CASH TRANSFER MAPPING REPORT
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Background

In 2015, 193 countries committed to Target 8.7 of the Sustainable Development Goals (SDGs), pledging to take effective measures to eradicate modern slavery, human trafficking, forced labour and child labour. The outbreak of COVID-19 severely impacted these global responses and measures. Crisis can force people into slavery by, among other impacts, increasing vulnerability for populations who already face economic or social exclusion. Social protection mechanisms may provide a safety net to mitigate these vulnerabilities. COVID-19 has brought new attention to the importance of social protection. In its framework for the immediate socioeconomic response to COVID-19, the United Nations included key human rights issues and accompanying indicators for monitoring the human rights implications of COVID-19. One of the five key pillars identified in their response was the right to social protection and provision of basic services. Social protection systems figure prominently in the SDGs: Goal 1.3 calls for the implementation of “nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and vulnerable.”

In response to COVID-19, governments across the world have been working with varying success to protect the vulnerable from the adverse effects of the pandemic. The number of measures adopted across countries worldwide since the onset of the pandemic is unprecedented. However, as countries have stepped up efforts to mitigate the effects of movement restrictions and job losses, COVID-19 has also exposed gaps in equities, with those most negatively affected by the crisis omitted from, or underserved by, social protection.

Delta 8.7, the Knowledge Platform for the Alliance 8.7, seeks to expand the evidence base on effective measures. From October 2021–March 2022, Delta 8.7 undertook a cash transfer mapping exercise, specifically looking at the potential effectiveness of cash transfers to mitigate vulnerability to modern slavery. This consisted of desk-based research and interviews with policy actors and researchers from across three countries — Brazil, India and Nigeria. Building on broader efforts to monitor and evaluate social protection measures taken at a national, regional and global level during COVID-19, this project distinguishes itself by applying a modern slavery prevention lens to the use of cash transfers as a social protection measure.

The project explored the degree to which policymakers implemented an anti-slavery lens in their creation and delivery of cash transfer programmes during the COVID-19 pandemic, as well as their perception of the effectiveness of cash transfers to mitigate vulnerability to modern slavery. The project sought to capture any initial reflection by policy actors and experts on how cash transfers might be better designed to mitigate vulnerability in future crises.

The authors view this piece of research as the first stage of a process to ultimately determine how and if cash transfers are effective in reducing vulnerability to modern slavery. Ultimately, this research provided a modest, rapid assessment that may inform further examination of social protection measures and helps to answer the following questions:

1. What is the current evidence base on the role of cash transfers in preventing all forms of modern slavery, and where are the gaps in knowledge?
2. How can social protection measures address modern slavery, and what programme design characteristics might support better results in this area?
WHY CASH TRANSFERS?

Although a range of social protection programmes have been used in response to COVID-19, the scope of this research did not permit the exploration of multiple instruments in depth; cash transfers were prioritized as they represent by far the most widely used measure to date. As of 14 May 2021, a total of 734 cash-based measures had been planned or implemented in 186 countries. Cash transfers are instruments used to empower and safeguard vulnerable individuals, households and other groups from shocks and to mitigate vulnerability such as low and variable income. Conditionalities placed on receipt of cash transfers have been used to encourage positive change and behaviours, including increasing educational attendance, and reducing the incidence of early marriage and child labour. Financial inclusion and financial agency reduce vulnerability to exploitation. When individuals and families can save, move money safely and have access to affordable credit services, they are better positioned to protect themselves from economic shocks, build assets and invest for the future. Cash transfers, both non-conditional and conditional, can be a key preventative measure or means to build resilience in vulnerable communities. Often, cash transfers are one of the few formal reimbursement streams that reach households and individuals in crisis situations, as many of them have limited or no access to formal financial accounts. Burgeoning evidence suggests households are more resilient to negative shocks if they have access to financial services — either formally or informally.

DEFINITION OF CASH TRANSFERS

Despite there being marked convergence on the benefits of cash transfers, differences proliferate within and between organizations in their conceptualization of cash transfers’ aims, and which mechanisms, results and causal pathways they choose to emphasize. Generally, the function of cash transfers can be theorized in four key ways: prevention, protection, promotion and transformation. Table 1, taken from a then-named UK Department for International Development report on cash transfers, provides a stylized summary of these terms. It also includes a list of specific instruments that would serve each of these objectives. This includes both those instruments that would conventionally be categorized as social protection (including cash transfers), and other instruments that also contribute to these objectives (but would not normally be thought of primarily in terms of social protection).

Arnold et al. define cash transfers as: “direct, regular and predictable non-contributory cash payments that help poor and vulnerable households to raise and smooth incomes. The term encompasses a range of instruments (e.g., social pensions, child grants or public works programmes) and a spectrum of design, implementation and financing options.” Due to resource constraints this project will not examine public work programmes. Cash transfers are often paid directly to recipients with cash payments or through bank accounts, smart cards and mobile phone accounts. They aim to both provide immediate assistance and reduce poverty, as well as contribute to increased resilience of poor households by enabling them to save, invest and cope better with risks and shocks.
<table>
<thead>
<tr>
<th>Role</th>
<th>Objective</th>
<th>Key Concepts</th>
<th>Focus on</th>
<th>Instruments</th>
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<tbody>
<tr>
<td>Prevention</td>
<td>to prevent shocks from causing irreversible damage to the productive capacities and human development of vulnerable households</td>
<td>social risk management (SRM); risk pooling (insurance); safety nets; mitigating and coping with shocks</td>
<td>the vulnerable (poor and near-poor); the transitory poor</td>
<td>social insurance (unemployment, disability, contributory pensions); cash transfers; school feeding; short-term public works</td>
</tr>
<tr>
<td>Protection</td>
<td>to alleviate extreme poverty by raising living standards to a minimal acceptable standard</td>
<td>social floor; poverty reduction (reducing poverty depth and headcount); social contract and social cohesion; equity; welfare</td>
<td>the chronic poor</td>
<td>cash transfers; in-kind transfers (e.g. food); vouchers; social services (e.g. child protection, orphans); cash transfers; school feeding; public works</td>
</tr>
<tr>
<td>Promotion</td>
<td>to improve capabilities and opportunities for poor and vulnerable households; enable households to avoid low-risk, low productivity traps and so work their way out of poverty</td>
<td>escaping poverty traps; productivity; sustaining and building human capital; breaking inter-generational transmission of poverty; graduating from poverty; equality of opportunity; pro-poor growth</td>
<td>the economically active poor and vulnerable near-poor</td>
<td>cash transfers; vouchers or subsidies for inputs; public works; school feeding</td>
</tr>
<tr>
<td>Transformation</td>
<td>to change power relations that exclude certain social groups (women, Dalits, marginalized ethnic groups) from economic opportunities and access to public services</td>
<td>empowerment; citizen voice; equity; nondiscrimination; decent work; social and political construction of vulnerability</td>
<td>socially marginal or excluded groups; women and children</td>
<td>legislative and regulatory protection for workers (minimum wage, occupational health), women and children, and ethnic minorities; sensitization campaigns (e.g. against discrimination against HIV+ individuals); cash transfers</td>
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Cash transfers may take different forms: simple transfers, transfers conditional upon certain requirements, and transfers combined with the provision of or linkages to other services:

- **Unconditional cash transfers (UCTs)** require no conditionality on how the cash should be spent. The beneficiary is given agency in deciding what to do with the money. UCTs are implemented both at the national level by governments and at smaller scale by non-governmental organizations (NGOs).

- **Conditional cash transfers (CCTs)** attach specific conditionalities and requirements on the beneficiary in the hopes to develop capacity-building and ensure human capital development e.g., education for children. In so doing, CCTs goals are twofold: 1) short-term: improve food security; and 2) long-term: reduce intergenerational poverty and vulnerability.

- **Cash plus programmes** recognize that “cash alone cannot alleviate non-financial and structural barriers to improving living standards and well-being.” They embody the ‘promotive and transformative’ aspects of social protection mechanisms and have become popular in recent years. Similarly to CCTs, they focus on empowering the individual through human development and capital outcomes or on productive inclusion.

**WHY GOVERNMENT-LED INITIATIVES?**

The government should play a principal role in funding, delivering and facilitating social protection, particularly during economic strife and widespread poverty, where insurance mechanisms are ineffective, and there is limited coverage by private provider. This research project primarily aims to support the development of national social protection systems and therefore does not cover the many important interventions implemented by civil society and NGOs.
Research Design

RESEARCH OBJECTIVES

- Map the range of cash transfer programmes implemented by the Governments of Brazil, India and Nigeria in response to COVID-19;
- Collect any initial data on impact (i.e., reducing vulnerability to exploitation);
- Collate best practices on cash transfer policies during COVID-19 in the hopes that this will guide better anti-slavery mitigation strategies for future crisis situations, with a particular focus on the measures that are most effective for safeguarding women and girls;\(^1\)
- Identify emerging policy lessons, pockets of good practice and recommendations.

RESEARCH QUESTION

The overarching research question guiding this work is as follows:

1. Did policymakers implement an anti-slavery lens in their creation and delivery of cash transfers during the COVID-19 pandemic?

Additional sub-research questions guiding this exercise include:

1. How effective have cash transfer programmes been in reaching victims and survivors of modern slavery? [and/or groups considered most vulnerable to modern slavery?]
2. When implementing cash transfer programmes, did policy actors view them as a key preventative tool to mitigating vulnerability to modern slavery?

METHODOLOGY

From October–March 2022, Delta 8.7 undertook a cash transfer mapping exercise, consisting of desk-based research and interviews with policy actors. There were three components to this work.

1. Secondary desk-based review including data collection;
2. Policy actor outreach;
3. Data collection and mapping exercise of cash transfer programmes implemented by Alliance 8.7 Pathfinder and UK Call to Action countries during COVID-19.

Secondary desk-based research

Secondary desk-based research scoped and mapped the range of cash transfer programmes implemented as a result of COVID-19\(^1\) in Brazil, India and Nigeria. The desk review used academic literature reports and data provided by governments, civil society organizations, trade unions, regional and international organizations, and media reports where appropriate. Where possible – given the limitation of COVID-19 on policy actor availability - Delta 8.7 supplemented the review with informal interviews and consultations with local policy actors. This review provided a comprehensive, although not exhaustive, insight into main trends and issues in relation to the planning, design and implementation of cash transfers as they pertain to mitigating vulnerability to modern slavery.
### Cash transfer mapping exercise

*Table 2. Inclusion and exclusion criteria*

<table>
<thead>
<tr>
<th>Inclusion Criteria</th>
<th>Exclusion Criteria</th>
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<tbody>
<tr>
<td>Cash transfer programme implemented and/or adapted during the timeframe of 9 January 2020–1 December 2021.</td>
<td>Cash transfer programme implemented and/or adapted before/after the timeframe of 9 January 2020–1 December 2021.</td>
</tr>
<tr>
<td>Cash transfer programme implemented/adapted as a direct response to COVID-19.</td>
<td>No indication that cash transfer programme was implemented/adapted as a direct response to COVID-19.</td>
</tr>
<tr>
<td>Cash transfer programme implemented by or in collaboration with national governments.</td>
<td>Cash transfer programme not implemented by or in collaboration with national governments e.g., implemented solely by civil society.</td>
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Cash Transfer Mapping

Between October 2021–March 2022, Delta 8.7 mapped cash transfer programmes implemented by Pathfinder and Call to Action countries during the COVID-19 pandemic. The exercise successfully mapped 135 unique cash transfer programmes across 82 countries that fit the study’s eligibility criteria. Eighteen countries did not provide a cash transfer programme that fell within the study’s eligibility criteria (16 Call to Action countries and two that are both Pathfinder and Call to Action countries). Of the 135 cash transfer programmes mapped, 57 were an expansion of a pre-COVID-19 measure, while 78 were new measures created in response to COVID-19. Fifteen of the 135 programmes mapped were conditional cash transfers, all of which were existing measures that were expanded in response to COVID-19. 120 of the 135 programmes were unconditional cash transfers, all of which were new measures in response to COVID-19. Programmes had high coverage overall of certain beneficiary types (e.g., women, mothers, parents, children, elderly, disabled, informal workers) but very little inclusion for other types (e.g., migrants, Internally Displaced Persons [IDPs], ethnic minorities, etc.). See Graph 1 below. It should be noted that many cash transfer mechanisms exist to reach these excluded populations but were typically implemented by UN agencies or NGOs rather than governments (exclusion criteria for this study). In future work, some example case studies for a deeper dive around the anti-slavery lens might include: Paraguay (transgender persons); Albania, Kenya and Spain (victims of gender-based violence, human trafficking, or sexual exploitation); Poland (migrant workers and refugees); the Philippines (overseas foreign workers); Mexico (Indigenous persons); and Colombia (IDPs).

Graph 1: Distribution of beneficiaries across total programmes

Graph 2: Distribution of payment methods across cash transfer programmes
REGIONAL GROUPINGS

Eligible cash transfer programmes were grouped according to the regional classifications used in the Delta 8.7 data dashboards: Africa; Americas; Arab States; Asia and the Pacific; Europe and Central Asia. Some general trends were observed including that South America has the highest number of cash transfer programmes per county and Africa had the highest number of programmes paid through mobile money.

Graph 3: Regional distribution of cash transfer programmes mapped

Africa

18 cash transfer programmes mapped in Africa were expansions of pre-existing measures, while 16 were new COVID-19-related measures. Three programmes were conditional cash transfers, while the remaining 31 were unconditional.

Graph 4: Distribution of beneficiaries across total programmes (Africa)
Americas

20 cash transfer programmes mapped in the Americas were expansions of pre-existing measures, while 25 were new COVID-19-related measures. Ten programmes were conditional cash transfers, while the remaining 35 were unconditional.

Graph 5: Distribution of payment methods across cash transfer programmes (Africa)

Graph 6: Distribution of beneficiaries across total programmes (Americas)
Arab States

Two cash transfer programmes mapped in the Arab States were expansions of pre-existing measures, while two were new COVID-19-related measures. All four programmes were unconditional cash transfers.

Graph 8: Distribution of beneficiaries across total programmes (Arab States)
Asia and the Pacific

Ten cash transfer programmes mapped in Asia and the Pacific were expansions of pre-existing measures, while 20 were new COVID-19-related measures. All 30 programmes were unconditional cash transfers.

Graph 10: Distribution of beneficiaries across total programmes (Asia and the Pacific)
Europe and Central Asia

Seven cash transfer programmes mapped in the Americas were expansions of pre-existing measures, while 15 were new COVID-19-related measures. Two programmes were conditional cash transfers, while the remaining 20 were unconditional.
Graph 13: Distribution of payment methods across cash transfer programmes (Europe and Central Asia)
Brazil Case Study

THE SOCIOECONOMIC IMPACTS OF COVID-19 ON THE COUNTRY

Brazil is renowned for both the incredible progress it has made over the past 25 years to combat modern slavery and its immensely successful cash transfer programme, Bolsa Família, that has lifted millions out of extreme poverty. The onset of the pandemic has posed a profound challenge to the progress made in combating both modern slavery and extreme poverty. Brazil was one of the nations that was hardest hit by COVID-19, which, in addition to the public health consequences, has increased the socioeconomic vulnerabilities of already vulnerable populations, as Brazil's economy has been in deep crisis since 2014. To mitigate some of those effects, the Government instituted a cash transfer programme, Auxílio Emergencial, which aimed to support those most economically impacted by the pandemic. In what follows, the contours of the Auxílio Emergencial programme will be outlined with a look to analysing its impacts on socioeconomic vulnerability generally and modern slavery prevalence specifically during the COVID-19 pandemic.

MODERN SLAVERY IN BRAZIL: AN OVERVIEW

Since the launch of the governmental initiatives to combat modern slavery in 1995, more than 55,000 individuals have been removed from conditions analogous to slave labour (trabalho escravo) in Brazil. While global estimates show that more women and girls than men are currently in slave-like conditions, in Brazil the data demonstrates the opposite: labour in conditions analogous to slavery primarily affects men, who constitute 95 per cent of identified enslaved workers. This is partly due to the definition of slave labour in Brazilian legislation, which does not include child labour, forced marriage, sexual exploitation and human trafficking. According to Article 149 of the Brazilian Penal Code, slave labour entails: “reducing someone to a condition analogous to that of a slave, namely: subjecting a person to forced labour or to arduous working days, or subjecting such a person to degrading working conditions or restricting, in any manner whatsoever, [their] mobility by reason of a debt contracted in respect of the employer or a representative of that employer.” This has begun to change with more inspection operations targeting cases of domestic labour exploitation now taking place. In addition to gender, slave labour in Brazil is also marked by racial disparities: the majority of survivors self-identify as black in inspection reports. Most have also either acquired no schooling or did not continue past elementary education.

The majority of slave labour cases occur in rural areas in labour-intensive industries such as cattle, sugarcane and coal mining. In recent years, the number of cases identified in urban areas has been increasing, especially in the textile and construction sectors. The number of exploited workers rescued has declined from record highs in the mid-2000s, which is less an indication of a decrease in prevalence than it is the result of a reduction in the number of inspection operations due to funding and staffing shortages. Furthermore, child labour is intimately related to slave labour. An assessment conducted in 2011 by the International Labour Organization found that 90 per cent of survivors of slave labour were also subject to situations of child labour. The social profile of both adults and children likely to be subject to slave labour and child labour, respectively, is thus very similar: primarily black males who engage in agricultural, construction, and other activities, and black females who represent the majority of exploited children in domestic work. In recent years, the number of cases of child labour in urban settings has rapidly increased and has now come to form the majority of cases. According to the most recent estimates in 2019, there was an estimated 1.768 million children between the ages of five and 17 who were subject to child labour. In 2015, which is the last year for which there is disaggregated data, urban child labour comprised 58 per cent of the total number of children in child labour. For children between the ages of five and 14, work in rural areas, especially on small family holdings, predominated.
Pre-COVID-19 cash transfer measures

Brazil’s Bolsa Família is one of the world’s most renowned and effective cash transfer programmes, credited with lifting millions out of extreme poverty. Implemented in 2003, Bolsa Família is a conditional cash transfer programme that centres on poor and extremely poor families, specifically families with children up to 17 years old. As a condition of receipt, families must vaccinate their children and ensure they regularly attend school. The value of the cash transfer depends on the number of individuals in the family as well as their income. The average value of Bolsa Família is around BRL 191.86, which is much lower than the monthly minimum wage of BRL 1045, roughly USD 226.25

While the impact of Bolsa Família on the prevalence of modern slavery is not exactly known, the programme has had significant impact on other factors, namely poverty and education, that point to its crucial role in reducing social vulnerability more broadly. For example, a 2019 study conducted by the Institute for Applied Economic Research (IPEA) has shown that in 2017 Bolsa Família lifted more than 3.4 million people out of extreme poverty and 3.2 million people over the poverty line. Another study has shown that the programme has increased the school participation of girls aged six to 14 and 15–17 by 8 per cent. Other studies have also demonstrated that the Bolsa Família was an effectively targeted programme that reached the poor and extremely poor — although it did not push them above the poverty line. Nevertheless, there is no evidence directly demonstrating that Bolsa Família has reduced the incidence of slave labour and child labour, though experts note that the programme does provide some assistance to the most vulnerable. The crucial issue hampering its impact is its very modest value relative to the essential needs of its vulnerable recipients.

Cash transfer measures implemented because of COVID-19

After the United States, Brazil has the highest COVID-19 mortality rate in the world. In addition to the public health consequences, the pandemic has had a tremendous impact on the economy and on the labour market. Loss of employment in 2020 is estimated to have been 4.2 per cent for the formal sector and 12.6 per cent for the informal sector. Service sector and domestic workers were especially affected by the tumult of the COVID-19 economic and the public health measures that restricted movement. Workers with lower levels of schooling similarly experienced higher rates of unemployment in comparison to workers with a college degree.

In a response, the Brazilian Government instituted some measures to mitigate the impacts of COVID-19, including the Auxílio Emergencial (Emergency Assistance) and the Emergency Employment and Income Preservation Benefit. In April 2020, Congress passed Law No. 13.92 to provide emergency financial support to vulnerable families and individuals impacted by the pandemic. The programme specifically targeted independent workers, those who experienced unemployment and informal workers, and was initially going to provide eligible recipients with a monthly payment of BRL 600, roughly USD 130, for three months. Eligibility criteria included:

- Being above 18 years of age
- Not having formal employment
- Not receiving other financial assistance, such as unemployment, except for Bolsa Família
- Family income not exceeding three minimum monthly wages (BRL 3,135) and income per person not exceeding half a minimum monthly wage (BRL 522.50)

In addition to these criteria, recipients must also either be an informal worker, independent/casual worker or an independent microentrepreneur (MEI). Furthermore, female-led families were eligible to receive two payments per month (totaling BRL 1200/USD 260). Individuals and families who received Bolsa Família were automatically enrolled in the Auxílio Emergencial, and the latter’s payments temporarily substituted that of Bolsa Família if the value was more than what they regularly receive. To receive the benefit, eligible recipients had to fill out an application with the
Caixa Econômica Federal — which is the State-owned savings bank — either through its app or in-person at one of its locations. Once approved, a savings account was created for each person where the payment was transferred. Recipients then had 90 days to withdraw the amount or transfer it to their bank accounts. If no action was taken after 90 days, the amount was returned to the Government.

After this initial roll out, the Government extended the programme twice. In September 2020, the Auxílio Emergencial was extended for four more months, and the same criteria of eligibility remained in effect. The value was, however, reduced to BRL 300, roughly 61 USD per month. The second and final extension provided four payments of BRL 150 for single persons; BRL 250, roughly 51 USD for families of two or more; and BRL 375, roughly 76 USD for female-led families with at least one dependent below the age of 18.

The impacts of the Auxílio Emergencial have been considerable. The programme is estimated to have reached 25 million informal workers — nearly 30 per cent of the population — and helped mitigate the effects of the pandemic on people’s livelihoods. According to the Brazilian National Institute of Geography and Statistics (IBGE), the poverty rate dropped by 23.7 per cent by August 2020 in comparison to pre-pandemic levels. Income inequality similarly diminished during the same period. According to one study, without the Auxílio Emergencial, the “poverty rate would have risen from 18.7 to 21.9 per cent of the population.”

Interviews with officials at the Public Labour Prosecution Office and the Ministry of Labour and Social Welfare similarly found that, though short-lived, the Auxílio Emergencial, as well as the Emergency Employment and Income Preservation Benefit, have undoubtedly helped mitigate the devastating impacts of the pandemic on people’s livelihoods. Furthermore, officials noted that because Brazil already had a robust cash transfer infrastructure through its Cadastro Único system — which is the registration mechanism for Bolsa Família as well as other social assistance programmes — the Auxílio Emergencial swiftly reached millions of vulnerable people around the country. Nevertheless, the programme was dogged by a number of issues that hampered or delayed access. Many people do not have access to the internet, let alone to a smartphone, and hence were unable to download the Caixa Econômica app to claim the benefit. While they could alternatively access the benefit by registering in-person at one of the Caixa Econômica branches, the officials interviewed noted that there were often extremely long lines and crowds, with people having to wait hours, which contravened the public health measures aimed at curbing the spread of COVID-19. Some people who live in remote rural areas were either unaware of the benefit or lived too far from any Caixa Econômica branches. There were also cases of fraud, such as employers using their domestic worker’s Cadastro de Pessoas Físicas number (the national identification number) to procure the benefit or more organized criminal networks that used false Cadastro de Pessoas Físicas numbers. Being restricted to informal and independent workers, the Auxílio Emergencial was also not accessible to formal workers who “are constantly transiting between formality and informality, going in and out of poverty.”

IMPLEMENTATION OF AN ANTI-SLAVERY LENS

The specific impacts of the Auxílio Emergencial on the prevalence of and vulnerability to modern slavery is not yet known. The officials interviewed noted that while the Auxílio Emergencial did help stave off the worst impacts of the pandemic, it was insufficient in both value and duration to address the core vulnerabilities that put people at risk of exploitation. And while IBGE has not released child labour statistics for 2020 or 2021 — because in 2020 they were unable to conduct field research, and in 2021, the number of survey responses was too low — officials interviewed noted that it is apparent that child labour has increased over the course of the pandemic, given both the economic constraints families faced and the indefinite school closures. To better address these impacts, the officials noted that the value of the cash transfer benefit should at least be equivalent to a monthly minimum wage, and child labour prevention should be added as one of the conditions for eligibility. In other words, a cash transfer programme can only succeed in mitigating vulnerability to modern slavery and child labour if it meets the material needs of individuals and
families and simultaneously fosters civic education around citizenship and labour rights. In fact, one of the officials interviewed noted that given the meager amount of the cash transfer — for both the *Auxílio Emergencial* and the *Bolsa Família* — many people still opt to return to exploitative labour conditions in mining or forest-clearing because they are more lucrative.
Nigeria Case Study

THE SOCIOECONOMIC IMPACTS OF COVID-19 ON THE COUNTRY

The Government of Nigeria has taken numerous health, social and economic measures to cushion the impact of COVID-19. Following the first positive case in February 2020, the Government implemented strict lockdown measures that included border closures, quarantine, curfews, limitations on intra-State movement, governmental closures, restrictions on public gathering and social distancing. These restrictions waxed and waned with case numbers. Nigeria received support to mitigate the crisis from several international partners including the European Union, World Bank, International Monetary Fund (IMF), US Agency for International Development (USAID) and the African Development Bank. The major strategic responses implemented by the Government in response to COVID-19 include: the creation of a Presidential Task Force on COVID-19, the 2020 Economic Stimulus Bill, expansion of the Nigerian cash transfer programme, the Central Bank of Nigeria stimulus package, food assistance and the creation of the Coalition Against COVID-19 (CACOVID).

The Government’s initial response to the crisis was proactive. They were one of the first developing countries that committed to implementing fiscal and stimulus measures to mitigate the effects of COVID-19. These measures included reducing government spending in anticipation of lower revenues and providing USD 130 million to support households and small and medium-sized enterprises. Despite these measures, the COVID-19 pandemic has had a far-reaching and devastating impact on Nigeria’s economy. During the early stages of the pandemic, Nigeria saw its deepest recession since the 1980s. As the World Bank notes, this was in part due to lockdown measures that impacted employment opportunities but also due to the dramatic decline in the price of oil — falling 60 per cent between February and May 2020. The Nigerian economy is heavily dependent on the oil sector, which represents more than 80 per cent of the country’s exports and more than 50 per cent of government revenues. On reopening, economic activity increased, but inflation accelerated, impacting the price of food, which had catastrophic impacts on the most vulnerable.

The COVID-19 crisis and the shocks associated with it struck in a context of low social protection programme coverage, in addition to pre-existing structural issues — including trade restrictions, such as the 2019 border closure — that were already driving up prices and eroding purchasing power. In 2018–2019, less than 2 per cent of Nigerians lived in a household enrolled in the National Social Safety Net Project (NASSP). While it is clear the effects of the pandemic have been far-reaching and affected those already vulnerable, it has also changed the profile of the poor. The World Bank noted a shift in those facing situations of poverty: on average they suggest “Nigerians forced into poverty by COVID-19 are set to be more southern, more urban, and more likely to work in the service sector than those who were already poor.” Urban Nigerians working in services and commerce were hit especially hard. Despite many returning to work quickly following the lockdown, many households remained economically precarious as their annual incomes fell, and they became more food insecure.

MODERN SLAVERY IN NIGERIA: AN OVERVIEW

Based on increased efforts to reduce trafficking in the country despite the impact of the COVID-19 pandemic on its anti-trafficking capacity, Nigeria was recently moved from Tier 3 to Tier 2 on the US 2021 Trafficking in Persons (TIP) Report. This indicates that the Government of Nigeria has made significant or considerable efforts to comply with the minimum standards outlined in the US Trafficking Victims Protection Act of 2000. Nigeria is a source, destination and transit country for human trafficking. The Global Slavery Index estimated that approximately 1.4 million Nigerians, or around 0.7 per cent of the country’s total population are living in a state of modern slavery. When correlated against Gross Domestic Product per capita, some countries stand as taking relatively robust action when compared with those that may have stronger economies and a greater capacity to act. Nigeria is notable for taking steps to respond to modern slavery despite having limited
resources. However, while the Government has made significant efforts to address human trafficking and modern slavery within and across its borders, there is considerable evidence of ongoing exploitation — both in the form of human trafficking and other modern slavery practices. Frequent targets include women, children, refugees and displaced persons.

Structural factors drive vulnerabilities to human trafficking and modern slavery, and these fault lines have been exacerbated by the pandemic and pandemic response measures. COVID-19 impacted Nigeria at a time of economic instability, conflict and climate crisis; exacerbating its food insecurity and educational trouble. These factors often overlap to create intersectional vulnerabilities to modern slavery. While the impact of COVID-19 on modern slavery in Nigeria is still not fully understood, it is clear the pandemic has further entrenched vulnerability. For instance, closures of schools during the pandemic increased risk to the most vulnerable children. Prior to the pandemic, Nigeria was in the midst of an educational crisis with 10.5 million children out of school — the highest rate in the world, which disproportionally affected "girls; children with disabilities; children from the poorest households, in street situations, or affected by displacement or emergencies; and children in geographically distant areas." Beyond the missed learning opportunities, students in Nigeria lost access to daily meals made available by the federally-funded school feeding programmes. Without access to schooling, many children and their families saw work as a logical alternative; this was compounded by the fact that COVID-19 left many of their parents unemployed. The intersectional factors of unemployment, loss of household income and lack of access to schooling combined to increase poverty, and with it the risk of vulnerability to modern slavery.

Furthermore, security issues as a direct result of the conflict situation continue to endanger children and their education. Ongoing conflict in Nigeria has coincided with the pandemic, creating intersecting vulnerabilities to human trafficking and modern slavery. With conflict and displacement comes greater vulnerability to human trafficking and modern slavery practices for women and children in particular. Since 2009, armed conflict in North-East Nigeria has had devastating effects, claiming thousands of lives and impacting families both economically, socially and physically. According to the TIP report, Boko Haram's practice of forcibly recruiting, abducting and using child soldiers — a practice they have been pursuing for 13 years — increased during COVID-19, as well as their abduction of women and girls for the purposes of domestic servitude, sexual slavery and forced labour. For those families displaced by the conflict, many of whom live in overcrowded camps or informal settlements, the COVID-19 pandemic only further exacerbated their vulnerability to modern slavery, heightening factors such as poverty and limited access to health care.

The economic impact of COVID-19 has aggravated poverty levels in Nigeria, which, even prior to the pandemic, hosted more than 10 per cent of the world's extreme poor, defined by the World Bank as people living on less than USD 1.90 per day. Those working within the informal sector — in which over 80 per cent of working people in Nigeria are employed — have been particularly affected. This is partly due to their exclusion from the Government's COVID-19 response packages. As noted in a UNICEF report, while the Economic Sustainability Plan included other measures to reserve jobs and income, such as payroll support and loans to micro and small businesses, most of these programmes focused on the formal sector and excluded informal workers, thus ruling out most of the urban poor who work informally as street vendors or waste pickers: their exclusion driving them into situations of poverty and exacerbating their vulnerability to forms of modern slavery.

Prior to the pandemic, low literacy rates, lack of access to education, high rates of unemployment, endemic corruption, gender inequality and an ongoing conflict situation were identified as key drivers of migration in Nigeria. However, with limited access to safe migration routes and a lack of implementation of existing laws and policies designed to address human trafficking, many were/ are left vulnerable to situations of modern slavery, with young women particularly vulnerable to trafficking for sexual exploitation. COVID-19 has heightened these vulnerabilities and resulted in several new migration drivers. Respondents to a report conducted by Seefar, which examined...
the impact of COVID-19 on migration intentions and human trafficking in Benin City, cited fatalities, job losses and lack of access to COVID-19 relief and social welfare packages as reasons for increasing their urgency to migrate. Some survivors of human trafficking also reported that the impact of COVID-19 had increased their desire to re-migrate. Many of their businesses—funded through compensation grants—shut down due to COVID-19 with many forced to sell their start-up assets to sustain themselves during the lockdown. COVID-19 also affected the influence of remittances on migration plans among potential migrants and their families: the perceived economic difference during the pandemic between those who had remittance-sending family members abroad and those who did not made many respondents want to migrate themselves. COVID-19 has also shaped perpetrator behaviours. In Benin City, there has been a reported increase in “travel agents” participating in online recruitment as well as an influx of online job advertisements for “legal” migration opportunities that promise hassle-free visas and travel-now-pay-later schemes. Additionally, some warn that COVID-19 threatens to undermine years of public awareness campaigns around the risk of irregular migration and human trafficking as the desire to migrate deepens due to rising hardship and poverty. As one official noted in the Seefar report: “there started to be a shift in the mind-set of women in Edo State, coupled with awareness campaigns and resources. But now a lot of that may have been undone by COVID.”

CASH TRANSFER PROGRAMMES

Pre-COVID-19 cash transfer measures

Nigeria implemented its first large-scale conditional cash transfer scheme in 2016, in conjunction with the World Bank-supported National Social Safety Nets Programme. The Household Uplifting Programme’s (HUP) primary objective was to respond to “insufficient capacity-building and lack of investment in the human capital of poor and vulnerable households.” Prior to COVID-19, it covered 400,000 households (1 per cent of total households, total population 201 million). As a programme focused primarily on uplifting the poorest of the poor, the HUP targeted households considered to be in dire economic need. Beneficiaries receive NGN 5000 per month (USD 13) plus NGN 5000 conditional on receipt of actions linked to four key areas: health, nutrition, education and environment (see Table 2).

The programme has 3 additional components: 1) base cash transfer; 2) top-up based on State-selected conditions; and 3) livelihood support. While the National Cast Transfer Office’s mandate is to deliver the targeted cash transfer across the country, the actual implementation happens at the State level through the State Cash Transfer Unit (SCTU). SCTU manages and coordinates the targeted cash transfer and livelihood intervention. Each local government area establishes a cash transfer team to implement activities at the community level.

Beneficiaries are selected using a three-stage approach that includes poverty mapping to identify the poorest local government authorities in each beneficiary state; community-based targeting, a practical and inclusive method for identifying the poor through engendering community ownership; and proxy means testing, which ranks beneficiary households captured according to their means, thereby ensuring the cash transfers reach the poorest of the poor. Those falling below the sixth decile were eligible for cash transfers. While the policies included parameters that would reduce gender-related risk and vulnerability especially in women and children, feedback from the survey to non-State actors suggested that there were perceptions of gender bias around the delivery mechanisms.
Table 2: Adapted from the National Social Safety Nets Project

<table>
<thead>
<tr>
<th>Objective</th>
<th>Area</th>
<th>Conditionality</th>
</tr>
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<tbody>
<tr>
<td>In addition to delivering timely and accessible cash transfers to beneficiary households, the programme aimed to support development objectives and priorities to achieve the following specific outcomes:</td>
<td>Health</td>
<td>Beneficiaries (pregnant women and children up to five years old) are required to register in designated primary health centres or with skilled birth attendants (SBAs) and maintain a prescribed schedule visit for pre/post-natal visits for the pregnant women and immunization for children.</td>
</tr>
<tr>
<td>a) Improve household consumption;</td>
<td>Nutrition</td>
<td>Children up to five years are required to register in a designated health centre for growth monitoring.</td>
</tr>
<tr>
<td>b) Increase utilization of health and nutrition services;</td>
<td>Education</td>
<td>Children five–15 years or girls ten–18 years must register in public primary schools and maintain an attendance of a minimum of 70 per cent number of academic days.</td>
</tr>
<tr>
<td>c) Improve school enrolment and attendance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Improve environmental sanitation and management;</td>
<td>Environment</td>
<td>Beneficiaries (household members 18–40 years) are expected to plant and maintain woodlot or home garden, practice erosion control or maintain household sanitation depending on what the State selects.</td>
</tr>
<tr>
<td>e) Encourage household financial and asset acquisition;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) Engage beneficiaries in sustainable livelihood.</td>
<td></td>
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</table>

Prior to the COVID-19 pandemic, the Nigerian Government’s broader social assistance programmes have come under scrutiny from both the IMF and World Bank for their low coverage, poor targeting and inadequate monitoring.72 According to the 2018/19 Nigeria Living Standards Survey (NLSS), just 1.6 per cent of Nigerians lived in a household that was enrolled in the NASSP, the country’s flagship social protection programme. As a recent Human Rights Watch report notes:

“Unlike a fully developed social security system, Nigerian social protection programmes to do not provide Nigerians with a legal right to access cash or other forms of support if they are unable to reach an adequate standard of living. Rather they are a set of government anti-poverty programmes whose scale is determined by government priorities and the resources available to fulfil them.” 73

Cash transfer measures implemented because of COVID-19

During COVID-19 the Nigerian Government opted for a vertical shock response, expanding their programme by increasing their cash transfer benefits for the duration of their lockdown. In addition, they pursued a horizontal shock response, registering more than a million households on the NASSP, enabling their access to regular social assistance plus COVID-19 emergency relief.74 In announcing the first lockdown on 29 March 2020, President Buhari said cash transfers would be used to mitigate its impact on vulnerable households.75 They then became one of the main political and economic recovery strategies for the pandemic.

In April, the Government announced that it would distribute transfers of NGN 20,000 (USD 53) to poor and vulnerable households already recorded in the National Social Registry. Prior to COVID-19, there were 2.6 million households (about 11 million people) registered on the database, the majority of which were households in rural areas. The Government hoped to add an additional 1 million households to this register during the pandemic.76 Putting this into perspective, however, 87 million Nigerians live on less than USD 1.90 a day, meaning that the HUP, while necessary, would only reach a fraction of Nigeria’s poor.77 Initial gains made with the expansion of the cash transfer programme at the onset of the pandemic were halted as time progressed. 520,711 fewer households received cash transfers between November to December 2020 in comparison to March to April 2020.
In response to the increase of urban poor, the geographical poverty shift affecting southern Nigerians, and declines in service sector incomes, the Economic Sustainability Plan included support for a new “rapid response” cash transfer, which began in January 2021 with the intent of reaching 1 million people nationwide. The Government initially piloted the rapid response programme in Ikordu local government area, in Lagos and Karshi Village in Abuja, making NGN 5,000 monthly payments to over 31,000 households. While the World Bank and Vice President Osinbajo have suggested that a full rollout of the rapid response register project is underway, with millions of Nigerians already benefiting, the NASSP Coordinating Office has only confirmed the existence of a pilot programme.

An array of challenges and barriers were faced during the implementation of the cash transfer programmes, including issues around timeliness, financial access, targeting and corruption. Implementing electric payments in Nigeria is difficult due to its weak national information management system. Prior to COVID-19, Nigeria’s NASSP relied on a government-contracted network of payment service providers who delivered cash payments in designated areas to beneficiaries. During the pandemic, payment agents, previously responsible for delivering cash to the unbanked, were limited in their ability to process payments due to restrictions on travel that deeply affected in-person transactions.

Given the higher levels of bank access in urban areas and the desire to improve financial inclusion, the rapid response register sought to move to digital payments. Incorporated into its design was assistance for helping the unbanked to open an account. As discussed below, this hindered the delivery of the programme, resulting in delays in payment to the most vulnerable. The long-term benefits of this rollout have yet to be seen. As the Overseas Development Institute notes in their evaluation of Nigeria’s COVID-19 response, beneficiary access to banking and mobile phone services were a critical constraint in delivering cash transfers to citizens. As interviewees noted, a government requirement for would-be beneficiaries of the urban cash programme was a Bank Verification Number (BVN). This eligibility criteria resulted in many being disqualified or unable to access the cash payments, as a valid national identification or international passport is required to obtain a BVN, which many Nigerians do not have. Presently, only about 40 per cent of Nigerians have access to bank accounts.

In an April 2021 meeting with Human Rights Watch, federal government officials stressed that cash transfers were just one of the policy measures used to respond to the impact of the COVID-19 crisis on poverty levels. Publicly, however, the Government advertised cash transfer programmes as key to their pandemic response. Human Rights Watch found that this raised expectations among urban poor communities that they would receive assistance. One interviewee noted that: “When the Government announced the cash transfers, we charged our phones to see if we will get bank alerts, but this didn’t happen.” This was a point substantiated by participants in this research, who noted a disconnect between government rhetoric and actual implementation of the cash transfer programme. Lack of communication and awareness-raising on the availability of cash transfers and how to access them was also raised by survey participants as a key failure of implementation: “The conditions imposed by State actors before consideration were cumbersome, and there was no adequate awareness creation especially for the rural populace.” While the media played a key role in publicizing some of the policies of the Government through their print and online platforms, interviewees noted that those in rural areas who are unable to afford print media or lacked a phone were unable to access such information.

As noted in the previously referenced Overseas Development Institute report, the timeliness of the emergency cash response was a relative weakness, due in part to the already-delayed pre-pandemic routine cash transfer payments, having been disrupted by the NASSP transition from the Vice President’s Office to the newly created Ministry of Humanitarian Affairs, Disaster Management and Social Development the previous year. The decision to develop a new rapid response register, pioneering relatively complex identification and payment approaches, meant assistance was delayed. In Lagos State, for example, delay in subscribing to the federal cash transfer programme, combined with Lagos’s relative wealth compared to other states, meant that the state received a
small share of federal cash transfers. Lagos residents, despite making up more than 10 per cent of Nigeria’s population, received less than 1 per cent of the cash transfers paid nationwide between March and December 2020.89

In response to lockdown measures and the need to prioritize a public health response that mitigated against in-person transmission, Nigeria adapted their approach to identify and register households. Utilizing census data and satellite imagery-based poverty mapping, they determined potential beneficiaries’ eligibility. This differed from their extensive community-based targeting activities, which involved collaboration with multiple community leaders to develop inclusion criteria and identify beneficiaries.

IMPLEMENTATION OF AN ANTI-SLAVERY LENS:

Did policymakers implement an anti-slavery lens in their creation and delivery of cash transfers during the COVID-19 pandemic? In short, the answer is no, victims of modern slavery were not directly considered in the design of the Nigerian cash transfer programmes either before or during COVID-19.90 Interviews with Nigerian-based policy experts and policymakers, and analysis of the duration of assistance and targeted groups, conclusively determined that these cash transfer programmes were not developed with an explicit anti-slavery lens.91 Instead, they were part of a suite of initiatives designed to “tackle poverty and hunger across the country” and later expanded to mitigate the effects of COVID-19 on the most vulnerable. As can be observed though, these measures have been implemented with varying success. Interviewees did note, however, the potential indirect knock-on effects of the cash transfer programme on those most vulnerable to modern slavery, citing poverty as a key factor in driving risk to modern slavery and cash transfers’ potential to encourage positive change and behaviours among beneficiary groups, including increasing school attendance, which has been correlated in some settings with a reduction in child labour.

However, as has been demonstrated, it is not accurate to say that poverty is the key determinant of vulnerability to modern slavery in Nigeria. Often it is not just the poorest of the poor, but rather the working poor who rely on earned income to survive but lack access to State protection or alternative livelihood options, and who are drawn into situations of modern slavery. While the Economic Sustainability Plan included several measures intended to mitigate the economic impact of the pandemic, these job creation and retention programmes were limited in scope and targeted primarily at those in the formal sector, thereby excluding the informal workers who make up the majority of the urban poor.92 As they were excluded from cash transfers for the greater part of the pandemic as well, this left a significant demographic open to exploitation.

Interviewees aligned in their agreement that cash transfers alone are insufficient tools to combat vulnerability to modern slavery and alleviate poverty more broadly. Universal and comprehensive social protection measures are needed. Preventing modern slavery in the context of COVID-19 would require Nigeria to expand their social protection programmes, and to close gaps in coverage, with specific consideration to families of workers in the informal sector. When considering strategies for future cash transfer programmes, the Government should prioritize social assistance programmes that embed financial inclusion best practices into the design programming, including access to livelihoods, education, professional training and social agency. Calculation of cost should be based on the amount needed per household to achieve an adequate standard of living, with special consideration for those living in urban areas. These steps will go some way to ensuring an anti-slavery lens is applied to cash transfer programming.
India Case Study

THE SOCIOECONOMIC IMPACTS OF COVID-19 ON THE COUNTRY

India initiated measures against COVID-19 starting from March 2020 which included school and business closures and restrictions on movement in a nationwide lockdown. To date, there have been 42.9 million confirmed cases of the virus, with over 516,000 deaths reported to the World Health Organization by late March 2022.\(^93\) IMF research suggests that the containment measures were effective in reducing mortality but that these were accompanied by significant economic costs. This research further found that economic losses have been most persistent in states with the lowest incomes, and weakest health care and government infrastructure.\(^94\) The Indian economy contracted by 6.6 per cent in financial year 2021.\(^95\)

The pandemic lockdowns were particularly damaging to informal sector and migrant workers. Informal sector workers make up to 90 per cent of India's labourers,\(^96\) and the 2011 census found the total number of internal migrant workers (both inter- and intra-State) to be 139 million.\(^97\) Immediately following the lockdowns, local and international media reported on the risky movement of stranded migrants back to their home states, resulting in deaths along migration routes due to malnutrition, dehydration or traffic collisions.

In addition to an examination of some federal-level programmes, this case study will focus on the Indian state of Bihar, one of the top source states for internal migration and one of the least-developed Indian states where one immediate impact of COVID-19 was seen in the return of migrants and a loss of remittances.\(^98\) Bihar is a predominantly rural state in north-east India that relies heavily on remittance income from both domestic and international labour migration as a source of support. Pre-pandemic, Bihar received the second highest domestic remittances among Indian states, accounting for around 5 per cent of the state's GDP, and these funds were used primarily for food purchases.\(^99\)

A transport of 1187 migrant workers back to Bihar by early May 2020 was predicted in early news reports to grow to a total of a million of “reverse migrants”\(^100\) — this actually proved to be an underestimate with nearly 2.5 million returning to Bihar in the first year of the pandemic.\(^101\) In conjunction with already high unemployment in the state and the likelihood of sustained job losses due to the pandemic, Bihar experienced severe economic impacts relative to other Indian states, with disproportionate consequences on the most vulnerable members of its population. Research including Bihar household surveys found that remittances to Bihar fell by 50 per cent in the first 6 months of the pandemic lockdowns, with the most severe impacts experienced by scheduled castes and tribes. Of returned migrants, 10 per cent departed their employer with owed wages.\(^102\)

MODERN SLAVERY IN INDIA: AN OVERVIEW

India has some of the highest numbers of people identified as living in conditions of modern slavery, including forced labour, bonded or debt labour, sexual exploitation, child labour and forced or child marriage. India is ranked as a Tier 2 country by the US TIP Report.\(^103\) According to the Global Slavery Index of 2018, 8 million people are in slavery in India in any given day.\(^104\) Forced, bonded and child labour is prevalent in agriculture, brick kilns, quarries, mining and textiles and apparel production, among other sectors. Migrant workers, both domestic and international, are at high-risk of exploitation through unethical recruitment channels. In the case of domestic labour migrants, their families may travel with them, rendering spouses and children highly vulnerable as well. As the Global Slavery Index notes, the children of domestic migrants are frequently unable to access education in states where their parents are working, rendering them more likely to engage in child labour. There are also high levels of discrimination against people in Scheduled Castes and Tribes, which increase their economic and social exclusion. One identified risk in Bihar is of rural populations falling into debt bondage and other forms of forced or child labour. A study of prevalence of forced labour, child labour and sex trafficking in Bihar noted that medical debt was
the primary cause identified for debt bondage among adults surveyed.105

A series of rapid surveys of rural communities conducted in 2020 examined the immediate and persisting effects of the pandemic in six states including Bihar. The study, a collaboration between the India Agriculture and Food Global Practice of the World Bank Group, IDinsight and the Development Data Lab, found that the pandemic affected migrants disproportionately, with migrants experiencing a magnitude of job losses triple that of the overall population.106

Women were more vulnerable than men to job loss: UN Development Programme-commissioned research on female domestic migrant workers surveyed 10,161 workers across 12 Indian states in December 2020, finding that the impact of COVID-19 on this population was particularly severe, with incomes falling by over half compared to pre-pandemic levels. About 40 per cent of women surveyed reported being laid off due to the pandemic, while about 20 per cent left employment voluntarily, possibly due to having to take on unpaid care work or return to a home state due to their partner’s job loss. The result for these women has been diminished savings, higher debt and a higher likelihood for risk of bonded labour.107

According to the 2011 Indian census, and as cited by UNICEF, 10.1 million children were counted as being in conditions of child labour, including 5.6 million boys and 4.5 million girls.108 Child labour is seen to be increasing sharply due to the pandemic, with communities in Tamil Nadu, for example, reporting increases of child labour by 280 per cent. Additionally, studies noted a rise in child trafficking for the purpose of sexual exploitation and a rise in illegal adoptions, potentially for the purpose of exploitation.109

Closures of schools and anganwadis (early childhood development centres) during various phases of India’s lockdowns exacerbated risk to the most vulnerable children. Anganwadis provide vital food assistance and health care in addition to other social services, and they were closed in both the first and second waves of COVID-19 infections in India, leading to diminished access despite efforts to offer home delivery of support materials.110 Migrant families, or those lacking ration cards for other reasons, were not able to draw the same levels of support, increasing levels of family and child malnutrition.111 Starting from initial closures, Indian schools were closed for a total of 82 weeks.112

One-third of child brides globally are in India, although the practice is diminishing over time. Rates of child marriage are highest among the poorest quintile, rural populations and among Scheduled Tribes. In tracking progress over time, UNICEF noted in 2019 that, while progress was measurable, it would require significant acceleration to achieve the target of ending child marriage by 2030.113 While India already had high levels of child marriage, COVID-19 has been predicted to result in increased rates of the practice, with one analysis by UNICEF suggesting 10 million more marriages will result from the pandemic.114 40.8 per cent of Bihari women aged 20–24 had been married before they were 18 (compared to a national average of 23.3 per cent) as measured in the fifth National Family Health Survey, India of 2019-2020.115 The same source reports that 11 per cent of girls and women aged 15–19 were pregnant or mothers at the time of the survey. Early anecdotal evidence suggests that there has been a rise in child marriage in India during pandemic lockdowns and that lockdowns may have accelerated early marriage in the poorest households due to the lower cost of hosting weddings for fewer guests, among other factors.116

CASH TRANSFER PROGRAMMES

Pre-COVID-19 cash transfer measures

Cash transfers in India prior to COVID-19 included specific, targeted support for expectant and new mothers, farming families, underemployed members of rural communities, widows and disabled persons. Access to digital banking and identity cards, as well as other financial inclusion services, proved vital to receiving these funds.
The primary cash transfer schemes prior to COVID-19 have included:

**National Social Assistance Programme (NSAP):** This programme, administered by the Ministry of Rural Development, was first launched in 1995 and offers financial support in the form of:
- Pensions to persons over the age of 60 in households identified as being below the poverty line (National Old Age Pension Scheme)
- Support for widows via the Indira Gandhi National Widow Pension Scheme
- Support to disabled persons via the Indira Gandhi National Disability Pension Scheme

**PMMVY:** India’s largest conditional cash transfer was first launched as *Indira Gandhi Matritva Sahyog Yojana* (IGMSY) in 2011 and was redeveloped as *Pradhan Mantri Matru Vandana Yojana* (PMMVY) in 2017. Under this scheme, first-time expectant mothers over the age of 18 receive a total of INR 6000 (c. USD 78.40) in three installments under the condition of registering her pregnancy, attending pre-natal care sessions, institutional delivery, registration of birth and infant immunizations. While offering real progress in improvement of maternal and infant health, evaluations of uptake of this scheme have suggested higher use of this scheme by wealthier households relative to the poorest, reflecting existing gaps in access to institutional delivery among the most poor women.\(^{117}\) Further, the benefit is limited to first-time motherhood, while poorer women, women in Scheduled Castes and Tribes, and women unable to access contraception — those most in need of financial support — experience more births without access to this cash transfer.\(^{118}\)

**PM-Kisan Yojana:** *Pradhan Mantri Kisan Samman Nidhi Yojana* (PM-Kisan Yojana) is a government scheme through which all small and marginal farmers receive up to INR 6000 per year as minimum income support. Launched in 2019, it was intended to double farmers’ income by 2022, in part by financing the purchase of seeds and fertilizer. To qualify, farmers must present proof of residence, identity and land ownership of at least two hectares of land.\(^{119}\) This measure excludes tenant farmers or those otherwise without land rights, including women who make up only 14 per cent of landowners across India.\(^{120}\)

**PMUY:** *Pradhan Mantri Ujjwala Yojana* (PMUY) is a scheme to provide access for households to healthier cooking fuel, specifically liquified petroleum gas (LPG). Cash transfers are provided to women to purchase LPG connections and fuel, and a stove plus first LPG refill is provided as in-kind assistance. Targeted beneficiaries include women 18 and older in the poorest households including Scheduled Castes and Tribes, forest dwellers and Socio-Economic Caste Census (SECC) households (identified as qualifying under the SECC)\(^{121}\).

**JAM Programmes and Financial Inclusion Measures:** It is important to note the infrastructure for financial inclusion in India, which has both offered delivery pathways for cash transfers and served as a qualification to receive cash transfers. Under Prime Minister Modi, the Government of India launched a series of connected and complex efforts to accelerate financial inclusion.\(^{122}\) In 2014, the *Jan Dhan* (PMJDY) programme began the push to expand access to a variety of financial services for all Indian citizens.\(^{123}\) The Aadhaar system was designed to assign a unique 12-digit ID number to every citizen, making it the world’s largest biometric ID system to be used to facilitate social service provision as well as secure connection to financial service providers.\(^{124}\) Digital India was launched in 2015 with the aim of improving internet and mobile infrastructure throughout the country.\(^{125}\) Together, these three programmes are known at the *Jan Dhan-Aadhaar-Mobile* (JAM) trinity.

The JAM programmes have been augmented by other, targeted social and financial protection systems including access to microcredit via the MUDRA bank, social security and pension schemes, pushes for broader insurance coverage, and other special savings opportunities such as the *Sukanya Samriddhi* accounts that allow parents of girls to create high-yield savings accounts for the use of educating their daughters and paying their wedding costs once they are of age. While some of these programmes have yet to reach full uptake, and some have met with criticism for ineffective performance, they have, as a whole, served to create a welcoming infrastructure for local-level financial inclusion programmes, including the use of cash transfers.
Progress, however, seems to be unequal. South India has jumped more rapidly in financial inclusion according to CRISIL Inclusix indices. Bihar was identified as one of the most disadvantaged states in terms of the social protections and financial access provided elsewhere in the country. In 2013, for example, the credit-to-deposit ratio of Bihar was described as “one of the lowest in India” at 37 per cent, with one bank branch per 22,000 people, while over 90 per cent of poor Bihar communities had to rely on informal sources of credit.

In 2007, the government of the state of Bihar partnered with the World Bank to implement the Bihar Rural Livelihoods Project (JEEViKA). The project’s main objectives were: improvement of livelihoods and enhanced social and economic empowerment of the rural poor; organization of poor communities for better service negotiation and access to financial institutions; public and private service provider capacity-building; and catalysing the development of microfinance and agribusiness sectors. A strong focus on women’s financial inclusion formed part of the strategy for this work via the formation of self-help groups to collectively manage member savings and offer loans and repayment systems. However, a 2019 report by the government of Bihar found mixed evidence of the successes of the JEEViKA project and called for greater development of digital financial services to achieve the programme’s goals. Specifically, the JEEViKA report suggests that the most significant progress is being seen via a series of gender-sensitive approaches to accelerating financial inclusion using female banking agents known as bank sakhis (bank female friends) in conjunction with self-help groups. By using female agents for outreach to female clients and community education about use of services, the programme aims to increase both demand for and supply of essential financial services. In particular, the strategy outlined the development and rollout of products for rural women, the extension of bank sakhis by recruiting agents within excluded communities and focusing on digital financial literacy.

Cash transfer measures implemented because of COVID-19

The continuation and expansion of existing schemes offered support to a number of vulnerable communities in the early pandemic period. Response to the COVID-19 pandemic via cash transfers was announced in May 2020 with comprehensive relief programme, Pradhan Mantri Garib Kalyan Yojana (PMGKY) supported by the World Bank. The programme was expected to scale-up current cash transfers as well as food and health-care assistance using existing delivery pathways at federal and state levels.

The JAM programmes made direct benefit transfers for rapid assistance possible: a 13 April 2020 press release from the Ministry of Finance reported that 320 million people received cash transfers amounting to a total of INR 293.520 (USD 3.84) billion and accompanied by food and fuel assistance. This included 200 million women who were PMJDY account holders and received INR 500 each, as well as widows, elderly and disabled persons enrolled under the National Social Assistance Programme who received extra benefits of INR 500 (USD 6.5) each in the first of two installments. In total, nearly 51 per cent of rural populations surveyed reported receiving a direct bank account transfer or cash from the government in June 2020. The PM-KISAN scheme also continued delivery: 58 per cent of surveyed eligible farmers in six rural states reported receiving cash transfers under PM-KISAN in three tranches between January and November 2020.

PM CARES for Children scheme: One notable programme offered by the Ministry of Women and Child Development as a direct result of COVID-19 was the May 2021 launch of assistance for children who lost their parents or primary caregiver due to the pandemic. Eligible children under the age of 18 who lost either both parents, their surviving parent, their legal guardian or adoptive parent could apply for assistance. Depending on the child’s age, they would be enrolled in Anganwadi services (to provide nutritional assistance, health care, and early childhood education), government-funded schooling, health insurance, and a lump sum invested into their accounts, to amount to INR 1 million (approximately USD 1300) by the time they turn 18. Beneficiaries can draw a monthly stipend from this account until the full amount becomes available for their use at the age of 23. By February 2022, the government reported having received 6624 applications, and of these, 3855 were approved. Given the large increases in child labour already noted due to the
pandemic, it seems unlikely that this relatively small programme will significantly mitigate risk of child labour.

**Bihar’s Corona Sahayata Programme:** Another new cash transfer developed in response to the COVID-19 pandemic was a delivery of assistance to domestic labour migrants from Bihar who found themselves stranded in host states. This scheme offered a transfer of INR 1000 (USD 13) to the Bihar bank accounts of migrant workers to facilitate their safe return to the home communities. In order to access this programme, beneficiaries needed to be registered with an identification number under Aadhaar, be registered under a physical address outside of Bihar, and have a bank account registered in Bihar. Access to a mobile phone was also required to receive funds. By 24 May 2020, the government of Bihar reported that 2.03 million migrant workers had received this benefit, suggesting the potential for rapid and efficient assistance through mobile channels. Analysis of this programme, however, suggests that many of the most vulnerable workers would be excluded, as these would be most likely to lack access to bank accounts, mobile phones or formal registration in their state of employment.135

**IMPLEMENTATION OF AN ANTI-SLAVERY LEN**

While no policymakers directly contributed to this research, interviews with India-based policy experts, and analysis of the duration of assistance and targeted groups, suggest that these cash transfer programmes were not developed with an explicit anti-slavery focus. Rather, these have been broad measures, designed to lift large communities out of extreme poverty, and to mitigate the most severe impacts of the COVID-19 lockdowns. In doing this, these cash transfer programmes may be considered to have reduced some risk of modern slavery for millions of Indians who were able to access some support. The most explicit targeted reduction has been child marriage, which the Government of India has tried to address broadly prior to the pandemic through economic empowerment and financial inclusion for women and girls (as in the creation of the Sukanya Samriddhi accounts, or use of female bank agents in rural Bihar). While cash transfer programmes may not have specifically targeted vulnerability to modern slavery during the pandemic, they did address some vulnerabilities exposed by COVID-19, as in programmes to support (a small number of) children who were orphaned.

Interviewed experts cautioned that cash transfers alone cannot offer meaningful protection against modern slavery. Such short-term, limited programmes do provide some cushioning against shocks, but they do not address structural inequalities or exclusion in societies — nor do they offer agency or access to these most excluded populations. In the case of the PMMVY maternal benefits, women in scheduled castes and tribes who experience the greatest rates of poverty have less access to support than their wealthier peers, while benefits offered to registered migrants exclude highly vulnerable unregistered migrant workers.136 Many communities lack basic infrastructure, which puts a disproportionate burden on the most vulnerable, including mothers, children and disabled persons.137

Rather, analysts suggest such measures must be built into an ecosystem of broader financial inclusion, including access to livelihoods, education, professional training and social agency. The JEEVIKA programme in Bihar offered one such model of a comprehensive community response to COVID-19 vulnerabilities. Its existing infrastructure and networks fostered outreach to educate rural populations about COVID-19, offered e-learning platforms for children, provided rations, and extended small-business loans to returned migrants. The programme also offered a one-time payment through its Satat Jeevikoparjan Yojana (SJY) platform in the amount of INR 2000 (USD 26) to enrolled households defined as “extremely poor” with a total of INR 77 (USD 1) million distributed to 38,764 households.138 Rapid rural surveys also showed that members of self-help groups reported better access to all social protection services, including cash transfers, than non-members.139 This suggests that weaving strong financial inclusion infrastructure into community resilience models offers a more durable and effective model to lessen vulnerability to exploitation.
Conclusion

This project sought to explore the degree to which policymakers might have implemented an anti-slavery lens in their creation and delivery of cash transfers during the COVID-19 pandemic, as well as analysis of the effectiveness of cash transfers to mitigate vulnerability to modern slavery.

The three case studies covered some diverse approaches to the use and delivery of cash transfers in three countries that have all implemented ambitious financial inclusion programmes for their populations. In the case of Brazil, there was already a robust conditional cash transfer programme in place before the pandemic. The Bolsa Família, instituted in 2003, offered support to poor families with children up to the age of 17. As a condition of receipt, families must vaccinate their children and ensure they regularly attend school. Without having an explicitly stated goal of preventing child labour or forms of modern slavery, the programme had a significant effect on reduction of poverty and on increasing school attendance. The Brazilian Government expanded cash transfers during the pandemic through the Auxílio Emergencial, which was offered to recipients of the Bolsa Família as well as to female-headed families, informal workers or micro-entrepreneurs whose household income falls below a set level.

Nigeria also employed existing delivery pathways to offer pandemic support to poor households as well as to increase the number of beneficiaries. As with the programmes in Brazil and India, these were not identified as measures designed specifically to prevent modern slavery. Instead, they were part of a poverty reduction programme and later expanded to mitigate the effects of COVID-19 on the most vulnerable. The cash transfers may well have indirectly impacted the most vulnerable to modern slavery, as poverty is a key factor in driving risk to modern slavery.

In India, research found an ambitious suite of cash transfer and financial inclusion schemes pre-pandemic, but uneven uptake and access to these support programmes. Focusing on the Indian state of Bihar, which is one of the least developed states and one with a high level of both domestic and foreign labour migration, the research examined some of the ways in which social protections in India have been targeted to address rural poverty, including through cash transfers to farmers and rural employment schemes. During the pandemic, existing pathways for cash transfers were employed to deliver assistance, including through one programme specifically developed to support the safe return of stranded Bihari migrant workers to their home communities.

While analysing three distinct countries and regions, the case studies revealed some similar approaches to the use of cash transfers during the COVID-19 pandemic. Digital transfers were a primary delivery pathway, both because all countries had developed some infrastructure to support such delivery already and because they aligned well with lockdowns and travel restrictions. While the use of digital transfers was a strength for rapid and efficient access to support, the delivery method also proved a significant barrier to access by some of the most vulnerable populations. In all cases, those without access to mobile phones, internet and electricity faced challenges in accessing funds. Similarly, research in each country suggested that lack of awareness of either the assistance or how to access it resulted in uneven uptake of cash transfers, particularly among the most vulnerable populations.

The case study research also found that implementation of cash transfer programmes was not designed with an explicit anti-slavery lens. In each case, cash transfers were considered as having utility in addressing poverty and food insecurity generally, and the expansion of cash transfers during the pandemic was of short duration and was intended to offset the most immediate consequences of lockdowns and resulting unemployment. What this research suggested is that cash transfers have not yet been seriously designed to mitigate vulnerability to modern slavery, but that for them to effectively prevent exploitation, cash transfer programmes — in combination with other protection measures — must not only meet the material needs of individuals but also provide them with some measure of financial flexibility to pursue varied life projects. It is thus also imperative that cash transfer programmes be coupled with wider financial inclusion measures,
robust outreach to make individuals aware of their rights and entitlements, and improved access to infrastructure (education, health and employment) to enable greater agency in communities.
References


7 Ibid.


11 Ibid.


15 The COVID-19 pandemic was initially reported to the World Health Organization on 31 December 2019. Therefore, the research will only look at policies enacted after this date.

16 Belgium, Cyprus, Czechia, Denmark, Gabon, the Holy See, Hungary, Liechtenstein, Malta, Nepal, the Netherlands, Norway, Qatar, Senegal, Seychelles, Slovakia, Sudan and Switzerland.


32 The Emergency Employment and Income Preservation Benefit was geared towards formal workers and was a means to preserve employment. It is essentially a cost-sharing agreement between the Federal government and employers whereby the latter would reduce the number of work hours for employees and the government would cover a percentage of their salary. The same would apply if the employee contracts were temporarily suspended. It was in effect for nearly a year: https://servicos.mte.gov.br/bem/.


36 Manoel Ventura and Daniel Gullino, “Guedes anuncia extensão do auxílio emergencial, mas assessoria corrige e diz que governo quer Auxílio Brasil” O Globo, 1 October 2021.


43 Brazil also returned to the World Food Programme Hunger Map during the pandemic, with food insecurity once more becoming a national crisis. Lisa Alves, “Pandemic puts Brazil back on the world hunger map,” The New Humanitarian, 19 July 2021.


50 Ibid.


57 Ibid.
63 Ibid.
67 Ibid.
68 Ibid.
70 Ibid.
72 International Monetary Fund, Nigeria: 2020 Article IV Consultation-Press Release; Staff Report; and Statement by the Alternate Executive Director for Nigeria (Washington DC: IMF, 2020).
77 Ibid.
84 Delta 8.7 Policy Actor Interviews, 2021.


Out of the government workers interviews, 49 per cent opined that in its current form State actors do not view the cash transfer policy as a preventative measure.

In Nigeria, Delta 8.7 conducted interviews with a social protection expert from an intergovernmental organization based in Nigeria, one interview with researchers from a Nigeria-based think tank — Aneej — who have been responsible for monitoring the cash transfer programme since its inception in 2016. Additionally, Delta 8.7 received invaluable support from a Nigerian policy actor — Terna Tsumba — who assisted with conducting interviews with non-State actors.


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