Covid-19 Social Relief Programmes and Distribution Mechanisms in East Africa: Lessons Learned

Ivan Kagimu*

Abstract

Covid-19 had social, physical and economic impacts that prompted governments to develop strategies to help their citizens cope with the mandatory lockdowns and curfews. East African countries faced several uncertainties and challenges in assisting their citizens, including a lack of funds to implement large-scale relief programmes, effective identification of eligible beneficiaries and viable distribution channels. Some African countries launched cash transfer and social assistance programmes. However, the size, efficiency and proportion of the population covered varied, leading to increased fraud, corruption and embezzlement. Patronage, political exploitation and partisanship were also prevalent. This article aims to assess the success of the East African Covid-19 cash and social assistance programmes and the mechanisms used and to draw lessons by comparing them with effective programmes outside Africa, in order to better inform the efficient design of future similar programmes. Using a data triangulation research methodology, the article finds that the Covid-19 relief programmes in many East African countries failed due to a lack of up-to-date multidimensional data on people’s living standards, income and poverty levels. If East African countries are to implement effective social assistance programmes, they need to develop comprehensive and multi-faceted (resident) data collection systems to guide such programmes.

Keywords: Covid-19; relief programmes; effectiveness; East Africa

* Monarch Business School, Switzerland. Email: ivan.kagimu@umonarch-email.ch
Résumé


Mots-clés : Covid-19 ; programmes de secours ; efficacité ; Afrique de l’Est

Introduction

On 13 March 2020, East Africa reported its first Covid-19 positive case, an infectious disease caused by a newly discovered coronavirus that has ravaged the world and killed many people. The Covid-19 pandemic has presented several challenges to governments worldwide, including in East Africa. It has disproportionately impacted vulnerable and disadvantaged people and communities, who faced poor living conditions frequently exacerbated by unstable security and conflict environments. Most East African countries embarked on substantial initiatives to assist their citizens in maintaining their health and livelihoods while avoiding economic collapse.

According to the World Bank’s most current poverty and shared prosperity report, the pandemic pushed 100 million people into severe poverty in 2020 alone, raising global poverty to its highest level since 1998 (World Bank 2020a). The impact of Covid-19 is visible in lower- and middle-
income countries, which were already in recession by late 2019 (UNCTAD 2020) and this has had particularly dire consequences for impoverished groups, such as sex workers, many of whom rely on regular income from the informal economic sector to survive (Kimani et al. 2020). The Covid-19 pandemic was predicted to impact on Africa’s economy substantially. It mostly affected casual and low-wage earners, such as domestic workers and leisure and hospitality workers (Devereux 2020).

The low per-capita income in East Africa, along with considerable economic inequality and poverty levels, makes these nations vulnerable and less able to absorb shocks such as Covid-19 (CNBC 2020). According to the World Food Programme (2020), 15.4 million people in East Africa were suffering from acute hunger in 2020, rendering them more vulnerable to the consequences of the Covid-19 epidemic. Furthermore, in 2020 East Africa saw one of the wettest rainfall seasons in forty years, which resulted in devastating floods, the relocation of hundreds of thousands of people, and agricultural (70,000 hectares) and livestock (96,000 animal mortality) losses in the worst-affected areas. The abundant rains encouraged desert locust reproduction, which spread across East Africa and presented a serious threat to the key agricultural seasons. Desert locusts are considered the most damaging migratory pest species in the world due to their ability to breed fast, travel large distances and destroy crops (Cressman 2016).

East African countries were expected to assist their people who were affected by compulsory lockdowns and the impact of these on the local economy. Governments and international humanitarian groups stepped up to assist individuals throughout the epidemic era. Direct cash distributions, short- and medium-term loan forgiveness, payment postponement and tax refunds were common examples of such approaches. The necessity for quick action was cited as a factor that might encourage policy-makers and decision-makers to disregard oversight and accountability procedures. As a result, the approval and execution of emergency assistance packages risked becoming a breeding ground for mismanagement, fraud and corruption. The following section discusses the primary relief packages in each member country and the distribution mechanisms used. To keep the research as precise as possible, the disbursements and distribution programmes mentioned here are solely those directly paid to people.

**Coverage and Efficiency of African Covid-19 Relief Programmes**

According to Kazeem (2021), social and economic relief in Africa reached at least 117 million people during the peak of Covid-19, with South Africans receiving the most monetary relief, estimated at USD 29 billion. He further
maintained that that the struggle was not one of numbers but of distribution infrastructure and efficiency (Kazeem 2021).

Botswana’s relief package, which included food networks, salary subsidies for enterprises and price freezes on essential items, had the greatest impact of the countries on the continent, reaching 51.1 per cent of its population, as shown in Table 1. In terms of population coverage and number of persons reached, all East African countries fell short. Table 2 shows that Egypt, Ethiopia and South Africa were the only African countries that reached more than 20 million people. On the other hand, Rwanda reached only 3 million individuals (23 % of its population).

It is obvious that East African countries’ Covid-19 relief programmes were impractical. Aside from the coverage limitation, which was most likely due to a lack of funds to support large-scale programmes, the aid packages failed to reach the most vulnerable or needy. Many governments had difficulties targeting these groups; additional difficulties arose in screening the families and persons adversely impacted by the pandemic and lockdowns. In Uganda, for example, the government stated that it would check the mobile money transaction history data of people seeking assistance, to assess whether they were truly in need, as well as employ local elected officials on the ground and earlier social protection registers (Abet 2021). The Uganda Bureau of Statistics later declared that the data used to identify beneficiaries was not its own (Damali 2021), sparking a heated social and traditional media controversy. All East African countries experienced the challenge of determining the needy (Development Initiatives 2021).

Table 1: Population covered by relief packages on the African continent

<table>
<thead>
<tr>
<th>Country</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Botswana</td>
<td>51.1%</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>50.0%</td>
</tr>
<tr>
<td>Eritrea</td>
<td>49.0%</td>
</tr>
<tr>
<td>Mali</td>
<td>45.0%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>41.0%</td>
</tr>
<tr>
<td>Tunisia</td>
<td>41.0%</td>
</tr>
<tr>
<td>The Gambia</td>
<td>40.8%</td>
</tr>
<tr>
<td>Namibia</td>
<td>40.3%</td>
</tr>
<tr>
<td>South Africa</td>
<td>27%</td>
</tr>
<tr>
<td>Egypt</td>
<td>32.4%</td>
</tr>
</tbody>
</table>

Source: Quartz (2020) Data: Development Reimagined
Motivation and Research Problem

Motivation

A cross-sectional examination of East African countries’ Covid-19 relief programmes revealed inadequacy, incorrect mapping and beneficiary selection. Inadequate data for identifying the neediest impeded the distribution of relief funds and resources. The motivation of the research is grounded on the above in the quest to understand what can be done to improve the efficiency of the rollout of government social welfare programmes, such as those implemented for Covid-19 relief by East African member states. This will not only enhance the efficiency of future welfare programmes but will also increase their return on investment.

Table 2: Number of people reached by relief packages by country in Africa

<table>
<thead>
<tr>
<th>Country</th>
<th>Number of People Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethiopia</td>
<td>33 million</td>
</tr>
<tr>
<td>Egypt</td>
<td>30 million</td>
</tr>
<tr>
<td>South Africa</td>
<td>22 million</td>
</tr>
<tr>
<td>Nigeria</td>
<td>19 million</td>
</tr>
<tr>
<td>Mali</td>
<td>9 million</td>
</tr>
<tr>
<td>Democratic Republic of Congo</td>
<td>9 million</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>8 million</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>6 million</td>
</tr>
<tr>
<td>Tunisia</td>
<td>5 million</td>
</tr>
<tr>
<td>Rwanda</td>
<td>3 million</td>
</tr>
</tbody>
</table>

Source: Quartz (2020)         Data: Development Reimagined

Statement of the Research Problem

This article aims to evaluate the performance of Covid-19 alleviation programmes established by East African member states and to make recommendations to increase the efficiency of similar initiatives in the future. This study will provide answers to unanswered issues concerning the effectiveness of government social assistance programmes. These are some of the questions:

- What were the main flaws in the East African member nations’ Covid-19 social aid programmes?
- How can such social aid initiatives be made more efficient to target the most relevant beneficiaries?
Methods and Results

The research employs a data triangulation research methodology, in which data on Covid-19 social relief programmes implemented in Africa, particularly East Africa, was synthesised. The research also analysed country-specific programme assessment reports from various parties, including non-governmental organisations, the World Bank and other industry players. Finally, the research compares the mechanisms mentioned above with the most efficient social welfare programmes adopted by the United States during Covid-19. After that, data triangulation is utilised to derive lessons and policy recommendations.

The following section provides a synopsis of Covid-19 social relief programmes and disbursements in all East African member nations and their distribution mechanisms.

Uganda

Prime-Minister’s Office Covid-19 Relief Funds (Nabbanja)

The Prime Minister’s office began distributing Covid-19 relief money to vulnerable Ugandans on 18 July 2021, when the country was placed under lockdown in an effort to halt the virus’s spread. Funds were immediately sent to beneficiaries using mobile money services, and the government planned to reach 501,107 families in the Kampala metropolitan districts, all cities and towns. Beneficiaries were individuals who earned a living on a daily basis but were now remaining at home owing to the lockdown. Each household was slated to get a net of UGX 100,000 (about USD 30). As a result, as shown in Table 3, twelve groups from the Kampala Metropolitan Area, cities and municipalities benefited from the cash transfers.

The mechanism was received with mixed reactions from the public and set in motion a debate hinged on the rationale for the coverage of the programme, the adequacy of the amount, the process of identifying beneficiaries and the appropriateness of the payment platforms.
Table 3: Groups Benefitting from the Prime Minister’s Office Covid-19 Relief Funds, Uganda

<table>
<thead>
<tr>
<th>NUMBER</th>
<th>CATEGORY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Bus / tax drivers, conductors</td>
</tr>
<tr>
<td>2</td>
<td>Baggage carriers, wheelbarrow pushers, touts, traffic guides and loaders</td>
</tr>
<tr>
<td></td>
<td>in the taxi, bus parks and stages and other commercial centres, such as</td>
</tr>
<tr>
<td></td>
<td>Kikuubo.</td>
</tr>
<tr>
<td>3</td>
<td>Barmen, DJs, barmaids and bouncers.</td>
</tr>
<tr>
<td>4</td>
<td>Bar, gym and restaurant workers.</td>
</tr>
<tr>
<td>5</td>
<td>Food vendors in buses, taxi parks and arcades.</td>
</tr>
<tr>
<td>6</td>
<td>Artists (musicians, comedians, etc.)</td>
</tr>
<tr>
<td>7</td>
<td>Boda-boda drivers, special hire drivers and Uber drivers.</td>
</tr>
<tr>
<td>8</td>
<td>Salons, massage parlour workers.</td>
</tr>
<tr>
<td>9</td>
<td>Teachers and support staff in private schools and teachers in govern-</td>
</tr>
<tr>
<td></td>
<td>ment schools not on the government payroll.</td>
</tr>
<tr>
<td>10</td>
<td>Car washers</td>
</tr>
<tr>
<td>11</td>
<td>Slum dwellers / ghetto residents.</td>
</tr>
<tr>
<td>12</td>
<td>Street and food vendors, shoe shineers and cobblers.</td>
</tr>
</tbody>
</table>


**Uganda Covid-19 food relief packages**

Following Uganda’s lockdown presidential directive as a result of the Covid-19 pandemic, a humanitarian food delivery effort was launched on 25 March 2020 (Shi 2020). Uganda’s Coronavirus Response Team was at the forefront of establishing the following measures: food was to be delivered largely to the urban poor who were most impacted by the countrywide lockdown; as a matter of urgency, priority was given to urban groups in the central area (the capital, Kampala, and nearby Wakiso district); beneficiaries were small business operators who lived hand to mouth, the elderly, the unwell, and lactating mothers; rations included 6kg of rice (it was slated that, in addition, lactating mothers and the sick were to receive 2kg of powdered milk and 2kg of sugar). Other districts in Uganda were intended to be reached depending on the resources mobilised throughout the response campaign. Security forces were tasked with carrying out the household-based food distribution exercise in order to halt the spread of the illness. It was designed to be house-to-house, door-to-door, in order to reduce crowds and preserve social distancing (Nathan and Benon 2020).
Kenya

Kenya Covid-19 stimulus funds

On 23 May 2020, President Uhuru Kenyatta addressed the nation and launched the Kenya Covid-19 stimulus fund of KES 250 million to needy households. A cash transfer initiative, it aimed to reach over a million individuals who were to get KES 2,000, or USD 19, every month, using mobile money (M-Pesa). During the pandemic, the Kenyan national government contributed an extra KES 10 billion to this initiative to assist vulnerable populations, such as the elderly and orphans. Unlike other East African nations, Kenya distributed several departmental, regional and donor-funded Covid-19 relief packages to specific categories of individuals or specific member recipients, but they are not mentioned in this study.

However, Human Rights Watch (HRW) (Amon and Wurth 2020) noted that although persons who registered and were enrolled in the programme were scheduled to get thirty-five weekly transfers of KES 1,000 (about USD 9) each, most received significantly fewer, just two or four payments in total. The report also discovered significant gaps in transparency in the criteria used to choose the people to receive the payments. According to a community mobiliser who went door to door in one informal settlement to identify specific disadvantaged persons as possible beneficiaries, very few of them ever received any money. On the other hand, relatives, friends and allies of government leaders apparently found it simpler to enlist.

HRW conducted surveys in Nairobi’s informal settlements, which contained an estimated 600,000 families. They found that, despite the fact that the initiative was intended to be statewide, the government stated that in the initial phase cash transfers helped just 29,000 families in Nairobi settlements, or less than 5 per cent. In general, no explanation was provided as to why thousands of families who met the specified criteria were excluded.

Rwanda

Rwanda Covid-19 relief food distribution programme

On 28 March 2020, the Rwandan government began distributing the first batch of relief materials to about 20,000 families in Kigali as part of measures to support Rwandans during the Covid-19 lockdown. The distribution began barely fourteen days after the country’s first incidence of Covid-19. Local leaders oversaw the distribution at cell and village levels; vulnerable homes who were living hand to mouth received rice, spaghetti, maize flour, beans, soap, cooking oil, porridge flour and other commodities to help
them. The recipients were chosen by local committees at the sector, cell and village local government levels and the distribution was well organised. ‘We will deliver the things door-to-door while observing the procedures put in place to limit the spread of the coronavirus’, Prof. Anastase Shyaka, Minister of Local Government, was quoted as saying.

Unlike in many other East African nations, Rwanda’s Covid-19 relief food distribution programme got little to no criticism, indicating that it was somewhat more efficient than most other member states’ programmes.

**Tanzania**

Health professionals in the nation were worried by President John Magufuli’s denial of the pandemic and his claim that prayer might eradicate the coronavirus. However, Magafuli died in March 2020. Samia Suluhu Hassan, his deputy, took over as president and subsequently modified Tanzania’s approach to Covid-19.

By November 2021, Tanzania had no recorded statewide Covid-19 relief programme. Nonetheless, the country had implemented macro and micro economic steps through its central bank to offset the pandemic’s negative impact.

**Burundi**

Despite being one of the poorest countries in the world, according to the World Food Programme (WFP) (Slater *et al.* 2021), with over 70 per cent of the population living in poverty, Burundi has not recorded or documented any statewide Covid-19 assistance efforts. Food insecurity is at an all-time high, with over 52 per cent of children under the age of five suffering from malnutrition (Nchanji 2021). However, the World Food Programme (WFP) has been active in giving relief to displaced families, women and children and refugees.

**South Sudan**

South Sudan relies significantly on imports of essential food items from neighbouring nations, and its economy’s vulnerability to external shocks meant that Covid-19 was more than a public health emergency. South Sudan, like Burundi and Tanzania, lacked nationally traceable and reported Covid-19 assistance efforts. On the other hand, the country received substantial financial and physical assistance from international organisations such as the United Nations Food and Agricultural Organization (FAO) (Mukhtar 2021), which donated seed crop and vegetable seeds, agricultural equipment and solar irrigation water pumps to help promote food production (Elhadi *et al.* 2020).
Analysis of Efficient Covid-19 Social Relief Programmes

The United States has been lauded not only for being one of the first countries to announce that it would be implementing Covid-19 social assistance benefits, known as stimulus checks, but also for having the most efficient programme. Without a doubt, East African nations and Africa as a whole can learn a lot from the case of the United States.

From April 2020 to December 2021, the United States federal government issued direct Covid-19 stimulus payments totalling USD 931 billion to over 165 million eligible Americans. Each qualified individual received three payments: USD 1,200 in April 2020, USD 600 in December 2020 / January 2021 and USD 1,400 in March 2021. Beneficiaries needed to satisfy the following conditions to be eligible:

1. Citizens earning less than USD 75,000 a year.
2. Married couples with a combined income of less than USD 150,000
3. Head of a household with an annual adjusted income (AGI) of less than USD 112,500.
4. Above these income limits, the payment amount decreased by 5 per cent for every additional USD 100 of income up to USD 99,000 for a single adult, USD 136,500 for a head of household and USD 198,000 for a married couple.
5. Citizens with zero income.
6. No age limits. However, a beneficiary could not be someone else’s dependent. Children had to be under 17 to get the additional payment.
7. At least one tax filer had to have a valid Social Security number (SSN). If married jointly and one spouse had an SSN and the other an Individual Taxpayer Identification Number (ITIN), the spouse with an SSN and any children with SSNs or an Adoption Taxpayer Identification Number (ATIN) could get the payment.
8. Beneficiaries had to be a US citizen, permanent resident or qualifying resident alien. (Tax Outreach 2022)

The above requirements necessitated the US government to have the following up-to-date data on all citizens:

- All citizens’ monthly or annual income data
- Data on marriages and combined income of married couples
- Data of heads of all households
- Age data on all citizens
- Tax-payer identification numbers, social security numbers or adoption taxpayer identification numbers.
- Distinctive data on citizens, permanent residents and resident aliens.
The United States successfully implemented various rounds of rollouts and payments of its Covid-19 stimulus checks on time. According to the US Internal Revenue Service (IRS), the few reported delays were caused by citizens who did not have an Internet connection, families with mixed immigrant status, those facing homelessness and those who had never filed a tax return (GAO 2022).

According to Scott (2020), the success of the US stimulus payments was largely attributed to the country’s stringent data collection and centralisation systems. He argues that, with ready data, it is very easy to determine who intended beneficiaries should be and where the thresholds should be placed based on available budgets. It is apparent that there are lessons to be drawn from the situation of the United States, with the key lesson being individual citizens’ data collection and the centralisation of this data.

**Discussion and Policy Recommendations**

According to the data, several East African countries have insufficient citizen data collection systems, which do not hold multilayered data on all vulnerable people. It is also obvious, particularly in the cases of Kenya and Rwanda, that the government ecosystem contained numerous data silos, none of which could deliver meaningful and actionable data sets. Decentralising data collection is necessary and using community data systems and integrating databases will be beneficial. Many East African countries still have minimal national identification. Most member states required a national identity number to validate beneficiaries, although many people did not have one or a national ID. East African member states must mobilise residents to register for ID and governments must simplify the process by making it mandatory. However, this will only be beneficial if ID numbers collect timely multidimensional data, such as income, marital and family status and other factors. In terms of data collection, it is also necessary to leverage the role of local government authorities in instituting a more routine and systematic technique of data collection at lower levels to enrich the national data infrastructure.

**Conclusion**

According to the preceding discourse, it is obvious that, in addition to the insufficient availability of resources, government agencies require careful consideration and participation of all key government agencies in comparable government relief initiatives. This is especially true in developing countries where national databases are not kept up to date. Only with the assistance
of appropriate local governments can comprehensive screening, checks and balances, auditing and bookkeeping be performed. Rwanda’s success story serves as a model for many developing countries.

There are various restrictions to targeted monetary transfers. Firstly, this strategy may exclude persons who have experienced unexpected income loss as a result of a crisis. Secondly, developing countries, such as those in East Africa, lack data on the incomes of the majority of their people, particularly those in the informal sector, making the use of proxy measures prone to inclusion and exclusion errors (giving the transfer to those who are not poor but have a strong incentive to lie), and increasing the likelihood of failure to deliver the transfer to poor individuals who slip through due to the inadequacies of the eligibility criteria. Thirdly, relying on old data from national statistics institutes to decide who needs monetary support during the epidemic does not represent current ground realities. Despite these limitations, cash transfers continue to be superior solutions for many developing countries. Transfers reach the needy more directly than food distribution and are less prone to corruption since money flows through fewer middlemen, reducing the number of authorities with unrestricted rights and private interests. Furthermore, cash transfers will be particularly efficient only in nations that already have institutions and techniques in place to transfer cash to the needy, such as extensive usage of mobile money systems, like M-Pesa.

Another lesson for developing countries is the need for good data collection and administration systems. The lack of accurate data on people’s incomes to designate and assist legitimate recipients may have significantly hampered attempts in countries like South Sudan and Tanzania, which did not have social relief programmes. A comprehensive database of people’s earnings, expenditures, living standards and dependence ratios can assist in the effective design of comparable government relief programmes. Lessons ought to be drawn from the case of the United States.

Governments should establish clear transparency norms and execute strict checks and balances. This may be accomplished by implementing clear, transparent and efficient targeting methods; selecting trustworthy and context-specific distribution systems; assuring transparency and involvement of beneficiaries; and putting in place rigorous monitoring and evaluation systems. In order to minimise and mitigate the fraud and corruption risks associated with public health crisis management and economic rescue measures, suitable legal and institutional frameworks must be established and implemented. Governments can ensure that their responses to current and potential future health emergencies effectively sustain public health,
national economies and the wellbeing of affected communities by doing so in a reasonable timeframe, allowing for the involvement of all relevant stakeholders, including anti-corruption bodies, civil society and the private sector and through strong monitoring and evaluation processes (UNODC 2021). The following is an overview of policy recommendations to East African developing countries.

- Governments should strengthen national identification and provide everyone with a national identification number.
- Governments should integrate all fragmented information and data systems into a social register capable of capturing multidimensional data on residents, such as income levels, standard of living, and so on.
- Governments should leverage on local governments’ involvement in maintaining timely management information systems at the local level.

Finally, because this research primarily looked at government-implemented initiatives, it is likely that some programmes were overlooked or disregarded unintentionally. It is also obvious that several donors and global corporations stepped up to help deliver aid to many individuals throughout the outbreak. The study is not intended to be definitive, as new data and studies on the effects of Covid-19 are still being released.

References


Kenya National Bureau of Statistics (KNBS), 2020, Quarterly GDP Reports. https://www.knbs.or.ke/?page_id=1591


