Early Lessons from Social Protection and Jobs Response to COVID-19 in Middle East and North Africa (MENA) Countries

Alex Kamurase
and Emma Willenborg
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Abstract: Countries in the Middle East and North Africa region quickly introduced measures to limit the spread of COVID-19 following the first confirmed cases. These measures included curfews, lockdowns, and social distancing. As a result of COVID-19 induced impacts, countries in the region adopted social protection measures to mitigate the human and economic impacts of the pandemic. But most of the countries in MENA were already experiencing poor macroeconomics brought on by the decline in oil prices and by fragility, conflict, and violence. Illness and loss of income due to the pandemic (largely from informal sources) exacerbated the extreme vulnerability faced by the poor and vulnerable groups.

Social protection programs, and particularly social safety nets (SSNs), can help households absorb short-term consumption risk during periods of crisis and build resilience to manage future shocks. In MENA, 21 countries and territories formally announced social protection measures to cope with the impacts of COVID-19. According to a World Bank real-time review of social protection and jobs responses to COVID-19 (updated May 2021), measures in MENA have spanned social assistance, social insurance, and labor markets programs. Social assistance measures accounted for 59 percent of overall response, whereas social insurance and labor markets made up 23 and 18 percent, respectively.

Since the World Bank launched its COVID-19 response, Social Protection and Jobs (SPJ) support to MENA countries has been fast, flexible, and adaptive. The number of Bank-supported social safety net beneficiaries increased from 2 million to 16 million in just 1.5 years of response which demonstrates that social protection systems in MENA are scalable and that country systems and programs are flexible to facilitate this scalability. Early lessons suggest the World Bank significantly contributed to addressing financing, knowledge, and delivery needs based on existing lending and policy dialogue platforms, drawing on the experience in MENA as well as global learning. But lessons also suggest that social protection policy dialogue in MENA is even more important moving forward, to help countries strengthen and boost policy reforms and to design and implement social protection programs and systems that can adequately, effectively, and efficiently target the poor and vulnerable, and be able to respond to population needs during disasters and shocks. This paper provides a documentation of the context for SPJ COVID19 response in MENA countries’, a framework for continued response and some of the early lessons learned.

JEL Codes: I30, I31, H53, H55, I39, J28

Keywords: Social Protection and Jobs, Poverty and Vulnerability, COVID-19 Response, Cash Transfers, Social Insurance, Labor Markets, Early Lessons, Middle East and North Africa.
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EXECUTIVE SUMMARY

Countries in the MENA region quickly introduced measures to limit the spread of COVID-19 following the first confirmed cases. These measures included curfews, lockdowns, and social distancing. In addition to the loss of life and illness caused by COVID-19, communities suffered from the loss of livelihoods and jobs and the closure of markets and schools. Many of the poor and vulnerable were unable to smooth their consumption or protect their household investments without external support, and the return to pre-pandemic conditions has taken longer than anticipated. As a result, countries have adopted social protection measures to mitigate the human and economic impacts of the pandemic, including policy reforms to build a stronger foundation as the region progresses from emergency relief to recovery and resilience.

Countries in the region already were experiencing poor macroeconomics brought on by the decline in oil prices and by fragility, conflict, and violence (Iraq, Libya, Syria, and Yemen). At the start of the first wave of the pandemic, there were 18 million internally displaced persons (IDPs) and refugees. Illness and loss of income due to the pandemic (largely from informal sources) exacerbated the extreme vulnerability faced by these groups. Pre-pandemic extreme poverty (USD 1.90/day) had reached 7.2 percent in 2018, rising from 2.4 percent in 2013 and 3.8 percent in 2015. In 2020, poverty incidence is expected to have increased across the region by 1.8 or 3.5 percentage points (based on USD 3.20 or USD 5.50 poverty lines, respectively) due to the effects of COVID-19.1

Indeed, a recent World Bank report on the distributional impacts of COVID-19 confirmsthat the pandemic is causing a rise in poverty and that poverty in MENA will increase 5 to 35 percent depending on country situations. This rise is driven by the simultaneous emergence of greater inequality and a newly impoverished group (that is, those who were not poor in the first quarter in 2020).2 By January 2021, the Global Economic Prospects estimated that poverty in MENA will rise by 7 to 8 million,3 further impacting the poor and vulnerable due to decreased labor and non-labor incomes and lack of coping capacity.

Social protection programs, and particularly social safety nets (SSNs), can help households absorb short-term consumption risk during periods of crisis and build resilience to manage future shocks. In MENA, 21 countries and territories formally announced social protection measures to cope with the impacts of COVID-19. According to a World Bank real-time review of social protection and jobs responses to COVID-19 (updated May 2021), measures in MENA have spanned social assistance, social insurance, and labor markets programs. Social assistance measures accounted for 59 percent of overall response, whereas social insurance and labor markets made up 23 and 18 percent, respectively. Measures draw from existing social protection policies, strategies, and programs; build on existing systems; and aim to provide emergency relief to poor and vulnerable groups. Increased

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3 Ibid.
coverage has been implemented through vertical expansion to reach existing beneficiaries with additional benefits and/or horizontal expansion to reach new beneficiaries.

Since the World Bank launched its COVID-19 response, Social Protection and Jobs (SPJ) support to MENA countries has been fast, flexible, and adaptive. The MENA SPJ response drew from the regional platform that was launched to help countries respond to the concurrent health and economic crises. It has reflected commitments and guidance from the World Bank Group COVID-19 Crisis Response Approach Paper and spans recovery, restructuring, and building resilience. It also benefited from the global knowledge and experience of different countries shared across the SPJ practice.

At the country level, the response strategy included rapid social protection assessments across 21 countries to generate options notes and guide fast-tracked dialogue with government counterparts on SPJ response. This work was based on existing government strategies, programs, and Bank-supported operations. Over the past one and one-half years since the response was launched, the number of Bank-supported social safety net beneficiaries increased from 2 million to 16 million. This magnitude of response demonstrates that social protection systems in MENA are scalable and that country systems and programs are flexible to facilitate this scalability. Response to the pandemic has not only enabled emergency support to be delivered to the targeted households to avert socio-economic effects, but it has also provided insights into the enormous needs on the ground.

The duration of the effects of the pandemic will depend on the policies and strategies that are adopted and the effectiveness of their implementation. The ongoing roll out of vaccines will play an important role in creating a conducive environment for moving from emergency to recovery. Health and social protection measures are an integral part of the policy options that countries can implement, particularly as countries move to recovery and address competing priorities that require policy balances and trade-offs. The social protection policy dialogue in MENA is, thus, even more important moving forward, to help countries elaborate and strengthen relevant policy reforms such as innovations in addressing the coverage gaps. This includes addressing the coverage gaps (e.g., by covering informal sector workers), reforming regressive subsidies to create fiscal space for targeted safety nets, strengthening social protection delivery systems, and investing in productive opportunities to allow the poor to move out of the programs, graduate from poverty, and build sustainable livelihoods. In addition, institutional capacity for social protection remains a challenge both at the central and sub-national government levels. Investing in institutions that can advance the social protection policy agenda at the country level will thus be an ongoing priority.

This paper reviews some of the SPJ-focused programs and policy options that countries have implemented (and can implement) to respond to the impacts of the COVID-19 pandemic across the emergency relief, recovery, and resilience phases. Detailed country-level responses are included in the Annex. Sharing lessons learned and promoting knowledge exchange on the performance of social protection responses as countries emerge from the crisis induced by COVID-19 will be paramount. In addition to documenting the MENA SPJ COVID-19 response, this paper discusses early lessons.

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A resurgence of COVID-19 has led some MENA countries to maintain containment measures while emergency response remains essential. Globally, for many countries, cash transfers bridged the emergency period and averaged as little as three to four months to implement, including with digital transfers. Vaccines are becoming available, but high demand and supply constraints have led to inequities. Countries are, thus, expected to unevenly recover from the pandemic. For this reason, knowledge sharing and innovation bring expediency for countries to learn from one another as they adjust to a new normal.
ACKNOWLEDGEMENTS

This report presents a documentation of the Middle East North Africa (MENA) Social Protection and Jobs (SPJ) COVID-19 response and the early lessons from the response. Its preparation evolved along with the World Bank operational response as well as the adoption of response measures by countries in the region. The report was prepared under the guidance and advice of Keiko Miwa, Regional Director for Human Development, and Anush Bezhanyan, Practice Manager for Social Protection - MENA Region. The primary authors are Alex Kamurase (Senior Social Protection Specialist and MENA SPJ COVID-19 Focal Point) and Emma Willenborg (Social Protection Consultant). The report benefitted from valuable contributions of MENA and global SPJ staff, notably: Montserrat Pallares-Miralles (Senior Social Protection Specialist), Ugo Gentilini (Senior Social Protection Specialist and Global Lead, Social Safety Nets), Carlo Del Ninno (Lead Economist), Khalid Ahmed Ali Moheyddeen (Senior Social Protection Specialist), Mohamed Ihsan Ajwad (Senior Economist), Rene Antonio Leon Solano (Practice Leader), Ekaterina Pankratova (Senior Program Coordinator), Cristobal Ridao-Cano (Lead Economist), Nahla Zeitoun (Senior Social Protection Specialist), Marie Agnes Ndour Huchard (Operations Analyst), Souraya El Assiouty (Social Protection Specialist), Dalal Moosa (Economist), John Van Dyck (Senior Social Protection Specialist), Ahmet Fatih Ortakaya (Senior Social Protection Specialist), Angela Elzir (Social Protection Specialist), Samira Hillis (Program Leader), Mehdi Barouni (Senior Social Protection Specialist), Gustavo Demarco (Lead Economist and Global Lead, Pensions), Penny Williams (Program Manager), Yashodhan Ghorpade (Senior Economist), Silas Udahemuka (Human Development Specialist), Fatiha Amar (Operations Analyst), Mustafa Khadim Mohammed (Social Protection Specialist), Haleem Hassan Kashkol Al-Kazali (Social Protection Economist), Mohamed El Aziz Ben Gachem (Senior Social Protection Specialist), Johannes Koettl (Senior Economist), Asli Elmi Mohamed (Social Protection Consultant), Haneen Ismail Sayed (Lead Operations Officer), Sara Hariz (Social Protection Specialist), Usama Zafar (Social Protection specialist), Lansong Zhang (Operations Officer), Maya El-Azzazi (Operations Analyst), Carole Chartouni (Economist), Rada Nawwaf Nafe Naji (Social Protection Specialist), Juul Pinxten (Young Professional) and Khalil Fouad Dagher (Social Protection Specialist). Darcy Gallucio (Consultant) provide editorial support.
I. INTRODUCTION

The world is experiencing an unprecedented economic crisis due to the COVID-19 pandemic. The resultant aggregate shocks to economic activity have affected welfare at the household and individual level, with job and wage losses causing steep declines in labor and non-labor incomes. COVID-19 was expected to push about 100 million people into poverty in 2020 alone. The newly impoverished live in countries that were facing high levels of poverty and vulnerability before the pandemic, including those in situations of fragility, conflict, and violence (FCV) and less stable middle-income countries (MICs): approx. 20 million in FCV-affected countries and 72 million in MICs.

Middle East and North Africa (MENA) countries are among those most adversely impacted due to pre-existing fragility, conflict, and violence and increasing extreme poverty. In fact, a recent World Bank report on the distributional impacts of COVID-19 has confirmed that the pandemic is causing a rise in poverty. In the MENA region, the poverty rise ranges between 5 percent and 35 percent depending on the country. By January 2021, the Global Economic Prospects had estimated that poverty in the MENA region had risen by 7 million to 8 million people.

This unprecedented crisis presents the world, and the MENA region, with an opportunity to transition toward resilient and inclusive growth. Before the pandemic, MENA countries faced crises emanating from the fall in oil prices, fragility and conflict, and internally displaced persons and refugees. In the midst of the pandemic, a highly exposed “missing middle” has emerged, made up of those who work predominantly in the informal sector—outside of employer-based social protection programs but too well-resourced for traditional safety net coverage. In this light, expanding and improving the efficiency and effectiveness of existing social protection and jobs (SPJ) programs can support the poor and vulnerable to protect their wellbeing and development gains. Regional governments, the World Bank, and stakeholders are thus working to reposition SPJ programs for a just transition out of the pandemic.

The overarching objectives of this paper are to document the overall SPJ COVID-19 response in the MENA region, present a framework for responding to the pandemic and draw early lessons from the response. By documenting the overall SPJ COVID-19 response, the paper compiles the impacts of, and the lessons learned during the pandemic at the regional and country level. This knowledge base serves as a dynamic repository for informing current and future assessments and activities as well as the forthcoming World Bank regional strategy. The response framework proposes a menu of options for response in different MENA country contexts and, within these contexts, provides strategic and operational guidance for country teams and counterparts on pandemic-induced impacts and on moving from emergency relief to recovery and resilience building.

The paper has four main sections that follow. Section II provides an assessment of the MENA regional context and implications for COVID-19 SPJ response. Section III provides an overview of the SPJ COVID-19 response in MENA, focusing on the World Bank response, alongside comparisons with

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6 Ibid.
other regions and key challenges. Section IV proposes a framework for SPJ measures during the emergency relief, recovery, and resilience stages of the response, alongside country examples for each. Section V and VI discuss emerging lessons and issues for discussion, and conclusive remarks.

The paper is a living document, as it draws from interim learning and may be updated as countries learn from the new normal in subsequent years. The methodology for this report includes a literature review of the SPJ context and trends in MENA, a review of the country-level SPJ response in MENA for COVID-19, and a review and documentation of the World Bank SPJ response in MENA for COVID-19. These inputs inform the analysis and discussion of challenges, recommendations, and lessons, alongside comparator country responses.

II. MIDDLE EAST AND NORTH AFRICA CONTEXT AND COVID-19 IMPLICATIONS

Poverty and extreme poverty rates across the Middle East and North Africa (MENA) have increased over the past few years and remain among the highest in the world. In 2013, 2015, and 2018, extreme poverty in the region (defined as USD 1.9 per day) increased from 2.4 to 3.8 to 7.2 percent of the total population, respectively. This trend is largely driven by fragility, conflict, and violence in countries such as Libya, Iraq, Syria, and Yemen and a deterioration in labor market outcomes. For example, between 2011 and 2015, extreme poverty in Syria increased from less than 1 percent to more than 20 percent and in Yemen, extreme poverty more than doubled to reach 41 percent. The crises in Iraq, Libya, Syria, and Yemen are likely to have destroyed more than 5 million jobs while high levels of displacement led to a massive reallocation of labor, thereby stressing labor markets regionwide. Given the region’s demographic composition, including a large youth bulge, it is estimated that around 39 million jobs will need be created across the formal and informal sectors over the next 15 years to absorb new entrants to the labor market.

The COVID-19 pandemic has exacerbated the poverty situation across the MENA region. Regional poverty incidence was expected to increase by 3.5 percentage points in 2020 based on the USD 5.50 per day poverty line. The latest poverty estimates from a sample of four countries (Iran, Lebanon, Tunisia, and West Bank and Gaza) based on phone surveys implemented between April and December 2020 have estimated higher

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poverty increases in MENA generally, ranging between 5 and 35 percent (and an estimated 7 to 8 million more poor people) with more increases in countries such as Iran, Iraq, and Lebanon where COVID-19 is compounded by pre-existent socio-economic challenges such as inflation, macroeconomic crises, food insecurity, and fragility and conflicts. Increases in poverty, extreme poverty, and vulnerability have likely therefore caused significant problems not only related to loss of incomes, livelihoods, and consumption but also to challenges with social cohesion (see Figure 1 for an overview of these impact pathways). Certain countries have faced greater consequences than others. For example, initial estimates suggested that poverty rates in Iraq could increase by up to 18 percentage points due to COVID-19.10

In addition, the pandemic has disproportionately affected poor and vulnerable groups due to decreased labor and non-labor income, higher prices, and service disruption. Individuals who fall ill are unable to go to work which constrains their capacity to earn income and may lead to significant income losses for themselves and their household. Many countries in MENA closed non-essential businesses and resorted to mandated curfews to contain the pandemic, which has reduced economic activity. In several cases, these measures have led to layoffs and/or reduced work schedules that, in the absence of unemployment insurance or assistance programs, also translate into labor income losses. Further, the decline in economic activity, fall in oil prices, and deterioration of labor market outcomes were expected to reduce remittances by 20 percent in 2020, including those from the Gulf Cooperation Countries (GCC).11 This is likely to have important welfare implications in countries where remittances are likely to decline due to the pandemic.

COVID-19 has constrained market access and led to price increases for essential commodities (such as food) which can negatively affect consumption and disposable income. In addition, people who fall ill to COVID-19, especially those with pre-existing conditions who are most at risk of hospitalization, will likely see a rise in out-of-pocket health expenditures. Finally, service disruption is expected to contribute to non-monetary welfare losses, with long-term implications for human capital accumulation, long-term productivity, and ultimately, poverty. For example, COVID-19 has led to school closures across all MENA countries, which, in the absence of robust e-learning opportunities, will lead to significant learning losses, thus increasing learning poverty and widening the learning gap.

The upsurge in the third wave of the pandemic is causing hospitals and other health care facilities to reach full capacity, thereby reducing their ability to provide adequate care for other illnesses and leading to deteriorating health outcomes. These challenges started to emerge in the first 100 days of the pandemic but have become more evident over time and with no clear solution for many low- and middle-income countries due to limited access to vaccines. The lack of vaccine availability and slow rollout in countries where vaccines are available means that many countries are still in the emergency response phase and that prospects for recovery depend on vaccine availability. The


unbalanced recovery will further threaten recent gains made by MENA countries in the areas of human development and poverty reduction.

Early evidence suggests that COVID-19 will exacerbate the situation of the poor and vulnerable. In many low- and middle-income countries, the poor and vulnerable often include the disabled, the elderly, and informal workers. Informal workers represent between 50 and 74 percent of the total labor force in MENA (Figure 2); however, they lack labor protections and are paid significantly less than formal workers. Nearly 40 percent of informal workers in MENA are classified as poor. Migrant workers, both domestic and foreign, are often overlooked by social protection policies and programs despite the fact that they experience high levels of economic and social exclusion. Individuals aged 65 and older are more prone to severe illness from COVID-19, which, when coupled with the lack of coverage of pensions in the region, can have devastating consequences.

Figure 2. Women and Men in the Informal Economy: A Statistical Picture. Source: ILO (2018).

COVID-19 has exacerbated many of the pre-existing vulnerabilities that affect forcibly displaced and stateless people. The MENA region hosted about 18 million refugees and internally displaced persons at the start of the first COVID-19 wave. The high prevalence of displacement heightens poverty and vulnerability challenges, constrains the availability of social services, and exacerbates human development outcomes for both the refugee and host communities. About 33,900 people forcibly displaced worldwide have been affected by COVID-19 and many others are suffering from the pandemic’s socio-economic impact, especially among those who depend on informal sector employment. Forcibly displaced populations have also been impacted by lack of social protection and access to basic services.

15 Ibid.
Gender impacts need to be assessed carefully. Prior experience shows that health crises often affect men and women differently. In MENA, existing gender gaps, such as low levels of female labor participation, restricted mobility, and high degrees of work informality, are often coupled with a lack of social protection. As a result, women are often unprotected in situations of sickness, old age, and maternity. The physical and sexual abuse of women is also very high (40 percent) in the MENA region. The ongoing crises could expose women to more violence, abuse, and other types of threats. At the same time, social protection programs can be leveraged to promote economic and social empowerment of women and girls, including to close gender gaps in human capital, access to finance and productive assets, and to remove constraints to labor market participation.

Throughout the region, access to services such as education, primary health care, and water and sanitation have been affected by COVID-19. Before the pandemic, quality service delivery and social infrastructure had been deteriorating due to lack of investment. The pandemic accelerated this trend. Response efforts have been inhibited by existing gaps which highlights the enormous need for reconstruction and rehabilitation, notably in Iraq, Lebanon, Libya, Syria, and Yemen. These countries face daunting challenges to provide basic services, including in hard-to-reach areas.

Several countries in the MENA region rank low on the 2019 Human Development Index, while the unemployment rate since the Arab Spring has been on the rise. Most of the economically active youth are unemployed, under-employed, under-educated, or inadequately trained.

III. OVERVIEW OF SOCIAL PROTECTION AND JOBS RESPONSE TO COVID-19 IN MENA

Overall SPJ COVID-19 Response in MENA

When the pandemic struck, an estimated 2.5 billion people already benefitted from safety net programs, including 650 million of the world’s poorest of which 63 million were beneficiaries of the World Bank-financed safety net programs.¹⁶ In MENA, safety nets coverage for Bank-supported programs were reaching an estimated 2 million beneficiaries. Evidence shows that safety net programs allow beneficiary households to smooth consumption, invest in the human capital of their families, and ultimately break the cycle of intergenerational poverty. Social safety nets therefore can cushion households from short-term consumption risks. Social safety nets also can help households to create resilience, manage risk, cope with shocks, and avoid negative coping strategies such as reducing consumption or selling household assets while continuing to invest in their children—even after a tragedy strikes.¹⁷ As countries aim to mitigate the negative impacts of the pandemic, many have introduced new social protection measures. Between March 2020 and May 2021, the number of countries or territories planning or implementing social protection measures increased from 45 to 222.

In the MENA region, the SPJ response has been similarly robust. Between March 2020 and May 2021, 21 countries and territories formally announced a total of 202 social protection measures to cope with the impacts of COVID-19. The measures spanned the core social protection areas of social assistance, social insurance, and labor markets programs. Social assistance programs are most widespread and account for 59 percent of total social protection measures whereas social insurance and labor market interventions account for 23 and 18 percent, respectively (see Figure 3). The proportion of social assistance programs in MENA is slightly higher than the global average of 55 percent, whereas the proportion of labor markets programs is slightly lower than the global average of 24 percent.

**Figure 3. Breakdown of Social Protection Programs by Type and Region**

Source: Gentilini et al. (Version 15, Updated May 7, 2021).

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As shown in Figure 4, the MENA region has 112 social assistance programs, 66 social insurance programs, and 24 labor market programs. All 21 countries in MENA have implemented some type of social protection measure in response to the impacts of COVID-19. Table 1 presents the number of countries in MENA that are implementing each type of social assistance, social insurance, or labor market program. The most common forms of support are cash-based transfers, which have been implemented in 18 out of the 21 countries or territories in MENA, and utility and/or financial support, which has been implemented in all but one MENA country. Paid leave or unemployment (in 15 countries) is the most common form of social insurance, followed by social security contributions, including either waivers or subsidies (in 13 countries). Finally, for labor market measures, wage subsidies have been introduced in 10 countries. A more granular breakdown can be found below (Table 2) based on country-specific information provided in the Annex tables and supplemented by data from the Real-Time Review of Country Measures prepared by Gentilini et al. (Version 15, Updated May 7, 2021).

### Table 1. Number of Countries in MENA Implementing Social Protection Measures for COVID-19 Response.

<table>
<thead>
<tr>
<th>Social protection measures</th>
<th>No. of MENA Countries</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Social assistance</strong></td>
<td></td>
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<tr>
<td>Cash-based transfers</td>
<td>18</td>
</tr>
<tr>
<td>Public Works</td>
<td>1</td>
</tr>
<tr>
<td>In-kind/school feeding</td>
<td>13</td>
</tr>
<tr>
<td>Utility and financial support</td>
<td>20</td>
</tr>
<tr>
<td><strong>Social insurance</strong></td>
<td></td>
</tr>
<tr>
<td>Paid leave/unemployment</td>
<td>15</td>
</tr>
<tr>
<td>Health insurance support</td>
<td>9</td>
</tr>
<tr>
<td>Pensions and disability benefits</td>
<td>3</td>
</tr>
<tr>
<td>Social security contributions (waiver/subsidy)</td>
<td>13</td>
</tr>
<tr>
<td><strong>Labor markets</strong></td>
<td></td>
</tr>
<tr>
<td>Wage subsidy</td>
<td>10</td>
</tr>
<tr>
<td>Activation (training)</td>
<td>6</td>
</tr>
<tr>
<td>Labor regulation adjustment</td>
<td>8</td>
</tr>
<tr>
<td>Reduced work time subsidy</td>
<td>2</td>
</tr>
</tbody>
</table>

While the evolution of the SPJ systems differs across the MENA region, existing systems can be better-leveraged for emergency and recovery response and further-strengthened to increase resilience and adaptability. Many countries in the region recently put in place the key building blocks of social protection systems, including ID systems, targeting mechanisms, registries, case

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19 Ibid.
management systems, and monitoring and evaluation frameworks. These national systems often face human capital and infrastructure constraints. Even so, the existing social safety net programs and systems can be effective channels to deliver support in the short term and can be strengthened in the medium to long term for effective and efficient response.

As a result, many of the new measures that were recently introduced drew from existing social protection policies, strategies, and programs or were built on existing systems. The measures helped provide emergency response to the poor and vulnerable, and they can be developed for recovery and resilience. In general, coverage expands vertically by providing existing beneficiaries additional benefits or horizontally by targeting additional beneficiaries. Measures include adjustments to existing social safety net programs by restructuring or refocusing existing operations or introducing new emergency safety net operations and/or programs. Early measures focused on emergency response, but countries are likely to shift their focus toward recovery and resilience in the medium term. The shift from emergency relief to recovery along the response continuum is expected to be a function of how countries manage the spread of the pandemic.
Table 2: Summary of Country Policy Actions and Other Measures in MENA Region

<table>
<thead>
<tr>
<th>Countries</th>
<th>Social Assistance</th>
<th>Social Insurance</th>
<th>Labor Markets</th>
</tr>
</thead>
<tbody>
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<td></td>
<td>Cash-based transfers</td>
<td>Public Works</td>
<td>In-kind/ school feeding</td>
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<tr>
<td>Algeria</td>
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<td>✓</td>
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<td>Bahrain</td>
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<td>Djibouti</td>
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<td>✓</td>
<td>✓</td>
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<tr>
<td>Egypt, Arab Rep.</td>
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<td>Iran, Islamic Rep.</td>
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<td>Iraq</td>
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<td>Oman</td>
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<td>Qatar</td>
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<tr>
<td>Saudi Arabia</td>
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<tr>
<td>Syrian Arab Republic</td>
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<td>Tunisia</td>
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<td>United Arab Emirates</td>
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<tr>
<td>West Bank and Gaza</td>
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<tr>
<td>Yemen</td>
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</table>

World Bank SPJ COVID-19 Response in MENA

The World Bank response to the COVID-19 pandemic was divided into two main phases. The first phase focused on the public health response to save lives. It was led by the Health, Nutrition, and Population (HNP) practice and delivered under a global Multiphase Programmatic Approach (MPA). As of April 2, 2021, the World Bank Board had approved 25 COVID-19 response projects under the global MPA, and more than 40 additional projects were approved thereafter. Ten of the HNP-led projects financed through the first phase included social protection and jobs support for a total of approximately USD 300 million. SPJ support primarily relied on transfer programs to enable poor and vulnerable households to receive support and smooth consumption during lockdowns. These emergency cash transfers aimed to (i) mitigate the adverse effects of COVID-19 restrictions on jobs and livelihoods, which could lead to sudden income losses with consequences for health and well-

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being, and (ii) provide households with resources to access medical services and better adhere to COVID-19 restrictions such as lockdowns and quarantine rules.

The ongoing second phase of the World Bank COVID-19 response addresses the longer-term social and economic impacts of the pandemic and is built around two main pillars: (i) protecting the poorest and most vulnerable households and communities and (ii) supporting businesses and savings jobs. Social protection has been an important contributor in the second phase given its central role in addressing vulnerability and extreme poverty of households.

At the start of the pandemic, SPJ teams in the MENA region prepared COVID-19 response options notes. The notes draw on ongoing dialogues and lending programs, analytical and advisory services, and, where possible, just-in-time rapid analysis and advice for policy makers on emergency response, recovery, and resilience. The notes appraise SPJ in each country and offer country-specific recommendations based on existing portfolios and how existing operations or dialogue could enable COVID-19 response. Based on the option notes, response approaches include: (i) adjustments to existing programs, (ii) restructuring of existing projects, (iii) design of new operations, and (iv) provision of technical assistance through advisory services and analytics. Existing Reimbursable Advisory Services (RAS) were used to redirect policy dialogue and technical assistance toward country readiness for COVID-19 response. As of June 30, 2021, the SPJ lending response to COVID-19 in MENA totaled USD 1.826 million. With this funding, the number of direct beneficiaries of cash transfers and complementary services is projected to have increased from 2 to 20 million over 15 months. This support has spanned social assistance, social insurance, and labor market programs and policy support. Where social registries exist, countries implemented social assistance relief measures (Iraq, Jordan, and Morocco). Where public works programs exist, countries innovated to promote social distancing and good hygiene practices and adapted to provide health services (Djibouti as well as West Bank and Gaza). Further, as reduced pension contributions or premature withdrawals from pensions or long-term savings may have impacts in the long run, the World Bank has supported developing and balancing short- and longer-term policy on social insurance and pensions.

Country-level SPJ responses to COVID-19 have demonstrated that social protection programs can be adapted and utilized during crises for existing beneficiaries and for the poor and vulnerable. In the MENA region, the World Bank supported 11 operational responses from March 2020 to June 2021 to: (i) scale up existing safety net operations through additional financing in Djibouti and Yemen; (ii) restructure existing projects in Djibouti and Tunisia; (iii) develop new cash transfer operations in Jordan, Lebanon, Morocco, Tunisia, West Bank and Gaza, and Yemen; (iv) adjust the existing

Box 1. World Bank Priorities for Protecting the Poor and Vulnerable in Its COVID-19 Response

The World Bank Group COVID-19 crisis response approach paper, “Saving Lives, Scaling-up Impact and Getting Back on Track” (June 2020), identifies protecting the poor and vulnerable as a key pillar and includes five main areas for support: (i) targeted income and potentially food support for vulnerable households; (ii) behavior change and social care services; (iii) support to communities and local governments to cope with immediate crisis impacts; (iv) support for employment and productivity for vulnerable households, informal businesses, and micro-enterprises; and (v) work to improve delivery systems for expanded coverage, better digital delivery, and greater resilience for future shocks.
operation in Egypt; (v) contribute to various development policy operations, including in Djibouti, Egypt, Morocco, and Tunisia; and (vi) adjust ongoing RSAs in Kuwait and Saudi Arabia.

Finally, enhancing system efficiency and effectiveness to improve targeting, information management, and benefits delivery will be an essential component of continued support. Activities to strengthen SPJ systems are envisaged in Djibouti, Egypt, Iraq, Jordan, Lebanon, Morocco, Tunisia, West Bank and Gaza, among others.

**Challenges to SPJ COVID-19 Response in MENA**

While the COVID-19 SPJ response in MENA has been relatively robust, challenges remain and are likely to persist beyond the pandemic given changing demographic and economic conditions as well as ongoing exposure to shocks. Countries in MENA spend considerable public resources on social safety nets but much of this spending is still allocated to universal subsidies which can crowd out resources for more targeted support. Targeted programs have relatively low coverage of the poor and reach only one third of the bottom quintile, which is less than half of the world average. These systems have the potential to deliver timely, well-targeted, and expanded benefits, both in business-as-usual and crisis contexts. At the same time, the expansion of the social safety net must be based on fiscal sustainability and efficient allocation of scarce resources.

COVID-19 has heightened the importance of reforming pension systems in the MENA region and magnified the tension between fiscal and macroeconomic needs and promoting equity and ensuring welfare. Currently, the elderly and persons with disabilities in the region constitute less than half of all safety net beneficiaries yet suffer disproportionate impacts of the pandemic. The elderly population is projected to increase rapidly in the coming decades, compounding existing pressures on social assistance programs. In various MENA countries, the costs of funding pensions are becoming increasingly unaffordable, if not crowding out other priority areas of spending. Policy actions can be taken to ensure that the elderly and people with disabilities are better prepared for unexpected health-related expenses.

COVID-19 has clearly demonstrated the coverage gap in MENA countries and the importance of reforming social protection to expand coverage, and it has magnified the tension between covering the informal sector workers and managing the requisite fiscal and policy trade-offs. While data are limited, estimates suggest that the percentage of the labor force who do not contribute to social security ranges widely in MENA countries: 32 percent in Libya, 45 percent in Egypt, 70 percent in Morocco, and nearly 90 percent in Yemen. Informal workers tend to be overlooked by traditional social protection approaches and to lack social insurance (which is typically provided by employers); they have been hard hit by the pandemic. Cash transfers have been a common response in MENA to

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22 For instance, the average non-subsidy social safety net program in MENA distributes only 23 percent of its total benefits to the bottom quintile, while the corresponding figure for the average comparator programs in Latin America and the Caribbean and in Eastern Europe and Central Asia is 59 percent.


help informal workers cope with income losses; however, coverage tends to fall short and one-off transfers are insufficient for longer-term economic recovery. Policy actions can be taken to ensure that social insurance and labor market programs cover informal workers.

COVID-19 has raised the importance of protecting the wellbeing of and development gains among women and children in the MENA region. The effects of the COVID-19 pandemic in MENA are expected to disproportionately affect women and children, with the potential to further exacerbate existing inequalities and to deepen human capital outcomes. Domestic and gender-based violence tends to increase during public health emergencies due to reduced access to social services and support, financial and social stressors, periods of quarantine or social isolation, family separation, and the inability to escape abusive partners. The COVID-19 crisis is expected to significantly impact children, causing over 10 million children to fall into monetary poverty, 100 million children to be out of school, and 51,000 children under five to be at risk of mortality due to disruption of essential health and nutrition services. Furthermore, women’s employment in MENA was expected to be more affected by lockdowns and supply chain disruptions due to their greater presence in the services and informal sectors. About two-thirds of employed women in MENA work in the health sector and informal economy which have been hit hard by the crisis. As a result, the COVID-19 crisis will likely worsen human capital outcomes in MENA. The 2020 Human Capital Index in MENA shows that a child would only be 57 percent as productive as she could be given complete education and full health based on pre-pandemic conditions. Social protection response measures should therefore be designed and delivered to address specific disparities and vulnerabilities that women and children face in order to mitigate any worsening of gender- or child-based outcomes.

IV. FRAMEWORK FOR SPJ COVID-19 RESPONSE IN MENA WITH COUNTRY EXAMPLES

Based on the context of the COVID-19 Social Protection and Jobs (SPJ) response in the Middle East North Africa (MENA) region, a social protection framework has been developed (Figure 5). The framework is intended to support countries to respond to population needs more efficiently during times of crisis and to establish plans for scaling programs up during and after shocks and for building back better. The proposed framework is consistent with the Adaptive Social Protection approach, which identifies the building blocks to respond to the impact of shocks and to support the capacity of the poor and vulnerable households to prepare for, cope with, and adapt to the shocks. The program and policy options are discussed for each stage of the response (that is, emergency relief, recovery, and resilience). These options are elaborated for social assistance, social insurance, and labor market programs (see Box 2).

Figure 5. Social Protection Framework for MENA based on the Three Main Phases of Response: Emergency Relief, Recovery, and Resilience

The framework supports countries to align instruments and interventions for specific contexts. MENA has countries and territories that are resource-rich (Gulf Cooperation Council), conflict-affected (Iraq, Syria, and Yemen), and a high prevalence of refugees and displacement (Jordan and Lebanon).

The following sections provide a menu of measures that MENA countries can adopt in response to COVID-19 alongside country case studies. While certain measures already exist and require strengthening or scaling up in some countries, new interventions and/or systems will need to be introduced in others. In all situations, a reliance on national systems and existing data resources will help to align programmatic interventions to country strategies, reduce fragmentation, and provide the underpinning for current and future dialogue and support. In particular, during the resilience stage, MENA countries can better-leverage existing SPJ systems and basic service delivery systems to improve results on the ground.

Interventions in the emergency relief phase provide essential support to poor and vulnerable households to save lives, to reduce reliance on negative coping mechanisms, and to mitigate longer-term impacts on human and physical capital, household incomes, and wellbeing. Generally, countries rely on and adapt existing programs and systems. Social or universal registries enable effective short-term measures to meet the immediate needs of households. Leveraging existing systems facilitates relative efficiency. Horizontal and vertical expansion of safety nets (reaching new beneficiaries and increasing benefits to existing beneficiaries, respectively) bring time efficiencies.

Short-term social assistance interventions can smooth consumption, reduce reliance on negative coping strategies, and protect human development gains during crises. Nearly all MENA countries deferred utility payments to help households cover expenses. Cash transfer programs prior to the pandemic ranged from national household-targeted schemes to limited project-based schemes; both allow vertical and horizontal expansion. Most of the region’s social registries are nationally based and hosted by government institutions and ministries; some have beneficiary databases with extensive coverage. The cash transfer programs in Djibouti, Egypt, Iraq, Jordan, Morocco, and Tunisia are anchored in comprehensive social registries. Table 3 presents social assistance response options during the emergency relief phase, with select country examples.
### Table 3: Social Assistance Response Options during the Emergency Relief Phase

<table>
<thead>
<tr>
<th>Social Assistance</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Expand coverage of social assistance horizontally and/or vertically to restore income and compensate for higher costs, based on population vulnerabilities:</td>
<td>• <strong>Jordan:</strong> Expanded Takaful cash transfer (CT) program to an additional 85,000 households from 2019; provided a three-month emergency cash transfer to 240,000 informal worker households in 2020; provided one-year emergency CT to 160,000 informal worker households in 2021.</td>
</tr>
<tr>
<td>o Target programs to vulnerable populations: the elderly, chronically ill, homeless, disabled, widows, and orphans.</td>
<td>• <strong>Iraq:</strong> Expanded the cash transfer program to an additional 70,000 households from 2,919; Increased the transfer value for 1.35 million existing CT beneficiary households and planned to expand to an additional 300,000 households.</td>
</tr>
<tr>
<td>o Reach places where vulnerable segments of the population live (e.g., care centers and internally displaced and refugee populations).</td>
<td>• <strong>Saudi Arabia:</strong> Provided special funds (SR38 million) in the Social Development Fund (SDF) to provide food supply for the most vulnerable and those affected by the COVID-19 pandemic and lockdowns; allocated over 3,600 school buildings allocated for lower-income expatriate workers to decrease highly populated areas where the outbreaks were especially severe.</td>
</tr>
<tr>
<td>o Roll out labor intensive public works programs in adherence to COVID-19 restrictions to provide short-term employment to the poor and vulnerable who are able bodied.</td>
<td>• <strong>Kuwait:</strong> Implemented cash assistance for widows, divorced women, orphans, and the elderly in the first phase of the pandemic.</td>
</tr>
<tr>
<td>• Adapt ongoing social assistance programs to reflect COVID-19 limitations:</td>
<td>• <strong>Egypt:</strong> Added 411,00 households to the Takaful and Karama cash transfer programs; offered a six-month emergency cash transfer to 2 million informal workers who self-registered in the Ministry of Labor and Manpower database, with eligibility cross-checked against the Unified National Registry.</td>
</tr>
<tr>
<td>• <strong>Morocco:</strong> Implemented an Emergency Cash Transfer program (Tadamon operation) from April to July 2020 for about 5 million households that were not covered by social protection programs.</td>
<td>• <strong>Tunisia:</strong> Horizontally and vertically expanded AMEN social cash transfer components from about 8 to 30 percent of the population from May to June 2020; provided a new Emergency cash transfer to more than 30 percent of the population by expanding AMEN social cash transfer components and topping up low pensions in October 2021 (ongoing).</td>
</tr>
<tr>
<td>• <strong>Algeria:</strong> Amended cash transfer and pension payment restrictions to reduce the risk exposure of the elderly and retirees by...</td>
<td></td>
</tr>
</tbody>
</table>

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29 Horizontal expansion involves scaling up existing programs or introducing new programs to cover more beneficiaries, whereas vertical expansion of transfer programs indicates an increase in adequacy (i.e., increased benefit levels) among existing beneficiaries.
Cash transfer programs: use mobile phones or electronic payments; apply social distancing and hygiene practices.

Public works programs: enforce social distancing; waive requirements for in-person participation; adapt activities to pandemic response such as emergency health services or digital works.

Conditional programs: relax conditionalities (e.g., education and health) to continue coverage during lockdowns and school closures.

- Adjust transfer modality as needed (e.g., utilize in-kind transfers rather than cash in situations where food access is constrained due to lack of markets, supplies, or both).
- Defer or cover utility payments (e.g., water, electricity, internet).

Social insurance measures have been used to mitigate the health impacts of COVID-19 on the poor and vulnerable and to cover unexpected costs of the pandemic. As of March 2020, Jordan and Saudi Arabia had introduced free COVID-19 health services to nationals and non-citizen residents while Morocco and Tunisia had expanded coverage and/or the package of services provided by national health insurance schemes. Extending coverage to include prevention and treatment of COVID-19 helps cushion beneficiaries against adverse health risks. In the emergency relief phase, many MENA countries adjusted existing pension programs. This included suspending or reducing contributions to social insurance schemes made by employees and/or employers and allowing access to pension savings on a temporary basis for emergency needs. The elderly and persons living with disabilities have received additional benefits. For example, Egypt recently approved a general pension increase, while Tunisia introduced selective top-ups for lower-income pensioners.

Table 4: Social Insurance Response Options during the Emergency Relief Phase

<table>
<thead>
<tr>
<th>Social Insurance</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide or expand health services at low or no cost, such as long-term care for the elderly and free access to testing and treatment of COVID-19.</td>
<td>• Jordan, Saudi Arabia: Provided free COVID-19 health services (citizens, expatriates, and illegals).</td>
</tr>
<tr>
<td>• Expand coverage and/or services provided via health insurance schemes.</td>
<td>• Morocco: Expanded health insurance to cover 25 percent of the population, including lower income groups.</td>
</tr>
<tr>
<td>• Provide paid leave for workers, including in the public and private sector, notably for vulnerable groups more susceptible to health impacts of the pandemic (e.g., the elderly, immune-compromised, pregnant women) as well as for childcare.</td>
<td>• Tunisia: Accelerated the implementation of a new digital health card program to cover 30 percent of the vulnerable population, including informal sector workers.</td>
</tr>
<tr>
<td>• Adapt existing pension programs, for example:</td>
<td>• Algeria: Authorized temporary paid leave for non-essential employees in the public sector, including pregnant women, caretakers of children, and persons with chronic diseases and health vulnerabilities.</td>
</tr>
<tr>
<td>o Adjust pension contribution requirements (e.g., through suspension of payments).</td>
<td></td>
</tr>
<tr>
<td>o Allow emergency access to pension savings for set timeframes and amounts (e.g., by allowing drawing of a percentage of existing savings).</td>
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</tbody>
</table>
Provide one or more additional payments: lump payments into larger and/or less frequent transfers; increase the minimum pension.

- Shift temporary responsibility to government for employer statutory social insurance contributions to prevent workers from defaulting by deferring costs to businesses.

- United Arab Emirates: Required employers to pay sick leave benefits to any employee hospitalized or in quarantine.
- Egypt: Increased general financing of pensions; piloted mobile pension payments.
- Tunisia: Provided pension top-ups for lower income pensioners.
- Saudi Arabia: Delayed rents and utility bills payments from March to September/October 2020 first for the vulnerable population, then universally, if needed; allocated special financial support (of SR 47 billion) to the health sector.

While labor market programs were least common among MENA countries, certain changes or new forms of support were introduced to maintain labor market continuity. In the short term, some countries allowed for flexibility in work hours and reductions in pay conditional on worker retention in the private sector. Based on an agreement between employer and employee, Morocco has allowed for reductions in work hours and partially paid and unpaid annual leave, with support from relevant unions and employee delegates. It is also allowing for the reduction of pay by up to 50 percent. Jordan has allowed firms, with the consent of its employees, to reduce overall wages by 30 percent or less to support work continuity. Additional examples can be found in the table below.

**Table 5: Labor Market Response Options during the Emergency Relief Phase**

<table>
<thead>
<tr>
<th>Labor Markets</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Allow legal telework/telecommuting and/or flexibility in working hours.</td>
<td>- Morocco: Reduced pay and work hours as well as partial paid and unpaid annual leave.</td>
</tr>
<tr>
<td>- Provide wage subsidies with or without reduced work time to private sector firms to minimize layoffs.</td>
<td>- Kuwait: Provided loans on concessional and long-term basis to SMES, postponed social security contributions in the oil sector and private sector.</td>
</tr>
<tr>
<td>- Provide temporary waivers of social security contributions.</td>
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<tr>
<td>- Relax eligibility to unemployment insurance benefits to increase coverage of workers affected by the pandemic.</td>
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</table>

**Recovery Phase**

In the recovery phase, households, small firms, and service delivery systems will require support, investment, and strengthening for a just post-pandemic transition. A combination of social safety net (Tables 6 and 7) and labor market (Table 8) measures can help restore livelihoods, support small businesses, recover jobs and incomes, implement employment guarantee schemes, and ensure continuity of service delivery systems. The type and scale of measures will build on the emergency response stage given the increased focus on restoration and continuity. Potential interventions relevant for the MENA context are summarized in the tables below, but once again, investment choices and balances between them must be context specific.

Further, as most countries in MENA are still operating in the emergency relief stage, many options for social protection have not yet been explored and as a result, country examples are not as
extensive. For example, public works programs can accommodate social distancing to support the restoration of incomes and services through, for instance, labor-intensive public works programs and community-driven development programs. Beyond the recovery phase, public works program can provide predictable income in a post-pandemic context.

Table 6: Social Assistance Response Options during the Recovery Phase

<table>
<thead>
<tr>
<th>Social Assistance</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Leverage COVID-19 response, reinstate or introduce accompanying measures into cash transfers (e.g., education and health conditions to sustain objectives for medium- to long-term human development).</td>
<td>• Iraq: Exempted monthly loan payments for specific vulnerable or at-risk groups, such as farmers, to avoid loss of assets and to help rebuild livelihoods.</td>
</tr>
<tr>
<td>• Target households and communities with accompanying systematic behavior change communication campaigns.</td>
<td>• Kuwait: Eased rules on early retirement and eased withdrawals from retirement pensions. Targeted the second phase of assistance to support low-income families who had no fixed income or income was affected by the crisis.</td>
</tr>
<tr>
<td>• Implement labor intensive public works (LIPWs) that are regular year-long and promote periodic short-term employment.</td>
<td>• Saudi Arabia: Instituted waivers and deferral of 6-9 months for various fees for expatriates, residency and Iqama (e.g. visas and associated fees).</td>
</tr>
<tr>
<td>• Invest in community driven development (CDD) to promote service delivery, community-level infrastructure, and short-term employment, including Social Funds for Development (SFDs).</td>
<td>• Morocco: Accelerated the SP reform agenda covering the reform of the existing CT program, remove reming subsidies, and implementing a family allowance starting in early 2023.</td>
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<tr>
<td></td>
<td>• Tunisia: Targeted expansion of the permanent AMEN social CT from 8 to 10 percent of the population (ongoing).</td>
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Table 7: Social Insurance Response Options during the Recovery Phase

<table>
<thead>
<tr>
<th>Social Insurance</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Promote coverage of health and other social insurance in the informal sector.</td>
<td>• Jordan: Used half of the maternity insurance contributions from 2020 to support vulnerable groups, including the elderly and sick.</td>
</tr>
<tr>
<td>• Revive and incentivize pension contributions.</td>
<td>• Morocco: Extended health insurance coverage valid for preventive and curative costs due to COVID-19 and extended to private hospitals and polyclinics.</td>
</tr>
<tr>
<td>• Extend emergency relief measures or adjust existing measures to target different segments of the population based on the evolution of the crisis and changing needs over time.</td>
<td>• Saudi Arabia: Mandated automatic renewal of health insurance cards for an additional six months as well as waivers and deferral of 6-9 months for various fees for expatriates and residents.</td>
</tr>
<tr>
<td>• Automatically continue or renew health insurance coverage to allow for continued use of health services throughout the stages of the pandemic.</td>
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</tbody>
</table>
Table 8: Labor Market Response Options during the Recovery Phase

<table>
<thead>
<tr>
<th>Labor Markets</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Support economic inclusion efforts for poor and vulnerable groups to provide opportunities for self- and wage employment.</td>
<td>• Jordan: Implemented a package of wage support programs for companies that had to reduce wages or suspend activities without pay, with the potential to reach 400,000 vulnerable families.</td>
</tr>
<tr>
<td>• Promote and design employment guarantee schemes (e.g., systematic and sustainable annual and multi-year public works programs to address seasonal unemployment among the poor and vulnerable).</td>
<td>• Saudi Arabia: Provided financial support for 100,000 job seekers in the private sector, including for training and access to remote work tools.</td>
</tr>
<tr>
<td>• Provide subsidies for job creation that are targeted at newly created jobs.</td>
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</tbody>
</table>

Resilience Phase

In the medium to long term, MENA countries will benefit from social protection and jobs programs that can mitigate the long-term economic impacts of disasters and shocks whether natural (such as, pandemics, droughts, landslides, floods, and other disasters) or manmade. Such mitigation will be increasingly important to protect the poor and vulnerable and to build the resilience of households and systems to future disasters and shocks.

The regional social protection programs and systems will need to be more adaptive, with flexible entry and exit, and more shock-responsive to respond to future crises with ease and accuracy. MENA countries will need to

- Improve or build core safety nets that are anchored on more comprehensive, effective, and efficient systems
- Enhance linkages between the safety nets and disaster response mechanisms
- Expand and improve the efficiency of social insurance mechanisms
- Promote more resilient households and small businesses that can provide reliable sources of self- and wage employment

In the longer term, strengthening the core delivery systems of safety net programs can help households and communities move from recovery to resilience. While many countries in MENA remain focused on emergency relief or recovery phases, some MENA countries have laid stronger foundations for expanding or establishing core safety net programs (such as, social or universal registries). Some countries have moved to establish digital systems for registration, which can speed up delivery of benefits in the short term while also increasing efficiency of delivery in the medium to long term. Table 9 presents response options and early country examples.

Table 9: Social Assistance Response Options during the Resilience Phase

<table>
<thead>
<tr>
<th>Social Assistance</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enhance and/or Establish Core Safety Net Programs</td>
<td>• Egypt: Expanding the existing Takaful and Karama programs to support longer-term recovery and resilience.</td>
</tr>
<tr>
<td>• Scale up robust safety nets with information systems and targeting mechanisms that can respond to future shocks and provide support to poor and vulnerable households.</td>
<td></td>
</tr>
</tbody>
</table>
• Invest in social registries to expand their coverage and enhance capacity to undertake demand-driven enrolment and generate just-in-time information on households’ welfare.
• Build resilience into safety net programs by providing poor households (especially those led by women or youth) a package of grants, training, self-employment opportunities, and linkages to markets to build long-term resilience.
• Review and reorient policy frameworks to promote medium-term programming for safety nets and to harmonize disparate programs to achieve efficiency, reduce wasteful spending, and assure fiscal space for safety net spending.

In many cases, social insurance schemes can expand in the case of economic and other shocks to meet the needs of poor and vulnerable households (Table 10). Expansion of social insurance comes with challenges given the large scale of informality and growing proportion of elderly in MENA countries. For example, countries will need to ensure that short-term (emergency) measures are implemented in the context of longer-term term pension reforms. Providing support to informal workers in the face of future shocks will also need to be a policy priority for MENA countries. Finally, while few countries in the region had wage support programs prior to COVID-19, some countries expanded existing programs or established new ones to encourage employee retention and alleviate income and working capital constraints (Table 11).

Table 10: Social Insurance Response Options during the Resilience Phase

<table>
<thead>
<tr>
<th>Social Insurance</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promote Expansion and Effectiveness of Social Insurance Programs</td>
<td></td>
</tr>
<tr>
<td>• Invest in expanding coverage of old age and disability pension schemes.</td>
<td></td>
</tr>
<tr>
<td>• Establish systematic unemployment insurance schemes.</td>
<td></td>
</tr>
<tr>
<td>• Promote innovations for expanding social insurance among the informal workers.</td>
<td></td>
</tr>
<tr>
<td>• Algeria: Permanently expanded social security to cover delivery in private maternal health facilities.</td>
<td></td>
</tr>
<tr>
<td>• Israel: Public sector and union workers permanently established a joint vacation days fund for emergencies.</td>
<td></td>
</tr>
</tbody>
</table>

Table 11: Labor market response options during the resilience phase

<table>
<thead>
<tr>
<th>Labor Markets</th>
<th>Select Country Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Build More Resilient Small Businesses</td>
<td></td>
</tr>
<tr>
<td>• Promote establishment of emergency funds to help small businesses and suppliers continue operations during emergencies.</td>
<td></td>
</tr>
<tr>
<td>• Support micro-entrepreneurship among the poorest households with grants, inputs, and training to build resilience and promote diversification of livelihoods.</td>
<td></td>
</tr>
<tr>
<td>• Expand financial inclusion, linkages to micro-finance products, including credit and insurance instruments.</td>
<td></td>
</tr>
<tr>
<td>• Expand Active Labor Market Policies (ALMPs) in form of skills development, re-training, job-seeking support, wage subsidies, and productive Economic Inclusion programs.</td>
<td></td>
</tr>
<tr>
<td>• Jordan: Established support packages for workers and firms, including the Istdama Program which provides 13 months of wage subsidies to 100,000+ formal workers in companies affected by the pandemic. The program extended to cover 30,000+ for six months in 2022.</td>
<td></td>
</tr>
<tr>
<td>• Saudi Arabia: Established government stimulus packages to support the banking and small and medium enterprise (SME) sectors.</td>
<td></td>
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<td>• Kuwait: Began improving the job seeker portal by merging vacancies in the public and private sectors.</td>
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V. EARLY LESSONS AND SOME REMAINING CHALLENGES

Key issues and lessons emerged from the nearly 18 months of pandemic response that can contribute to the learning process and improvements of future social protection programs and/or systems. Many of these issues and lessons were already known, but COVID-19 has brought them to the forefront.

A selection of emerging issues and lessons are discussed across four main areas of recommendation. An anticipated midterm review of the Social Protection and Jobs (SPJ) COVID-19 response in the MENA region will provide an update and offer more comprehensive and concrete lessons to inform SPJ dialogue as countries move to the phases of recovery and resilience. This follow up analysis will also be an opportunity to further assess the effectiveness of country measures that were adopted to which extent they were implemented as actually adopted by the policy makers.

Invest in Adaptive Social Protection Systems

**COVID-19 response shows that countries in MENA were able to respond to the pandemic relatively quickly, but programs can become even more adaptive to disasters and shocks in the future.** Countries in MENA used existing programs and policies to mount a strong response to the COVID-19 pandemic over the last 1.5 years, suggesting that SPJ programs can be designed to be adaptive to respond to disasters and shocks when they happen. However, both low- and middle-income MENA countries can increase investment in systems building and capacity development for more efficient and effective social protection programs that can respond to disasters and shocks when they occur, in a quicker, more predictable, and systematic way. Finally, the diversity of SPJ measures that were implemented reflects a strong political will to address the needs of the poor and vulnerable. This crisis presents an opportunity for countries to leverage the COVID-19 response to strengthen and enhance recovery and resilience efforts and develop adaptive social protection systems.

**Information and data management systems, such as social registries and management information systems, are essential components of adaptive social protection systems.** These systems provide convenient platforms for adjusting safety nets to quickly respond to country needs in periods of crisis. Functional and effective social registries and management information systems can help with immediate horizontal or vertical expansion of existing programs to respond to the emergency needs of the poor and vulnerable. The functionality of these systems is tested during periods of crisis, and adaptations may be required to enhance responsiveness to future shocks. In countries in MENA and globally, progress has been made to ensure interoperability between different social protection information systems and national identification systems, for example. The evolution of data and information systems ranges across countries in MENA, from nascent in Yemen to fairly robust in Morocco. Overall, existing social registries and management information systems in Djibouti, Egypt, Iraq, Jordan, and Morocco were instrumental in facilitating design and delivering government measures and Bank-supported programs alike.
Digitalization of social protection systems is an urgent necessity for countries to embrace. These systems can be leveraged to maximize efficiency gains in social protection design and delivery. Digitalization of social protection can facilitate continuous online enrolments rather than more expensive one-off enrolment processes and allow for direct electronic payments into beneficiary accounts. This increases efficiency by limiting leakages or delays in payments. While some countries are already promoting these innovations on the payments side, including Iraq, Jordan, Morocco, and West Bank and Gaza, many countries can further progress in the digitalization of social protection.

Key elements of delivery remain important across all social protection programs and can be adapted to pandemic realities. Countries will need to invest in innovative outreach, communications, service delivery, and beneficiary monitoring to maintain the reach of interventions and to ensure delivery of benefits. Innovations may include adjustments to existing projects to respond to COVID-19, such as raising awareness among beneficiaries on COVID-19 prevention measures (as in Jordan), providing protection gear for cash-for-work beneficiaries (as in Djibouti), suspending activities such as trainings that require in-person gathering (or adapting trainings to virtual settings), or reallocating funds within project components to increase cash transfers (as in Iraq). Transitioning to contactless services became a priority in the pandemic but also proved to be a challenge. Solutions included use of mobile phones, smart cards (in Iraq, to be expanded to new beneficiaries), promotion and application of new protocols for hygiene and social distancing at payment sites (in Djibouti, through project restructuring), and use of helicopters for in-kind deliveries, among others.

Regular monitoring and evaluation remain an essential way to provide insights on quick wins while identifying issues in program delivery to redress in the medium to long term. In Tunisia, the Iterative Beneficiary Monitoring (IBM) surveys found that social databases enabled institutions to deliver benefits to the bank accounts of targeted beneficiaries. The surveys also revealed systemic challenges related to awareness among beneficiaries, timely collection of benefits, adequacy of benefits, and limited technological capabilities among the poor and vulnerable (for example, lack of a mobile phone or access to a bank). While COVID-19 presented unique challenges to mobility and communication, it also forced countries to invest in contactless communications and to utilize technological innovations to benefit the poor and vulnerable, with applications across social assistance, social insurance, and labor market programs. Finally, awareness and communication are needed for the implementers and beneficiaries to take full advantage of the systemic improvements available to them. Use of grievance redress mechanisms and continuous feedback mechanisms can help ensure feedback loops inform decisions that facilitate steady and systematic improvements.

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Balance Social Assistance, Social Insurance, and Labor Market Response

Globally, the SPJ response largely focused on social assistance and in particular cash transfer programs. Cash transfer programs were the preferred modality for immediate relief. This is because in many countries, systems to facilitate targeting and payment mechanisms already existed, so cash transfer delivery could be streamlined compared to other forms of social protection. Cash transfer even proved most relevant due to the COVID-19 limitations on physical contact processes, because transactions incentivized utility of electronic cash transfers as preferred mechanisms to reach affected populations. However, despite the quick wins displayed in use of cash transfers, countries will need to develop electronic payment mechanisms where they do not already exist and to consider comparable alternatives in hard-to-reach areas where establishing functional electronic payment mechanisms may remain a challenge. MENA countries will need to further invest in social protection delivery mechanisms going forward.

At the same time, the role of social insurance and labor market programs should not be overlooked. Social insurance programs have included paid sick leave, health care insurance support, pensions-related measures, waivers or subsidies to social security contributions, and unemployment benefits. Paid sick leave is important to curb the spread of COVID-19 while supporting households that may be vulnerable to job and income losses. Labor market programs primarily consist of wage subsidies, training measures, labor regulations, or adjustments to work time or structure. While these labor market interventions aimed to help employers maintain existing jobs or encourage hiring of new employees, they do carry a large fiscal burden and are unlikely to be sustainable in the longer term. Therefore, governments will have to innovate and introduce structural changes to such programs during the recovery and resilience phases to support longer term labor market participation. One place to start would be to develop a better understanding of the nature of informality in many MENA countries, and how informal workers can be better leveraged to both contribute to and benefit from social protection measures as an integral part to addressing the challenge of coverage of social protection programs in low- and middle-income countries in the region and globally.

Incorporate Age-, Child-, and Gender-Sensitive Interventions

The COVID-19 pandemic highlighted the importance of accurate data to improve preparedness and to make social protection programs more inclusive. Data gaps complicated country responses and planning across many countries in MENA, although the magnitude varies from country to country. This included gaps in available data on the well-being, needs, and preferences of older people including for health care and long-term care, gender-disaggregated data, as well as granular and specialized data on disability. In the future, it will be important to improve data collection, standardization, access, and use of these data to support countries to better plan for population aging, including for response to health emergencies such as the current pandemic. The collection and use of sex-disaggregated data can help stakeholders understand how COVID-19 affects women and men differently and support the design of gender-sensitive interventions in the short and medium term. Much can be already done with existing administrative data as well as household and labor force surveys to profile households and household members that are at risk of job or income losses, increased child or eldercare demands, or subject to demographic vulnerabilities. In particular,
child- and gender-sensitive social protection approaches can be designed to contribute to the accumulation and protection of human capital throughout the lifecycle.

Older workers who find it more difficult to return to work may resort to early retirement or informality, which has longer-term consequences for their livelihoods and wellbeing. Older workers who have lost their jobs as a result of business shutdowns, especially the large number of elderly workers in informal, temporary, and irregular jobs, may have a more difficult time than their younger counterparts returning to work, especially at their previous level of pay. Other older workers may have been forced to collect public pension payments at an earlier age than they had planned, resulting in lower benefit payments for the rest of their lives. Finally, other older workers may be forced to resort to informal, irregular, or temporary jobs or to delay their retirement and stay longer in their formal job. In some contexts, it may be appropriate to promote formalization or to raise the retirement age.

Identify Opportunities for Reform Looking Forward

There is growing anecdotal evidence to suggest that COVID 19 has exacerbated structural challenges affecting the design and performance of social insurance and pension systems in MENA. In addition to providing low coverage relative to need, programs can be financially unsustainable, inequitable, and inadequate. Balancing payments today with tomorrow’s needs is a challenge for reforming and designing pension systems at any time, but particularly during times of health or economic crisis. Contribution reductions have affected social insurance programs even as demand for health, welfare, and public safety services have increased. Suspending or reducing contributions to pension schemes for employees and/or employers can help reduce labor costs and provide an incentive to retain workers. However, contribution holidays need to be managed alongside long-term reforms to make pension systems more robust and able to meet the needs of the growing elderly population. Reversing and increasing contributions once economic stability returns is therefore recommended. The same applies to health insurance and other types of employer-provided social insurance which are likely to have been affected by the economic downturn.

At the policy and institutional level, COVID-19 response provides an opportunity to facilitate dialogue and reform on budgeting and programming for social protection. In Morocco, for example, the government mobilized financial and human resources to reach a large share of the population affected by the pandemic or otherwise deemed to be poor and vulnerable. Morocco set up a solidarity fund to provide emergency cash transfers to non-beneficiaries of the National Social Security Fund, including informal workers affected by the pandemic. Reforms centered around budgeting and planning, including improving targeting effectiveness and moving away from inefficient universal subsidies. The Morocco example demonstrates how the response to COVID-19 pandemic and the related dialogue presented an opportunity for advancing policy and institutional reform. Deepening dialogue and advisory services in countries like Morocco will be paramount in addressing second-generation reforms such as targeting effectiveness, budget programming for social protection, harmonization of fragmented programs by variant institutions, and fostering enhanced inter-government coordination to usher in efficiency gains.
Finally, institutional arrangements and governance issues tend to be most challenging in FCV contexts, but also present opportunities for improvement. When institutions with social protection mandates, including for social assistance policy and strategy, also implement social protection programs either directly or by delegation to semi-autonomous agencies, policy and implementation decisions tend to be more coherent and cohesive. In emergency situations, it is often better to leverage existing delivery mechanisms despite any shortcomings in capacity or system functionality, in order to identify weaknesses and incorporate mitigation measures during implementation (as in Iraq, Lebanon, and Morocco). This experience is common in most low-capacity and low-income countries where programs have been established from a very low base and continuous learning and adaptation constituted an important design element of program.

VI. CONCLUSION

With the understanding that the response to COVID-19 is still a work in progress and that lessons are only starting to emerge, this paper reviews the context of the COVID-19 crisis and response in the Middle East North Africa (MENA) region, provides a menu of social protection and jobs policies and interventions that countries adopted during the COVID-19 crisis, and presents forward-looking options that can be considered for mitigating the social and economic consequences of the crises. The paper highlights key aspects of measures taken by countries in response to the pandemic and discusses some of the early lessons.

While a host of measures were announced by MENA countries, some may not have been fully realized due to political, fiscal, systemic, policy, capacity, or delivery constraints and factors. A comparison of announced measures to implemented measures, including the extent of their effectiveness, stands to be a learning opportunity for MENA teams. This comparison can help establish a more granular understanding of contextual constraints to implementing SPJ programs in the midst of disasters and shocks. Subsequently, it can contribute to shaping adaptive SPJ programs and systems in MENA and in comparator countries and regions.

The effects of the pandemic on the poor and vulnerable in the emergency and recovery periods will partially depend on the effectiveness of the social protection and jobs measures that countries adopted and how they are being implemented, in addition to the public health response related to hygiene and social distancing measures as well as roll out of the vaccination program. For poor and vulnerable households, communities, and small firms, their success in returning to the new normal will depend on how policy choices that address their needs are prioritized during the recovery phase as countries make difficult policy choices to allow broader macroeconomic recovery.

The MENA response over the last one and one-half years demonstrates that social protection systems in the region’s 21 countries can be leveraged to address emergent needs when crises strike. The World Bank can significantly contribute to addressing financing, knowledge, and delivery needs based on existing lending and policy dialogue platforms, drawing on the experience in MENA as well as global learning. The SPJ policy dialogue in MENA is thus even more important moving forward, to help countries strengthen and boost policy reforms and to design and implement social protection
programs and systems that can adequately, effectively, and efficiently target the poor and vulnerable and be able to respond to population needs during disasters and shocks. The importance of reflecting on the lessons from this experience as the world seeks to emerge from the coronavirus pandemic cannot be overemphasized.
REFERENCES


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| Algeria | Social Assistance    | • One million beneficiaries have been identified to receive solidarity allowance benefits, with flexibility on dates during the month to reduce congestion at post office collection points.  
• A “solidarity transfer” of DZD 10,000 (approx. USD 80) was announced on 13 April 2020 to top up the DZD 6,000 (USD47) for needy families impacted by COVID-19.  
• As of 27 May 2020, 135,687 out of the planned 322,000 beneficiaries had received cash assistance totaling DZD 22 billion.  
• DZD 1,393 billion (EUR 12 million) to be deposited into the postal accounts of families through community-based targeting.  
• To reduce exposure to risk for the elderly, a proxy letter can be delivered to another person to receive pension benefits for the beneficiary. Measure applies for retirees and elderly persons receiving cash transfers, among others.  
• In-kind distribution campaign of food and hygiene items to the most vulnerable families, including those living in isolated areas and impacted by the lockdown. |
|        | Social Insurance     | • To reduce exposure risk for elderly, a proxy letter can be delivered to another person to receive pensions/benefits in place of the beneficiary (e.g., retirees, elderly receiving cash transfers, etc.).  
• Temporary paid leave for 50 percent of employees, pregnant women, women who take care of children, and persons with chronic diseases and health vulnerabilities.  
• Social security was permanent expanded to cover delivery in private maternal health facilities.  
• The National Social Insurance fund (CNAS) extended the deadline to pay employers and independent contributions until the end of May and September 2020, respectively, while still covering paid leave and unemployment benefits for some. Penalties from previous late payments were also suspended for six months, starting in April 2020. |
| Bahrain | Social Assistance    | • Government support included direct aid to families in need and doubling the monthly assistance for those registered in social affairs and the Royal Foundation for Humanitarian Action. A budget of BHD 5.5 million was allocated to double the value of social security benefits, which cover 17,000 Bahraini families, and double the value of the disability pension to benefit 12,000 people registered with the Labor and Social Development Ministry.  
• The Electricity and Water Authority will pay individuals and businesses’ utility bills for three months from April 2020 (up to the costs incurred during the same period in 2019). This measure was extended for a further three months, until July 2020. In July 2020, the authorities approved exempting households from paying municipality fees on their first residence for three months. |
|        | Social Insurance     | • Private sector employees registered with the national Social Insurance Organization will have their salaries paid from the unemployment insurance fund for three months starting in April 2020. A total of 100,000 Bahraini private sector employees will benefit from the measure (cost of BHD 215 million).  
• The King of Bahrain ordered the Ministry of Health to cover the treatment expenses of COVID-19 patients, including testing and quarantine services, for all citizens and residents. |
|        | Labor Markets        | • As part of the economic and financial package, wage subsidies constituting 50 percent of salaries will be provided for Bahrainis working in the most affected sectors for a further three months starting in July 2020. |

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32 Summary based on information provided by countries and country office-based Bank staff, internet searches, and other sources provided in reference and footnotes. The summary is synchronized to the extent possible with the Global SPJ COVID-19 Response Compilation but may not provide as much detail as the compilation itself.

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| Djibouti | Social Assistance    | • Government is restructuring World Bank-funded project to provide food vouchers for 27,000 households for three months for a value of USD 5 million. Food vouchers were the government’s priority because of risk to households of food price inflation given that almost all food is imported, as well as the limited capacity for mobile cash payments. World Bank support builds on an existing World Food Program (WFP) program. In tandem, the government is continuing its cash transfer program and has introduced new procedures in rural areas to limit COVID-19 transmission risks in distribution of physical cash, including physical distancing in queues, beneficiary handwashing, and masks and gloves for social workers.  
• Ministry of Social Affairs and Solidarity (MASS) provided food aid through a voucher system to vulnerable families who were already part of the social registry (FDJ10,000 or USD 56.5 per month per family for three months). This assistance has been extended to daily wage workers who can no longer work because of containment measures. Nearly 64,000 poor households were targeted (the number of daily worker households reached is not yet available).  
• MASS started a new phase of distribution of vouchers to vulnerable populations affected by the November 2019 floods, for a value of FDJ10,000 per household to 4,500 households in Djibouti City. WFP and MASS staff finalized the voucher distribution on 1 April. These households received their vouchers to be redeemed at retailer sites to receive food in the various neighborhoods of Djibouti City. In addition, UN High Commission on Refugees (UNHCR), Office of National Assistance for Refugees and Displaced Persons (ONARS), and MASS agreed to include refugees in the cash assistance program.  
• Deadlines for payment of utilities (water, electricity, and internet) deferred until the end of the containment period. |
| Egypt   | Labor Markets        | • As per decree (2020/63), certain categories of employees in the private sector who lost their jobs or had a reduction of work time due to COVID-19 can be entitled to government compensation.  
• According to the “Arrêté 2020-049/PR/MTRA”, workers placed in partial activity could receive a compensation of up to 70 percent of their wages despite the reduction in working hours—30 percent paid by the State, and the remaining 40 percent by the employer. The employers will receive money from the government and must pay their employees.  
• Ministry of Social Solidarity added 160,000 new households to Takaful and Karama Program (TKP) bringing the total number of people under to TKP to 3.11 million households (approx. 11 million individuals) The TKP budget will also increase in the new fiscal year from EGP 18.5 billion to EGP 19.3 billion and coverage will reach a total of 3.5 million households.  
• Increased payments are envisioned for women leaders in rural areas (EGP 900 per month instead of EGP 350).  
• A one-off monetary compensation of EGP 500 for three months is being made to 1.9 million informal workers (out of 4.4 million applicants) registered in the database of Ministry of Labor and Manpower; the primary sectors are construction, ports, agriculture, fishing, plumber, electrician. Payments will be made through post offices and banks. The first payment was processed in April 2020 via Post Offices (4,000 branches) and Agriculture Bank of Egypt (1,100 branches). 600 schools were also used as payment sites for a total of 5,700 outlets. Beneficiaries receive a free ATM card with their first payment to cash their second and third payment via post offices and/or banks. Accepted beneficiaries are notified via SMS regarding the location and time to visit to collect their first payment and ATM card, to avoid overcrowding and ensure the safety of beneficiaries.  
• An unrestricted/unconditional one-off cash transfer by World Food Program (WFP) of EGP500 (equivalent to USD 31) to 50,000 families with children under three years old, and pregnant women, in five governorates to complement the national social safety nets (covering those who were previously rejected from Takaful and other SSN programs and who are now more vulnerable due to sudden disruption of services and loss of income)  
• In support of the Ministry of Manpower, in April 2020, WFP launched its first monthly cash assistance of EGP 500 for about 52,000 registered casual workers in nine governorates, 40,500 of

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42 http://gate.ahram.org.eg/News/2397982.aspx
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| Iran    | Social Insurance    | • Pension financing has been increased by 14 percent for the budget of FY21.  
          |                     | • To facilitate payments, pension payments are spread across different days (depending on the level of your payment) and schools are also being used as payment sites.  
          |                     | • Mobile payments will be piloted in Luxor and Port-Said for the transfer of pension. The variable wage pension will be re-adjusted by adding 80 percent of the special allowances that are not included in the basic wage of pensioners who ended their service between 1/2006 and 6/2016.  
          |                     | • Pensioners will receive five bonuses (variable income) at a total cost of EGP 35 billion this year. |
|         | Labor Market        | • Egypt activated the Employees Emergency Fund that provides financial aid and subsidies to employees who were not receiving salaries from companies facing the risk of closure due to pandemic. The fund could be equivalent to 100 percent of basic insurance salary and a minimum of 600 EGP per month. By April 2020, The Ministry of Manpower issued payments (EGP 57 million) for 48,000 workers in 205 establishment non-performing companies in tourism sector. |
|         | Social Assistance   | • Iran is planning to support around 3 million lower-income families without permanent jobs with cash transfers of up to 6 million rails (around USD 400) in four stages. It will be paid monthly for four months, and one additional time for Ramadan. A single person family will receive 200,000 Tomans, a two-person family 300,000 Tomans, a three-person family 400,000 Tomans, a four-person family 500,000 Tomans and a five-person family 600,000 Tomans.  
          |                     | • The government announced loans and amenities to 4 million low-income families whose livelihoods have been affected by the outbreak of Covid-19 (USD 500 million); cash transfers to households (USD 1.3 billion); and loans to 23 million households which receive cash subsidies.  
          |                     | • Procurement of hygiene kits for vulnerable children, including those without caregivers, children with disabilities and street children (Iranian and non-Iranian): Procurement is in progress and the requested quantities will be delivered to the Ministry of Cooperative, Labor and Social Welfare to distribute between SWO and NGOs. The hygiene kits will address the needs of 51,000 children living with disabilities in 906 Rehabilitation Centers and 10,000 children without caregivers in 650 Nurseries and Child Care Centers throughout the country, and also the large number of street children scattered in the capital, although numbers are not fully known. |
|         | Social Insurance    | • The Social Security Organization guarantees a wage compensation of 50 percent to workers taking sick leave.  
          |                     | • The government will cover all health care expenses of COVID-19 patients.  
          |                     | • Iran planned to allocate IRR50,000 billion (USD 305 million) as of 6 April to the Unemployment Insurance Fund, to aid those who have lost their jobs because of the COVID-19 outbreak. The workers of 10 economic sub-sectors subject to the Labor Law, the Social Security Act, and the |

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46 https://drive.google.com/file/d/1a2laAE6iw38WwgaNSfoguthv29qYUaon/view  
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| Iraq    | Social Assistance    | Unemployment Insurance Law, are eligible for the benefit for three months. The self-employed who have insurance, such as construction workers, carpet weavers, public transportation operators, and drivers, are not eligible for unemployment benefits.  
• On 7 April, the Iraqi Ministry of Labor and Social Affairs launched a new solidarity initiative campaign called “1 million Food Basket”. The campaign aims to distribute food baskets to people affected by the lockdown/preventive measures and economic downturn, including those included in the national social safety net (cash transfer) program. Cost of each food basket is estimated at USD 15 with funds mainly from CSOs and local NGOs.  
• An Emergency Grant of IQD 300 billion was announced on 4 April, covering all governorates. On 30 April, the Minister of Planning announced that the Emergency Grant will be disbursed around mid-May. Eligibility criteria are as follows: 1. Male applicants must be 18-66 years old and women 18-55 years old 2. The applicant must be registered in the unemployment registry; 3. The applicant must not have a fixed income. Government employees and families receiving state pensions, social security payments or any other social benefit are not eligible. Registration takes place on the website (minha.iq). Beneficiaries need valid documents to register (such as an ID and a ration card). Each beneficiary family will receive IQD150,000. As of 3 July, about 7 million people had received the transfer (out of 12 million considered eligible). It was indicated that 67,000 new families who were registered for the ‘emergency grant’ will be included in the list of families receiving assistance under the Social Protection Law (19 April) (under discussion).  
• Vertical expansion of SSN: 600,000 beneficiaries received a one-time top-up (another top-up is under discussion). The government, together with UNICEF, and other development partners are now discussing how to expand SSN to more beneficiaries.  
• Food assistance and nutrition support for 652,661 individuals including refugees and IDPs in the form of in-kind and cash transfers by World Food Program (WFP). The combination of both modalities came in response to current disruption to local bank and financial service providers.  
• The NGO department in the General Secretariat of the Council of Ministers provided 135 local organizations with financial, food and medical assistance and sterilization materials. A total of 118,741 beneficiaries were supported as of 2 April (data are still arriving through the electronic platform that was prepared for this purpose). On 26 April, there were 1,891,976 beneficiaries (different non-standardized, in-kind grants) through NGOs in Iraq. The Council of Ministers refers to these efforts as the “National Campaign of NGOs and Volunteering Groups to Respond to COVID-19 Impact”.  
• The Municipality of Baghdad and municipal departments in the provinces are directed to suspend the collection of levies and other financial dues from residents to ease the financial burden caused by the coronavirus. Additional measures such as the exemption of monthly loans payments for specific groups, including farmers, were announced in early April.  
• Waiver from electricity bills for Iraqi citizens.  |
| Israel  | Social Assistance    | • On April 8, the parliament approved a package of NIS 80 billion (about 6.1 percent of 2020 GDP), which includes NIS 11 billion for health expenses. The package supports the social safety net (NIS 20 billion), and funds a relaxation in the requirements for unemployment benefits and grants for self-employed workers. |

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<td>- A one-time NIS 500 grant for families with children, the elderly and other vulnerable population groups was approved by parliament.</td>
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<td>- On July 29, the parliament approved a second stimulus package of NIS 80 billion, including a one-off grant program amounting NIS 6.72 billion for adults and families with children, excluding high earners.</td>
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<td>Jordan</td>
<td>Social Insurance</td>
<td>- Histadrut (General Organization of Workers) and the government have agreed on paid leave for workers in the public sector based on a pooling system of vacation leave to share with workers who need to stay away from work. It stipulates that a non-essential designated employee that is not required to work during the crisis period will take a mandatory vacation at the expense of the workers’ accumulated vacation days. Employers in the public sector and the Histadrut will set up a joint vacation days fund for emergencies, which will work to prevent damages to workers’ wages that do not have sufficient accumulated vacation time.</td>
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| Jordan  | Labor Market        | - As part of a plan to expand the economic safety net to deal with nationwide lockdown, some employers will receive employee retention grants in the amount of 5,000 new shekels (USD 1,460) for each employee they kept, to encourage employment and prevent mass layoffs.  
  |
| Jordan  | Social Assistance   | - Government will deliver cash to current beneficiaries of the National Aid Fund (NAF) for March 2020 [around 145,000 households] due to curfew constraints. Payments will be made for the first quarter of the 2020 payment cycle [around 24,000 households] in early April. Enrolment of additional 25,000 household beneficiaries of the Takaful Program to prepare for payments is underway. Online enrolment and digital payments used due to the curfew. |
|         |                     | - NAF started the registration of the Bread Subsidy Cash Compensation Program, which targets up to 80 percent of the population with a small amount of money annually. Payments will occur over April-November 2020. Similar mode of registration as the Takaful Program is being used. The bread subsidy registration database will be used for a temporary emergency program to support households that were affected by the COVID-19 with JD70 (about USD 100) every two weeks. |
|         |                     | - The government announced a program to provide cash support to poor and vulnerable households affected by COVID-19. The Program will provide: (i) temporary (six month) CTs to 200,000 vulnerable households; and temporary (six month) benefit top-ups for NAF beneficiaries whose benefits are below a certain threshold. The number of households benefiting from the Program will be about 293,000. The Program will add about 210,000 household to the existing caseload of NAF (146,000). The set benefit for this program is JOD 136 (USD 193) for households of three members and more and JOD 70 (USD 99) for households of two members. |
|         |                     | - On 16 April, the Minister of Social Protection announced a social protection program to support daily wage workers to be carried out by the NAF. The program is financed via donations collected from citizens and the private sector through the newly formed “Emergency Response Fund—Himat Watan”:  
  |         |                     |   o The benefit amount consists of JOD70 per month for two-member households and JOD136 per month for households consisting of three members or more paid for three months. It will be delivered through e-wallets.  
  |         |                     |   o Applications are made through the pre-existing bread support cash assistance application website/Takmeely Platform.  
  |         |                     |   o As of 3 June, 230,000 households have benefitted, and an additional 50,000 are expected to receive aid.  
  |         |                     |   o The National Unified Registry is used to verify applicants’ information.  
  |         |                     | - 50,000 families received cash and in-kind aid provided by the Zakat Fund, for a total value of approximately JOD 1 million. These are a combination of old and new beneficiaries. Priority is being given to daily wage workers.  
  |         |                     | - The Hajati Cash Transfer program, tailored to Syrian refugees and vulnerable Jordanian families, was expanded to cover 18,000 additional vulnerable children. A database maintained by UNICEF Jordan with information on 38,000 of the poorest and most vulnerable households was used to identify households not receiving Hajati but in urgent need of financial support.  
  |         |                     | - In-kind distribution of bread (universal) will occur at reduced subsidized price (JD1 for 3 kilograms, instead of JD1.5 – USD 1.41 vs USD 2.11). The Ministry of Local Affairs is coordinating distribution. |

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| Social Insurance | | Bread is delivered door to door by buses that patrol localities, escorted by police officers to deter crowding. NAF beneficiaries will receive the bread for free with the support from municipalities.  
- The Social Security Corporation (SSC) started providing in-kind support to about 100,000 vulnerable families (other reports indicate 35,000-50,000) that include an individual over the age of 70 and casual workers. Food parcels have a monetary value of JD40-50 (USD 56-70). The program may be extended to persons with chronic illnesses. SSC is also studying to expanding the list to include families whose breadwinners have lost their work, especially those working in the informal sector, in case the government decided to extend the suspension.  
- NAF beneficiary households received bread for free (one time) as well as water, gas, and basic medicines.  
- 80,000 families received cash and in-kind assistance provided by Zakat Fund with a total value of approximately JOD 2 million.  
- The government has set limits on commodity prices for fruits, vegetables, and other basic food supplies.  
- Companies will have the option of stop contributing to the Old Age Program (keeping only disability and health insurance). If firms choose to do so (they can do it for all or some employees only), they will only pay 5.25 percent as contribution rate, instead of 21.75 percent. However, this is only valid over March-June 2020. All employees will still be covered with Disability, Death, Unemployment, and Maternity insurance (regardless of the choice). Employees affected by this employer’s choice will still be able to contribute voluntarily during this period. Firms will be given the choice to pay such contributions amounts in instalments until the end of year 2023.  
- Half of the Maternity Insurance Contributions in 2020 will be used to support vulnerable groups, mainly old age, and sick people. The allocated amounts will be used for cash transfers and in-kind aid. Companies that owe contributions to SSC from the past (arrears amount to JD 340 million) will be legally allowed to make such payments into the future.  
- MOL announced a two-week paid leave for all public sector workers. This will not be deducted from the normal allocation of sick leave.  
- During the quarantine period, an official license was granted to public and private sector workers (except for some essential sectors). Employers cannot calculate this period as annual leave or sick leave and cannot deduct it from workers’ vacation balance.  
- The Jordanian Social Security Corporation (SSC) announced that workers on unpaid leave can apply for disbursement of unemployment benefits, provided they meet the relevant conditions and work in certain sectors, such as tourism, transportation, and trade.  
- The Ministry of Labor launched a program that offers a wage subsidy of 50 percent or more (or minimum wage if 50 percent is below) of worker’s wage for eligible firms through online portal: hemayeh.jo, applied from the month of April onwards.  
- The Ministry also allowed firms, provided approval from the government, to reduce collectively workers’ wages by no more than 30 percent to ensure business continuity – given the consent of the employees.  
- On 17 April, the Prime Minister of Jordan announced three wage support programs (Tadamon 1 & 2 and Musaned 1 & 2), based on Defense Order No. 9. The Tadamon programs are for companies that had to reduce wages by 50 percent, while the Musaned programs are for companies who had to suspend activities without pay (as allowed through Defence Order No. 6). They aim at reaching 400,000 vulnerable Jordanian families. Self-employed, irregular and daily workers are eligible for these, including Gazans and Children of Jordanian mothers.  
- Tadamon 1:  
  - Support for businesses who have contributed to the Insurance system for at least 12 months;  
  - Employees will be granted an unemployment allowance consisting of 50 percent of their salaries from April and May, in amounts ranging from JOD 165 to JOD 500;  
  - Employers will only be required to pay 20 percent percent of the deductible wage, no more than JOD 250 per month; |

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| Kingdom of Saudi Arabia | Social Assistance | • The disbursement of SAR1.850 billion was directed as Ramadan aid to beneficiaries and beneficiaries of social security at the amount of SAR1,000 for the family and SAR 500 for the dependent.64  
• The Ramadan iftar initiative (Ramadan meals) is a national initiative funded by the social fund of the Ministry of Human Resources and Social Development for those affected by the pandemic during the holy month of Ramadan. Benefits consist of hot or dry meals or food baskets, according to each category of beneficiaries, and the conditions of the curfew in each region. The Ministry invited all private sector companies, businessmen, businesswomen, and citizens to contribute to the community fund to support the humanitarian initiatives.65  
• The Community Fund of the Ministry of Human Resources and Social Development has distributed food baskets under the name "Our Food is One," which aims to help all affected families of citizens and others in all regions and governorates of the Kingdom of Saudi Arabia who were affected by the COVID-19 outbreak, and alleviate this crisis by distributing food baskets to them (more than 142,000 food baskets were distributed to families in need, benefitting both citizens and residents alike). Through this initiative, the Community Fund seeks to help the most vulnerable groups affected by the pandemic—poor people, people with disabilities, widows, divorced women, prisoners’ families, and the elderly, ensuring their stability, providing them with a decent living, and supporting and assisting them in overcoming this crisis.66  
• New provisions allow for delaying rent payments and utility bills by three months; applies for six months, from March to September 2020  
• The Kingdom is taking various measures in support for expat/migrant workers:  
  o Waiving expat dependents levies of SAR 900/dependent for three months from March-June 2020; extended for another three months;  
  o Waiving SAR 2,400 for the residence visa renewal fees per visa and giving the violator a grace period to take a corrective action; |

64 [https://mlsd.gov.sa/ar/node/586866](https://mlsd.gov.sa/ar/node/586866) (7 May)
65 [https://mlsd.gov.sa/ar/node/549894](https://mlsd.gov.sa/ar/node/549894) (22 April)
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<td>- Waiving SAR 1,200 exit and return visa per resident and allowing the return of individuals after the situation settles;</td>
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<td>- Audah registration system was put in place for expatriates’ wishing to leave the country;</td>
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<td>- Automatic extension of visas and residency permits (Iqamas) inside and outside of the country from March to September, while the travelling from/to Saudi Arabia was suspended;</td>
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<td>- Travel to/from KSA was resumed for expatriates and families of expatriates starting from end September 2020;</td>
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<td>- Delaying rent requests and allowing the renter to vacate the rental property regardless of lease length (three months);</td>
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<td>- Temporary benefit allowed by the Ministry of Human Resources and Social Development (MHRSD) from the services of off-labor-market expatriates through the &quot;Ajeer&quot; portal as an alternative to recruiting from abroad and allows expatriate workers to switch employers through Ajeer system if employment is found during the pandemic.</td>
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<td>- Electricity consumers in the commercial, industrial, and agricultural sectors will receive a 30 percent discount on April and May bills, with the possibility to extend the discount period if necessary.</td>
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<td>Social Insurance</td>
<td>- Special paid sick leave for all workers who, as of 13 March 2020, entered the Kingdom from countries abroad shall stay home (quarantined). MOH developed a mobile application called “Sehhaty” to register and apply for the sick leave.(^{67})</td>
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<td>- The KSA mandated an automatic renewal of health insurance cards for 6 months, hence allowing families to make hospitals and clinic visits. As per Announcement of King Salman of 30 March 2020, all Saudi citizens, residents, visitors, tourists and illegal immigrants will access testing and treatment services for Coronavirus for free. The government through the ministry of health will cover related expenses.</td>
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<td></td>
<td>Labor Markets</td>
<td>- The Saudi Human Resources Development Fund announced the allocation of SR 2 billion to support 100,000 job seekers in the private sector (in addition to offering and activating remote work tools as available and alternative options for regular work). A training support track includes SR 800 million to support 100,000 beneficiaries. And an additional SR 1.5 billion has been allocated to add 100,000 new job seekers in the program.(^{68})</td>
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<td>- Government stimulus package amounted to about USD 61 billion equivalent; and included exemptions and the postponement of some government dues (USD 18.6 billion), a USD 13.3 billion package to support the banking and SME sectors, a USD 13.3 billion allocation to ensure that government dues to the private sector are paid in a timely manner, and a wage subsidy of 60 percent (up to SAR 9,000 or about USD 2,400 per employee per month) of Saudi employees’ salaries in the private sector.</td>
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<td>- Wage protection system (WPS) was suspended during early months of pandemic to ensure that employers can access and continue government services even if wages are delayed or reduced.</td>
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<td>- Instead of terminating the contract of the Saudi labors, an employer was entitled to apply for the General Organization for Social Insurance (GOSI) and request a monthly compensation payment for his labors of 60 percent of the wage registered in GOSI for three months, up to a maximum of SR 9 thousand per month, and up to a total value of SR 9 billion. Discontinued as of October 1, 2020 with the exception of few industries (i.e., airlines).</td>
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<td>- The government will pay the minimum salaries of independent workers in the transportation sector who are registered with the Public Transport Authority but are not under the umbrella of any company, whose activities were affected by the precautionary measures (KSA continued to be on 24 hours curfew till further notice: no taxis, no Uber or Karim is allowed). All curfew and lockdown measures were stopped as of end June 2020. Starting from July, KSA gradually returned all economic activities to “new normal” status, including blended approach of home-based work and office work.</td>
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<td>- A wage subsidy program which pays 60 percent of the salaries of Saudi employees working in the private sector for an initial period of three months during early months of the pandemic (and was</td>
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\(^{67}\) [https://www.moh.gov.sa/en/Ministry/MediaCenter/News/Pages/News-2020-03-14-001.aspx](https://www.moh.gov.sa/en/Ministry/MediaCenter/News/Pages/News-2020-03-14-001.aspx)  
\(^{68}\) [https://www.hrdf.org.sa/News/4408](https://www.hrdf.org.sa/News/4408)
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<td>Kuwait</td>
<td>Social Assistance</td>
<td>• Between 16 March and 10 April, the Kuwaiti Zakat House/Fund provided financial aid to 4,124 families for a total value of KWD 980,000. The first phase (16-19 March) targeted widows, divorced women, orphans, and the elderly. The second phase (31 March-9 April) targeted low-income families with no fixed income or whose income was affected by the crisis. The Zakat House sent text messages to all registered families to update their private data through the attached link and enter their bank account numbers so that the Zakat House could transfer the value of the aid. Families who do not have accounts in local banks were encouraged to open accounts and then register through the Zakat House website in anticipation of any new precautionary measures that the State may take to limit the spread of the emerging COVID-19 pandemic.69 • The Fazaa El-Kuwait program, based on public and private donations and implementation through NGOs, charities, and volunteer teams has been set up. It includes cash transfers and in-kind grants. As of 30 May, KWD 5,230,110 were distributed via cash assistance to impacted families through rent payments, general cash assistance, and distribution of shopping cards: 331,273 food baskets, 495,123 meals and 405,682 hand sanitizers were distributed.70</td>
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<td></td>
<td>Social insurance</td>
<td>• The Kuwait Civil Service Commission (CSC) has asked all government agencies to prohibit quarantined employees from starting work. It has also emphasized that salaries for Kuwaiti and non-Kuwaiti employees will continue to be paid during any quarantine period, and it will not affect their employment situation.71 • Paid leave for employees in non-essential services in the public sector. • Temporary suspension/postponed payment of social insurance contributions for employees and employers.72 • Postponing the deduction of the replacement part of the retirement pension according to Article 77 of the Law for a period of six months. Payment of the retirement pension on the assumption that what the law permits is not disbursed in advance for cases that have benefited from the provision of Article 112 bis of the Social Security Law for a period of six months, provided that the legal instrument necessary to implement this decision is specified.73</td>
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<tr>
<td>Lebanon</td>
<td>Social Assistance</td>
<td>• Private sector workers will receive their monthly wage, regardless of whether businesses closed. Target: Kuwaiti nationals in the private sector (except telecommunication and banking sectors) and with regulations set by the Government. The main condition is that the company does not end the contract of the workers. Duration: six months from issuance (May 2020) of the decree by the Kuwaiti Parliament.74 • On 26 March 2020, the government announced that it will allocate LBP 75 billion (about USD 5 million) as a social assistance package to those in need. The aid package is a treasury advance to the High Relief Authority to help people suffering from the effects of lockdown measures. • Lebanon’s Parliament ratified an LBP 1.2 trillion (USD 300 million) aid package for low-income families and vital sectors including agriculture and industry. Half will go to the Emergency National Social Solidarity Program, providing a monthly cash assistance of LBP 400,000 (about USD 100) to about 200,000 families for seven months until December 2020. People with disabilities, victims of landmines and explosions, and parents of public-school children in need will be prioritized, as well as non-food voucher households in the NPTP (around 28,000 households). • In addition, more than 30,000 farmers and 6,600 vocational workers will get LBP 4.5 million each (USD 1,125). • The government allocated 18 billion LBP (around USD 12 million) to buy 100,000 food and health rations, the value of which is LBP 180,000 (USD 119), and the joint committee between the</td>
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69https://www.instagram.com/p/B_ehh3qgyzK/  
70https://www.instagram.com/p/B_ehh3qgyzK/  
71https://www.alarida.com/articles/1589900408428045200/  
72https://www.social-protection.org/gimi/RessourcePDF.action?id=56960  
73https://www.kuna.net.kw/ArticleDetails.aspx?id=28825l8&language=ar  
74https://www.arabianbusiness.com/banking-finance/442406-kuwait-sets-up-33m-fund-to-tackle-spread-of-c
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<td>Lebanon</td>
<td>Social Assistance</td>
<td>Relevant ministries and the army will start distributing them to all regions, by helping municipalities and mukhtars.</td>
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<td>• On 24 March, the Lebanese Prime Minister directed the government to extend grace periods and delay the collection of taxes, as well as water, electricity, and telephone service bills until the end of the emergency/lockdown period.</td>
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<td>• The cabinet approved an urgent draft law to waive taxes for six months. The ministry of finance announced the extension of all deadlines related to payment of taxes and fees.</td>
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<td>Social Insurance</td>
<td>Paid sick leave should be granted to medical employees working in hospitals (nurses, contractors) covering the entire isolation period. Decree 136/1983 on work-related injuries and emergencies will apply to all such workers who contract the Covid-19 disease. This decree stipulates the responsibilities of the employers in case of occupational injuries with corresponding compensation and indemnity, as well as workers’ entitlements. This decision enters effect retroactively for all cases starting February 1, 2020.</td>
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<td>The General Director of the National Social Security Fund issued a memorandum related to the laboratory diagnosis of COVID-19, setting the laboratory examination fee at LBP 150,000 maximum (all laboratories are recommended to abide by this fee). The test is free at the Rafik Hariri Hospital (a public hospital).</td>
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<td>Libya</td>
<td>Social Assistance</td>
<td>According to Law No. 6, of 5 March 2020, concerning facilitations in paying social security contributions, the below apply (among others):</td>
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<td>• Reduction of 100 percent of social security contributions until 31 December 2020, and reduction of 85 percent for unpaid contributions for the period from 1 January 2001 until 31 December 2019 if payments started before 5 May 2020;</td>
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<td>• The unpaid contributions for the abovementioned period (1 January 2001 until 31 December 2019) shall be paid on instalments for up to five years with a 5 percent interest rate (other conditions apply);</td>
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<td>• Unpaid contributions will be exempt from additional interest rates (Law 144 of 31 July 2019), if payment started before 5 May 2020;</td>
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<td>• Employers may request rescheduling for their unpaid contributions, except for the abovementioned period (conditions apply);</td>
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<td>• Persons who already paid interest on delayed contributions may receive refunds for the interest percentage.</td>
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<td>Malta</td>
<td>Social Assistance</td>
<td>To prevent food prices from increasing, the Minister of Economy has adopted a regulation controlling the prices of 16 food items such as fruits, vegetables, and meat. The regulation will be revised every three months.</td>
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<td>• Food assistance and nutrition support for 90,000 people, including IDPs and migrants, by World Food Program (WFP). Boxes of date bars are being delivered by the Ministry of Education to replace school feeding.</td>
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<td>Social Insurance</td>
<td>A benefit of €800 per month (€500 in case of part-timers) to one of the parents (including single parents) who take additional unpaid leave to take care of children while schools remain closed, when both parents work in the private sector.</td>
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<td>• Persons with disabilities who have to stay at home due to health concerns that may arise as a consequence of COVID-19 and cannot telework will be entitled to a benefit of €800 per month for a specified period (€500 per month for part-timers).</td>
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<td>• Rent subsidies or increased rent subsidies to employees who lose their job and have rent to pay.</td>
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<td>Social Insurance</td>
<td>€350 grant to employers for each employee required to be on mandatory quarantine leave.</td>
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<td>• Workers who lost or will lose their job with effect from 9 March 2020 will be entitled to a new temporary benefit of €800 per month (€500 per month for part-timers).</td>
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<td>Labor Markets</td>
<td>As of 9 March 2020, the government will finance:</td>
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<td>• For those engaged in the hardest hit sectors: €800 per month per full-time employee to businesses or self-employed that have been hardest hit by the COVID-19 outbreak (€500/month in the case of part-timers). Where the wage is more than €800 per month, the employers have to top up the pay. A minimum top-up of €400 per employee per month is required when the salary is more than</td>
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| Morocco  | Social Assistance    | • The Economic Watch Committee (Comité de veille économique (CVE)) members activated a mobile payment device to transfer cash to workers operating in the informal sector adversely affected by COVID-19, only for those who have been directly affected by the government compulsory confinement policy. The electronic cash transfer program will reach half of the informal sector workers (estimated 3 million workers to receive payment). Registration started on 30 March 2020, and the first payments due to start April 6. Speed and scale are facilitated using a health insurance fee waiver registry in the first phase and a simple payment mechanism. Program benefits are structured as follows: MAD 800 per month for households of two people or less; MAD 1,000 per month for households of three to four people and MAD 1,200 per month for households of more than four people.  
• Moroccan government institutions, with the support of UNFPA, have delivered “Salama kits” containing hygiene products and COVID-19 prevention assistance to different people that can be vulnerable: pregnant women and those who assist with childbirth; people with disabilities, people in prisons, teachers and those involved with education at distance, and female victims of violence.  
• Formal workers in the Caisse Nationale de Securite Sociale (CNSS) faced with unemployment will also be able to delay their bank payments by three months, which can be renewed once if justified properly. |
| Morocco  | Social Insurance      | • Formal employees who lose their jobs and are registered with the pension fund will receive MAD 2,000 a month (MAD 1,000 for March; MAD 2,000 for April, May, and June) and defer debt payments until June 30.  
• Companies can benefit from the suspension of social security contributions for the period from 1 March to 30 June 2020 with graceful remission of late payment increases for this period for employers in difficulty, affiliated to the CNSS. The CNSS will ensure transfer of family allowance/child allowance and reimbursements of medical expenses through the CNSS Compulsory Health Insurance (Assurance Maladie Obligatoire).  
• A new unemployment benefit, replacing the existing one, will be provided to employees of companies whose activities have ceased, as well as companies that needed to reduce their staff. The benefit level is fixed at MAD 1,000 for the month of March and to MAD 2,000 for each of the following three months. Benefits will be transferred directly to the recipients’ bank account or by postal order. One week after the announcement by the government (26/03/2020), 113,000 companies had registered for these benefits, covering more than 700,000 workers.  
• According to Law 25/20 of 21 April, companies with less than 500 employees, which had to stop their activities and whose revenues fell by more than 50 percent compared to the same period in 2019, will be considered companies ‘in difficulty’. Those whose revenues decrease between 25 percent to 50 percent or with more than 500 employees will go to a special commission that will decide whether they should receive government assistance. These businesses will be able to pay up to 50 percent of their employees’ salaries (which includes the MAD 2,000 (USD 218) from the unemployment benefit—see above) without paying taxes or fees to social insurance.  
• Wage subsidies to companies in the tourism sector - Companies will be able to declare employees and trainees eligible to benefit from a monthly compensation of MAD 2,000 (USD 218), covering July through the end of December. |
| Oman     | Social Assistance    | • Salat Al Khair initiative: The Public Authority for Consumer Protection has launched a food basket composed of 19 essential food items, sold at a subsidized fixed cost of approx. OMR 9 (approx. €1,200, otherwise contact has to be made with the Department of Industrial and Employment Relations.  
• For those engaged in the less critically hit sectors:  
  o One day’s salary per week equivalent to €160/month per full-time employee (€100/month in case of part-timers);  
  o Two days’ salary per week equivalent to €320/month per full-time employee employed by Malta-based individuals or employed by Gozo based businesses €200/month in case of part-timers);  
  o Three days’ salary per week equivalent to €480/month per full-time employee employed by a Gozo-based individual (€300/month in case of part-timers). |
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| Oman    | Social Insurance    | - Payment of utilities’ bills (electricity, water, and wastewater) will be postponed until after June 2020, and utility providers are being asked to offer the possibility of paying amounts owed through a series of instalments.  
- The National Fuel Support Card shall be given to the low-wage Omani workforce in the private sector temporarily until the end of the impacts of the current closures. Only nationals will receive this benefit. |
|         | Labor Markets       | - Oman’s Supreme Committee issued a decision on 14 April requiring employees in private sector enterprises that have been closed to take their annual leave. Employers must pay full salary to employees who have been quarantined during the compulsory quarantine period.  
- The Capital Market Authority in Oman has launched an initiative to expand the services covered by the health insurance scheme, including medical tests and treatment costs for insured members with COVID-19 (both nationals and expatriates) under their medical insurance coverage. The insurance scheme will cover up to the beneficiaries’ available annual benefit limits in their respective policies. The insurers will apply the unified standard price schedule and national guidelines set by the Ministry of Health. For those without health insurance or sponsors, the government will offer free treatment (for residents and citizens). |
| Qatar   | Social Insurance    | - Temporary COVID-19 Wage Subsidy Scheme took effect on 26 March 2020 and is expected to run for six weeks. Qualified businesses include those experiencing a significant economic downturn due to COVID-19, with at least a 25 percent decline in revenues or customer orders, unable to maintain wages without assistance, and retain employees on the payroll. As of 4 May, the amount of the subsidy is payable as follows:  
  - Lesser of €350 or 85 percent of the employee’s Average Net Weekly Pay for employees earning less than or equal to €412 per week net;  
  - €350 for employees with Average Net Weekly Pay between €412 and €500 per week net;  
  - Lesser of €410 or 70 percent of the employee’s Average Net Weekly Pay for employees earning less than or equal to €586 per week net;  
- Treatment for COVID-19 is provided to anyone free of charge—the possession of a health card and/or the Qatar ID (QID) is not necessary to be tested and/or receive treatment. |
|         | Labor Markets       | - The employment contracts of Omani nationals cannot be terminated, however it is permitted for companies operating in the industries which have been demonstrably affected by Covid-19 outbreak, to grant their Omani nationals full paid leave during the lockdown. |

76 https://twitter.com/pacp_oman/status/1248131810082664448; https://www.omandaily.om/?p=779975  
78 https://twitter.com/Oman_GC/status/1250517196075339777  
79 https://www.lexology.com/library/detail.aspx?g=512ad6e8-16a5-4304-b8b0-27502b4fc1d&filterId=a0a999b  
82 https://bit.ly/2ynfi3t (15 April)  
85 https://m.gulf-times.com/story/659481
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<td>Syria</td>
<td>Social Assistance</td>
<td>• The Minister of Social Affairs and Labour (MOSAL) announced cash and in-kind (food and health baskets) support to the most vulnerable including elderly, people with disabilities, daily workers and self-employed people, as part of a national campaign. The focus will be on those with lower income professions, including the tourism sector. The campaign will be funded through the National Fund for Social Aid (NSAF) in addition to the contributions from individuals, businesses and civil society through a campaign account. On 16 April, the distribution of the one-time unemployment allowance of SYP 100,000 started. In coordination with civil society actors, 700,000 families received food assistance, 300,000 families received hygiene kits, and 650,000 received cash assistance.86 • An online platform was set up for registration, with data from targeted programs and disability card program to support registration. As of 29 April 2020, 305,695 people had registered including 248,530 unemployed persons, 32,709 people over 70 and 24,456 people with disabilities. Data for unemployed workers are verified with the Ministry of Tourism and the Craftsmen Union, while matching the data for the rest of the workers at the governorate level in coordination with neighborhood committees. Workers of the following sectors will be prioritized: daily and seasonal workers in the fields of transportation, handicrafts, porters, tourist guides, and construction workers, among others. Data for the elderly and people with disabilities are being collected through digital channels and the targeted programs implemented by the Ministry or through the disability card. • The government has increased access approvals to humanitarian actors for food and in-kind distribution. Four million people inside Syria will continue to receive World Food Program (WFP) food assistance and nutrition support through in-kind and CBT. UNICEF is working with WFP to jointly provide e-vouchers for hygiene items for children in accelerated learning programs in the form of a UNICEF-funded top-up to the ongoing WFP voucher for the food program. This joint response was expected to be launched by mid-May, targeting around 45,000 children in Curriculum B programs in eight governorates of Aleppo, Damascus, Hassakeh, Hama, Homs, Lattakia, Rural Damascus, and Tartous.87 • UNICEF will provide hygiene baskets (one-time distribution) for families with children who have severe disabilities in urban and rural areas who currently do not receive any cash assistance from UNICEF, with an initial target of 13,200 families.88 • Citizens have a card to buy subsidized food from supermarkets run by the Trade Foundation. As part of the COVID-19 response, the government is making sure to continue to offer essential foods at prices much lower than the market price.89 • People in the NES region are exempt from paying water and electricity fees for two months. In NWS, similar measures were introduced, including significant scale up of health services and the provision of personal protective equipment.</td>
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<td>Tunisia</td>
<td>Social Assistance</td>
<td>• MOSAL allocated a bank account in its favor to attract financial contributions and allocate it to support efforts to reduce the burdens on workers and address the social repercussions indicating that the value of the amount of 'unemployment allowance' will be determined according to the data and numbers that will be collected.90</td>
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86 https://www.sana.sy/?p=1143163
87 https://www.unicef.org/mena/media/8061/file/MENA%20SitRep_COVID%2019%20#1_31%20March%202020.pdf%20p
88 https://www.social-protection.org/gimi/RessourcePDF.action?id=56960
89 https://www.sana.sy/?p=1141904
90 https://www.sana.sy/?p=1135808
### Social Insurance
- One-off cash transfer of TND 50 (USD 17) to 260,000 households working in the informal sector (a top-up of the already received transfer of TND 180 in March (i.e., households registered in the social security system with a free health care card).
- Food distribution by an NGO (Tunisian Union for Social Solidarity).

### Labor Market
- Unemployment benefits for workers (contributory system) who will be affected by partial unemployment.
- Pension top-up of TND 100 per month for 133,000 retirees whose monthly pension is below TND 180.732.
- Health care insurance maintained for all workers, family allowance maintained and a wage premium for those who cannot continue their business (formal sector).
- For businesses and companies operating in the formal sector, a waiver of three months is granted to the employer’s contribution to the social security scheme.

### Labor Market
- The government will allocate an amount of TND 300 million in aid for unemployed workers. The government will pay up to TND 200 of the wages of workers that are in ‘technical unemployment’ (for those who cannot continue their work). Employers can register through an online platform. Another platform for a similar assistance measure was instituted for self-employed workers. As of 22 April, there were 176,000 applications, 40,000 of which have been already accepted.  

### Labor Market
- Ministry of Education provided 50,000 laptops to students to support distance learning. Sharjah Government started a campaign to provide 30,000 laptops to the students in Sharjah City.
- The government has provided three months food and essential needs for 44,500 families; 15,000,000 meals to the low-income labors; and additional 4,500,000 meals to low-income labors in Abu Dhabi in collaboration with a nongovernmental organization (NGO). The Sharjah Islamic Bank provide one-month food and essential needs for 4,000 Families in Sharjah.
- The current employer must pay housing and other allowances until the worker finds another job or leaves the country.
- Abu Dhabi government’s Ghadan 21 scheme: tourism and municipality fees suspended for the remainder of 2020 and Dh5 billion being set aside to “subsidize water and electricity” charges for UAE citizens and businesses. The Government of Sharjah have approved a discount of 10 percent on all utility bills for three months that worth a contribution of AED 230 million.
- Dubai Water & Electricity Authority have approved a discount of 10 percent on all utility bills for three months.
- The government provide utility partially wavers for all social security beneficiaries (44,000 families).
- The government, represented by the Central Bank, approved that any (citizen and resident) who was impacted by Covid-19 in term of lost job, the loan installment will be postponed without any additional cost on original loan value.

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<th>Country</th>
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| **Social Insurance**  |                      | • The government is encouraging firms to grant employees paid leave, unpaid leave, temporarily or permanently reduce salaries. Any fired expert can post his profile on an only job portal so other businesses can recruit him/her. In the meantime, the firm must provide the worker with accommodation and other dues.  
• Federal Authority for Government Human Resources (FAHR) has amended the law of Human Resource a regulation that any employee that being hospitalized or being in quarantine period will be paid fully sick leave benefit. Also, a regulation has been set that a spouse of sick employee will be paid fully during the during the period of employee being hospitalized or allocated to quarantine facility due to COVID-19.  
• The Ministry of Human Resources and Emiratization has called on private sector establishments to consider workers infected with Covid-19 as sick cases entitled to sick leave.  
• The government provided full health coverage for all (citizen, resident, and tourist) infected or who were exposed to Covid-19, during their treatment and quarantine period.  
• The government approved that the testing for Covid-19 is free of cost for all (citizen, resident, and tourist).  
• Since the start of COVID-19 pandemic, the Ministry of Community Development enrolled unemployed citizens in Social Fund support: (January 224 beneficiaries; February 234 beneficiaries; March 406 beneficiaries; April 266 beneficiaries; May 282 beneficiaries).  
• The Abu Dhabi Pension Fund allows private sector companies to apply to postpone paying pensions over the next three months. |
| **Labor Markets**     |                      | • Firms can register workers on a job matching virtual platform in case workers’ contract is terminated.  
• Nationwide campaign started to provide online training by different entities and members of community. The number of workshops and training on the volunteer platform more than 55 volunteer training sessions and workshops were prepared and presented to the community, at a cost equivalent to AED 500,000.  
• Companies to facilitate at-home work (Advance technology systems, laptop) and certain entities reach to 30 percent capacity.  
• The Government approved new rules in the pandemic period: Reduced to the working hours to seven hours’ daily, entities can start remote work from home completely and partially, no direct or indirect impact on the employee compensation and benefits. |
| **West Bank and Gaza**| **Social Assistance** | • National response plan adopted, with recommended increases in value and scale of cash transfers to existing and new beneficiaries.  
• Ministry of Labor (MoL): On 16 May 2020, the MoL started cash distribution to 40,000 workers out of 276,000 workers registered through its digital platform. A technical committee was created to verify the eligibility conditions. The benefit targets: workers (in the local market, affected by COVID-19 (mainly daily wage workers)), in the most-affected areas, less than 65 years old, and in Jerusalem and the Palestinian refugee camps) as well as married couples with more than 2 children. The targeted sectors are: construction, tourism, services, transportation, kindergarten, trade (merchants), industry and crafts, agricultural workers, quarries, spinning, weaving, and health. Groups excluded from the program: workers inside the Israeli settlements and Israeli industrial areas or who are more than 65 years old; people receiving benefits of the Ministry of Finance, Ministry of Social Development, or Ministry of Economy; public employees. The MoL, Ministry of Local Government, Ministry of Transport and Communications, Ministry of Economy, and Ministry of Social Development cross-checked their databases to identify the beneficiaries. The Waqfa Fund finances this intervention, in coordination with the General Union of Transportations Workers Syndicates:  
  o Financial aid of USD 100 for three months will be distributed to female workers in nurseries and creches who have stopped working (and whose salaries have been cut off).  
• Ministry of Social Development (MoSD) announced an urgent financial aid of ILS 500 (one-off) for families affected by the COVID-19 crisis. The benefit targets everyone who lost a job and has no source of income or who has an income of less than ILS1,400. Potential beneficiaries registered their information in a new form provided by the MoSD, which feeds into a database, and has been distributed to MoSD offices and their directorates, in addition to the municipalities and the
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<td>Workers’ Union. A total of 9,504 low-income households were considered eligible. The total cost of the intervention was ILS 4,752 million, provided by the Ezz Waqf Fund.</td>
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<td>o MoSD, in cooperation with international and local partners, distributed e-vouchers to about 70,000 registered households; distributed food parcels to more than 150,000 vulnerable registered households; and provided 46 residential centers for persons with disabilities, children, and the elderly with necessary food and hygiene supplies.</td>
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<td>• Food and in-kind support: Top-up of hygiene materials to current support provided under social safety net to vulnerable households in the West Bank and Gaza; food aid to 522 families of divorced or abandoned women (or whose cases are still in court over alimony); hygiene kits to the elderly and people with disabilities in the West Bank and Gaza; food and hygiene items for the residents and workers of 47 residential centers that are still operating in the crisis in the West Bank and Gaza; UNRWA will provide food to 10,445 refugee households in the West Bank for three months.</td>
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<td>• In April, the Ministry of Social Development (MoSD) included 10,000 new families from the waiting list in the Cash Transfer Program (CTP) for a total of 114,658 households. The benefit amount ranges from ILS750 to ILS1,800 per household and is paid every three months. The first payment in 2020 started in April and already included the new beneficiaries, who received a message confirming the receipt92.</td>
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<td>o MoSD distributed hygiene items and expanded CTP to cover an additional 70,087 beneficiaries to meet their food needs for three months (e-voucher).</td>
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<td>• In May 2020, 314,173 poor, food-insecure people received Cash Based Transfers (CBT) in the form of electronic food vouchers: 223,762 in Gaza and 90,411 in the West Bank. This included around 40,000 newly targeted people who redeemed their vouchers in May. The World Food Program (WFP) distributed electronic vouchers to 67,600 newly registered beneficiaries who have been affected by COVID-19. As of May, 40,000 were able to redeem their vouchers. Almost all the targeted affected people (99 percent) live in the West Bank, where the closures and movement restrictions have been more impactful on the labor force. Women head nearly half of the targeted households in the West Bank; 12 percent are older adults and 9 percent are persons with disabilities. WFP provided an extra monthly cash top-up (USD 5) per capita to 165,000 people who already receive CBT assistance. This aims at alleviating the impact of COVID-19 on people’s already fragile livelihoods, helping them offset some of their scarce resources to spend on other essentials, such as health care and hygiene.</td>
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<td>• Cancel penalties for late submission of tax returns, extending the tax filing deadline to June. Postponed monthly/periodic loan repayments to all borrowers for the next four months, and for the tourism and hotel sectors for the next six months.</td>
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<td>Social Insurance</td>
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<td>• The Palestinian Authority has stopped collecting contributions from Palestinian workers, leaving compliance with sick pay rules to employers instead. Note: For workers in the West Bank and Gaza, there are no sick leave provisions.</td>
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<tr>
<td>Labor Markets</td>
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<td>• The Minister of Labor launched a Fund to provide support to workers affected by the pandemic. A two-month temporary employment program launched for unemployed workers, noting that agreements have been concluded with the relevant authorities to maintain the employee and employee wages for the months of March and April. In partnership with the World Bank, the initiative aims to employ 10,000 workers for three to six months and indicates that the Ministry will cover 30 percent of the wages for 20,000 workers.93 94</td>
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<td>Yemen</td>
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<td>• The eighth payment cycle of the Yemen Emergency Cash Transfer (ECT) project was launched on 27 June 2020. Humanitarian support was provided as a onetime top-up to the existing amount. The top-up amount was approximately 45 percent of the beneficiaries’ quarterly base amount. As of 22 July, 1,418 million beneficiaries received their benefits and top-up, or about 89 percent of all cash recipients. COVID-19 preventative measures, identified through a risk-mitigation exercise,</td>
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92 https://www.social-protection.org/gimi/RessourcePDF.action?id=56960
93 https://ramallah.news/post/155637/%D8%B5%D8%B1%D9%81-700-%D8%B4%D9%8A%D9%82%D9%84-%D9%84%D9%86%D8%AD%D9%84-%D8%A7%D9%84%D9%81-%D8%B9%D8%A7%D9%85%D9%84-%D9%81%D9%84-%D8%B3%D8%B7%D9%8A%D9%86%D9%8A
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<td>are in place to ensure the safety of beneficiaries and project personnel. Beneficiaries were requested to cover their nose and mouth, maintain physical distancing while queuing and inside the payment sites, and use the provided hand sanitizer before entering and after collecting their cash. All project staff are using protective gear (masks and gloves) and strong scheduling and crowd management mechanisms were put in place to prevent crowding at the payment sites.</td>
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<td>• In response to the curfew, the school feeding program modality from the World Food Program (WFP) shifted to take-home rations.</td>
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96 https://www.social-protection.org/gimi/RessourcePDF.action?id=56960
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Countries in the Middle East and North Africa region quickly introduced measures to limit the spread of COVID-19 following the first confirmed cases. These measures included curfews, lockdowns, and social distancing. As a result of COVID-19 induced impacts, countries in the region adopted social protection measures to mitigate the human and economic impacts of the pandemic. But most of the countries in MENA were already experiencing poor macroeconomics brought on by the decline in oil prices and by fragility, conflict, and violence. Illness and loss of income due to the pandemic (largely from informal sources) exacerbated the extreme vulnerability faced by the poor and vulnerable groups.

Social protection programs, and particularly social safety nets (SSNs), can help households absorb short-term consumption risk during periods of crisis and build resilience to manage future shocks. In MENA, 21 countries and territories formally announced social protection measures to cope with the impacts of COVID-19. According to a World Bank real-time review of social protection and jobs responses to COVID-19 (updated May 2021), measures in MENA have spanned social assistance, social insurance, and labor markets programs. Social assistance measures accounted for 59 percent of overall response, whereas social insurance and labor markets made up 23 and 18 percent, respectively.

Since the World Bank launched its COVID-19 response, Social Protection and Jobs (SPJ) support to MENA countries has been fast, flexible, and adaptive. The number of Bank-supported social safety net beneficiaries increased from 2 million to 16 million in just 1.5 years of response which demonstrates that social protection systems in MENA are scalable and that country systems and programs are flexible to facilitate this scalability. Early lessons suggest the World Bank significantly contributed to addressing financing, knowledge, and delivery needs based on existing lending and policy dialogue platforms, drawing on the experience in MENA as well as global learning. But lessons also suggest that social protection policy dialogue in MENA is even more important moving forward, to help countries strengthen and boost policy reforms and to design and implement social protection programs and systems that can adequately, effectively, and efficiently target the poor and vulnerable, and be able to respond to population needs during disasters and shocks. This paper provides a documentation of the context for SPJ COVID19 response in MENA countries’, a framework for continued response and some of the early lessons learned.

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