.4.2.4 (a) Youth policies and programmes on labour inclusion being implemented.	3.4.2.4 Enhanced labour policy and programme environment	3.4.2.4 Level of participation among young unemployed people.	MoEd, MoEq, Dept. of Labour
		people to build paths of inclusion.	of inclusion developed.	3.4.2.4 (aa) Reports on rate of implementation.	-		

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	3.4.3 Incorporate a gender approach into labour	3.4.3.1(a) Develop policies and livelihood programmes that focus on the	3.4.3.1(a) Policies and programmes to promote the inclusion	3.4.3.1 (a) Policies and programmes on inclusion of women being implemented.	3.4.3.1 Enhanced gender mainstreaming in labour inclusion	3.4.3.1 Increase participation of women registered.	Dept. of Gender Affairs, MoEq
	and inclusion policies and programmes.	inclusion of women in the labour market.	of women and build paths of inclusion developed.	3.4.3.1 (aa) Reports on rate of implementation.	policies and programmes.		
	3.4.4 Establish and strengthen links with programmes targeting labour and productive inclusion with the aim	3.4.4.1 Link graduation interventions to the recommendations put forward for Adaptive Social Protection or Shock Sensitive	3.4.4.1 Graduation interventions are linked to recommendations put forward implementing Adaptive Social Protection or	3.4.4.1 (a) OMs provide guidance on actualizing the linkages.	3.4.4.1 Enhanced adaptive capacity and resilience among households.	I 3.4.4.1 MoUs established and operational	
	of moving towards more sustainable protection strategies.	Social Protection in the event that graduands are exposed or impacted for example by the COVID-19 pandemic.	Shock Sensitive Social Protection interventions.	3.4.4.1 (aa) No. of beneficiaries.			

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.4.4.2 Put mechanisms and protocols in place to ensure that in periods of economic contraction, the poor and vulnerable who graduated are considered for protection through appropriate safety net interventions (e.g., one off cash transfer to offset income shock under COVID response).	3.4.4.2 Additional safety net mechanisms put in place.	3.4.4.2 No. of graduated beneficiaries receiving support.	3.4.4.2 Enhanced protection for those graduated but impacted by crisis	3.4.4.2 Access to cash transfer by those impacted by crisis.	
		3.4.4.3 Undertake a pilot graduation programme to test the efficacy of the strategy and discern lessons learned for future graduation interventions.	3.4.4.3 Pilot Graduation Programme focused on one of the Flagship Social Protection Programmes.	3.4.4.3 No. of successful graduates from the selected SP Programme.	3.4.4.3 Enhanced individual choice and autonomy.	3.4.4.3 Demonstrated potential for resilience.	
		3.4.4.4 Develop proposals for consideration by national agencies as well as regional (OECS Commission, CARICOM) and international development partners (USAID, UNICEF, UNDP, WPF, World Bank).	3.4.4.4 Proposals developed and submitted.	3.4.4.4 No. of proposals sent to development partners and responses received.	3.4.4.4 Additional pathways created.	3.4.4.4 No. of proposals approved and implemented.	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		3.4.4.5 Enter into MoUs with national agencies as well as regional and international partners	3.4.4.5 MoUs established.	3.4.4.5 No. of MoUs established and being actualized.	3.4.4.5 Additional pathways / opportunities created.	3.4.4.5 Varieties of graduation /exit programmes.	
	3.4.5 Finetune the various targeting tools and referral systems including re- certification.	3.4.5.1 (a) Consider community targeting alongside SLNET v3 as part of a holistic comprehensive targeting mechanism.	3.4.5.1 (a) Proposal developed on introduction of Community Targeting alongside SLNET – 3.0.	3.4.5.1 (a) Report and recommendations available.	3.4.5.1 (a) Comprehensive targeting mechanism adopted which includes recertification.	3.4.5.1 (a) No. of beneficiaries graduated and no. accessing the flagship programmes (PAP, KSL, CDG Scheme)	MoEq
	3.4.5.2 Define processes and instruments for the implementation	processes and instruments for the implementation	3.4.5.2 Processes and mechanisms defined.	3.4.5.2 (a) No. of instruments and content prepared and used.			
		of the referral mechanisms.		3.4.5.2 (aa) Clear co-ordination and referral mechanisms between the Ministries and between these and other relevant authorities.			

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
3.5 Empower beneficiaries of social assistance to be able contribute to human capital formation.	3.5.1 Develop linkages with skill training institutions that provide opportunities for TVET and other productive capabilities and competencies to enable greater participation of poor and vulnerable persons in the Green, Blue and Orange economies.	3.5.1.1 (a) Target human capital investments in education, health, nutrition and skill development for vulnerable children and their families to overcome inter- generational cycle of poverty and dependence on social assistance.	3.5.1.1(a) Child Sensitive Social Protection Human Capital Investments Programme Interventions identified and targeted.	3.5.1.1 (a) Targets and milestones established in the M & E framework of the Programme.	3.5.1.1 Enhanced capacity and resilience to shocks and crises.	3.5.1.1 No. of families / households accessing investments.	MoEq. MoEd
		3.5.1.1 (aa) Establish MoUs	3.5.1.1 (aa) MoUs established.	3.5.1.1 (aa) No. of MoUs established and being actualized.			

## **Priority Area 4:**

Review, Strengthen and Develop the Legal, Institutional, and Financial Framework for Enhanced Transformation and Coordination of Social Protection Services giving due consideration to ASP mainstreaming and Capacity Building.

Strategic Objective: Facilitate the modernization of the social protection system to enable timely response to the needs of the poor and vulnerable, especially in times of disasters or shocks and to enable optimal scale up and functioning of social protection service providers.

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
4.1 Promulgate national social protection policy in national law and regulations.	4.1.1 Develop and adopt a comprehensive Social Protection Act.	4.1.1.1 (a) Review the current legal framework for Social Protection.	4.1.1.1 (a) Legal framework for Social Protection reviewed.	4.1.1.1 (a) Legislative analysis report	4.1.1.1 (a) Shortcomings of the legal environment for social protection identified.	4.1.1.1 (a) Report on shortcomings of the legal environment for social protection.	MoEq, Attorney General's Chambers; Cabinet of Ministers, Parliament
		4.1.1.1 (b) Draft a Social Protection Bill.	4.1.1.1 (b) Social Protection Bill drafted.	4.1.1.1 (b) Social Protection legislation enacted	4.1.1.1 (b) Enhanced regulatory environment for social protection.	4.1.1.1 (b) Policy and programmatic decision-making informed by legislation.	
		4.1.1.1 (c) Draft the regulations for the Act and undertake subsequent sensitization	4.1.1.1 (c) Assessment of legal instruments undertaken.	4.1.1.1 (c) Legal framework for the co- ordination of the Social Protection Policy developed and adopted.	4.1.1.1 (c) Efficient coordination of SP services that contribute to poverty reduction	4.1.1.1 (c) Report on the coordination of the SP legal framework	MOEq; Ministry of Education; Ministry of Health; Ministry of Labour; Civil Society Groups

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
			4.1.1.1 (d) Regulations for the Act drafted and sanitization undertaken	4.1.1.1 (d) Regulations for the Act adopted.	4.1.1.1 (d) Enhanced legal environment for social protection.	4.1.1.1 (d) Policy and programmatic decision-making informed by regulations.	
			4.1.1.1 (e) Pertinent structures, roles and responsibilities for the management and coordination of policy implementation clearly defined and functioning.	4.1.1.1 (e) Structures roles and responsibilities for management and co- ordination of policy implementation adopted.	4.1.1.1 (e) Enhanced implementation arrangements	4.1.1.1 (e) Policy and programme implementation supported by structures roles and responsibilities.	
	4.1.2 Enhance equity in access to Legal Aid Services.	4.1.2.1 (a) Assess and identify existing Legal Aid Services and take action to diminish access barriers to Legal Aid Services by the poor and vulnerable.	4.1.2.1 (a) Existing legal services assessed to determine gaps, inadequacies and performance of the service.	4.1.2.1 (a) Report on Assessment of existing legal aid services and recommendations adopted.	4.1.2.1 (a) Greater equity in access to legal services.	4.1.2.1 (a) Increase in the number of poor and vulnerable persons who access legal aid services.	MoEq, Attorney General's Chambers
		4.1.2.1 (b) Define the legal services to be provided to the poor and vulnerable.	4.1.2.1 (b) Legal services to the poor and vulnerable defined.	4.1.2.1 (b) Types of legal services which the poor and vulnerable have access to.	4.1.2.1 (b) Availability and accessibility of legal services to the poor and vulnerable	4.1.2.1 (b) Report(s) on legal services to the poor and vulnerable	MoEq, Attorney General's Chambers
		4.1.2.1 (c) Develop and implement a Capacity Building Plan (CBP) to strengthen the provision of Legal Aid Services.	4.1.2.1 (c) Capacity Building Plan	4.1.2.1 (c) Capacity Building Plan Developed and Implemented.	4.1.2.1 (c) Legal Aid service provision strengthened.	4.1.2.1 (c) Periodic reports and updates of capacity building undertaken	MoEq, Attorney General's Chambers

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		4.1.2.1 (d) Periodically review the effectiveness and user satisfaction of the Legal Aid Services and adjust their provision.	4.1.2.1 (d) Impact Assessment of Legal Aid Services.	4.1.2.1 (d) Reports from user surveys and recommendations on adjustments in provision of Legal Aid Services for the poor and the vulnerable.	4.1.2.1 (d) Efficient legal aid services provided to the poor and vulnerable	4.1.2.1 (d) Reports on effectiveness of legal aid services	MoEq, Attorney General's Chambers
4.2 Develop and establish institutional arrangements and coordination mechanisms for effective Social Protection Policy management and implementation.	4.2.1 Define structures, roles and responsibilities at different levels for the global management and coordination of the National Social Protection Policy (NSPP).	4.2.1.1 (a) Define and designate the structures assigning clear roles and responsibilities for the management and coordination of the policy implementation.	4.2.1.1 (a) Pertinent structures, roles and responsibilities for the management and coordination of the policy implementation clearly defined and functioning.	<ul> <li>4.2.2.1 (a)</li> <li>Percentage</li> <li>of specific</li> <li>objectives of the</li> <li>5-year Plan of</li> <li>Action achieved.</li> <li>4.2.2.1 (aa)</li> <li>Percentage of</li> <li>Annual Work</li> <li>Programmme</li> <li>activities</li> <li>undertaken.</li> </ul>	4.2.2.1 (a) Structures are established and support a coordinated approach to policy implementation across all sectors.	4.2.2.1 (a) Reports on milestone achievements and respective MOUs are operational.	MoEq, MoEP
		4.2.2.1 (b) Create an Inter-ministerial Committee (under the Social Reform Council), responsible for giving policy guidance, discussing budget allocations and overseeing the progress and barriers faced in the implementation of the policy and its reform strategies.	-	4.2.1.1 (b) Inter- Ministerial Committee created and functioning.	4.2.2.1 (b) Enhanced coordinated implementation of Social Protection strategies.	4.2.2.1 (b) Periodic Reports of the Inter- ministerial Committee	MoEq, MoEP

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	4.2.2 Standardize protocols, mechanisms and arrangements	4.2.2.1 (a) In line with the Social Protection Framework, develop	4.2.2.1 (a) Operational referral mechanisms integrated in	4.2.2.1 (a) Number (and percentage) of referrals that end up in the	4.2.2.1 (a) Social Protection Framework provides enabling	4.2.2.1 (a) Periodic review and assessment of SP Framework	Social Sector Ministries, Civil Society, Parastatal Monitoring
	for effective mechanisms coordination to enable and referrals. referral among	to enable referral among complementary	all relevant Operational Manuals (OMs).	registration of new beneficiaries (for each Social Protection intervention).	environment for coordination and complementary support	4.2.2.1 (aa) Periodic review of operation manuals and attending procedures	Dept.
		4.2.2.1 (b) Create an Inter-Ministerial Committee (IMC) (under the Social Reform Council), responsible for giving policy guidance, discussing budget allocations and overseeing the progress and barriers faced in the implementation of the policy and its reform.	4.2.2.1 (b) IMC created	4.2.2.1 (b) Number of OMs updated with recommendations on referral protocols.	4.2.2.1 (b) Operation of Social protection interventions are improved.	4.2.2.1 (b) More effective targeting and greater reach of programmatic interventions.	MoEq, MoEP

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	4.2.3 Define linkages between the Social Protection system and the social protection services (family wellbeing, child protection, and well-being, at risk youth, and gender-based violence support among other services)	4.2.3.1 (a) Define referral mechanisms between the state and non-state Social Protection services providers.	4.2.3 1 (a) Clear referral protocols for homes and care service centres adopted.	4.2.3.1 (a) Number and percentage of referrals within the Social Protection System effectively processed.	4.2.3.1 (a) Improved co-ordination among service providers.	4.2.3 1 (a) More effective targeting and greater reach of programmatic interventions.	MoEq
4.3 Develop a sound and sustainable financial system for Social Protection.	4.3.1 Establish sources of funding for social protection.	4.3.1.1 (a) Assess public sector funding for SP interventions.	4.3.1.1 (a) Public sector funding for SP interventions assessed.	4.3.1.1 (a) Assessment Report with recommendations.	4.3.1.1 (a) Funding gaps identified for attention.	4.3.1.1 (a) Recommendations on closing funding gaps implemented.	Ministry of Finance, Ministry of Economic Planning, Ministry of Equity;
		4.3.1.1 (b) Assess NGO sector funding for SP interventions.	4.3.1.1. (b) NGO sector funding for SP interventions assessed.	4.3.1.1 (b) Assessment Report with recommendations.	4.3.1.1 (b) Funding gaps identified for attention.	4.3.1.1. ((b) Recommendations on closing funding gaps implemented.	
		4.3.1.1 (c) Adopt recommendations to adjust the financial structures and mechanisms required for the Social Protection interventions.	4.3.1.1. (c) Assessment of the adjustments required to financial structures required for Social Protection interventions.	4.3.1.1 (c) Recommendations on necessary adjustments and mechanisms required for the social protection interventions.	4.3.1.1 (c) A robust SP finance plan that is adequate and inclusive to meet the diverse needs of the poor and vulnerable	4.3.1.1 (c) Available evidence for decision-making	

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		4.3.1.1 (d) Establish criteria and processes for the allocation of government or donor funding or other resources to facilitate SP interventions by government or NGO providers.	4.3.1.1 (d) Processes and criteria established and adopted.	4.3.1.1 (d) Increase in amount of allocation to government agencies and NGOs.	4.3.1.1 (d) Programmes of government and NGOs adequately funded.	4.3.1.1 (d) Government and NGO programmes serves more beneficiaries.	
		4.3.1.1 (e) Enhance financial and programme accountability and control mechanisms for all Social Assistance interventions.	4.3.1.1 (e) Sustained or increased budget allocations for good performance (based on evidence) of social protection interventions.	4.3.1.1 (e) Percentage of requested funding on the 5-year Action Plan effectively allocated for each Priority Area.	4.3.1.1 (e) Greater accountability for Social Protection spending.	4.3.1.1 (e) Reports containing narrative on spending for SP interventions.	
	4.3.2 Identify and undertake research to support Social Protection financial and technical decision making.	4.3.2.1 (a) Undertake an assessment of the financial implications of the reforms defined under this policy and the specific financial needs for each agency and intervention over time.	4.3.2.1 (a) Financial implications and needs of the reform identified and fulfilled.	4.3.2.1 (a) Number (and percentage) of planned pieces of research that are undertaken and utilized to support social protection financial and technical decision-making out of planned pieces of research.	4.3.2.1 (a) Expand knowledge of financial implications in satisfying social protection needs of the poor and vulnerable population	4.3.2.1 (a) Research findings available for decision-making that would benefit the poor and vulnerable population.	MoEq, MoEP/ MoF

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		4.3.2.1 (b) Finalize the Budget Analysis for Investment in Children (Health, Education, Child Protection and Social Protection sectors) DONE but should be followed up	4.3.2.1 (b) Social Protection Budget analysis utilized to make decisions on subsequent planning cycles.		4.3.21 (b) National budgets are informed by evidence obtained from research on social protection investments.	4.3.2.1 (b) Research findings available for decision-making that would benefit the poor and vulnerable population.	MoEq, MoEP/ MoF
		4.3.2.1 (c) Finalize the Fiscal Space Analysis for the Social Protection Floor in Saint Lucia. DONE but should be followed up	4.3.2.1 (c) Fiscal Space analysis utilized to determine alternative funding sources.		4.3.2.1 (c) Fiscal space analysis informs National budgets and provides options for alternative funding sources for social protection investments.	4.3.2.1 (c) Research findings available for decision-making that would benefit the poor and vulnerable population.	MoEq, MoEP/ MoF
	4.3.3. Identify potential funding sources and define a strategy to sustain and increase the Social Protection expenditure over time.	4.3.3.1 (a) Explore the possibility of adhering to counter-cyclical fiscal policy in Social Assistance spending.	4.3.3.1 (a) Strategy to maintain the value of budgetary allocations defined based on analysis of possibilities and evidence.	4.3.3.1 (a) Change in percentage of social protection budgetary allocation in comparison with previous year.	4.3.3.1 (a) Social Protection spending meets current and future needs that include ASP provisions to adequately respond to shocks	4.3.3.1 (a) Strategies for sustainable social protection spending.	MoEq, MoEP/ MoF
		4.3.3.1 (b) Explore different fiscal policy options to finance Social Protection expenditure	4.3.3.1 (b) Different fiscal policy options explored and recommendations made.	4.3.3.1 (b) Recommendations on pursuing recommended fiscal policy options adopted.	4.3.3.1 (b) Social Protection Spending in St. Lucia increased.	4.3.3.1 (b) Higher levels of expenditure on social protection interventions.	MoEq, MoEP/ MoF

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		4.3.3.1 (c) Define a strategy to sustain and increase Social Protection expenditure as interventions are scaled up as well as through measures to increase reach of SP programmes.	4.3.3.1 (c) Social Protection interventions including sustainable strategies and private actors to ensure that non- poor do not fall into poverty.	4.3.3.1 (c) Preventive and promotive interventions outlined	4.3.3.1 (c) Social protection spending is adequately planned and sustainable to meet the needs of all persons eligible for SP services	4.3.3.1 (c) Revised strategy and report on social protection allocation and expenditure.	MoEq, MoEP/ MoF
4.4 Implement effective Communication Strategy for SP.	4.4.1 Support the implementation of the Communication Strategy Activities.	4.4.1.1 (a) Participate in the various communication activities outlined in the Communication Strategy related to policy and programmes.	4.4.1.1 (a) A two-way Communication Strategy and Action Plan designed to create awareness of the Social Protection Policy and the interventions and regulations pertaining to different audiences.	4.4.1.1 (a) Percentage of Social Protection Communication Strategy targets and milestones as established in its M&E framework.	4.4.1.1 (a) Level of knowledge about the Social Protection Policy and its interventions heightened.	4.4.1.1 (a) Reports on increased level of awareness among the population and beneficiaries.	MoEQ
		4.4.1.1 (b) Define clear targets and milestones for the Communication Strategy.	4.4.1.1 (b) Communication targets and milestones clearly defined.	4.4.1.1 (b) Number of targets and milestones.	S4.4.1.1 (b) Social protection information is clear and understood by all current and potential beneficiaries.	4.1.1.1 (b) Reports on increased level of awareness among the population and beneficiaries.	MoEQ
		4.4.1.1 (c) Develop and implement an M & E plan to periodically assess targets, milestones, and performance and react to findings and results.	4.4.1.1 (c) M &E Framework designed and implemented.	4.4.1.1. (c) Reports on assessment of targets, milestones, and performance.	4.4.1.1 (c) Social Protection Policy implementation is informed by M & E results to heighten awareness of various SP interventions.	4.4.11 (c) M & E reports showing increased level of awareness among the population and beneficiaries.	МоЕq
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Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	4.4.2 Establish channels to receive, treat, and react to beneficiary and community requirements for Social Protection.	4.4.2.1 (d) Define participatory channels for beneficiaries and communities and ensure dialogue among stakeholders to increase effectiveness, quality, accountability and ownership of the Social Protection Policy and its interventions.	4.4.2.1 (d) Ownership and participation of civil society, social protection beneficiaries and programme design.	4.4.2.1 (d) Percentage of Social Protection interventions that have established a participatory channel with the beneficiary individuals, households, and communities.	4.4.2.1(d) Increased awareness of and participation in the promotion and access to Social Protection System and the supporting interventions to address the needs of the poor and vulnerable	4.4.2.1 (d) Level and type of feedback received from stakeholders.	MoEq
Activity Objective 4.5: Improve, financial, institutional policy, integration, coordination and capacity for ASP. 4.5.1 Strengthen capacity through adequate human, material and financial resources and skills both for	4.5.1.1 (a) For FSP put in place: Adequate beneficiary to staff ratio for foundational programs.	Activities under 4.5.1.1 (a) undertaken.	4.5.1.1 (a) Increase in number of staff to beneficiaries.	4.5.1.1 (a) Service delivery is significantly improved by increased capacity of the SP System to respond to	4.5.1.1 (a) Reports on the implementation of the capacity development plan.	MoEq, NEMO	
	routine service delivery and for shock responses.	4.5.1.1 (aa) Mechanisms to strengthen	-		the needs of the poor and vulnerable		
	technical and implementation capacity of programme staff. 4.5.1.1 (aaa) Provision of effective		4.5.1.1 (aa) Number of staff trained in technical and				
		-	implementation skills.	-			
		supporting tools to aid staff in their daily duties.		4.5.1.1 (aaa) New tools being used by staff in their daily duties.			

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		4.5.1.1 (b) For ASP put in place: Staffing contingency arrangements, either through re- assignment from	Activities 4. 5.1.1.1 (b) are undertaken.	4.5.1.1 (b) Number of staff reassignments and contracts for contingency purposes.	4.5.1.1 (b) Contingency arrangements are instituted and functioning to support ASP through a life	4.5.1.1(b) Periodic reports on various contingency arrangements.	МоЕq
	other agencies, temporary contracting		4.5.1.1 (bb) Number of ex-ante arrangements in place.	cycle approach that is shock responsive			
		4.5.1.1 (c) Develop adequate policy frameworks for ASP, as part of wider SP and DRM legislations and strategies.	4.5.1.1.1 (c) Policy Framework developed.	4.5.1.1 (c) Policy Framework available and disseminated widely.	4.5.1.1 (c) DRM and SP legislation and strategies adequately incorporate ASP within the policy framework	4.5.1.1 (c) Periodic review reports on national SP policy framework	MoEq, NEMO
Activity Objective 4.6: Develop strategies that expand coverage, particularly of the poor, and improve benefit adequacy.	4.6.1 Scale up coverage of poor households by combining different programs that address different risks across a life cycle approach.	4.6.1.1 (a) Undertake a more thorough assessment of how the program mix could facilitate improved coverage, while helping to address various risks across the life cycle.	4.6.1.1 (a) Assessment of programme mix undertaken.	4.6.1.1. (a) Assessment Reports.	4.6.1.1 (a) Coverage becomes highly inclusive and demonstrates life cycle approach in addressing risk	4.6.1.1 (a) Periodic Reports on program mix available to households	MoEq, NEMO

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		4.6.1.1 (b) Regularly update household survey data to improving targeting systems for foundational SP programs, particularly to ensure that those most in need can be identified and enrolled.	4.6.1.1 (b) Household data updated.	4.6.1.1 (b) Regularly updated data.	4.6.1.1 (b) Targeting systems improved and meet the needs of the beneficiaries	4.6.1.1 (b) Periodic reports on status of households - Biannual reports on review exercise.	MoEq, Dep of Statistics
	4.6.2 Undertake vertical expansion of existing benefits.	4.6.2.1 (a) Increase the adequacy of benefits of the flagship poverty- targeted safety net to facilitate consumption smoothing among beneficiary households.	4.6.2.1 (a) Adequacy of benefits of flagship poverty- targeted safety net increased.	4.6.2.1 (a) Increase in value of benefits compared.	4.6.2.1 (a) Benefits provided to households are adequate for meeting identified needs	4.6.2.1 (a) Reports on benefits show improvements in consumption smoothing.	MoEq
	4.6.3 Pave the way for new rounds of beneficiaries through graduation.	4.6.3.1 (a) Scale up programmes that have low coverage by providing adequate benefits and deliberate measures to facilitate economic inclusion, choice and autonomy.	4.6.3.1 (a) Programmes with small coverage scaled up with adequate benefits.	4.6.3.1 (a) Number of persons graduating from the small programmes.	4.6.3.1 (a) Existing beneficiaries are graduating and new beneficiaries are accessing benefits	4.6.3.1 (a) Reports on graduation and new beneficiaries	MoEq, MoF
				4.6.3.1 (aa) Number of new beneficiaries covered.			

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
	4.6.4 Provide support to the development and growth of private micro- insurance for small businesses and poor households to reduce the potential burden on the safety net in post-shock environments.	4.6.4.1 Develop affordable private micro-insurance schemes to be accessed by small businesses and poor households.	4.6.4.1 Affordable private micro- insurance scheme for small businesses and poor households established.	4.6.4.1 Number of clients covered by the scheme.	4.6.4.1 Increased availability and accessibility of private micro insurance to small businesses and poor households	4.6.4.1 Periodic reports on micro-insurance accessed by target beneficiaries	MoEq, MoF
Activity Objective 4.7: Improve institutional policy, coordination and capacity for ASP.	4.7.1 Strengthen capacity through adequate human, material and financial resources and skills both for routine service delivery and for shock responses.	<ul> <li>4.7.1.1 (a) For FSP put in place: Adequate beneficiary to staff ratio for foundational programs.</li> <li>Mechanisms to strengthen technical and implementation capacity of programme staff.</li> <li>Provision of effective supporting tools to aid staff in their daily duties.</li> </ul>	4.7.1.1 (a) Activities under 4.7.1.1 are undertaken.	<ul> <li>4.7.1.1 (a) Increase in number of staff to beneficiary ratio.</li> <li>4.7.1.1 (aa) Number of staff trained in technical and implementation skills.</li> <li>4.7.1.1 (aaa) New tools being used by staff in their daily duties.</li> </ul>	4.7.1.1 (a) Adequate adaptive capacity within SP service delivery to meet demand	4.7.1.1 (a) Periodic Reports on resource allocation and results of beneficiary satisfaction survey	MoEq

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Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
		4.7.1.1 (b) For ASP: Put in place staffing contingency arrangements, either through re- assignment from other agencies, temporary contracting Conduct ex ante assessment of coordination with humanitarian agencies.	4.7.1.1. (b) Activities under 4.7.1.1 b are undertaken.	<ul><li>4.7.1.1 (b) Staff reassignments for contingency purposes.</li><li>4.7.1.1 9 (bb) Results of ex-ante assessments.</li></ul>	4.7.1.1 (b) Greater level of preparedness to undertake ASP interventions.	4.7.1.1 (b) Reports showing increased coverage of persons captured by shock response interventions.	MoEq, NEMO
	4.7.2 Re-examine the role of SP regarding coordination arrangements between government, non- government, private sector, and humanitarian groups to identify gaps and barriers to effective coordination.	4.7.2.1 (a) Undertake a gap analysis of coordination arrangements within governmental sectors, between governmental sectors and between governmental and non-governmental sectors.	4.7.2.1 (a) Gap Analysis undertaken.	4.7.2.1 (a) Report on Gap Analysis available.	4.7.2.1 (a) Improved effectiveness of coordination of public and private sector SP programmes to close gaps in service provision and delivery.	4.7.2.1 (a) Periodic reports on service delivery and coordination across sectors are reviewed	MoEq
		4.7.2.1 (b) Develop adequate policy frameworks for ASP, as part of wider SP and DRM legislations and strategies.	4.7.2.1 (b) Policy Framework developed.	4.7.2.1 (b) Policy Framework available and disseminated widely.	4.7.2.1 (b) DRM and SP legislation include ASP measures.	4.7.2.1 (b) Periodic reports on SP and DRM framework	MoEq, NEMO

Activity Objectives	Tasks	Activities	Outputs	Output Indicators	Outcomes	Outcome Indicators	Actors
Activity Objective 4.8: Develop appropriate financing arrangements for ASP.	4.8.1 Link current risk financing arrangements (CCRIF SPC) to ASP financing.	4.8.1.1 (a) Develop and implement methods for quantifying ASP future needs based on the country's risk profile.	4.8.1.1 (a) Methods for quantifying ASP future needs developed.	4.8.1.1 (a) Results from the application of the methodology.	(a) Risk Financing arrangements are inclusive of ASP financing support	4.8.1.1 (a) Reports of ASP future needs	MoEq, NEMO
		4.8.1.1. (b) Develop appropriate ASP financing strategies, which include mechanisms tailored to different risk scenarios and the associated financing needs and sources.	4.8.1.1 (b) Appropriate ASP financing developed with clearly identified sources.	4.8.1.1 (b) Strategies outlined.	4.8.1.1 (b) Sources of ASP financing identified and accessed.	4.8.1.1 (b) Increase in funding for ASP interventions.	MoEq; MoF
		4.8.1.1 (c) Integrate ASP financing as part of wider DRF strategies.	4.8.1.1 (c) ASP financing integrated into wider DRF strategies.	4.8.1.1 (c) Amount of financing is commensurate with DRF strategies based on assessments.	4.8.1.1 (c) ASP financing supported implementation of DRF strategies.	4.8.1.1 (c) Reports on ASP financing supporting DRF strategies.	MoEq,NEMO



A LIFECYCLE AND RIGHTS-BASED POLICY

A GENDER SENSITIVE APPROACH TO ADAPTIVE SOCIAL PROTECTION







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