

CDD Operations in COVID-19

Operational Guidance Note



June 2, 2020



Introduction

*The COVID-19 pandemic is disrupting communities around the world. With the outbreak and spread of COVID-19, people have been advised, or may be mandated by national or local law, to exercise social distancing and avoid community gatherings to prevent and reduce the risk of virus transmission. Countries have taken various restrictive measures, with some imposing strict restrictions on community gatherings, meetings and people's movements, and others advising against public group events. At the same time, the general public has become increasingly aware and concerned about the risks of transmission, particularly through social interactions at large gatherings. These restrictions have significant implications for the functioning of World Bank-supported community-driven development (CDD) operations. In particular, they affect communications, community engagement, poverty targeting, public works and livelihood activities and monitoring of CDD operations. As such, steps must be taken by CDD task teams to adapt their operations to ensure the safety of beneficiaries and staff.*¹

Why are CDD operations and platforms important for COVID-19 Response?

Addressing the poverty and social impacts of the COVID-19 pandemic requires a whole-of-society approach, with solutions coming from a variety of actors, including national and local governments, households, communities, civil society organizations, and the private sector. Lessons from previous pandemics, such as the 2014-16 Ebola outbreak, highlight the importance of social responses to crisis management and recovery to complement medical efforts. In low- and middle-income countries, the stress placed on health systems by the COVID-19 pandemic is likely to be disproportionately felt by the poor who suffer from lower access rates and public systems struggling to meet last mile service delivery in the best of times. In this crisis, no single intervention will be sufficient to mitigate its devastating social and economic impacts, and countries need to mobilize every tool at

their disposal to protect the poor and vulnerable. Urgent support needs to be provided at the national and local levels, as well as directly to poor and vulnerable households, in order to alleviate some of the most severe economic and social impacts. The World Bank's current portfolio of CDD operations, which reaches millions of beneficiaries across the globe, provides a strong platform to rapidly scale up support.

CDD programs can help provide funds directly and quickly to vulnerable communities and households via existing community bank accounts using previously agreed upon criteria. The funds flow from national to local governments and communities ("financial plumbing") where project facilitators have already provided training on procurement and bookkeeping. Transfers can be done on the same day where electronic banking exists, for example, in India, or within ten days in very remote or conflict-affected areas, such as in Afghanistan. CDD operations can also support communities in providing the

¹ This note was prepared by the World Bank CDD Global Solutions Group, and the team of Ashutosh Raina, Camille Parker and Susan Wong.

critical basic services necessary to cope with COVID-19's impacts and protect local economic activity and food security. These essential public services include the provision of emergency water and sanitation facilities and upgrading community health facilities. In addition, programs can orchestrate safe marketing channels for agricultural produce, working with producers' associations to reach urban areas and upgrading urban retail markets to integrate social distancing requirements.

In many countries, CDD operations are the only safety net available to reach remote and vulnerable groups in a timely and credible manner. Building on existing CDD operations allows governments to engage communities in outreach and behavior change and provide resources for community response mechanisms within days, using existing systems and fiduciary controls. They also provide a foundation for medium-term investments to increase resilience and support recovery. The partnerships between communities, healthcare systems, local governments, and the private sector can play a critical role in slowing the virus' spread, mitigating its' impacts, and supporting local recovery in the long-term. Such partnerships can support communications and behavior change for prevention, provide a rapid emergency response in the short term, mitigate economic impacts, and build resilience for the future. A portfolio of existing CDD operations offers platforms ready to support immediate action, while also promoting longer-term recovery and resilience.

Purpose of this Note

In a crisis of this scale, CDD approaches are a valuable means of alleviating the impacts of this pandemic at the local level while strengthening resilience for the future. However, each stage of the CDD project lifecycle, from communications to monitoring and evaluation, is traditionally driven by in-person mobilization and interaction. In the COVID-19 context, project teams must find new ways to adapt and strengthen existing CDD operations to provide a rapid emergency response.

This note offers suggestions to World Bank CDD task teams for adapting their operations to mitigate the impacts of COVID-19 while providing an emergency response and protecting the health and safety of beneficiaries. Informed by existing guidance from OPCS, WHO, Social Response to COVID Paper, various Global Practices and inputs from various CDD task teams, this note provides guidance on the following stages of the CDD project cycle:

1. Communications and Social Mobilization
2. Poverty Targeting
3. Labor Intensive Public Works
4. Income generation and LED activities
5. Monitoring and Evaluation

This document will be periodically updated as additional resources become available and field experiences are documented.

Additional Resources

[World Bank Note: Building on Community Capacities to Strengthen the Response to COVID-19](#)

[World Bank Note: Current Responses to COVID-19 in Slums](#)

[World Bank Feature Story: Community Responses to COVID-19: From the Horn of Africa to the Solomon Islands](#)

[World Bank Feature Story: In India, women's self-help groups combat the COVID-19 pandemic](#)



Communications and Social Mobilization

Priority Actions

- Use facilitators, village leaders, and other key stakeholders to deliver culturally appropriate health messages to communities (especially vulnerable groups)
- Use physical communications such as pamphlets, public community announcements, information boards and other communication channels to spread health and behavior change messages.
- Utilize low-tech digital tools, such as WhatsApp, Facebook, Community Radio, or SMS to support two-way communications for healthcare providers to build vulnerability profiles, provide information on perceptions, and counter misinformation and misperceptions
- Conduct virtual trainings and information sessions for community facilitators using Facebook Live or Skype
- Consider other innovative low-tech solutions such as Amplio Talking Books, Farm Radio, and Mobile Vaani.

Communications and social mobilization form an integral part of the typical CDD project lifecycle. This phase of the CDD project cycle, which may include both virtual and in-person activities, allow project teams to effectively reach vulnerable and marginalized populations to inform them about CDD projects and encourage them to participate. This phase is also important to make communities aware of project objectives, local development investment cycles, and develop a preliminary list of priorities and establish representative institutions of beneficiaries. In the context of COVID-19, strategic communications and social mobilization are particularly crucial in ensuring that vulnerable communities receive critical information about preventing the spread of COVID-19 and establishing mechanisms to communicate and coordinate with local health officials. Indeed, social mobilization, including communications to promote behavior change, is recognized as a critical pillar of preparedness and

response and included in the joint COVID-19 action plan prepared by WHO, UNICEF and the IFRC².

CDD operations can provide ready-made community engagement platforms to quickly and effectively communicate culturally appropriate messages on preventative measures and proper hygiene practices to local community leaders. Regular and proactive communication with communities and at-risk populations can help to reduce stigma, build trust, increase social support, and improve access to basic needs for affected families. CDD operations can use existing networks of trusted community leaders and facilitators to support community outreach and awareness. This includes supporting partnerships between facilitators, community volunteers, and community health workers to provide information and promote appropriate behaviors, including for vulnerable populations and regions (e.g.

² The WHO's draft Operational Planning Guidelines to Support Country Preparedness and Response (12 Feb 2020) lists risk communication and community engagement (RCCE) as a key pillar. See <https://www.who.int/docs/default-source/coronaviruse/covid-19-sprp-unct-guidelines.pdf>. The UNICEF/IFRC/WHO action plan calls for community engagement staff and responders working with national health authorities,

and other partners to develop, implement and monitor an effective action plan for communicating effectively with the public, engaging with communities, local partners and other stakeholders to help prepare and protect individuals, families and the public's health during early response to COVID-19.

high-density places like urban slums or displacement camps, vulnerable populations including the elderly and disabled). Operations can also support communication campaigns and outreach efforts by community health workers by using existing CDD projects to fund development of pamphlets, posters, etc., where feasible. This is already happening in Afghanistan under the national CDD program, Citizens' Charter, where the program is using CDD platforms to deliver messages and pamphlets to 13 million Afghans about the virus and need for prevention. Community leaders are also reaching out to traditional religious leaders (mullahs) and faith-based organizations to share COVID-19 messages. Similarly, in Myanmar, the National Community-Driven Development Program has been using CDD facilitators to deliver local language information on how to prevent the spread of COVID-19, developed in partnership with UNICEF.

CDD operations can also be used to establish community feedback mechanisms for healthcare providers to build vulnerability profiles in the community, provide information on health attitudes and behaviors, and counter misinformation and misperceptions. CDD projects can use community facilitators and leaders to work with healthcare providers in identifying the community members who are most vulnerable or at high risk, and who may require support. Trusted local and religious leaders can identify and help address potential language, cultural and disability barriers associated with communicating COVID-19 messages. They can also play a critical role in countering misinformation and misperceptions about the virus and help reduce stigma and discrimination in the community. For example, during the Ebola outbreak in Liberia, USAID's Health Communication Capacity Collaborative launched the DeySay SMS system, which used text messages to

monitor, track, and report rumors about the virus to local health authorities.³ Similarly, UNICEF's "U-Report" system in Sierra Leone and Liberia enabled youth community members to become "U Reporters" and answer short SMS-based surveys on their community contexts. This information was aggregated by UNICEF and used to develop contextually appropriate health messaging and interventions.⁴ Finally, community leaders can engage with stigmatized groups and speak out against negative behaviors. For example, in times of public health emergencies, households are placed under strain, which raises the risk of domestic gender-based violence. Strong community messaging and community leadership can play a critical role in mitigating these risks.

All community engagement actions will need to exercise appropriate social distancing precautions and optimize the use of simple communication channels (radio, broadcasts, pamphlet distribution) and digital technology to the greatest extent possible. For example, Bihar's Jeevika program is working with 120,000 community professionals on a digital outreach campaign to build awareness on handwashing, social distancing, sanitation and quarantine best practices. Broadly speaking, these campaigns may be accomplished using a range of low-tech digital tools, including using WhatsApp, Facebook, Community Radio, or SMS. These platforms can be enhanced through the use of innovative technologies; for example, HealthBuddy, an AI-enabled chatbot, can be integrated into WhatsApp or social media platforms to answer user questions about COVID-19.

Alternatively, platforms such as [Farm Radio](#) and [Mobile Vanni](#) enable two-way communications between listeners and radio stations via SMS. In addition to these platforms, which enable communication with large

³ USAID, "Tracking Rumors to Contain Disease: The Case of DeySay in Liberia's Ebola Outbreak", <https://blog.usaid.gov/2016/09/tracking-rumors-to-contain-disease-the-case-of-deysay-in-liberias-ebola-outbreak/>

⁴ UNICEF, "Communication for Development: Responding to Ebola in Liberia", [https://www.unicef.org/cbsc/files/Liberia_Case_Study_U-Report_\(3\).pdf](https://www.unicef.org/cbsc/files/Liberia_Case_Study_U-Report_(3).pdf)

audiences, virtual trainings conducted with community facilitators, village leaders, and other key stakeholders present another option for disseminating key messages around COVID-19. For example, the Maharashtra State Rural Livelihoods Mission is conducting Facebook Live sessions with community leaders on topics related to COVID-19 awareness, livelihood opportunities for SHGs, financial inclusion opportunities, and opportunities for rural youth. These sessions have thus far attracted over 25,000 viewers per session.

Finally, “low-tech” forms of remote communications, including affixing bullhorns or speakers to cars to drive in communities or distributing posters or flyers, can also provide an effective way to spread health information, particularly for marginalized populations who have limited access to technology or are illiterate. The CDD Global Solutions Group has created [an inventory](#) of low-tech solutions that can be adapted for communication and social mobilization purposes.

Additional Resources

[World Bank OCPS Guidance Note on Public Gatherings and Meetings](#)

[WHO Risk Communication and Community Engagement Action Plan](#)

[World Bank Guidance Note: Low Tech Solutions for CDD Communications and Monitoring](#)

Poverty Targeting

Priority Actions

- Use community facilitators, leaders and community groups to identify the most vulnerable community members who may require additional support
- Communicate virtually (using Skype or WhatsApp) with existing community groups to provide inputs on identification of vulnerable population groups with high risk of susceptibility to COVID-19 infection and other health and economic risks
- Form community-led village surveillance and rapid response teams
- Work with partner agencies (e.g. UN agencies, CSOs) to identify and reach the poor and vulnerable falling outside the reach of existing CDD projects, such as informal workers, undocumented migrants, and migrant returnees

The COVID-19 crisis is having severe economic impacts on low- and middle-income countries and is creating populations of “new poor” who are not on existing social registries and therefore cannot benefit from existing government protections. Overall, the COVID-19 crisis

could push millions of people into extreme poverty, while millions of existing poor experience even deeper deprivation. The pandemic could cause the first increase in global poverty since 1998. Based upon initial World Bank baseline projections for June 2020⁵, 73 million more

⁵ Initial projections by WBG DEC and Poverty Global Practice

people could be living in extreme poverty in 2020 than was forecast before the crisis. This would mean an additional 18 million extremely poor people in fragile and conflict-affected countries. At the US\$3.20 per day poverty line, 175 million more people are now projected to be poor in 2020 – many of them newly poor. Importantly, extreme poverty is likely to persist at these higher levels in 2021 and potentially beyond. While the impacts of the pandemic will be felt by most households almost immediately, regardless of income levels, they will likely be deeper and longer lasting among the poorest households, who are more vulnerable and who may lack basic protections in the form of safety nets.

In low-income countries, the vast majority are not covered by social safety nets. According to the 2018 World Bank Report “State of Social Safety Nets”, one in five of the world’s poor lack social safety net coverage.⁶ For these vulnerable individuals, traditional safety net programs that operate through existing social registries may be inaccessible, preventing some of the hardest hit households from accessing crucial resources. Disadvantaged groups such as poor women and female heads-of-household, indigenous people, persons with disabilities, and migrants are especially vulnerable since they may not normally be included in official national poverty statistics or safety net registries. The COVID-19 pandemic, which has spurred mass movements of individuals from urban centers, is compounding this challenge, creating populations of migrant returnees and informal workers who often do not have access to state and local services. In this context, accurate poverty targeting is crucial in ensuring that resources reach the most vulnerable and needy populations. In a growing number of cases, governments are starting to use the principles of community targeting for household transfer

programs. For example, Alatas, et al. (2012)⁷ have shown through a randomized control trial that using community targeting systems produces results that are nearly as accurate as highly sophisticated statistical systems, but with much higher rates of local legitimacy and satisfaction due to the abilities of communities to articulate why some people receive benefits over others.

Targeting seeks to deliver the benefits of a project to a selected group of participants, particularly those who are the most poor and vulnerable. CDD operations can use community platforms for identification of and support to vulnerable groups while also practicing appropriate social distancing precautions and use community platforms to organize support for grocery shopping and other necessities. By working through existing community structures and facilitators, CDD operations can be particularly useful in poverty targeting and identifying who is most vulnerable to the pandemic or its socio-economic effects, and who may require targeted project support. By empowering community members to identify vulnerable groups in their own villages or neighborhoods, CDD operations can effectively target resources towards individuals who might otherwise be “missed” by emergency response projects relying solely on government social registry data. In this crisis, virtual tools, such Skype or WhatsApp, can be used to communicate with existing community groups to provide inputs on the identification of vulnerable population groups with high risk of susceptibility to COVID-19 infection and other critical health risks. For example, the Jeevika program in Bihar is carrying out a statewide survey with the help of Self-Help Groups (SHGs) to identify vulnerable households in need of food. At the national level, India’s National Rural Livelihoods Mission is using SHGs to monitor the incidence of hunger in communities, provide

⁶ World Bank Group (2018), “State of Safety Nets 2018”, <https://openknowledge.worldbank.org/handle/10986/29115>

⁷ Alatas, Vivi, Abhijit Banerjee, Rema Hanna, Ben Olken, and Julia Tobias. 2012. “Targeting

the Poor: Evidence from a Field Experiment in Indonesia.” - <https://economics.mit.edu/files/7857>



doorstep grocery delivery services and run community kitchens to feed the most vulnerable. Members of SHGs are asked to canvas blocks within their villages to identify households who are at highest risk of hunger and are coordinating with district authorities to deliver groceries to these individuals.

CDD operations can also explore additional options to support public health, including implementing appropriate protocols for quarantine and isolation. CDD operations can form community-led village surveillance

and rapid response teams to identify vulnerable groups and organize support. For example, in Jharkhand, SHG women-led village surveillance teams have been established to prepare lists of migrant returnees, identify those who are infected with the virus, quarantine identified persons, and prepare food for delivery to quarantine centers. The project is also running a 24-hour helpline to provide important information and counselling to migrant returnees about available programs and services.

Additional Resources

[World Bank Blog Post - COVID-19 will hit the poor hardest. Here's what we can do about it](#)

[World Bank Blog Post – What can low income countries do to provide relief for the poor and vulnerable during the COVID-19 pandemic?](#)

Labor Intensive Public Works

The COVID-19 pandemic has had significant impacts upon the income generation abilities of the vulnerable poor.

Many households have lost their primary source of income and may face severe food insecurity, health, and nutrition challenges as a result. In this context, labor intensive public works, or LIPW, can put much needed income into the hands of able-bodied poor and ensure consumption-smoothing, thereby mitigating the most severe impacts of the economic shocks associated with the pandemic. Through small-scale infrastructure development and maintenance projects, LIPW provides temporary, immediate employment at low wages to unskilled workers. These projects can be channeled through existing CDD platforms, where applicable, or coupled with other poverty targeting interventions, such as the identification of migrant returnees. In either case, CDD projects are well-poised to undertake these initiatives. CDD platforms can provide valuable inputs in

LIPW projects, both in terms of targeting potential beneficiaries, and in identifying infrastructure projects that would be most beneficial to communities. These projects can have longstanding benefits for communities; several independent technical audits and studies have also shown that infrastructure and public works are built at comparatively lower costs than other forms of service delivery, without sacrificing technical quality.

These CDD projects can assist the “new poor” and poor households in areas that are particularly hard hit by the pandemic, such as border areas with China where trade has been reduced or cut off (e.g., Laos, Vietnam, Mongolia, Myanmar), or areas in which the major industries may be closed and operating at a limited capacity. In these contexts, LIPW projects can be used to offset this economic fallout, with a focus on hard-hit regions, communities or populations. Additional activities that can be supported through LIPW include support to

local enterprises, including through local procurement of goods, and use of local labor for construction. However, in order to mitigate the inherent health risks associated

with in-person labor projects, project teams must take additional health and safety precautions.

COVID-19 Safety Tips for Implementers and Participants of Labor-Intensive Public Work Activities

- ✓ Ensure that sick beneficiaries do not participate in labor intensive public works. Any person who is experiencing symptoms of COVID-19 should not be allowed to come to the public work site. Where possible, teams should collaborate with local health facilities to support the monitoring of participants' health.
- ✓ Establish clear guidelines for social distancing at work sites, including creating smaller teams of 10 or less people in a group, creating staggered shifts, allowing younger people to work while keeping older people isolated, and discouraging people from shaking hands.
- ✓ Require all participants at work sites to wear facemasks from cloth
- ✓ Disallow participants from sharing work tools and equipment
- ✓ Sanitize tools and equipment that are used by participants daily
- ✓ Provide water and soap onsite
- ✓ Develop and post guidance to beneficiaries on how to stay safe during COVID-19 and create trainings for beneficiaries on the topic.

Specific projects undertaken during COVID-19 can be diverse and tailored to local contexts, depending on community feedback and needs. Block grants to local governments and communities can be used to reach households with cash, food, and medical supplies while providing necessary income and public services. Alternatively, LIPW projects can be channeled towards the provision of public goods, such as temporary health clinic extensions, public handwashing and sanitation stations, and water tanks. In addition to providing temporary employment, these public goods can help to mitigate the spread of COVID-19 through improving health and sanitation in local communities. For example, in Indonesia, the Community-Based Drinking Water Supply and Sanitation Program is using village funds to finance the construction of village handwashing facilities. Similarly, the Horn of Africa Development Response to Displacement Impacts Projects (DRDIP) has shifted its

focus on providing support to health centers and WASH-related investments. However, LIPW projects do not need to be limited to sanitation facilities. Alternative projects, such as informal settlement and neighborhood upgrading, including the construction of parks, storm drains, and community centers, can help communities to build resilience and productive assets while also providing employment opportunities to vulnerable groups. For example, in India, the Government of Odisha is implementing an Urban Wage Employment Initiative to employ informal workers on projects related to neighborhood upgrading including storm drainage construction, development of new parks, construction of public urinals, and construction of community centers.

The table below summarizes additional potential employment opportunities by types of public works investments.

Type of investments	Employment opportunities
Road and public transport	<ul style="list-style-type: none"> • Provision and improvement of access roads, improved footpaths and cycle/ handcart paths, small bridges, concrete block or stone paving, gravelling • Road clearance and grass maintenance • Road markings and erection of road signs • Rock breaking for roads • Building/maintenance of culverts, drifts, fences and retaining walls. • Building bus stops, sidewalk ramps and steps • Cleaning existing road infrastructure: e.g. Sanitization of bus stands/taxi parks
Drainage	<p>Construction and maintenance of:</p> <ul style="list-style-type: none"> • Lined open drainage channels, culvert crossings and small bridges • Gabions and reno mattresses • Grassed or lined water channels • Infiltration pits
Water	<p>Construction and maintenance of:</p> <ul style="list-style-type: none"> • Community water facilities: water distribution schemes, water kiosks, wells, public washing facilities • Shallow wells (including hand-operated pumps and accessories) • Ponds and other water harvesting and storage structures, dug-outs
Sanitation	<p>Construction/rehabilitation/maintenance of:</p> <ul style="list-style-type: none"> • Appropriate sewerage schemes • Sewer manholes and manholes covers • Waste disposal pits; sedimentation ponds • Humid or dry latrines • Cleaning and sanitizing public toilets, emptying pit latrines
Health and Education facility	<p>Building or rehabilitation of:</p> <ul style="list-style-type: none"> • School classrooms, pre-school buildings, training facilities • Community clinics and health centers • Childcare centers and nursing homes
Market	<ul style="list-style-type: none"> • Pavement of market yards • Building storage facilities, access roads and parking lots • Planting trees for shade • Installing latrines and waste disposal pits • Making higher base for market yards and animal/livestock market places
Public space, parks, community facilities	<ul style="list-style-type: none"> • Building multi-purpose community halls • Rehabilitating and reactivating sport and recreational facilities • Cultural and historic site restoration and maintenance • Fencing of public areas • Painting public buildings and street walls
Solid Waste Management	<ul style="list-style-type: none"> • Garbage collection in poor urban areas • Preparation of intermediate and main dumping sites • Separation and recycling and composting of solid waste
Environment	<ul style="list-style-type: none"> • Erosion protection • Community tree planting/greening

Additional Resources

[World Bank OPCS Guidance Note: COVID-19 Considerations in Construction/Civil Works Projects](#)

[World Bank GPURL Guidance Note: Labor-Intensive Public Works Response to COVID-19](#)

Income Generation and LED Activities

Income generation and local economic development (LED) activities provide another means to mitigate the impacts of economic shocks caused by the COVID-19 crisis by putting necessary income into the hands of vulnerable groups. Like LIPW projects, these initiatives can take the form of short-term, rapid response income generation opportunities that enable able-bodied adults to earn income for themselves and their families. However, these initiatives can also take the form of alternative forms of income generation, including support to existing small businesses, promotion of financial inclusion through Savings Groups, cash transfers and use of revolving funds. In all cases, these activities aim to leverage the networks and skills of community

organizations such as Self-Help Groups, Village Saving and Loan Associations (VSLAs), and Producer Organizations to provide immediate income support to vulnerable populations. In the short-term, responses can focus on providing income support to the poor (existing and new) and small and micro enterprises, and ensuring food security and essential services, while respecting COVID-19 social distancing and public health requirements. In addition, these interventions need to be complemented with measures aimed at supporting an inclusive and sustainable economic recovery with support for employment and livelihoods, as well as assistance to small and micro-enterprises.

COVID-19 Community Livelihood Groups Adaptation Tips for Project Implementation Units (PIUs)

- ✓ Build a phone tree. Given the need for physical distancing, consolidate a single phone list with community group leaders, community facilitators, and community leaders.
- ✓ Keep a record of the community livelihood group plans. This will help with restarting or adapting community livelihood group programs during the COVID-19 recovery stage. It can be a full record, or as simple as the group's location, name, main contact number, and 2-3 lines about the group's adaption plan.
- ✓ Complement group livelihood plans with a broader program response. Get community group members on lists for food distribution and other support. Integrate with cash and voucher assistance (CAV), WASH and health programming, food security programming, and referral systems for intimate partner violence (IPV) and gender-based violence (GBV) where appropriate.
- ✓ Begin thinking now about how community livelihood groups' resilience could be built after the pandemic. What supportive systems could help with restarting activities? What adaptations might remain relevant? How can relationships with banks and other financial institutions support the recovery of community livelihood groups?

COVID-19 Safety Tips to Adapt Community Livelihood Group Meetings

- ✓ Protect community group (e.g. SHGs, common interest groups (CIGs), producer groups etc.) members' health. Start every conversation with ensuring "do no harm" principles for all the groups the project works with.
- ✓ Support groups to create adaptation plans. The top priority of task teams should be to help groups understand the current crisis and its potential impacts and support them to develop adaptation plans that are cognizant of group principles
- ✓ Space out contributions: Have members come to meetings individually or in very small groups rather than all at once while the committee records member contributions
- ✓ Spread out: Ensure members sit at least 1.5-2 meters apart (e.g. sit on chairs, not benches or expand the circle to provide room between all members). Select the largest possible venue for group meetings and try to meet outdoors. If anyone is ill, recommend they do not attend any in-person meetings.
- ✓ Reinforce handwashing: Have all group members wash hands at the beginning of the meeting. Prioritize handwashing supplies and gloves for people who count money and hold the keys to the cashbox.
- ✓ Strongly encourage high-risk members stay home: have people in the greatest risk categories (elderly members, people who are sick or have pre-existing health conditions, pregnant women) stay home and contribute through peers. Ask members not to bring children to meetings.

COVID-19 Safety Tips to Adjust Community Livelihood Group Financing

- ✓ Where practical, transition to mobile money. In some contexts, products and services to do this do exist and could help reduce the risk of theft while also enabling groups to continue to operate without physical meetings. In many countries, mobile money fees are being waived for low-value transactions. Implementing teams, community trainers, and group leaders should be aware of the options available and what is involved in getting accounts so they can inform groups on their options and, if groups opt to pursue this, support them in making this transition.
- ✓ Stay low-tech where appropriate. Adopting digital solutions often takes substantial member education and on-the-ground support. Teams will need to gauge if or how groups will manage to adopt digital solutions without that level of support.
- ✓ Adjust lending practices. In the face of uncertainty, groups might opt to shorten lending cycles, change loan terms, lower loan values or stop lending all together.
- ✓ Increase the social fund or create a "COVID-19" fund to prepare to cover potential medical treatments. Such an action could be in parallel with reducing lending or through an increase in overall member contributions to the social fund.
- ✓ Ensure the security of the cash and cash box. Groups need to consider how they will ensure funds are not lost or stolen during this disruption. Group treasurers could be empowered to hold all funds until the crisis subsides. Alternatively, groups could put funds in a mobile account or take other measures to limit the risk to group cash

CDD operations can be expanded to get communities back to work through job creation, vocational training, and livelihood opportunities in rural and urban areas.

CDD operations can provide targeted livelihood support programs for the most vulnerable groups, including women, unemployed youth, returned migrants and those previously running micro and small businesses. It can also subsidize vocational training and reskilling for those who no longer have employment, as well as provide agricultural assistance for farmers who may have depleted their savings due to the crisis. CDD project teams may consider mobilizing community groups to produce necessary health supplies and provide community services. This may include engaging in the production of masks, hand sanitizer, or other PPE, or packaging and preparing food for distribution in community kitchens. For example, in India, women's self-help groups and community institutions have been mobilized to produce more than 105 million masks and thousands of liters of sanitizers and other products through decentralized production units. At the individual level, projects can provide individuals with productive packages, such as inputs for vegetable gardens or livestock, to support households through enhanced nutrition and additional income from the sale of surplus projects. For example, the Government of Tamil Nadu has announced a focused COVID 19 Assistance Package (CAP; US\$40m), financed under the World Bank funded Tamil Nadu Rural Transformation Project (TNRTP). The CAP has pivoted its focus, accelerated investments and leveraged community/collective groups to respond directly in the COVID-19 crisis. CAP will be supporting rural nano and micro enterprises facing crisis due to significantly reduced economic activities from COVID-19 and the lockdown. It provides short term (6 months) stimulus to businesses and enterprises to boost the local economy, to restart enterprises that do not re-open or open at smaller scale due to lack of capital and to boost incomes/ employment, reduce job loss both formal and informal, and avoid distress sale of assets. CAP will also be supporting a range

of rural enterprise activities, including: production of masks, sanitizer, soap and hand wash; dairy and allied activities, cattle, poultry, piggery and fisheries; food retail (small food centers, agri-product sale, small provision stores); production of various raw materials; electricians and plumbers; and small electrics repair (home appliances, computer and cell phones). These activities fall within existing TNRTP components.

These activities can be complemented by technology-focused interventions that utilize digital platforms to deliver trainings, mentorship, or additional income to vulnerable households. Skills trainings can serve as a valuable means to build individual and household resilience to future economic crises through training and short-term employment opportunities. These may be conducted through virtual platforms such as Skype or Facebook, and can cover topics related to resilience, entrepreneurship, or specific vocational skills (such as coding). For example, in the Solomon Islands, the Community Access and Urban Services Enhancement (CAUSE) project is scaling up short-term employment and training activities for vulnerable groups, especially women, youth, the urban poor and many workers in the informal sector who may have lost their main source of income. Online platforms can also be used to facilitate online mentoring for small businesses who have lost revenue due to COVID-19. For example, Youth Business International (YBI) has launched the SOS Mentoring program, a new global initiative through which YBI members around the world will deliver quality mentoring support to enable 30,000 small businesses to adapt to the COVID-19 crisis. Over, 15,000 mentors will be equipped with the information, knowledge and skills needed to most effectively support young entrepreneurs through the pandemic. These mentors will be carefully matched with young mentees and will provide support for a minimum of three months. Alternatively, projects may wish to use existing community groups, such as Village Organizations and Self-Help Groups, and digital

technology such as mobile money to channel cash transfers to households.

In the medium-term, projects can focus on specific measures to build economic resilience and sustainability. Projects may wish to target supply chains through the creation of public-private partnerships to manage supply chain flow. This may include measures such as supporting partnerships with the private sector to build integrated national market platforms to link producers of perishable agricultural goods to consumers and enhancing logistics arrangements made with existing distribution companies and other mobility providers (e.g. Postal service, Uber,

supermarkets, and food companies). In addition, projects can work to assist communities in accessing new markets through measures such as: Keeping local markets open and removing restrictive domestic market and marketing regulations to allow non-traditional trading channels to operate; designating temporary collection and distribution points, including through repurposed public infrastructure (such as schools, public offices, sports stadiums, etc.) for food selling and buying; strengthening local food purchases of nutritious foods by institutional food buying programs (school feeding, food aid, hospitals, military, etc.), and increasing finance available to farmers and agribusinesses.

Additional Resources

[CARE VSLA and Care Adaptations to COVID-19 and Past Crisis](#)

[SEEP Network: Savings Groups and COVID-19](#)

[World Bank: COVID-19 Safeguarding Lives and Livelihoods – A Checklist Guide for Local Governments](#)

[Resilient Communities in Face of COVID-19: National Rural Livelihoods Mission \(NRLM\) Webinar Presentation](#)

Monitoring and Evaluation

As the World Bank Group and other organizations seek to rapidly scale project operations in response to the impacts of COVID-19, monitoring and evaluation systems will also have to be adapted to the pandemic context.

Traditional, “on-the-ground” monitoring techniques typically used in challenging settings, such as the use of Third-Party Monitors, may no longer be feasible or ethical, and project teams will need to rely on virtual or technological strategies to obtain valuable project information. This information is crucial in understanding the economic and health impacts of COVID-19, as well as gaining valuable insights from at-risk populations about

their perceptions, knowledge, and behavior surrounding COVID-19. Indeed, as projects pivot towards COVID-19 and implement new models and programs, some of which may be untested, effective M&E is critical in understanding which programs are underperforming so that teams can rapidly change course and adapt as needed. As such, projects must rely on remote tools and community-based technologies to gather critical project information on a timely basis.

In order to collect this monitoring data, projects can rely on several sources. Phone and SMS-based surveys enable

project teams to receive feedback from hundreds of thousands of communities regarding COVID-19. They can be implemented rapidly and at low cost, can serve as a baseline for follow-up surveys, and can adapt rapidly to changing circumstances. For example, the World Bank’s Social and Poverty GPs are launching poverty and social impact monitoring surveys to collect quick, timely data through phone and SMS to monitor the impacts of the crisis in communities. Other phone-based technologies, such as mobile applications, can also be leveraged to support community-based monitoring efforts. For example, in Indonesia’s Institutional Strengthening for Improved Village Service Delivery Project, a new digital tool called the “Villages Against COVID-19” application is supporting villages at the frontlines of the pandemic. The app serves as a data collection and tracking tool for the village to monitor health data, job loss, poverty and social

assistance on a weekly and monthly basis. This will help to show trends, pinpoint outbreaks and inform community responses.

Projects may also establish community feedback mechanisms, which can include hotlines, digital platforms, or SMS tools, to provide information on attitudes and behaviors and counter misinformation and misperceptions. For example, in Cambodia, [the 115 Hotline](#) allows users to report coronavirus cases in their communities by dialing “115” on any phone in the country. Thus far, the hotline has received an average of 12,000 daily calls, and the reports submitted by health centers and community health workers are informing and enhancing the government’s outbreak response and prevention measures.

Additional Resources

[World Bank Blog Post: Monitoring and Evaluation during COVID-19](#)

[World Bank Note: Remote Implementation Support and Preparation of Projects Using Unmanned Aerial Vehicles \(UAVs\)](#)

