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# Study on Shock-Responsive Social Protection in Latin America and the Caribbean

Dominican Republic case study

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*The views expressed in this publication are those of the author(s) and do not necessarily reflect the views of the World Food Programme.*

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We hope this research will contribute to strengthening the capacity of the Dominican social protection system to respond to shocks. We also hope that it will serve as evidence and inform practice throughout the Latin America and the Caribbean (LAC) region and elsewhere.

## Executive summary

### Introduction

There is increasing global recognition, within governments and their partners, of the potential linkages between social protection and disaster risk management (DRM) in responding to and mitigating shocks. In the case of the LAC region, relatively advanced and large-scale social protection systems appear to be a unique opportunity to collaborate with emergency response.

The Dominican Republic case study forms part of a wider **Study on Shock-Responsive Social Protection in LAC**, commissioned by the World Food Programme (WFP) and undertaken by Oxford Management Policy (OPM), in collaboration with WFP. The study includes a literature review of experiences in the region (Beazley *et al.*, 2016), six case studies (Ecuador, El Salvador, Guatemala, Haiti, Peru, and Dominican Republic) and a final report with the main findings and recommendations to strengthen the role of social protection in shock response in LAC.

### Non-contributory social protection in the Dominican Republic<sup>1</sup>

The Social Policy Coordination Council (GCPS), overseen by the Vice-Presidency of the Republic, is the institution responsible for coordinating all social protection efforts and implementing cash transfer programmes and consumption subsidies, among other programmes. It is composed of a trio of institutions: *Sistema Único de Beneficiarios* (SIUBEN), the *Progresando con Solidaridad* programme (PROSOLI), and the *Administradora de Subsidios Sociales* (ADESS). SIUBEN is responsible for targeting, i.e. for identifying participants, PROSOLI implements the programmes,<sup>2</sup> and ADESS makes the payments through the electronic *Progresando con Solidaridad* card. In order to use these benefits, the GCPS has created a Social Supply Network (RAS), which is a group of around 5,000 small private businesses authorised in the country.

There are other non-contributory social protection systems apart from those directly implemented by GCPS. These include the programmes of the Presidency of the Republic: *Comedores Económicos*, which sells cooked foods at a subsidised price, the Social Assistance Plan, which provides mainly in-kind assistance, and the National Institute for Comprehensive Early Childhood Care (INAIBI), which focuses on assisting early childhood. In addition, the School Meal Programme of INABIE and the Subsidised Health Scheme offer social protection services.

Unlike much of the region, non-contributory social protection programmes do not transfer cash directly to participants. GCPS transfers are made through the *Progresando con Solidaridad* card, which participants can only use in authorised stores. The programmes of the Presidency usually provide in-kind transfers (raw and cooked foods and necessity goods).

In general terms, PROSOLI's coverage has been expanding steadily in the last decade, reaching almost 900,000 households, equal to 2.6 million people, and covering 83% of the families in SIUBEN with ICV<sup>3</sup> 1 and 2. As a result of the coverage expansion, non-contributory transfers have had significant effects in reducing poverty and inequality (IDB, 2016).

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<sup>1</sup> The contributory social protection system has low coverage, meaning its potential to respond is more limited, and that is why we focus on the non-contributory system.

<sup>2</sup> For services offered by PROSOLI, see Table 2.

<sup>3</sup> The eligibility tool developed by SIUBEN is the Quality-of-Life Index (ICV). ICV is an algorithm that calculates the socioeconomic level of households based on socioeconomic characteristics and possession of physical assets. It segments households into four groups: ICV 1, 2, 3, and 4, from fewer to more resources.

The Dominican government has prioritised expanding coverage over increasing the amounts transferred. Over 25% of the population receive at least one PROSOLI transfer, which represents a similar proportion to that of other programmes in the region (IDB, 2016). However, amounts are among the lowest in the region.<sup>4</sup>

The non-contributory social protection system is characterised by a high level of fragmentation. In many cases, there are programmes with similar objectives and the same target population that, however, do not form a comprehensive strategy and have limited coordination and collaboration.

Following our methodology, we study the targeting and delivery mechanisms of the social protection system as well as its coordination with actors involved in emergency response.

## Targeting

Non-contributory social protection has been built on the principle of targeting. This is a principle common to all social assistance programmes, regardless of the targeting tool used. Following this principle, some programmes use methods based on statistical estimates, an approach that is popular in the region, while others are discretionary. There still does not exist a unique targeting tool for the whole non-contributory social protection system.

Evidence shows that the leakage and under-coverage rates of PROSOLI programmes are higher than in other countries in the region (IDB, 2016). This lack of effectiveness is attributed to SIUBEN's sample frame, the methodological limitations of ICV, and the exclusion of the undocumented population.

SIUBEN can be an important tool to plan emergency response, given its large coverage and the information it contains. It should be pointed out that although it has not been designed with this purpose and the information collected by SIUBEN and the frequency with which it is collected do not allow the ICV to capture sudden changes in living conditions, it is nevertheless a rich and unique source of information with great potential for emergency response.

Within SIUBEN, the Index of Vulnerability to Climate Shocks (IVACC) precisely aims to become a targeting tool during climate shocks. IVACC calculates the probability that a given household may become vulnerable to hurricanes, tornadoes and flooding based a range of socioeconomic characteristics.<sup>5</sup>

## Delivery

One of the strengths of the GCPS's specific transfer system is the extensive network of businesses associated with ADESS. Electronic transfers through the *Progresando con Solidaridad* card are also a valuable aspect of the GCPS delivery system. They both offer an important opportunity for use during emergency response.

The Presidency's Social Plan is the programme with the greatest administrative capacity to deliver in-kind assistance. Regarding the distribution of cooked foods, the mobile units of *Comedores Económicos* seem particularly relevant for emergency response.

## Coordination and financing

The unequal coordination with actors linked to emergency response, such as the Emergency Operations Centre (COE), for example, shows, to certain extent, the fragmentation of the social

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<sup>4</sup> PROSOLI has established an increase in the amount as of 20 August 2017.

<sup>5</sup> It does not cover other threats to which the region and country are highly exposed, such as seismic and tsunamigenic threats.

protection system. On the one hand, the programmes of the Presidency, typically the Social Plan and *Comedores Económicos*, are considered key actors in the immediate response, because of the significant roles they have traditionally played. On the other hand, the programmes of the Vice-Presidency (GCPS) are considered to be responsible for poverty reduction, not for emergency response, and although they participate in the coordination committees for emergency response, this participation seems to be rather secondary and limited to the more traditional role of development.

The main financial tools used by government after a disaster have been budgetary reallocations, internal and external indebtedness or international aid for both the emergency phase and the restoration/reconstruction phase.

## **Policy recommendations: Towards a more shock-responsive social protection system**

A relatively advanced social protection system such as the Dominican system presents significant opportunities to not only contribute to the reduction of chronic poverty but also to emergency response. While in-kind transfer programmes have played important roles in recent responses, GCPS's cash transfer programmes have not been significantly involved and have focused primarily on poverty reduction. In this context, we here present some recommendations for a more shock-responsive social protection system. The first ones refer to the social protection system meeting its regular objectives and the second group consists of recommendations for a more shock-responsive system.

### **Recommendations for strengthening the social protection system and its regular functions**

**Strengthen the national social protection system and its regular programmes, so that they can play a role in emergency response.** Regional and global experience shows that more mature systems – i.e. financed and managed by government, well established and with a broad coverage – are usually more prepared to respond (Beazley *et al.*, 2016; OPM, 2015).

Specific aspects to revise:

- **Ensure the coordination and complementarity of existing programmes.** We recommend establishing clear mandates, avoiding duplication, and making use of existing synergies between programmes with similar objectives (for example, establishing common processes when possible and sharing information regularly, at the minimum).
- **Invest in the improvement of the system and targeting processes to minimise errors of inclusion and exclusion.** In particular, we recommend:
  - **Establishing SIUBEN as the only targeting mechanism for the social protection system.** SIUBEN, in order to be cost-efficient, must be used by all programmes that provide targeted social assistance. This will, in turn, increase the system's legitimacy.
  - Revising the ICV and the SIUBEN sample frame in light of the evaluation conducted by IDB (2016).
  - Mechanisms to enter the system 'on demand' should be revised to accelerate the targeting process. In turn, we recommend adding admission windows to SIUBEN, in order to reduce exclusion and increase data updating. Thus, for example, schools, health centres, and institutions that support vulnerable families, such as National Institute for Comprehensive Early Childhood Care (INAIPI), may be granted permission to complete the SIUBEN

admission form when detecting cases of families that are not in the system or whose information needs to be updated.

- o Strengthen community participation in the targeting process. Although the main asset of SIUBEN is that it is an 'objective' tool, it is important to strengthen the role of community organisations both to improve targeting and to increase the legitimacy of the programme. An option to consider could be having community organisations validate the selection through SIUBEN and be able to suggest limited changes.
- **Revise the benefit amounts in line with the objectives of the programme.** Evaluate whether, given the available resources, it is a priority that the system continues to grow in coverage or that it has a greater impact on those who are already part of it. We recommend, particularly, that transfer amounts be made more progressive and in line with family needs; those with ICV 1 could receive greater amounts than those with ICV 2, for example.<sup>6</sup>
- **Develop a strategy for nutrition education and incentives to promote healthy eating among the participants of the *Progresando con Solidaridad* card.** The relationship established with the RAS stores and businesses offers an opportunity to make the population aware of the healthiest options suggested for consumption with the amount transferred.
- **Establish strategies and mechanisms for the inclusion of people without identity documentation (*cédula*).** We recommend establishing relations with the agencies in charge of issuing IDs, so that everyone in SIUBEN is documented.

## Recommendations for a more shock-responsive social protection system

**Prepare the social protection system so that it can continue to operate and deliver its regular assistance in emergency contexts.** Before evaluating how to respond to emergencies through the social protection system (expanding assistance to the affected population), it is essential to take the necessary measures for it to provide regular assistance during emergencies. In this sense, it is convenient to incorporate risk management strategies at different levels. Thus, for example, **ADESS should establish protocols for cases in which RAS stores run out of products or are even destroyed.**

**Define response strategies for different shock types, onsets, and magnitudes and prepare the social protection system to implement them.** Regarding response strategies, we recommend establishing protocols that describe how social protection system programmes and processes should respond. According to the characteristics of the Dominican social protection system, a base strategy, to be developed and adjusted according to the different scenarios, could employ the following logic:

**First phase:** Immediate assistance in the affected areas.

- In-kind and multi-sectoral assistance (food, water, necessity goods) to all families in the affected area, apart from rescue actions, shelter, and other activities not covered by this study.
- This assistance would be mainly provided by the Social Plan and the *Comedores Económicos*, as is currently the case.
- It is often said that this phase lasts 72 hours after the shock, but in practice this varies substantially and can last for a few weeks.

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<sup>6</sup> According to what was reported by GCPS in the final comments on this report, this recommendation has already been taken into account and about 160,000 families with ICV 1 in the 14 poorest provinces are receiving an additional amount equivalent to USD 3.70 as of August 2017, after the fieldwork of this study.

**Second phase:** Temporary **vertical** and **horizontal** expansion of PROSOLI cash transfer programmes in the affected areas.<sup>7</sup>

- This stage begins once markets start reactivating, stores are stocked up, and the social protection system is ready to scale up its services.
- It is important that this first response through cash transfers prioritises timeliness over full targeting accuracy. That is why it could be initially based on geographical targeting, in the affected areas, and avoid waiting for the results of a household survey, which requires a lot of time and resources. Geographic targeting can be complemented with SIUBEN data, and then government can decide to transfer to all those with ICV 1, 2, or 3, for example.
- Over the weeks, the government is likely to conduct a household survey, that is, a targeting process at household level to give the temporary support, and interrupt it for those who do not need it.
- Assistance to host families, as families that host other people have exceptional expenses.

These stages are not necessarily discrete, and international experience shows that in some cases they are combined according to the needs and capacity of the system. They also depend on the type of threat and the speed at which the crisis develops. We cannot forget, in areas that are highly vulnerable to climate change, such as the Dominican Republic, that slow-onset crises such as droughts have a strong impact on the livelihoods and food security of the population, generating critical humanitarian situations. In the case of droughts, for example, it is possible to combine both phases, while improving the level of accuracy of beneficiary population targeting.

Regarding the preparation of the social protection system to implement these response strategies, we suggest the following recommendations, always bearing in mind that these will depend on the type of response planned:

**Table 1: Recommendations for a shock-responsive social protection**

Process	Recommendations
Targeting	<ul style="list-style-type: none"> <li>- Develop protocols for vertical and horizontal expansions.</li> <li>- Develop protocols that allow temporary waiving of conditionalities and of penalties for non-compliance.</li> <li>- Increase the interoperability of databases and the integration of systems that feed SIUBEN.</li> <li>- Prepare the IT platform for a rapid inclusion of temporary participants.</li> <li>- Use, evaluate, and improve IVACC. Prioritise its use regarding the geo-referencing of households in hazardous areas.</li> <li>- Train staff, both at a central and local level, who will be involved in the response.</li> <li>- Incorporate into the emergency data collection tools for civil defence, housing or other actors useful data for responsive social protection targeting. Prepare the IT system to receive the corresponding data.</li> <li>- Establish communication strategies for emergency targeting.</li> </ul>
Delivery	<ul style="list-style-type: none"> <li>- Develop protocols to overcome possible shortages or destruction of RAS stores.</li> </ul>

<sup>7</sup> This phase may also consist of a 'piggybacking' response, in which the entire infrastructure of the PROSOLI programmes is used but a new programme is established, independent of the regular programmes, in order to emphasise the temporary nature of the humanitarian assistance.

	<ul style="list-style-type: none"> <li>- Define protocols for the production and distribution of temporary cards, which may have a different design to the permanent cards in order to highlight their transitory nature.</li> <li>- Consider expanding the network of stores and having stand-by agreements for responses. Evaluate adding stores that sell other types of products needed during emergencies.</li> </ul>
<p><b>Coordination</b></p>	<ul style="list-style-type: none"> <li>- Improve coordination among the main actors: COE, National Emergency Committee (CNE), Comedores Económicos, Presidency’s Social Plan, and GCPS. Ensure GCPS has a more active role in COE.</li> <li>- Use SIUBEN and IVACC as tools to strengthen coordination and cooperation with civil defence and other actors involved in emergency response.</li> <li>- The Dominican Republic can take out parametric insurance as a member of the Caribbean Catastrophe Risk Insurance Facility (CCRIF)<sup>8</sup>. This option should be seriously evaluated, since it has proven to be very useful for financing responses to natural disasters, as in the case of Haiti for example (OPM, 2017).</li> <li>- Comply with the budget allocation of 1% of current revenue for ‘public calamities’ established by the Organic Budget Law for the Public Sector No 423-06.</li> <li>- Promote the implementation of joint actions for the exchange of experiences and good practices, so that the role of both sectors (social protection and civil protection) is gradually understood and possibilities and opportunities for collaboration are explored.</li> </ul>

<sup>8</sup> [www.ccrif.org/](http://www.ccrif.org/)



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## List of abbreviations

ADESS	Social Subsidies Administration
BEEP	<i>Bono Escolar Estudiando Progreso</i>
Cat DDO	Catastrophe Deferred Drawdown Option
CCRIF	Caribbean Catastrophe Risk Insurance Facility
CCT	Conditional cash transfer
CEP	<i>Comer es Primero</i>
CNE	National Emergency Committee
CNPMR	National Council for Prevention, Mitigation and Response to Disaster
COE	Emergency Operations Centre
CCRIF	Caribbean Catastrophe Risk Insurance Facility
DIGEPEP	General Directorate of Special Programmes of the Presidency
DRM	Disaster risk management
ECLAC	United Nations Economic Commission for LAC
GCPS	Social Policy Coordination Council
GDP	Gross domestic product
ICV	Quality-of-Life Index
IDB	International American Development Bank
ILAE	<i>Incentivo a la Asistencia Escolar</i>
INABIE	National Institute for Student Welfare
INAIFI	National Institute for Comprehensive Early Childhood Care
ISDR	International Strategy for Disaster Reduction
IVACC	Index of Vulnerability to Climate Shocks
LAC	Latin America and the Caribbean
MEPYD	Ministry of Economy, Planning and Development
NGO	Non-governmental organisation
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OPM	Oxford Policy Management
PROSOLI	<i>Progresando con Solidaridad</i>

PROVEE	<i>Programa de Protección a la Vejez en Extrema Pobreza</i>
RAS	Social Supply Network
RSS	<i>Régimen Subsidiado de Salud</i>
SeNaSa	National Health Insurance
SIUBEN	<i>Sistema Único de Beneficiarios</i>
SPIAC-B	Social Protection Inter-Agency Cooperation Board
UCT	Unconditional cash transfer
UNDP	United Nations Development Programme
UNHCR	United Nations High Commissioner for Refugees
WFP	World Food Programme

# 1 Introduction

There is increasing global recognition of the potential linkages between social protection and DRM in responding to and mitigating shocks. This recognition has been clearly expressed, for example, in the 2016 World Humanitarian Summit by SPIAC-B's<sup>9</sup> commitment to 'support the further expansion and strengthening of social protection systems to continue to address chronic vulnerabilities and to scale up the utilisation of social protection as a means of responding to shocks and protracted crises.' In the same line, the 2030 Agenda for Sustainable Development, approved by the UN in September 2015, clearly points toward the creation of social protection systems that allow all people to enjoy a basic standard of living.

In LAC, natural disasters<sup>10</sup> have occurred increasingly frequently since the 1960s: there were 19 disasters per year in the 1960s and 68 per year in the first decade of the twenty-first century (UN Economic Commission for LAC [ECLAC], 2015). For this reason, the adoption of mitigation measures to reduce the population's exposure to natural disasters and to restore infrastructure, together with economic and social measures, is becoming increasingly essential.

Meanwhile, social protection systems in LAC have evolved and expanded substantially in the last few decades, with, for example, the percentage of gross domestic product (GDP) allocated to public social investment growing from 15% in 2000 to 19.1% in 2012 (ECLAC, 2015). Cash transfers have become part of virtually every social protection system in the developing world (World Bank, 2015b), and LAC was a pioneer in developing sophisticated programmes with multiple objectives, such as conditional cash transfers (CCTs), which have been replicated worldwide. The proportion of the population benefitting from CCTs in LAC, for example, increased from 5.7% to 21.1% between 2000 and 2012 (ECLAC, 2015).

In this light, fairly advanced social protection systems and large-scale safety nets seem to provide a unique opportunity to support shock response in LAC. However, social protection systems can involve conflicting objectives, target populations and operational processes when compared with humanitarian interventions, which can impede their ability to play a role in accommodating additional demand for assistance during an emergency.

The Dominican Republic case study forms part of a wider **Study on Shock-Responsive Social Protection in LAC**, commissioned by WFP and undertaken by OPM in collaboration with WFP. The study includes a literature review of experiences in the region (Beazley *et al.*, 2016), six case studies (Ecuador, El Salvador, Guatemala, Haiti, Peru, and Dominican Republic) and a final report with the main findings and recommendations to strengthen the role of social protection in shock response in LAC.

The objective of the study is to generate evidence and inform practice for improved emergency preparedness and response in LAC linked to more flexible national social protection systems. The

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<sup>9</sup> The Social Protection Inter-Agency Cooperation Board (SPIAC-B) is an inter-agency coordination mechanism to enhance global coordination and advocacy on social protection issues and to coordinate international cooperation in country demand-driven actions. SPIAC's board is chaired by the World Bank and ILO and includes representatives of ADB, IFAD, IMF, ISSA, FAO, OECD, UN-DESA, UNDP, UNESCO, UN-HABITAT, UNICEF, UN Women, WHO, WFP, and others.

<sup>10</sup> According to the International Strategy for Disaster Reduction (ISDR, 2009), disaster is defined as a serious interruption in the functioning of a community or society that causes a large number of deaths, as well as losses and material, economic and environmental impacts that surpass the capacity of the affected community or society to cope with the situation through the use of their own resources. It is often described as the result of the combination of exposure to a threat, the conditions of vulnerability present, and insufficient capabilities or measures to reduce or cope with the possible negative consequences.

main research question for the study is: **What factors enable social protection systems to be more responsive<sup>11</sup> to shocks?**

Following this short introduction, the next section in this case study briefly frames the context in terms of poverty and vulnerability in the Dominican Republic. Section 3 presents the theoretical framework employed and the methodology, while Section 4 studies the non-contributory social protection system. Section 5 introduces some recommendations to improve the responsiveness of the Dominican social protection system to emergencies and, finally, Section 6 summarises the most important aspects of this case study.

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<sup>11</sup> The term *responsive* is used to describe the reaction of social protection systems to exogenous risks or shocks that affect people's welfare (Beazley, 2016).

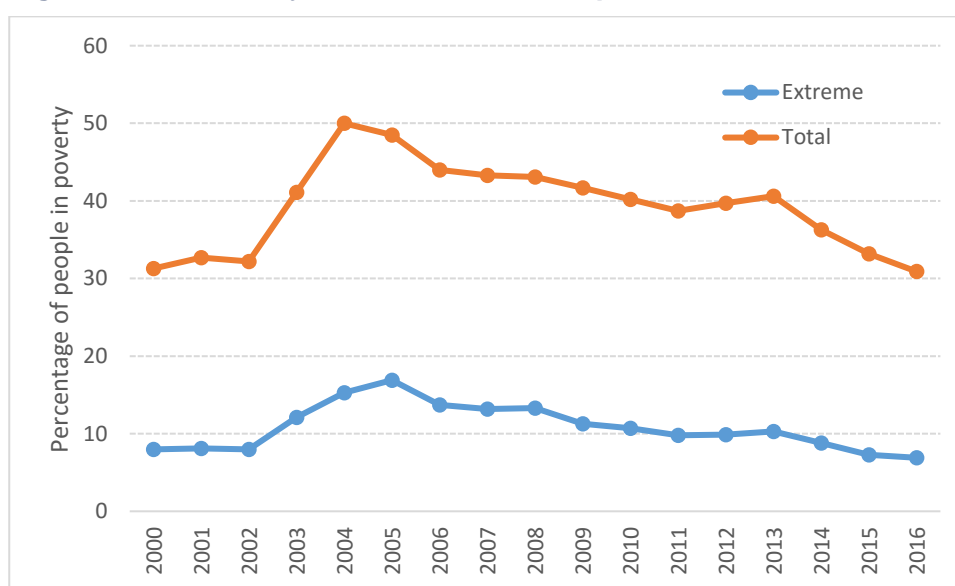
## 2 Poverty and vulnerability in the Dominican Republic

**The Dominican Republic has seen record levels of growth in the last 25 years** and is one of the countries in the region with the highest sustained economic growth (World Bank, 2016). Between 1992 and 2016, the real GDP showed an average annual growth rate of 5.5%.

**However, this growth has not been inclusive** (World Bank, 2016). Despite the sustained growth, poverty is only moderately below the levels of 15 years ago. The 2003/04 crisis had enormous effects on the levels of poverty in the country, which were reversed only in recent years. Thus, in 2016, 30.9% of the population was below the monetary poverty line and 6.9% below the extreme poverty line (Ministry of Economy, Planning and Development [MEPYD], 2016).

**Most recently, poverty levels have been reducing more rapidly.** Total poverty fell 10 percentage points from March 2013 to the same month in 2016.

**Figure 1: Poverty in the Dominican Republic, 2000–2016**



Source: MEPYD.

**The Dominican Republic is highly exposed to different types of shocks.** The number of natural events that impact the country has been growing in the past 50 years, from an event every two years in the 1960s to almost one event per year in the 1990s, to 2.6 events per year in the 2000s (World Bank, 2015). Storms and floods are the most frequent events, but earthquakes and droughts have also recently affected the country. According to the Germanwatch Global Climate Risk Index 2017, the Dominican Republic ranks as the 11th country most affected by climate events (among 181 countries).

In addition to natural disasters, the country has been affected by epidemiological shocks (e.g. Zika virus and cholera) and by economic shocks, such as the 2003/04 crisis<sup>12</sup>. In fact, the shock with the greatest impact on the poorest 40% of the population in the last 15 years was precisely the 2003/04 crisis (World Bank, 2016). The country took a decade to reverse its effects on poverty levels.

Despite the progress, the continuously high levels of poverty and vulnerability show the need for a robust social protection system with a broad coverage.

<sup>12</sup> Financial crisis triggered by the collapse of the second-largest private bank in the country, leading to a large fiscal deficit and high levels of inflation.

### 3 Research methodology

In this section, we present a framework that helps understanding the two key dimensions of a shock-responsive social protection scheme: system preparedness and responsiveness. We also present the overarching research questions and describe briefly the tools and fieldwork.

#### 3.1 Theoretical framework

##### 3.1.1 System preparedness

In this study, we analyse the level of preparedness of the social protection system based on three aspects that are essential for a prompt and effective response: **targeting system**, **delivery system** and **coordination and financing**. Below we describe each of these in turn. Although these are not the only three processes involved in effective preparedness, both international experience and the relevant literature highlight how crucial they are (Bastagli, 2004; OPM, 2016).

**Figure 2: Typology of system preparedness for shock-responsive social protection**



Source: Author.

#### Targeting

Social protection programmes tend to rely on a variety of targeting mechanisms, including demographic, geographic, and poverty targeting. Many of these mechanisms are designed to detect well-established conditions – for example, chronic poverty or belonging to a certain age group – and rely on the use of administrative registries and household surveys. Consequently, they are not conceived as tools to detect sudden changes to well-being and livelihoods. In order to be effective in emergency response, it is necessary to engage during the planning and preparation phase in an assessment of existing targeting tools, then adapting them or creating new complementary systems, to be able to reach recipients affected by different kinds of shock.

#### Delivery

Rapid delivery of either cash or in-kind benefits is of course crucial for effective support. During emergencies, the capacity to deliver faces challenges due to the urgency of the situation, the constraints imposed by the particular shock (such as infrastructure collapse), and the coordination of different actors (Bastagli, 2014).

Delivery mechanisms implemented by social protection schemes typically include manual transfers, delivery through a banking system, mobile money and other types of e-payments. Some of these mechanisms – e-payments, for example – have the potential to be rapidly scaled up during emergencies. However, these systems need to be developed prior to the crisis.



## Coordination and financing

Preparedness should also include a significant level of planning and coordination among the actors involved in emergency response. This includes not only actors in the social protection field but also, and mainly, those working in DRM and humanitarian aid. This involves international, national and subnational levels, and government and non-government organisations.

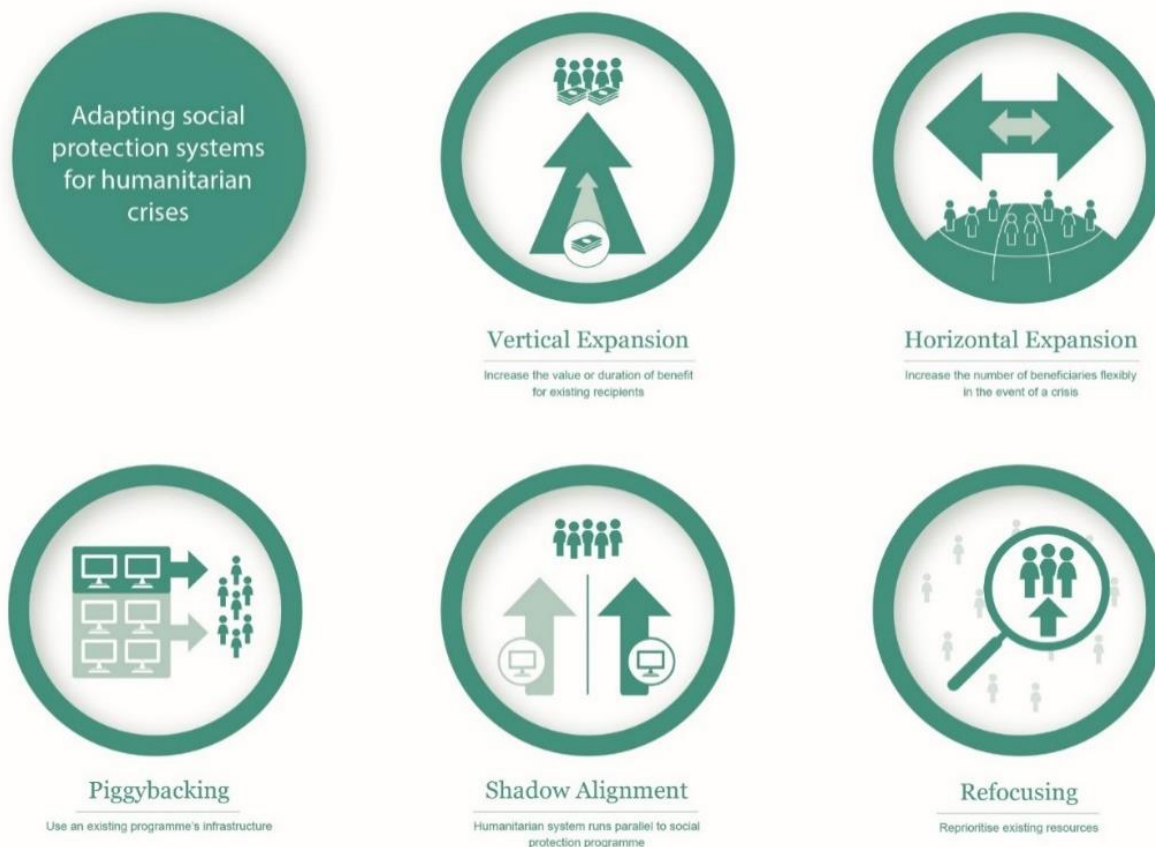
However, the challenge of achieving coordination among these different actors should not be underestimated. The social protection and DRM sectors not only have different objectives and target populations (with some areas of intersection, though not all areas intersect) and different methodologies and traditions, but most importantly they also involve different actors and institutional interests.

### 3.1.2 System response

When policy-makers consider the use of a social protection system to address emergency needs, there are a number of strategies that they may employ to scale up the overall level of support that the system provides to vulnerable people. Based on OPM (2015) we tentatively consider five main types of scale-up. These can be used in combination.

1. **Vertical expansion:** increasing the benefit value or duration of an existing programme or system:
  - adjustment of transfer amounts/values;
  - introduction of extraordinary payments or transfers;
2. **Horizontal expansion:** adding new recipients to an existing programme or system:
  - extension of the geographical coverage of an existing programme or system;
  - extraordinary enrolment campaign;
  - modifications of eligibility criteria;
  - relaxation of requirements/conditionalities;
3. **Piggybacking:** using a social protection intervention's administrative framework, but running the shock response programme separately:
  - introduction of a new policy by the government, with or without support from humanitarian actors;
4. **Shadow alignment:** developing a parallel humanitarian system that aligns as best as possible with the national current or possible future social protection programme; and
5. **Refocusing:** adjusting the social protection system to refocus assistance on groups most vulnerable to the shock.

**Figure 3: Typology of shock-responsive social protection**



Source: OPM (2015).

### 3.2 Overarching research questions

The main research question for the study is: **What factors enable social protection systems to be more responsive to shocks?** With this in mind, we have developed a number of overarching questions to guide the analysis:

- What relevant national and local laws and regulations and policies exist in relation to shock-responsive social protection?
- What priorities does the national social protection strategy signal, for example in addressing poverty, vulnerability, resilience, etc.? Does it offer a role for shock response?
- What targeting mechanisms are used by the largest social protection programmes? How are recipients identified? How frequently? Does a national database exist? Is it integrated with other databases?
- How are the benefits of the main social protection programmes delivered (both cash and in-kind)?
- What design and implementation features of the social protection system have elements of flexibility and adaptability to facilitate rapid and adequate shock response?
- What is the evidence of the effectiveness – in terms of promptness and adequacy (for example, coverage and transfer levels) – of social protection support in the event of each of the major shocks identified?
- Has there been any recent experience of coordination between, or integration of, social protection and DRM policies?

- Is there space for dialogue and collaboration between these two sectors? How could this dialogue be promoted?

### 3.3 Research tools and fieldwork

The research in the Dominican Republic consisted of three phases: a literature review, fieldwork, and analysis. In relation to the first phase, we conducted a thorough review of legislation, policy plans and strategies, manuals of operations, periodic reports, and programme reviews, assessments and evaluations. Our theoretical framework and the research questions presented above guided the review. The literature review of experiences in LAC conducted as part of this assignment (Beazley *et al.*, 2016) and the global literature review conducted by OPM (OPM, 2016) informed this review.

Fieldwork was conducted from 30 May to 8 June 2017. The research team was led by Rodolfo Beazley (OPM) and integrated by Francesca de Ceglie (WFP Regional Office for LAC). The research was conducted in Santo Domingo and the province of Montecristi, which was severely affected by floods in 2016.<sup>13</sup> The research tools used were:

- **Key informant interviews:** We interviewed key informants from PROSOLI, ADESS, SIUBEN, *Comedores Económicos*, Presidency's Social Plan, INABIE, INAIPI, the Ministry of Public Health, the National Health Insurance (SeNaSa), DIGEPEP, COE, civil society organisations such as Oxfam, Save the Children and Doctors of the World, and cooperation organisations such as the UNDP and the IDB. These interviews serve to triangulate findings from other data sources. Data was collected through semi-structured interviews, supplemented with selected tools.
- **Montecristi case study:** Semi-structured interviews were conducted in Montecristi in homes affected by the floods of 2016. Participants and non-participants of PROSOLI were interviewed. Community leaders were also interviewed, as well as the governor and the delegations of social protection and civil protection programmes in Montecristi.

The list of key informants interviewed can be found in Annex A.

The third phase consisted of analysing the data collected and findings from the literature review and answering the research questions. Preliminary findings were shared with WFP staff of the regional office and other offices in the region in order to gather feedback to help identify further areas to be covered. This report, which has been peer reviewed, is the output of this research.

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<sup>13</sup> According to the situation report produced by the COE regarding the impact at a national level, a total of 3,715 homes were affected, with 25 of those being destroyed, 37,809 people were displaced to relatives' homes, and 1,252 to official shelters. There were no deaths (report on 6 November 2016). Montecristi was also affected by Hurricanes Irma and María in 2017, events that occurred after the field visit.

## 4 Non-contributory social protection in the Dominican Republic

**The Dominican social security system (or contributory social protection) has low coverage.**

This system is built on two pillars: a pillar of individual capitalisation administered by seven pension fund administrators and another pillar with allocation funds for civil servants. Although the coverage of people contributing to the pension system has increased in recent years, today only 32.3% of the workforce is covered (Fundación Juan Bosch *et al.*, 2016).

Due to the limited coverage of the social security system, in this study we have focused on the non-contributory component. Although other countries in the region have scaled up contributory systems to support people affected by shocks (see Beazley *et al.*, 2016), a system with such low coverage, and even lower when it comes to the poor and vulnerable, presents fewer opportunities for emergency response. That is why we have focused on the non-contributory system in this case.

The main programmes and entities of the non-contributory social protection system are described below. Then, we present a brief analysis of the system characteristics and performance.

### 4.1 Main programmes of the non-contributory social protection system

The GCPS is the main entity in terms of non-contributory social protection. It is composed of a trio of institutions: SIUBEN, PROSOLI, and ADESS.

**SIUBEN** is the entity in charge of identifying and characterising the eligible population for the benefits of non-contributory social protection. The eligibility tool developed by SIUBEN is the ICV. This is an algorithm that calculates the socioeconomic level of households based on socioeconomic characteristics and ownership of physical assets. It divides households into four groups: ICV 1, 2, 3, and 4, from fewer to more resources.

By December 2016, 8,573,152 people were registered in SIUBEN, which represents 85.7% of the country's population. According to its mandate, SIUBEN must carry out a socioeconomic census every four years to guarantee the validity of the information of each household. The surveyed areas are determined based on the national poverty map that uses data from the national census. Between census rounds, households that want to apply to SIUBEN or update their information can do so at the entity's offices. A new census will be carried out in 2017.

**PROSOLI** implements the following types of targeted transfer programmes: CCTs, unconditional cash transfers (UCTs), and subsidies. The following table describes these transfer programmes. It is worth noting that PROSOLI implements other programmes too, from technical and vocational training to family support and agricultural production support, among others. We focus here on the transfer programmes that are most relevant to the object of study.

**Table 2: Transfer programmes – PROSOLI**

Programme	Type of transfer	Conditionality	Eligibility
<i>Comer Es Primero</i> (CEP)	Conditional	Pregnant women and children under five must comply with health conditionalities	ICV 1 and 2
<i>Incentivo a la Asistencia Escolar</i> (ILAE, Incentive for School Attendance)	Conditional	Households with members registered in school should have 80% of school attendance – elementary level	ICV 1 and 2 Children aged 5–21
<i>Bono Escolar Estudiando Progreso</i> (BEEP, Progressing by Studying)	Conditional	School attendance – intermediate	ICV 1 and 2 Children under 21
<i>Bono Gas</i>	Subsidy	-	ICV 1, 2 and 3
<i>Bono Luz</i>	Subsidy	-	ICV 1, 2 and 3
<i>Programa de Protección a la Vejez en Extrema Pobreza</i> (PROVEE, Programme for the Protection of the Elderly in Extreme Poverty)	Unconditional	-	ICV 1 and 2 65 years and over No pension nor work

Sources: IDB (2016) and SIUBEN (2016).

**ADESS**'s main function is to make the payment of transfers and subsidies to participants of social assistance schemes. The PROSOLI card is the electronic means by which participants receive the different monetary support. To use these benefits, there is the RAS, a group of authorised stores nationwide. ADESS is responsible for supervising and verifying contract compliance of the establishments affiliated to the network. The types of businesses affiliated to the RAS are: i) grocery stores or mini-markets specialised in selling goods, mainly food, where the CEP and ILAE benefits can be used; ii) liquefied petroleum gas filling plants that sell this gas and implement the subsidies of the *Bono Gas* programme; and iii) points of service payment for electricity bills, which can be paid with the *Bono Luz* subsidy. ADESS includes a total of 5,759 active stores.

There is, on the other hand, a large number of non-contributory programmes outside the GCPS. The table below presents those that are relevant for the purpose of this study.

**Table 3: Other non-contributory social protection programmes**

Programme	Institution	Description
<i>Régimen Subsidiado de Salud</i> (RSS, Subsidised Health Scheme)	SeNaSa	SeNaSa is the public health insurance administrator. It manages the RSS, which is the health insurance scheme for the poor in the country. Eligibility for RSS is based on SIUBEN's register.
Social Assistance Plan <sup>14</sup>	Presidency	It provides mainly in-kind assistance (raw foods and necessity goods) to poor and vulnerable households. Transfers are made through governorates or civil society organisations. It does not have its own household targeting mechanism, nor does it use SIUBEN. It provides this assistance as emergency response, during Christmas (Christmas boxes), and continuously. It also provides health and housing assistance.

<sup>14</sup> [www.pasp.gob.do/site/](http://www.pasp.gob.do/site/)

<i>Comedores Económicos</i>	Presidency	Sells cooked foods at a subsidised price. It operates on demand, without targeting. There are 40 mobile units ('mobile canteens') that move to areas where they are needed, particularly during emergencies. It has also delivered raw foods during emergencies.
School Meal Programme <sup>15</sup>	INABIE	<b>Extended-day mode:</b> It includes the delivery of food rations in three moments: breakfast, lunch, and afternoon snack. There are other modalities (PAE Fronterizo, REAL and Urbano), which also provide raw products.
Uniforms and School Supplies Programme <sup>16</sup>	INABIE	Delivery of basic school equipment kits to students in vulnerable conditions. The selection of schools is done through the national poverty map and, within them, student targeting is done by school directors.
<i>Quisqueya Sin Miseria</i> <sup>17</sup>	Presidency	It is composed of three programmes: The Quisqueya Empieza Contigo programme, aimed at the Dominican population of early childhood (0 to 5 years) and implemented by INAIPI, <sup>18</sup> as a functionally and territorially decentralised entity, ascribed to the Ministry of Education. This component includes implementing the Comprehensive Early Childhood Care Centre and child and family care centres, located in selected vulnerable territories based on the national poverty map. For individual targeting, information about households is collected and an algorithm is applied. SIUBEN is not used for selecting households. The Quisqueya Aprende Contigo programme consists of the implementation of the national literacy programme, and Quisqueya Somos Todos elaborates and implements comprehensive local development programmes.

## 4.2 System characteristics and performance

**Non-contributory social protection programmes are scattered among different government entities. GCPS, overseen by the Vice-Presidency of the Republic, is the institution responsible for coordinating all social protection efforts,** implementing CCT programmes, UCTs and subsidies on consumption. The Presidency of the Republic, for its part, runs various social assistance programmes, from in-kind transfers to early childhood food and care, among others. Nevertheless, the Dominican non-contributory social protection system presents coordination challenges. In many cases, there are programmes with similar objectives and the same target population, which, however, do not form a comprehensive strategy and have limited coordination and collaboration.

**Unlike much of the region, non-contributory social protection programmes do not transfer cash directly to participants.** GCPS transfers are made through the *Progresando con Solidaridad* card, which participants can only use in authorised stores. The programmes of the Presidency and some ministries usually provide in-kind transfers (raw and cooked foods and necessity goods). In general, there is a perception among policy-makers that the delivery of cash would not be appropriate in the Dominican case, since they fear households will use it inappropriately (for example, for alcohol).<sup>19</sup> International evidence does not support this premise and shows that, when cash transfer programmes are well designed and implemented, the

<sup>15</sup> [www.inabie.gob.do/index.php/programas/programa-de-alimentacion-escolar-pae/sobre-pae](http://www.inabie.gob.do/index.php/programas/programa-de-alimentacion-escolar-pae/sobre-pae)

<sup>16</sup> [www.inabie.gob.do/index.php/programas/programa-de-servicio-social/utilleria-escolar](http://www.inabie.gob.do/index.php/programas/programa-de-servicio-social/utilleria-escolar)

<sup>17</sup> <http://digepep.gob.do/quisqueya-sin-miseria>

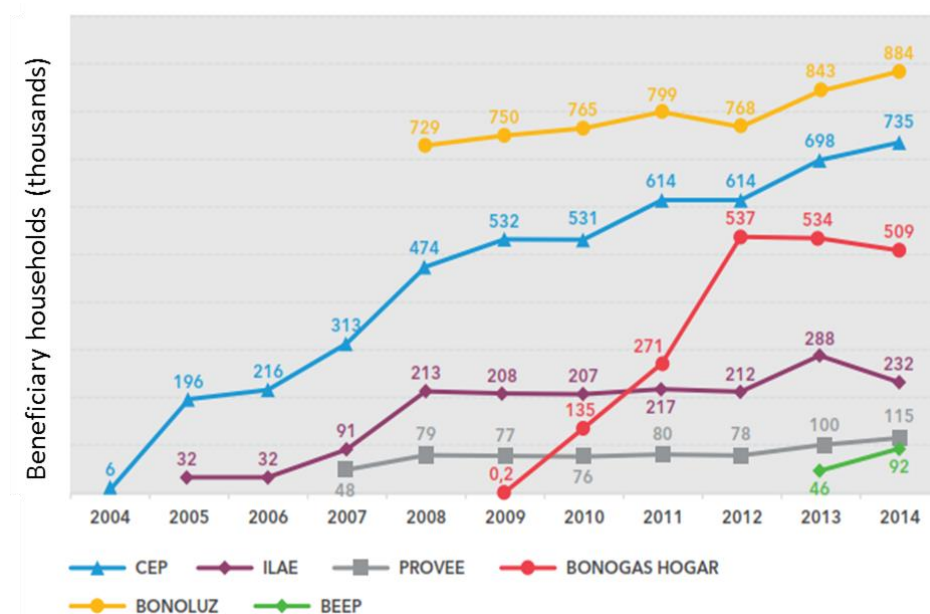
<sup>18</sup> [www.inaipi.gob.do/](http://www.inaipi.gob.do/)

<sup>19</sup> Interviews with policy-makers of different government entities.

proportion of benefits allocated to alcohol, tobacco and other products considered inappropriate is not significant (Evans and Popova, 2014).

**In general terms, the coverage of PROSOLI has been expanding steadily in the last decade, reaching almost 900,000 households and covering 83% of the families in SIUBEN with ICV 1 and 2.** The base programme, CEP, has grown steadily and, together with the *Bono Luz* and the *Bono Gas*, constitutes the main support network of GCPS. ILAE, BEEP, and PROVEE have a much lower coverage and a lower growth.

**Figure 4: PROSOLI programmes' coverage**



Source: IDB (2016). Data from ADESS.

As a result of the coverage expansion, **non-contributory transfers have had significant effects in reducing poverty and inequality.** According to IDB (2016), 'the poverty rate in 2014 would have been 2.3 percentage points (6%) higher and the indigence rate would have been 1.9 percentage points (24%) higher in the absence of the targeted transfers. The effects on inequality are similar.'

**The Dominican government has prioritised expanding coverage over increasing the amounts of transfers.** Just over 25% of the population receives at least one PROSOLI transfer, which represents a similar proportion to that of other programmes in the region (IDB, 2016). However, amounts are among the lowest in the region, limiting the impact of transfers. The basic monthly amount corresponding to CEP is RD\$ 825, equivalent to USD 17.5. These amounts were not updated for years, until recently, when PROSOLI established an increase in the amount of CEP, as of 20 August 2017, only for families with ICV 1 living in the 14 poorest provinces in the country, in the *Progresando Unidos* programme. For those families, the amount transferred will be RD\$ 1,000 according to PROSOLI.

**The PROSOLI transfer scheme is complex and less progressive than it could be.** Through a single card, households receive different subsidies and conditional and unconditional transfers. However, it may be difficult for households with similar characteristics and needs to understand why some receive certain transfers while others receive different ones. In turn, households in ICV 1 (extremely poor) and ICV 2 (poor) receive the same benefits and amounts although, according to the targeting methodology, the former have more needs than the latter. This is starting to be addressed with the recent increase for families with ICV 1 in the poorest provinces.

Following our methodology, in the next sections we describe the targeting and delivery mechanisms of the social protection system as well as its coordination with actors involved in emergency response and its financing mechanisms.

#### 4.2.1 Targeting

**Non-contributory social protection has been built on the principle of targeting.** This is a principle common to all social assistance programmes, regardless of the targeting tool used. Thus, for example, the percentage of social expenditure allocated according to the SIUBEN's targeting criteria increased from 6.2% in 2005 to 57% in 2013 (IDB, 2016).

**Following the principle of targeting, some programmes use methods based on statistical estimates, which are popular in the region, while others are discretionary.** There still does not exist a unique targeting tool for the whole non-contributory social protection system. Although SIUBEN is the most used tool and is aimed to become the central one, since not only GCPS programmes use it but also SeNaSa, it is not the only statistical method. Thus, for example, INAIPI has its own data collection mechanism and its own statistical algorithm for targeting.<sup>20</sup> Other programmes are more discretionary in their targeting, such as the Social Plan and the delivery of INABIE's kits.<sup>21</sup>

An evaluation by the IDB on the targeting of **PROSOLI** programmes shows that **the leakage and under-coverage rates are higher than in other countries in the region** (IDB, 2016). The report attributes the lack of effectiveness to SIUBEN's sample frame, the methodological limitations of ICV, and the exclusion of the undocumented population. This methodology requires, in turn, a frequent updating of data, which implies a great effort since SIUBEN covers 85% of the population. The last survey was carried out in 2011, and in the second half of 2017 a new sweep will be made. Between surveys, SIUBEN receives applications on demand. However, this process, particularly the verification of housing conditions, may take a few months or more, depending on the case. Also, registering for SIUBEN does not imply that, even if eligible, the family will automatically receive PROSOLI transfers. This depends on the budgetary allocations and regional capacities of the programme, so an eligible household may have to wait more than a year after registering in SIUBEN to receive assistance.

**SIUBEN can be an important tool to plan emergency response, given its large coverage and the information it contains.** It should be pointed out that although it has not been designed with this purpose and although the information collected by SIUBEN and the frequency in which it is collected does not allow the ICV to capture sudden changes in living conditions, it is nevertheless a rich and unique source of information with great potential for emergency response. Within SIUBEN, the IVACC aims to become a targeting tool during climate shocks.<sup>22</sup>

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<sup>20</sup> At the time this report was being finalised, INAIPI informed us that it is signing an agreement with SIUBEN. We were not able to access it.

<sup>21</sup> INABIE first performs geographical targeting, using the national poverty map, and, as reported by the authorities interviewed, SIUBEN data. In any case, individual targeting of students is carried out by school directors at their discretion, based on their knowledge of the community.

<sup>22</sup> As a result of Hurricanes Irma and María during the second half of 2017, projections were made on the impact at the municipal level using SIUBEN tools.



**Box 1: IVACC**

IVACC uses SIUBEN data to calculate the probability that a given household may become vulnerable to hurricanes, tornadoes and flooding based a range of socioeconomic characteristics. IVACC includes three dimensions: i) housing characteristics (walls, ceiling); ii) estimated income; and iii) proximity to a hazardous natural element (river, stream or ravine). IVACC helps map out the areas most at risk from natural disasters, thus making it possible to focus state action toward the more vulnerable households. IVACC can be used by local governments and rescue authorities for the preparation of mitigation plans and responses to natural disasters. It has the potential to serve as a strategic asset in the design of the national DRM plans.

**IVACC's main strength seems to be the possibility of geo-referencing all SIUBEN households.**

Given the broad coverage of SIUBEN (85% of the population), it represents a very valuable tool for mitigation and responses to disasters. However, this index seems to have some limitations:

- Calculating the probability that a particular household has to be affected may lead to targeting at a household level, when geographical targeting may be more relevant in a first response. That is, between two different dwellings in the area affected by the disaster, the index gives a higher value to the one with more precarious or vulnerable walls and ceiling. Using this index to target the response through the social protection system may lead to the exclusion of a household in the affected area under the assumption that given the condition of their dwelling before the shock it does not need assistance. It may be more relevant to use the IVACC to identify all the households in the affected area, together with the demographic characteristics that would be useful for the emergency plans, contingency and risk management, than to make a precise targeting.
- In the interview with COE conducted for this study, it was indicated that this coordinating body does not use information from SIUBEN or IVACC in their planning of response strategies, which reduces the utility of this novel index.

Source: Aristy-Escuder (n.d.).

**4.2.2 Delivery**

One of the strengths of the GCPS's transfer system is the extensive network of stores associated with ADESS. This network, with national coverage, includes a total of 5,759 stores. At the time this report was written, ADESS is planning to expand its coverage.

Electronic transfers through the *Progresando con Solidaridad* card are also a valuable aspect of the GCPS delivery system. This mechanism increases timeliness and transparency.

**The network of stores and the electronic transfers offer an important opportunity for use during emergency response.** These could enable a quick and transparent response with a great scope. This point is developed in the next section.

**Figure 5: *Progresando con Solidaridad* card**



**The Presidency's Social Plan is the programme with the greatest administrative capacity to deliver in-kind assistance.** This capacity has been demonstrated, in particular, in recent emergency responses such as, for example, the 2016 floods and the 2017 hurricanes.

**Regarding the distribution of cooked meals, the mobile units of *Comedores Económicos* seem particularly relevant for emergency response.** These mobile kitchens have been used in both the 2016 floods and in the response to Hurricane Matthew in Haiti, and they have been highly valued by informants to this study. *Comedores Económicos* currently has 40 mobile kitchens.<sup>23</sup>

### 4.2.3 Coordination and financing

The coordination between social protection institutions and actors linked to emergency response, such as COE, for example, shows the fragmentation of the national social protection system. On the one hand, the programmes of the Presidency, typically the Social Plan and *Comedores Económicos*, are considered important actors in the immediate response. On the other hand, the programmes of the Vice-Presidency (GCPS) are considered by COE as responsible for poverty reduction, not for emergency response, and although they participate in the coordination committees for emergency response, this participation seems to be rather secondary and limited to the more traditional role of development.

Naturally, since GCPS programmes were not designed to respond to emergencies, other actors do not see them as part of a comprehensive response. Resultantly, systematic coordination efforts have been very limited. Even when it comes to tools such as SIUBEN and IVACC, which have great potential in emergency response, they have played secondary roles.

Regarding the financing of emergency responses, the Dominican Republic has two types of strategies, which are not directly linked to the social protection system. These are, on the one hand, a series of contingency tools and, on the other hand, *ex post* strategies such as, for example, budgetary reallocations. The box below describes the financing tools for disasters.

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<sup>23</sup> *Comedores Económicos* played an important role in the response to Hurricanes Irma and María, which occurred in the second half of 2017, some months after this study's fieldwork.

## Box 2: Financing tools for disasters in Dominican Republic

The Dominican government has the following financing tools to respond to natural disasters:

- A contingency budgetary tool that allocates 1% of the current revenues for 'public calamities'. However, the corresponding total is rarely assigned.
- A USD 150 million loan approved in September 2017 by the World Bank to provide immediate financing after a disaster or a public health emergency. It is a deferred payment for catastrophes (i.e. a Cat DDO – a Catastrophe Deferred Drawdown Option). It provides immediate financing without having to spend the resources for social and development programmes. The Cat DDO is a flexible loan with a 19-year final expiration, including a grace period of 12 years.
- All annual budgets include permission to expand the budget by 0.5% of nominal GDP in case of 'public calamities or emergencies'.

The main financial tools used by the government after a disaster have been **budgetary reallocations, internal and external indebtedness or international aid** for both the emergency phase and the restoration/reconstruction phase.

- Budget reallocations are often the chosen tool for releasing resources in the event of disasters. When the President of the Republic declares an emergency (national or provincial), the National Council for Prevention, Mitigation and Response to Disaster (CNPMPR) meets and some sectoral ministries attend with a survey and a first assessment of the economic damage caused by the disaster. Based on the government's political priorities and the information provided, the necessary inter-ministerial budget reallocations are discussed and agreed upon.
- If the disaster's magnitude requires expanding the total expenditure and/or revenues assigned by the Budget Law, those modifications need to be approved by Congress, which implies more time for fund liquidity.
- International donations represent a useful complementary tool, but the amount that can be mobilised is unpredictable. In general, donations depend on the intensity of the event and focus on the emergency response phase. The amounts that can be obtained hardly cover all of the financial needs: in the case of Storms Noel and Olga in 2007, for example, the international aid amount received through the United Nations system has been estimated at more than USD 18 million (Flash Appeal, 2007), which represents less than 5% of the USD 420 million of damages and losses caused by the two storms. In turn, international organisations cannot disburse funds or intervene without the President's official declaration of a state of national emergency.

Source: World Bank (2015).

## 5 Policy recommendations: Towards a more shock-responsive social protection system

A relatively advanced social protection system such as the Dominican system presents significant opportunities to not only contribute to the reduction of chronic poverty but also to emergency response. **While in-kind transfer programmes have played important roles in recent responses, GCPS' cash transfer programmes have not been significantly involved and have focused primarily on poverty reduction.**

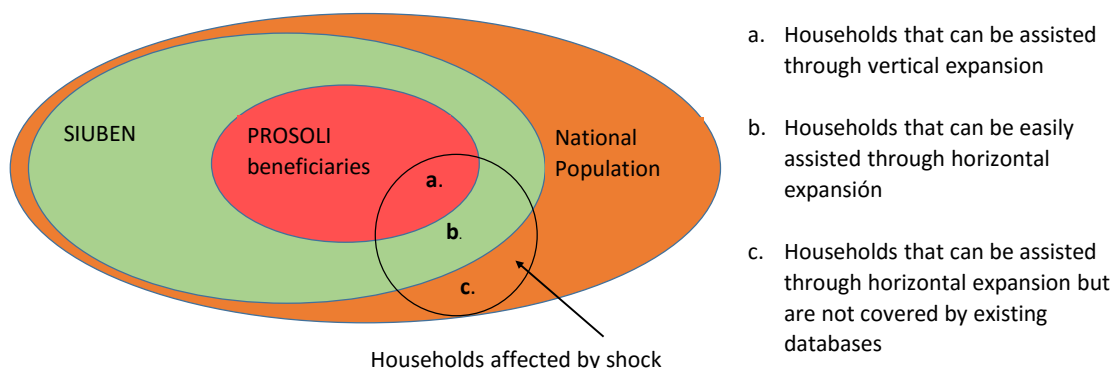
**However, there are signs that show the desire to use GCPS's programmes in the response to future emergencies.** First, there is a significant precedent: in 2008, the *Solidaridad* programme responded to the effects of storms Olga and Noel by horizontally expanding<sup>24</sup> and temporarily incorporating affected families into the programme (UNDP, 2015). It was also established that the households temporarily incorporated that met the eligibility criteria would be kept in the programme as regular participants. Unfortunately, this experience has not been documented and the existing information regarding the number of families assisted with this type of response varies according to the informant. In any case, regardless of the magnitude of the horizontal expansion, it is an important precedent. Secondly, GCPS is currently establishing cooperation agreements with WFP and UNDP to strengthen response capacity and establish protocols for financing expansions in the response to large-scale emergencies. Third, GCPS's creation of the IVACC shows the will to use the main non-contributory social protection targeting tool, SIUBEN, for targeting during emergencies.

Before we outline our recommendations to make the Dominican social protection system a more responsive system, it is important to describe the main challenge that these systems face in emergency response. First, **the root of the targeting challenge is the fact that households potentially affected by shocks are not necessarily participants of an existing social protection programme or already included in SIUBEN or other registries** (see Figure 6 below). Consequently, despite having strong targeting programmes and systems, horizontal expansion would be necessary anyway. However, the greater the coverage of programmes and registries such as SIUBEN, and the better the quality of the data they contain, the easier it will be to respond. In principle, if participants of social protection programmes could be easily reached with vertical expansion and non-participants whose information is in SIUBEN or another register could be easily reached with horizontal expansion, then the challenge would be reaching the affected households that do not belong to any of these two categories.

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<sup>24</sup> Order 707-07.

**Figure 6: Targeting challenge in expanding responsive social protection**



Source: Adapted from OPM (2015) and Barca (*forthcoming*)

In this context, we here present some recommendations for a more shock-responsive social protection system. The first ones refer to the social protection system meeting its regular objectives and the second group consists of recommendations for a more shock-responsive system.

## 5.1 Recommendations for strengthening the social protection system and its regular functions

**Strengthen the national social protection system and its regular programmes, so that they can play a role in emergency response.** Regional and global experience shows that more mature systems – i.e. financed and managed by government, well established and with a broad coverage – are usually more prepared to respond (Beazley *et al.*, 2016; OPM, 2015). Even when they have not been designed for emergency response, experience shows that the systems with greater coverage, resources, and administrative capacity, with a greater variety of services and level of integration, are generally better prepared to respond to crisis. In this way, the first step toward a responsive social protection system is to continue strengthening the system in the provision of assistance for which it has been created.

**Prepare the social protection system so that it can continue to operate and deliver its regular assistance in emergency contexts.** Before evaluating how to respond to emergencies through the social protection system (expanding assistance to the affected population), it is essential to take the necessary measures for it to provide regular assistance during emergencies. In this sense, it is convenient to incorporate risk management strategies at different levels. Thus, for example, **ADESS should establish protocols for cases in which RAS stores run out of products or are even destroyed.**

Specific aspects to revise:

- **Ensure the coordination and complementarity of existing programmes.** Fragmentation affects the performance of the system as a whole. We recommend establishing clear mandates, avoiding duplication, and making use of existing synergies between programmes with similar objectives (for example, establishing common processes when possible and sharing information regularly, at the minimum).
- **Invest in the improvement of the system and targeting processes to minimise errors of inclusion and exclusion.** The new SIUBEN survey, to be carried out in the second half of 2017, will be an opportunity to make the necessary adjustments. In particular, we recommend:
  - **Establishing SIUBEN as the only targeting mechanism of the social protection system.** SIUBEN, in order to be cost-efficient, must be used by all programmes that provide targeted social assistance. This will, in turn, increase the system's legitimacy.
  - Revising the ICV and the SIUBEN sample frame in light of the evaluation conducted by IDB (2016) and described in Section 4.2.1.
  - Mechanisms to access the system 'on demand' should be revised to accelerate the targeting process. In turn, we recommend adding admission windows to SIUBEN, in order to reduce exclusion and increase data updating. Thus, for example, schools, health centres, and institutions that support vulnerable families, such as INAIPI, may be granted permission to complete the SIUBEN admission form when detecting cases of families that are not in the system or whose information needs to be updated. Facilitating access to the system will lead to lower levels of exclusion.
  - Strengthen community participation in the targeting process. Although the main asset of SIUBEN is that it is an 'objective' tool, it is important to strengthen the role of community organisations both to improve targeting and to increase the legitimacy of the programme. An option to consider could be having community organisations validate the selection through SIUBEN and be able to suggest limited changes. This community validation process is popular in other regions of the world (Coady *et al.*, 2014).
- **Revise the benefit amounts in line with the objectives of the programme.** Evaluate whether, given the available resources, it is a priority that the system continues to grow in coverage or that it has a greater impact on those who are already part of it. We recommend, particularly, that transfer amounts be made more progressive and in line with family needs; those with ICV 1 could receive greater amounts than those with ICV 2, for example.
- Develop a strategy for nutrition education and incentives to promote healthy eating among the participants of the *Progresando con Solidaridad* card. The relationship established with the RAS stores and businesses offers an opportunity to make the population aware of the healthiest options suggested for consumption with the amount transferred.
- **Strengthen existing strategies and mechanisms for the inclusion of people without identity documentation (*cédula*).** Today, some situations persist in which undocumented people are registered and included in SIUBEN, but they cannot benefit from the PROSOLI transfer programmes since they cannot be given a *Progresando con Solidaridad* card, which is a Visa card. We recommend strengthening and maintaining relations with the agencies in charge of issuing IDs, so that everyone in SIUBEN is documented.

## 5.2 Recommendations for a more shock-responsive social protection system

**Define response strategies for different shock types, onset, and magnitudes and prepare the social protection system to implement them.** Regarding response strategies, we recommend establishing protocols that describe how social protection system programmes and

processes should respond. According to the characteristics of the Dominican social protection system, a base strategy, to be developed and adjusted according to the different scenarios, could employ the following logic:

**First phase:** Immediate assistance in the affected areas:

- In-kind and multi-sectoral assistance (food, water, necessity goods) to all families in the affected area, apart from rescue actions, shelter, and other activities not covered by this study.
- This assistance would be mainly provided by the Social Plan and the *Comedores Económicos*, as is currently the case.
- It is often said that this phase lasts 72 hours after the shock, but in practice this varies substantially and can last for a few weeks.

**Second phase:** Temporary **vertical** and **horizontal** expansion of PROSOLI cash transfer programmes in the affected areas:<sup>25</sup>

- This stage begins once markets start reactivating, stores are stocked up, and the social protection system is ready to scale up its services.
- It is important that this first response through cash transfers prioritises timeliness over full targeting accuracy. That is why it could be initially based on geographical targeting, in the affected areas, and avoid waiting for the results of a household survey, which requires a lot of time and resources. Geographic targeting can be complemented with SIUBEN data, and then government can decide to give transfers to all those with ICV 1, 2, or 3, for example. In Figure 6 this implies expanding to point B.
- Over the weeks, the government is likely to conduct a household survey, i.e. a targeting process at the household level to give the temporary support and interrupt it for those who do not need it.
- Assistance to host families, as families that host other people during emergencies have exceptional expenses and may require assistance. Recent experiences with floods in the north of the country in the last quarter of 2016 as well as Hurricanes Irma and María in 2017 show the relevance of this type of assistance. In those cases, most of the sheltered families did not go to official shelters, but to the homes of relatives and friends.<sup>26</sup> Box 3 describes how different countries in the region have assisted such people.

Temporary cash transfers can also be part of the next stage of recovery, which is not part of this study.

These stages are not necessarily discrete, and international experience shows that in some cases they are combined according to the needs and capacity of the system. They also depend on the type of threat and the speed at which the crisis develops. We cannot forget that, in areas that are highly vulnerable to climate change, such as the Dominican Republic, slow-onset crises such as droughts have a strong impact on the livelihoods and food security of the population, generating critical humanitarian situations. In the case of droughts, for example, it is possible to combine both phases, while improving the level of accuracy of beneficiary population targeting.

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<sup>25</sup> This phase may also consist of a 'piggybacking' response, in which the entire infrastructure of the PROSOLI programmes is used but a new programme is established, independent of the regular programmes, in order to emphasise the temporary nature of the humanitarian assistance.

<sup>26</sup> In the case of Irma, a total of 13,415 of the 24,076 displaced people were housed in the homes of family and friends. In the case of María, 21,338 people out of a total of 23,613 displaced people also opted for assistance through host families. In both cases, people remained sheltered for a few days, never more than a week, according to official data from COE.

It should also be noted that the vertical and horizontal expansions of the transfer programmes can be complemented with the so-called ‘piggybacking’ response. It is in this sense that, for example, at the time this report was written, GCPS is signing a cooperation agreement so that, in the event of a large-scale emergency, WFP can provide its assistance through GCPS systems.

### **Box 3: Assistance for host families – the regional experience**

- **Colombia**

Different waves of displaced people over several decades have increased the population of the urban suburbs and caused enormous tensions in recipient communities, being themselves the result of previous displacements. The Houses of Rights, administered by the National Procurator of Colombia, are shelters that help everyone in the community to access basic health, education, documentation, and security services, among other things.

- **Ecuador**

In response to the 2016 earthquake, the government not only delivered cash transfers to the affected population but also to the host families and tenants. Such assistance was intended not only to help host families but to encourage the displaced population to leave the temporary camps. The following *Bonos* were provided:

- *Bono de Acogida*: Host families were entitled to USD 135 per month for six months for utilities.
- *Bono de Alquiler*: Tenants were entitled to USD 135 per month for six months.

To access the *Bonos*, affected families and recipients had to sign an agreement, which was subject to verification by the authorities.

- **Haiti**

As a result of the 2010 earthquake, around 160,000 people moved to the border region with the Dominican Republic. The vast majority of local displaced people stayed with host families, both urban and rural, in precarious economic conditions. The United Nations High Commissioner for Refugees (UNHCR) adopted an approach both to provide individual assistance to displaced people in host families and rapid impact projects to help the host communities in both countries:

- Communities identified around 240,000 displaced people and their hosts, who received cooking and hygiene kits two weeks after the emergency. In turn, an employment programme gave work to the affected people.
- Host communities identified high-impact activities related to generating income, housing, health and educational needs. These activities were implemented through local or international non-governmental organisations (NGOs) working in the communities.

Sources: Davies (2012); Beazley (2017).

Regarding the preparation of the social protection system to implement these response strategies, we suggest the following recommendations, always bearing in mind that these will depend on the type of response planned.



**Table 4: Recommendations for a shock-responsive social protection**

Process	Recommendations
Targeting	<ul style="list-style-type: none"> <li>- Develop protocols for vertical and horizontal expansions.</li> <li>- Develop protocols that allow temporary waiving of conditionalities and penalties for non-compliance.</li> <li>- Increase the interoperability of databases and the integration of systems that feed SIUBEN.</li> <li>- Prepare the IT platform for a rapid inclusion of temporary participants.</li> <li>- Use, evaluate, and improve IVACC. Prioritise its use regarding the geo-referencing of households in hazardous areas.</li> <li>- Train staff, both at a central and local level, who will be involved in the response.</li> <li>- Incorporate in the emergency data collection tools for civil defence, housing or other actors useful data for responsive social protection targeting. Prepare the IT system to receive the corresponding data.</li> <li>- Establish communication strategies for emergency targeting.</li> </ul>
Delivery	<ul style="list-style-type: none"> <li>- Develop protocols to overcome possible shortages or destruction of RAS stores.</li> <li>- Define protocols for the production and distribution of temporary cards, which may have a different design to the permanent cards in order to highlight their transitory nature.</li> <li>- Consider expanding the network of stores and having stand-by agreements for responses. Evaluate adding stores that sell other types of products needed during emergencies.</li> </ul>
Coordination	<ul style="list-style-type: none"> <li>- Ensure GCPS has a more active role in COE and strengthen internal and external inter-institutional coordination.</li> <li>- Use SIUBEN and IVACC as tools to strengthen coordination and cooperation with civil defence and other actors involved in emergency response.</li> <li>- The Dominican Republic can take out parametric insurance integrated with the CCRIF<sup>27</sup> in association with the countries of Central America. This option should be seriously evaluated, since it has proven to be very useful for financing responses to natural disasters, as in the case of Haiti for example (OPM, 2017).</li> <li>- Comply with the budget allocation of 1% of current revenue for ‘public calamities’.</li> <li>- Promote the implementation of joint actions for the exchange of experiences and good practices, so that the role of both sectors (social protection and civil protection) is gradually understood and possibilities and opportunities for collaboration are explored.</li> </ul>

<sup>27</sup> [www.ccrif.org/](http://www.ccrif.org/)

## 6 Conclusions

The Dominican Republic is highly exposed to different types of shocks, from natural events such as storms, floods, earthquakes and droughts to epidemiological shocks, such as the Zika virus and cholera, and even economic shocks.

Although the non-contributory social protection system has not been designed to respond to large-scale emergencies, it has the potential to fulfil an effective role in such responses. The strengthening of cash transfer programmes over the last few years, the SIUBEN targeting system, IVACC and the benefit delivery system together represent a robust platform on which to build a flexible shock-responsive system.

For this to happen, it is important to reduce the fragmentation of the social protection system and create stronger links with Civil Defence, COE and other actors involved in emergencies. Likewise, in order to improve social protection, it is necessary to invest in establishing SIUBEN as the central targeting mechanism, avoiding discretionary programmes, strengthening SIUBEN's targeting, and revising key aspects, such as the amount of the transfers, which today is quite limited.

The role of social protection in emergency response must be planned in advance, so that it can adapt to the processes and systems that enable it to fulfil that role. We recommend, *a priori*, a comprehensive response strategy that includes in-kind assistance during the first response phase, and then, or in combination, the scaling-up of cash transfer programmes. In any case, the response strategy will depend on the type and magnitude of the shock.

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## Annex A List of interviewees

Institution	Name	Position
ADESS	Ramón González, B. A.	Director General
	Ángel Melo, B. A.	Deputy Director General
	Eng. Carlos Ricardo	Financial and Administrative Director
	Delvin Quezada, B. A.	OP Director
	Eng. Ramón Colón	DTI
PROSOLI	Dr Altagracia Suriel	Director General
	Héctor Medina, B. A.	Deputy Director General
	Evangelista Cornelio	Director of Inter-Institutional Liaison
	Ezequiel Volquez	Director of Planning and Monitoring
SIUBEN	Matilde Chávez Bonetti, B. A.	Director General
	Víctor Romero	Economist
MINERD Risk Management	José Miguel Guridi	Director of Risk Management, MINERD
	Ana Pou	Project Manager
National Health Service	Dr Montesdeoca	
	Dr Gutiérrez	SNS Risk Management
COE	Gen. Manuel Méndez	Director
	Edwin Olivares	Director of Operations
IDB	Carolina Gonzalez	
INABIE	René Jáquez Gil, B. A.	Director
	Jhonny Pujols	
	Brigilia Joselyn Gutiérrez Aquino	Enc. Dept. International Cooperation
	Nelson Rodríguez	
OCHA	Martín Acosta	
INAPI	Elena Beato	Manager of Inter-Institutional Relations
	Gerson	Manager of Labour Risks
Presidency's Social Plan	Pamela Alcántara	
Comedores Económicos	Nicolás Calderón, B. A.	Director General
Ministry of Public Health: Risk Management, Nutrition and	Octavio Comas	Enc. Risk Management/DGRAD
	Amarilis Then	Programme Coordinator/ Nutrition

<b>Environmental Management</b>	Pedro Gómez	Tech. Cord. Water and Sanitation and Hygiene/DIGESA
	Carmen Cruz	Programme Coordinator, Nutrition
	José Luis Cruz	Director, DGRAD
	Svetlana Afanasieva	Programme Manager, Nutrition
<b>Oxfam</b>	Carlos Arenas	Responsible for Humanitarian Action
<b>Save the Children</b>	Bernardo Rodríguez	Risk Management Coordinator
<b>SeNaSa</b>	Jefrey Lizardo	Health Service Manager
	Sheilyn Trinidad Acevedo	Public Information Manager
<b>DIGEPEP</b>	Ayacx Mercedes	Tech. Deputy Director
<b>Doctors of the World</b>	Gonzalo Basile	Director
	Manuel A. Peña	Deputy Director
<b>DIGEPRES</b>	Marino A. Fuentes	Consultant
	Nelson Cabrera	Area Director
	Odilys Hidalgo	Area Director
	Norvin Berges	Area Director