

Selected Global Experience on Social Protection Delivery Systems

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Workshop on Integrated and Adaptive Social Protection Systems in India

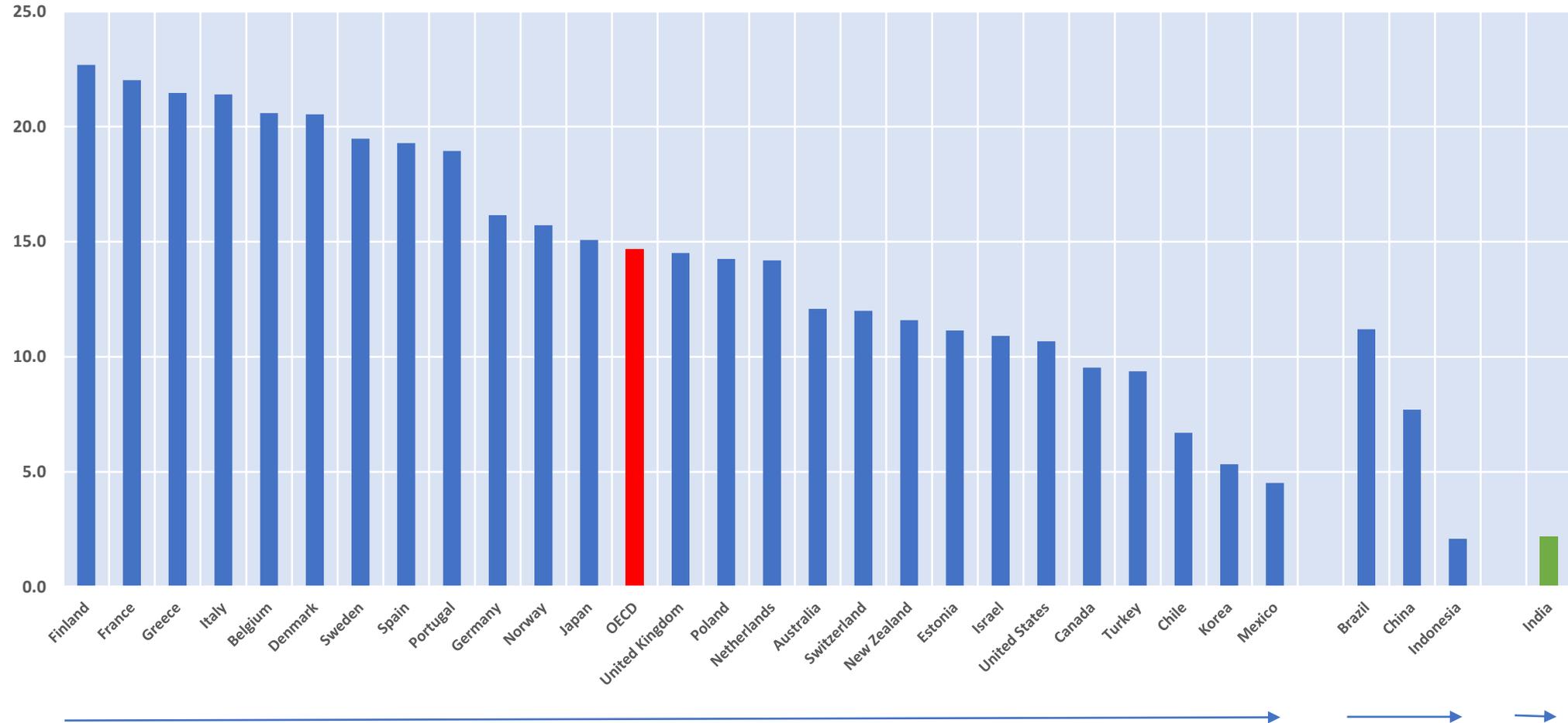
New Delhi

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Higher/middle-income countries invest in social protection

Chart 1: Rich and Middle-Income Countries Spend Significantly on Social Protection

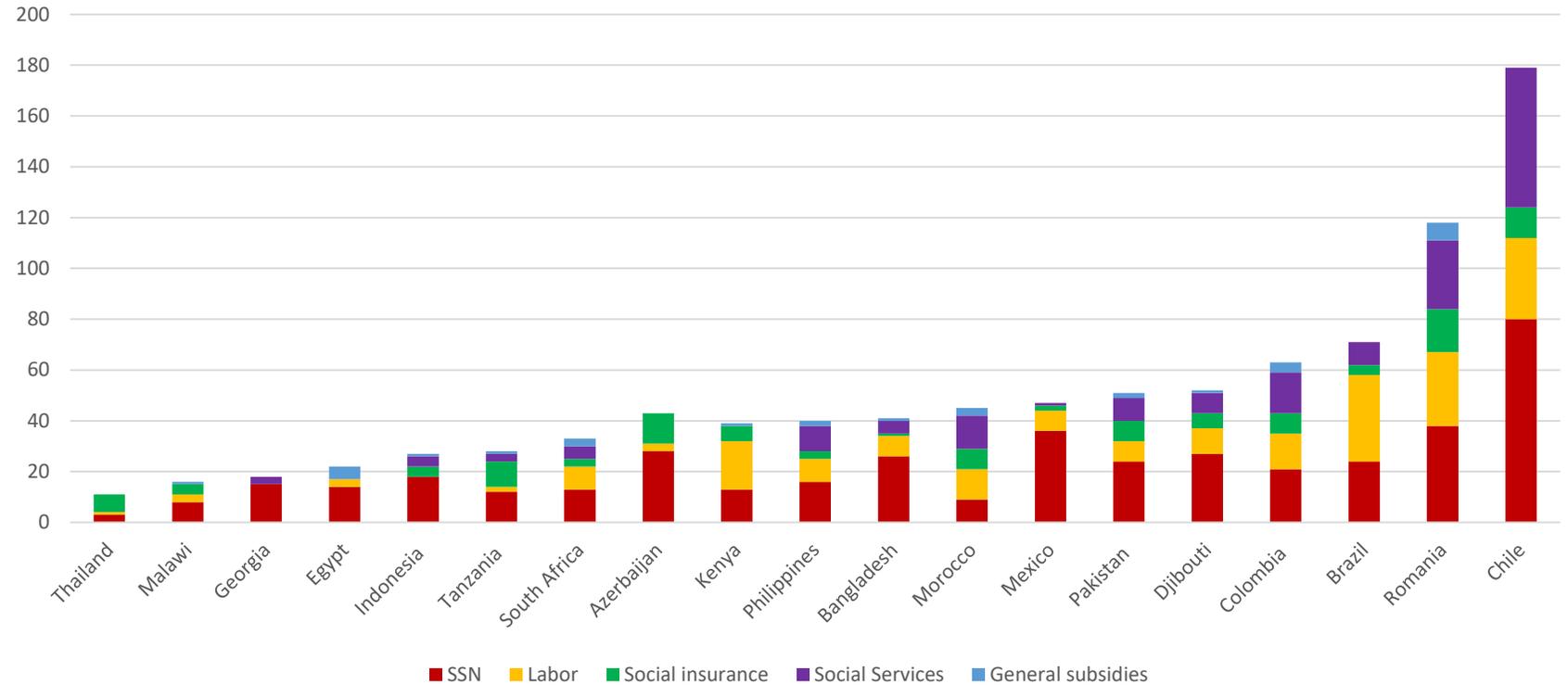
Percent of GDP Spent on Social Protection in Selected Countries 2017



Coordination:
delivering many
benefits and
services

(Approximate) Numbers of Active SPL Programs, by Type - Select Countries

Source: World Bank ASPIRE database



Bangladesh:

26 SSN programs
41 SPJ programs
0.73% of GDP on SSN
161 mn population
\$1359 GDP/cap
LIC

Philippines:

16 SSN programs
40 SPJ programs
0.67% of GDP on SSN
102 mn population
\$2952 GDP/cap
MIC

Brazil:

24 SSN programs
71 SPJ programs
1.35% of GDP on SSN
206 mn population
\$8650 GDP/cap
MIC

Chile:

80 SSN programs
179 SPJ programs
3.49% of GDP on SSN
18 mn population
\$13,793 GDP/cap
U-MIC

Spending is increasingly consolidated through integrated systems

- India still has a large and fragmented social protection system:
 - Tens if not hundreds of state and central schemes largely operating in administrative silos
 - More than 400 separate Management Information Systems
- By contrast, Chile manages about 180, Brazil 71, Bangladesh 41, China less than 10 national programs
- Scope for consolidation and streamlining?

Implementation can be coordinated but heavily decentralized

- **China, Brazil and Indonesia** allow local governments to plan, finance and deliver a core basket of benefits within a nationally defined framework and budget.
- **Social protection schemes have been rebalanced as countries become more urban** – greater role for private provisioning, social insurance and cash transfers in cities where markets function effectively.
- **Ex: Brazil Unified Social Assistance System (SUAS):** since 2005, integrates administrative units with systematic participation of civil society on a decentralized delivery framework of social assistance:
 - Federal: general decision-making on national policies, regulation and coordination and co-funding (Bolsa Familia)
 - Municipal: implementation of national policies, registration in social registry, some municipal programs

Integrated social protection data platform

- Can contain information on:
 - Potential and actual clients of selected social programs
 - Management information on receipt of benefits, payments, grievance redress and monitoring.
 - Even linking directly to payments and reconciliation
- Or the data platform can start with information on the demand and supply of programs (social registry or beneficiary registry)
- Can be used for:
 - program targeting
 - tracking of coverage, gaps and overlaps
 - policy analysis
 - budgeting and planning

Chile: integrated databases



Integrated Social Database

Self-Reported Information

Family Composition

Housing conditions

Education

Health

Occupation

Income

Protocols for:

- Updating information
- Rectifying information
- Complementary info

Data from other Administrative Systems

Taxes

Social security contributions

Unemployment Insurance

Pensions

Health insurance

Educational status

Property ownership

Vehicles ownership



Integrated Beneficiary Database

Cash transfers

Subsidies

Scholarships

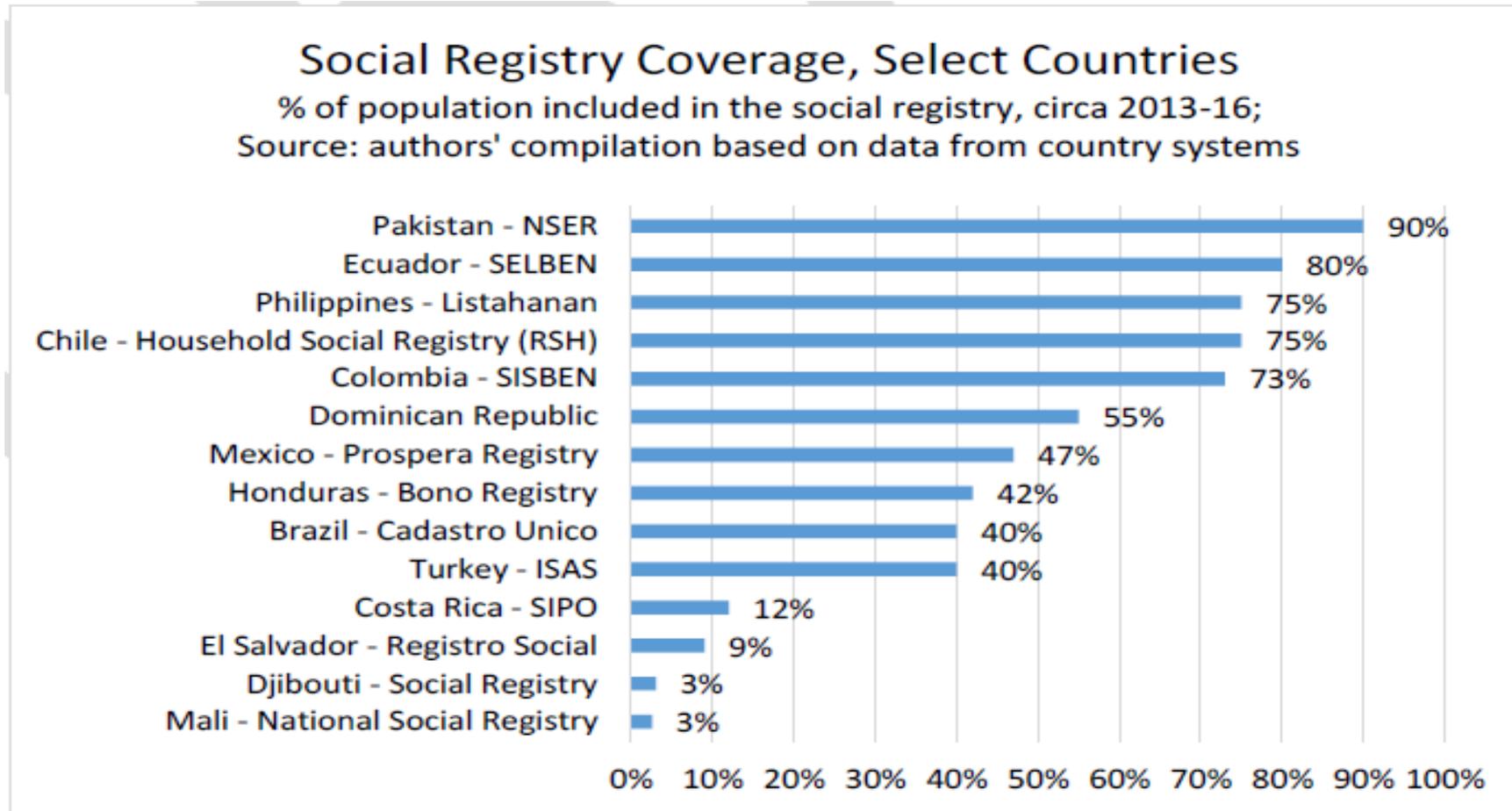
Income support programs

Social housing

Social Services

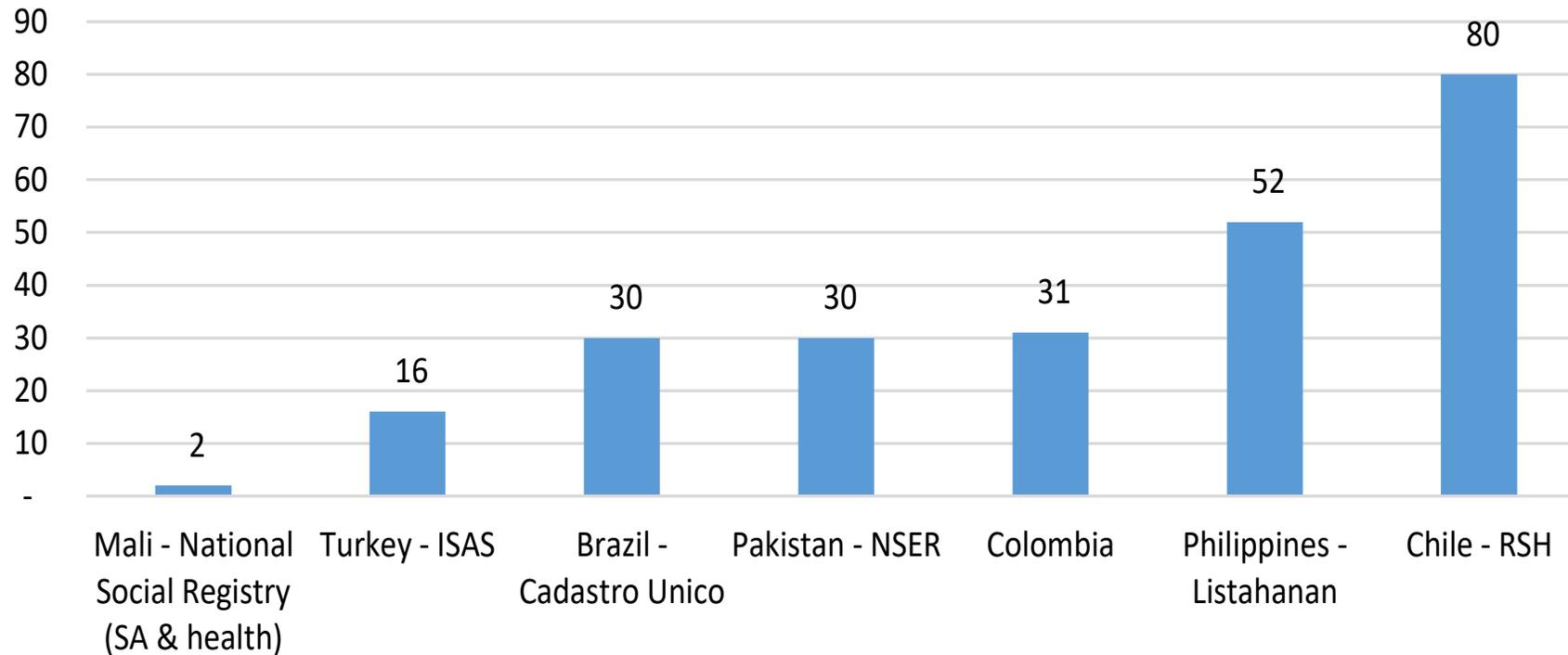
Etc.

Population coverage varies significantly depending on target group policies

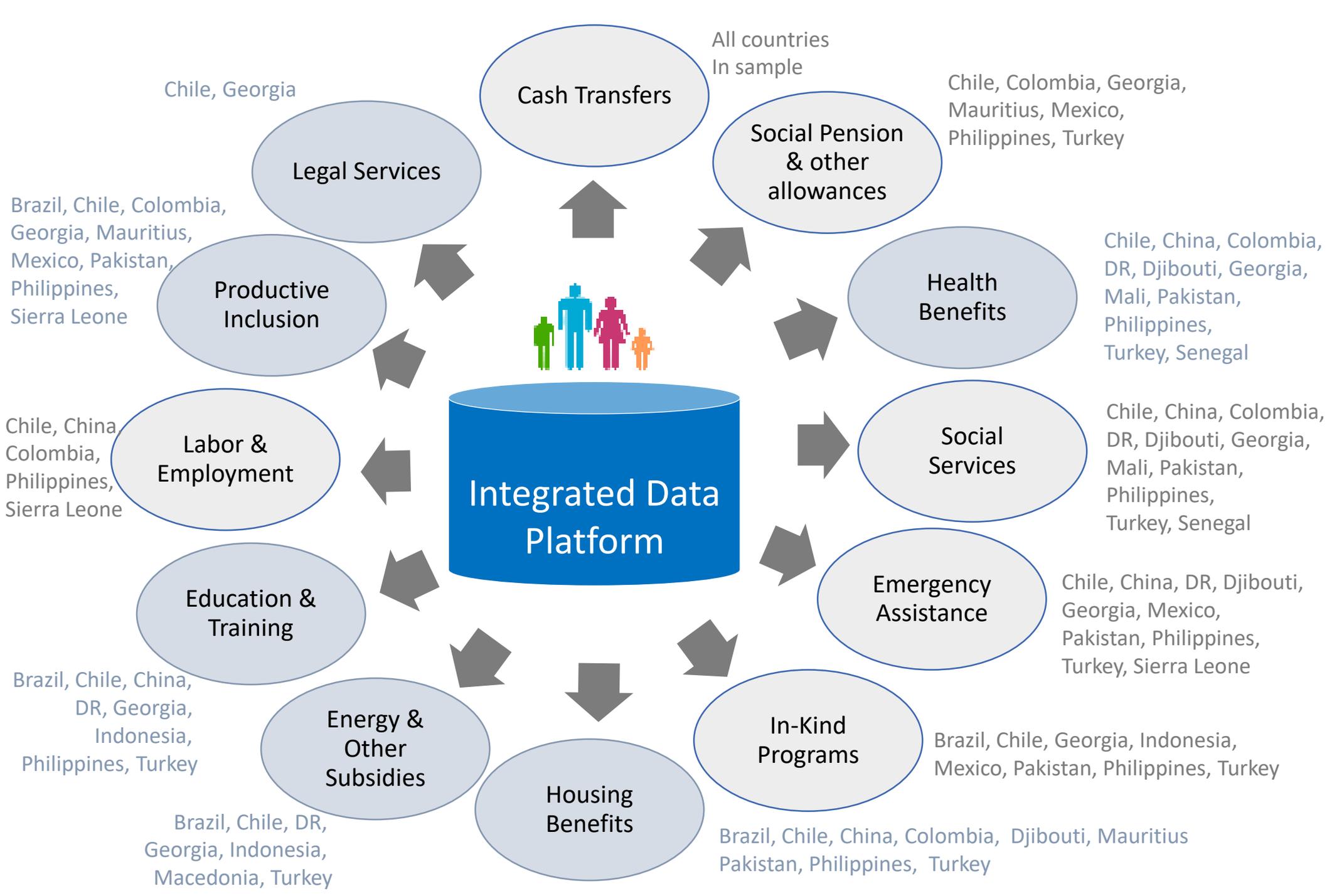


Program reliance on the data platform tends to grow over time

Number of Programs Using Common Social Registry,
Circa 2015, approximate number; source: Authors'
compilation based on direct data from country systems



Many countries use integrated data platforms for a range of social programs



Moving from schemes to systems using DBT and state data platforms



Reduce the number of programs and streamline costs, strengthen benefits. India implements a wide variety of social protection programs for which funds could be more effectively spent.



Improve policy, data and administrative coordination. Business process reviews show fragmented beneficiary data, inconsistent linkages to identification, and incomplete linkages to payments systems.



Expand coverage of cash and insurance programs: At the state level, recent surveys by NSSO, JPAL and OPM show that coverage of cash-transfer programs and insurance programs remains low. State governments also need to flexibly expand coverage to households for localized risks (e.g. disasters)

Integrated delivery systems can help rationalize social protection programs

- **Ease Citizen Access to Benefit Transfers** : Improved **targeting** (e.g. bundle programs for the same target group) and program delivery for current and future programs (in combination with strengthening core state databases, DBT protocols, data exchange architecture and last-mile delivery frameworks).
- **Decision Support and Planning** : Improved availability of dynamic data for planning and program assessment through **harmonized** data systems and evidence generation (in combination with strengthening statistical systems).
- **Expenditure Efficiencies** : A registry can help **benchmark** state spending on core welfare programs and risk insurance schemes, and also help create a roadmap for any future harmonizing of state schemes/subsidy reform.

Trends in delivery systems

- Surge in digital technologies applied to service delivery
 - Digital payments
 - Cloud technologies
 - Process automation and AI
 - Big data analytics

→ Every problem is a nail to the person with a hammer (!) Assess need and use for technology; Pay attention to data protection and privacy

- Many countries are developing integrated services/benefits delivery approaches. Includes an emphasis on Social Registry/Beneficiary Registry with dynamic inclusion as common gateways for multiple programs (Chile, Brazil, Turkey, Georgia, etc.)
- Integration of services may be the wave of the future (employment and social services, emergency assistance and housing)**

Trends in delivery systems

- Increasing attention among some governments and institutions to “human-centered design” considerations for delivery systems. Technology is only useful if people can use it (beneficiaries as well as administrators). Leads to a concern over institutional capability for delivery.
- ➔ **Institutions matter, along with budgets, processes and skilled human resources**

Thank you