

International Labour Organization

World Social Protection Report 2024–26

Universal social protection for climate action and a just transition



Universal social protection for climate action and a just transition © International Labour Organization 2024 First published 2024



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Greenland: Arnatassiaq and Niels Molgard push an iceberg with their boat so that it does not drag down their fishing nets.

Ever more icebergs are being calved by glaciers in Greenland due to climate change. Icebergs float adrift and take fishing nets with them, which constitute a risk to the safety and livelihoods of fishers. In addition to the financial burden, this leads to environmental damage on the seabed.

Globally, the accelerated melting of the Greenland ice sheet represents a potential tipping point, with substantial and irreversible biophysical impacts. As snowpacks melt into ice, they sink to lower elevations and reflect less sunlight, absorbing more solar radiation and further accelerating ocean warming and ice sheet melting. Implications include the rise of global sea levels, ocean acidification and deoxygenation, disruption of ocean ecosystems, reduced efficiency of natural carbon sinks, and disruption of ocean circulation – in particular the Gulf Stream. These consequences of climate change affect weather patterns, for example, in the form of more frequent summer heatwaves.

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Universal social protection has a pivotal role to play in supporting climate action and supporting a just transition. The triple planetary crisis is unfolding right before our eyes with climate change, pollution and biodiversity loss, providing almost daily reminders in the form of different catastrophes and by surpassing climate records. We know all too well that climate ambition needs to be increased; yet, many decision-makers shy away from bolder action, fearing the economic, social and political repercussions of the necessary mitigation and adaptation measures.

Universal social protection can help solve this conundrum by providing a systematic policy response that can simultaneously address both life-cycle risks and climate-related risks, reduce vulnerabilities and enhance the resilience of people, societies and economies. In doing so, it can enable and facilitate the necessary adaptation and mitigation measures, and contribute to addressing climate-related loss and damage. However, this is only possible if social protection systems guarantee universal coverage, provide comprehensive and adequate benefits, and are equitably and sustainably financed.

Despite the significant progress in extending social protection coverage since 2015, many countries are still not well prepared to face the challenges ahead. Commitments to realize the universal right to social security for all remain elusive, with 3.8 billion people still not protected at all, and many more not adequately protected. Ensuring people have access to social protection to cope with the consequences of climate shocks, engage in a greener economy as well as deal with ordinary lifecycle risks, should be paramount for policymakers.

The 2024–26 edition of the *World Social Protection Report* focuses on universal social protection for climate action and a just transition. Providing a global update on the status of social protection worldwide, for the first time with trend data, the report offers a broad range of global, regional and country statistics on coverage, on the benefits provided and on related public expenditure. It identifies the protection and financing gaps that must be filled and sets forth actionable policy recommendations to achieve universal social protection for all by 2030. Crucially, the report illustrates how social protection can support climate policies and expedite a just transition, enabling countries to build resilient systems that protect their populations from both life-cycle risks and climate-related challenges. To do this, countries must build and strengthen their social protection systems to protect people from ordinary life-cycle risks, the vagaries of an increasingly volatile climate, and the socially adverse impacts of some climate policies.

I urge policymakers to embrace the insights of this report. To enable climate ambition and set in motion a just transition, we must invest in strengthening national social protection systems. The opportunity for a greener future is within policymakers' reach. Let us seize this chance and work together towards a brighter, more sustainable world.

Gilbert Houngbo ILO Director-General



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ASPIRE	World Bank Atlas of Social Protection Indicators of Resilience and Equity
EAP	economically active persons (labour force)
Eurostat	Statistical Office of the European Commission
GDP	gross domestic product
IMF	International Monetary Fund
ISSA	International Social Security Association
LIS	Luxembourg Income Study
OECD	Organisation for Economic Co-operation and Development
SDGs	Sustainable Development Goals
UN	United Nations
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNWRA	United Nations Relief and Works Agency for Palestine Refugees in the Near East
WHO	World Health Organization

This report is dedicated to the life of Michael Cichon who passed away in 2022. Michael was a social protection visionary, a dear colleague and legendary director of the ILO's Social Security Department. He is sorely missed.

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executive sumary

For the first time, more than half of the world's population are covered by some form of social protection. While this is welcome progress, the unvarnished reality is that 3.8 billion people are still entirely unprotected. The pressing need to make the human right to social security a reality for all is rendered even more urgent given the role social protection must play in addressing an even more substantial challenge: that is, the need for climate action and a just transition to address the triple planetary crisis – climate change, pollution and biodiversity loss - that imperils our world. With major tipping points on the verge of being crossed due to warming right now, the climate crisis represents the singular gravest threat to social justice.

A rapid move to a just transition is therefore urgently required as a response. Universal social protection systems have an important role to play to help realize climate ambitions and facilitate a just transition. With an especially sharp focus on the climate crisis and the exigency of a just transition, this report provides a global overview of progress made around the world since 2015 in extending social protection and building rights-based social protection systems. In doing so, it makes an essential contribution to the monitoring framework of the 2030 Agenda.¹ And it calls on policymakers, social partners and other stakeholders to accelerate their efforts to simultaneously close protection gaps and realize climate ambitions.

Five messages emerge from this report.

Social protection makes an important contribution to both climate change adaptation and mitigation. Social protection is fundamental for climate change adaptation² as it tackles the root causes of vulnerability by preventing poverty and social exclusion and reducing inequality. It enhances people's capacity to cope with climate-related shocks ex ante by providing an income floor and access to healthcare. It also contributes to raising adaptive capacities, including those of future generations through its positive impacts on human development, productive investment, and livelihood diversification. Moreover, an inclusive and efficient loss and damage response at scale can leverage social protection systems, particularly when high levels of coverage and preparedness exist. Social protection systems are also key for compensating and cushioning people and enterprises from the potential adverse impacts of *mitigation*³ and other environmental policies. When combined with active labour market policies, they can help people transition to greener jobs and more sustainable economic practices. Social protection can also directly support mitigation efforts. The greening of public pension funds, the progressive conversion of fossil fuel subsidies into social protection benefits, and the provision of income support to disincentivize harmful activity to protect and restore crucial natural carbon sinks, are some of the options to support emission reductions.

- Social protection is therefore an enabler of climate action and a catalyst for a just transition and greater social justice. Social protection systems, as part of an integrated policy response, meet the imperatives of mitigation and adaptation in an equitable manner. Social protection helps to protect people's incomes, health and jobs, as well as enterprises, from climate shocks and the adverse impacts of climate policies. Social protection encourages productive risk-taking and forward planning and thus can ensure that everyone - including the most vulnerable - can gain from climate change adaptation measures. It can enable job restructuring, protect living standards, maintain social cohesion, reduce vulnerability, and contribute to building fairer, more inclusive societies, and sustainable and productive economies. However, social protection cannot do this on its own. It needs to work in tandem with other policies to enable effective mitigation and adaptation policies, which are so utterly vital for a liveable planet.
- Decisive policy action is required to strengthen social protection systems and adapt them to new realities, especially in the countries and territories most vulnerable to climate change, where coverage is the lowest. Social protection

¹ Estimates are not strictly comparable to the previous *World Social Protection Reports* due to methodological enhancements, extended data availability and country revisions.

² Climate change adaptation refers to the process of adjustment to actual or expected climate change and its effects in order to moderate harm or exploit beneficial opportunities.

³ Climate change mitigation refers to actions that reduce the rate of climate change (for example, keeping fossil fuels in the ground) or enhancing and protecting the sinks of greenhouse gases that reduce their presence in the atmosphere (for example, forests, soils and oceans).

increases the resilience of people, economies and societies by providing a systematic policy response to mutually reinforcing life-cycle risks and climate-related risks (which look poised to become increasingly inseparable and indistinct with each decimal point of global warming). In this context, policymakers will have to achieve a double objective: implementing climate policies to support mitigation and adaptation efforts to contain the climate crisis, while at the same time strengthening social protection to address both ordinary life-cycle risks and climate risks. In the context of an evolving risk landscape, policymakers must ensure their social protection systems can deal with both types of risk.

However, the capacity of social protection systems to contribute to a just transition is held back by persistent gaps in social protection coverage, adequacy and financing. These hinder the achievement of the Sustainable Development Goals by 2030. Investing in reinforcing social protection systems is indispensable for a successful just transition. The costs of inaction are enormous, and it would be irrational and imprudent not to invest. The case for strengthening social protection systems is therefore as compelling as it is urgent. Without investment in universal protection systems, the climate crisis will exacerbate existing vulnerabilities, poverty and inequalities, when precisely the opposite is needed. Moreover, for ambitious mitigation and environmental policies to be feasible, social protection will be needed to garner public support. Human rights instruments and international social security standards provide essential guidance for building universal social protection systems capable of responding to these challenges and realizing the human right to social security for all.

Social justice must inform climate action and a just transition, with human rights at the heart of the process. Social protection can help ensure no one is left behind. It can contribute to rectifying long-standing global and domestic inequalities and inequities rendered more pronounced by the climate crisis. The climate crisis can only be overcome through common effort but with differentiated responsibility proportional to capacity. It needs to be recognized that special remedial responsibility lies with those primarily responsible for the crisis. This has major implications for financing social protection at the domestic level, and for the role of international financial support for countries with insufficient economic and fiscal capacities that have contributed least to the crisis but are bearing its brunt. This constitutes a key element of social justice.

Progress, yes, but billions are left languishing and unprepared for the life-cycle and climate shocks ahead

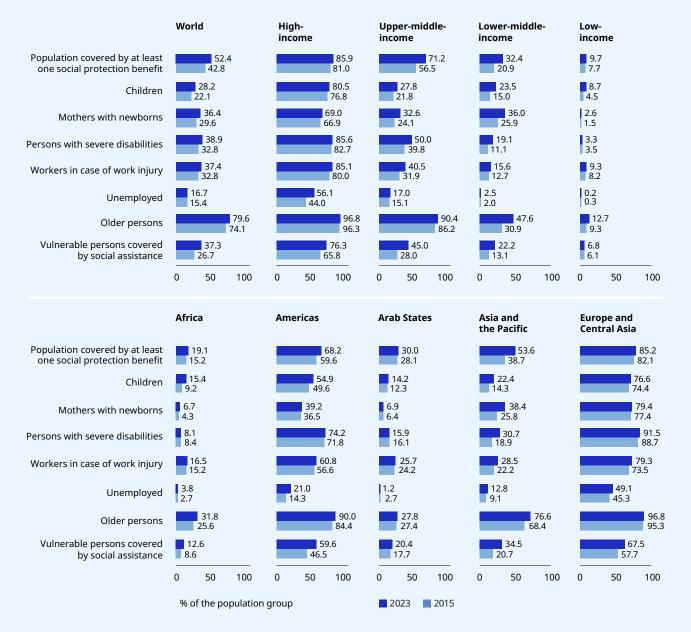
Since the last edition of the *World Social Protection Report*, social protection coverage has surpassed an important milestone globally. For the first time, more than half of the world's population (52.4 per cent) are covered by at least one social protection benefit (SDG indicator 1.3.1), increasing from 42.8 per cent in 2015 (see figure ES.1). This is welcome progress.

If progress were to continue at this rate at the global level, it would take another 49 years – until 2073 – for everyone to be covered by at least one social protection benefit. This pace to close protection gaps is too slow.

Moreover, the world is currently on two very different and divergent social protection trajectories: high-income countries (85.9 per cent) are edging closer to enjoying universal coverage; and upper-middle-income countries (71.2 per cent) and lower-middle-income countries (32.4 per cent) are making large strides in closing protection gaps. At the same time, low-income countries' coverage rates (9.7 per cent) have hardly increased since 2015, which are unacceptably low.

Gender gaps in global legal and effective coverage remain substantial. Women's effective coverage, for at least one social protection benefit, lags behind men's (50.1 and 54.6 per cent, respectively). For comprehensive legal coverage, a similar inequality is observed. Only 33.8 per cent of the working-age population are legally covered by comprehensive social security systems. However, when this figure is disaggregated, it reveals a pronounced gender gap, with a coverage rate





Notes: See Annex 2 for a methodological explanation. Global and regional and income-level aggregates are weighted by population. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024; World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

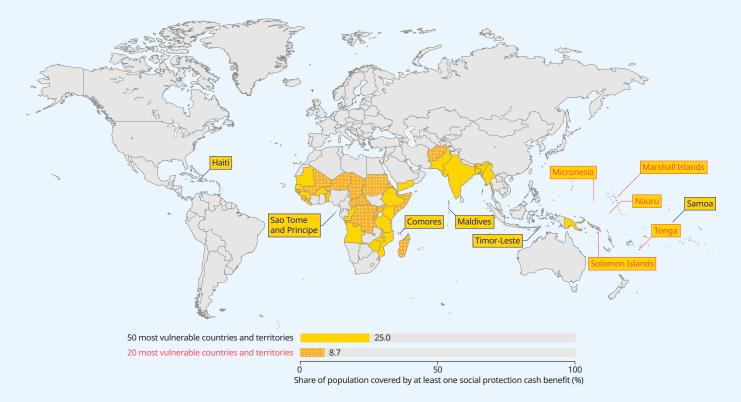
of 39.3 per cent for men and 28.2 per cent for women – an 11.1 percentage point difference. Social protection systems must become more gender-responsive as part of a larger set of policies to address inequalities in labour markets, employment and society.

For people not covered through social insurance, it is important to note that, in its absence, social assistance or other non-contributory cash benefits play an essential role in ensuring at least a basic level of social security. Globally, coverage has increased from 26.7 per cent to 37.3 per cent of vulnerable persons since 2015. This increase is explained, in part, by the temporary policy response to the COVID-19 pandemic. However, higher coverage may also stem from increased needs due to increasing poverty, vulnerability and decent work deficits. Irrespective of the explanation, greater efforts are needed to facilitate transitions from social assistance into decent employment (including self-employment) covered by social insurance, which provides higher levels of protection and relieves pressure on government budgets.

A daunting prospect: Countries most vulnerable to the climate crisis are woefully ill-prepared

Populations in countries at the frontline of the climate crisis and most susceptible to climate hazards remain woefully unprepared. In the 20 countries most vulnerable to the climate crisis, just a mere 8.7 per cent of the population is covered by some form of social protection, leaving 364 million people wholly unprotected (figure ES.2). And some 25 per cent of the

Figure ES.2. The 20 and 50 countries most vulnerable to climate change and their weighted average effective coverage by at least one social protection cash benefit, 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by population. Boundaries shown do not imply endorsement or acceptance by the ILO. <u>See full disclaimer</u>.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources and <u>Notre Dame Global Adaptation Initiative Country</u> <u>Index</u>. population in the 50 most climate-vulnerable countries are effectively covered. For the latter, this translates to 2.1 billion people currently facing the ravages of climate breakdown with no protection, relying on their own wits and kin to cope.

This is no way to proceed in the context of a more volatile climate future. And the abject plight of these people is made even bleaker by the large financing gap that impedes having at least a social protection floor. The annual financing gap in the 20 most vulnerable countries equates to US\$200.1 billion (equivalent to 69.1 per cent of their GDP) and, in the 50 most vulnerable, it is US\$644 billion (equivalent to 10.5 per cent of their GDP). Filling these financing gaps is not insurmountable if domestic capacities are built up, but this will require concerted international support, especially in the most vulnerable countries.

Protection gaps are largely associated with significant underinvestment in social protection

Financing gaps in social protection are still large. To guarantee at least a basic level of social security through a social protection floor, low- and middle-income countries require an additional US\$1.4 trillion or 3.3 per cent of the aggregate GDP (2024) of these countries per annum, composed by 2.0 per cent of GDP or US\$833.4 billion for essential health care and 1.3 per cent of GDP or US\$552.3 billion for five social protection cash benefits. More specifically, low-income countries would need to invest an additional US\$308.5 billion per year, equivalent to 52.3 per cent of their GDP, which is unfeasible in the short term without international support.

Ambitions to close gaps in the coverage, comprehensiveness and adequacy of social protection systems are stymied by significant underinvestment in social protection. On average, countries spend 12.9 per cent of their GDP on social protection (excluding health), but this figure masks staggering variations between countries. High-income countries spend 16.2 per cent; upper-middle-income countries, 8.5 per cent; lower-middle-income countries, only 4.2 per cent; and low-income countries, a paltry 0.8 per cent. Increasing the adequacy of social protection is paramount too. Persistent adequacy gaps inhibit the potential of social protection to prevent and reduce poverty, and enable a dignified life. Ensuring adequate benefits across people's lives is key to guaranteeing a social protection floor and striving towards higher benefit levels. The climate crisis will most likely lead to increased needs, including due to higher prices, which will result in a commensurable increase in public expectations for adequate benefits.

For social protection systems to fulfil their potential in addressing life-cycle risks and responding to climate change, they must be further reinforced. Additional efforts are therefore needed to ensure universal, comprehensive and adequate protection, while ensuring that social protection systems are equitably and sustainably financed. The cost of inaction on investing in social protection is enormous, comprising lost productivity and prosperity, heightened social cohesion risks, squandered human capabilities, unnecessary pain, morbidity and early death and many more socio-economic negativities.

Social protection continues to be elusive for 1.8 billion children

Highlights

Social protection remains elusive for the vast majority of children. For children aged 0 to 18 globally, 23.9 per cent receive a family or child benefit, meaning 1.8 billion children are not covered. For children aged 0 to 15, 28.2 per cent of children are covered, up by 6.1 percentage points since 2015. This equates to 1.4 billion children missing out.

Fewer than one in ten (7.6 per cent) children aged 0 to 18 in low-income countries receive a child or family cash benefit, leaving millions vulnerable to missed education, poor nutrition, poverty and inequality, and exposing them to long-lasting impacts. Children, especially those in poverty, are bearing the brunt of the climate crisis.

The climate crisis has been described as structural violence against children, which compromises their well-being and prospects. This underscores the importance of making social protection systems more inclusive and resilient so that they continue to achieve their core objectives and support children's additional needs due to climate change.

Public expenditure on social protection for children needs to increase. On average, 0.7 per cent of GDP is spent on child benefits globally. Again, large regional disparities exist; the proportion ranging from 0.2 per cent in lowincome countries to 1.0 per cent in high-income countries.

Pronounced protection gaps remain for persons of working age

Highlights

- Global coverage trends between 2015 and 2023 (including SDG indicator 1.3.1) show some, yet still insufficient, progress for persons of working age, leaving many millions unprotected or inadequately protected. These protection gaps will be further aggravated by climate hazards and climate mitigation and adaptation policies.
- Maternity protection: 36.4 per cent of women with newborns worldwide receive a cash maternity benefit, up by 6.8 percentage points. This equates to 85 million women with newborns not covered. In addition, inequalities in access to reproductive, maternal, newborn and child health persist and exposure to climate change hazards has consequences for maternal and neonatal morbidity and mortality.
- Sickness benefits (legal coverage): 56.1 per cent of the labour force in the world, representing 34.4 per cent of the working-age population, is legally entitled to sickness benefits. This means 4.1 billion working-age persons are not legally protected. Even when covered, limited adequacy, duration and eligibility criteria may create protection gaps. Climate change creates new challenges for productivity and sickness protection owing to the spread of existing and new diseases.
- Employment injury protection: 37.4 per cent of workers enjoy employment injury protection

for work-related injuries and occupational disease, up by 4.6 percentage points. This leaves 2.3 billion workers totally uncovered. Adverse labour market structures and weak enforcement of schemes, especially in lowerincome countries, perpetuate these gaps. Climate hazards like extreme heat will increase employment injury risks, and occupational safety and health needs.

- Disability benefits: 38.9 per cent of people with severe disabilities receive a disability benefit, up by 6.1 percentage points. This results in 146 million persons with severe disability not covered. The additional services which persons with disabilities need are often insufficient to meet their diverse needs. Climate change further increases the vulnerability of persons with disabilities.
- Unemployment protection: 16.7 per cent of unemployed people receive unemployment cash benefits, up by 1.3 percentage points. This translates to 157 million unemployed persons not being covered. Youth, self-employed workers, workers on digital platforms, agricultural and migrant workers often lack unemployment protection. And many existing schemes are not prepared to tackle climate-related challenges nor facilitate the decarbonization of carbon-intensive sectors.
- Expenditure estimates show that, worldwide, 4.8 per cent of GDP is allocated to non-health public social protection expenditure for people of working age. To a large extent, limited expenditure explains protection gaps for working-age persons.

Older persons still face coverage and adequacy challenges

Highlights

- Pensions are the most prevalent form of social protection globally. Worldwide, 79.6 per cent of people above retirement age receive a pension, up by 5.5 percentage points since 2015. Nonetheless, more than 165 million individuals above the statutory retirement age do not receive a pension.
- Ensuring adequate protection in old age remains a challenge, particularly for women, workers with low earnings, those engaged in precarious employment, workers on digital platforms, and migrant workers. These challenges are likely to be exacerbated by climate change, in the form of involuntary migration, fragmented careers or general climate-induced economic pressure.
- In many countries, especially those with widespread informal employment, the expansion of coverage of contributory pensions has not been fast enough to

guarantee adequate income security in old age. The introduction of tax-financed pensions provides an important source of income for older persons with insufficient entitlements to contributory pensions. Yet, in some countries, benefit levels are insufficient to guarantee a social protection floor for older persons.

- Globally, public expenditure on pensions and other non-health benefits for older people averages 7.6 per cent of GDP. However, substantial regional variations still exist, with expenditure levels ranging from 10.5 per cent of GDP in Europe and Central Asia to 1.7 per cent in Africa.
- The climate crisis threatens the financial sustainability and adequacy of pension schemes. Consequently, pension schemes must adapt to contend with climate-related risks to ensure long-term sustainability and protect the quality of life of beneficiaries. Pension funds can also help combat the climate crisis through strategic investment in sustainable and low-carbon assets.

Social health protection: an essential contribution to universal health coverage

Highlights

- The right to social health protection is not yet a universal reality. While more than four fifths (83.7 per cent) of the global population is covered by law, only 60.1 per cent of the global population are effectively protected by a health protection scheme. This means 3.3 billion people do not enjoy protection. Coverage has stalled since 2020, showing important implementation gaps. In addition to extending health protection, investing in the availability of quality healthcare services is crucial.
- Barriers to healthcare access remain in the form of out-of-pocket health expenditure incurred by households, physical distance, limitations in the range, quality and acceptability of health services, long waiting times linked to shortages and unequal distribution of health and care

workers, and opportunity costs such as lost working time and earnings.

- Out-of-pocket expenditure on healthcare is increasing globally and pushed 1.3 billion people into poverty in 2019. Collective financing, broad risk pooling and rights-based entitlements are key conditions to support effective healthcare access for all in a shockresponsive manner.
- Stronger linkages and better coordination between access to healthcare and income security are urgently needed to address key determinants of health. The climate crisis is directly impacting people's health, while also exacerbating existing socioeconomic inequalities, which act as powerful determinants of health equity. Health and wellbeing should not be the privilege of the few, and the inequalities triggered by the climate crisis call for urgent investment.

Time to up the ante: Towards a greener, economically secure and socially just future

Time is quickly running out for arresting runaway global heating and achieving universal social protection, with less than six years remaining to the key milestone of 2030. It is time to up the ante, accelerate progress in social protection and make a just transition. This is essential for current and future generations. It requires significant investment, determination and political will from both national policymakers and international actors. Safeguarding the planet while also protecting people's health, incomes, jobs and livelihoods, as well as enterprises - and maintaining a liveable planet should provide ample impetus for policymakers to build social protection systems. To this end, several priorities can be identified:

- Mitigating the climate crisis and achieving a just transition requires giving sufficient attention to building rights-based universal social protection systems. Countries must intensify their efforts to address the existential threat of the climate crisis. Social protection is among the most powerful policy tools that governments can deploy to manage this challenge fairly by ensuring that everyone is adequately protected. This must be part of an integrated policy response. This can help secure the political legitimacy of climate policies. Rectifying inequities intrinsic in the climate crisis demands global justice, including solidarity in financing.
- By reinforcing social protection systems, States can demonstrate that they intend to protect their people through a reinvigorated social contract. This is essential for promoting well-being, social cohesion and the pursuit of social justice. Strong social protection fosters state-society trust, can guarantee that all members of society are well protected, and engenders a willingness to go along with climate policies.
- Keeping alive the promise of leaving no one behind remains paramount. This means a) pivoting from reducing poverty to preventing

poverty and moving away from flimsy social safety nets towards solid social protection floors, and progressively reaching higher, more adequate levels of protection; b) ensuring that social protection systems are genderresponsive; c) facilitating access to quality care and other services; d) making health and wellbeing a more central focus of our economies.

- Preparedness for climate shocks and just transition policies requires comprehensive social protection systems to be in place ex ante. This means getting the basics right and formulating and implementing national social protection strategies and policies through social dialogue now rather than later. Systems can contribute to preventing, containing and softening the impacts of crises, promoting swift recovery and building people's capacity to cope with shocks as well as everyday risks. In humanitarian crises, this requires working across the humanitarian-developmentpeace nexus, using existing health and social protection systems to the extent possible, and systematically reinforcing them.
- Further investment is essential to achieve universal and robust social protection systems. Domestic resource mobilization is critically important for addressing both life-cycle and climate risks in a sustainable and equitable way. Countries with limited fiscal capacities, many of which are also highly vulnerable to the climate crisis, need international financial support to enable them to fill financing gaps and build their social protection systems.

There are enormous gains to be had if universal social protection is accorded its due policy priority in climate action and a just transition. As part of an integrated policy framework, social protection can ensure that everyone can reap the benefits of a new greener prosperity, a reinvigorated social contract and a rejuvenated planet more hospitable to life and future generations. The opportunity is there if policymakers want to take it.

Contending with life-cycle and climate risks: The compelling case for universal social protection

- 1.1 The challenge: Ensuring social protection to address the climate crisis and facilitate a just transition
- 1.2 The role of social protection in inclusive climate action and a just transition
- 1.3 The cost of inaction: The implications of absent social protection
- 1.4 Building the statistical knowledge base on social protection and monitoring relevant SDGs

1.5 Objective and structure of the report



- The climate crisis poses a major threat to humanity and undermines the prospect of a liveable planet and the stability of entire societies. Urgent mitigation and adaptation measures must be taken to slow down the rate of warming and address the impacts on people in a way that reduces poverty and inequality, and promotes decent work and social inclusion. In other words, it requires a just transition towards environmentally sustainable economies and societies for all.
- Universal social protection is a pivotal policy lever to prevent and address the adverse consequences of the climate crisis and enable a just transition. Decisive policy action is required to reinforce and extend social protection systems and adapt them to new realities.
- Social protection policies can facilitate structural transformations that are necessary to support climate change mitigation and adaptation efforts. It fosters innovation and productive risk-taking. This dynamism enables workers and enterprises to transition towards more sustainable sectors and resilient modes of production. It thereby enables societies to seize the opportunities that a greener economy will afford.
- Social protection reduces vulnerability and increases the resilience of people, economies and societies by providing a systematic policy response to mutually reinforcing life-cycle risks and climate-related risks. Thus, it must be a key component of adaptation strategies and part of the solution for addressing climate-related loss and damage.
- Yet, a just transition is held back by persistent gaps in social protection coverage, adequacy and financing, which also hinder the achievement of the Sustainable Development Goals (SDGs). Investing in social protection systems is indispensable for a successful just transition. The design and implementation of social protection policies can be more effective, equitable and sustainable when it is achieved through social dialogue.
- Social protection must currently contend with several interconnected global challenges – migration, ageing, informality, digitalization, fragility and structural inequality. However, this report focuses on the overarching danger we face: the triple planetary crisis of climate change, pollution and biodiversity loss. This triple crisis merits special attention as it poses an existential threat and compounds all other macro challenges.
- The case for strengthening social protection systems is as compelling as it is urgent. Without universal protection systems, the climate crisis and the just transition will exacerbate existing vulnerabilities and inequalities, when precisely the opposite is needed. Moreover, for ambitious mitigation and environmental policies to be feasible, social protection will be needed to garner public support. Human rights instruments and international social security standards provide essential guidance for building universal social protection systems capable of responding to these challenges and realizing the human right to social security for all.



1.1 The challenge: Ensuring social protection to address the climate crisis and facilitate a just transition

As the world grapples with the climate crisis, there is increasing attention on the role that social protection can play in supporting *climate change mitigation* and *adaptation efforts* and enabling *a just transition* (see box 1.1). This requires strengthening social protection systems, so that they can effectively deliver a twofold objective: protecting people against ordinary life-cycle risks and supporting action to address the unfolding climate crisis and facilitate a move towards environmentally sustainable economies and societies (see box 1.2). Thus, this report examines the current state of social protection worldwide, discusses challenges and opportunities, and provides concrete policy orientations.

Climate change is undoubtedly the most significant challenge faced by humanity (IPCC 2023b). The world is already 1.1°C warmer compared to pre-industrial levels and even if global warming is limited to 1.5-2°C, the climate crisis is already wreaking havoc and causing unavoidable changes in weather patterns. If warming exceeds 2°C, the world is at risk of slipping towards dangerous "tipping points" (Lenton et al. 2023; UN 2021). Halting global heating requires successful mitigation policy to drastically reduce greenhouse gas emissions and protect natural greenhouse gas sinks¹ in a rapid, yet orderly, just and equitable manner. This also includes policies to encourage more sustainable land use and farming practices, the conservation of biodiversity and other natural resources, as well as a transition towards circular economies.

Climate and environmental change are quickly becoming the largest threats to poverty reduction, decent work, sustainable development and social justice (ILO 2023c). There is growing evidence showing already observed and projected adverse impacts of extreme events and slow-onset changes on human health, employment and livelihoods, labour productivity, displacement and poverty eradication (IPCC 2023a; ILO 2023c; Dang, Hallegatte and Trinh 2024; Hallegatte et al. 2016). Urgent measures need to be put in place to adapt to the new reality and manage its adverse impacts and prevent a vicious cycle of rising vulnerability and deteriorating resilience.

The paradox and injustice of the climate crisis make an equitable response all the more urgent. This is because the most vulnerable populations who have contributed the least to global emissions live in regions most susceptible to the climate crisis. Yet they have the fewest resources to cope with and adapt to the increasingly frequent and intense extreme weather events and slowonset changes (FAO 2024; Hickel 2020). Children, women, persons with disabilities and older groups are especially vulnerable to its impacts (UNICEF 2021b; UN Women 2023). Furthermore, climate hazards increase poverty among those already experiencing poverty and threaten to push the near-poor into poverty (Hallegatte et al. 2016). It is estimated that, by 2030, without policy action, the climate crisis could result in an additional 132 million people living in extreme poverty, and

millions more people living in poverty if measured on the basis of a higher poverty line (World Bank 2020, 12; Jafino et al. 2020). Overcoming these challenges will require an integrated policy response, which must include social protection (IPCC 2023b, 29; ILO 2023c).



The paradox and injustice of the climate crisis make an equitable response all the more urgent.

Efforts to mitigate global heating and adapt to a changing climate and environment are urgent and have the potential to result in more resilient and inclusive economic growth, and sustainable development (ILO 2023c). However, such positive socio-economic outcomes are far from guaranteed. In fact, climate change mitigation and adaptation policies risk further exacerbating existing inequalities and vulnerabilities unless they are implemented in a way that reinforces equality and inclusivity. For instance, some mitigation or other environmental policies may have adverse impacts on employment, income or prices, and it is increasingly recognized that

¹ Among the world's largest natural carbon sinks are forests, oceans and the soil.

Box 1.1 Key climate change terminology

Climate action is a concept captured by SDG 13 which calls for urgent comprehensive and collective action to combat climate change and its impact on the planet and its inhabitants. It relates to the action needed to implement the Paris Agreement, and encompasses all mitigation, adaptation and loss and damage responses.

Climate change mitigation refers to actions that reduce the rate of climate change. Mitigation policies do this by preventing or reducing emissions (for example, keeping fossil fuels in the ground) or enhancing and protecting the sinks of greenhouse gases that reduce their presence in the atmosphere (for example, forests, soils and oceans).

Climate change adaptation refers to the process of adjustment to actual or expected climate change and its effects in order to moderate harm or exploit beneficial opportunities. This includes actions that help reduce vulnerability to weather extremes and natural disasters, rising sea levels, biodiversity loss, or food and water insecurity.

Loss and damage refers to the unavoidable impacts of climate change that occur despite, or in the absence of, mitigation and adaptation. Economic loss and damage relates to items that can be monetized relatively easily, such as income, assets and infrastructure. Non-economic loss and damage covers matters such as health, cultural heritage, biodiversity and displacement.

Just transition involves maximizing the social and economic opportunities of climate action, while minimizing and carefully managing any negative impacts. A just transition requires effective social dialogue among all groups impacted, and respect for fundamental labour principles and rights.

Source: Adapted from IPCC (2023b), UNDP (2023b) and ILO (2021b; 2015; 2023b).

Box 1.2 Key social protection terminology

Social protection, or social security, is a fundamental human right, not a charity, and an essential instrument to reduce vulnerability and promote people's rights and dignity. Social protection guarantees access to healthcare and income security over a person's life course through the provision of benefits in cash or in kind – particularly in relation to sickness, maternity, disability, unemployment, old age or loss of an income earner – and support for families with children, among other needs. Human rights instruments and international social security standards guide social protection policies and their implementation (see box 1.3).

Social protection systems (also referred to as social security systems, welfare states or similar terms) encompass the full range of social protection benefits and services provided through different mechanisms including social insurance, universal/categorical schemes and social assistance, and are coordinated with active labour market policies, health, education and care systems, among others.

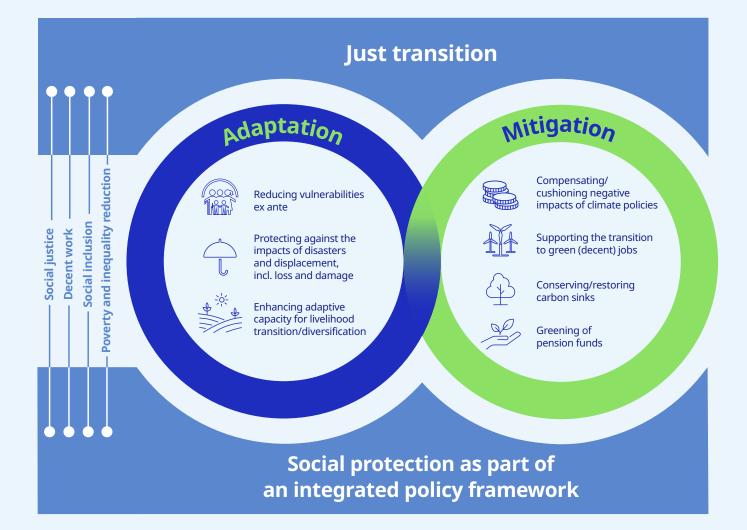
Universal social protection refers to social protection systems that ensure everyone has access to comprehensive, adequate and sustainable protection over their life course, and can access benefits when needed. This was reaffirmed by governments, employers and workers at the 109th Session of the International Labour Conference in 2021 (ILO 2021m) and supported by the Global Partnership for Universal Social Protection (USP2030 2019). As a rights-based approach, this is distinct from the concept of a "social safety net" that provides minimal levels of support targeted at a small number of people identified as poor. This system is without legal guarantees and is often experienced as inadequate, stigmatizing and difficult to access.

A **social protection floor** is a fundamental element of a national social protection system, which guarantees universal access to at least essential healthcare and basic income security for everyone throughout their lives (see box 1.3).

climate change adaptation requires policies that address structural inequalities and the root causes of vulnerability (UNEP 2022).

The world needs to rapidly undergo a just transition to environmentally sustainable economies and societies in a way that reduces and prevents poverty and inequalities, promotes decent work and social inclusion and leaves no one behind (ILO 2015c; 2023c; 2023q). While the concept of just transition is often associated with supporting workers in the energy sector affected by climate change mitigation and decarbonization policies – which remains applicable – countries at different levels of development face distinct challenges and priorities with regard to adressing climate and environmental change. Thus, a just transition is relevant to all sectors of the economy (for example, energy, agriculture and forestry, industry, transport, waste and recycling) and all types of workers. Furthermore, mitigation and adaptation efforts, and those addressing loss and damage, must be implemented in such a way that they are equitable for all population groups (figure 1.1). Ultimately, the just transition framework is based on recognizing the need to address not only climate change, but the triple planetary crisis of climate change, pollution and biodiversity loss (ILO 2015c; 2023b).

Figure 1.1 The role of social protection in supporting climate change adaptation and mitigation for a just transition



1.2 The role of social protection in inclusive climate action and a just transition

To address the aforementioned challenges, building universal, adequate, comprehensive, sustainable and adaptive social protection systems is indispensable for at least three reasons:

Strengthening social protection is an important climate change adaptation strategy, especially in countries where social protection coverage is still low. Social protection reduces people's vulnerability to climate change by providing income

Social protection reduces people's vulnerability to climate change by providing income security and effective access to healthcare.

security and effective access to healthcare, thus preventing and reducing poverty in the first place, and enabling people to be more resilient. Social protection benefits and services can help individuals, households and societies affected by extreme weather or slowonset events to cope with and adapt to changing conditions. In coordination with disaster risk management and humanitarian responses, social protection systems can be leveraged to further support people affected by loss and damage, including in the context of forced displacement. Integrated social protection, employment and climate change adaptation

policies can enable long-term adaptation and transformation of livelihoods, making them more resilient to the impacts of climate change (Costella et al. 2023; UN 2021).

While climate change mitigation and environmental policies are necessary to safeguard the future for all, some policies will inevitably have unintended negative impacts on workers, enterprises and the wider society. Social protection can support those who are adversely affected, including those whose livelihoods are tied to unsustainable practices, and those affected by rising energy or food prices. It can also enable them to seize the opportunities these policies may afford, either by guaranteeing income security to workers who need to reskill and adjust to emerging employment opportunities, or by providing access to healthcare for all. Lastly, social protection can support rural populations in transitioning to more

sustainable livelihoods. For such a dynamic to work, it is important to involve the social partners and other stakeholders in the design and implementation of the measures. Ensuring that the new jobs created in the green economy will have decent working conditions and social protection is one of the core elements of a just transition.

Social protection is essential in addressing inequalities and inequities, both within and between countries, which is key for reducing vulnerability and enhancing resilience. As a key mechanism of risk sharing and solidarity, social protection systems are indispensable for addressing inequalities, by providing protection and support especially to those who are most vulnerable and least responsible for greenhouse gas emissions and the overuse of natural resources (FAO 2024; Hickel 2020). International support to countries with insufficient fiscal capacities to build financially sustainable national social protection systems, including through loss and damage mechanisms, would make an essential contribution to greater social justice.

If social protection systems are to play this essential enabling role in addressing climate change, they need to provide adequate protection throughout people's lives.

Addressing life-cycle risks is particularly important at critical life phases, when vulnerability and poverty risks are acute, to support life and work transitions. This can be during early childhood, transitions from school to work, the formation of a family, periods of ill health, unemployment, disability and old age. Challenges related to climate change may significantly magnify life cycle risks. For example, people may face greater and different health challenges because of heat stress, pollution or disasters, and they may be at higher risk of job loss or otherwise reduced income. Alternatively, they may face a higher poverty risk due to rising energy and food prices (see figure 1.2). In parallel to climate-related risks, people are facing multiple transformations, whether due to population ageing, migration, digitalization or technological progress, which can have adverse short- and long-term effects that not only undermine their welfare and dignity, but also weaken an already fragile social contract.

Social protection systems enable people to successfully navigate lifecycle and climate risks and multiple transformations.

Social protection systems enable people to successfully navigate lifecycle and climate risks and multiple transformations. They do this by guaranteeing access to healthcare and income security, thereby enabling people to adapt to change in a way that protects their rights and dignity. Rather than merely containing the downside effects of transformations and crises, social protection can enable people and societies to take advantage of the opportunities inherent in these changes by addressing inequalities and reducing poverty and vulnerability. This allows people and societies to reap the benefits of climate change mitigation and adaptation policies (see figure 1.1).

The importance of social protection is recognized by decisions adopted at international climate negotiations, including most recently at COP28 (UN 2023e; 2023a; 2023b), for enabling climateresilient development (IPCC 2023b). As an essential contribution to climate justice and a just transition, social protection should be recognized as part of nationally determined contributions, national adaptation plans and climate investment plans.

Figure 1.2 Illustration of the role of social protection in addressing life-cycle and climate risks

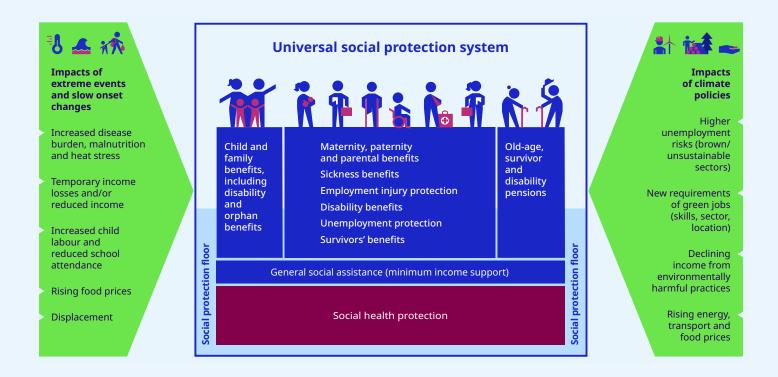


Figure 1.3 Contribution of social protection to the 2030 Agenda

17.1 Strengthen domestic resource mobilization, including through international support to developing countries, to improve domestic **1.3** Social protection systems and measures for all, including capacity for tax and other revenue collection floors 17.3 Mobilize additional financial resources for developing countries **1.A** Ensure significant mobilization of resources from a from multiple sources variety of sources, including through enhanced development **17.14** Enhance policy coherence for sustainable developments cooperation, in order to provide adequate and predictable means for developing countries, in particular least developed countries, to implement programmes and policies to end poverty in all its dimensions 16.6 Develop effective, accountable and transparent institutions at all levels 3.8 Achieve universal 1 NO POVERT 17 PARTNERSHIP FOR THE GOAL health coverage 13.1 Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries 4 Ensure inclusive 13.3 Improve education, and equitable quality awareness-raising and human education and promote GOOD HEALTH AND WELL-BE 15 LIFE ON LA and institutional capacity on lifelong learning climate change mitigation, opportunities for all adaptation, impact reduction and early warning Social Protection 5.4 Recognize and 13 CLIMAT ACTION value unpaid care and domestic work through the provision of public services, infrastructure 12.C Rationalize and social protection inefficient fossil-fuel policies, and the subsidies that encourage promotion of shared wasteful consumption by ۵ responsibility within removing market distortions. the household and the in accordance with national family as nationally circumstances, including appropriate by restructuring taxation and phasing out those harmful subsidies, where they exist, to reflect 7.1 By 2030, ensure universal their environmental impacts, taking fully access to affordable, reliable into account the specific needs and modern energy services and conditions of developing countries and minimizing the possible adverse impacts on their development 8.5 Achieve full and productive employment in a manner that protects the poor and decent work for all women and men, and the affected communities including for young people and persons with **10.4** Adopt policies, especially disabilities, and equal pay for work of equal value fiscal, wage, and social protection policies, and 11.1 By 2030, ensure access for all to adequate, progressively achieve greater

11.1 By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums

11.5 By 2030, significantly reduce the number of deaths

and the number of people affected and substantially decrease the direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations

Investing in universal social protection systems

equality

allows societies to manage the urgently needed2030 Atransition in a socially just way by pursuinghuman-centred policies. This enables peopleNot justand societies to adjust to ongoing and emergingdo. Whtransformations by directly or indirectlyinvestcontributing to several SDGs, across the social,system

economic and environmental dimensions of the 2030 Agenda (figure 1.3).

Not just any investment in social protection will do. What is required is sustainable and equitable investment in rights-based social protection systems that leave no one behind (see box 1.3).

Box 1.3 The international normative framework for building social protection systems, including floors

International social security standards, which complement human rights instruments, provide a comprehensive international normative framework for the realization of the human right to social security. Such standards comprise ILO Conventions and Recommendations elaborated and adopted by representatives of governments, employers and workers from all ILO Member States (ILO 2021a). Recognizing that protection outcomes can be attained by various mechanisms, international social security standards set core principles and minimum requirements regarding population coverage, benefit levels, qualifying periods and duration of benefits (see Annex 3), essential rules guiding the financing and administration of social protection systems.

International social security standards cover both contributory and non-contributory schemes, in particular social insurance and tax-financed schemes, whether means-tested or not, and, subject to the fulfilment of certain conditions, voluntary schemes. They offer an essential reference framework for policy reforms and implementation, especially the two most prominent instruments in this area:

The Social Security (Minimum Standards) Convention, 1952 (No. 102), provides core principles and minimum benchmarks for social protection systems, across the nine social security contingencies that all people may face during their life: the need for medical care and the need for benefits in the event of:

- sickness,
- unemployment,
- old age,
- employment injury,
- family responsibilities,
- maternity,
- disability/invalidity, and
- survivorship (where a dependant outlives an earner).

While not yet universally ratified, this instrument has established the basis for the development of social protection systems throughout the world.¹

The Social Protection Floors Recommendation, 2012 (No. 202),² provides guidance on how universal social protection can be achieved. This entails the establishment of national social protection floors for all as a matter of priority (horizontal extension), and ensuring higher levels of protection for as many persons as possible, and as soon as possible, by extending coverage to those not yet covered and strengthening national social protection systems (vertical extension). For people to live in dignity throughout their lives, national social protection floors comprise a set of basic social security guarantees that ensure at least:

- effective access to essential healthcare, including maternity care, without hardship;
- basic income security for children, ensuring access to nutrition, education, care and other necessary goods and services;
- basic income security for persons of working age who are unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and disability; and
- basic income security for older persons.

The relevance of this international normative framework for addressing current challenges is clear. The essential role of social protection has also been highlighted in other recent international labour standards, including the Transition from the Informal to the Formal Economy Recommendation, 2015 (No. 204), and the Employment and Decent Work for Peace and Resilience Recommendation, 2017 (No. 205), as well in the ILO Guidelines for a Just Transition Towards Environmentally Sustainable Economies and Societies for All (ILO 2015c; 2023q).

¹ To date, Convention No. 102 has been ratified by 66 countries, most recently by Comoros (2022), Côte d'Ivoire (2023), El Salvador (2022), Iraq (2023), Paraguay (2021), Sao Tome and Principe (2024) and Sierra Leone (2022). ² ILO Recommendations are not open for ratification.

1.3 The cost of inaction: The implications of a lack of social protection

Inaction by governments in building and bolstering social protection systems will undermine climate action ambitions and the accomplishment of a just transition. Threatening the stability of entire economies and societies, the climate crisis risks triggering "negative social tipping points" by heightening social tensions,

Inaction by governments in building and bolstering social protection systems will undermine climate action ambitions and the accomplishment of a just transition. forced displacement, amplified polarization, geopolitical insecurity and financial destabilization (Lenton et al. 2023). Social protection will be critical for holding societies together with each blow dealt by the climate crisis and each phase of a just transition (UNRISD 2022).

Even at the best of times, the costs of inaction by governments are enormous. These costs can take the form of growing inequality, entrenched poverty, labour market informality, squandered development of human potential and capabilities, deep social scarring, public discontent and civil unrest, and lurching from one crisis to the next.

Life without social protection has deep and troubling implications for people (see figure 1.4), and impedes economic development and inclusive climate action. Conversely, it is no coincidence that countries with comprehensive social protection systems enjoy greater prosperity and stability, exhibit higher levels of human development and usually have also greater resilience to climate risks (UNDP 2022). As the previous edition of this report showed (ILO 2021q), the COVID-19 pandemic removed any lingering doubts over the necessity of social protection.

There is ample evidence demonstrating the power of social protection to advance human development and build human capabilities. As explained above, effective protection against both life-cycle and climate risks strengthens people's capabilities to successfully navigate the different life phases, transitions and labour market trajectories with confidence and peace of mind. Thus, people can avoid destitution when a shock hits or circumstances change. Ultimately, it allows people to choose lives that are dignified, rational and meaningful. Furthermore, in extreme cases, it can also preserve life by preventing avoidable or premature deaths (WHO 2020) by enabling people to access the basic goods and essential services, including healthcare, needed by all.

Life without social protection has deep and troubling implications for people, and impedes economic development and inclusive climate action.

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At the macro level, social protection functions as a crucial automatic stabilizer and empowers governments to contain and manage crises, and to cope with structural transformations (for example, those provoked by the climate crisis, digitalization and new forms of work) in an orderly and socially fair manner. It delivers substantial "multiplier effects" (Cardoso et al. 2023) and is essential for well-functioning enterprises and general prosperity. Perhaps most striking is its capacity to reduce multidimensional poverty and inequalities, not just by protecting those who already find themselves in poverty, but also by helping to prevent poverty in the first place (ILO 2021q; UNRISD 2022; UNDP 2022; 2023a; Shepherd and Diwakar 2023).

Contending with the climate crisis and the reconfiguration of socio-economic arrangements implied by a just transition seems like a daunting prospect. Universal social protection systems that are adapted to face new challenges will be an indispensable element of the policies needed to contain these risks.

Figure 1.4 What are the implications of life without social protection (selected examples)? What are the cost of inaction?

The implications of life without social protection		amplified by the climate crisis and a poorly managed (unjust) transition
Unaffordable and inaccessible healthcare is impoverishing, and causes unnecessary pain and morbidity	Health	Increased health security threats with the spread of existing diseases and the emergence of new diseases
160 million children are engaged in child labour and are deprived of their childhoods	Chilhood	More families resort to child labour due to livelihood impacts
Women have to go back to work soon after having their babies	Women	Increased unpaid care burden, rising labour market inequality tied to women's lower adaptive capacity
Workers cannot support families if a work injury or unemployment occurs	Workers	Climate policies displace workers who become more economically insecure and disenchanted
Persons with disabilities face constraints in participating in social and economic life and face poverty risks	People with disabilities	More likely to suffer injuries or death in disasters
Older persons have to work until they die rather than enjoy their golden years free of the necessity of work	Old age	Greater heat stress affects older person's higher sensitivity to temperature fluctuations
For people on the margins, financial stress harms mental health and general wellbeing and shortens life	Inequality and social contract	Inequality grows and millions more are impoverished, which heightens the risk of social breakdown and undermines the social contract

1.4 Building the statistical knowledge base on social protection and monitoring relevant SDGs

This report is based on the ILO World Social Protection Database, the leading global source of in-depth country-level statistics on social protection systems. It includes key indicators for policymakers, officials of international organizations and researchers. It is used for both the United Nations' SDG monitoring (UN 2023c, 2023d) and national monitoring of social protection indicators. The report's data and indicators are also available online in the ILO World Social Protection Data Dashboards.² These dashboards provide a broad set of social protection statistics at the national, regional and global levels through interactive graphs, maps and tables.

Data on the key indicators, including SDG indicator 1.3.1,³ are collected through the ILO Social Security Inquiry, an administrative survey submitted to governments that dates back to the 1940s. In 2020, the ILO launched a Social Security Inquiry online platform, which has improved the data compilation process for users around the world.⁴ The data from the ILO Social Security Inquiry are complemented by data from other sources, notably the social security country profiles⁵ compiled by the International Social Security Association (ISSA), which constitute the main source of legal information on national social protection schemes.⁶

Ever since its first edition in 2010, the *World Social Protection Report* series has been envisioned as a tool to facilitate the monitoring of the state of social protection in the world (ILO 2010; 2014c; 2017b; 2021q), ensuring the availability of high-quality social protection statistics for national and international stakeholders. It monitors key social protection indicators, such as the extent of both legal and effective coverage and the adequacy of benefits, as well as expenditure and financing indicators, and discusses major challenges in realizing the right to social security for all. Owing to a refined methodology and better data availability, and trend data for the first time, the current global and regional estimates presented here are not necessarily comparable to earlier figures. Yet, substantial knowledge gaps remain, including with regard to adequacy and disaggregation by sex, migration status and ethnicity, which are very relevant to combating inequality.

Progress towards building social protection systems and the achievement of SDG target 1.3, requires enhanced monitoring capacities in order to provide a solid evidence base for policymakers (UN 2023c; 2023d). Indeed, ILO Recommendation No. 202 includes a strong commitment by governments and the social partners to monitor progress, including through participatory

Additional efforts are needed at all levels to strengthen monitoring frameworks.

mechanisms and according to international standards.⁷ This necessitates systematic investment in national statistical capacities in the area of social protection to make available reliable social security statistics based on a shared methodology and agreed definitions. Additional efforts are thus needed at all levels to strengthen monitoring frameworks and the regular collection, analysis and dissemination of data and statistics on key indicators, disaggregated by function of social protection, as well as by sex, age, migration and disability status, among others.

⁷ This includes the <u>resolution concerning the development of social security statistics</u>, adopted in 1957, which remains the only internationally agreed comprehensive framework for social protection statistics.

² For more details, see <u>https://wspdb.social-protection.org</u> and <u>https://wspr.social-protection.org/</u>.

³ "Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work injury victims and the poor and the vulnerable". See <u>https://unstats.un.org/sdgs/metadata/files/Metadata-01-03-01a.pdf</u>.

⁴ See <u>https://qpss.ilo.org/SSI/</u>.

⁵ See <u>https://www.issa.int/databases/country-profiles</u>.

⁶ For sources, see methodological note in Annex 2. The <u>World Social Protection Database</u> draws on existing international statistical sources, national official reports and other sources, which are usually largely based on administrative data, and on survey data from a range of sources including national household income and expenditure surveys, labour force surveys, and demographic and health surveys, to the extent that these include variables on social protection.

1.5 Objective and structure of the report

With only six years remaining until 2030, this report argues that universal social protection will have to be at the heart of climate action and a just transition. It takes stock of the current state of social protection systems, reviews progress made in recent years, identifies remaining gaps and challenges, and sketches out possible pathways for the future.

Chapter 2 focuses on the role of social protection in addressing the climate crisis and facilitating a just transition, and sets out policy options for accomplishing both. Chapter 3 provides an account of core indicators on the current state of social protection. It also argues that, to realize climate ambitions and trigger a just transition, countries need to close current protection gaps, strengthen the institutional and operational capacities of their systems, and adapt them to the emerging challenges of the climate crisis. Chapter 4 closely examines specific areas of social protection, following a life-cycle approach that reflects the four social protection guarantees set out in Recommendation No. 202.⁸ Section 4.1 focuses on social protection for children. Section 4.2 addresses schemes ensuring income security for people of working

age, including maternity protection, unemployment protection and employment injury protection, and disability benefits. Section 4.3 focuses on income security in old age, with a particular emphasis on old-age pensions.⁹ Section 4.4 addresses the crucial role of universal health coverage for achieving the SDGs. Chapter 5 concludes the report by discussing policy orientations and priorities for the future of social protection, harnessing its key role for achieving the SDGs by 2030, and contributing to climate action, decent work and social justice.

The annexes to this report present a short glossary of key terms used in the report (Annex 1); a description

of the methodologies applied (Annex 2); summary tables of the main minimum requirements set out in ILO social security standards (Annex 3) and ratifications (Annex 4); and statistical tables (Annexes 5 and 6 and Annexes 7 and 8 (online only)).

With only six years remaining until 2030, this report argues that universal social protection will have to be at the heart of climate action and a just transition.

⁸ Paragraph 5. Therefore, both the horizontal and vertical dimensions of the extension of social security (ILO 2012b; 2021a) are addressed in an integrated way in each section of the chapter.

⁹ General social assistance – that is, non-contributory income support for vulnerable groups – is not considered in a dedicated section of this report but is addressed throughout, as it features across the range of life-cycle benefits.



From climate crisis to a just transition: The role of social protection

- 2.1 Social protection for a people-centred adaptation and loss and damage response
- 2.2 Social protection as an enabler for climate change mitigation and environmental protection



- Social protection plays a central role in a just transition to environmentally sustainable economies and societies, and as an enabler for both climate change adaptation and mitigation.
- Social protection is a fundamental enabler of climate change adaptation. It enhances people's capacity to cope with climate-related shocks ex ante by providing an income floor and access to healthcare. Social protection contributes to enhanced adaptive capacities, including of future generations, by increasing human development and productive investments. Cash benefits can directly support livelihood diversification and adaptation strategies, particularly when linked to complementary measures.
- The potential of social protection for adaptation has yet to be realized: coverage is lowest in the countries most vulnerable to climate change. By building universal and rights-based social protection systems, countries can tackle the root causes of vulnerability, including poverty, inequality and social exclusion, thus ultimately contributing to transformative adaptation.
- Social protection is also a powerful crisis management policy tool providing income security and access to healthcare to address losses and damages. However, many disaster responses utilizing social protection are established on an ad hoc basis. Greater efforts are required to strengthen institutional, financial and operational capacities to ensure more effective, inclusive and predictable shock responses. High-coverage social protection systems are better able to respond to climate-related shocks than those relying on temporary and narrowly targeted "safety nets".
- Social protection is key for compensating and cushioning households, workers and enterprises from potential adverse impacts of mitigation and other environmental policies. When combined with active labour market policies, it can help people transition to greener jobs and more sustainable economic practices. Social protection benefits can also be expanded to compensate people for higher prices resulting from carbon taxes or fossil fuel subsidy reform. This is important from an equity perspective, but also for instrumental reasons: by ensuring no one is left behind, social protection, underpinned by strong social dialogue, helps garner the necessary public support for climate policies.
- Social protection can also directly support mitigation efforts through the greening of public pension funds (that is, divestment from fossil fuels) and the provision of income support to incentivize the conservation and restoration of crucial carbon sinks including forests, mangroves or soils.





2.1 Social protection for a people-centred adaptation and loss and damage response

2.1.1 Reducing vulnerability through social protection

Vulnerability is one of the main drivers of climate risk, meaning that socio-economic factors determine how severely people are impacted by climate hazards (for example, extreme or slow-onset events) (IPCC 2023a). Vulnerability to climate risks is driven by: (a) sensitivity to being negatively impacted; and (b) a lack of capacity to cope and adapt (IPCC 2023a). For example, older people have greater physical sensitivity to extreme heat, and children to insufficient food and nutrition, especially in utero. Coping and adaptive capacity is influenced by limited resources, social and financial capital, knowledge and information. These tend to be lower for poorer people, women, persons with disabilities, workers in the informal economy, migrants and indigenous populations.

Adaptation actions increasingly focus on reducing vulnerability and strengthening the resilience of people and societies (see box 2.1). However, many actions remain incremental. Transformative system-wide changes are required to address the

root causes of vulnerability, which are invariably linked to poverty, the exclusion of vulnerable groups and structural inequalities (Eriksen et al. 2021; Scoones et al. 2020).

Social protection is recognized as fundamental for reducing vulnerability to climate risks and a core adaptation strategy (box 2.2). Social protection contributes to building the coping and adaptive capacities of people and societies.

Box 2.1 Climate resilience conceptual framework – coping, adaptive and transformative capacities

IPCC (2023a) defines **resilience** as the **capacity to cope** with a hazardous event, trend or disturbance while maintaining not only the essential function, identity and structure of social, economic and ecological systems, but also maintaining a **capacity for adaptation** and learning, and/or **for transformation**.

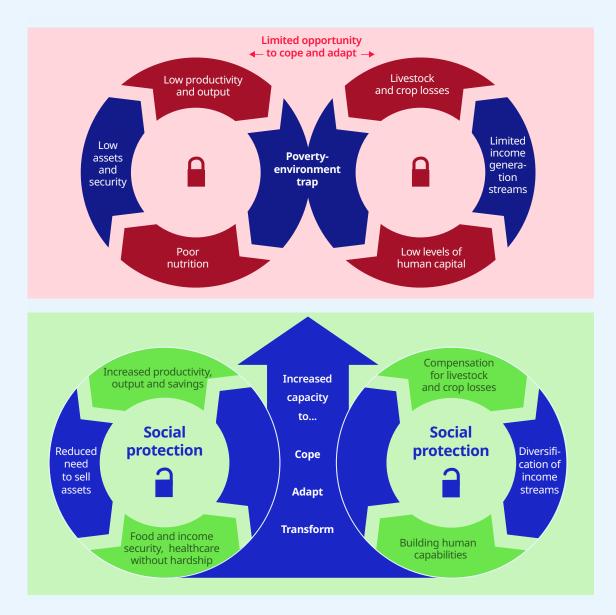
To build resilience, **coping (absorptive)**, **adaptive** and **transformative capacities** need to be strengthened (Béné et al. 2012); focusing on coping capacities alone is insufficient.

Box 2.2 Social protection in the Global Goal on Adaptation and its monitoring framework

The 2015 Paris Agreement established a global goal on adaptation "to enhance adaptive capacity, strengthen resilience and reduce vulnerability to climate change" (UN 2015). At COP28, countries adopted seven thematic adaptation targets, including:

- Adaptive social protection for all to reduce the impact of climate change on poverty eradication and livelihoods. This requires an existing social protection system as captured by SDG indicator 1.3.1 on effective social protection coverage.
- Provision of climate-resilient health services to reduce climate-related morbidity and mortality. This goal requires the achievement of universal health coverage (SDG indicators 3.8.1 and 3.8.2), underpinned by the extension of social health protection, particularly in climate-vulnerable countries.

The next step will involve the definition of indicators to measure progress towards the global adaptation goals and to estimate financing needs for adaptation.



▶ Figure 2.1 Breaking the poverty-environment trap through social protection

By providing income security and access to healthcare across the life cycle, social protection can help to break the "poverty-environment trap", which otherwise results in a vicious cycle where increasing climate impacts further exacerbate vulnerability (figure 2.1). Social protection contributes to building the coping and adaptive capacities of people and societies. In addition, a rights-based approach, in which all members of society are entitled to at least a minimum level of social security, can contribute to the transformative changes required by adaptation efforts (Tenzing 2020) (see boxes 2.3 and 2.4). Yet, social protection coverage is lowest in countries most vulnerable to climate change, which makes its expansion particularly urgent (figure 2.2).

Source: Adapted from IPCC (2022).

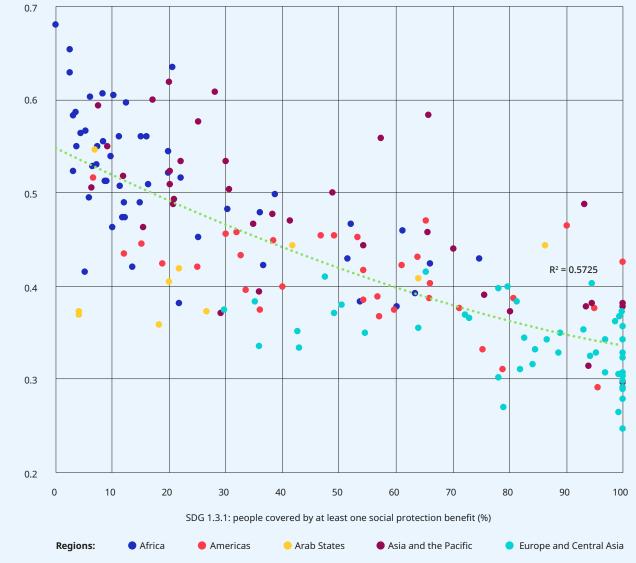


Figure 2.2 The relationship between a country's vulnerability (score) to climate change and social protection coverage (percentage), by region, 2023

Note: A country's <u>Notre Dame Global Adaptation Initiative Country Index</u> score is composed of a vulnerability score and a readiness score. For the purposes of this figure, the vulnerability score was used. Vulnerability measures a country's exposure, sensitivity and ability to adapt to the negative impact of climate change. It takes into consideration six life-supporting sectors – food, water, health, ecosystem service, human habitat and infrastructure. For SDG indicator 1.3.1, see Chapter 3.

Source: Notre Dame Global Adaptation Initiative Country Index and ILO World Social Protection Database.

Vulnerability (score)

2.1.2 Prepare, respond, recover: Addressing climate-related shocks through social protection

There is an extensive body of evidence that shows that social protection systems can enhance the capacity of individuals and societies to prepare for, cope with and recover from shocks (Bastagli et al. 2016; Tirivayi, Knowles and Davis 2016).

An ounce of prevention: Increasing coping capacities ex ante

Regular predictable benefits, such as child benefits, old-age pensions, disability benefits and social assistance, increase food security, consumption and savings (Bastagli et al. 2016). During shocks, such benefits act as income floors, helping to maintain a basic standard of living and preventing negative coping strategies (for example, restricted food intake, selling productive assets, child labour or child marriage). Social protection contends with idiosyncratic shocks (that is, individual shocks) and covariate shocks (that is, mass shocks). The COVID-19 pandemic showed that schemes designed for stable periods constitute essential automatic stabilizers during crises (ILO 2021q; Banerjee et al. 2020). For example, the Plurinational State of Bolivia's quasiuniversal non-contributory pension prevented food insecurity and a decline in food consumption

During shocks, such benefits act as income floors, helping to maintain a basic standard of living and preventing negative coping strategies. for older people and multigenerational household members, especially for lowincome households (Bottan, Hoffmann and Vera-Cossio 2021). This also illustrates how social protection acts as a key social determinant of health and well-being where climate change is anticipated to increase health inequity (Jay and Marmot 2009).

Social protection schemes can enhance people's capacity to cope with

extreme weather events (Agrawal et al. 2020). Zambia's child benefit partly offsets the negative caloric impact of low rainfall, particularly for the poorest households (Asfaw and Davis 2018). In Ghana, regular cash benefits mitigated the impact of prenatal exposure to extremely high temperatures on birthweight by improving the nutrition and food security of pregnant women (LaPointe et al. 2024). Existing social assistance helped protect income and consumption during floods and earthquakes in Indonesia (Pfutze 2021; Fitrinitia and Matsuyuki 2022) and drought in Niger (Premand and Stoeffler 2020).

Social health protection increases the coping capacity of households by facilitating access to healthcare without hardship and by reducing the need for out-of-pocket health expenditures (see section 4.4). This is particularly important considering the impact of the climate crisis on the prevalence and transmission of diseases, which can pose a major health security risk (see section 2.1.3). Estimates show that climate-related health impacts are the most significant drivers of climate-induced poverty increases in both Latin America and the East Asia and Pacific region (Jafino et al. 2020).

The importance of reducing vulnerability to climate shocks ex ante, particularly for vulnerable groups, cannot be overstated. Increasingly frequent extreme events and intensifying slowonset changes threaten people's livelihoods, health and well-being. These are not limited to acute crises that can be addressed through temporary emergency measures, but require systemic responses (Kaltenborn 2023). As some extreme events are more severe than what existing benefits can cushion (Banerjee et al. 2020), social protection systems need to be sufficiently flexible and adaptive to expand and ensure income security and access to healthcare in disasters (see box 2.4).

Leveraging social protection systems to respond to climaterelated shocks, including losses and damages

When appropriate design, institutional and operational capacities are put in place ex ante, social protection systems can provide predictable (additional) support to those affected by climaterelated shocks by ensuring:

- adequacy in the context of increased needs by temporarily adjusting benefit values/packages, frequency or duration (vertical expansion);
- coverage of all those affected by modifying eligibility rules of existing schemes or

Box 2.3 Addressing climate change-related losses and damages through social protection

Social protection can help address economic losses related to income and non-economic losses, including health-related losses.¹ The universality and portability of social protection benefits also guarantee an adequate standard of living during climate-induced displacement.

In loss and damage discourse, there is a tendency to reduce the role of social protection to be merely a delivery channel for emergency support once shocks have struck. This interpretation fails to appreciate that:

- social protection increases coping and adaptive capacities ex ante, thereby minimizing/averting loss and damage impacts;
- sustainable loss and damage responses must go beyond reactionary measures and contribute to building the long-term resilience of vulnerable populations.

Hence, technical and financing arrangements for loss and damage response - including the Loss and Damage Fund agreed on at COP28 – should, where necessary, reinforce the capacities of social protection systems in order to make them more universal and adaptive.

¹ Non-economic losses can have economic consequences and economic solutions. For example, losses related to health result in financial hardship, and debt and income losses that can be contained through social health protection.

introducing/activating (new) emergency schemes (horizontal expansion); and

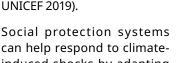
comprehensiveness and complementary services to cover individuals' multidimensional needs and the support required by enterprises.

Leveraging social protection systems to respond to climate-related shocks, including in the context of loss and damage (see box 2.3) can have a range of potential advantages over unintegrated disaster and humanitarian responses (ILO, forthcoming e), including:

- faster and more efficient responses;
- more sustainable and predictable responses, especially where chronic humanitarian caseloads and humanitarian funding fluctuates:
- contributions to investments in national systems and to building social protection floors: and
- opportunities to embed programmes within national legal frameworks and promote rights-based social protection even during emergencies.

The extent to which a social protection system can complement and ideally reduce the need for humanitarian and disaster risk management support depends on how well prepared it is to provide a prompt comprehensive response. Regardless of who provides emergency support,

it is important to coordinate and align social protection with humanitarian and disaster risk management responses. This avoids creating inefficient parallel systems and ultimately generates better outcomes (O'Brien et al. 2018; UNICEF 2019).



can help respond to climateinduced shocks by adapting

and expanding various schemes. Therefore, thinking about the whole system as adaptive, and not only in terms of a flagship scheme, is key (see box 2.4).

From ad hoc to institutionalized responses to climate-related shocks

Some countries increasingly choose to temporarily expand existing social protection schemes to provide additional support to people affected by extreme events (Costella and McCord 2023). In Fiji, the Government topped up existing social assistance and social pension schemes when Cyclone Winston hit in 2016 (Mansur, Doyle and Ivaschenko 2017). In the Philippines, child benefits provided by the Pantawid Pamilyang Pilipino Program (4Ps) were raised in response to several disasters.



Social protection systems can help respond to climateinduced shocks by adapting and expanding various schemes.

Box 2.4 Shock-responsive and adaptive social protection

There has been growing interest in the role of social protection in addressing the impacts of climate change and other crises. Different approaches have emerged:

- Shock-responsive social protection seeks to enhance the preparedness of social protection systems to better respond to shocks affecting large parts of a population, both from a service continuity perspective and through the rapid expansion of support to those affected (O'Brien et al. 2018).
- Adaptive social protection was initially conceived to integrate social protection, disaster risk management and climate change adaptation to better protect people from extreme events and build longer-term adaptive and transformative capacity. However, recent examples of adaptive social protection place a stronger focus on protecting people from extreme events rather than building transformative capacity (Bowen et al. 2020; Tenzing 2020). Shock-responsive social protection is sometimes considered a sub-component of adaptive social protection, but the terms are often also used interchangeably (Cornelius, Béné and Howland 2018).

These approaches have prompted important innovations for improving the institutional, financial and operational capacities of social protection systems for better preparedness and responsiveness. However, the proliferation of evolving concepts – often defined differently by different agencies and countries – has sometimes created confusion regarding their definition and role vis-à-vis more established concepts of social protection (FAO, ILO and UNICEF 2022, box 11). Some argue that social protection is inherently "shock-responsive", as good systems automatically expand when need increases (Freeland 2021). While conceptually true, this argument overlooks the reality of many countries, particularly those most vulnerable to the climate crisis, where social protection systems are insufficiently developed to be responsive or adaptive.

As different sectors increasingly employ the terms "shock-responsive social protection" and "adaptive social protection", including those working on climate action, further clarification can help:

- Strengthening social protection systems rather than creating parallel structures. Adaptive social protection is not a specific mechanism, intervention or initiative, separate from or occurring in addition to systems addressing ordinary life-cycle risks. Instead, national social protection systems should be adapted to provide support in the context of climate-related transitions and crises.
- Disaster response is an ancillary, not a primary function of social protection. The principal role of social protection lies in reducing vulnerability ex ante through both non-contributory and contributory schemes. More comprehensive systems command greater policy space for reducing inequality crucial for achieving development and climate goals simultaneously (Wollburg, Hallegatte and Mahler 2024).
- Social protection systems with wide coverage have greater adaptive potential. It is much easier to quickly reach those already covered in the context of emergency responses. A system covering only a small fraction of the population through patchy "safety nets" – even if adaptive – is insufficient to strengthen resilience to climate change, which will progressively affect much larger parts of the population.
- Social protection systems should be rights-based. Support should be predictable, established in national legislation and state-guaranteed. Humanitarian and other donor-led emergency responses are prone to funding fluctuations and, while often life-preserving, they are neither predictable nor guaranteed. The added value of shock-responsive or adaptive social protection social protection approaches lies in the linking of emergency responses to national systems. This ensures more predictable and rights-based support. Working on legal frameworks and securing reliable financing should therefore be prioritized.

The principal role of social protection lies in reducing vulnerability ex ante through both noncontributory and contributory schemes.

Sources: ILO (forthcoming e); WFP (2020).

Where social protection coverage is already high, and administrative capacity exists, a large part of the affected population can be reached. Where social protection coverage is already high, and administrative capacity exists, a large part of the affected population can be reached by the in-built provision of emergency extension, advanced payments, exceptional financial support or top-up payments to existing beneficiaries of different lifecycle schemes (see box 2.5). However, when there is a large, uncovered population both in terms of legal and administrative coverage, it

is more difficult to reach all those affected by a climate disaster. Some countries have temporarily extended cash benefits to uncovered populations after a disaster, but such expansions are generally more difficult to implement in an inclusive, timely and predictable way (O'Brien et al. 2018). Particularly where poverty-targeted schemes are leveraged to respond to climate-related shocks, there is a high risk of carrying existing exclusion errors into emergency responses. Emergency basic income schemes for reaching all those affected by an extreme event may be another option (see box 2.6).

It is encouraging that countries are increasingly using social protection systems to respond to climate-induced shocks. However, many responses are still established on an ad hoc basis, as systems and schemes are insufficiently prepared. Going forward, it will be crucial to further strengthen institutional and operational capacities to ensure greater predictability and institutionalized shock responses (see box 2.4). This means eligibility criteria, transfer value and duration, payment triggers and financing are predefined, and these parameters are anchored in laws, policies and standard operating procedures (see sections 3.4.3 and 3.5). Engaging social partners in this process is important for collective buy-in and ensures more inclusive responses.

Box 2.5 Brazil's systems-wide social protection response to floods in 2024

In April and May 2024, heavy rains resulted in severe flooding in the Brazilian state of Rio Grande do Sul, affecting some 2 million people. The Government implemented the following measures to ensure income security and to support recovery:

- Advanced benefits payments: upcoming instalments of several benefits, including for low-income families (*Bolsa Família*) as well as all contributory and tax-financed pensions (that is, the general regime and the *Benefício de Prestação Continuada*) were brought forward by one month. The Government's annual salary bonus (*Abono Salarial*) for low-wage workers was also advanced in affected municipalities.
- Automatic coverage extension: over 21,000 additional families became eligible for social assistance due to income loss caused by the floods and were enrolled into Bolsa Família.
- Operational adaptations: protocols for accessing payments despite lost benefit cards and identity documents were put in place; mobile payment trucks served locations where banks were flooded; and the deadline for updating registry information was extended.
- Exceptional additional financial support: one-off reconstruction payment of 5,100 Brazilian reais (US\$1,000) for approximately 240,000 families whose dwellings were in affected areas.
- Activating existing emergency benefit rules and enhancing unemployment protection: the authorization was given to withdraw up to 6,220 Brazilian reais (US\$1,200) from mandatory severance accounts, and the duration of unemployment benefits was extended (by two additional payments) for unemployed workers during the emergency period.
- Public health measures: a total of 1.2 million vaccines were allocated to deal with diseases associated with floods, such as hepatitis, rabies and measles.
- Complementary policy action: monthly mortgage payments of social housing loans (*Minha casa, minha vida*) were temporarily suspended and some income tax rebates were implemented.

Source: Government of Brazil (2024).

Box 2.6 Emergency basic income: A "stability and reconstruction benefit" for extreme events?

Emergency basic income is defined as a regular cash payment, paid individually to all residents or people living in an affected region for the duration of any given crisis. In the COVID-19 response, one country – Tuvalu – used an emergency basic income and 11 countries/territories deployed a quasi-universal emergency basic income.¹ For instance:

- ▶ Tuvalu made several universal monthly payments of US\$30 to each resident.
- The United States of America made three quasi-universal payments in one year equating to US\$3,200 per adult and US\$2,500 for each child to 80 per cent of its population.

Emergency basic income demonstrates high transparency, administrative ease, limited risk of exclusion error and deployment rapidity (if it is an existing feature of systems) to support people in rebuilding their lives and livelihoods, and kick-start macrorecovery. During crises, it could be a strong expression of a resourced social contract.

¹ Guyana, Hong Kong (China), Israel, Japan, Jersey (dependency of the United Kingdom), the Republic of Korea, Serbia, Singapore, Taiwan (China), Timor-Leste and the United States (Gentilini 2022).

Sources: Based on Bricker et al (2023); ISSA (2014); Orton, Markov and Stern-Plaza (2024); United States (2023).

Box 2.7 Providing predictable trigger-based income security in drought-prone regions

Since 2009, the Hunger Safety Net Programme has been providing regular income support to chronically food-insecure households in Kenya's northern counties.

The Hunger Safety Net Programme is supported by contingency procedures and funds, which allow it to provide temporary support to additional households during drought and flooding. Vulnerable households are preidentified and registered. Operational guidelines define when and how these households receive temporary emergency support when a shock strikes. Responses are triggered by a vegetation condition index. This allows the system to deliver assistance within ten days of an emergency being declared, which is timelier than humanitarian aid where, often, three to nine months elapse before beneficiaries are reached (Merttens et al. 2018).

The Hunger Safety Net Programme is coordinated with the Kenya Livestock Insurance Programme, an index-based livestock insurance subsidized by the Government. The two programmes share the same data for triggering payouts, complementing each other within a broader social protection strategy (FAO 2021).

Some countries are already moving towards providing more predictable social protection support in the context of extreme events. National schemes are thus being designed to tackle chronic deprivation or (seasonal) unemployment/ underemployment with mechanisms for scaling up support during extreme events (see box 2.7). Such schemes are increasingly linked to predefined triggers, such as drought indices or extreme temperature forecasts. The United Kingdom's cold weather payments to vulnerable households are triggered when the meteorological office forecasts extreme cold (Etoka, Sengupta and Costella 2020). Employment guarantees, such as India's National Rural Employment Guarantee Act, can also provide seasonal income security, while others, such as the Philippines' Integrated Livelihoods and Emergency Employment Programme, can provide emergency employment for workers affected by crises and disasters (ILO and AFD 2016).

Box 2.8 Transitioning crisis-affected populations from emergency assistance to inclusion in Mozambique's national schemes

Mozambique's COVID-19 response involved activating the Post-Emergency Direct Social Support Programme. This provided temporary income support to over 1 million people lacking social protection at the time. Many people receiving the COVID-19 support were also eligible for other existing categorybased schemes (for example, for children and older people), but were not receiving these owing to budgetary limitations. Many had been on waiting lists for years or never been registered.

With joint ILO–IMF support, the Government increased the domestic resource allocation to the noncontributory pillar of the social protection system in 2023. This increased coverage from 600,000 to 1 million people, transitioning many from temporary emergency support to more regular and predictable benefits.

This allows for a more effective crisis recovery and helps reduce vulnerability to future crises, including climate-related disasters (for example, droughts and cyclones) regularly affecting Mozambique.

Sources: Lima Vieira, Vicente Andrés and Monteiro (2020); ILO (2024c).

Finally, the crisis recovery phase should always be used as an opportunity to close coverage gaps, by assessing the possibility of enrolling those temporarily covered into existing schemes on a more permanent basis (see box 2.8). This will sustainably reduce vulnerability to future climaterelated shocks.

Integrating climate risks into contributory schemes

Climate risks impact workers' health and welfare and can be factored into social insurance schemes. In Algeria, for example, the Caisse Nationale des Congés Payés et du Chômage Intempéries des Secteurs du Bâtiment, des Travaux Publics et de l'Hydraulique (National Fund for Paid Leave and Weather-Related Lay-offs in the Construction, Public Works and Hydraulics Industries) provides a wage replacement for workers in the construction sector for unworked hours during bad or severe weather events, including extreme heat, which is financed by workers' and employers' social insurance contributions (ISSA 2019). Luxembourg and Switzerland also have bad-weather benefit schemes which complement regular unemployment protection, and are financed exclusively by employers (Government of Luxembourg n.d.; SECO 2024). In the United States, the Disaster Unemployment Assistance programme, administered by disaster authorities, provides assistance via state unemployment funds

to people otherwise ineligible for unemployment insurance compensation, including self-employed people who have lost their income due to a declared disaster.¹⁰

In addition, the design of contributory schemes can be temporarily modified to provide better services in the context of climate-related shocks (Sengupta, Tsuruga and Dankmeyer 2023). Adaptations could include delaying or reducing contributions,

freezing contribution rates or subsidizing contributions to ensure continued social security contributions and financial breathing space for employers and employees. Furthermore, advanced pensions payments can provide important shortterm relief. The Philippines was an early adopter of such adjustments, owing to its exposure to frequent climate shocks (see box 2.9). However, caution is required with exceptional one-off pension fund withdrawals, as was the case in Fiji and Jamaica

The design of contributory schemes can be temporarily modified to provide better services in the context of climate-related shocks.

after storms occurred (Sengupta, Tsuruga and Dankmeyer 2023). Such measures may jeopardize the adequacy of future retirement income if not replaced and, also carry equity risks if tax financing covers any deficit (ILO 2020c; Orton 2012).

Box 2.9 Ahead of the curve: The Philippines

When disasters strike, the Philippines' social insurance institutions and other government departments deploy additional measures to support affected populations, such as:

- advanced disbursement of pensions for up to three months to support income security of retirement, disability and survivor pensioners;
- accelerated procedures for processing funeral claims;
- extended eligibility of advance pension grants to spouse-survivors claiming funeral expenses;
- higher payout of health insurance claims;
- calamity or emergency loans at concessional rates (such as reduced loan rates for house repairs); and
- moratoriums on loan amortizations.

Sources: ISSA (2014); Sengupta, Tsuruga and Dankmeyer (2023).

Providing support to enterprises and protecting jobs during climate-induced shocks

Increasingly frequent and severe extreme events are leading to business interruption and even temporary closure of workplaces. This may require enterprises to effect redundancies or even shut down entirely, creating costs for individuals and the economy. Social protection can help support business continuity and complement wider support for selected enterprises.

Striking a balance between enterprise continuity support and wider societal support is key, and the decision depends on the magnitude of the effects of an extreme event. For enterprises to resume activity and make a swift recovery, financial pressures must be temporarily alleviated to avoid shedding workers and to maintain the employment relationship. Options include temporarily reducing or freezing social insurance contributions, provided these are paid later upon resumption of activity. Employment relationships can also be maintained through temporary worker retention or furlough schemes, short-time work or temporary unemployment

schemes. These mechanisms were widely used in the COVID-19 pandemic. However, they pertain more to high- and middle-income contexts, as their costs are substantial and, in some countries, they require large additional tax financing. Equity considerations are also important, especially in contexts where large parts of the population are adversely affected, not just workers and enterprises (Orton, Markov and Stern-Plaza 2024). Striking a balance between enterprise continuity support and wider societal support is key, and the decision depends on the magnitude of the effects of an extreme event.

Providing protection in the context of climate-induced forced displacement

In 2022, an estimated 108.4 million people were forcibly displaced - the largest escalation since UNHCR record-keeping began (UNHCR 2022). Climate change is exacerbating displacement trends, through other drivers such as persecution, conflict and violence. Over half of internally displaced people were displaced by sudden-onset events (for example, cyclones). Concurrently, slow-onset climatic events (for example, sea-level rise and drought) have degraded ecosystems, adversely affecting agricultural communities. This leads to migration and displacement (Chazalnoël and Randall 2021). Both event types disrupt livelihoods, displace people and heighten intercommunal tension over dwindling resources (Lenton et al. 2023). The multiplication of crises, including protracted ones, underscores the urgency of extending the reach of social protection systems to include forcibly displaced persons - migrants, refugees, asylum seekers and internally displaced persons.¹¹

¹¹ Forcibly displaced persons encompass persons displaced for various reasons, including climate-related ones. However, there is no international legal definition of or consensus on the concept of "climate refugee". Therefore, such persons are not protected under the 1951 Refugee Convention even if the risks they face are exacerbated by climate-related events. However, regional instruments and national laws may extend the protection offered to refugees to people fleeing from disasters or other climate-related events.

Box 2.10 Inclusive social health protection systems to bridge the humanitarian-development nexus

A number of countries have pledged to include refugees on par with nationals in their social health protection schemes to ensure greater access to health services and improve the health status of refugees and host communities alike. To support those commitments, the ILO and the UNHCR have been collaborating on the extension of social health protection to refugees for over a decade.

Inclusion was supported in 12 countries in the Africa region. More recently, the two agencies have joined forces and combined their respective areas of expertise to support transitions out of camp-based assistance and the strengthening of social health protection systems simultaneously. Discussions in this regard are ongoing in Egypt, Ethiopia and Kenya (ILO 2021k; ILO and UNHCR 2023; ILO and NHIF 2023). This partnership has also progressively opened the door to discuss inclusion in the wider context of social protection extension for additional benefits (Government of Kenya 2023; ILO and UNHCR, 2024).

Sources: ISSA (2014); Sengupta, Tsuruga and Dankmeyer (2023).

International instruments¹² recognize the human right to social security for refugees and social security standards provide guidance for materializing their equal treatment within national systems (ILO, ISSA and ITCILO 2021; ILO 2024d). Yet, forcibly displaced persons tend to face unique difficulties in accessing social protection,

As displacement becomes increasingly extended with the climate crisis, transitioning from primarily response-based operations to national systemstrengthening approaches is key.

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including: exclusion from legal frameworks or in practice; geographical barriers (many refugees and asylum seekers live in remote areas or refugee camps); lack of awareness of their rights and how to avail those rights; and complex administrative requirements (language barriers, no identification documents) (ILO 2021j). Furthermore, they are disproportionately represented in vulnerable employment due to labour market discrimination. This affects their social insurance coverage. In many host countries, social protection systems are nascent or underdeveloped, which limits

de facto access for forcibly displaced persons (ILO, ISSA and ITCILO 2021). Integrating forcibly displaced persons into national schemes avoids creating parallel systems and undermining social cohesion with host communities (ILO, ISSA and ITCILO 2021).

As displacement becomes increasingly extended with the climate crisis, transitioning from primarily

response-based operations to national systemstrengthening approaches is key (ILO 2022f). While recognizing the importance of delivering direct assistance to meet the immediate needs of displaced populations (for example, cash transfers and emergency access to healthcare), inclusive national systems provide an opportunity to bridge the divide between development and humanitarian actors (see box 2.10).

2.1.3 Supporting inclusive adaptation and transformation through social protection

Increasing adaptive capacities and facilitating livelihood adaptation

Social protection benefits also help strengthen adaptive capacities (Godfrey Wood 2011; Béné et al. 2012; Bowen et al. 2020; Sengupta and Costella 2023). While the capacity to cope and adapt are intrinsically connected to each other, coping capacity is often associated with the immediate impacts of a shock, whereas adaptive capacity alludes to a longer time horizon and implies that some learning, adaptation or even transformation is taking place (Burkett 2013).

Social protection strengthens "generic adaptive capacity" through well-documented positive impacts on fundamental human development outcomes (see section 1.2) (Eakin, Lemos and Nelson 2014). Well-designed child benefits, especially when combined with complementary

¹² See Refugee Convention, 1951, which accords refugees the same treatment as nationals (Articles 20 to 24).

social services, can have positive impacts on children's education, health status and nutrition, thereby increasing the adaptive capacities of future generations (ILO, UNICEF and Learning for Well-Being Institute 2024). Maternity protection, including healthcare and cash benefits, is similarly important for supporting the health and nutrition of mothers and newborns (ILO 2021q). Old-age pensions, disability benefits or social assistance can also contribute to human development and support social determinants of health equity. Research shows that higher generic capacity corresponds to higher levels of climate-specific adaptive capacity (Lemos et al. 2016).

Cash benefits can contribute to productive investments and livelihood diversification strategies, sometimes decreasing reliance on climate-sensitive livelihoods (Bastagli et al. 2016; Asfaw and Davis 2018; Sengupta and Costella 2023). Evidence shows that non-contributory social protection can support resilient and inclusive agricultural growth (Correa et al. 2023). Old-age and child benefits in Bangladesh and Zambia, respectively, were shown to result in increased purchases of agricultural assets (for example, tools and seeds), while helping beneficiaries invest in non-farm enterprises (FAO 2015; Begum et al. 2018).

However, income support or substitution alone is often insufficient to achieve a full and effective transition to more climate-resilient livelihoods and production practices (Costella et al. 2023; Lemos et al. 2016). Without appropriate guidance, beneficiaries' investments could even lead to maladaptation, locking them into climatesensitive livelihoods and, thus, further increasing vulnerability (Tenzing 2020).

Social protection schemes work best in contributing to effective long-term adaptation when they are linked with complementary services and measures specifically designed to address climate risks (Aleksandrova 2019; Costella et al. 2023). Such measures may include climate-sensitive livelihoods promotion and diversification programmes. These include agricultural extension services for vulnerable farmers, in-kind transfers (for example, droughtresistant seeds and tools), crop, livestock or other specific agricultural insurance, or education and training for sustainable fishing or agriculture (Tenzing 2020). Providing people with income security while they participate in adaptation-specific labour market programmes, supports productive risk-taking behaviour and forward planning.

Social protection creates important enabling conditions but is insufficient alone for climate change adaptation (Godfrey Wood 2011; Tenzing 2020). Adaptation actions involving the improvement of institutions, physical infrastructure or the state of the natural environment are necessary to further reduce vulnerability, exposure and hazards (see figure 2.1). The promise of social protection lies in ensuring that everyone, including the most vulnerable, gains from climate change adaptation measures.

Transformative adaptation through universal coverage and rights-based social protection

Climate change adaptation literature increasingly argues that system-wide transformations are necessary to tackle the root causes of vulnerability. Moreover, adaptation efforts characterized by time-bound, donor-driven projects merely facilitate "incremental" adjustments to the risks from the climate crisis (Pelling, O'Brien and Matyas 2015). However, "transformative adaptation"

has rarely been considered in adaptation policies, plans and policies to date (Fedele et al. 2019).

Rights-based protection providing adequate and comprehensive benefits can help tackle some structural inequalities that primarily drive vulnerability (Tenzing 2020; Kundo et al. 2024), including gender-related inequalities (see box 2.11). However, in many countries, this potential has yet to be realized because social protection provision is insufficient to achieve the desired transformative



Rights-based protection providing adequate and comprehensive benefits can help tackle some structural inequalities that primarily drive vulnerability.

adaptation outcomes due to low coverage, inadequate benefit levels, insufficient financing, poor governance and a failure to address unequal gender norms and other power relations (Desai et al. 2023; Kundo et al. 2024).

Therefore, it is imperative that lower-income countries gradually shift away from an overreliance on narrowly poverty-targeted schemes for (extremely) poor households (typically called social safety nets), which, at best, play an incremental but not transformative role in reducing vulnerability to climate change.

Box 2.11 Addressing gendered climate impacts through social protection

Gender-responsive social protection is needed to inform responses to gendered climate impacts. Not only are there large gender inequalities in effective coverage, women and girls are disproportionately affected by climate risks through multiple channels: their dependence on livelihoods based on natural resources and agriculture; the existing burden of unpaid care work; lower incomes and limited assets (Nesbitt-Ahmed 2023); and a higher likelihood of being adversely affected by environmental disasters and shocks. The latter manifests as lower life expectancy, health complications and gender-based violence (Erman et al. 2021). Having access to comprehensive provision is an important starting point, but specific adaptations are needed to increase the gender-responsiveness of social protection, namely: gender-based increments (Gavrilovic et al. 2022); individualized – as opposed to household – social assistance payments; the minimization of transaction costs when enrolling in schemes; and scope for integrated economic and social policies (Razavi et al., forthcoming a).

- The high exclusion errors of povertytargeted schemes are well documented (Kidd and Athias 2020), including in countries in extremely climate-vulnerable regions like the Sahel, where poverty-targeting methods were found to perform "no better than a random allocation of benefits" (Schnitzer and Stoeffler 2021).
- Poverty is not the only factor driving climate vulnerability (Doan et al. 2023). Inequality and marginalization drive monetary and multidimensional poverty and underlying vulnerability (Sabates-Wheeler and Devereux 2007). In fact, the number of people vulnerable to climate change – approximately 3.3 to 3.6 billion people (IPCC 2023a) – far exceeds the number of people living in chronic poverty. This further puts into question the merits of poverty targeting for reducing climate vulnerability (Costella and McCord 2023).
- Climate change further increases the dynamic nature of poverty, meaning that the preventive function of social protection becomes even more important: providing support to reduce existing vulnerability prevents it from being exacerbated further by climate change and stops people from falling into poverty. This runs contrary to providing support only retrospectively by trying to target those who are already poor. Recurrent climaterelated shocks will make it more challenging to maintain the accuracy of the data used for

poverty-targeted schemes as people may move in and out of poverty more frequently.

Poverty targeting can result in low social protection coverage in urban areas, potentially leaving people affected by climate-induced displacement unprotected. Chronic poverty rates are typically higher in rural areas (World Bank 2015), but as climate change puts pressure on rural livelihoods, rural-urban migration is expected to increase (IPCC 2023a). Informal urban settlements are especially exposed to disaster risk and face a host of climate-related vulnerabilities while struggling with low coverage (Aleksandrova 2020).

This is not to say that poverty-targeted schemes have no role to play in comprehensive social protection systems. However, they can be enhanced and should constitute a residual rather than main strategy for harnessing the potential of social protection for reducing climate vulnerability and building resilience.

Instead, countries should progressively build rightsbased universal and adaptive social protection systems, which are usually achieved through a combination of contributory and tax-financed schemes that systematically provide fundamental and adequate protection for everyone (see box 2.12).



Countries should progressively build rightsbased universal and adaptive social protection systems.

Box 2.12 Including indigenous communities in social protection systems

Indigenous communities represent 6 per cent of the world's population but 19 per cent of those living in poverty globally (ILO 2022h). They are the most impacted because of their vital ties with land and water resources, especially people living in small island developing States (UNESCAP and Government of Samoa 2020). Indigenous peoples possess the traditional knowledge of using environmental resources, adapting to and mitigating climate risks. However, abusive occupation of land and exploitation of natural resources, which increase the impact of climate change, threaten the survival of those communities.

Social protection can play a role in remedying structural injustices and displacement. The cultural appropriateness of the policies developed in consultation with the peoples concerned, and the respect for their collective rights to their livelihoods and land, need to be included (Errico 2018; Cooke et al. 2017). For instance, Paraguay's non-contributory pension exempts indigenous people from proving their poverty status, recognizing the multiple and specific vulnerabilities they face, including in the context of climate change (Errico 2018).

Building resilience to health security threats exacerbated by the climate crisis

Changes in temperature and precipitation patterns due to climate change impact animal life in various ways. For instance, mosquitoes, ticks and bats may carry and transmit pathogens to humans, causing malaria, dengue, Rift Valley fever, Lyme disease and other infectious diseases to spread more easily and reach new geographic areas (Mora et al. 2022). The consequences of climate change, such as human displacement, insufficient water and difficulties accessing it, difficulties accessing nutritious food in certain areas, and the concentration of populations in areas with resources, are also anticipated to impact current transmission pathways for a wide range of pathogens affecting human health (Mora et al. 2022; McMichael 2015). Therefore, climate change is increasing health security threats. Consequently, prevention, preparedness and response need to be strengthened and rethought in order to overcome new challenges (Khor and Heymann 2021; Carlson, Albery and Phelan 2021).

Prevention, preparedness and response strategies should include social protection and support the building of sustainable health and social protection systems (USP2030 2023b). For example, social protection systems that achieved high population coverage before the COVID-19 crisis responded more effectively to the pandemic and other epidemics than those with narrow coverage (ILO 2021q). The most affected population groups were also disproportionately represented in social protection coverage gaps – typically informal workers, women, displaced populations, older persons, persons living with disabilities and chronic conditions, migrants and essential workers. This demonstrates the urgent need for protection to be made universal (ILO 2023x). Immediate responses also tended to offer little coverage for non-nationals (ILO 2020f).

A global review of the evidence on the COVID-19 response shows that social protection schemes played a positive role in cushioning the socioeconomic impacts of public health and social measures, especially when adequate benefits levels were provided (WHO, forthcoming a). Similarly, the pandemic illustrated the need for comprehensive systems offering social protection benefits that can contribute significantly to prevention, preparedness and response - such as sickness benefits. Unfortunately, these benefits currently exhibit large coverage gaps (see section 4.2.3), which were highlighted during the N1N1, SARS and COVID-19 pandemics. Indeed, sickness cash benefits are central for ensuring compliance with public health and social distancing measures, and for ensuring income security when quarantining and halting disease transmissions (ILO 2020e; James 2019).

As a new international legal instrument on pandemics is on the agenda of the United Nations, it is important to underline that building resilient societies prepared to face health security threats requires closely coordinated universal health and social protection systems. Such systems are codependent and core enablers of effective prevention, preparedness and response. The global financing put at the disposal of countries to foster prevention, preparedness and response should act as a trigger in this respect and avoid the pitfalls of the humanitarian-development nexus, which does not necessarily lead to the long-term strengthening of systems. This is the only way to secure rights-based predictable social protection, which contributes to the resilience of individuals and societies to health security threats.

2.2 Social protection as an enabler for climate change mitigation and environmental protection

Ambitious climate change mitigation and environmental policies are necessary to reduce emissions towards net zero and protect the planet, its biodiversity and natural resources. Transitioning to more environmentally sustainable societies and economies can deliver positive economic and social outcomes. In fact, the combined shift to low-carbon and circular economies, and sustainable agriculture, could create millions of new decent jobs worldwide (ILO 2023c). However, the prospective gains are

Transitioning to more resilient and environmentally sustainable societies and economies can deliver positive economic and social outcomes. not automatic and, unless the necessary policy measures are taken, some mitigation and other environmental policies may lead to temporary disruptions of incomes, jobs and livelihoods.

Social protection plays an essential enabling function in the transition, not only ensuring that no one is left behind, but also actively helping people to reap its benefits. First, it can cushion people from potential adverse

welfare impacts of climate policies such as carbon pricing or subsidy reform. Second, particularly when integrated with active labour market, skilling and lifelong learning policies, social protection helps transition workers affected by the transition to greener employment opportunities. Third, social protection can make direct contributions to mitigation objectives through the greening of its own operations, including pension fund investments and through the incentivization of conservation and sustainable practices.

As part of a comprehensive and integrated just transition policy frameworks, social protection can ensure that environmental, economic and social objectives are pursued simultaneously. When combined with effective social dialogue and communication with social partners and the public, social protection measures can be instrumental in acquiring public and political acceptance for the implementation of the mitigation and environmental protection policies required to tackle the climate crisis, pollution and biodiversity loss.

2.2.1 Cushioning distributional effects and providing compensation for carbon pricing, including fossil fuel subsidy reforms

A range of climate change mitigation policies will be required to achieve emission reduction goals, including national regulations, (green) subsidies and carbon pricing. While necessary from an environmental perspective, when unaddressed, these policies can have negative financial implications, particularly for low-income households (Malerba et al. 2022).

This section focuses on the enabling role of social protection for two related, yet distinct mitigation policy options:

- the reform of explicit fossil fuel subsidies (a type of energy subsidy); and
- direct carbon pricing measures, such as carbon taxes or emission trading schemes (sometimes referred to as implicit fossil fuel subsidies, as their absence subsidizes the usage of fossil fuels).

Both policy reforms are designed to lead to an increase in the prices of carbonintensive goods and services, thereby creating price signals to incentivize efficient energy usage and the channelling of investment towards cleaner energy technologies (Fugazza



A range of climate change mitigation policies will be required to achieve emission reduction goals, including national regulations, (green) subsidies and carbon pricing. Forthcoming; Auffhammer et al. 2016). Both options also create additional fiscal revenues or savings, some of which could be redistributed to households through the social protection system to cushion the impact of price increases. According to the IMF, such reforms could result in CO₂ emissions of 43 per cent below baseline levels by 2030, raise revenues worth 3.6 per cent of global GDP, and prevent 1.6 million deaths caused by air pollution annually¹³ (Black et al. 2023).

Explicit fossil fuel subsidies

In 2021, the Glasgow Climate Pact called on countries to "phase out ... inefficient fossil fuel subsidies", which amounted to more than US\$1 trillion of consumer fossil fuel subsidies in 2022 (IEA 2022; 2023).

Fossil fuel subsidies are generally regressive (that is, they are more beneficial for richer households, which tend to spend more on energy-related goods and services). At the same time, the uncompensated removal of such subsidies can have severe negative impacts on low- and middleincome households due to the ripple effect of higher energy prices on food and fertilizer prices (Dorband et al. 2019). It is estimated that the uncompensated removal of fossil fuel subsidies would significantly increase poverty rates in Ecuador, Nigeria, Peru and Tunisia (Malerba et al. 2022; Rentschler 2016; Schaffitzel et al. 2020).

Between 2015 and 2020, over 53 countries undertook fossil fuel taxation and subsidy reform efforts (Baršauskaitė 2022), many of which were accompanied by expansions of the social protection system (Malerba 2023). For example, Morocco gradually phased out most fuel subsidies between 2011 and 2015 and invested part of the savings to expand the coverage of (a) a cash benefit for children from 80,000 to 466,000 families and (b) the social health insurance scheme from 5.1 million to 8.4 million people.

Experiences from countries, including Egypt and Jordan, have shown that when compensation is targeted at only a small number of extremely poor households, it may not effectively prevent welfare losses (Malerba 2022; Abdel Naeem Mahmoud 2018; FES 2023). Approaches that also consider the impacts on the near-poor and the middle class promise to be more effective at preventing spikes in poverty and ensuring more widespread public support for reforms (Shang 2021).

The most appropriate response needs to consider the existing poverty and vulnerability situation, energy consumption patterns, and the existing gaps of the social protection system. Where coverage is already high, increasing the adequacy of existing benefits may be the most effective option, while in other contexts, an expansion of coverage or even comprehensiveness by introducing new schemes could be an alternative (Gasior et al. 2023). Györi and Soares (2018) estimated that, in Tunisia, half of the savings from the removal of fossil fuel and food subsidies could allow for the introduction of a universal child benefit that would be significantly more efficient and effective at preventing and reducing poverty than the subsidies.14

In fact, the progressive removal of fossil fuel subsidies represents an opportunity to close protection gaps and reduce poverty levels even below baseline levels (Malerba 2022; Schaffitzel et al. 2020). Such reforms can create additional fiscal space to expand coverage and adequacy of social protection floors (see section 3.4.3), thereby contributing to the reduction of vulnerability to climate risks and enhancing people's coping and adaptive capacities (see section 2.1). However, before removing fossil fuel subsidies, the capacity of existing social protection systems to counteract the adverse impacts of these reforms on the most vulnerable households needs to be carefully assessed.

Compensation through social protection systems is instrumental for successful subsidy reforms. Many attempts to reform fossil fuel subsidies have resulted in social unrest. In Ecuador, subsidies had to be reinstated after large-scale protests,

which erupted partly because promised compensatory social welfare payments were not delivered on time (IISD 2019). Effective communication campaigns, the delivery of compensation in advance, and engagement in social dialogue can increase the acceptability and transparency of reforms.



Compensation through social protection systems is instrumental for successful subsidy reforms.

¹³ Explicit subsidies made up about 18 per cent of the total spending on fossil fuel subsidies, while implicit subsidies (the absence of carbon pricing measures) constituted 72 per cent of the total spending.

¹⁴ Removing food subsidies, however, raises serious questions (UNESCWA 2019).

Direct carbon pricing schemes

The world is at the beginning of its carbon pricing journey and thus far, mostly industrialized countries have implemented a carbon tax or an emissions trading system, most at relatively low prices. In most cases, households and firms are compensated by lowering other taxes, including income taxes (Marten and Dender 2019). Only a handful have recycled revenues from carbon pricing instruments through the social protection system. For example, Switzerland redistributes two thirds of carbon tax revenues to finance rebates on mandatory health insurance premiums (Mildenberger et al. 2022).

In countries with higher levels of informality and weaker income tax systems, the expansion of non-contributory schemes may be a more appropriate option for compensating people for higher prices as a result of direct carbon pricing schemes (Malerba 2023). However, given that such schemes have not yet been implemented outside industrialized economies and a small number of emerging economies, there is no experience of this to date. Nevertheless, many of the lessons learned with regard to the role of social protection in fossil fuel subsidy reforms also apply to direct carbon pricing schemes:

- Compensation for welfare losses through the social protection system can be an effective way to prevent spikes in poverty and gain acceptability among the population.
- Social protection responses that target only the poorest risk being insufficient for cushioning welfare losses: modelling the impact of a carbon tax in Brazil shows that, given current targeting errors, about 20 per cent from the poorest quintile and 50 per cent from the second poorest quintile would experience a net loss if compensation were poverty-targeted (Vogt-Schilb et al. 2019).
- Redirecting revenues from carbon pricing schemes to the social protection system is an important opportunity for climate justice: taxing those who drive emissions in order to expand social protection to support the adaptation of those who are more vulnerable (see section 3.4.3).

2.2.2 Facilitating a just transition for workers and enterprises

Structural transformations in the context of a just transition

The climate crisis calls for the revisiting of structural transformation pathways that curb greenhouse gas emissions, preserve natural resources and reduce climatic volatility for societies and economies (see box 2.13).

In 2019, ILO estimates indicated that a sustainable energy transition and development of the circular economy could eliminate 78 million jobs while creating 103 million jobs globally (ILO 2019c). More recent ILO data suggests similar trends in the Middle East and North Africa (ILO 2023u), and in Latin America and the Caribbean (Saget, Vogt-Schilb and Luu 2020). These findings suggest overall net positive employment effects, but they mask potential labour market disruptions of the transition. Mismatches in labour demand and supply - that is, temporal, spatial, sectoral and skills - can create frictional and structural unemployment, and asset and livelihood loss. This exacerbates poverty, inequalities and social tension (Gilmore and Buhaug 2021; Malerba 2022; IPCC 2018; HelpAge International 2021).

Economic and environmental policies must be consistent at all levels (see box 2.13), alongside social protection and active labour market policies. This will ensure that the emerging green sectors foster formal, productive and decent employment, and it will reduce poverty and inequalities, particularly in developing countries.

Employment services, lifelong learning programmes, public employment schemes, entrepreneurship incentives, and job or wage subsidies are examples of activation measures that complement unemployment benefits and other

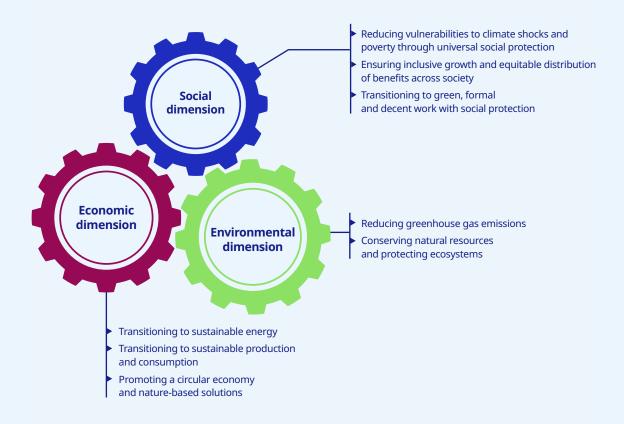
social protection interventions to effectively support transition to sustainable economies (ILO 2017a). Such integration fosters fair, inclusive and socially just structural changes in production and consumption patterns, while securing public acceptance of environmental policies (ILO 2015c; 2017a; Pignatti and Van Belle 2018). Social protection measures, especially when complemented



Economic and environmental policies must be consistent at all levels, alongside social protection and active labour market policies.

Box 2.13 Structural transformations in the context of a just transition

Historically, structural transformations towards higher-productivity and value-added economic sectors coincided with increased GDP, consumption and greenhouse gas emissions. Yet, today, governments are called to plan and establish pro-employment macroeconomic frameworks and integrated employment, social protection and industrial policies supporting structural transformation for climate action (2023q).



Many least developed countries face dilemmas due to reliance on economic activities based on natural resources. Achieving environmentally sustainable economies in these countries requires fair international trade policies and global value chains, cooperation in technology transfers, and the combating of illicit financial flows, notably in the mineral sector. Amid an urgent transition to sustainable production, some middle-income countries risk the "middle-income trap", which is associated with insufficient productivity levels and limited structural transformation opportunities within a highly competitive global market.

Sources: ILO (2015c; 2023q; 2022l; 2022j), UNCTAD (2022), Scheja and Kim (forthcoming), Bischler et al. (forthcoming) and Rodrik (2017).

by activation programmes, mitigate job and income losses associated with phasing out polluting industries. This stabilizes consumption (ITUC 2018)¹⁵ and minimizes the ripple effects of environmental protection measures on communities and local businesses (Malerba 2022). By ensuring income security and business productivity and continuity, social protection measures enable workers and enterprises to smoothly navigate structural transformations. They manage the risks of adapting production models and taking up new jobs, thus preventing negative coping strategies such as terminating employees, accepting low-quality jobs, and child labour (Bischler et al. forthcoming; Peyron Bista and Carter 2017).

Investing in human capabilities and facilitating transition to decent jobs in environmentally sustainable economies

Despite a net job gain in the medium term, mitigation and environmental protection policies will adversely affect employment and earnings due to changing skills demands. Such policies will particularly impact lower-skilled workers and those in the informal economy, who lack human and physical capital and social protection that can facilitate their transition to new jobs (Dercon 2014; Montt, Fraga and Harsdorff 2018; Klenert et al. 2018; ILO 2024k). Male-dominated sectors such as transport, energy, agriculture and construction, receive more attention in just transition discussions than female-dominated sectors such as textile and garments, despite the latter contributing to 6-8 per cent of total greenhouse gas emissions (Sharpe, Dominish and Martinez-Fernandez 2022; UN Women and UNIDO 2023). Prioritizing equal access to job placement, skills programmes, social protection, and developing the care sector, are crucial for ensuring women's participation in green jobs (ILO 2019c; 2024a).

Linking social protection with active labour market policies can cushion the adverse impacts of climate policies on employment while enabling a transition to environmentally sustainable economies (ILO 2023f; 2023y; UN Women and UNIDO 2023) (see section 4.2.6). For instance, linking unemployment insurance with job placements and reskilling programmes has proven effective in supporting the energy transition (see box 2.14). Thus, a just transition requires expanding social protection, including through tax-financed schemes, and strengthening active labour market policies to ensure inclusivity and formalization, especially for workers in informal employment and new labour market entrants (Bischler et al. forthcoming; McKenzie 2017; Györi, Diekmann and Kühne 2021) (see section 3.2.2)

Modernizing and greening industries, such as waste management, requires government intervention, including social protection, to formalize and provide decent

Linking social protection with active labour market policies can cushion the adverse impacts of climate policies on employment while enabling a transition to environmentally sustainable economies.

jobs for 20 million waste pickers globally. These workers are primarily women, children, older persons and migrants, who work with low pay and high exposure to hazardous products (WIEGO 2017; UN Women and UNIDO 2023).

Emerging green jobs, often linked to new technologies, offer opportunities for youth to transition from school into decent work. Equipped with necessary green skills and supported by social protection while seeking and starting employment, youth can act as catalysers of an environmentally sustainable future (ILO 2023y; 2024j). In addition, child benefits for young people over 18 years old can provide income security for young people while in education/training and help foster the formation of capabilities.

Ensuring coherence between employment, social protection and labour migration policies enables migrant workers to seize new and climate-resilient opportunities, and to actively contribute to the environmental transition, in a context of increasing labour shortage, including in natural resourcebased sectors (ILO 2022g; 2024d; IMF 2018).

Protection of the environment requires an adjustment of agriculture, forestry and fishery production (ILO 2022b). For example, fishing restrictions call for the extension of social protection to fishers, by relaxing eligibility criteria for unemployment benefits (China¹⁶) or expanding in-kind social protection (Bangladesh) during fishing bans, providing temporary

¹⁵ Examples are provided in section 4.2.6.

¹⁶ See <u>http://www.moa.gov.cn/jg/leaders/lingdhd/202201/t20220117_6387077.htm</u>.

Box 2.14 Linking social protection and active labour market policies for a just transition

In 2018, as part of the decision to phase out coal mining, the Government of Spain and the trade unions agreed on early retirement for miners who were over 48 years of age and those who had paid social security contributions for 25 years, as well as the local re-employment of miners in environment restoration work and their reskilling for the green industry, while receiving unemployment benefits.

The Philippines' Social Security System and Technical Education and Skills Development Authority collaborate to conduct job orientation, including in the circular economy, and to promote the social insurance registration of workers enrolled in the programmes run by the Technical Education and Skills Development Authority.

To cope with both a severe drought in 2011 and a decline in international coffee prices, the Red de Protección Social (Social Protection Network) scheme of Nicaragua provided cash benefits to secure the income of small coffee producers and counselling services to diversify their agricultural activities.

Sources: Furnaro et al. (2021); ILO (2017a); Maluccio and Flores (2005); WRI (2021b).

public employment (Mexico and South Africa) or combining non-contributory benefits with skills development measures for them to start small businesses, such as fruit and vegetable production (for example, Samoa and South Africa). Social protection measures, together with public employment or entrepreneurship programmes – complemented by agriculture and livestock insurance – help farmers to cope with the impact of climate policies on income, and to diversify their livelihoods and economic activities (FAO 2024). This enhances productive risk-taking in decisions related to agriculture production changes (Tirivayi, Knowles and Davis 2016; Jaspars, O'Callaghan and Stites 2008; Machado and Goode 2022).

Supporting small enterprises and livelihoods

Mitigation and environmental protection policies, can disrupt local economies and enterprises, especially micro, small and medium-sized enterprises (accounting for over 90 per cent of businesses) that are major job creators in developing countries (UNEP 2021; ILO 2019d; 2022e; 2023y). Adapting production models to comply with environmental regulations represents significant risks and costs for micro, small and medium-sized enterprises, especially given the limited technology and research and development in such countries (Ulrichs et al. 2019; Machado and Goode 2022; Davies, Oswald and Mitchell 2009). Social protection systems, which pool risks through collective financing, offer a cost-effective mechanism to support enterprises in navigating the green transition. For instance, providing access to a simplified social protection and tax regime for micro, small and medium-sized enterprises can support formalization, improve access to finance for technology investments, and enhance their economic resilience to transformations (Gaarder et al. 2021). Tripartite efforts in several countries (for example, Cambodia, the Lao People's Democratic Republic, Nepal, Sao Tome and

Principe, and Zambia) included the extension of social security to informal economy workers, as part of broader strategies to promote the transition of micro, small and medium-sized enterprises to environmentally sustainable activities (ILO 2013a; 2014a; 2015b; 2018b; 2019b; 2021l; 2021n).

By collectively financing risks and linking with broader policy framework, social protection enables micro, small and medium-sized enterprises to enhance productive risk-taking behaviour and competitiveness (World Bank 2003; ILO 2021i).

This approach is central for improving workers' resilience and ensuring business continuity and sustainable growth when facing challenges related to just transition efforts.

By collectively financing risks and linking with broader policy framework, social protection enables micro, small and mediumsized enterprises to enhance productive risk-taking behaviour and competitiveness.

Box 2.15 The role of social dialogue in mitigation policies

Social partners in consultation with relevant stakeholders have played a crucial role in the coal transition. In Germany, the Coal Commission, which was established in 2018 by the Government, together with industry and trade unions representatives, to facilitate the coal phase-out by 2038, negotiated an agreement that protected workers through retraining and early retirement by means of a special adjustment fund. Workers' rights and compensations were detailed in a contract between the State and coal plant operators, and early retirement was later enshrined in the law.

Source: Furnaro et al. (2021).

The role of social dialogue

Tripartism and social dialogue are indispensable for designing and implementing social protection systems that address climate change challenges and the adverse impacts of mitigation efforts (see box 2.15). Collective bargaining, facilitated by

Tripartism and social dialogue are indispensable for designing and implementing social protection systems that address climate change challenges and the adverse impacts of mitigation efforts. bipartite and tripartite social dialogue, help craft national agreements to manage decarbonization impacts.

Social dialogue is essential for a just transition. In South Africa, the framework of the tripartite National Economic Development and Labour Council emphasizes the need for comprehensive social security reform for a just transition of the largest stateowned electric public utility (Nedlac 2020). In Colombia, the National Association of Entrepreneurs facilitated discussions on energy and mining transition among industry leaders, trade unions

developed strategies for ensuring fair energy access, and the Government committed to a Green Jobs Pledge to support workers and employers with regard to green growth and a just transition, through social dialogue inclusive of indigenous peoples (Government of Colombia 2019).

2.2.3 Directly contributing to climate change mitigation and environmental protection

Mitigating the climate crisis ultimately requires major changes to production, energy use and consumption patterns. While the onus for change rests in other policy areas, there are ways that social protection can contribute to mitigation efforts, especially when it comes to pension fund investments and interventions to protect and restore ecosystems. In fact, all social protection institutional operations can be greened further (ISSA 2023b). For instance, institutions running health and social care schemes can use their purchasing power in procurement to support the greening of those services (ILO 2024f).

Accelerating the (green) transition through pension fund greening

As counterintuitive as it might sound, the fact parts of social protection have been, and continue to be, a major contributor to global heating is inconvenient. Pension funds (both private and public) with large-scale investments in the fossil fuel industry contribute to greenhouse gas emissions.¹⁷ While the returns from these investments have long financed old-age income security, they have left the children and grandchildren of their recipients facing a perilous future and inheriting a severely compromised planet.

Too little attention has been given to the opportunity of pension fund greening, which can also have considerable potential for influencing

¹⁷ "Data Point: Is Your Pension Funding the Climate Crisis?", The Economist, 11 April 2022.

how global capital shapes the destiny of our planet (see section 4.3.1). The scale of pension assets cannot be ignored. They amount to US\$53 trillion in the OECD alone (OECD 2023), representing a large tranche of the global capital market which was estimated at US\$231 trillion at the end of 2022 for fixed income securities and equities (SIFMA 2023). Public pensions alone accounted for around US\$22 trillion in 2021 (UNCTAD 2023), approximately 10 per cent of global capital. Pension assets are one of the largest singular blocks of capital in the world, can support the wider "imperative of definancialization" (Standing 2023) and can diminish the viability of fossil fuels. How these funds are invested can reconfigure and potentially transform socio-economic arrangements for greater sustainability, by shifting investments from the fossil fuel industry to the emerging green and renewables sector, thereby contributing to a transition away from fossil fuels and to the accelerated implementation of climate change mitigation.

Today, public pension funds are greening and implementing "environmental, social and governance" practices, as illustrated by the investment activity of the national public pension funds of Canada and Denmark. Both institutions

More effort in divestment and greening public pension funds is surely overdue. Both self-interest and altruism (a viable planet for future generations) can be dual motivations.

have divested from emissioncontributing companies and invested in green fund portfolios (UNCTAD 2023, see boxes 4 and 5). There are also subnational examples. The New York City Pension Funds have been steadily divesting from fossil fuels since 2015 and have increasingly invested in climate solutions (such as renewable energy, energy efficiency, pollution prevention and low-carbon buildings). In 2021, the Funds committed to achieving net zero by 2040 and established safeguards against any greenwashing risks (New York City 2023).

More effort in divestment and greening public pension funds is surely overdue. Both self-interest (reliable return on investment as evidenced in section 4.3.9) and altruism (a viable planet for future generations) can be dual motivations for workers' and employers' organizations and civil society organizations to mobilize to ensure these funds support mitigation and ensure fossil fuelfree old-age income security. Moreover, given that these funds are mainly nestled in wealthier countries, from a North–South equity perspective with greater recognition of how the investment of these funds adversely affect billions of people – often on the front line of the climate crisis and lacking access to social protection – should be a basic human concern.

Supporting the preservation and restoration of carbon sinks and natural resources through social protection

Payment for ecosystem services, conditional cash transfer schemes and public employment programmes can be designed to simultaneously fulfill social protection (i.e., providing income security) and environmental objectives (ILO, UNEP, and IUCN 2022). For example, the *Proyecto Pobreza, Reforestación, Energía y Cambio Climático* (Poverty, Reforestation, Energy and Climate Change Project)¹⁸ in Paraguay links the basic Tekoporã¹⁹ conditional cash transfer to additional payments if the recipients achieve positive agroforestry production outcomes. This is expected to not only increase agricultural productivity and incomes, but also protect forests, which act as important carbon sinks (Györi, Diekmann and Kühne 2021).

Such initiatives can also benefit from traditional knowledge of indigenous communities on environmental use and protection (Errico 2018; Cooke et al. 2017). In Brazil, a conditional cash transfer incentivizes owners and users of natural resources (for example, forests or water) to conserve or use them in a sustainable manner. Between 2011 and 2016 the Bolsa Verde programme provided additional benefits to 31,621 participants of the Bolsa Família programme in the Amazon region, and was conditional on their non-participation in environmentally harmful activities such as illegal logging (Schwarzer, van Panhuys and Diekmann 2016; McCoshan 2020). Analyses indicate that, thanks to the programme, deforestation was 22 per cent lower compared to other areas (Wong et al. 2024), and substantial carbon reduction benefits were created

¹⁸ See <u>El Proyecto Pobreza, Reforestación, Energía y Cambio Climático.</u>

(McCoshan 2020), contributing to the protection of the Amazon, which is a major global carbon sink. The programme was reinstated in 2023 with a renewed focus on combining poverty reduction and sustainable resource use objectives.²⁰

Furthermore, public employment programmes also increasingly focus on environmental asset creation and protection, such as Ethiopia's Productive Safety Net Programme, which was shown to contribute to carbon sequestration by building soil organic carbon and increasing biomass (Tefera et al. 2015). Particular attention needs to be paid in designing and implementing public employment programmes to ensure decent work, gender-responsiveness and respect for human and labour rights (Ravallion 2016; Sengupta 2019; Razavi et al., forthcoming a; McCord et al., forthcoming).

In some contexts, social protection, even without explicit environmental objectives, can also lead to greener results. Income support can reduce the need to engage in unsustainable practices, such as deforestation, and enable people to consume market-sourced goods rather than directly tapping into natural resources. For example, Indonesia's Keluarga Harapan social assistance programme was found to reduce forest cover loss by between 16 and 30 per cent. (Ferraro and Simorangkir 2020).

While conditionality in social protection is not without problems (Cookson 2018; Orton 2014), such schemes can have a positive impact on afforestation rates and reducing ecologically harmful activities. However, they need to go to scale, as some have already, in order to achieve a widespread and sustainable positive impact (Schwarzer, van Panhuys and Diekmann 2016). At the same time, care must be taken to address structural inequalities that are the principal drivers of



Care must be taken to address structural inequalities that are the principal drivers of ecological damage, such as consumption patterns, luxurious lifestyles and polluting industries.

ecological damage, such as consumption patterns, luxurious lifestyles and polluting industries (ISSA 2014, see box 2.8). This means directly addressing structural inequalities that are the root cause of the crisis and not shifting the onus of environmental conservation onto communities who have least contributed to it and who are already vulnerable themselves.

²⁰ See <u>https://www.gov.br/mma/pt-br/composicao/snpct/dpct/bolsa-verde</u>.

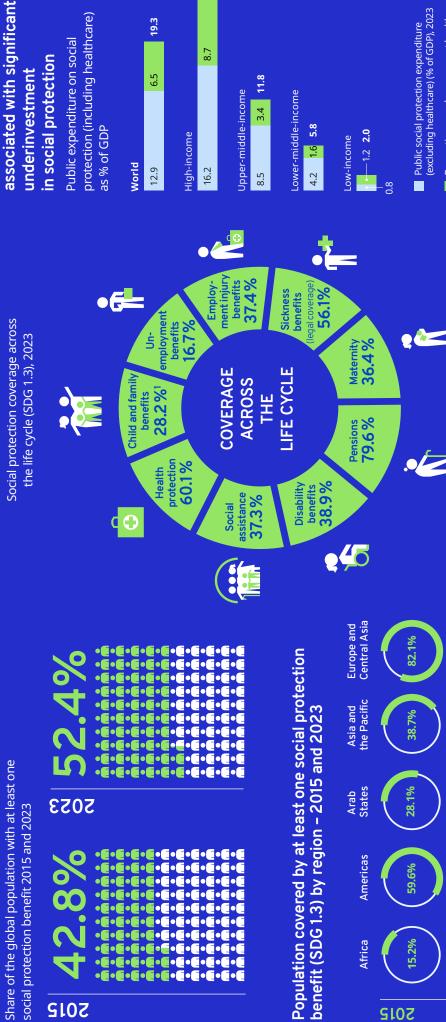
Figure 2.3a The state of social protection worldwide: Coverage is increasing but too slowly

Trends in global effective coverage rates 2015 and 2023

Protection gaps are

Coverage rates vary by life-cycle risk

Share of the global population with at least one



24.9

8.7

19.3

Note: Due to rounding, some totals may not correspond to the sum of the separate figures.

85.2%

53.6%

30%

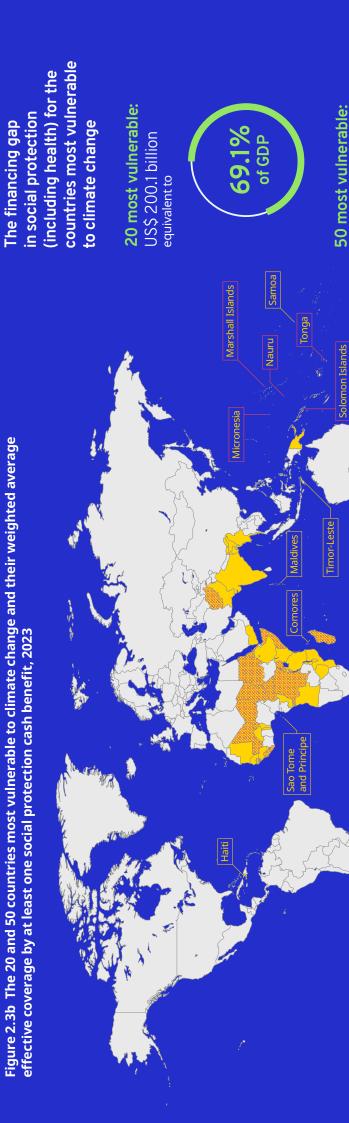
68.2%

19.1%

2023

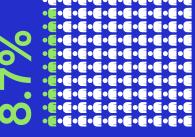
Source: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; WHO; national sources. ¹ This rate refers to effective coverage for children aged 0 to 15. The rate for children aged 0 to 18 is lower at 23.9 per cent.

Domestic general government health expenditure (% of GDP), 2021





in the 50 most vulnerable countries Effective coverage





10.5%

US\$ 644 billion

Solomon Islands

equivalent to

of GDP

衬 🔲 20 most vulnerable countries and territories

Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by population group.

Boundaries shown do not imply endorsement or acceptance by the ILO. <u>See full ILO disclaimer</u>.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the SSI: <u>ISSA Social Security Programs Throughout</u> the World; <u>ILOSTAT</u>; national sources and <u>Notre Dame Global Adaptation Initiative Country Index</u>.



Getting the basics right: Closing protection gaps and strengthening systems

- 3.1 Where do we stand in building social protection systems?
- 3.2 Coverage trends: Positive but too slow
- 3.3 Comprehensive and adequate social protection
- 3.4 Social protection expenditure and financing
- 3.5 Adapting and strengthening institutional and operational capacities



- For social protection systems to fulfil their potential in responding to climate change and addressing life-cycle risks, they must be reinforced and adapted. Additional efforts are needed to ensure universal coverage and comprehensive and adequate protection. Adaptive social protection requires actions to enhance the resilience and responsiveness of social protection systems during crises, including those caused by climate change.
- For the first time, more than half of the world's population (52.4 per cent) are covered by at least one cash social protection benefit (SDG indicator 1.3.1), representing an increase from 42.8 per cent in 2015. While this constitutes important progress, an alarming 3.8 billion people remain entirely unprotected. If progress were to continue at this rate at the global level, it would take another 49 years until 2073 for everyone to be covered by at least one social protection benefit.
- The world is currently on two very different and divergent social protection trajectories: high-income countries are edging closer to enjoying universal coverage (85.9 per cent), and upper-middle-income countries (71.2 per cent) and lower-middle-income countries (32.4 per cent) are making large strides in closing protection gaps. At the same time, the coverage rates of low-income countries (9.7 per cent) have barely moved since 2015.
- Countries at the front line of the climate crisis and most susceptible to its hazards are woefully unprepared. In the 50 countries that are most vulnerable to climate change, only 25 per cent of the population are effectively covered, leaving 2.1 billion people facing the intensifying impacts on livelihoods, incomes and health without any social protection. In the 20 most vulnerable countries, less than 10 per cent of the population is covered, leaving 364 million people wholly unprotected.
- Gender gaps in global legal and effective coverage remain substantial. Social protection systems must become more gender-responsive and address inequalities in labour markets, employment and society at large.
- Increasing the adequacy of social protection is paramount to realize its potential to prevent and reduce poverty, address inequalities and enable a dignified life. Ensuring adequate benefits across the life cycle is key to guaranteeing universal social protection and striving towards higher benefit levels. The climate crisis will increase human needs, and require a commensurable increase of the range and level of benefits to address new and transformed risks.
- Countries spend on average 19.3 per cent of their GDP on social protection (including health), but this figure masks staggering variations. High-income countries spend on average 24.9 per cent, upper-middle-income countries 11.8 per cent, lower-middle-income countries only 5.8 per cent, and lowincome countries a mere 2.0 per cent of their GDP.

- Financing gaps in social protection are still large. To guarantee at least a basic level of social security through a social protection floor, lowermiddle-income countries would need to invest an additional 6.9 per cent of their GDP and upper-middle-income countries 1.4 per cent. Low-income countries would need to invest an additional US\$308.5 billion per year, equivalent to 52.3 per cent of their GDP, due to their large social protection coverage gaps and low GDP, which will not be feasible in the short term without international support.
- Options exist to fill financing gaps while tackling climate inequalities within and between countries. This includes taxing those who consume and produce more carbon emissions (including by removing subsidies) and redistributing revenues through social protection. International climate finance, including for loss and damage, should be used to strengthen the resilience of the most vulnerable countries, including through social protection.
- Social protection systems must be adapted to face the challenges posed by the climate crisis. Adaptive social protection requires increased coherence and coordination between social protection and climate policies, costing and financing strategies that consider climate risks, flexible scheme design and investments to enhance the resilience and responsiveness of operations and benefit delivery.

3.1 Where do we stand in building social protection systems?

In the face of the climate crisis, establishing permanent comprehensive provision in the form of universal and adaptive social protection systems is indispensable to prepare for the escalating impacts it will inflict. The alternative – scrambling to assemble last-minute, residual and suboptimal responses that do not reach everyone – is simply not a rational and responsible way to proceed. Ultimately, progress towards social protection for all is elapsing too slowly to protect people against ordinary life-cycle risks and the looming challenges ahead, whether driven by the climate crisis or by other factors.

Many countries have made significant progress in strengthening their social protection systems (ILO 2021q). The massive policy response during the COVID-19 pandemic showed the power of social protection to contain crises and respond to human needs, with the large majority of countries implementing social protection measures. However, many of these measures were only temporary (Orton, Markov and Stern-Plaza 2024). Not making them permanent was a lost opportunity to strengthen systems, especially in light of the overwhelming evidence that countries with comprehensive systems already in place could respond quickly and more effectively to a massive covariate shock (ILO 2021q).

For social protection systems to effectively address both life-cycle and climate-related risks, they need to get the basics right: it is necessary to make sure that (a) everyone is protected and able to access benefits when needed (section 3.2), (b) this protection is comprehensive and adequate (section 3.3), (c) systems are sustainably and equitably financed (section 3.4), and (d) the essential institutional and operational capacities are established and adapted to address climate and transition impacts (section 3.5).

3.2 Coverage trends: Positive but too slow

3.2.1 Global and regional overview of social protection coverage (SDG indicator 1.3.1)

The world has surpassed an important milestone: for the first time, more than half the world's population (52.4 per cent) are covered by at least one social protection benefit, representing an increase of 9.6 percentage points since 2015 (see figures 3.1 and 3.2). Yet, the remaining 47.6 per cent – as many as 3.8 billion people – are left unprotected, without access to any social protection.

It is particularly concerning that in the 50 countries most vulnerable to climate change, only 25 per cent of the population is covered, leaving 2.1 billion people unprotected (see figure 2.3b). In the 20 most vulnerable countries, less than one in ten persons is covered (8.7 per cent), leaving 364 million persons to fend for themselves. This prompts great concern and shows that much of the world is unprepared and the most vulnerable populations on the front line of the climate crisis are woefully unprotected. The world is on a divergent course (see figure 3.2). High-income countries continue to close protection gaps, making steady and substantial progress, with coverage increasing over the period 2015–23 from 81.0 per cent to 85.9 per

cent. Lower-middle- and uppermiddle-income countries have achieved marked improvement in coverage rates, which have increased from 20.9 per cent to 32.4 per cent and 56.5 per cent to 71.2 per cent, respectively. However, in low-income countries, coverage has barely moved, with only 9.7 per cent of the population protected, which is deeply concerning. In the face of widespread repercussions of climate change and life-cycle risks, the extension of coverage should be of highest priority, which

will require international support, including a more enabling global financial architecture that can support national efforts in expanding fiscal space.

It is particularly concerning that in the 50 countries most vulnerable to climate change, only 25 per cent of the population is covered, leaving 2.1 billion people unprotected.

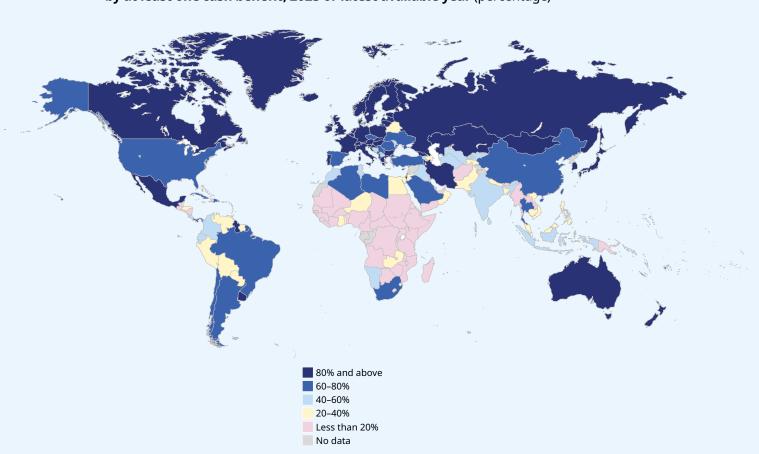


Figure 3.1 SDG indicator 1.3.1 on effective social protection coverage by at least one cash benefit, 2023 or latest available year (percentage)

Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

While progress made since 2015 is promising, it remains too slow. At the current rate, it would take another 49 years – until the year 2073 – for everyone to be covered by at least one social

At the current rate, it would take another 49 years – until the year 2073 – for everyone to be covered by at least one social protection benefit. protection benefit, and even longer to reach adequate and comprehensive protection. Accelerating progress is essential for current and future generations, and the experiences of countries that have made swift progress in a short space of time – such as Finland in the early twentieth century and more recently China, Oman, South Africa and Zambia – demonstrate that it is possible. Though, this requires significant investment, determination and political will from both national policymakers and international actors.

Global and regional coverage trends between 2015 and 2023 (including SDG indicator 1.3.1) show some, yet still insufficient, progress, leaving billions unprotected or inadequately protected (see figures 3.2 and 3.3).

- 28.2 per cent of children globally receive a family or child benefit, up by 6.1 percentage points since 2015 (section 4.1).
- 36.4 per cent of women with newborns worldwide receive a cash maternity benefit, up by 6.8 percentage points (section 4.2.2).

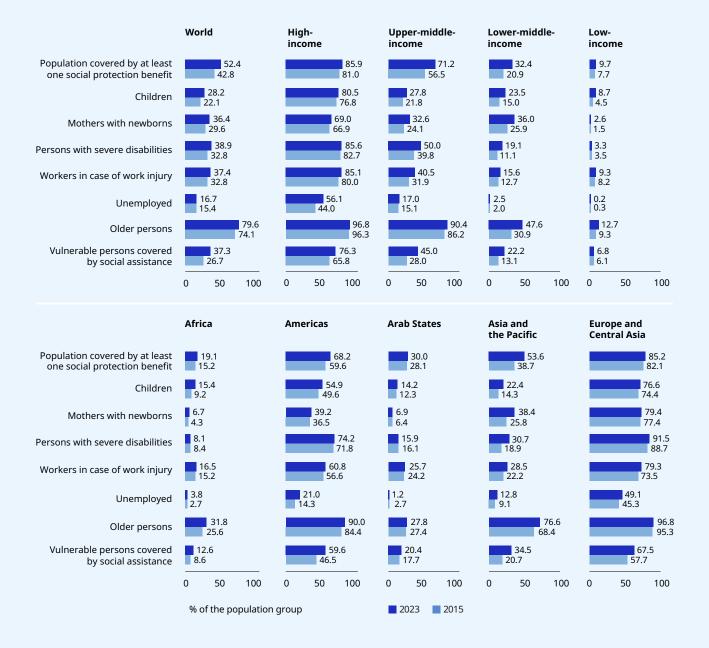


Figure 3.2 SDG indicator 1.3.1: Effective social protection coverage, global, regional and income-level estimates, by population group, 2015 and 2023 (percentage)

Notes: See Annex 2 for a methodological explanation, and Annex 5 for more detailed data. Global and regional aggregates are weighted by population group. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024; <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

- 38.9 per cent of people with severe disabilities receive a disability benefit, up by 6.1 percentage points (section 4.2.5).
- 37.4 per cent of people enjoy employment injury protection for work-related injuries and occupational disease, up by 4.6 percentage points (section 4.2.4).
- 16.7 per cent of unemployed people receive unemployment cash benefits in the event of job loss, up by 1.3 percentage points (section 4.2.6).
- 79.6 per cent of people above retirement age receive a pension, up by 5.5 percentage points (see section 4.3).
- 37.3 per cent of vulnerable persons are covered by social assistance, up by 10.6 percentage points (see section 3.2.3).
- 60.1 per cent of the global population is covered by social health protection, stalling since 2015 (see section 4.4).

Across regions, there has been an uneven increase in effective coverage rates between 2015 and 2023 (figure 3.2).

- Africa has achieved only modest progress with an increase of coverage rates from 15.2 to 19.1 per cent of the population. Given that African countries face pronounced vulnerabilities to the climate crisis, it is concerning that more than 80 per cent of their population must fend for themselves without any social protection. This does not bode well for Africa's readiness to cope with the climate crisis.
- The Europe and Central Asia region already had relatively comprehensive and mature social protection systems, and increased coverage from 82.1 to 85.2 per cent. Nonetheless, there are still important gaps to close that are indicative of a substantial vulnerable population who is insufficiently covered.

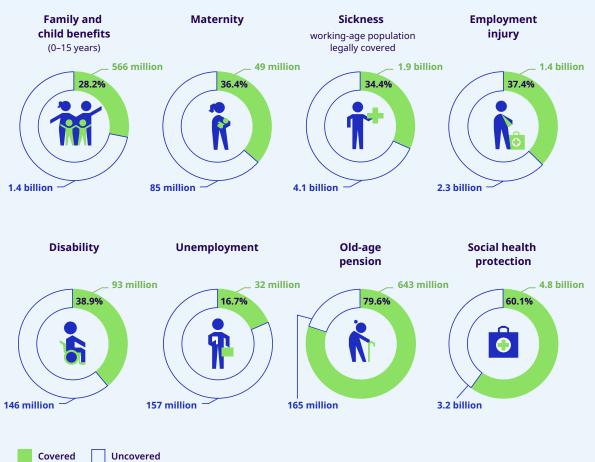
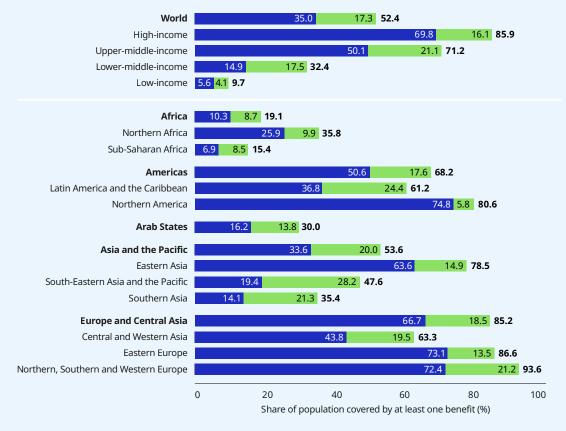


Figure 3.3 Effective coverage: number of covered and uncovered persons by social protection branch, 2023

Figure 3.4 SDG indicator 1.3.1 on effective social protection coverage by at least one cash benefit, global, regional and income-level estimates for contributory and non-contributory benefits, 2023 (percentage)



SDG 1.3.1: Coverage by at least one contributory benefit 🛛 📕 SDG 1.3.1: Coverage by at least one non-contributory benefit

Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by population. Estimates are not strictly comparable to the previous World Social Protection Report due to methodological enhancements, extended data availability and country revisions. Due to rounding, some totals may not correspond to the sum of the separate figures.

Sources: ILO modelled estimates, 2024; World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

- The Americas have achieved a more substantial increase in effective coverage from 59.6 to 68.2 per cent, which reflects long-standing efforts to extend coverage to previously uncovered categories of the population.
- The Arab States' anaemic increase in coverage from 28.1 to 30.0 per cent of the population provokes concern, especially given that they are prone to some of the most severe consequences of the climate crisis and face protracted conflict and displacement.
- The Asia and Pacific region has achieved the largest increase in coverage from 38.7 to 53.6 per cent. This needs to be further

accelerated to increase the region's capacity to tackle the challenges of climate change, informality and population ageing.

Worldwide, 35.0 per cent of the population are covered by contributory social protection mechanisms, and 17.3 per cent by noncontributory mechanisms (largely financed by taxes) (figure 3.4), with variation across regions and country income levels. While contributory mechanisms (mainly social insurance) account for the coverage of more than half of the population in high-income and upper-middle-income countries, they also play a significant role in low-income and lower-middle-income countries.

3.2.2 Coverage gaps for workers: Unpacking the "missing middle"

One of the reasons for persistent coverage gaps is the fact that many workers and their families are neither covered by contributory mechanisms (especially social insurance) nor by noncontributory (usually tax-financed) mechanisms – they fall through the cracks of both types of mechanisms, and thus are often referred to as the "missing middle", leaving them vulnerable.

Some categories of workers are less likely to be covered by social insurance than others, for instance, workers on temporary contracts (especially those with very short contracts or those in casual labour), in part-time work

Many workers are neither covered by contributory mechanisms (especially social insurance) nor by non-contributory (usually taxfinanced) mechanisms they fall through the cracks of both types of mechanisms, and thus are often referred to as the "missing middle".

(especially those with very few and irregular hours), workers on digital platforms and those in self-employment, depending on national policy and legal frameworks and their implementation. As a result, many of these workers find themselves in informal employment (ILO 2023w), which further contributes to high vulnerability.²¹

Extending social insurance coverage to these workers usually provides for a higher level of protection compared to non-contributory benefits. Based on the principles of risk sharing and solidarity, social insurance schemes are collectively financed through workers' and/or employers' contributions that are proportionate to contributory capacities. Where these are insufficient, governments

often subsidize or otherwise facilitate coverage, including for those who are temporarily unable to contribute because of unemployment, care responsibilities or illness (ILO 2021b). Social insurance directly contributes to the formalization of employment; for tax-financed benefits the link is less direct, but they still contribute to facilitating transition from the informal to the formal economy (ILO 2021b).

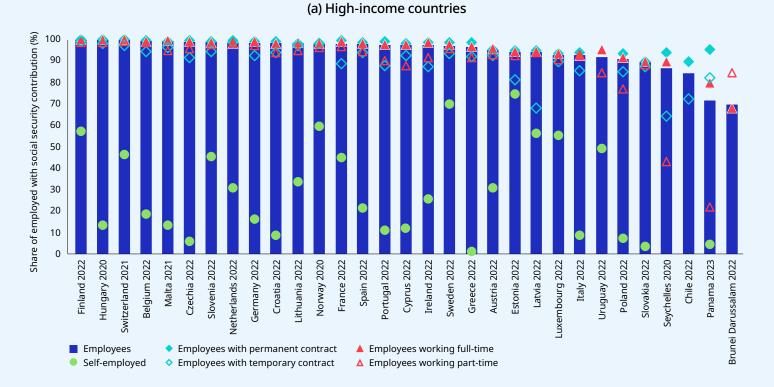
Recent labour force survey data analysis (Bourmpoula et al., forthcoming) demonstrates significant variation in social security coverage across countries, which suggests that extension policies make a difference (see figure 3.5). While, employees are generally more likely to contribute to social security than self-employed workers, several countries, including Brazil, Estonia, Sweden, Türkiye and Uruguay, have covered selfemployed workers through adapted mechanisms, and have achieved significant levels of coverage (ILO 2021f; ILO and WIEGO, forthcoming; Spasova et al. 2021). Whereas, in most countries, employees working on permanent contracts are more likely to contribute to social security than employees with temporary contracts, in others (for example, Croatia, El Salvador and the Netherlands), the difference is negligible. Similarly, in Armenia, Bulgaria, Uruguay and Viet Nam, social security coverage of part-time workers is close to that of full-time workers.

Another key factor that influences social insurance coverage is enterprise size (figure 3.6). In almost all countries, social security coverage of employees in smaller enterprises is lower than for those in larger enterprises. Low coverage is a particular challenge for enterprises with less than five workers, often due to exclusion from legal frameworks or low compliance. Yet, some countries have also achieved high coverage levels for workers in such enterprises, such as Bosnia and Herzegovina, North Macedonia, Peru and the Republic of Moldova (ILO 2021g; Gaarder et al. 2021).

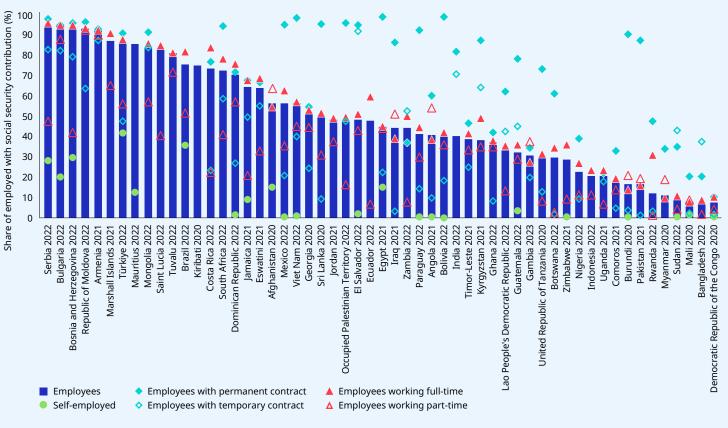
Yet, more needs to be done to achieve universal social protection. A just transition can only succeed if workers affected by climate change and climate policies can access adequate benefits, including those in new and emerging sectors. In countries with high levels of vulnerability to climate change, particularly in Africa, the Arab region and parts of Asia and the Pacific, the large majority of workers remain legally or de facto excluded from social insurance coverage that would provide them with support in case of climate shocks or to seize new opportunities offered by the green economy

²¹ Social insurance coverage or other contributory mechanisms financed with the participation of the employer are a defining criterion for formal employment for workers in different types of employment, including employees, dependent contractors and contributing family workers. Similarly, registration with a social security scheme is also one of the criteria to determine whether an economic unit is formal (ICLS 2023; ILO 2023w). For this reason, extending social security coverage to workers is an important step in the formalization of employment.

Figure 3.5 Employed population contributing to social security, by status in employment, type of contract and working-time arrangement, selected countries and territories, latest year (percentage)



(b) Middle- and low-income countries and territories



Source: Based on labour force survey data, ILO Harmonized Microdata Collection, <u>ILOSTAT</u>. For more information, see Bourmpoula et al. (forthcoming).

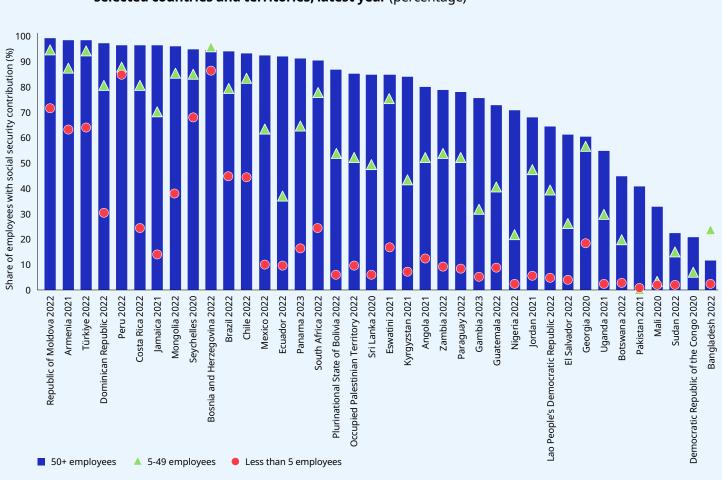


Figure 3.6 Employees contributing to social security, by size of the enterprise, selected countries and territories, latest year (percentage)

Source: Based on labour force survey data, ILO Harmonized Microdata Collection, <u>ILOSTAT</u>. For more information, see Bourmpoula et al. (forthcoming).

Guaranteeing access to social security is essential in ensuring that workers and enterprises are sufficiently resilient in responding to climate change impacts and to support a just transition. (see figure 3.7). Furthermore, they are likely to be excluded from tax-funded or other noncontributory mechanisms, often limited to those outside the labour market.

As many newly created jobs may be in sectors and occupations with traditionally high levels of non-coverage and informality, it will be essential that workers in all types of employment, including those in self-employment, enjoy decent work, including adequate social protection to ensure both income security and access to essential healthcare (ILO 2021m; 2023c). Guaranteeing access to social security is essential in ensuring that workers and enterprises are sufficiently resilient in responding to climate change impacts and to support a just transition to environmentally sustainable economies, as well as the formalization of employment (Bischler et al. forthcoming; ILO 2021i).

Extension strategies will need to simultaneously address the legal, financial, administrative and information barriers, while investing in raising awareness about the importance of social protection and improving governance, delivery mechanisms, and quality of benefits and services (ILO 2021i). Ensuring well-designed strategies that take into account the specific situations of workers, while at the same time avoiding fragmentation and exclusion, is a key condition for success in extending coverage to people not yet sufficiently covered, including workers in small and microenterprises, self-employed workers and

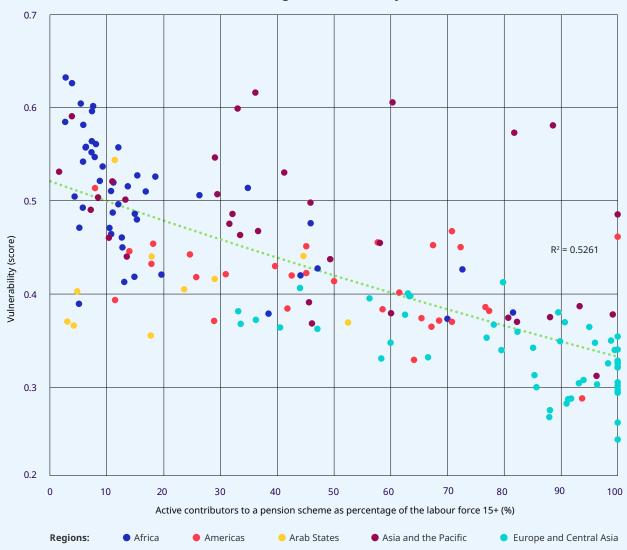


Figure 3.7 The relationship between a country's vulnerability to climate change and the share of workers contributing to social security

Source: Notre Dame Global Adaptation Initiative Country Index and ILO World Social Protection Database.

entrepreneurs, and workers on digital platforms (ILO 2021p; 2024e; Behrendt, Nguyen and Rani 2019), with specific attention to gender equality and the inclusion of refugees (see box 3.1).

Given the high vulnerability of the agricultural sector to climate change, accelerating efforts to ensure effective access of agricultural workers to social protection is critical. Beyond addressing their life-cycle risks, social protection also increases resilience with regard to their economic risks (Asfaw and Davis 2018), especially where it is complemented by measures that:

- facilitate the transition to more sustainable modes of agricultural production and climateresilient livelihoods, as well as non-agriculture activities; and
- support people dependent on natural resources in adapting their livelihoods and/or diversifying their income sources (ILO and FAO 2021; ILO 2023p; Bischler et al. forthcoming).

Likewise, as many jobs created in the circular economy are currently informal (ILO, Circle Economy and S4YE 2023), additional efforts are needed to extend social security to workers in the sector, including waste pickers (Cappa et al. 2023; Chikarmane and Narayanan 2023).

Box 3.1 The Estidama++ Fund in Jordan

Established through a joint effort by the Social Security Corporation and the ILO, the Estidama++ Fund is designed in alignment with international labour standards, as part of a national strategy for extending the coverage of the national social security scheme (Social Security Corporation) to vulnerable populations (ILO 2022d). The project aims to reach more than 32,000 Jordanians and non-Jordanians, with special focus on Syrian refugees and women, providing contribution subsidies and coverage rewards to facilitate their long-term enrolment in the social insurance scheme (ILO 2023k).

The Estidama++ Fund addresses the affordability constraints faced by informal workers who have limited contributory capacity, supporting wage workers in micro, small and medium-sized enterprises and self-employed workers to register in the Social Security Corporation by subsidizing their contributions for 12 months and offering other incentives for coverage (ILO 2023k).¹

¹ For more information, see <u>https://www.ilo.org/beirut/projects/WCMS_888951/lang--en/index.htm</u>, <u>https://www.ilo.org/beirut/media-centre/news/WCMS_899572/lang--en/index.htm</u>.

3.2.3 Protecting migrants

As many migrants are acutely and directly impacted by the climate crisis (ILO 2022g), enhancing social protection for them is particularly urgent. Strengthening social protection systems in both countries of origin and destination, and ensuring inclusive and effective access for migrants is key to ensure that people are covered against the financial risks they may face throughout their lives, including risks incurred due to climate-induced migration (ILO, ISSA and ITCILO 2021).

Migrant workers may have no or limited access to social protection schemes because of their nationality, migration status, duration or type of residence or employment, or the sector in which they work (ILO, ISSA and ITCILO 2021). Ensuring equal treatment with nationals and extending coverage to workers in sectors and occupations with a high proportion of migrant workers, such as agriculture or domestic work, helps ensure their effective access to social protection (ILO 2023I). Moreover, as migrant workers are often overrepresented in carbon-intensive sectors, ensuring equality of treatment between nationals and nonnationals in transition measures is also essential (ILO 2024d).

Some countries have incorporated the right to social security for all in their constitution (Bangladesh and Colombia), while others have included non-nationals in their social security laws (Costa Rica, Jordan, Poland and Sudan). However, despite commendable progress, in many countries, non-nationals do not benefit from comprehensive social protection, because (a) they are excluded from social assistance programmes or certain branches (such as medical care, unemployment insurance and family benefits),

(b) certain groups are excluded, notably migrant domestic and agricultural workers, or (c) their legal inclusion does not translate into their effective access (see box 3.2).

Facilitating bilateral discussions on the portability of social protection entitlements in situations in cross-border mobility, including those due to the transition to environmentally sustainable economies and climate change impacts, is particularly important for a just transition (ILO 2015c; 2024d). There has been an exponential increase in the number of social security agreements worldwide (ISSA 2022), and the development of regional agreements and policy frameworks as part of Ensuring equal treatment with nationals and extending coverage to workers in sectors and occupations with a high proportion of migrant workers, such as agriculture or domestic work, helps ensure their effective access to social protection.

regional integration processes (Association of Southeast Asian Nations (ASEAN), East African Community (EAC), Economic Community of West African States (ECOWAS) and Southern African Development Community (SADC)) is also evolving. Yet, at the national level, only 20 per cent of the

Box 3.2 Coverage of migrants in Gulf Cooperation Council countries

Interesting developments have emerged in Gulf Cooperation Council countries, where legal provisions for private sector workers are still relatively weak both for citizens and migrants, who constitute the majority of the workforce. Most countries have legislation that cover migrant workers, but for certain risks – sickness, maternity and employment injury – provided through employer liability mechanisms (ILO 2023s). Moreover, migrants historically have tended to access public health systems. However, there has recently been a shift to refer them to mandatory private insurance for non-emergency care. Yet, some encouraging reforms are under way in Oman to implement a social insurance scheme that covers sickness, maternity and employment injury including for migrants (ILO 2023i).

countries with the highest migrant population worldwide have legal provisions on equality of treatment between nationals and non-nationals.

3.2.4 Social assistance coverage for vulnerable groups

For people not covered through social insurance, it is important to note that in its absence, social assistance or other non-contributory cash benefits play an essential role in ensuring at least a basic level of social security. Globally, coverage has increased from 26.7 per cent to 37.3 per cent of vulnerable persons since 2015 (see figure 3.8).²² This increase can be interpreted in different ways. The positive reading is that it represents an improvement in benefits provided to vulnerable people, possibly due, in part, to the temporary policy response to the COVID-19 pandemic (ILO 2021q). However, a more cautious interpretation is that the higher population coverage stems from increased needs due to increasing poverty, vulnerability and decent work deficits, rather than a genuine increase in the quality of social protection.

In either case, more efforts are needed to ensure a solid social protection floor as part of universal social protection systems, leaving no one behind. In addition to cash benefits, in-kind

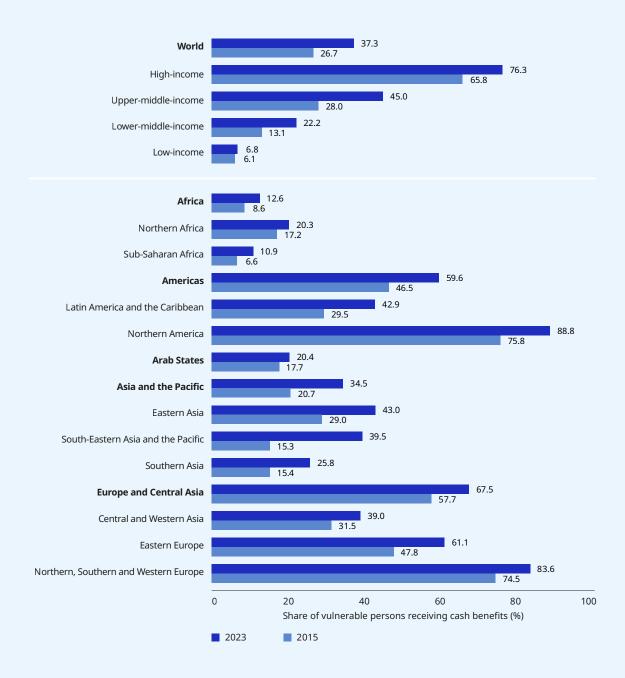
benefits can also play an important complementary role in reducing vulnerability (see box 3.3), especially if well coordinated with cash benefits. Moreover, greater efforts are needed to facilitate transitions from social assistance into decent employment covered by social insurance, which provides higher levels of protection and relieves pressure on tax-financed social assistance schemes as a lastresort protection mechanism.



More efforts are needed to ensure solid social protection floor as part of universal social protection systems, leaving no one behind.

²² This indicator refers to social assistance although non-means-tested tax-financed benefits are also included. See Annex 2 for methodological details.

Figure 3.8 SDG indicator 1.3.1 on effective coverage for protection of vulnerable persons: Share of vulnerable persons receiving cash benefits (social assistance), by region, subregion and income level, 2015 and 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by population. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024; <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Box 3.3 In-kind social protection: India's Targeted Public Distribution System

India's Targeted Public Distribution System is one of the world's largest legally binding social assistance schemes providing in-kind food security to about 800 million people. Operated with end-to-end digitalization and transparency measures, it ensures efficient foodgrain delivery. Its national portability enables access for beneficiaries from other federal states.

The Targeted Public Distribution System provides 35 kilograms of foodgrain per month to the most vulnerable households, while other qualifying beneficiaries receive 5 kilograms per month. From 2013 to 2022, the Targeted Public Distribution System provided rice, wheat and millet at subsidized rates and, since 2023, these products are free until 2028. The Targeted Public Distribution System entitlement is equal to around half of the average monthly per capita cereal consumption in India.

During the COVID-19 pandemic, the Government nearly doubled the monthly food grain entitlements for its 800 million beneficiaries by providing an additional 5 kilograms of foodgrain for each beneficiary free of charge for 28 months until December 2022.

Studies show that the scheme protects people from surging food prices (Negi 2022). After some reforms, and improved coverage, the scheme reduces poverty and food insecurity (Drèze and Khera 2013; Thomas and Chittedi 2021). The Targeted Public Distribution System also significantly prevented extreme poverty levels from worsening in India between 2020 and 2021 (Bhalla, Bhasin and Virmani 2022). Its distribution of fortified rice and inclusion of millet have further boosted its capacity to combat undernutrition and micronutrient deficiencies.

3.2.5 Gender gaps: progress towards gender-responsive social protection systems

Social protection coverage still shows significant gender inequalities, with the effective coverage of women by at least one cash social protection benefit lagging behind that of men by 4.5 percentage points (50.1 and 54.6 per cent respectively), especially in middle-income countries (see figure 3.9, first panel). A full picture of gender gaps is, however, difficult to obtain given a persistent lack of data. Only 20 countries produce complete sex-disaggregated data for child benefits, disability benefits, employment injury benefits and old-age pensions.

Clearly, there is a long way to go in closing gender gaps in social protection. At the same time, social protection policies hold great potential to enhance gender equality and help realize women's rights (UN Women, forthcoming; ILO 2021). Yet, in practice, social protection policies have not always addressed the following gender-specific risks and challenges in relation to gender equality: genderbased inequalities in employment, the unequal division of unpaid care work, and gender-specific risks across the life cycle (Razavi et al., forthcoming a; ILO 2024a). These three factors are interrelated and shape how women engage in paid and unpaid work, which has important knock-on effects on their social protection coverage.

An example is the coverage for old-age pensions, for which the most comprehensive data disaggregated by sex are available for a large number of countries (figure 3.9). The data show that, in most regions and subregions, older women are less likely to

Social protection policies hold great potential to enhance gender equality and help realize women's rights.

receive a contributory pension than men (second panel) but, in many cases, they are more likely to receive a non-contributory (tax-financed) pension (third panel).

Similarly, women of working age tend to be less likely than men to contribute to a pension scheme across all regions if measured as a percentage of the working-age population (fourth panel), due to their lower participation in employment (sixth panel).

Yet, if measured as a percentage of the labour force (fifth panel), the picture is much less clear:

In some parts of the world (for example, in sub-Saharan Africa, Southern Asia and in Central and Western Asia, and in low- and middleincome countries generally), women in the labour force are less likely to contribute than men. This is especially the case when they work

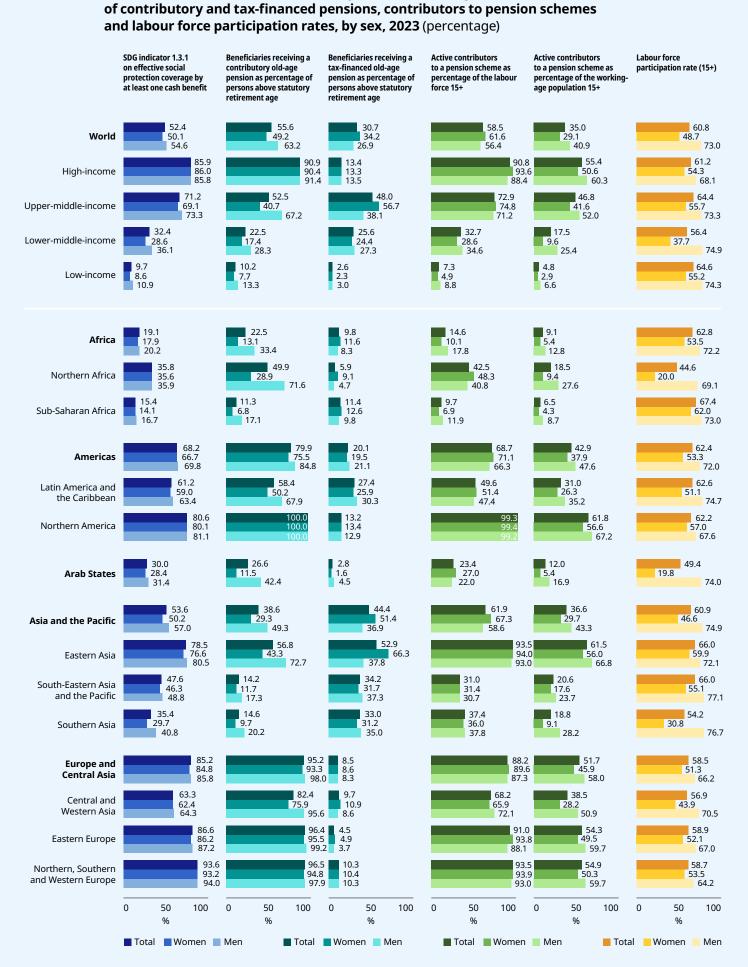


Figure 3.9 Gender gaps in effective social protection and pension coverage: SDG indicator 1.3.1 on effective social protection coverage, beneficiaries

Notes: Global and regional aggregates are weighted by population aged 65 and over for old age beneficiaries; by working-age population and labour force aged 15 and over for the contributors; and by working-age population for the labour force participation rates.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

in sectors and occupations associated with high levels of vulnerability, such as agriculture or domestic work (ILO 2023w).

Elsewhere, women in the labour force are roughly on par with men (for example, in Eastern Asia) or even more likely to contribute than men (for example, in Northern Africa, the Arab States, and Latin America and the Caribbean, and generally in high- and uppermiddle-income countries), where women often work in the public sector, clerical jobs, manufacturing (for example, the garment sector), health and education.

These patterns call for a more nuanced analysis of social security coverage of women that examines more thoroughly how gendered employment patterns are mirrored, mitigated or exacerbated in social protection systems. Analysing the data from a life-course perspective provides further insights into the impact of employment patterns on social security coverage by age (see box 3.4).

Box 3.4 Life-course patterns in social security coverage in Brazil, India and South Africa

A recent analysis of social security coverage by age in Brazil, India and South Africa found that, for people in employment (including self-employment), gender differentials are smaller than what might have been expected overall, yet with intriguing life-course patterns (ILO and ISSA 2023). In India and South Africa, coverage rates for young women are higher than for men up to a certain age, then their coverage rates drop below those of men after around 30 years in India and around 40 years in South Africa. The drop in coverage for prime-age women, at least in India, may reflect the impact of family structure and motherhood on their employment patterns: women shift to more "flexible" work arrangements for care-related reasons, which also carries a penalty in terms of social security coverage. In contrast, Brazil displays higher and relatively stable coverage rates for both women and men in their prime age, and women are more likely to contribute than men for almost all age groups.

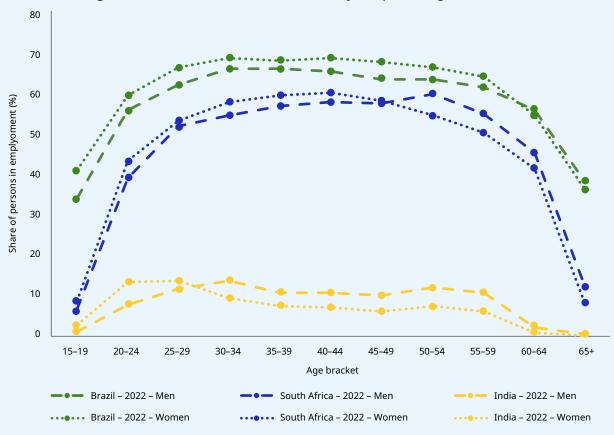


Figure B3.4 Share of persons in employment who contribute to a pension scheme, by sex and age, selected countries, latest available year (percentage)

Box 3.5 What is gender-responsive social protection?

Gender-responsive social protection goes beyond simply acknowledging gender dynamics and responding to gender-specific risks. It strives to transform the structural constraints and discriminatory social norms that drive gender inequalities. Thus, both the design and implementation of social protection policies must take into account the structural impediments women and girls face – occupational segregation, gender pay gaps and unequal sharing of care responsibilities. Such impediments should be understood in tandem with gender-specific risks and vulnerabilities, both across the life cycle and in case of climate shocks and disasters in order to achieve positive gender equality outcomes.

Source: Razavi et al. (forthcoming a).

This comparative evidence demonstrates the importance of a comprehensive and nuanced analysis of gender inequalities in employment and access to social insurance. It also highlights the importance of gender-responsive policy reforms to extend social insurance coverage to those not yet covered, especially those in vulnerable forms of employment (ILO 2021i).

Closing coverage gaps for women is urgent to prime social protection systems for a just transition, as environmental crises often impact women more strongly than men. Together with labour market, employment, health and care policies, gender-responsive social protection policies (see box 3.5) play a crucial role in achieving gender equality in response to the climate crisis.

While tax-financed benefits play a central role in guaranteeing at least a basic level of social security for all as part of a social protection floor, social insurance coverage is also essential, as it provides a much greater potential for broad risk sharing, redistribution and measures to offset gender inequalities in the labour market compared to other contributory mechanisms (ILO 2021q; Razavi et al., forthcoming a).

3.3 Comprehensive and adequate social protection

Although significant progress in achieving comprehensive social protection coverage has been made over the past century (figure 3.10), it has been slow. Large coverage and adequacy gaps still exist, especially in Africa and Asia, and this is mainly for two reasons. First, while most countries have legally-anchored schemes in place for most of the nine policy areas of Convention No. 102, in many cases these cover only a minority of their populations. Second, two policy areas are still lagging in terms of legal coverage: social protection schemes for children and unemployment protection. This is not surprising, as countries tend to build their systems sequentially, addressing different areas in varying order, depending on their national circumstances and priorities.²³ Yet, these two areas account for major insecurities and would benefit from being given greater attention (see sections 4.1 and 4.2.6).

According to ILO estimates, only 33.8 per cent of the working-age population are legally covered by comprehensive social security systems, comprising an indicator calculated based on seven of the nine branches, namely maternity, sickness, unemployment, disability, work injury, survivors' and old-age benefits (table 3.1). Thus, the large majority of the working-age population

²³ Historically, countries have tended to begin by addressing the area of employment injury, then moving on to introduce old-age pensions and disability and survivors' benefits, followed by sickness, health and maternity protection. Benefits for children and families, and unemployment benefits, typically come last.

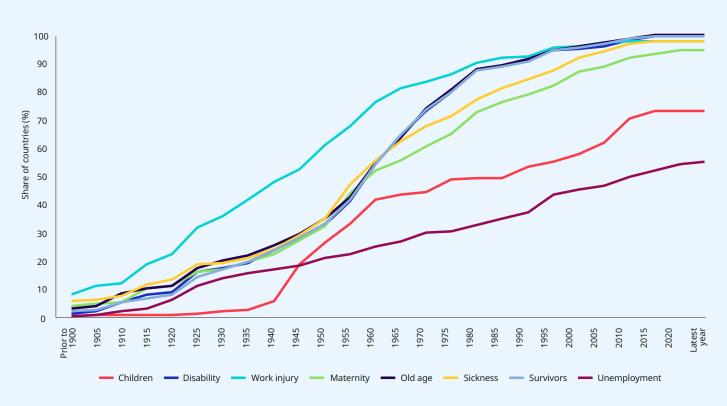


Figure 3.10 Development of social protection schemes anchored in national legislation by policy area, pre-1900 to 2023 (percentage of countries)

Notes: Based on the information available for 186 countries. The policy areas covered are those specified in Convention No. 102, excluding healthcare. The estimates include all schemes prescribed by law, including contributory and tax-financed schemes, as well as employer liability schemes.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

- 66.2 per cent, or almost 3.9 billion people – are not protected at all, or only partially protected. The gender gap is also significant: 28.2 per cent of working-age women are covered, compared to 39.3 per cent of their male counterparts. It is especially alarming to note that, in low-income countries, not one country has comprehensive social protection coverage. And even high-income countries have a considerable way to go to reach the milestone of accomplishing comprehensive legal coverage for all countries in this group.

Coverage is only truly meaningful and impactful if adequate benefit levels are provided, which can effectively prevent poverty, reduce vulnerability and maintain living standards, and are regularly reviewed and adapted to changes in the cost of living, in line with international social security standards (see Annex 3). A social protection floor should guarantee a basic level of income security and access to healthcare to prevent hardship and enable a dignified life, defined on the basis of a transparent and participatory process. In respect of basic income security, Recommendation No. 202 (paragraph 8) refers to nationally defined minimum income thresholds, such as national poverty lines or income thresholds for social assistance. In respect of healthcare, it stipulates that persons in need of essential care should not face financial hardship and an increased risk of poverty when accessing it. In view of the multidimensional nature of poverty, it is essential that the provision of adequate and predictable cash benefits is considered alongside that of high-quality services, including education, housing, healthcare, long-term care, water and nutrition.

Table 3.1 Share of the working-age population aged 15 and over legally covered by comprehensive social security systems, by region, income level and sex, 2024 (percentage)

Region/Income group	Share of the working-age population (total, %)	Share of the working-age population (men, %)	Share of the working-age population (women, %)
World	33.8	39.3	28.2
High-income	63.1	66.2	59.9
Upper-middle-income	51.1	59.1	42.7
Lower-middle-income	15.2	20.7	9.4
Low-income	0.7	1.0	0.5
Africa	6.7	10.0	3.5
Americas	40.8	44.1	37.5
Arab States	26.9	39.5	11.2
Asia and the Pacific	35.3	42.1	28.2
Europe and Central Asia	56.3	59.3	53.3

Note: Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological changes. Calculations are based on the legal coverage by maternity, sickness, unemployment, disability, work injury, survivorship and old-age benefits. Child and family benefits and health coverage are not included for methodological reasons.

Sources: ILO estimates; <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

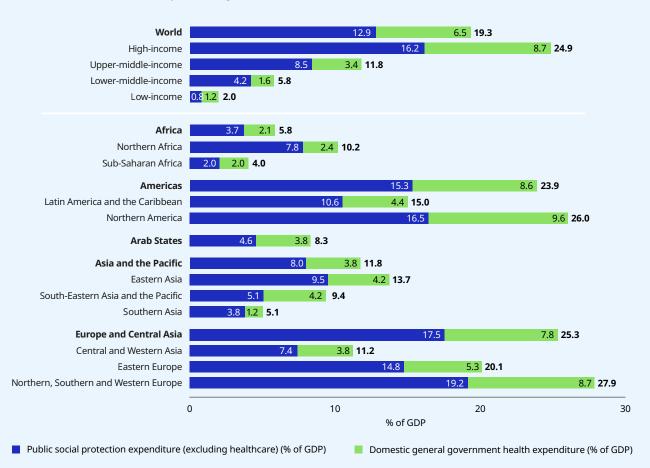
For social protection systems to function optimally, they also need to provide higher levels of protection to as many people as possible, and as promptly as possible in line with international social security standards (see box 1.2). In practice, however, benefit levels in many social security schemes remain below minimum adequacy standards, as recent ILO research on pensions shows (see section 4.3.7 for more details). It is therefore urgent to ensure the adequacy of both contributory and non-contributory (tax-financed) benefits, especially as nearly 17.3 per cent of the global population depends solely on non-contributory benefits, often leaving them with minimal support on which to rely.

3.4 Social protection expenditure and financing

3.4.1 Level and structure of social protection expenditure

Ensuring universal social protection relies heavily on securing and maintaining the required investment. This section delves into the expenditure patterns of social protection and provides estimates of the resources needed to address existing financing gaps. In 2023, countries allocated 12.9 per cent of their GDP on average to social protection (excluding healthcare), alongside 6.5 per cent to healthcare, resulting in a total social protection expenditure of 19.3 per cent of GDP (see figure 3.11). However, there are significant disparities across national income groups. High-income countries dedicated approximately a quarter of their GDP to social protection, with 16.2 per cent directed towards income security and 8.7 per cent towards healthcare. As we move down the income

Figure 3.11 Public social protection expenditure, 2023 or latest available year, domestic general government health expenditure, 2021, by region, subregion and income level (percentage of GDP)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by GDP. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions. Due to rounding, some totals may not correspond to the sum of the separate figures.

Source: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ADB, GSW, IMF; OECD; UNECLAC; WHO, national sources.

spectrum, the share of GDP allocated to social protection declines markedly, with a mere 0.8 per cent for income guarantees and 1.2 per cent for healthcare in low-income countries. There are also notable discrepancies across regions. Countries in Northern, Southern and Western Europe allocate over a quarter of their GDP to social protection, while countries in sub-Saharan Africa and Southern Asia only allocate 4.0 and 5.1 per cent, respectively.

Analysing the structure of social protection expenditure across different benefits reveals distinct patterns (figure 3.12). Globally, the bulk of total social protection spending is devoted to old-age pensions (38.7 per cent) and healthcare (33.0 per cent). The remainder is distributed among benefits for the working-age population (24.6 per cent) and children (3.8 per cent). However, significant variations emerge across country income levels. For instance, low-income countries allocate the largest part of their expenditure



Globally, the bulk of total social protection spending is devoted to oldage pensions (38.7 per cent) and healthcare (33.0 per cent).

Figure 3.12 Distribution of social protection expenditure by social protection guarantee, 2023 or latest available year, by region, subregion and income level (percentage)

World	3.8	24.6		38.7		33.0
High-income	3.9	25.1		36.2		34.8
Upper-middle-income	<mark>3.0</mark>	21.7		47.6		27.7
Lower-middle-income	<mark>3.5</mark>	21.3		47.1		28.1
Low-income	10.8	19.1	12.0			58.1
Africa	9.1	25.0		29.7		36.2
Northern Africa	8.9	26.7	7	40.5		23.8
Sub-Saharan Africa	10.8	20.7	17.0	40.5		49.5
Sub-Saliaran Alfica	10.6	22.0	17.0			49.5
Americas	<mark>1</mark> .5	29.4		33.5		35.7
Latin America and the Caribbean	5.0	16.3		49.3		29.4
Northern America	<mark>1</mark> .0	30.9		31.4		36.7
Arab States	0.03 15.3			42.3		42.4
Asia and the Pacific	4.2	20.1		44.5		31.2
Eastern Asia	<mark>3.6</mark>	19.4		46.4		30.6
South-Eastern Asia and the Pacific	10.4	26.	1	24.1		39.4
Southern Asia	<mark>1</mark> .0	20.2		52.3		26.5
Europe and Central Asia	6.2	21.7		41.3		30.8
Central and Western Asia	4.2	21.2		40.6		34.1
Eastern Europe	8.9	18.5		46.1		26.5
orthern, Southern and Western Europe	5.9	22.2		40.7		31.2
	0	20	40	60	80	100
	Share of total social protection expenditure (%)					
		Share of th	otal social pro	tection expenditure (/0)	

Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by GDP. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Source: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ADB, GSW, IMF; OECD; UNECLAC; WHO, national sources.

to healthcare, while the share allocated to old-age pensions is relatively smaller given their demographic structures. In stark contrast, lower- and upper-middle-income countries assign almost half of their social protection expenditure to old-age pensions (47.1 per cent and 47.6 per cent, respectively), but a relatively small share to children. Similarly, in high-income countries, old-age benefits account for the largest share of social protection expenditure at 36.2 per cent, followed by healthcare at 34.8 per cent. Across regions, Southern Asia allocates over half of its social protection expenditure to old-age benefits, whereas Sub-Saharan Africa directs the highest proportion of expenditure towards healthcare, at 49.5 per cent.

3.4.2 Filling the social protection floor financing gap

Current levels of expenditure are clearly insufficient to close coverage and adequacy gaps. In low- and middle-income countries, there is an urgent need to ensure that all residents and children should have access to at least a social protection floor.

It is encouraging that some developing countries have already successfully achieved universal social protection coverage for some guarantees. However, based on data for 133 low- and middleincome countries, the ILO has estimated that

In low- and middle-income countries, there is an urgent need to ensure that all residents and children should have access to at least a social protection floor. the financing gap to ensure a social protection floor for all - including access to at least a basic level of income security (SDG target 1.3) and access to essential healthcare (SDG target 3.8) - persists in most low- and middle-income countries (Cattaneo et al., 2024). For low- and middleincome countries, the financing gap equals 3.3 per cent of GDP annually (figure 3.13), with 2 per cent of GDP required for essential healthcare and 1.3 per cent for the five key social

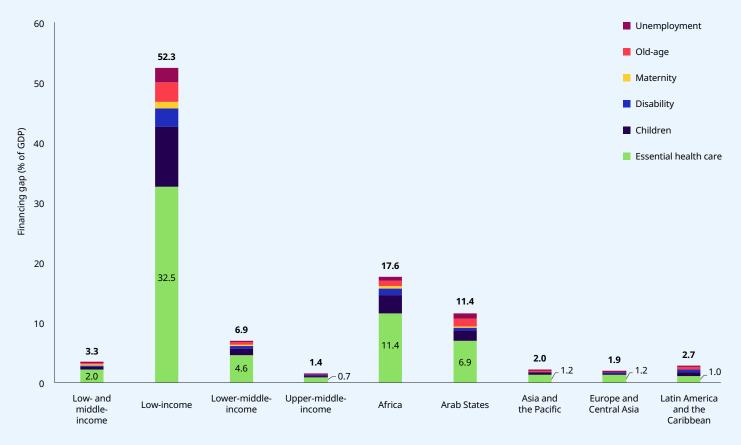
protection cash benefits. Of this, 0.6 per cent of GDP is required for child benefits, 0.3 per cent for old-age pensions, 0.2 per cent for disability

benefits, 0.2 per cent for unemployment benefits and 0.05 per cent for maternity benefits.

In absolute terms, to fill this gap across all lowand middle-income countries, countries need to mobilize an additional US\$1.4 trillion per year. Most of these funds (60.1 per cent) are required for essential healthcare, followed by 17.8 per cent for child benefits, 8.3 per cent for old-age pensions, 7.1 per cent for disability benefits, 5.2 per cent for unemployment benefits and 1.5 per cent for maternity benefits.

The global perspective masks significant disparities among national income groups. Lowincome countries face the largest financing gap, amounting to US\$308.5 billion, or 52.3 per cent of their GDP. Among regions, Africa has the largest financing gap to bridge for achieving a social protection floor: 17.6 per cent of the region's





Source: Cattaneo et al. (2024).

GDP per year. By contrast, in Europe and Central Asia, the financing gap as a proportion of GDP is the lowest across regions and country income groups. It stands at 1.9 per cent of GDP per year, with 1.2 per cent of GDP for essential healthcare and 0.6 per cent for the five social protection cash benefits.

3.4.3 Ensuring equitable and sustainable social protection financing for a just transition

Options for equitable fiscal space expansion

Different options exist to increase fiscal space for social protection (Ortiz et al. 2019). When designing social protection financing strategies, governments can address increasing climate inequalities within and between countries, to support people least responsible for climate change and least equipped to adapt (Chancel, Bothe and Voituriez 2023).

Reducing inequalities within countries: Filling social protection floor financing gaps through revenues from explicit and implicit fossil fuel subsidies

Reducing the unequal impact of climate change on national populations requires the promotion of progressive taxation and social policies, including by taxing those that consume and produce more CO₂. One option is the progressive removal of fossil fuel subsidies (explicit fossil fuel subsidies) or the increase in the price of carbonintensive goods and services through a carbon tax or emissions trading system (implicit fossil fuel subsidies). In the short run, social protection systems need to be already in place to cushion the adverse impacts of fossil fuel subsidies removal on households. In the long run, reinvesting the savings and/or revenues from such reforms into social protection can increase the coverage and adequacy of benefits, win public support for the reforms, and even reduce poverty and inequality to below pre-reform levels (see section 2.2.1).

Removing explicit and implicit fuel subsidies can contribute to filling social protection floor financing gap. Across low- and-middle-income countries, explicit and implicit fuel subsidies represent 1.2 and 9.7 per cent of GDP, respectively (Cattaneo et al. 2024). These subsidies compare with an overall social protection financing gap of 3.3 per cent of GDP (figure 3.14).

However, significant variations exist across countries and regions. The potential for filling financing gaps using fiscal space created by fossil fuel subsidy reforms is generally greater in middle-income countries and limited in

low-income countries. Middleincome countries tend to spend more on explicit fuel subsidies. They also produce and consume more carbonintensive goods and services (i.e., they have higher carbon emissions), which raises the revenue potential from removing implicit subsidies through taxation or emissions trading systems. On the other hand, both spending on explicit subsidies and carbon emissions are generally low in low-income countries. Thus, in these countries explicit and implicit fuel subsidies



The potential for filling financing gaps using fiscal space created by fossil fuel subsidy reforms is generally greater in middle-income countries and limited in lowincome countries.

represent only 1.0 per cent and 2.6 per cent of GDP, respectively. This further confirms the conclusions that low-income countries cannot fill their social protection floor financing gaps from domestic resources alone and will require international assistance (Cattaneo et al. 2024) (box 3.6).

Middle-income countries could consider repurposing explicit fuel subsidies or using carbon pricing to fill their financing gaps. Options for reinvesting such resources include extending coverage, increasing benefit adequacy or raising the comprehensiveness of social protection.

However, not all reinvestment options will automatically cushion households from any negative impacts caused by fossil fuel subsidies removal or carbon taxes. The most appropriate option depends on the parameters of the existing system and the estimated impact of the reforms on prices and households (see section 2.2.1).

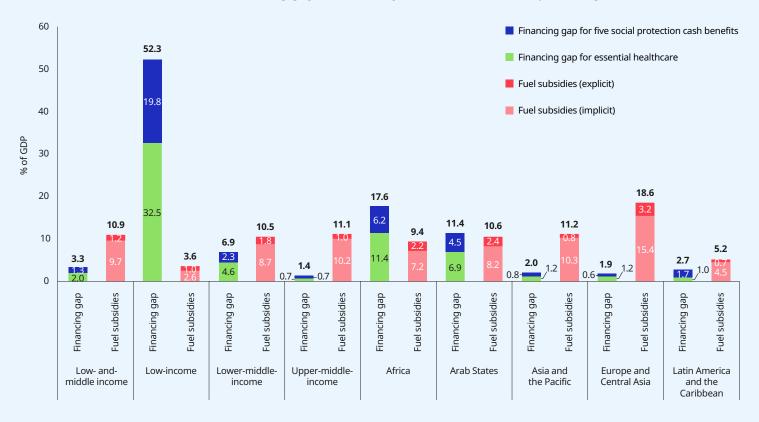


Figure 3.14 Comparison between the resources allocated to explicit and implicit fuel subsidies and the financing gap for a social protection floor, 2024 (percentage of GDP)

Source: Cattaneo et al. (2024) based on data from the IMF Climate Change Indicators Dashboard, accessed February 2024.

Box 3.6 Expanding fiscal space through the Global Accelerator on Jobs and Social Protection for Just Transitions

The Global Accelerator,¹ launched in 2021 by the United Nations Secretary-General, seeks to address multiple challenges, including climate change, that are erasing development progress, and accelerate the achievement of the SDGs, including by creating decent jobs and extending social protection.

The Global Accelerator comprises three interconnected pillars – integrated policies, financing and enhanced multilateral coordination. The financing pillar connects integrated policies with financing strategies. This includes: (a) ensuring that ministries of economy and finance pursue macroeconomic policies that foster social investment; (b) inviting public development banks and the private sector to contribute through policy loans or increasing the social impact of current investments; (c) ensuring that international financial institutions protect and extend public social spending. The Global Accelerator also supports fiscally constrained countries by mobilizing more international finance (such as official development assistance and climate funds) for creating decent jobs and extending social protection.

Reducing inequalities between countries: Leveraging international climate finance for social protection

Climate inequalities between countries imply differentiated mitigation responsibilities and for countries that are larger net contributors to global warming to provide financial assistance to countries with limited adaptation capacity (Chancel, Bothe and Voituriez 2023). This principle is enshrined in the United Nations Framework Convention on Climate Change (UNFCCC), which defines climate finance as financing that seeks to support climate change mitigation and adaptation action (UNFCCC 2023a).

Social protection is increasingly recognized at climate negotiations (UN 2023c; 2023a; 2023b) and in the literature (Hallegatte et al. 2024; Malerba 2022) as making a key contribution to climate change mitigation, adaptation and loss and damage response. Hence, international climate financing should contribute towards building social protection systems. This applies especially to low-income countries vulnerable to climate risks and where filling financing gaps from domestic resources is challenging. Sources of climate finance are diverse, comprising regional and multilateral development banks, climate funds, international and regional financing partnerships, and financing arrangements for addressing losses and damages.

However, to date, only very limited international climate finance has been directed towards social protection (Aleksandrova 2021). More progress is required to mainstream climate change objectives in social protection policy and vice versa. For example, it is important to include social protection and health in nationally determined contributions and national adaptation plans. This is a precondition for directing multilateral climate financing to social protection. However, such integration remains limited: only 20 out of 196 nationally determined contributions assign a role to social protection in climate action, and even fewer cite concrete actions for systems strengthening (Crumpler et al., forthcoming). Funding institutions need to recognize the role of social protection in climate action and explicitly reference it in their investment frameworks. On the other hand, national governments and climate fund applicants must also realize the potential of social protection and insist on fund allocation for social protection systems strengthening (Aleksandrova 2021).

Anticipating future needs and financial preparedness for sustainable financing

Social protection financing strategies must adapt to the medium- and long-term impacts of climate change on needs, revenues, contributions and costs. Furthermore, pre-arranged financing is paramount if social protection systems are to provide income security and healthcare during extreme events (see section 2.1). Estimates show that only 2–3 per cent of crisis financing is prearranged (Crossley et al. 2021), indicating that most responses are ad hoc and likely insufficient.

Social security schemes should factor climate risks into their actuarial valuations and reserves for financial sustainability (ILO, ISSA and OECD 2023). There are increasingly accurate and comprehensive forecasts of long-term climate change, the effects of which can be considered by actuarial valuations to ensure fund resilience (see section 4.3.9). This requires needs, cost and contributions modelling and anticipation. For social health protection schemes, actuarial, epidemiological and climate modelling expertise could be combined to strengthen the financial resilience of schemes (ILO 2024f), given that these may face increased demand linked to the intensification of climate-related shocks.

Greater integration of disaster-risk financing instruments in social protection financing can enable a more effective and sustainable response to disasters (UNICEF 2023a). Instruments may include contingency budgets, reserve funds and contingency credits or loans. National governments may also make use of regional sovereign insurance mechanisms such as the Africa Risk Capacity and channel payouts through the social protection system. Disaster-risk financing is usually embedded in a country's legal, policy and institutional arrangements, and better linkages with social protection systems must be developed, including through contingency plans for support during climate-related disasters (UNICEF 2023a). Crucially, these additional sources should not displace other sources of financing necessary for ensuring sustainable and equitable social protection financing.

3.5 Adapting and strengthening institutional and operational capacities

To ensure that social protection can play its role in supporting inclusive climate action and a just transition (Chapter 2), its systems need to be strengthened and adapted, especially in countries with nascent social protection institutions.

Universal and adaptive social protection requires two core actions (see figure 3.15):

- enhance institutional and operational capacities and processes to meet current and future needs; and
- adapt the system to new and increasing demands resulting from direct climate change and transition impacts.

Dimension	Actions to strengthen the social protection system	Additional actions for climate action and a just transition
Policy, strategy and legal frameworks	 Social protection policies and strategies formulated, regularly updated and implemented through participatory national dialogue 	 Integration of social protection and climate policies and strategies, legal frameworks adjustments accordingly and needs assessments
Governance and coordination	 Social protection institutions are well resourced and well coordinated with other sectors 	 Coordination with other sectors pertinent to just transition, climate change adaptation and disaster response
Financing	 Sustainable and equitable financing strategies 	 Costing scenarios adjusted to climate and transition impacts and pre-arranged financing
Monitoring and evaluation	 Policymaking informed by evidence on process and impact 	 Climate-specific performance indicators
Eligibility and qualifying conditions	 Eligibility criteria set in line with international standards 	 Capacity for flexible adjustment of criteria to respond to new needs
Adequacy: level, value, frequency and duration	 Level and duration of benefits and quality of services aligned with international standards 	 Capacity for short-term and long-term adaptation of benefit parameters to ensure adequacy
Comprehensiveness	 Full range of life-cycle risks covered, with linkages to complementary services 	 Linkages to active green and climate- sensitive labour market policies, skills, agricultural support and insurances
Outreach, enrolment, contribution collection, benefit delivery, grievance mechanisms	 Inclusive and on-demand access across the delivery chain and progressive digitalization of processes 	 Standard operating procedures and contingency plans for service continuity and surge capacity for increased demands
Information systems	 Interoperable social protection information systems, including national single registries 	 Linkages to disaster risk management and humanitarian registries, early warning system and geographic information system databases

Figure 3.15 Selected actions to strengthen and adapt institutional and operational capacities

Attaining this dual objective will ensure institutional readiness, thereby reducing sole reliance on reactive, untimely and fiscally inefficient measures and inadequate stop-gap solutions (ISSA 2022).

3.5.1 Policy and governance: Increasing coherence and coordination between social protection and climate policies

Social protection policies and strategies, guided by social dialogue, ensure the progressive strengthening of social protection systems. These should also inform legal framework reforms to make sure that rights and obligations align with international standards. Reinforcing governance mechanisms includes effective coordination with other sectors, ensuring sustainable and equitable financing strategies, regular monitoring, and evaluation of implementation, processes and impact that can inform policy reform processes.

The following actions can help prepare social protection systems and adapt them to better facilitate inclusive climate action and a just transition (box 3.7):

Incorporating climate risk in addition to life-cycle risks in national social protection policies and strategies based on an assessment of the socio-economic impacts of climate policies and the climate crisis (Costella and McCord 2023). Adjustments should be underpinned by inclusive dialogue with social partners and other representatives of persons concerned, including indigenous communities (Cookson et al., forthcoming; ILO 2020i).

- Defining the role of social protection in nationally determined contributions and national adaptation plans, disaster risk management strategies and/or (just) transition plans.
- Ensuring legal frameworks allow for (temporary) adjustments of eligibility criteria, benefit levels and duration when crises occur.
- Including ministries of labour and social affairs/development/protection in just transition planning and enhancing coordination with ministries of environment and energy, finance, economy and planning, and agriculture.
- Assigning clear roles and responsibilities and standard operating procedures to social protection, disaster risk management and humanitarian actors in disaster response contexts (ISSA 2023a).
- Including impacts of climate change and climate policies in the costing of schemes and ensure (pre-arranged) availability of financing (section 3.4.3).
- Adding performance indicators for resilience building, responsiveness to climate risks and climate policies in social protection monitoring and evaluation frameworks.

Social protection policies and strategies, guided by social dialogue, ensure the progressive strengthening of social protection systems.

Box 3.7 Institutionalizing social protection responses to climate shocks in Azerbaijan

Azerbaijan's national social protection system has implemented emergency responses to smaller-scale localized natural disasters for several years. The current five-year National Socio-Economic Strategy includes activities to replace these ad hoc measures with institutionalized social protection responses to provide reliable and effective support to people affected by climate-related hazards. This includes defining legal provisions, guidelines and technical mechanisms for determining appropriate eligibility criteria, flexible and timely financing arrangements, rapid payment and clear roles and responsibilities of the institutions in implementing and coordinating the response through the social protection system.

Source: UNICEF (forthcoming).

3.5.2 Scheme design: adaptable eligibility criteria and benefit levels in the face of changing needs

When designing schemes, eligibility criteria, benefit levels, duration and frequency should be set in line with international standards and in a way that progressively extends coverage and adequacy.

In addition, adaptations to eligibility criteria and benefit levels can help address changing needs amidst short-, medium- and long-term climate and transition risks:

- Automatic triggers. Introducing predefined mechanisms that can rapidly adjust eligibility criteria, benefit levels and duration through existing reserves or additional tax financing (for example, in the United States, see section 4.2.6) when shocks hit, ensuring a quick and "automatic" response.
- Ad hoc measures. When in-built mechanisms are not sufficient or established, ad hoc measures can adapt eligibility criteria and increase benefit levels to ensure additional horizontal and vertical expansions of the system during crises like floods or cyclones and for cushioning impacts of climate policies (ILO 2024f).
- Long-term benefit adequacy. All benefits should be indexed to appropriate inflation benchmarks and adjusted to evolving needs – for example, to upwards pressure on food prices due to prolonged climate impacts (Jafino et al. 2020).
- Climate-sensitive health and sickness benefits. These should guarantee continuity of essential medical services at least and include emergency care, injuries, rehabilitation and chronic disease management, which are still insufficiently financed in many countries.

Social protection benefits should also be linked to complementary services. In the context of climate change and the transition, linkages with green active labour market policies, skills development, climate-sensitive agricultural support or insurance are of particular importance (see Chapter 2).

3.5.3 Operations and delivery: enabling resilience and responsiveness

Institutions mandated with the administration and delivery of social protection benefits can implement the following strategies to enable service continuity and enhance their capacity to quickly respond to emerging needs (ISSA 2022; TRANSFORM 2020):

- Conduct risk assessments and scenario modelling to evaluate the impact of different climate hazards on benefits and service delivery, in particular to reach vulnerable groups (ISSA 2023a).
- Develop contingency plans and standard operating procedures for service delivery during emergencies, including in new locations, rapid enrolment, alternate payment approaches and surge capacity.
- Digitalize the administration of benefits, including solutions for needs identification, outreach, registration, enrolment and payment. A mix of manual and digital delivery options inclusive of groups with low digital literacy or access to technologies might be required (see box 3.8).
- Adapt communication plans and grievance redress mechanisms when the social protection system responds to climate-related emergencies or plays a role in transition packages (for example, the removal of fossil fuel subsidies or industry closures) to uphold accountability, transparency and acceptability.

Investment in information systems are also essential for an efficient and effective administration of the social protection system (Barca and Chirchir 2019; Pignatti, Galian and Peyron Bista 2024). This includes the development

Social protection benefits should be linked to complementary services. In the context of climate change and a just transition, linkages with green active labour market policies, skills development and climate-sensitive agricultural support or insurance are of particular importance.

Box 3.8 Responding to Hurricane Katrina: Rudimentary and "low-tech" yet vital action

When Hurricane Katrina struck Louisiana, United States, in 2005, pre-existing vulnerabilities associated with class and race inequalities were exacerbated (Garton Ash 2005; Brooks 2005). However, the United States Social Security Administration responded quickly and supported 1.6 million affected beneficiaries by establishing the following:

- temporary offices in evacuation centres to provide 24/7 service;
- special hotlines, additional staff to expedite claims for death, survivor and disability benefits;
- extended opening hours of main Social Security Administration offices;
- immediate benefits payment and disbursement of supplementary benefits; and
- adjusted payment modalities for those displaced.

Technological advances are important but might not always be available during extreme events, hence low-tech human resource support and payment modalities may still play a response role.

Sources: Government of the United States (2015; 2005); Orton (2015).

of national single registries and ensuring the interoperability of social protection information systems with other public administration services, including civil registries and vital statistics. Data privacy and security as well as sensitivity to exclusion risks must be prioritized.

High-quality and inclusive information systems enable social protection to play its role in climate action and a just transition as they allow all the people affected by climate emergencies or transition policies to be reached (Chapter 2). Additional actions – such as integrating social protection information systems with early warning systems, geographic information systems and nowcasting models using high-frequency data – can trigger more effective shock responses. Pre-arranged data-sharing agreements with entities in charge of disaster risk management and humanitarian databases can further enhance more coordinated responses (Barca and Chirchir 2019).



transition.

systems enable social protection to play its role in climate action and a just

Strengthening social protection for all throughout the life course

- 4.1 Social protection for children and families
- 4.2 Social protection for women and men of working age
- 4.3 Social protection for older women and men: Pensions and other non-health benefits
- 4.4 Social health protection: Towards universal health coverage

chapter 4



For social protection systems to play their key role for climate action and a just transition, they need to provide adequate protection for everyone throughout their lives. Structured along the four social protection guarantees provided in Recommendation No. 202, this chapter delves into income security for children and families (section 4.1), people of working age (section 4.2) and older people (section 4.3), while section 4.4 focuses on social health protection.

4.1 Social protection for children and families

- It is time to up the ante. Progress in the extension of social protection has occurred, but access to inclusive and integrated social protection remains elusive for the vast majority of children only 23.9 per cent of children aged 0 to 18 globally are covered by child cash benefits. This equates to 1.8 billion children of this age range missing out.
- Given the well-recognized poverty reduction properties of social protection (on both monetary and multidimensional child poverty), this protection gap prompts deep concern considering that children make up more than half of the world's extreme poor. Today, 333 million children are still living below the extreme poverty line, 1.4 billion children are living below the higher international poverty line and almost 1 billion children live in multidimensional poverty. Some 1.9 billion children – 80 per cent – are at high climate risk.
- The positive impacts of social protection for children are beyond question. Extensive evidence shows that child-sensitive social protection reduces poverty while also contributing to income security in households, protects against child labour and has broader significance for child health, early childhood development, education and food security. However, in the absence of social protection, these basic conditions for well-being are less likely to be met during childhood, creating lasting conditions that are difficult to rectify in later life.
- Children, especially those in poverty, are bearing the brunt of the climate crisis. This unfolding crisis is tantamount to "structural violence against children" and compromises their well-being and prospects. It also underscores the importance of making social protection systems more inclusive and resilient so that they continue to achieve their core objectives and support the additional needs that climate change is creating. Investment in social protection for all children is crucial for intergenerational solidarity and equity, and an essential investment to uphold the rights of future generations. It will also support the capability formation and requisite skills development of children that a green transition will demand.
- To close protection gaps and achieve positive impacts for all children, expenditure needs to increase, especially in the early years. Analysis of age-related spending shows that all children and the families in which they live are underserved in terms of social protection, particularly in early childhood. On average, 0.7 per cent of GDP is spent on child benefits globally. Again, large regional disparities exist: the proportion ranging from 0.2 per cent in low-income countries to 1.0 per cent in high-income countries.



4.1.1 The role of social protection in addressing persistent poverty and socioeconomic vulnerabilities for children, exacerbated by compounding crises, including climate

Social protection is an investment that contributes to children enjoying their rights and accessing the support they need. When social protection is absent, children are at a higher risk of multiple child rights violations and are exposed to the long lasting impacts of child labour, disease, missed education, poor nutrition and poverty.

The unfolding climate crisis carries an extremely high poverty risk for children and has been deemed "a form of structural violence against children". One in four deaths among children under 5 years old worldwide is the result of avoidable environmental damage and the climate emergency.

The unfolding climate crisis carries an extremely high poverty risk for children and has been deemed "a form of structural violence against children" (UN 2023e). One in four deaths among children under 5 years old worldwide is the result of avoidable environmental damage and the climate emergency (UNICEF Innocenti 2022). Children are especially vulnerable, owing to the spread of more deadly diseases, lower ability to regulate body temperatures in heatwaves, and malnutrition from greater food insecurity (UNICEF 2023b).

From an intergenerational equity and social justice perspective, readying children for even 1.5°C of warming alone should be sufficient motivation for policymakers to build social protection systems and other key services

for all children. Evidence from global research conducted by UNICEF demonstrates that, globally, only 46 parties have included child-sensitive social protection commitments in their key climate policy documents (UNICEF, forthcoming). Ultimately, governments must escalate their SDG commitments to end extreme child poverty and increase social protection coverage of children.

Impact of COVID-19 on child poverty

In the last decade, there has been a large reduction in the absolute number of children living in extreme child poverty. However, during the period 2019–22, estimates suggest that poverty reduction has stalled, and that three years

of progress have been lost, mainly because of COVID-19. Poverty would have increased even further without the central role of social protection in containing its impoverishing effects (ILO and UNICEF 2023).

COVID-19 is just one of the compounding crises experienced by children and their families in recent years, suggesting that other global concerns, such as the climate crisis, are likely to act as a drag on the progress needed for children. During the period 2019–22, estimates suggest that poverty reduction has stalled, and that three years of progress have been lost, mainly because of COVID-19.

Between 2013 and 2022, extreme child poverty rates fell from 20.7 to 15.9 per cent. In real terms, this meant that the number of children living in extreme poverty fell by 49.2 million. Notably however, rates were already at 15.9 per cent in the year before the COVID-19 pandemic. This points to "three years of lost progress" for children living in extreme poor conditions. Estimates suggest that, without this lost time, another 30 million children would have escaped extreme child poverty worldwide (Salmeron-Gomez et al. 2023).

The most recent figures from the World Bank and UNICEF show that 333 million children are still living in households with an income lower than US\$2.15 per person (extreme poverty line). At the higher international poverty lines, a staggering 820 million children live on less than US\$3.65 a day (lower-middle-income poverty line), and 1.4 billion children are living on less than US\$6.85 a day (upper-middle-income poverty line) – or 3 in 5 children worldwide (Salmeron-Gomez et al. 2023). In addition, approximately 1 billion children experience multidimensional poverty, deprived of their basic rights to health, nutrition, water, sanitation, education and shelter (UNICEF 2021a).

Global figures hide the increased risk that many children experience when it comes to extreme child poverty. Not only are there large differences by regions of the world, national income levels and experiences of conflict and fragility, but personal and family attributes also play a role – for instance, children who experience disabilities or have family members with disabilities, or girls and women when compared to boys and men. Families who care for a person with a disability experience both a loss in earned income (lost earnings potential as care time increases) as well as higher living costs due to additional expenditures related to that care. Women and girls are over-represented globally among the poorest and are disproportionately impacted by multiple intersecting deprivations due to social and economic exclusion and restrictive gender norms and expectations. Yet, social protection often fails to incorporate and address gendered risks, needs and opportunities. Many other categories of children are at a higher risk of poverty – such as migrant or forcibly displaced children, indigenous children and children living in remote settings - and this must inform the design of social protection policies for children.

Child poverty risks and the climate emergency

The climate emergency represents a major threat to progress in reducing child poverty risks worldwide. The direct and indirect child poverty risks take different forms from sudden-onset events (for example, flash floods), slower-onset changes (for example, desertification) and environmental degradation (UNICEF 2021b).



Child poverty is both a driver of vulnerability and a consequence of overall climate risk. Child poverty is both a driver of vulnerability and a result of overall climate risk. Firstly, children in poverty are more exposed to climate risks. Six out of ten children already living in multidimensional poverty are expected to experience at least one climate risk a year, and three out of ten children live in

provinces with very high climate risks and a high concentration of multidimensionally poor children (Global Coalition to End Child Poverty 2023).

Secondly, lower-quality housing, poor water and sanitation facilities, existing food insecurity, health issues and inadequate access to information, mean that children in poverty are more likely to suffer harm once a climate shock hits. Poor families with children also have fewer coping capacities to respond to negative effects or adapt to a changing climate due to fewer financial resources. They also have limited social protection; children living in higher-risk environments have less access to social protection (see figure 4.5). In high-income settings, children in poorer households and other disadvantaged subgroups also experience the greatest environmental risk and harm (UNICEF Innocenti 2022).

Climate risks are disproportionally exacerbated for those vulnerable to intersectional inequalities relating to race, gender, caste, class and gender (Lankes, Soubeyran, and Stern 2022). These intersectional inequalities impact exposure to climate-related shocks and influence the strategies used to cope with the impact.

Finally, extreme weather events, slow-onset impacts and other climate-related shocks can exacerbate child poverty. They can directly impact families, children's living standards and poverty risks, by destroying homes, farms and communities. This, in turn, affects productivity and increases the risk of illnesses, including poorer mental health. Indirectly, the disruption of public service provision, like health, nutrition, drinking water, sanitation and hygiene and education – all of which significantly impact children's access to care, and the destruction of natural resources – have a knock-on effect on child poverty and development (Diwakar et al. 2019; Lankes, Soubeyran, and Stern 2022).

Since poorer people have higher exposure to natural hazards related to climate shocks, and fewer resources to respond effectively, the risks associated with climate-related shocks and stressors need to be addressed. This means protecting consumption, promoting asset building and productivity, and creating opportunities for families to diversify from activities they used to rely on for their livelihoods (Hallegatte et

al. 2014) through short-run, rapid, inclusive, climate-smart and targeted adaptation interventions (Hallegatte et al. 2016).

Based on the aforementioned evidence and coverage concerns, social protection and essential services to support children exposed to climate-related risks and families living with climate emergencies are critically needed. Strengthening households' resilience and coping strategies in response

to climate shocks requires investing in robust social protection systems, and enhancing their shock responsiveness. Such systems can be scaled up in advance or in the aftermath of a (climate) shock (Global Coalition to End Child Poverty 2023).



Social protection and essential services to support children exposed to climate-related risks and families living with climate emergencies are critically needed.

Realizing the right of children to social protection is indispensable for combating child poverty and promoting children's well-being

Social protection policies are powerful tools in alleviating poverty for children and their families. They protect families at risk of falling into poverty; they help all children connect to key services, such as health and education; and they protect children from other major risks, such as child labour (box 4.1). Overcoming these challenges is essential for realizing the rights and full potential of all children (box 4.2). Ensuring children's rights to social protection and to an adequate standard of living, health, education and care, and achieving the 2030 Agenda, requires a conducive policy framework that prioritizes the needs and requirements of children and their participation in the process.

Box 4.1 Social protection, child labour and the climate crisis

Recent evidence compiled by the ILO and UNICEF (2022) shows that integrated social protection systems are powerful instruments to combat child labour (ILO 2013c). The climate crisis further emphasizes that strengthening social protection is a prerequisite for ending the scourge of child labour. Today, 160 million children are engaged in child labour. That is almost one in ten children worldwide (ILO and UNICEF 2021). The climate crisis will be an additional threat multiplier for child labour (ILO 2023m), primarily through increased poverty, but other channels will also heighten child labour risks. These channels include: changes to agricultural productivity; climate-related extreme weather shocks; climate-driven migration and conflict; health issues; and destruction or degradation of basic services infrastructure (ILO 2023m). The probability of increased child labour makes social protection all the more indispensable as a means to contain this risk. However, most children engaged in child labour lack social protection (ILO and UNICEF 2022).

Box 4.2 The right of children to social protection

The right of children to social protection is underlined in Articles 26 and 27 of the United Nations Convention on the Rights of the Child, which stipulates that "States Parties shall recognize for every child the right to benefit from social security, including social insurance, and shall take the necessary measures to achieve the full realization of this right in accordance with their national law" (Article 26).

The United Nations legal framework contains several provisions spelling out the various rights of children that form part of their right to social protection. These include: the human right to social security, taking into consideration the resources and circumstances of the child and people having responsibility for the child's maintenance;¹ the right to a standard of living adequate for the child's health and well-being; and the right to special care and assistance.² The International Covenant on Economic, Social and Cultural Rights further requires States to give the widest possible protection and assistance to the family, particularly with respect to the care and education of dependent children (Art. 10(1)).

Complementing human rights instruments, international social security standards are also part of the United Nations normative framework, with specific guidance on coverage, adequacy and key policy principles at the heart of a rights-based approach. The comprehensive ILO Social Security (Minimum Standards) Convention, 1952 (No. 102), sets minimum standards for the provision of family (or child) benefits in the form of a periodic cash benefit, benefits in kind (including food, clothing or housing) or a combination of both (Part VII).

The ILO Social Protection Floors Recommendation, 2012 (No. 202), emphasizes the universality of protection. It sets out that all children should have access to at least a basic level of social security – including access to healthcare and income security – allowing for access to nutrition, education, care

Box 4.2 (cont'd.)

and any other necessary goods and services to live in dignity. The basic social security guarantees of the nationally defined social protection floor should apply, at a minimum, to all residents and children, as defined in national laws and regulations and subject to existing international obligations (Para. 6), including under the Convention on the Rights of the Child, the International Covenant on Economic, Social and Cultural Rights and other relevant instruments. Representing a rights-based approach strongly focused on outcomes, Recommendation No. 202 allows for a broad range of policy instruments to achieve income security for children, including child and family benefits (the focus of this report), as part of a broader portfolio of interventions. Moreover, this framework provides valuable insight for implementing a life-cycle approach to social protection that is suitably holistic, comprehensive and adequate to address all child rights.

¹ Universal Declaration of Human Rights, 1948, Art. 22; International Covenant on Economic, Social and Cultural Rights, 1966, Art. 9; United Nations Convention on the Rights of the Child, 1989, Art. 26. ² Universal Declaration of Human Rights, Arts 25(1) and (2).

4.1.2 The importance of ensuring child-sensitive social protection systems

Entitlement to child and family cash benefit schemes

Child and family cash benefit schemes constitute an important element of child-sensitive²⁴ national social protection systems and play an essential role in ensuring income security for families. The proceeding section provides an overview of the legal coverage of such schemes worldwide.

As of 2024 (see figure 4.1), more than two thirds (145) of the 213 countries or territories for which data is available provide statutory child or family benefits. However, non-statutory programmes may still exist in other countries. Recent child benefit reforms show further progress (see table 4.1). Of the countries or territories with statutory periodic child or family benefits, the latest analysis of legal coverage indicates the following schemes operating worldwide:

- tax-financed universal or quasi-universal child benefits: 58;
- contributory schemes only: 29;
- contributory and tax-financed means-tested schemes (non-universal): 11;
- tax-financed means-tested schemes only: 47.

Schemes anchored in national legislation are usually more stable in terms of financing and institutional frameworks, and provide legal entitlements to eligible individuals and households, thereby guaranteeing protection as a matter of right. Other schemes include at-scale non-statutory, non-contributory programmes operating elsewhere (see section 3.1, ILO and UNICEF 2023). Other programmes providing cash or in-kind support to children in need exist, which are often limited to certain regions or districts and are generally designed with the objective of reducing poverty. Others exist as a response to humanitarian crises or other nontypical circumstances. These are provided through the government, and/or supported by United Nations agencies, development partners, nongovernmental organizations or charities.

²⁴ See definition of "child-sensitive social protection" in box 1.5 in ILO and UNICEF (2023).

- Figure 4.1 Social protection for children and families (cash benefits) anchored in law, by type of scheme, 2024 or latest available year
 Image: Control of the state of t
 - No data

Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Note: The universal child benefit count is higher than indicated in previous editions of the *World Social Protection Report*, owing to the inclusion of several territories. The number in parenthesis refers to the count of countries or territories.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

▶ Table 4.1 Child social protection reforms, selected countries, 2021–24

Country	Year	Adopted or planned measure
Brazil	2023	New supplement in Bolsa Família for children under 6 years old. The <i>Benefício Primeira Infância</i> was introduced to supplement the <i>Bolsa Família</i> with an additional 150 Brazilian reais (US\$28) paid each month to 8.9 million children aged 0 to 6 (Government of Brazil 2023b).
Libya	2021	Reactivation of universal child benefit for children under 18 years old. Libya effectively reintroduced its universal child benefit which had been suspended since 2013. A monthly benefit of 100 Libyan dinars (US\$20) is paid for all Libyan children aged 0 to 18.
Montenegro	2022	New universal child benefit for children under 18 years old. The Government introduced a universal child benefit for children aged 0 to 18 at the end of 2022. A flat rate monthly benefit of €30 (US\$32) is paid for each child.
Oman	2023	New universal child benefit for children under 18 years old. The Government introduced a universal child benefit in 2023 as part of a major reform of its social security system (ILO 2023h). A flat rate monthly benefit of 10 Omani rials (US\$26) is paid for each child.
Republic of Korea	2022	Extension of age-limited quasi-universal child benefit, now for children under 8 years old. A quasi-universal child benefit for children aged 0 to 6 was introduced in 2018, extended to children aged 0 to 7 in 2019, and subsequently to children aged 0 to 8 in 2022. A monthly benefit of approximately 100,000 won (US\$73) is paid for each child.

Sources: Based on ILO and UNICEF (2023); ILO, UNICEF and Learning for Well-Being Institute (2024) and information from national sources except where indicated otherwise.

The importance of school feeding

School feeding programmes provide meals (including take-home rations) to school-age children and adolescents. They are critical for child well-being (see box 4.3). Currently, 418 million children worldwide receive free or subsidized daily school meals (WFP 2022). According to WFP (2022), there has been a global increase in government-led school feeding programmes, signifying heightened governmental commitment across different economic levels from 2020 to 2022, with the percentage of countries with school feeding policies increasing from 79 per cent to 87 per cent. This expansion has also created approximately 4 million direct jobs across 85 countries (WFP 2022). School feeding programmes also serve as comprehensive integrated programmes with over 80 per cent of countries incorporating complementary health and nutrition activities, reinforcing their pivotal role in promoting schoolchildren's well-being.

Combining cash benefits and access to key services and information

Access to cash benefits and childcare services yields multifaceted effects on social mobility, family income and educational outcomes, and reduces deprivations. Recent research indicates enduring effects, particularly in early childhood care and education investments, resulting in sustained growth of family income by increasing women's labour force participation, and improved

Box 4.3 The role of school feeding in addressing poverty, socio-economic vulnerabilities and supporting adaptation to the climate crisis

School feeding programmes can contribute to ensuring children's development – including nutrition, health and education (Sanfilippo, de Neubourg and Martorano 2012) – and foster long-term social and economic development. By providing a consistent supply of essential nutrients to children, they enhance human capabilities and generate savings equivalent to 10 per cent of the income for economically disadvantaged households – and even more for take-home rations (Bundy et al. 2018).

They also help address the global food crisis and promote climate-smart and sustainable food systems. The estimated US\$48 billion annual investment in these programmes offers a significant market for food producers, enabling the transformation of food systems and the increased sustainability of diets (WFP 2022). Homegrown school feeding programmes (Tette and Enos 2020) are integral to this transformation. They can support smallholder farmers (especially rural women and indigenous producers) by purchasing more local food, which increases local agro-biodiversity and strengthens local food security (Hunter, Martínez-Barón and Loboguerrero 2022).

School meals programmes can help transform food systems through planet-friendly policies, delivering significant benefits for child health and wider society (Pastorino et al. 2023). In Armenia, solar power systems were installed in five schools and farms. The surplus electricity generated was sold back to the grid, and funds reinvested in school feeding programme and other social services. This stabilized farm produce demand and supply, and reduced food losses, electricity bills and carbon emissions. While there has been progress in expanding school feeding, challenges persist, particularly in low-income countries, with 73 million children still going to school hungry. Although these countries have increased domestic funding for school meals – from 30 per cent to 45 per cent between 2020–22 – international support has declined (WFP 2022). Addressing this challenge requires a concerted effort from development actors. Closing the funding gap in low-income countries presupposes exploring innovative financing models like debt-for-school-meal swaps and support from development partners and international financial institutions.

Ultimately, as countries continue to refine their social protection strategies, recognizing the inherent linkages with school feeding will be essential for ensuring child well-being.

Ensuring universal access to health and other services without hardship is also of critical importance for maximizing and sustaining the impacts of cash transfers. It is an essential component of child-sensitive social protection systems. life trajectories. Despite the positive impact of cash benefits, the limitations of cash alone are evident, emphasizing the need for complementary interventions to overcome non-financial and structural obstacles (Learning for Well-Being Institute, 2024). "Cash plus" programmes, which integrate cash benefits with other interventions, address multifaceted challenges and maximize transformative potential (UNICEF, Heart and UKAID 2022). Ensuring universal access to health and other services without hardship is also of critical importance for maximizing and sustaining the impacts of cash benefits. It is an essential

component of child-sensitive social protection systems (see section 4.4). The role of social workers in promoting children's well-being is key to connecting them with critical social services by challenging harmful norms that violate children's rights.

Tackling inequality from the start for girls and young women

Making social protection for children more genderresponsive focuses on how social protection can:

- address gender-specific risks that is, premature withdrawal of girls from school, gender-based violence, child marriage and forced labour, unpaid care work and discrimination against girls and young women; and
- support sexual and reproductive rights for adolescents.

It also centres on how the presence and care needs of children in households impact the welfare and development of adolescent girls, and the labour force participation and autonomy adult women and mothers – including women with multiple and intersecting vulnerabilities, such as women with disabilities, from ethnic minorities or from rural areas (Razavi et al., forthcoming a).

Social protection systems are an essential mechanism for realizing children's rights and can act as a powerful policy tool for the empowerment of girls and young women, particularly through gender-transformative approaches. This rights-realization and empowerment function can be especially pertinent for girls who, from the outset, experience gender inequalities in all its forms.

However, social protection for children remains woefully low and inadequate and much more needs to be done to enhance its genderresponsiveness (Razavi et al., forthcoming a). Social protection must work for girls and women, and address structural gender inequalities. This means getting the basics right: closing protection, comprehensiveness and adequacy gaps. But it also requires gender-based increments as

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affirmative action, supporting the development of young women's capabilities – through age-extended child benefits, quality education and training opportunities – and access to sexual and reproductive health services.

Child benefits are not automatically "empowering" for mothers and women. For instance, conditional cash transfers can involve high transaction costs for women and some contributory family benefit schemes carry direct legal exclusion and differentiated and unequal treatment for men and women. Thus, child benefit design must support women's engagement in formal employment. This Social protection systems are an essential mechanism for realizing children's rights and can act as a powerful policy tool for the empowerment of girls and young women, particularly through gendertransformative approaches.

presupposes accessible, affordable and quality social services and care services, which could be an area of decent job creation. Employers can help by adopting family-friendly policies (such as flexible working times, breastfeeding breaks and telework) to help working parents share work-care responsibilities. Enforcing compliance with child maintenance support payments would also help single parents, who are mostly women (Razavi et al., forthcoming a).

Enhancing adaptation and the responsiveness of social protection for children to climate shocks

Getting the basics of social protection right and reducing vulnerability ex ante is key for contending with the climate crisis. This presupposes having a comprehensive social protection system in place, providing adequate benefits to a large part of the population as part of an integrated set of social and climate action policies. Adaptation to the climate crisis implies benefit design and institutional capacity which allow for rapid extension, top-ups and advanced payments, and reaching children in remote locations.

Further adaptation could be made to increase shock responsiveness through adjustments and a systems-wide approach (see Chapter 3). For instance, when combined with disaster risk management approaches, this could mean additional or higher payments are triggered by metrological authorities when thresholds are passed (for example, too cold or hot, or flooding). For instance, UNICEF Bosnia and Herzegovina has supported a subnational shock-responsive social protection model which provides additional cash support for flood-affected children (UNICEF, forthcoming).

Given that climate risks impact the whole family, any protection designed to address a family's resilience should take into account factors such as family size and specific risks such as child labour or child marriage. It should also address consumption needs, enhance asset building through in-kind support (such as drought-resistant crops), boost productivity by increasing parents' access to decent work and higher earnings, and increase opportunities for diversified earnings and work opportunities. The latter requires social protection to help facilitate the transition of caregivers from sectors affected by climate mitigation policy (for example, brown-to-green) to unemployment support, or from high climate risk sectors of agriculture to less-affected agriculture sectors. This diversification of earnings promotes income security and resilience.

Reforming fossil fuel subsidies expands fiscal space for child benefits which contributes to wider climate change mitigation policies.

The removal of fossil fuel subsidies can expand fiscal space for child benefits whilst also contributing to wider climate change mitigation policies. Fossil fuel subsidies run counter to mitigating global heating and are often regressive. There has been growing interest in exploring how fuel subsidy reform frees fiscal space for social protection (section 2.1). There is also promising evidence that reforming subsidies would reduce child poverty. For example, simulations for converting Tunisia's energy subsidy found that a universal child benefit would be both more progressive and more efficient in reducing poverty (Bouzekri and Orton 2019). Moreover, in 2010, the Islamic Republic of Iran cut its fuel subsidy and converted it into a quasi-universal basic income. Today, this effectively functions as an affluence-tested child benefit with a high coverage of 86.8 per cent (Kishani Farahani, Ali Khan and Orton 2019).

Furthermore, some countries are recognizing the need to offset the cost of greenhouse gas emission mitigation policies like carbon pricing. For instance, Canada's Climate Carbon Rebate²⁵ is a modest tax-free supplemental payment paid to families with children through the Canadian child benefit – approximately US\$41–75 per quarter for one child, with increments for each additional child.

Recent experience also shows how national child benefit systems can function as powerful shock-responsive mechanisms and can be extended to protect children displaced by crises. The international response to the war in Ukraine shows how well-developed systems are inherently shock-responsive. Millions of displaced Ukrainian children were accommodated by OECD systems, and given access to national child benefits. Other promising examples are demonstrated by the Brazilian Government which has granted access to its flagship cash transfers for vulnerable and displaced Venezuelan families (ILO and UNICEF 2023). However, as section 4.1.3 shows, too many children remain uncovered and are not adequately protected against ordinary child life course risks or various crises.

A major push for universal child benefits

As social protection coverage for children slowly increases, momentum has gathered behind universal child benefits as a foundational policy for maximizing social protection coverage for all children. Recent evidence shows also how universal child benefits can effectively reduce absolute and relative income child poverty, while also acting as the foundation of a child-sensitive social protection system to unlock human capabilities for social and economic development and inclusive growth (ILO, UNICEF and Learning for Well-Being Institute 2024).

²⁵ See <u>https://www.canada.ca/en/revenue-agency/services/child-family-benefits/cai-payment.html</u>.

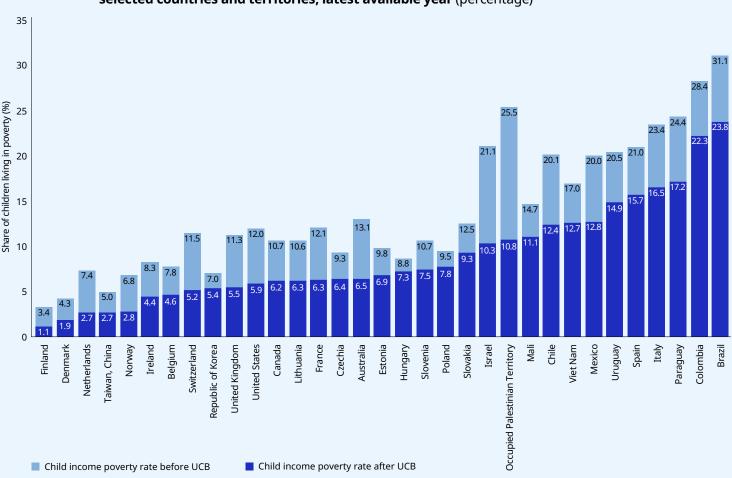


Figure 4.2 Simulated effects of universal child benefits (UCB) on child income poverty, selected countries and territories, latest available year (percentage)

Note: Relative child income poverty rates are calculated as the proportion of children living in households on incomes of less than 60 per cent of the median household income in the population. Household incomes are adjusted for comparison using the square root of the household size. These estimates are calculated on the assumption that all households take up the benefit.

Source: ILO estimates based on the LIS Database (multiple countries).

Figure 4.2 introduces a simulation of the effects of universal child benefits on child poverty in 33 countries and territories. The simulated estimates are calculated based on both the design of the policy (the delivery of a flat cash transfer for all children aged 0 to 18) and a benefit amount equivalent to the average payment per child per month in the 29 countries worldwide that presently provide universal child benefits (6 per cent of the average wage). The combined light and dark blue bars show relative child income poverty without a universal child benefit (and include the effects of any existing child social protection policies in place). The dark blue bars represent the relative child income poverty rate with a simulated universal child benefit policy (replacing payments for any existing child benefits). The light blue bars represent the decrease in poverty that could be achieved by a universal child benefit.

The results show that, in every country, a universal child benefit could reduce poverty more substantially than existing child policy efforts. The extent of the effect varies, with higher reductions in poverty in countries with higher pre-existing child poverty risks, and lower reductions in countries with pre-existing rates of around or below 10 per cent. Countries with universal child benefits already in place – such as the Nordic countries – have lower poverty rates overall; yet, increases in adequacy will improve anti-poverty effects overall. On average across these countries, universal child benefits could reduce poverty by 5 percentage points, equivalent to a reduction of 39 per cent in the number of children experiencing poverty. In recent years, several countries have adopted universal child benefits, and many more are exploring the option (see table 4.1). Evidence would suggest that universal child benefits are a simple and effective way to address the dual challenge of maximizing social protection coverage for children, while addressing the persistent challenge of child income poverty risks.

4.1.3 The state of effective coverage for children

Current data on effective coverage indicate that only 23.9 per cent of children aged 0 to 18 are covered (see figure 4.3).²⁶ This means the vast majority of children – 1.8 billion under 18 years old – are not covered. And fewer than one in ten (7.6 per cent) in low-income countries receive a child

Current data on effective coverage indicate that only 23.9 per cent of children aged 0 to 18 are covered. or family cash benefits, leaving millions vulnerable to missed education, poor nutrition, poverty and inequality, and exposing them to longlasting impacts.

The proceeding trend data on effective coverage discussed below is currently available only for children aged 0 to 15. This data shows that, since the

adoption of the SDGs in 2015, there has been a modest global increase in child benefit coverage, from 22.1 per cent in 2015 to 28.2 per cent in 2023.

Significant regional disparities continue to exist (figures 4.3 and 4.4). Effective coverage rates vary greatly across regions, and the same is true for improvements in coverage since 2015. In the Arab States, rates increased from 12.3 per cent to 14.2 per cent. In Europe and Central Asia, coverage has increased slightly from 74.4 per cent to 76.6 per cent. The Americas saw a more marked improvement, with rates increasing from 49.6 per cent to 54.9 per cent. In Africa, coverage has increased, from 9.2 per cent to 15.4 per cent. Asia and the Pacific experienced the largest increase from 14.3 per cent to 22.4 per cent. However, this progress should not detract from the fact that Africa and Asia and the Pacific still have enormous absolute numbers of children – 492.8 and 764.8 million, respectively – who remain uncovered.

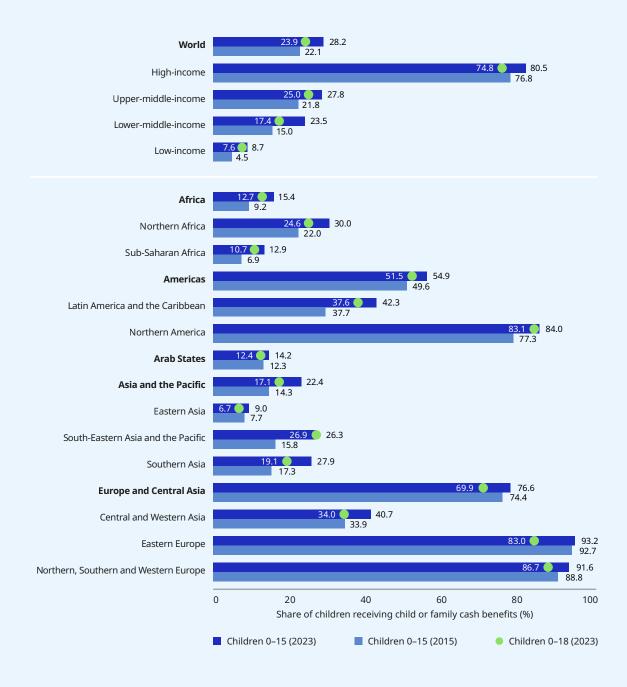
In low-income countries, rates have increased from 4.5 per cent in 2015 to 8.7 per cent in 2023. While progress has happened, it is too slow and remains woefully insufficient. Low-income countries continue to be affected by protracted humanitarian crises and are on the front line of climate breakdown, locking children in a perpetual cycle of poverty. For the same period, lower-middle-income and upper-middle-income countries have made much more substantial progress, with coverage increasing from 15.0 per cent to 23.5 per cent and from 21.8 per cent to 27.8 per cent, respectively. High-income countries continue to edge closer to attaining universal coverage, with rates increasing from 76.8 to 80.5, yet still leaving one in five children uncovered.

The children least covered are those most susceptible to climate risks. Analysis shows that coverage rates for children in countries highly vulnerable to climate change are a third lower than those in countries not classified as being at high risk (ILO, Save the Children and UNICEF 2024).

Figure 4.5 by quadrant shows that all but one of the low-income countries experience high climate risk and low social protection coverage (top left). The majority of lower-middle-income countries are also found in this area. This patterning highlights a double concern for child poverty and inequality, both within and between countries, as social protection is least available in parts of the world where it is most needed.

²⁶ Although there are approximately 2.4 billion children aged 0 to18 years worldwide, this report presents effective coverage data for children under 18 years old only for 2023 (or the latest available year) due to data constraints. Trend data (comparing 2015 with 2023) is only available for those children aged 0 to 15 years, which represents 2 billion children in this age group; of these, 1.4 billion enjoy no effective social protection coverage. Furthermore, in this report, the use of "0 to 18 years" applies to all children aged from zero up until their 18th birthday. The use of "0 to 15 years" refers to all children aged from zero up until their 18th birthday.

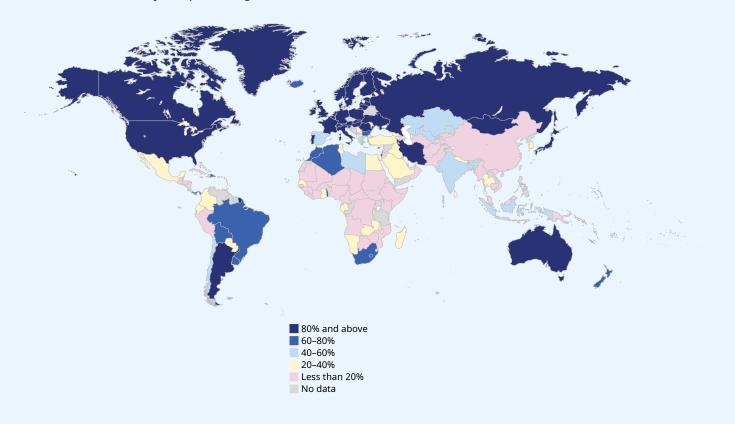
Figure 4.3 SDG indicator 1.3.1 on effective coverage for children and families: Share of children receiving child or family cash benefits, aged 0 to 15 (2015 and 2023) and aged 0 to 18 (2023), by region, subregion and income level (percentage)



Notes: See Annex 2 for a methodological explanation. Data for coverage of children aged 0 to 18 is available for 2023 only. Global and regional aggregates are weighted by population aged 0 to 15 and 0 to 18. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

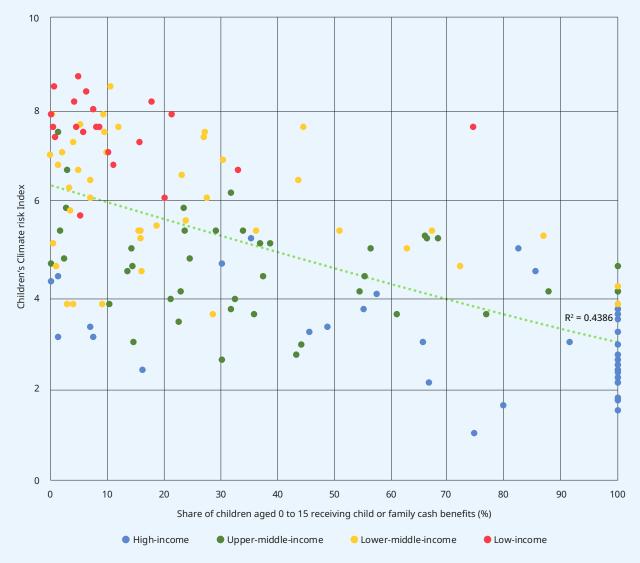
Figure 4.4 SDG indicator 1.3.1 on effective coverage for children and families: Share of children aged 0 to 15 receiving child and family cash benefits, 2023 or latest available year (percentage)



Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer: ilo.org/disclaimer.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Figure 4.5 The Children's Climate Risk Index compared with effective coverage for children and families: Share of children aged 0 to 15 receiving child or family cash benefits, by income level, 2023 (percentage)



Source: Children's Climate Risk Index, UNICEF (2023b) and ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; <u>ILOSTAT</u>; national sources.

4.1.4 Adequacy of social protection for children

Benefits should be enough to meet the stated goals of schemes (such as contributing to child-raising costs and nutrition goals). They should also be enough to meet the goals of the international social security standards – which stress the importance of adequacy – and their key principles which should inform the design and implementation of every social protection benefit, including regular indexation. Even when countries meet this specified minimum, where fiscal space permits, they should consider higher levels of expenditure on children – Convention No. 102 sets a minimum floor, not a ceiling. The ILO's Committee of Experts on the Application of Conventions and Recommendations has also recently stressed the importance of more appropriate benchmarks, as benefit levels remain too low in many countries (ILO 2023d). This might imply the need for a higher international social security standard for the branch of family and child benefits.

Figure 4.6 Impact evidence of how child poverty and vulnerability risks are addressed through the nine life-cycle social protection functions

Challenges rendering households vulnerable to poverty	General poverty and vulnerability	Individual shocks	Collective shocks	Injury and illness	Lack of school access, high costs of schooling	Job loss	Long-term disability	Income insecurity assiociated with old age
Child and family	oenefits							
Quasi-universal or universal child benefits, including								
universal benefits for children vith disabilities								
The other eight li	fe-cycle social prote	ection benefits						
Unemployment protection								
Maternity protection			I					
Old-age pensions					[1	
Disability protection								
Social health protection								
Sickness benefits								
Employment injury compensation			- 1					
Survivors' benefits (especially								
through orphan benefits								

Evidence of child poverty and child well-being impact exists

High probability of a proactive impact on child well-being

Note: Authors' interpretation of findings from the sources cited below.

Sources: ILO (2011b); Bastagli et al. (2016); Davis et al. (2016); ODI and UNICEF (2020) 2020; Richardson (2015); Standing and Orton (2018).

Adequacy also requires countries to ensure that benefits are set at the right level for diverse family circumstances, taking into account age, family size, family structure and location, and are regularly updated to keep up with changes in the cost of living. Increments based on disability, gender, ethnicity and other proxies for high vulnerability may warrant consideration in contexts of systemic discrimination or disadvantage (see ILO, UNICEF and Learning for Well-Being Institute 2024).

Adequacy does not refer only to the value at which child and family benefits are set. It also refers to the adequacy of other benefits which can also positively impact child well-being (figure 4.6). Where there is a comprehensive range of adequate life-cycle protection for other groups, such as those of working age and pensioners in households with children, this also protects child well-being.

4.1.5 Filling the financial gap in social protection for children

Ensuring adequate social protection requires sufficient resources to be allocated for children and families. Yet, average social protection expenditure for children (excluding health expenditure)

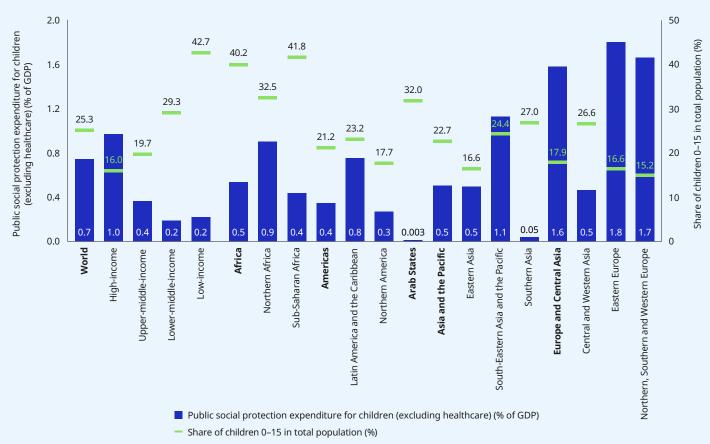


Figure 4.7 Public social protection expenditure (excluding health) on children (percentage of GDP) and share of children aged 0 to 15 in total population (percentage), by region, subregion and income level, 2023 or latest available year

Notes: See Annex 2 for a methodological explanation. Global and regional aggregates for expenditure are weighted by GDP.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ADB, GSW, IMF; OECD; UNECLAC; UNWPP, national sources.

Average social protection expenditure for children (excluding health expenditure) across the world currently amounts to only 0.7 per cent of GDP.

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across the world currently amounts to only 0.7 per cent of GDP (figure 4.7), with great variation across countries. While countries in Europe and Central Asia spend more than 1 per cent of GDP, expenditure ratios remain well below that threshold in other parts of the world. Regional estimates for Africa, Asia and the Pacific, and the Americas show expenditure levels of 0.5 per cent of GDP or below. An average expenditure level of only 0.2 per cent and 0.4 per cent of GDP in low- and

upper-middle-income countries, respectively, lags behind the expenditure of 1.0 per cent of GDP in high-income countries.

Climate action to ensure social justice for children requires more equitable intergenerational expenditure and the filling of the financing gap. Currently, too little is spent on social protection. And too little of this expenditure is devoted to children, especially in the early years (ILO and UNICEF 2023). Globally, out of the total social protection expenditure, only 3.8 per cent is spent on children, contrasting with 33.0 per cent on healthcare, 38.7 per cent on pensions, and 24.6 per cent on working-age benefits. While children are indirectly protected by the benefits received by adult household members, this expenditure distribution is still hugely disproportionate and insufficiently focused on children.

The big challenge for closing protection coverage gaps for children lies in filling the social protection finance gap. To guarantee at least a basic level of social security for all children, lower-middleincome countries would need to invest an additional US\$88.8 billion and upper-middleincome countries a further US\$98.1 billion per year – equivalent to 1 and 0.3 per cent of GDP, respectively. Low-income countries would need to invest an additional US\$59.6 billion, equivalent to 10.1 per cent of their GDP (Cattaneo et al. 2024). Options for expanding fiscal space are discussed in section 3.4.

There is also an opportunity to fill the financing gap and explore how climate financing can be leveraged for social protection. Given that children bear the brunt of the climate crises, despite contributing the least, and recognizing the role that social protection can play in climate action, climate financing could be considered to help fill the financing gap and contribute to closing coverage gaps. While several sources of climate finance can be considered – international public climate finance, international private investment, national and international carbon markets or domestic finance – international climate finance should not eat into the finance available for addressing development and humanitarian needs. Analysis indicates that, since 2018, more than half of the climate finance mobilized by developed countries was not additional to existing development assistance (Mitchell, Ritchie and Tahmasebi 2021).

4.1.6 Priorities, and recommendations

To respond to children's ordinary life course needs, the climate crisis and a just transition towards environmentally sustainable economies and societies, social protection will be more crucial than ever. This requires:

Accelerating progress towards universal coverage and progressively covering all children. Almost all countries can improve their child benefit provision and there are different ways to achieve universal coverage. Countries can progressively realize their child benefit, introduce an age-limited benefit (for example, 0–2 years) and build gradually towards a more inclusive child benefit – ideally, a full universal child benefit for children between 0 and 18 years, and beyond. The recently launched Child Benefits Tracker²⁷ provides an online platform to monitor children's access to benefits and advocate for closing protection gaps.

- Guaranteeing adequate benefit levels. For coverage to be transformative, it must deliver benefits set at values high enough to generate meaningful change in children's lives and wellbeing. Providing increments for critical life course stages, such as the first two years of life, would be prudent.
- Providing a comprehensive range of benefits. While social protection instruments directed at families with children are critical for ensuring children's well-being, the evidence also points to the clear role of other social protection instruments across the life cycle. The combined power of life cycle protection leads to a stronger reduction of the drivers of diminished well-being through a system-wide approach.
- Building social protection systems that are rights-based, gender-responsive and inclusive. Ensuring the well-being of children and addressing the conditions that adversely affect them require robust social protection systems and schemes. These need to be (a) anchored in law, rights-based and inclusive in all dimensions – including, but not limited to, gender, disability, migratory status, race and ethnicity – and (b) well coordinated with social services, care and family-friendly policies, and decent work opportunities for parents and caregivers.
- Ensuring that social protection systems are linked with broader care and support services and decent work policies. Adequate social protection across the life cycle – together with childcare and education, and decent work for parents and other caregivers – is critical for the well-being of children. This also means extending social protection to workers in the informal economy and protection for workers in all types of employment.
- Enhancing shock responsiveness is crucial for protecting children in a world riven by climate breakdown and other crises. Having in place comprehensive systems can enable countries to respond quickly; if necessary, align

a humanitarian response with the national system-strengthening agenda; and address ordinary life-cycle challenges. Significant effort is therefore also needed to ensure that social protection systems and schemes are prepared before crises strike, while also channelling a rapid and effective response to shocks, to avert or lessen adverse child well-being impacts. Ensuring sustainable and equitable financing for social protection systems. Mobilizing additional investment for social protection is key – tapping into loss and damage finance may be an option. It would compensate children for the climate threat they face and the fossil fuel excess of previous generations. It would also enable them to invest in the formation of capabilities required by a greener economy. Investment now would represent an act of intergenerational solidarity, and restorative and redistributive social justice, and would protect the rights of children yet to come.



4.2 Social protection for women and men of working age

- A just transition to environmentally sustainable economies and societies requires adequate social protection for persons of working age to reduce their vulnerability, and support them in coping with shocks and slow-onset events, and in achieving their labour market transitions.
- Yet, in many countries, persons of working age still face significant coverage gaps when it comes to life-cycle risks, such as sickness, maternity, disability, work injury, unemployment or death of a breadwinner. A lack of income security increases people's vulnerability and erodes their capacities to adapt to changing conditions, including climate risks.
- Social protection coverage is an essential element of decent work, and indispensable for people who are not able to work temporarily or permanently. Indeed, social protection coverage protects and promotes their capabilities, prevents poverty, enables them to navigate change and contributes to an inclusive recovery from crises.
- Globally, 4.8 per cent of GDP is allocated to non-health public social protection expenditure for people of working age. While high-income countries allocate 6.3 per cent of their GDP to income security for people of working age, low-income countries can allocate only 0.4 per cent, leading to significant social protection gaps for their workers. Regional variation in social protection expenditure is large, ranging from 1.4 per cent of GDP in the Arab States to 7.1 per cent in the Americas.
- Many countries still lack collectively financed social security benefit schemes that ensure income security in the event of maternity, sickness, unemployment and employment injury. Where the only available mechanisms are based on employer liability or private arrangements, results are often suboptimal in terms of coverage, equity and sustainability. Introducing mechanisms that are collectively financed through social insurance and/or general taxation can provide for wider coverage and more reliable benefits.
- Effective coordination between social protection policies and employment, labour market, wage and tax policies is of critical importance to ensure an inclusive and job-rich recovery from crises.





4.2.1 Introduction: Making income security a reality

The ongoing transformations of economies and societies, whether related to the climate crisis, technological innovations or demographic change, require adequate social protection during working age. Adequate social protection is a key tool to reduce vulnerability and enhance resilience to enable people, societies and economies to adapt to change.

While gainful employment is the main source of income for people of working age, social protection has an important enabling role. It enables people to engage in decent and productive employment, protects and promotes their capabilities, facilitates a healthy balance between work and family responsibilities, and ensures a dignified life. According to the latest ILO modelled estimates, 60.5 per cent of people aged 15 and above are economically active and earn their livelihoods through income-generating activities; 72.9 per cent of men and 48.2 per cent of women (ILO 2024k). Yet, many find themselves in precarious and insecure employment arrangements, including in the informal economy, with limited job and income security and in poor working conditions (ILO 2023w). Globally, more than 2 billion people are in informal employment,²⁸ representing 57.8 per cent of the workforce -55.2 per cent of women and 59.6 per cent of men (ILO 2023w). Moreover, 241 million people are in extreme working poverty, that is, they live in extreme poverty despite being in employment (ILO 2023w). Another significant share of the global population, most of whom are women, perform unpaid care and household work, often in addition to paid work (ILO 2024a). All these persons of working age need social protection, whether in paid employment or not, whether working as employees or as self-employed, whether looking for a job, being temporarily or permanently incapable of working, or in education (ILO 2021m).

By partially or fully replacing lost incomes and providing income support to those affected, social protection systems have proven to be key in protecting and promoting human capabilities, smoothing incomes over people's lives and stabilizing aggregate demand (ILO 2021o; 2020h; 2020k; 2020e). This includes income security²⁹ in the event of maternity, sickness, work injury, disability, unemployment or death of the breadwinner (ILO 2021q; UN 2020), and helps people to find and sustain decent and productive employment. Social protection also facilitates effective access to healthcare and other services. Furthermore, it contributes to healthier lives by enhancing the social determinants of health (WHO, forthcoming, see



By partially or fully replacing lost incomes and providing income support to those affected, social protection systems have proven to be key in protecting and promoting human capabilities, smoothing incomes over people's lives and stabilizing aggregate demand.

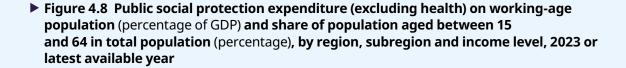
also section 4.4) and to decent work in the care economy (ILO 2024a). Social protection systems are essential for protecting and promoting human capabilities, smoothing incomes over people's lives and stabilizing aggregate demand (ILO 20210; 2020h; 2020k; 2020e).

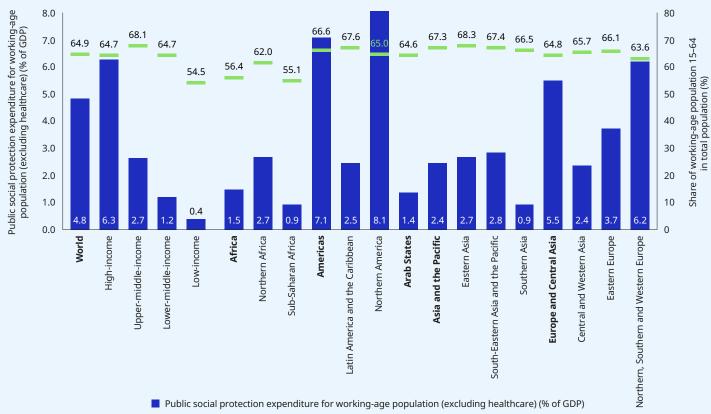
While some countries have heeded the lessons from the COVID-19 pandemic and other crises and invested in reinforcing their social protection systems, much more needs to be done to ensure that people of working age can enjoy the full protection that they need to:

- engage in decent and productive employment,
- benefit from income security also in times when they are not able to work temporarily or permanently, and
- balance their work and family responsibilities.

²⁸ Employees are considered informally employed if (a) their employer does not contribute to social security on their behalf, (b) this information is unavailable, or (c) they do not benefit from paid annual leave or sick leave. Employers (with hired workers) and own-account workers (without hired workers) are considered informally employed if they run an economic unit in the informal sector (a non-incorporated private enterprise without a formal bookkeeping system or not registered with relevant national authorities). In cases where this question is not asked or the answer is missing, the enterprise is considered part of the informal sector if there is no fixed place of work, or it employs five employees or fewer. This threshold can vary depending on the reporting structure of country questionnaires. Contributing family workers are informally employed by definition, regardless of whether they work in formal or informal sector enterprises (ILO 2023w, 13).

²⁹ While income security is understood in a broad sense, which also includes benefits in kind, it is essential to note the complementarity of income security with access to healthcare discussed in section 4.4.





Share of working-age population 15–64 in total population (%)

Note: See Annex 2 for a methodological explanation. Public social protection expenditure for working-age population (excluding healthcare) global and regional aggregates are weighted by GDP.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ADB, GSW, IMF; OECD; UNECLAC; UNWPP, national sources.

Large coverage gaps are associated with significant underinvestment in social protection for people of working age, including maternity benefits, unemployment benefits, employment injury benefits, disability benefits, survivor benefits and general social assistance, but excluding healthcare (covered in section 4.4). Globally, countries allocate on average 4.8 per cent of their GDP to non-health social expenditure for persons of working age (see figure 4.8), ranging from 6.3 per cent of GDP in high-income countries, to only 0.4 per cent in low-income countries. Regional variations are also significant, ranging from 1.4 per cent of GDP in the Arab States, 1.5 per cent in Africa and 2.4 per cent in Asia and the Pacific, to 5.5 per cent in Europe and Central Asia, and 7.1 per cent in the Americas. The comparison with the share of the working-age population in the total population demonstrates that demographic factors can only explain part of the regional variation and the relative underdevelopment of social protection programmes for persons of working age.

While social protection plays an essential role in ensuring income security, it is clear that income security cannot be achieved by social protection systems alone. To promote decent work, social protection policies need to be well coordinated with policies in other areas, particularly labour market and employment policies (including

While social protection plays an essential role in ensuring income security, it is clear that income security cannot be achieved by social protection systems alone. active labour market policies), employment protection, occupational safety and health, wages (including minimum wages) and collective bargaining. Social protection policies would also benefit from being aligned with policies that support the formalization of enterprises and employment, policies to support workers with family and care responsibilities and policies to promote gender equality in employment.³⁰ Such an integrated approach

is essential for achieving the SDGs and ensuring decent work and social justice for all.

The remainder of this section of Chapter 4 is divided into five subsections, dealing in turn with the areas of social security that are most relevant to people of working age, namely:

- maternity protection, paternity and parental leave benefits (section 4.2.2);
- sickness benefits (section 4.2.3);
- employment injury protection (section 4.2.4);
- disability benefits (section 4.2.5); and
- unemployment protection (section 4.2.6).

Each of these subsections discuss both contributory and non-contributory schemes, which together ensure universal coverage with adequate benefits, based on sustainable and equitable financing mechanisms. Although the primary focus is on cash benefits, the discussion will also take into account that benefits in kind – in particular healthcare, care and other social services³¹ (Martínez Franzoni and Sánchez-Ancochea 2015) – play a major role in ensuring income security for people of working age. Access to healthcare is discussed in more detail in section 4.4. Together, these schemes contribute to building national social protection systems, including floors.

³⁰ Recommendation No. 202 highlights the links between social protection and other policy areas, and emphasizes each country's responsibility to implement the most effective and efficient combination of benefits and schemes in its national context, selecting from a repertoire including universal benefit schemes, social insurance schemes, social assistance schemes, negative income tax schemes, public employment schemes and employment support schemes.

³¹ These include, for example, employment services, skills development programmes, childcare facilities and long-term care services that have significant implications for income security, particularly for women (Martínez Franzoni and Sánchez-Ancochea 2015).



4.2.2 Maternity protection, paternity and parental leave benefits

- Exposure to climate change hazards, such as extreme heat, weather events and air pollution, has consequences for maternal and neonatal morbidity and mortality, including gestational diabetes, hypertensive disorders of pregnancy, preterm birth, low birth weight and stillbirth but also exposure to vector-borne diseases. These impacts have implications for maternity protection, leading to increased demands on health and maternity care systems. Yet, inequalities in access to reproductive, maternal, newborn and child health persist, with significant differences within and between countries, depending on income, education level and place of residence.
- Maternity benefits and maternity care provision are crucial to ensure that women in their final stages of pregnancy and after childbirth are not forced to keep working and do not expose themselves and their children to significant health risks. Such benefits directly support income security, therefore addressing some of the key social determinants of poor maternal and child health and early childhood development.
- Only slightly more than a third (36.4 per cent) of women with newborns worldwide received a maternity cash benefit in 2023, a slight increase compared to 29.6 per cent in 2015. Coverage varies significantly across regions and income levels: coverage of childbearing women is close to universal in most of Europe, compared to a mere 2.6 per cent in low-income countries and 5.9 per cent in sub-Saharan Africa. Similarly, free maternity care is not universally available.
- Maternity protection includes income security (through cash benefits), leave policies and effective access to free quality maternal and newborn healthcare services. In addition, employment and labour market interventions – such as employment protection and non-discrimination, childcare solutions after return to work, adequate occupational health and safety measures and breastfeeding facilities at the workplace – are important to give adequate protection to pregnant women and new mothers.
- Adequate provision for paid paternity leave is an important corollary to maternity protection policies and contributes to a more equal sharing of family responsibilities and other unpaid care work. In 2021, 115 out of 185 countries surveyed by the ILO offered a right to paid paternity leave, with an average duration of nine days.



The importance of increased maternity protection in a changing climate

Maternity protection is crucial for preventing and alleviating poverty and vulnerability, enhancing the health, nutrition and overall well-being of mothers and newborns, fostering gender equality and promoting a dignified life for all from the very start. It encompasses provisions such as income support, access to maternal healthcare, paid maternity leave, time to breastfeed, safeguards against discrimination in employment, parental leave, right to return to work and childcare options upon returning to work. While these are mainly labour protection measures, this section focuses on maternity protection measures pertaining to social protection, that is, maternity cash benefits and free maternity care. Social protection systems are essential for minimizing the adverse impacts of the climate crisis on pregnant and childbearing women and their children.

As a fundamental element of maternity protection and social health protection, good maternal healthcare without hardship provides for effective access to adequate healthcare and services – including reproductive health services – during pregnancy and childbirth and beyond, lifting financial barriers to ensure the health of both mothers and children. As with social health

Climate change affects pregnant women directly and indirectly, in the long and short term, and can be caused by suddenas well as slowonset events. protection in general (see section 4.4), a lack of coverage puts the health of women and children at risk and exposes families to significantly increased risk of poverty, and can act as an incentive to forgo care.

Climate change affects pregnant women directly and indirectly, in the long and short term, and can be caused by sudden- as well as slowonset events. The threat of the climate crisis to livelihoods,

particularly among vulnerable populations (see section 2.1), impacts the social determinants of health and increases the health risks of pregnant women related to income insecurity, poor nutrition, water, hygiene, sanitation and access to health services. Forced migration and displacement due to lost livelihoods or environmental shocks and disasters adversely impact the health of all members of affected communities (Chapter 2), but can be most life threatening for pregnant women, new mothers and newborns who are in critical need of adequate nutrition, access to healthcare, and sufficient rest. A large body of studies shows that the exposure to climate change hazards such as extreme heat, adverse weather events and air pollution have consequences for maternal and neonatal morbidity and mortality (including gestational diabetes, hypertensive disorders of pregnancy, preterm birth, low birth weight and stillbirth) but also exposure to vector-borne diseases. Both direct and indirect exposure to climate hazards can also affect mental health, increasing risk for stress, anxiety and depression - known risk factors for adverse perinatal outcomes (WHO, UNICEF and UNFPA 2023a). Women in the informal economy are particularly vulnerable to the risks of income insecurity and ill health because of discrimination, unsafe and insecure working conditions, lack of employment protection, often low and volatile incomes, limited freedom of association, lack of representation in collective bargaining processes and lack of access to social insurance (ILO 2016a).

In light of these increased risks, providing adequate maternity protection is paramount. Yet, evidence points to significant gaps in coverage, adequacy, comprehensiveness and financing for benefits and services to which pregnant women and their newborns should have access.

A comprehensive approach to maternity protection

According to international labour standards (see box 4.4), maternity protection includes not only income security and access to free maternal healthcare, but also the right to interrupt work activities, to rest and to recover around childbirth. It ensures the protection of women's right to work and rights at work during maternity and beyond, through measures that prevent risks, protect pregnant women from unhealthy and unsafe working conditions and environments, safeguard their employment, protect them against discrimination and dismissal, and allow them to return to their jobs after



According to international labour standards, maternity protection includes not only income security and access to free maternal healthcare, but also the right to interrupt work activities, to rest and to recover around childbirth.

Box 4.4 International standards relevant to maternity protection

Women's right to maternity protection is enshrined in the Universal Declaration of Human Rights (1948), which sets out the right to social security and special care and assistance for motherhood and childhood. The International Covenant on Economic, Social and Cultural Rights (1966) establishes the right of mothers to special protection during a reasonable period before and after childbirth, including prenatal and postnatal healthcare and paid leave or leave with adequate social security benefits. The Convention on the Elimination of All Forms of Discrimination against Women (1979) recommends that special measures be taken to ensure maternity protection, proclaimed as an essential right permeating all areas of the Convention.

Since the adoption by the ILO of the Maternity Protection Convention, 1919 (No. 3), in the very year of its foundation, a number of more progressive instruments have been adopted, in line with the steady increase in women's participation in the labour market in most countries worldwide. The Social Security (Minimum Standards) Convention, 1952 (No. 102), Part VIII, sets minimum standards as to the population coverage of maternity protection schemes, including cash benefits during maternity leave, to address the temporary suspension of earnings (see Annex 3, table A3.7). The Convention also defines the medical care that must be provided free of charge at all stages of maternity, to maintain, restore or improve women's health and their ability to work. Further, it provides that free maternal healthcare must be available to women and the spouses of men covered by maternity protection schemes.

The Maternity Protection Convention, 2000 (No. 183), and its accompanying Recommendation (No. 191), provide detailed guidance for national policymaking and action aiming to ensure that women:

- are granted at least 14 weeks of maternity leave paid at a rate of at least two thirds of previous earnings (Convention No. 183) or up to 18 weeks at 100 per cent (Recommendation No. 191);
- have employment protection during pregnancy, maternity leave and the right to return to the same or an equivalent position;
- enjoy the right to one or more daily nursing breaks or a daily reduction of hours of work to breastfeed their children; and
- are not required to perform work which has been determined by the competent authority to be prejudicial to their health or that of their children.

In order to protect women's rights in the labour market and ensure that maternity does not constitute a source of discrimination by employers, ILO maternity protection standards specifically require that cash benefits be provided through schemes based on solidarity and risk pooling, such as compulsory social insurance or public funds, while strictly limiting the potential liability of employers for the direct cost of benefits.

Recommendation No. 202 calls for access to essential healthcare, including maternity care and basic income security, for people of working age who are unable to earn sufficient income owing to (among other factors) maternity. Cash benefits should be sufficient to allow women a life in dignity and without poverty. Maternal healthcare services should meet criteria of availability, accessibility, acceptability and quality (UN 2000a); they should be free and not create hardship or increase the risk of poverty for people in need of healthcare. Maternity benefits should be granted to all residents of a country. Reinforcing the objective of achieving universal protection, the Transition from the Informal to the Formal Economy Recommendation, 2015 (No. 204), calls for the extension of maternity protection to all workers in the informal economy.

maternity leave under conditions that take into account their specific circumstances, including the need for breastfeeding (Addati, Cattaneo and Pozzan 2022). From the perspective of equality of opportunity for and treatment of women and men, maternity protection takes into account the particular circumstances and needs of women, enabling them to enjoy their economic rights while raising their families (ILO 2014b; 2018e). For example, maternity protection starts even before conception, with the ability of women to freely determine the number of children they want to have, and the intervals at which they have them, through access to affordable and good-quality sexual and reproductive rights and services (Folbre 2021). In the absence of such services, women carry the social, economic and health consequences of unwanted pregnancies or unsafe abortions, which are especially severe in the case of adolescent mothers.

Maternity protection can also counteract the "motherhood penalty", that is, the disadvantages faced by mothers of young children compared to fathers or to women without children. Mothers are less likely to be employed, receive lower wages and are less likely to work in managerial or leadership positions than women without children, fathers and men without children.

Access to reproductive, maternal, newborn and child healthcare

Effective access to appropriate prenatal and postnatal healthcare services without hardship for pregnant women and mothers with newborns is an essential component of maternity protection and social health protection alike. Making such services free helps lift the financial barriers of access to healthcare that may be particularly pronounced for women. It is important in order to improve maternal and child health, reduce maternal and child mortality, reach universal health coverage and achieve gender equality (SDG targets 3.1, 3.2, 3.8 and 5.6). Access to healthcare in general (SDG target 3.8) is discussed in detail in section 4.4.

This is all the more important, as many women suffer from pregnancy or childbirth complications. While the global maternal mortality ratio declined by 34 per cent between 2000 and 2020, 287,000 women (223 deaths per 100,000 live births) globally died from a maternal cause in 2020, equivalent to almost 800 maternal deaths every day, approximately one every two minutes. As many as 95 per cent of all maternal deaths occurred in low- and lower-middle-income countries (WHO, UNICEF and UNFPA 2023b).

Apart from access to free adequate health services, many socio-economic factors determine the health outcomes of pregnant women. These conditions are further impacted by climate change as maternal and newborn morbidity and mortality are expected to increase with an increased frequency of extreme weather events (Segal and Giudice 2022; Dodzi Nyadanu et al. 2024). The health impact of the climate crisis on pregnant women will increase demands on the health system. Therefore, it is important that health staff are trained to raise awareness of climate-related health risks for pregnant women. The needs of pregnant women should be integrated into climate-sensitive health policy planning to guarantee adequate access to essential sexual, reproductive, maternal, newborn and child health services. This will also require additional financing to meet current unmet needs and future increases in demand. However, trend analysis of the subindices of SDG target 3.8.1 on reproductive, maternal, newborn and child health (encompassing family planning, prenatal care, diphtheria tetanus toxoid and pertussis immunization, and acute respiratory infection care seeking) shows very slow progress in the availability of such services over the last two decades (period 2000–21) (WHO and World Bank 2023).



While the global maternal mortality ratio declined by 34 per cent between 2000 and 2020, 287,000 women worldwide died from a maternal cause in 2020, equivalent to almost 800 maternal deaths every day, approximately one every two minutes.

The average annual changes have been below 1 per cent since 2000 and no changes have been observed since 2015. Furthermore, large inequalities between countries persist, with much better access to services in high-income countries while low- and lower-middle-income countries lag behind.

Similarly, inequalities within countries persist by economic status, education and place of residence (urban or rural). The analysis of a subset of 78–89 countries for which disaggregated data is available, shows that there is a striking social gradient in access to reproductive, maternal and child health services, with a difference of almost 15 percentage points between highest (median coverage of 73 per cent) and lowest quintiles (58 per cent) and an overall difference of 3-4 percentage points between each quintile. There are also inequalities between urban (70 per cent) and rural (63 per cent) populations and also between those without education (56 per cent) and secondary or higher education (71 per cent) (WHO and World Bank 2023). Patterns of inequality also prevail when considering intersectional discrimination. For example, women with disabilities are found to be regularly excluded from the provision of sexual and reproductive health services and face the additional risk of involuntary sterilization (UN 2019a). Particular efforts are therefore needed to ensure effective access for expecting women with disabilities, who

face additional barriers in meeting their sexual and reproductive healthcare needs, including societal misperceptions and stereotypes around their sexuality, inaccessibility of services and/or information and fear of abuse.

A diversity of schemes providing maternity benefits

Globally, 157 out of 217 countries and territories have periodic maternity cash benefits anchored in national legislation, of which 142 have social insurance and 11 have tax-financed employmentrelated schemes (figure 4.9); 119 have social insurance as the only mechanism and 7 in combination with means-tested benefits; and 16 combine social insurance with employer liability. Four countries and territories have universal tax-financed maternity benefits, one of them in combination with employer liability. A total of 49 countries still only have employer liability mechanisms, which present challenges in terms of access and adequacy of protection.

The Maternity Protection Convention, 2000 (No. 183), recommends that countries introduce collectively financed maternity benefits (social insurance or tax-financed) rather than relying on employers' liability provisions. This improves equality of treatment for men and women in the labour market because it shifts the burden of bearing the costs of maternity benefits from the individual employer to the collective, reducing discrimination against women of childbearing age in hiring and in employment, and the risk of nonpayment of due compensation by the employer. Such reforms can also facilitate the coverage of women with low contributory capacities and interrupted employment histories, including those in part-time or temporary employment, and those in self-employment.

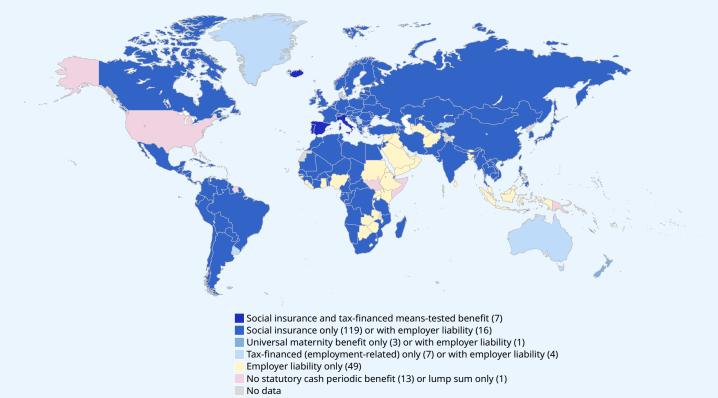


Figure 4.9 Maternity protection (cash benefits) anchored in law, by type of scheme, 2023 or latest available year

Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

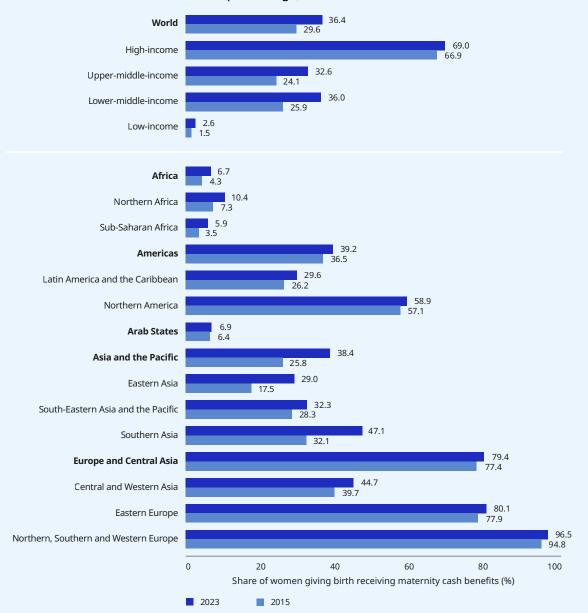
Note: The number between parentheses refers to the count of countries or territories.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

Coverage of maternity benefits

Worldwide, only just above one out of three pregnant women receives a cash benefit to compensate for reduced income generation capacities around the time of childbirth. The effective population coverage of maternity benefits has increased modestly between 2015 and 2023, from 29.6 to 36.4 per cent, with massive regional differences (figure 4.10). All regions experienced progress but increases were much more pronounced in Asia and the Pacific (an increase of more than 13 percentage points, from 25.8 to 38.4 per cent) and less in Africa (from 4.3 to 6.7 per cent) and Europe and Central Asia (from 77.4 to 79.4 per cent). Progress has also been

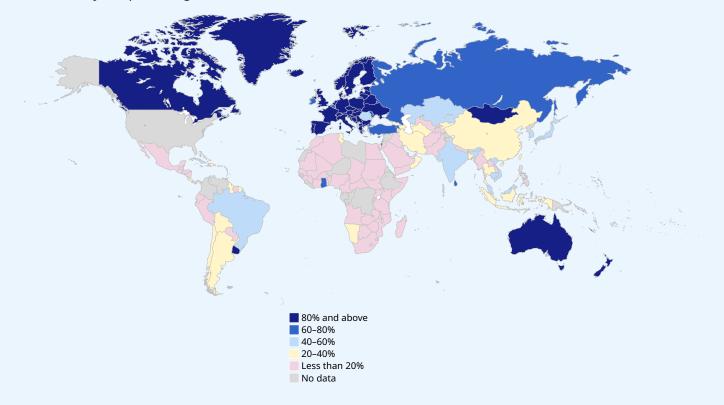
Figure 4.10 SDG indicator 1.3.1 on effective coverage for maternity protection: Share of women giving birth receiving maternity cash benefits, by region, subregion and income level, 2015 and 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by number of women. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

 Figure 4.11 SDG indicator 1.3.1 on effective coverage for maternity protection: Share of women giving birth receiving maternity cash benefits, 2023 or latest available year (percentage)



Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

much slower in low-income countries (from 1.5 to 2.6 per cent) and fastest in lower-middle-income countries (from 25.9 to 36 per cent). The low overall coverage and slow progress in low-income countries illustrate the extent to which they are left behind and uncoupled from global trends.

Thirty-nine countries have achieved close to universal coverage, with more than 80 per cent of pregnant women receiving maternity cash benefits, mainly high-income countries and mostly in Europe. Whereas in 63 countries (39 of them in sub-Saharan Africa), coverage remains at less than 10 per cent. Mongolia stands out as the only lowermiddle-income country with universal coverage. While 69.0 per cent of childbearing women are covered in high-income countries, only 2.6 per cent of women are covered in low-income countries (figures 4.10 and 4.11). Coverage gaps largely relate to the prevalence of informal employment and the lack of appropriate mechanisms to cover women outside formal employment.

Legal coverage stands at 46.6 per cent (figure 4.12) when considering mandatory social insurance (26.7 per cent) and tax-financed benefits (19.9 per cent) together.³² The difference of 10 percentage points between legal and effective coverage suggests an enforcement gap and the existence of barriers for accessing benefits. Regional and income level variations are large, with legal coverage around 10 per cent in Africa, the Arab States and in low-income countries, and the highest coverage rates in Europe and Central Asia. Southern Asia stands out as the subregion with the highest legal coverage with tax-financed

³² Taking into account that there might be some double counting.



Figure 4.12 Legal coverage for maternity protection: Share of women in working age over 15 years old covered by maternity cash benefits, by region, subregion, income level and type of scheme, 2023 or latest available year (percentage)

Note: Global and regional aggregates are weighted by the women in the working age. Estimates are not strictly comparable to the previous World Social Protection Report due to changes in the methodology.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

maternity benefits, which can be attributed to the fact that both India and Bangladesh have universal tax-financed maternity benefits that provide at least a basic level of income security. However, the much lower effective coverage figures for Southern Asia seem to suggest that the entitlement is not (yet) fully realized.

In 16 countries, pregnant and childbearing women can benefit from publicly financed cash transfer programmes. However, many of these programmes are not anchored in law and tend to cover only a small fraction of the population, with often very modest benefit amounts that do not allow women to withdraw temporarily from paid or unpaid work. As a result, women continue to work too far into pregnancy or return to work too soon after childbirth, with potentially negative effects on their own and their babies' health. Finally, in many low- and lower-middle-income countries, these cash transfer programmes come with behavioural conditions which tend to reinforce the traditional division of paid and unpaid care work between women and men (ILO 2016c; 2016a; 2019a). For example, receipt of benefits may be conditional on uptake of pre- and postnatal care, skilled delivery or health checks-ups for and vaccination of the child, and sanctions may be applied if the conditions are not fulfilled. Unless those services are affordable, accessible geographically, of high quality and culturally acceptable for women, conditionality will result in women obtaining neither the cash benefit nor the needed health services.

Adequacy of maternity benefits, in duration and amount, to ensure income security

According to international standards, governments should provide income security for expecting women, at least so that "the woman can maintain herself and her child in proper conditions of health and with a suitable standard of living" (Convention No. 183). Minimum adequate benefit levels are nationally defined and "may correspond to the monetary value of a set of necessary goods and services, national poverty lines, income thresholds for social assistance or other comparable thresholds established by national law or practice, and may take into account regional differences" (Recommendation No. 202). For higher-level standards, the objective is not only preventing poverty but also being able to maintain a certain standard of living despite income loss around the time of delivery. International labour standards therefore also define minimum benefit levels as a share of previous earnings. These levels are set as a minimum of 45 per cent in Convention No. 102 and two thirds in Convention No. 183.

Out of 210 statutory maternity cash benefit schemes in 173 countries, 190 schemes pay benefits as a share of previous earnings; of which 124 schemes replace the full earnings, 41 schemes

Out of 210 statutory maternity cash benefit schemes in 173 countries, 190 schemes pay benefits as a share of previous earnings.

replace at least 66 per cent as required by Convention No. 183, and 21 schemes replace at least 45 per cent as required by Convention No. 102.

International standards also require a minimum duration of paid maternity leave, protecting women from having to work too long into their pregnancy or returning to work too fast before being fully recovered. The minimum duration is set at 12 weeks in Convention No. 102 and 14 weeks in Convention No. 183. A total of 121 of the 210 schemes meet the higher standard of 14 weeks or more, and 51 grant the benefit for at least 12 but less than 14 weeks. Thirty-eight schemes provide benefits for less than the recommended 12 weeks.

Paternity leave³³

Adequate provision for paid paternity leave is an important corollary to maternity protection policies and contributes to a more equal sharing of family responsibilities and other unpaid care work (ILO 2019f). In 2021, 115 out of 185 countries surveyed by the ILO offered a right to paternity leave (see Table 4.2), with an average duration of nine days. Thirty-three countries introduced paternity leave between 2011 and 2022, which points to the increasing recognition of men's caregiving role. However, almost two thirds of potential fathers³⁴ (1.26 billion men) live in countries with no entitlements to paternity leave and are missing out on the unique opportunity to bond with their newborn children.

Paternity leave is paid in the majority of countries (102 of 115) that provide this entitlement. However, in 61 of these countries providing paid paternity leave, the cash benefit is granted through an employer liability. Due to the potential deterrent effect of employer liability schemes, some countries have reformed the source of funding for paternity leave cash benefits, abandoning full employer liability towards systems based on collective responsibility. Between 2011 and 2023, Luxembourg, the Netherlands, Oman, the Seychelles and Uruguay moved to a system where these benefits are collectively financed. Over the same period, Myanmar and South Africa moved from full employer liability to a system where fathers on paternity leave are fully paid by social protection.

Only 30 out of 115 countries with paternity leave have mandated paternity leave cash benefits for self-employed workers, and just 42 countries have paternity leave provisions applicable to adoptive fathers. Provision of paternity leave for same-sex couples is also scattered. Only 20 countries grant paternity leave to same-sex parents, with the majority of these countries in Europe and Central

- ³³ This section is based on Addati, Cattaneo and Pozzan (2022).
- ³⁴ "Potential fathers" are men of reproductive age. For the purposes of this report, the age group of "men of reproductive age" is assumed to be the same as that of "women of reproductive age" that is, 15 to 49 years old.

Region/ income group	No statutory paternity leave	Social protection	Employer liability	Mixed	Unpaid
World	70	32	61	9	13
Africa	22	4	25	1	2
Americas	15	3	13	1	2
Arab States	8	-	3	-	-
Asia and the Pacific	15	5	12	-	1
Europe and Central Asia	10	20	8	7	8
Low-income	12	1	13	-	2
Lower-middle- income	22	5	17	-	3
Upper-middle- income	20	5	21	-	4
High-income	16	21	10	9	4

Table 4.2 Source of funding of paternity leave cash benefit, by region and income level, 2021 (number of countries)

Source: Addati, Cattaneo and Pozzan (2022).

Asia, except Australia, Mexico, New Zealand and South Africa.

Despite the recent introduction of paternity leave provisions by a number of countries and the benefits associated with paternity leave, take-up rates remain low. Potential reasons include stereotypes about men as "breadwinners" while ignoring their role as fathers and caregivers. For this reason, Chile, the Islamic Republic of Iran, Italy, Luxembourg and Suriname have introduced obligatory paternity leave, while others (such as France, Portugal and Spain) have only required fathers to take a portion of existing parental leave entitlements (Addati, Cattaneo and Pozzan 2022).

Parental leave

In addition to maternity and paternity leave and benefits, in line with the ILO Workers with Family Responsibilities Convention, 1981 (No. 156) and Recommendation (No. 165), some countries have introduced parental leave that either parent can take subsequent to the paid maternity or paternity leave. In 2021, 68 out of 185 countries offer a statutory right to parental leave, 48 of them in Europe and Central Asia. In 21 of these countries, the leave is unpaid; 11 countries pay a share of previous earnings; all except one have a replacement rate above 45 per cent; and 7 pay a flat rate. The duration varies between 18 weeks to up to two years. Since take-up rates remain low for fathers, 15 countries reserve specific periods of leave for fathers to facilitate a more equitable sharing of care responsibilities (Addati, Cattaneo and Pozzan 2022). Some countries and employers also implement complementary measures to flexibilize the working time and accommodate childcare responsibilities, especially in the early years. Flexitime and teleworking can be important measures to allow women to combine work and family responsibilities without experiencing a pension penalty later in life (see Chapters 4 and 5). In contrast, long periods of parental leave for mothers have been shown to produce adverse effects for women's employment and career opportunities (Semyonov and Mandel 2006)

In addition, the challenge of combining responsibilities to care for young children and responsibilities to earn a living is also recognized as a contingency. It is mainly covered through (a) family or child benefits; (b) the public provision of affordable, accessible, quality and acceptable childcare for preschool children (see section 4.1); (c) breastfeeding arrangements; (d) sickness benefits for sick children (section 4.2.3); and (e) tax policies designed in a way to promote gender equality at home and at work.

Maternity protection in an era of climate crisis and others

To a large extent, the lack of access to adequate maternity protection reflects persisting gender inequalities and discrimination that women experience daily around the world. For example, a recent World Bank report found that women enjoy two thirds of the legal rights available to men, with 37 countries granting half a billion women less than half of the legal rights of men (World Bank 2024). Biased norms around gender roles, related structural discrimination and resulting unequal opportunities for education, participation in the labour market, career opportunities, ownership of assets, financial and digital inclusion, voice, access to essential services, decision-making power and political representation, all contribute to women overall being less resilient. Thus, they are more at risk and more affected by climate hazards and have

less capacity to recover (Sepúlveda 2024). These structural disadvantages hit pregnant women even harder, in light of their greater needs and vulnerability. Various actors have called attention to the need to build social protection systems that protect pregnant women also in view of increased vulnerabilities resulting from the climate crisis. In addition to ensuring social protection floors that guarantee access to free maternity care - as well as income security for all pregnant women and higher levels of protection for as many women as soon as possible - the WHO, UNICEF and the UNFPA have issued a call for action to better protect pregnant women, newborns and children from the impacts of climate change (WHO, UNICEF and UNFPA 2023a). Social protection systems which provide income security to ensure women can stop working before and after delivery, and which facilitate access to affordable reproductive and maternity care, including during times of crisis, are key to this endeavour. Especially in low- and lower-middle-income countries, the international community is failing women on its promise to leave no one behind, with 95 per cent of maternal deaths occurring in these countries.

▶ 4.2.3 Sickness benefits

- Sickness cash benefits are a critical tool for breaking the vicious cycle of poor health and poverty. Yet, they are legally guaranteed for less than two third of the global workforce, representing a little over a third of the working age population, mostly concentrated in high- and upper-middle-income countries. Over four in ten workers are left legally unprotected. Even when covered, adequacy remains an issue, as benefit level, duration and eligibility criteria (such as waiting periods) may create gaps in protection.
- Almost a quarter of countries in the world provide paid sick leave exclusively through employer liability rather than collectively financed sickness benefits. Such arrangements tend to exclude some categories of workers, create discrimination against workers with chronic conditions and are not appropriate in case of public health crises, all of which are impacted by climate change.
- Sickness benefits are essential to cushion some of the direct impacts of climate change on health and labour productivity. The related needs are projected to be most acute in countries and regions where sickness benefit coverage is at its lowest. To maximize their impact on health and well-being, sickness benefits may need to adapt their portability, eligibility criteria and disbursement modalities to changing national circumstances that may include more intense and frequent adverse climate events and health emergencies.
- Sickness benefits are a central element of pandemic prevention, preparedness and response as they support public health and social measures. The COVID-19 crisis revealed the decent work deficits of the most vulnerable workers, including front-line workers and migrant workers. In response, some countries have transitioned out of employer liability mechanisms or are in the process of doing so. This effort needs to be sustained and extended.
- More and better data are urgently needed. Shortage of data on sickness benefit effective coverage prevents its monitoring as part of the SDG framework.





The case for universal sickness benefits in a changing climate

To support the response to the climate crisis, sickness benefits need to be extended to all in need. Sickness benefits aim to ensure income security during sickness, guarantine or sickness of a dependent relative. As such, it is a social protection instrument with a public health objective (ILO 2020d). Sickness benefits allow individuals to stay at home until full recovery, thereby protecting their own health and, in the case of communicable diseases, the health of others. Sickness benefits contribute to the human rights to health and to social security (ILO 2017b), more important than ever when facing adverse health events for individuals and society alike. Key principles for their design are included in ILO standards (ILO 2020j) (see box 4.5).

The impact of climate change on health affects population groups unevenly. Impacts are stronger on those who are living with a disability or who are affected by long-term and chronic diseases. For instance, temperature rise affects the management of diabetes and other chronic diseases (He et al. 2020; Witt et al. 2015). Changes in the climate system affect non-communicable disease management, intensity and likely outcomes (Baldermann, Laschewski, and Grooß 2023; Breitner-Busch et al. 2023; Kjellstrom et al. 2010; Peirce, Espira and Larson 2022). People living with disabilities or with long and chronic illnesses already have additional costs of living related to their condition and the lack of adaptation of their living and working environments (WHO 2022a; 2023a). Some of those costs relate to working time lost seeking care, transportation costs and others, which may be heightened by not only the direct effects of climate change, but also some of the adaptation and mitigation policies to counter it. In this context, ensuring that all people can have income security when they or their dependent relatives need to seek care, guarantine, or recover from illness or healthcare intervention, will be instrumental.

Climate change is increasing exposure to heat stress, infectious diseases, extreme weather events, environmental pollution stress and

Box 4.5 Key sickness benefit principles from international standards

The following international social security standards provide essential guidance on sickness benefits: the Income Security Recommendation, 1944 (No. 67); the Social Security (Minimum Standards) Convention, 1952 (No. 102); and the Medical Care and Sickness Benefits Convention, 1969 (No. 130) and the Medical Care and Sickness Benefits Recommendation, 1969 (No. 134). These instruments reflect an international consensus on the following principles:

- Scope: Sickness benefits are provided to prevent income loss due to illness (Convention No. 102, Art. 14 and Convention No. 130, Art. 7(b)). They should be granted when seeking preventive or curative care, isolated in quarantine, and until recovery (Recommendation No. 134, Paras 8(a) and (b)).
- Care for dependants: Appropriate provision should be made to help economically active persons who have to care for a sick dependant (Recommendation No. 134, Para. 10).
- Coverage for all through public measures: Sickness benefits should be organized in the most efficient way to guarantee access to benefits for all (Recommendation No. 202, Para. 9).
- Solidarity in financing: The cost of sickness benefits and their administration should be borne collectively by way of social insurance contributions, taxation or both, in a manner which avoids hardship to persons of small means, ensuring that they can maintain their families in health and decency (Convention No. 102, Arts 67 and 71, see also Recommendation No. 202, Para. 3(h) and Recommendation No. 67, Annex, Para. 26(8)).
- Waiting periods: To access sickness benefits, waiting periods, if any, should not exceed three days (Convention No. 102, Art. 18, Convention No. 130, Art 26-3).
- Benefit level: Sickness benefits shall be paid periodically, providing at a minimum 45 or 60 per cent of past earnings (Convention No. 102, Art. 16, and Convention No. 130, Art. 22, respectively).

Climate change is increasing exposure to heat stress, infectious diseases, extreme weather events, environmental pollution stress and other mental health strains.

other mental health strains (Flouris et al. 2018; Levi, Kjellstrom and Baldasseroni 2018; Bennett and McMichael 2010). It also reshapes the livelihood opportunities in many places, thus increasing exposure to undernutrition and malnutrition as well as impacting households' financial capacities to cope with increased cost of healthcare (Bennett and McMichael 2010; Willett et al. 2019). Sickness benefits will need to adapt to those changes and the overall

increase in the disease burden that directly impact working populations, their productivity and their capacity to work. Without sickness benefits in place, the risk of impoverishment is increased and adds to the vicious cycle of climate change and poverty.

Legal and effective coverage

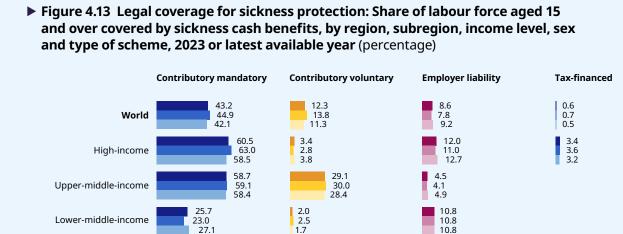
Legal coverage

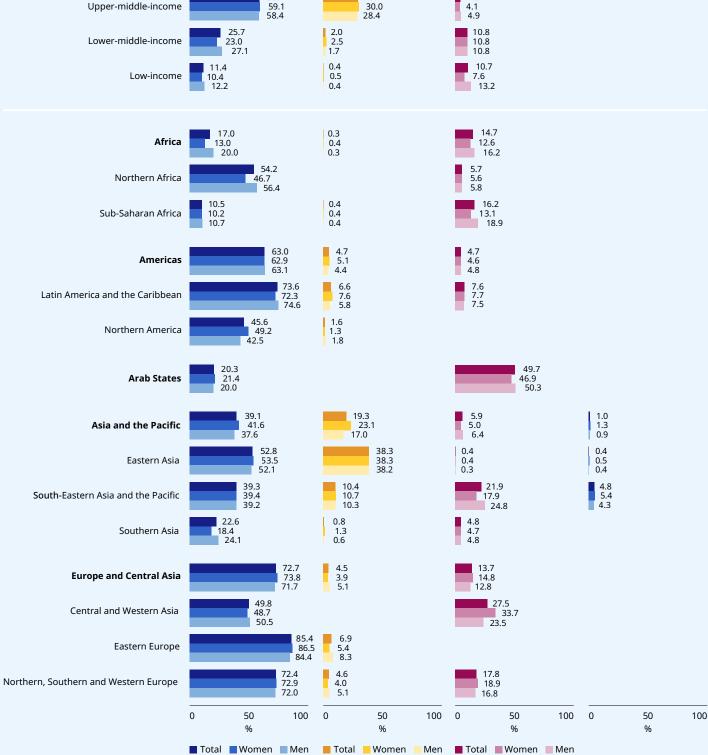
The ILO estimates that 56.1 per cent of the labour force in the world, representing 34.4 per cent of the working-age population, are legally entitled to sickness benefits (both contributory and noncontributory). This leaves more than four in ten workers without legal coverage (figure 4.13). There are wide regional differences, with high levels of legal coverage in Europe, Central Asia and Latin America and the Caribbean, and lower levels in the Arab States, Africa, and Asia and the Pacific.

Some categories of workers are often legally excluded from sickness benefits, such as workers in part-time and temporary employment, selfemployed workers and jobseekers (ILO 2021i). In the context of climate change, additional efforts are needed to extend protection to all workers in the rural economy, whose occupation and health are both likely to be drastically impacted by the changing climate (for example, by higher exposure to heat stress in a number of countries, related risks of skin cancer, and cardiovascular issues) (ILO 2023o).

Sickness benefits should not be confused with paid sick leave as an employer liability (box 4.6). A total of 65 countries rely exclusively on an employer liability mechanism to compensate the loss of income during sickness (see figure 4.14), and 8.6 per cent of the global labour force is legally entitled to paid sick leave provided directly by their employer - called "employer liability". Although legal protection can be provided by employer liability, sickness benefits offer a more robust way to provide income security in case of ill health, quarantine or sickness of a relative. Indeed, reliance on employer liability may have adverse effects. Coverage is limited, by definition, to salaried work only (self-employed people being their own employer) and it often also excludes specific categories of employees, such as casual workers and workers who are paid hourly wages. Solidarity in financing is further limited as individual enterprises are left to bear the costs of workers' sickness. This may put pressure on workers not to take sick leave, and lead to discrimination in recruitment against individuals with declared medical conditions. Small enterprises may struggle with the financial implications and therefore have an incentive to employ workers in forms of employment that are not subject to statutory paid sick leave (ILO 2020d).

Since the COVID-19 pandemic, which brought into sharp focus sickness benefit coverage gaps and the limitations of employer liability, some countries have taken action to build sickness benefits into their national social protection systems, thereby increasing their comprehensiveness (box 4.7).





Note: Global and regional aggregates are weighted by the labour force aged 15 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to changes in the methodology.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Box 4.6 Sick leave and sickness benefits: Definitions

Sick leave addresses the need to take leave when a person is sick and should be defined in labour law. Sick leave is an entitlement separated from other types of leave, recognized in both the Holidays with Pay Recommendation, 1954 (No. 98) and the Holidays with Pay Convention (Revised), 1970 (No. 132). Sick leave entitlements should be reflected in contracts and take into account equality of treatment for temporary and other types of vulnerable employment (ILO 2011a; 2019f). Each country defines instances in which there is a suspension of earnings during sick leave for salaried workers. Countries may also define a period, if any, during which there is a legal obligation for employers to cover the salary of workers (employer liability).

Sickness benefits guarantee that an adequate income is provided when a person is ill and unable to earn an income. To maximize the impact of sickness benefit schemes, ILO standards provide guidance for their design features and financing structure (see box 4.5). Sickness benefits should be financed collectively based on broad risk pooling and solidarity – and should not be borne by the employer or worker alone.

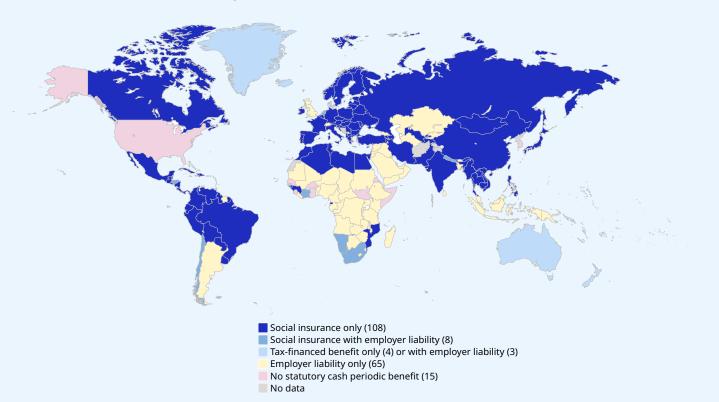


Figure 4.14 Sickness protection (cash benefits) anchored in law, by type of scheme, 2023 or latest available year

Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Note: The number between parentheses refers to the count of countries or territories.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Box 4.7 Introduction of sickness benefits in Oman

In July 2023, Oman issued Royal Decree No. 52/2023 promulgating a new Social Protection Law, which unifies the social protection system in the country under a coherent legal framework, and creates new benefits, including sickness cash benefits. Until then, paid sick leave was an employer liability, which was not implemented uniformly across sectors and categories of workers, and which created a risk of discrimination against workers with pre-existing health conditions.

The new law creates a sickness benefit for all workers, including migrants on par with nationals, in all sectors of activity with the notable exception of domestic work, where the migrant population is disproportionately represented. In addition, it increases the maximum period of sickness benefit to 26 weeks, in line with ILO minimum provisions under Convention No. 102. The introduction of the sickness benefit was an opportunity to extend provisions to support care responsibilities for sick family members up to 30 days a year.

Such reform could be an inspiration for the rest of the Gulf Cooperation Council countries, most of which still rely on employer liability with low compliance among migrant workers, who make up the majority of the labour force (ILO 2023s). In a recent survey of Nepali workers returning from Gulf Cooperation Council countries, 76 per cent of respondents reported not being able to take sick leave every time they were ill, and 17 per cent were never paid when sick (ILO 2023b). The transition to a social protection mechanism for sickness benefits instead of employer liability is critical to enhance effective access for the most vulnerable workers.

Effective coverage

Even if workers are legally covered for sickness benefits, they would only be effectively covered once they are affiliated to a scheme, are aware of their entitlements, understand access procedures, and effectively receive their benefits when needed. Several barriers can prevent



Several barriers can prevent effective coverage, including administrative or geographical barriers, and non-compliance with registration procedures or lack of awareness. effective coverage, including administrative or geographical barriers, and non-compliance with registration procedures or lack of awareness (Scheil-Adlung and Bonnet 2011; ILO 2014c; 2017b; 2021q; 2021i). Despite its importance for public health, a lack of comprehensive and systematic data collection on the different aspects of effective coverage has led to income security during illness currently being excluded from SDG monitoring efforts³⁵ (Lönnroth et al. 2020; Thorpe et al. 2020).

Adequacy of benefits

Benefit adequacy depends on the level of income support, the duration and the existence of a waiting period. When benefit levels are calculated as a percentage of past earnings, the existence of a guaranteed minimum benefit level is essential for low-income workers (ILO 2021a, 253). Out of 172 countries for which information is available, 51 have provisions for less than 60 per cent of past earnings.

Benefit duration is also important, as persons affected by long-term illnesses are in critical need of an income and may lose their job if there is no or insufficient sickness benefit provision. Similarly, a smooth transition to temporary or permanent disability benefits is needed, as such benefits are also affected by important coverage gaps (see section 4.2.5). In this respect, some countries have decided to create specific benefits for long diseases or even integrate chronic diseases into the eligibility criteria for disability benefit schemes. Globally, 75 countries provide benefits for a maximum duration lower than the minimum

³⁵ Income security during illness is included neither under SDG target 1.3 on social protection, nor under SDG target 3.8 on universal health coverage.

▶ Table 4.3 National legal provisions on level and duration for sickness benefits

Benefit level and duration	Number of countries
At least 60 per cent of past earnings and 26 weeks	71
At least 26 weeks but less than 60 per cent of past earnings	26
At least 60 per cent of past earnings but less than 26 weeks	50
Less than 60 per cent of past earnings and 26 weeks	25
Total number of countries for which information is available	172

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

requirement of 26 weeks under Convention No. 102.

A minority of countries concentrated in the highand upper-middle-income groups are compliant with the minimum sickness benefit level and duration in Convention No. 102 (see table 4.3). In the Arab States and Asia and the Pacific, less than a fifth of the countries reporting information have benefit levels of at least 60 per cent of past earnings and a duration of at least 26 weeks, while the proportion is around a third in Africa.

In some countries, sickness benefits are subject to a waiting period, which may hinder their public health impact on the prevention of diseases and/ or their complications. In total, 61 countries have waiting periods and 28 countries have waiting periods greater than three days.

Sickness benefits should be granted including when a worker is undergoing preventive care and has to isolate for the purpose of quarantine, in line with ILO standards. A greater impact of such benefits on public health, health and wellbeing can be achieved through provisions for self-isolation or caregiving for dependants.

Climate-sensitive sickness benefits

Three important factors need to be considered in the design and implementation of sickness benefits to ensure their contribution to climate change adaptation and mitigation:

The capacity to work of workers in some sectors is affected and will be increasingly affected by weather conditions (ILO 2019g; 2024g), which makes it necessary to revisit the scope of the sickness benefits contingency and its coordination with unemployment protection and occupational injuries and diseases benefits (ILO 2024f).

- The global burden of chronic, long-term and non-communicable diseases is increasing globally and with the climate crisis, the need for sickness benefits is likely to increase in geographical areas that are particularly exposed to adverse climate impacts (Bennett and McMichael 2010; ILO 2019g), which also tend to be those in which sickness benefits are non-existent or very limited, while in other places, such benefits may stagnate or be reduced (Lipponen et al. 2024).
- The increase in health security threats due to the climate crisis has an impact on infectious and communicable diseases. It therefore calls for an adapted design for sickness benefits to maximize their contribution to epidemic and pandemic prevention, preparedness and response.

Sickness benefits design and implementation

Scope of the contingency, eligibility and benefit disbursement

Eligibility and benefit disbursement may need to be adapted to the changing climate for a number of professions. This is particularly the case for those who will not be able to work when the temperature is above a certain threshold, which will impact most severely the rural economy and outdoors occupations, such as construction (ILO 2019b).

Changes in labour capacity due to extreme weather exposure (measured in lost working hours) disproportionately affect countries ranking low on the Human Development Index, with low healthcare and sickness benefit coverage rates and nascent systems (ILO 2021q). Most of the measured losses relate to heat exposure. In

In 2022, an estimated 490 billion potential labour hours were lost and the biggest losses were concentrated in low- and middle-income countries. 2022, an estimated 490 billion potential labour hours were lost and the biggest losses were concentrated in lowand middle-income countries (Romanello et al. 2023). For instance, in 2020, such losses were three times the global average in Bangladesh, India and Pakistan (Romanello et al. 2021). Highly climate-sensitive livelihoods, such as agriculture, show particularly prominent social protection coverage gaps. Without unemployment or sickness benefits, those lost working hours translate into

income losses, with likely knock-on effects on the social determinants of health. Alternatively, workers will work at the risk of damaging their health, possibly incurring additional occupational accidents. This could lead to impoverishing consequences in countries where social health protection, occupational health services and compensation schemes are not guaranteed (see section 4.4), affecting workers' capacity to work and earn an income.

Portability of benefits in the context of climate-induced migration and displacement

The erosion of natural resources in some regions, extreme weather events and socio-economic consequences of the climate crisis, including conflicts over resources, are driving population displacement and migration, while also hampering return opportunities for those already displaced (see sections 2.1.2 and 3.2.3). In this context, social health protection entitlements, both for healthcare services and income support, need to be portable and inclusive.

Identification and eligibility procedures during extreme weather events

Some flexibility and agility in identification and eligibility procedures are needed to continue to reach people during emergency situations – in particular, extreme weather events such as floods or cyclones. Indeed, in many countries that do not yet universally cover their population for sickness benefits, eligibility criteria can be narrowly defined (ILO 2021d) and may need to be relaxed in situations where vulnerability is generalized (ILO 2020g). Especially under such circumstances, grievance redressal mechanisms and consistent and regular monitoring are key to evaluate the modified schemes (ILO 2024f).

Sickness benefits and the global burden of chronic, long-term and non-communicable diseases in a changing climate

Non-medical costs,³⁶ including income loss, increase the risk of poverty and reduce adherence to public health measures and treatment for patients and their families. The risks of impoverishment are even greater when healthcare benefits are not guaranteed and the cost of healthcare services must be borne out of pocket (see section 4.4). The impoverishing impact of long or chronic diseases, the burden of which is highly impacted by the changing climate, is well documented (WHO 2018). For example, national tuberculosis patients cost surveys show that patients face significant direct non-medical costs (mostly transport and nutrition) and income loss (which can represent the majority of the related costs), creating incentives to forgo care (WHO and ILO 2024).

Data analysis has shown that social protection spending levels are inversely associated with the prevalence of tuberculosis (Siroka, Ponce and Lönnroth 2016). Furthermore, the adequacy of benefit levels is strongly associated with health impact (Lönnroth and Weil 2014). The vicious cycle of poverty and poor health and the social gradient in health are particularly illustrated when

it comes to tuberculosis. This disease affects most strongly low- and middle-income countries and, within countries, populations at the lower end of the income spectrum (WHO 2023a). Emerging evidence also shows that tuberculosis is a climate-sensitive disease, with a positive association between climate change and the five risk factors for the disease



Data analysis has shown that social protection spending levels are inversely associated with the prevalence of tuberculosis.

³⁶ Costs that patients face due to their medical condition are typically classified as: (a) direct medical costs relate to costs that occur within the health system (for example, cost of drugs or fees of healthcare staff); (b) direct non-medical costs, which are care-related costs incurred outside the health system by patients (for example, the cost of transportation to and from health facilities or increased food spending due to a treatment-related change in diet); and (c) indirect costs that are related to the opportunity cost of seeking care or being sick, notably income loss due to lost working time.

(HIV infection, diabetes mellitus, undernutrition, overcrowding and poverty) (Kharwadkar et al. 2022). Similar evidence on the need for and impact of social protection are emerging for a range of long-term or chronic diseases (such as HIV, diabetes and hypertension) and persons with comorbidities, illustrating the need for a systemic response (Jan et al. 2018; Kazibwe, Tran and Annerstedt 2021). New joint WHO-ILO guidance on social protection for people affected by tuberculosis recommend to progressively move away from social protection programmes targeted at single diseases (WHO and ILO 2024) and secure comprehensive social protection systems, which include sickness benefits and are based on rights, a necessary feature to avoid stigma (Ferreira et al. 2023).

Sickness benefits and epidemic and pandemic prevention, preparedness and response

Sickness benefits play a crucial role in supporting public health and social measures during health security crises. The COVID-19 pandemic, and

Sickness benefits play a crucial role in supporting public health and social measures during health security crises.

previous public health crises such as SARS or MERS, had already put sickness benefit coverage gaps in the spotlight, illustrating how the lack thereof compelled people to work when sick or quarantined, increasing the risk of contagion (ILO 2020e; Drago 2010; James 2019). With a projected increase in health security threats in the new climate context, sickness benefits are a central policy

instrument to incentivize preventive behaviours and cushion the socio-economic consequences (ILO 2020e).

The following measures should be taken, drawing on the lessons learned from previous epidemics:

 Securing the existence of sickness benefits under comprehensive social protection systems and making them accessible to all. This may mean that sickness benefits need to be extended quickly in case of a health emergency in countries where universal access is not yet in place. For example, in Colombia, beneficiaries of the non-contributory social health insurance scheme, who were not covered for sickness cash benefits before the COVID-19 pandemic, were made eligible to receive lump sum benefit payments equal to seven days of the minimum wage in case of contracting COVID-19 (Government of Colombia 2020).

- Ensuring that quarantine is systematically considered as part of the contingency, in line with Recommendation No. 134 (ILO 2020e). For instance, during the COVID-19 pandemic, in Japan, cash sickness benefits were extended to those in quarantine or diagnosed with COVID-19, while requirements to obtain medical certificates were waived simultaneously (ISSA 2020).
- Including flexibility and agility in identification and eligibility procedures. For example, in El Salvador, the social security institute extended benefit payments to any worker who needed to quarantine, without waiting period and regardless of whether or not they fell ill, during the COVID-19 pandemic (*El Mundo* 2020).
- In order to ensure continuity of health and care sectors operations during health emergencies, it is important to also ensure that sickness benefits are available and adequate for health and care workers. The COVID-19 pandemic and previous health emergencies shed light on the protection gaps for many front-line workers and those in essential occupations (ILO 2020a; 2023x). Looking forward, as the world is moving towards a strengthened international legal framework on pandemics and health security threats, the crucial need for social protection in general and sickness benefits in particular cannot be overlooked (Adebisi et al. 2023; Viegas, Ventura and Ventura 2022; Nikogosian and Kickbusch 2021).

4.2.4 Employment injury protection

- In the context of climate change, it is even more essential to accelerate the extension of employment injury protection for work-related injuries and occupational disease, which contributes to achieving SDG target 1.3. Despite some progress, only 37.4 per cent of workers worldwide are covered by employment injury insurance. In low- and middle-income countries, coverage is significantly lower, owing to labour market structures and weak enforcement of schemes where they exist.
- Extending employment injury protection to workers in the informal economy remains of high importance as part of realizing the fundamental right to a safe and healthy working environment for all workers. This is particularly urgent for those prone to the risks of climate change, including rising heat stress and extreme weather events. Safety and health at work can benefit from policy synergies with employment injury benefits for all workers.
- The cost of employment injury benefits and of safety and health at work, including prevention of injury or disease and rehabilitation of injured workers, is part of the overall cost of production and contributes to preventing injured workers, and the families of injured and deceased workers, from falling into poverty.
- Occupational diseases are consistently under-reported and undercompensated. Given the impact of climate change, countries with a clear list of the diseases covered would need to regularly review the range of diseases against which their employment injury insurance schemes protect. This is because global heating and biodiversity destruction allow existing diseases to spread to new places and will most likely result in the introduction of new diseases. Having a comprehensive range of diseases covered by employment injury insurance would reduce pressure and cost transfer onto other branches, such as healthcare and disability benefits.
- Adequate employment injury benefits take the form of periodic payments, with cost-of-living adjustments for long-term benefits for example, in cases of permanent disability and for survivors' benefits. Yet, although more countries are adopting and implementing employment injury insurance schemes in line with international social security standards, 16 countries still depend on direct compensation by employers, 22 countries provide only lump sum benefits and 18 countries lack any kind of employment injury insurance scheme for injured and disabled workers. Transitioning to collectively financed employment injury insurance schemes would improve effective coverage in particular in hazardous occupations and in small and medium-sized enterprises and enhance protection levels.





Protecting workers in the event of work-related injuries and diseases

Despite significant progress in occupational safety and health, 2.9 million workers die every year as a result of occupational accidents or work-related diseases. In addition to these avoidable deaths, many workers are victims of non-fatal work-related injuries: 395 million non-fatal work-related injuries each year result in more than four days of absence from work (ILO 2023a). Climate change is already contributing to worsening health conditions and, more specifically, more work-related injuries due to heat stress and other factors (ILO 2024g; 2024b; Filomena and Picchio 2023). Given the risk of further temperature rise and extreme weather events, such negative impacts are likely to intensify in the future, with significant human costs in terms of avoidable disease, death and

Despite significant progress in occupational safety and health, 2.9 million workers die every year as a result of occupational accidents or workrelated diseases. impairment. If they have not done so already, countries need to start introducing laws and regulations to protect workers from increasing injuries and ill health owing to climate emergencies, for example, by introducing work time shifts for outdoor workers to avoid excessive heat (ILO 2024q).

These developments render effective employment injury schemes even more important. Well-established employment injury schemes provide benefits in cash and

in kind. These include medical care, financial compensation, and physical and vocational rehabilitation to those affected by work-related injuries and diseases, regardless of whether the accidents or ill health are climate-related. In doing so, such schemes address one of the key challenges in modern workplaces and act as an automatic stabilizer of workers' health and well-being. Employers have the responsibility of securing occupational safety and health for their workers, and for providing fair, equitable and effective compensation to injured workers and the families of deceased workers. Collectively financed employment injury schemes organized through social insurance constitute an important risk-pooling mechanism anchored in national legislation, providing greater reliability and predictability for both workers and employers.

Yet, where collectively financed (social insurance) employment injury schemes are not in place, the only hope of redress for injured workers or their survivors lies in direct compensation paid by their employer or obtained in a lawsuit against the employer through the courts. Lawsuits are usually lengthy, costly and stressful for victims; they are therefore rarely pursued, and compensation is often not paid.

Where the financial responsibility for compensation rests on individual employers, they often take out private insurance. However, the outcomes of these schemes are often suboptimal. The processing of an insurance claim involves the need to obtain relevant information and requires the injured person to undergo rigorous medical assessments, causing substantial delays in obtaining healthcare and other benefits. In addition, an employer may be reluctant to make a claim for fear of other legal implications and the cost of compensation. Moreover, since the employer may not continue in business and a private insurer may be reluctant to provide benefits for a lengthy period of time, benefits are usually disbursed either in the form of a lump sum or through periodic payments for a short period of time, without the necessary adjustment in line with the cost of living. In recognition of these drawbacks, many countries have replaced employer liability systems with social insurance.

In addressing work-related injuries and disease, social insurance relies on the following principles:

- "no fault": an injured worker or survivor(s) of a deceased worker should qualify for benefits without having to prove "fault" on the part of the employer;
- collective sharing of liability among employers, so that employers collectively finance the scheme, allowing for risk pooling among them; and
- neutral governance of administration of the scheme: the right to benefit is established outside the contractual relationship between a worker and their employer.

Employment injury benefits in most countries consist of:

- medical and allied care for injured workers; and
- earnings-related periodic cash benefits for disabled workers, or for dependants of deceased workers, including funeral grants.

Many national employment injury schemes also include a set of wider objectives, such as rehabilitation and re-employment of injured or

b Box 4.8 International standards relevant to employment injury protection

The right to protection against employment injury is enshrined in the Universal Declaration of Human Rights, 1948, and the International Covenant on Economic, Social and Cultural Rights, 1966.¹

According to ILO Convention No. 102 (Part VI), any condition that has a negative impact on health and is attributable to a work accident or an occupational disease, and the incapacity to work and earn that results from it, must be covered. Accordingly, the provision must include medical and allied care that is free of charge, and cash benefit to the injured person or their dependants. The Employment Injury Benefits Convention, 1964 (No. 121), and its accompanying Recommendation, No. 121, set higher standards and recognize the importance of an integrated approach in improving working conditions, limiting the impact of employment injuries, and facilitating the reintegration of people with disabilities in the labour market and in society (for more details on the minimum requirements, see annex table A3.5).

The approach taken by Recommendation No. 202 is different, reflecting its focus on preventing or alleviating poverty, vulnerability and social exclusion through income security guarantees and access to at least essential healthcare for all in need, irrespective of the origin of the disability or ill health giving rise to the need for income security and care. Basic income security and access to essential healthcare can be ensured through a variety of approaches, combining contributory and non-contributory schemes and different types of benefits. Particularly relevant to employment injury protection is the Recommendation's further call for combining preventive, promotional and active measures with benefits and social services, and the coordination of social protection policies with policies that promote, among others, secure work within a decent work framework.

¹ Universal Declaration of Human Rights, Art. 25(1); International Covenant on Economic, Social and Cultural Rights, Arts 7(b), 12(b) and (c). See UN (2008).

sick workers, and the promotion and maintenance of safety and health at work. These objectives can only be achieved in the context of an integrated framework for comprehensive occupational safety and health measures, strong inspection and enforcement measures, and adequate

Financially sustainable and administratively efficient employment injury schemes are a step towards preventing injured workers and families of injured and deceased workers from falling into poverty. cash and healthcare benefits accompanied by appropriate physical and vocational rehabilitation services.

A rating system according to which levels of contribution are calculated to reflect the past performance of employers in respect of employment injuries, provides employers with an incentive to prevent workplace injuries and facilitate the return to work of injured workers. For such a scheme to work effectively, a strong inspection mechanism should be in place to avoid the risk of employers hiding accidents. For this reason, rating systems are mainly adopted in high-income countries.

Financially sustainable and administratively efficient employment injury schemes are a step towards preventing injured workers and families of injured and deceased workers from falling into poverty. Thus, they contribute to the achievement of SDG 1 on ending poverty in all its forms everywhere.

The fundamentals of employment injury protection are summarized in the United Nations and ILO international standards specified in box 4.8.

Types of employment injury protection schemes and legal coverage

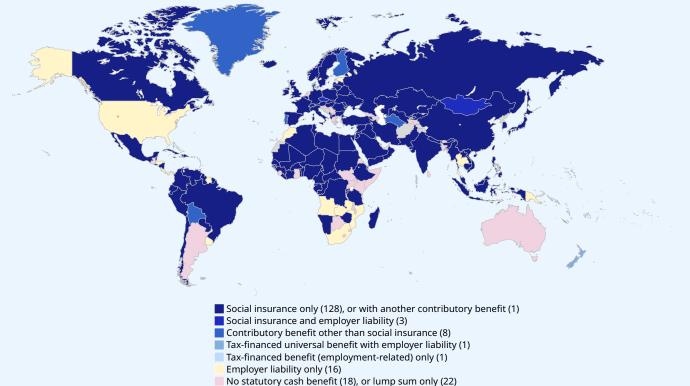
The majority of countries adopt a social insurance approach, although some countries retain elements of an employer liability approach so that workers who are not covered by social insurance schemes are compensated directly by employers.

Legal coverage of women is lower than for men in some parts of the world, especially in Africa where the gender gap is particularly prominent. Figures 4.15 and 4.16 illustrate the patterns of legal coverage for disability cash benefits worldwide. The information for medical and allied benefits is not available and additional efforts are required to collect comparable data at all levels. As figure 4.15 shows, the emphasis on social insurance, as opposed to employer liability, is higher in the Americas, Europe and Central Asia, and the Arab States: and

lower in Africa and in Asia and the Pacific. In Asia and the Pacific, an employer liability system is still in place in countries such as Bangladesh, Brunei Darussalam, Fiji and Sri Lanka. Legal coverage levels show considerable gaps, especially in Africa and in Asia and the Pacific. Legal coverage of women is lower than for men in some parts of the world, especially in Africa where the gender gap is particularly prominent. A number of countries are exploring how to extend coverage to selfemployed workers, although setting up specific alternatives for such groups presents challenges.

In Africa, employer liability provisions are still in place in many countries, including Botswana, Eswatini, Gambia, Ghana, Kenya, Lesotho, Malawi, Morocco, Sierra Leone and Uganda. However, some of these countries, such as Kenya and Malawi, are making efforts to introduce a social insurance mechanism for providing employment injury benefits (ILO 2021q). In Africa, the choice of employers between direct compensation to employees or purchase of private insurance represents a high proportion of the total legal

Figure 4.15 Employment injury protection (periodic disability cash benefits) anchored in law, by type of scheme, 2023 or latest available year



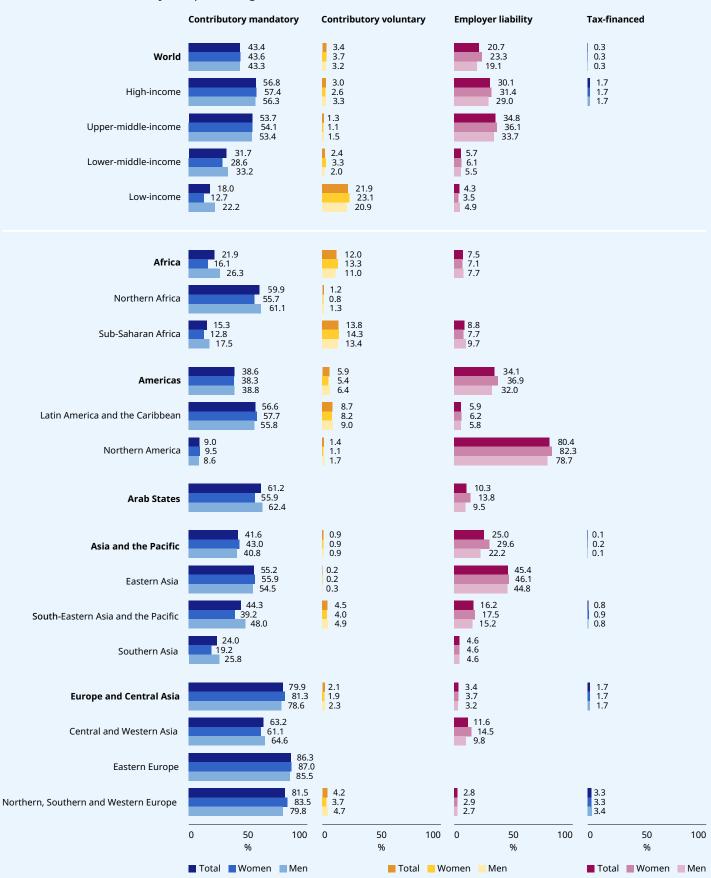
No data

Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Note: The number between parentheses refers to the count of countries or territories.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

Figure 4.16 Legal coverage for employment injury protection: Share of persons in labour force aged 15 and over covered by cash benefits in case of employment injury, by region, subregion, income level, sex and type of scheme, 2023 or latest available year (percentage)



Note: Global and regional aggregates are weighted by labour force aged 15 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to changes in the methodology.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

coverage. Undesirable consequences of this form of coverage include prevalent lump sum payments instead of appropriate periodical payments, moral hazard, unwillingness or inability of employers to compensate, unwillingness of private insurance companies to compensate, and failure of private insurers to cover high-risk sectors. In order to minimize these consequences, compulsory coverage for the majority of workers and voluntary coverage for limited categories of workers though social insurance mechanisms should be considered.

Effective coverage

Despite efforts to extend coverage, in many low- and middle-income countries, the number of workers effectively registered in employment injury schemes is much lower than that of workers covered by law (figure 4.17). Effective coverage monitoring at the global level thus far includes only cash benefits. The information for medical and allied benefits is unavailable, and additional efforts are required to collect comparable data at the national and global levels. The low effective coverage in some parts of the world stems from substantial informality, labour and social security inspection mechanisms with low enforcement capacity, low contributory capacity on the part of employers, a lack of understanding of social insurance, a mismatch between benefits and needs, and complex administrative procedures.

Effective coverage figures show that 37.4 per cent of workers globally received benefits in the event of employment injury in 2023. However, there are significant regional disparities. While 79.3 per cent of workers in Europe and Central Asia, and 60.8 per cent in Americas receive benefits, this is the case for only 28.5 per of workers in Asia and the Pacific, 25.7 per cent in the Arab States and



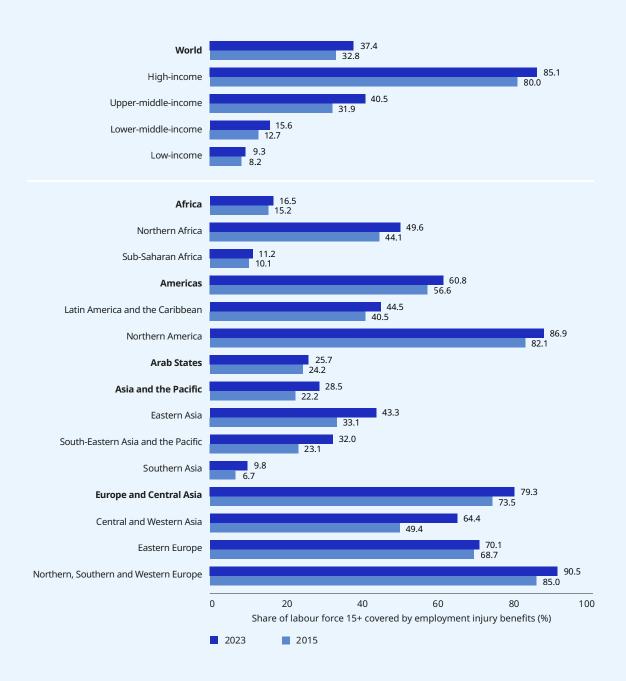
Effective coverage figures show that 37.4 per cent of workers globally received benefits in the event of employment injury in 2023.

16.5 per cent in Africa. As shown in figure 4.18, effective coverage rates are under 20 per cent in many countries, mainly in Africa and Asia and the Pacific. While the trend is a gradual increase in the effective coverage rate for the world and all regions, it remains modest, with a 4.6 percentage point increase for the world between 2015 and 2023.

Despite low effective coverage in Asia and the Pacific, in the Arab States and in Africa, new employment injury insurance schemes are gradually being introduced. For example, the United Republic of Tanzania introduced an employment injury insurance scheme in 2015 that covered around 6 per cent of the labour force (ILO 2019). Cambodia's employment injury insurance scheme was first launched in November 2008 to provide coverage for employees in private sector companies employing eight or more workers. Coverage has grown from an initial 327 enterprises in 2008 to 21,430 enterprises and 3.12 million workers, of whom 57.6 per cent are women, in 2024.³⁷

³⁷ See <u>https://www.nssf.gov.kh/language/en/</u>.

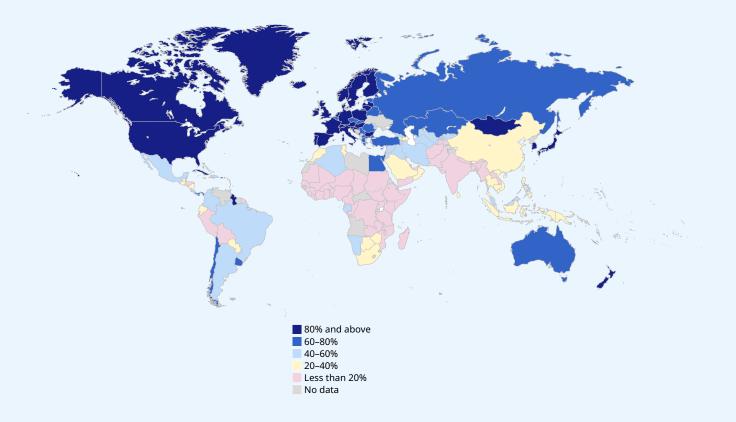
Figure 4.17 SDG indicator 1.3.1 on effective coverage for employment injury protection: Share of persons in labour force aged 15 and over covered by cash benefits in case of employment injury (active contributors), by region, subregion and income level, 2015 and 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by labour force aged 15 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Figure 4.18 SDG indicator 1.3.1 on effective coverage for employment injury protection: Share of persons in labour force aged 15 and over covered by cash benefits in case of employment injury (active contributors), 2023 or latest available year (percentage)



Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

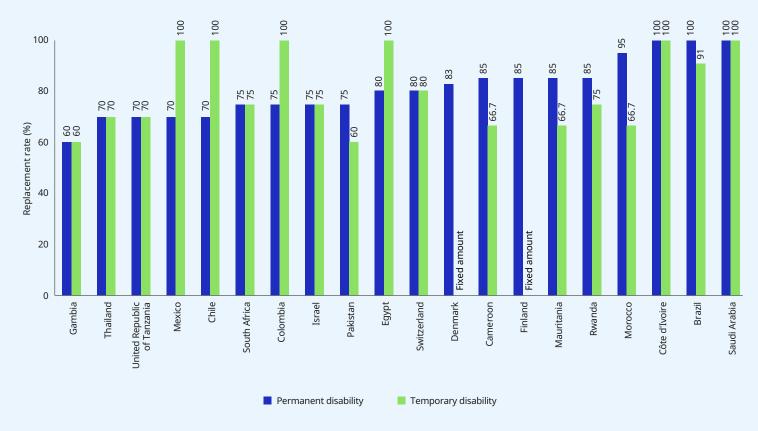
Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

Adequacy of benefits

Cash benefits of employment injury insurance schemes are usually disbursed in the form of periodic payments, with cost-of-living adjustments for long-term benefits such as permanent disability and survivors' benefits. Replacement rates, defined as benefits as a percentage of earnings before injury, differ considerably, as shown in figure 4.19. The replacement rates are higher than non-work-related invalidity and survivors' benefits in many countries and exceed the level stipulated in ILO Conventions Nos 102 and 121. The interpretation of replacement rates as set out in national legislation requires careful attention. Certain technical aspects of schemes, which may not be explicitly expressed in the legislation, may lead to the substantial erosion of benefits. One example is the ceiling placed on wages to limit insurable earnings, that is, earnings subject to calculations of contributions and benefits. A ceiling which is too infrequently adjusted, and therefore becomes too low, leads to low benefits and contributions, as seen in the Workers' Compensation Fund in Zambia, although efforts are being made to increase it.³⁸ In many developing countries, the wage ceiling adjustment is not systematically done in line with the average wage increase and requires considerable consensus,

³⁸ See <u>https://www.workers.com.zm/wp-content/uploads/2022/11/2022-FORM-14.docx.pdf</u>.





Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

as the rise in the ceiling leads to an immediate increase in contributions for employers. Another example is the exclusion of certain benefits from total insurable earnings that the worker receives as part of job remuneration, which also leads to lower benefits and contributions.

Recent developments: Extending employment injury insurance

Given that employer liability schemes contain minimal provisions for benefits and services and provide limited protection especially for workers in small and medium-sized enterprises,³⁹ a number of developing countries are keen to establish an employment injury insurance scheme or have recently introduced one. For example, in the United Republic of Tanzania, the Workers' Compensation Fund was established on 1 July 2015 (ILO 2021q).

While countries in Eastern and South-Eastern Asia – including Japan, Malaysia, the Philippines, the Republic of Korea and Thailand – have a long history of implementing these schemes, they are progressively expanding coverage in cases of employment injury. For example, Malaysia introduced the Self-Employment Social Security Scheme in 2017. Initially, the scheme covered

³⁹ Workers in small and medium-sized enterprises are also the most prone to injuries, given the limited resources that many enterprises allocate for prevention, and the high staff turnover that discourages employers from investing in the training of their workers to prevent accidents and injuries.

Box 4.9 The occupational injury protection pilot scheme for platform workers in China

Recognizing the challenges of occupational safety and health for workers on digital platforms, China launched a public pilot scheme to provide occupational injury protection for platform workers in seven prominent platform companies across seven provinces in 2022. The pilot scheme has achieved substantial progress, covering 6.68 million individuals by September 2023.

The pilot scheme aims to protect platform workers who engage in travel, takeaway, instant delivery and same-city freight transport services. Platform enterprises contribute a flat-rate amount for each order to a separate account under the Employment Injury Insurance Fund, while workers do not make any contributions. The scheme provides workers with a range of benefits, including medical treatment, disability and death benefits in the case of occupational injuries.

The pilot scheme protects workers engaged with these platforms. Yet, there are some challenges. As the overall risk of the insured population is higher than that of other workers, the flat-rate contributions may not fully reflect the varying levels of risk associated with diverse types of platform work, raising concerns about the longer-term financial sustainability of the pilot scheme.

Source: Based on Government of China.

In many other countries, efforts are under way to extend protection to workers on digital platforms under social insurance schemes through different approaches. only self-employed workers in the passenger transportation sector, but was extended to 19 other sectors in 2020.⁴⁰ In order to facilitate the participation of self-employed workers, the Malaysian Government provides contribution subsidies to some categories of workers, financed out of general tax revenues.

In many other countries, efforts are under way to extend protection to workers on digital platforms under

social insurance schemes through different approaches (ILO 2022i; 2024e). Countries use a combination of approaches to ensure adequate labour and social protection coverage for these workers. This includes:

 classifying platform workers as dependent when they actually are, so that the social protection levels for that category of worker become applicable to them;

- providing a minimum level of social security regardless of the workers' employment status, which would have to be funded mainly from general taxation;
- extending contributions and protection against certain contingencies, especially industrial accidents, to these workers; and
- introducing a responsibility for platforms to pay the social contributions of all workers, whether dependent or self-employed (ILO 2022c, 104).

In many countries, these issues are still under consideration by governments, parliaments and courts.

In the Republic of Korea, since 2008, coverage has been gradually extended to different categories of workers whose work is not based on labour contracts but rather on outsourcing contracts. The employment injury insurance contribution is borne equally by these workers and the business owner (ILO 2022i).

China has also recently started a pilot to cover workers in specific platform companies in several provinces (box 4.9).

Migrant workers form a group that is particularly vulnerable to discrimination, and often find

⁴⁰ See https://www.perkeso.gov.my/images/imej/akta_dan_peraturan/Act%20789%20-%20As%20at%201%20March%20 2020.pdf.

themselves in low-skilled, temporary, seasonal and casual work, frequently in informal employment. They are often excluded from social security coverage because of restrictive legislation and a lack of enforcement, even though the type of work in which they typically engage carries a higher risk of accidents. When migrant workers are included in social security coverage, they often receive lower benefits than those of national workers. In Malaysia, a reform in 2019 included migrant workers in the national employment injury insurance scheme on the same terms as nationals, ending a practice of covering them separately under a special private insurance scheme that provided substantially lower benefits.⁴¹

Such reforms are key to enhance protection and reduce vulnerability and informality. Further efforts in ensuring employment injury protection of vulnerable groups will help to achieve SDG target 1.3. In the context of rapid climate change, more effort should be made to reduce work-related injuries and diseases. Employment injury schemes can contribute to improving safety and health at work through financial allocations of some part of their contributions and coordination of recording and reporting of data on work-related injuries and diseases.

Considering the important function of an employment injury insurance scheme as an automatic stabilizer of workers' health and wellbeing, it is essential to accelerate the extension of social security coverage, including employment injury protection, in the face of increasing risks of injuries and ill health due to climate change. Vulnerable workers and their families are more prone to heightened risks of injuries and ill health – for example, those working in the agriculture and construction sites exposed to sunshine and ultraviolet radiation for long hours in more riskaffected geographic areas, such as in Asia and Africa. Extending effective coverage to them is therefore essential.

⁴¹ See https://www.perkeso.gov.my/54-social-security-protection/social-security-protection-schemes/808-foreign-workers.html and https://www.perkeso.gov.my/54-social-security-protection/social-security-protection-schemes/808-foreign-workers.html.

4.2.5 Disability benefits and other measures to promote the full and effective inclusion of persons with disabilities

- As climate change increases the vulnerability of persons with disabilities, ensuring that social protection systems provide adequate services and benefits to ensure the full and effective inclusion of persons with disabilities becomes even more challenging.
- Strong social protection systems for persons with disabilities: (a) ensure access to adequate benefits and services; (b) provide income security and coverage of disability-related extra costs across the life cycle regardless of employment status; (c) have participatory and inclusive policy formulation and implementation mechanisms; and (d) ensure access to needed healthcare, rehabilitation and assistive devices.
- Despite some progress, coverage of disability benefits remains low. Worldwide, only 38.9 per cent of persons with severe disabilities receive a disability benefit, with great variations across countries and regions, ranging from 8.1 per cent in Africa and 30.7 per cent in Asia to 74.2 per cent in the Americas and 91.5 per cent in Europe and Central Asia.
- In addition, the social protection benefits and services to which persons with disabilities have access are insufficient to meet their diversity of needs. In particular, in addition to ensuring income security, most societies struggle to develop quality, accessible and affordable care and support services that respect the rights, dignity and needs of both those who receive and those who provide it.
- The global mortality rate of persons with disabilities during disasters is estimated to be four times higher than for the rest of the population. Disasters disrupt access to health and support services and emergency response measures – including social protection benefits – and are often not sufficiently tailored to accommodate their difficulties to move, communicate, hear and see.
- It is crucial to hear the diverse voices of persons with disabilities as well as ensure meaningful participation for the organizations of persons with disabilities to design inclusive social protection systems, address additional emerging challenges and make just transition measures inclusive of persons with disabilities.



Social protection systems to ensure the four core functions for persons with disabilities

Social protection benefits and services play a crucial role in facilitating a fairer green transition for persons with disabilities and promoting their empowerment and participation in economic, social, political and cultural life in general. To this end, social protection schemes need to ensure access for persons with disabilities to both mainstream and disability-specific schemes, fulfilling the following core functions: (a) income security and adequate standards of living; (b) effective access to healthcare and financial protection (coverage of healthcare costs), including early intervention, rehabilitation and assistive devices; (c) coverage of disabilityrelated costs, including access to support services; and (iv) facilitated access to early childhood development, education and economic empowerment programmes (UNICEF and ILO 2024).

Persons with disabilities often face marginalization and experience higher levels of poverty, limited economic opportunities and limited participation in society, along with fewer educational opportunities (UN 2019a). They also incur additional costs related to their disabilities,

Recent societal changes, including those brought about by climate change, further intensify the challenges faced by persons with disabilities. related to their disabilities, such as for care and support, increased healthcare services, transportation and other daily activities. Moreover, persons with disabilities frequently encounter discrimination and exclusion. Women and girls with disabilities face additional challenges compared to women and men without disabilities and men and boys with disabilities.

Recent societal changes, including those brought about by climate change, further intensify the challenges faced

by persons with disabilities. Droughts, extreme heat, rainfall volatility, landslides, water shortages and air pollution can greatly impact their lives, their health and their ability to access needed health and support services. Heat extremes are linked with elevated emergency room visits, hospital admissions and mortality for individuals with mental health, cardiorespiratory and other disabilities. In addition, pre-existing psychosocial disabilities triple the risk of death during heatwaves (Stein and Stein 2022).

Moreover, economic losses from climate change make it more difficult for persons with disabilities to find work, and they are more likely to be laid off (Hasan 2019). Persons with disabilities are still under-represented in the emerging clean industry, while their pre-existing jobs have already been impacted by climate change. For example, in the Pacific Islands, many persons with disabilities who worked in the fishing industry are unable to continue due to difficulties in adapting to the new climatic conditions (Kelly-Costello 2023).

Extreme weather conditions can also affect the mobility of persons with disabilities, increase the risk of accidents and contribute to a loss of accessibility (such as the destruction of wheelchair ramps, elevators or even extensive damage to infrastructure, which can take years or decades to repair), or serious damage to their assistive devices (ILO and Fundación ONCE 2023). Extreme weather events have also been shown to increase the incidence and prevalence of disability (ILO and Fundación ONCE 2023).

Despite these challenges, the participation of persons with disabilities in policymaking remains limited, and more data and evidence should be generated regarding these intersectional issues. Their representation in climate change policies in particular is minimal. As a result of this, only 39 out of 195 parties to the Paris Agreement make some reference to persons with disabilities in their nationally determined contributions, and only 15 parties include concrete measures for disability inclusion in their nationally determined contributions (IDA and IDDC 2023).

In light of these intensified challenges, it has become even more important to realize the human right to social security for persons with disabilities (box 4.10).

Box 4.10 The international normative framework for the right to social security for persons with disabilities

The international normative framework has progressively elaborated the right to social security of persons with disabilities and the obligations of States to secure this right in ways that foster access to socio-economic participation on an equal basis with others.

The 2006 United Nations Convention on the Rights of Persons with Disabilities emphasizes the critical role of social protection in supporting the full and effective participation and inclusion of people with disabilities across the life cycle. The Convention on the Rights of Persons with Disabilities sets out the obligations of States parties to:

- ensure that persons with disabilities enjoy adequate standards of living on an equal basis with others, and have equal access to all social protection schemes and programmes, including pensions, public housing (Art. 28), healthcare (Art. 25), rehabilitation (Art. 26), and vocational training and return-to-work programmes (Art. 27), without any discrimination;
- ensure that persons with disabilities have access to assistance to cover disability-related expenses as well as to affordable and quality disability-related services and devices (Art. 28) that they require to live independently and be included in the community (Art. 19);
- support children with disabilities and their parents, prevent institutionalization and ensure that, in any case, children are living in family-like settings (Arts 7, 16, 18 and 23);
- address the specific disadvantages faced by women and girls with disabilities (Arts 6 and 28); and
- meaningfully consult and involve persons with disabilities through their representative organizations in the design, implementation and monitoring of social protection policies and programmes (Art. 4(3)).

International social security standards complement this framework. ILO Convention No. 102 (Part IX) sets minimum standards for the provision of income security in relation to disability (see annex table A3.8). Furthermore, the Invalidity, Old-Age and Survivors' Benefits Convention, 1967 (No. 128), in Article 13(1), sets higher standards for disability benefit schemes, including the provision of rehabilitation services to enable persons with disabilities either to resume their employment or to perform another activity suited to their aptitudes. Its accompanying Recommendation No. 131 (Para. 5), broadens the definition of the contingencies that should be covered under national schemes by including partial disability, which should give rise to a reduced benefit. This is complemented by the Employment Injury Benefits Convention, 1964 (No. 121), which stipulates the provision of additional benefits for people requiring constant support by a third person.

Although medical care, including medical rehabilitation, is dealt with under separate provisions in Convention No. 102 (Part II), the Medical Care and Sickness Benefits Convention, 1969 (No. 130), expands the provision of required medical care and rehabilitation, including access to assistive devices, that should be "afforded with a view to maintaining, restoring or improving [their] health ... and [their] ability to work and to attend to [their] personal needs" (Art. 9).

ILO Recommendation No. 202 puts forward an integrated and comprehensive approach to social protection, according to which persons with disabilities should enjoy the same guarantees of basic income security and access to essential healthcare as other members of society through national social protection floors. In addition, the Recommendation requires that social protection systems be designed in line with the principles of non-discrimination, gender equality and responsiveness to special needs, as well as respect for the rights and dignity of people covered by the social security guarantees.

Types of disability benefit schemes

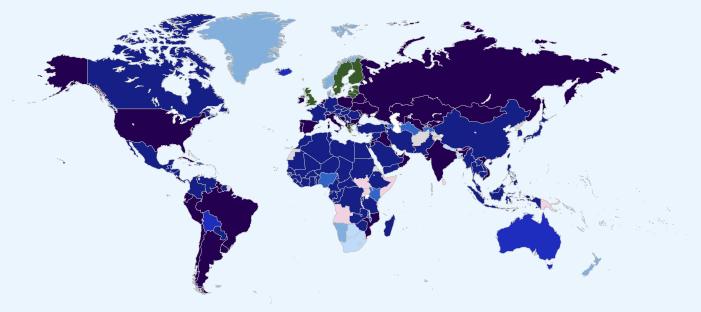
Countries deploy a diversity of schemes and measures to support persons with disabilities, including contributory (mainly social insurance) and non-contributory (usually tax-financed) cash and in-kind benefits, subsidies or tax reliefs. In-kind benefits or concessions include free or subsidized access to healthcare, public transport, housing, utilities, and care and support services. Combining different schemes will facilitate the coverage of all persons with disabilities, regardless of their employment status, contributory history, poverty status or other characteristics.

Worldwide, 176 countries and territories provide statutory disability cash benefits, of which 153 have a social insurance scheme. Of these, 84 have a social insurance scheme only, whereas 69 combine social insurance with a noncontributory universal scheme (7), a means-tested tax-financed benefit (52), both (5), or with another type of contributory scheme (5). Twelve countries have only tax-financed schemes, either universal (4), means-tested (6) or both (2). Sixteen countries do not provide any periodic cash benefit, of which 11 provide lump sum benefits (see figure 4.20).

Effective and legal coverage of cash benefits of persons with disabilities

Population coverage of disability benefits, like for other contingencies, has gradually increased since 2015, with accelerated growth during the COVID-19 pandemic in 2021–22. However, many were only temporary measures. Worldwide, effective coverage for persons with severe disabilities

Figure 4.20 Disability protection (periodic cash benefits) anchored in law, by type of scheme, 2023 or latest available year



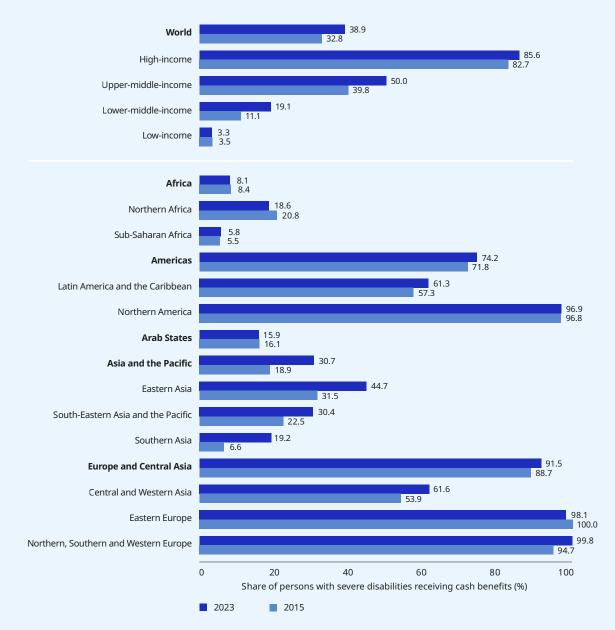
- Social insurance and tax-financed universal benefit (7), or with additional means-tested benefit (5)
- Social insurance and tax-financed means-tested benefit (52)
- Social insurance only (84), or with another contributory scheme (5)
- Contributory scheme other than social insurance and tax-financed universal benefit (2), or with additional means-tested benefit (1)
- Contributory scheme other than social insurance only (4), or with tax-financed means-tested benefit (4)
- Tax-financed universal benefit only (4), or with another means-tested benefit (2)
- Tax-financed means-tested benefit only (6)
- No statutory periodic cash benefit (5) or lump sum only (11)
- No data

Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Note: The number between parentheses refers to the count of countries or territories.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

Figure 4.21 SDG indicator 1.3.1 on effective coverage for disability protection: Share of persons with severe disabilities receiving cash benefits, by region, subregion and income level, 2015 and 2023 (percentage)

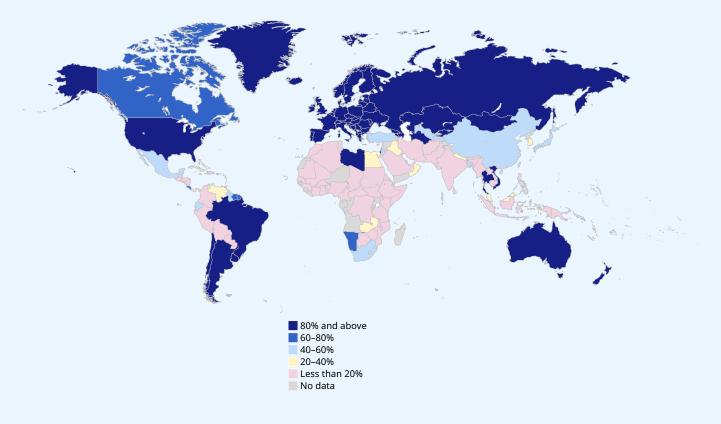


Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by population. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024; <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

increased by 6 percentage points, from 32.8 to 38.9 per cent. Asia stands out as experiencing the highest increase, in particular Eastern and Southern Asia, where coverage increased by around 13 percentage points to 44.7 and

19.2 per cent, respectively (figure 4.21). Overall, inequalities remain significant across regions and income levels, with 3.3 per cent and 19 per cent of persons with severe disabilities in low- and lowermiddle-income countries, respectively, receiving Figure 4.22 SDG indicator 1.3.1 on effective coverage for disability protection: Share of persons with severe disabilities receiving cash benefits, 2023 or latest available year (percentage)



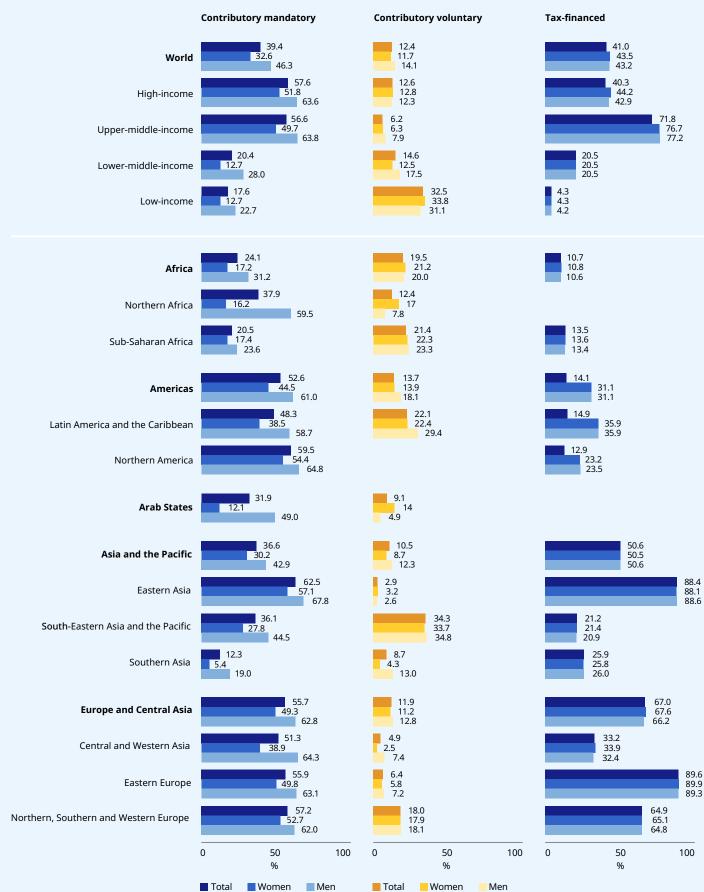
Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Worldwide, effective coverage for persons with severe disabilities increased by 6 percentage points, from 32.8 to 38.9 per cent. a benefit, compared to 50 and 85.6 per cent in upper-middle and high-income countries, respectively. In line with the income distribution, figure 4.22 illustrates that Europe, Northern America, parts of Latin America and Asia achieve high coverage rates whereas other parts of Latin America, Southern Asia and most of Africa have coverage rates below 20 per cent.

Figure 4.23 shows the share of the working age population legally entitled to a social protection benefit in case they have or acquire a disability as a share of the total working age population for different regions and income levels. Noncontributory schemes are most common in Europe and Central Asia, and in upper-middleincome countries, providing legal coverage for 67.0 per cent and 71.8 per cent of the working-age population, respectively. For Eastern Europe, this figure is just below 90 per cent. Similarly, high-income countries and Europe and Central Asia have legal coverage rates for mandatory social insurance or occupational schemes at 57.6 and 55.7 per cent, respectively. In uppermiddle-income countries, this is at 56.6 per cent, compared to legal coverage rates in low-income countries of only 17.6 per cent. In sub-Saharan Africa, legal coverage stands at 11 per cent for non-contributory schemes and just below 24.1 per cent for mandatory contributory

Figure 4.23 Legal coverage for disability protection: Share of the working-age population aged 15 and over covered by disability cash benefits, by region, subregion, income level, sex and type of scheme, 2023 or latest available year (percentage)



Note: Global and regional aggregates are weighted by working-age population 15 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to changes in the methodology.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

The data show that countries and regions with low effective coverage often also have gaps in legal coverage. schemes, complemented with 19.5 per cent legal coverage for voluntary schemes. Mozambique stands out as the only low-income country with a non-contributory disability benefit scheme. Bangladesh, the Plurinational State of Bolivia, Eswatini, Haiti, India, Kenya, Kiribati, Kyrgyzstan, Lesotho, Mongolia, Mozambique, Nepal, Samoa,

Tajikistan and Ukraine have universal taxfinanced schemes.

Legal coverage for voluntary schemes overall is lowest, and experience shows that, due to competing demands on household budgets, the take-up is typically very low. Overall, the data shows that countries and regions with low effective coverage often also have gaps in legal coverage. Countries need (a) effective enforcement and implementation mechanisms to ensure that individuals can realize their entitlements and (b) a legal framework that is inclusive and does not create barriers for extending social protection.

Adequacy of benefits and expenditure

Social protection schemes should guarantee effective access to at least essential healthcare and basic income security that allow for a healthy and dignified life (Recommendation No. 202 and Convention No. 102). Unfortunately, evidence suggests that many countries do not provide benefit levels to meet the aspiration of income security, and even fewer cover disability-related extra costs. ILO Convention No. 102 sets out that schemes should provide, as a minimum, a replacement rate of 40 per cent for those who have contributed for at least 15 years. A recent ILO analysis of 343 statutory disability benefit schemes worldwide found that, out of 101 contributory schemes that pay benefits based on previous earnings and contribution history, 62 schemes (61 per cent) provide a replacement rate of 40 per cent or more after 15 years of contributions (ILO 2024b). Benefit levels of schemes providing flat-rate amounts on average reached 17.6 per cent of GDP per capita. In 54 countries for which minimum wage data were available, 19 schemes provided benefit levels of at least 40 per cent of the country's minimum wage. Moreover, 17 out of 28 schemes paid benefits exceeding the national poverty line. Adequacy gaps are particularly evident in low-income, lower-middle-income and upper-middle-income countries, where also expenditure gaps on disability benefits are largest. Public spending levels in these countries stand at 0.1 per cent of GDP, in contrast to high-income countries that invest 1.95 of their GDP (ILO 2024b).

Pathways to designing social protection systems that promote participation and empowerment

Depending on the current situation, legacy systems and existing schemes and programmes in place, countries will adopt different pathways to extend social protection coverage for persons with disabilities. For example, poverty-targeted social assistance schemes can (a) introduce disability as an eligibility criterion and set higher eligibility thresholds for these households, and (b) increase the value of the benefits for persons with disabilities. Universal disability benefits and third-person support can be considered in addition to the social assistance benefits to cover disability-related costs. To maximize impact, the focus should shift from targeting households to supporting individuals. Some countries have recently established disability social protection schemes with very inclusive design, such as Lebanon and Oman (see box 4.11).

Evidence suggests that many countries do not provide benefit levels to meet the aspiration of income security, and even fewer cover disability-related extra costs.

b Box 4.11 Introduction of new disability benefits in Lebanon and Oman

In April 2023, **Lebanon** launched a national disability allowance, which supports nationals and refugees with disabilities in facing the extra cost of disability and facilitates their access to key services. Eligibility is assessed based on a personal disability card issued by the Ministry of Social Affairs, through its Rights and Access Programme and Information System. The system includes a database of personal disability card holders. While all persons with disabilities would ultimately be eligible to receive the national disability allowance, young adults aged 18 to 28 (born between 1995 and 2005) are prioritized during the first roll-out to support them in their transition to higher education or to join the labour market through a monthly allowance of US\$40 (ILO 2023t).

Oman established a universal disability benefit scheme in 2023 as part of its new Social Protection Law (Royal Decree No. 52/2023). This universal disability benefit ensures a minimum income level of 130 Omani rials (around US\$340) per month for all persons with disabilities, including children. This value is reviewed regularly through studies of benefit adequacy. Employment status is not taken into consideration for determining eligibility, which allows persons with disabilities to access the labour market while covering their disability-related costs (ILO 2023i).

Meaningful participation of organizations of persons with disabilities necessary for a just green transition

Social protection systems can provide important support for persons with disabilities, including by addressing the widened gaps caused by climate-related and other environmental crises.

Social protection systems can provide important support for persons with disabilities, including by addressing the widened gaps caused by climaterelated and other environmental crises. In all efforts to build inclusive social protection systems, it is important to include a diverse range of voices from the disability community (Jodoin et al. 2023). Meaningful participation involving organizations of persons with disabilities and their leadership is crucial in ensuring effective scheme design, disaster response planning for emergencies and evacuations, and humanitarian emergency responses. Their voices should be considered in the reform of social protection schemes to make them more inclusive of persons with disabilities. Yet, there is little literature and data regarding the effect

of a just a transition for persons with disabilities (OHCHR 2020). Reflecting their voices and creating stronger social protection systems will develop more resilient societies. Governments should include disability organizations as stakeholders to ensure disability-inclusive health adaptation planning. The disability constituency also needs to be better represented within the United Nations Framework Convention on Climate Change, both in the discussion on climate adaptation and climate mitigation.

Inclusive design of schemes

The way eligibility criteria are defined has an important influence on population coverage. This includes, for example, taking into account the required number of years of contribution, age and severity of disability, and sometimes also means tests. Regarding the number of contribution years, the minimum required contribution period for individuals in the labour force should be three years according to Convention No. 102. Out of 293 schemes, 26 do not require any minimum contributory period and cover workers as of day one; and half of the 158 schemes that specify a minimum period of contributions of three years or less. Yet, the other half exceed the threshold, especially in low- and lower-middle-income countries. On average, 4.15 years are required (ILO 2024b).

The severity of disability can be another eligibility criterion, with 105 out of 343 schemes requiring a total or permanent (100 per cent) disability, while other schemes also acknowledge partial disability, defining a certain required percentage,

Box 4.12 Brazil's Benefício de Prestação Continuada reformed to be compatible with employment

In Brazil, the non-contributory, means-tested disability benefit known as the *Benefício de Prestação Continuada* did not initially extend to employed persons with disabilities. Since 2015, the Auxílio-inclusão (Inclusion Aid) system, established under section 94 of Law No. 13.146, created a monetary incentive for the labour market inclusion of recipients of the benefit with disabilities. Since 2021, these individuals can receive 50 per cent of the *Benefício de Prestação Continuada* if they are engaged in paid employment. This benefit is not counted as household income and therefore is not taken into account in the means test (Government of Brazil 2023a; Guerreiro Osório 2022).

on average 55.1 per cent with a median of 61 per cent (ILO 2024b).

A related important design feature is the compatibility of the benefits with work. Many schemes have an incapacity-to-work requirement, which often effectively excludes persons with disabilities of working age from the labour market, or prevents them from receiving benefits when taking up employment. Out of 164 schemes with an incapacity-to-work requirement, 111 stipulate a complete inability to work and 153 some level of incapacity to work. If benefits are compatible with work, this can allow for some disability-related costs to be covered. For example, Kyrgyzstan defines different categories of disabilities, depending on the capacity to work, associated with different levels of disability benefits irrespective of employment status (ILO 2024b). Brazil had originally excluded employed persons with disabilities from the disability benefit, but then reformed the scheme to make it compatible with work (see box 4.12).

Furthermore, disability benefit schemes are often not compatible with other social protection benefits, in particular old-age pensions. Instead, disability benefits are usually converted into old-age pensions upon reaching retirement age. Despite the extra costs entailed when people develop functional impairments in old age, these costs are often not covered and old-age pensions are paid at the same level, irrespective of disabilities in old age. Some countries, such

- ⁴² https://www.issa.int/node/195543?country=798.
- ⁴³ <u>https://www.issa.int/node/195543?country=886</u>.

as Germany⁴² and Japan,⁴³ have also introduced specific long-term care social insurance schemes, while other countries provide additional benefits or services for older persons with disabilities, such as the disability top-up pension in Azerbaijan,⁴⁴ which persons with disabilities are eligible to receive in addition to their old-age pension.

Another eligibility criterion is age. As noted above, there is often an upper age limit for disability-specific benefits. Also, schemes tend to focus on the working-age population, with only few schemes covering children with disabilities, despite the extra costs families that face in supporting children with disabilities.

Many countries target disability benefits at poor households (figure 4.21), which can create exclusion errors and poverty traps. Providing assistive devices, rehabilitation and/or care and support services to persons with disabilities irrespective of income or poverty status is essential for enabling their inclusion.

In addition to providing affordable services, quality services need to be accessible and acceptable. Recognizing that family members, often women, provide a large share part of care and support for persons with disabilities (often on an unpaid basis), some disability benefit schemes include a constant-attendance supplement (68 out of 343 schemes) or a dependent supplement (34 out of 343 schemes) (ILO 2024b), compensating unpaid carers for the opportunity costs of providing unpaid care.

⁴⁴ <u>https://www.issa.int/node/195543?country=798</u>.

Ensuring more inclusive public infrastructure and minimizing barriers in the environment decrease support needs and costs and increase the autonomy of persons with disabilities. Overall, quality and inclusive public infrastructure and services such as water, transportation, electricity, information, education and health are essential to facilitate inclusion. Ensuring more inclusive public infrastructure and minimizing barriers in the environment decrease support needs and costs and increase the autonomy of persons with disabilities.

Inclusive delivery mechanisms

Creating a robust social protection system enables persons with disabilities to

master societal transitions and crisis management. For instance, a disability allowance and a disability registry can be built on for additional support during crises. The existing disability registry can provide important information regarding the special needs of persons with disabilities in order to implement inclusive economic restructuring policies and emergency relief operations.

Accessibility throughout the delivery chain of social protection benefits and services should be ensured at all times to effectively deliver disability benefits:

from information dissemination, registration and contribution collection as applicable, to enrolment, benefit delivery and complaint procedures. In the information dissemination phase, the information should be conveyed in a way that is understandable to all persons with different types of disabilities. Simplifying the registration process and minimizing the need for travel are both crucial. Online on-demand registration or payment modalities can be more accessible if they are designed for inclusion and supported by in-person support if needed. Throughout the delivery chain, it is important to ensure sensitivity training among all officers involved in these steps. Disability populations sometimes face stigma and are treated in a discriminatory manner by staff who should serve them.

Ensuring business continuity across the delivery chain also in times of emergency can be a matter of life or death for persons with disabilities. Its salience is tragically manifested by the significantly higher mortality rates of persons with disabilities during disasters, which is estimated to be four times higher than for the rest of the population.



Creating a robust social protection system enables persons with disabilities to master societal transitions and crisis management.

4.2.6 Unemployment protection as an integrated approach

- Globally, 93 countries and territories have implemented unemployment protection schemes, primarily through social insurance schemes, although some rely on tax-financed mechanisms.
- In response to the job crisis triggered by the COVID-19 pandemic, many countries conducted social dialogue to design or reform their unemployment protection schemes. Since 2020, an additional five countries and territories have enacted legislation to establish such schemes. However, progress in adopting and improving unemployment protection schemes has slowed down as unemployment rates returned to pre-pandemic level.
- Effective coverage by unemployment protection schemes remains limited, with only 16.7 per cent of the global unemployed receiving benefits, and with significant regional disparities. Youth, self-employed workers, digital platforms workers, and agricultural and migrant workers often lack any forms of unemployment protection when they lose their jobs or earnings.
- Furthermore, many existing schemes are not prepared to tackle climaterelated challenges. There is an urgent need to expand unemployment protection, including through tax-financed mechanisms, and ensure benefits work in conjunction with active labour market policies. This integration will enable unemployment protection to respond to immediate climate shocks and support labour market and livelihood shifts in the context of a just transition.



The need for more effective unemployment protection for a just transition

The transition to environmentally sustainable economies will displace and destroy jobs and livelihoods, while also creating new opportunities (Montt, Fraga and Harsdorff 2018; ILO 2024k; 2023s). Realizing the positive social and economic outputs of this transition requires deliberate policy coordination between social protection, skills and active labour market policies, while ensuring the coherence of economic and environmental policies (Bischler et al. forthcoming). Integrated unemployment protection systems covering all workers (see box 4.13) are pivotal for ensuring this coherence and smooth labour market transition in the context of climate action. Despite rapid and effective deployment of full or partial unemployment benefits and other job or income protection measures during the COVID-19 pandemic, most of these interventions were discontinued and the agenda lost traction once unemployment rates returned to pre-pandemic level. Sustainable and statutory unemployment protection programmes are more likely to be introduced in non-crisis contexts (Peyron Bista and Carter 2017).

Legal coverage and type of unemployment protection schemes

Globally, 43.0 per cent of the labour force is legally covered in case of job or earnings losses through contributory (either mandatory or voluntary social insurance), while 5.2 per cent is legally covered through tax-financed schemes (unemployment assistance, social assistance or

Box 4.13 The right to unemployment protection, not only for employees in the formal sector

Unemployment protection policies aim to promote full and productive employment and provide income security to those unable to find suitable employment.

Recognized as **a human right**, as well as a social and economic right, unemployment protection is enshrined in various international instruments, such as the Universal Declaration of Human Rights, 1948, and the International Covenant on Economic, Social and Cultural Rights, 1966. Governments, alongside social partners, must devise policies and measures that extend **unemployment protection to all, not only through social insurance mechanisms but also using tax-financed schemes**.

The Employment Promotion and Protection against Unemployment Convention, 1988 (No. 168) and its accompanying Recommendation No. 176, broaden the scope and level of protection prescribed by Convention No. 102 (see annex table A3.3). In addition to full unemployment, Convention No. 168 covers part-time workers seeking full employment, and instances of partial unemployment or work suspension, which can be addressed by job retention and wage subsidies schemes.

Furthermore, Convention No. 168 addresses the causes of unemployment, often linked to **economic**, **technological or structural factors**, which in today's context are tied to climate change. In this regard, Convention No. 168, and Recommendations Nos 202 and 176 emphasize coordination between unemployment protection, decent employment and labour activation policies – notably through vocational training, entrepreneurship support and job placement – thereby asserting the suitability of employment for jobseekers.

Importantly, special measures are recommended to ensure protection of **all workers**, including new labour market entrants, youth, apprentices, self-employed, part-time, seasonal and rural workers, long-term unemployed persons and women. This requires a **combination** of social insurance, unemployment and social assistance schemes, and/or public employment programmes, **integrated with active labour market policies** and coordinated through strengthened **public employment** services. This comprehensive approach outlined in international social security standards can guide labour market transitions triggered by climate and environmental changes.

Social insurance remains the predominant mechanism for unemployment protection, yet the effectiveness of its coverage is hindered by significant informal and selfemployment in low- and middleincome countries.

others), anchored in national legislation (figure 4.24).45 While high-income and uppermiddle-income countries enjoy relatively high levels of mandatory coverage (80 and 50.7 per cent of the labour force, respectively), only one in four workers is protected in lower-middle-income countries and none in low-income countries. Social insurance remains the predominant mechanism for unemployment, yet the effectiveness of its coverage is hindered by significant informal and self-employment in low- and middle-income countries. In high-income and uppermiddle-income countries,

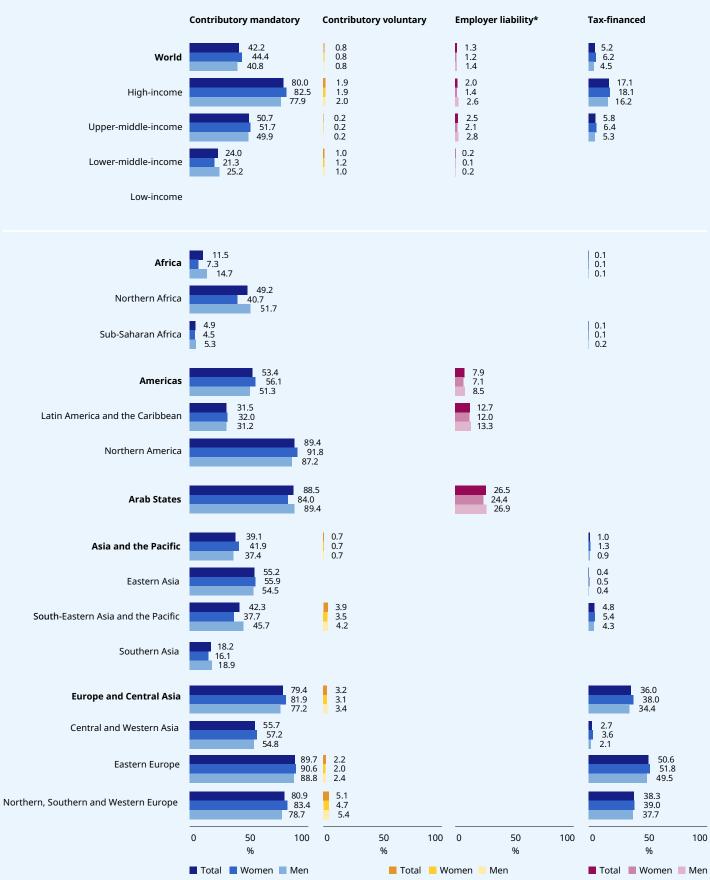
female workers typically experience slightly higher legal unemployment coverage.

Unemployment protection schemes (either social insurance or tax-financed) can be found in 93 of the 194 countries or territories for which data are available (figure 4.25). This includes schemes introduced in the aftermath of the COVID-19 pandemic in Grenada, Indonesia, Iraq, Turks and Caicos Islands and the United Arab Emirates. Predominantly, unemployment protection is provided through social insurance mechanisms (87), most frequently coordinated with taxfinanced schemes (38), and more rarely as only a social insurance mechanism (16). Six States have tax-financed unemployment benefit schemes: New Zealand and the Russian Federation, as well as Andorra, Australia, the Seychelles and Tunisia in combination with separation benefits. In Latin America, few countries complemented social insurance schemes with separation funds financed by employers' contributions (Brazil, Colombia, Ecuador and the Bolivarian Republic of Venezuela). Chile and Jordan use unemployment individual savings accounts; in Chile such mechanism is complemented by a solidarity component financed by employers and the Government. However, individual savings accounts fail to comply with international social security standards due to lower levels of protection and absence of collective financing mechanisms (box 4.14).

Among the 101 countries and territories without unemployment protection schemes, 80 provide separation payments, sometimes through a mandatory fund financed by employers (for example, Costa Rica, Dominica, Honduras, Panama and Peru). Such employer liabilities offer only a limited level of protection. In 55 of the 92 countries and territories implementing unemployment insurance schemes, separation payments have been maintained as a complementary mechanism.

⁴⁵ Voluntary coverage provided for in legislation often does not result in effective coverage, for various reasons.

Figure 4.24 Legal coverage for unemployment protection: Share of persons in the labour force aged 15 and over covered by unemployment cash benefits, by region, subregion, income level, sex and type of scheme, 2023 or latest available year (percentage)

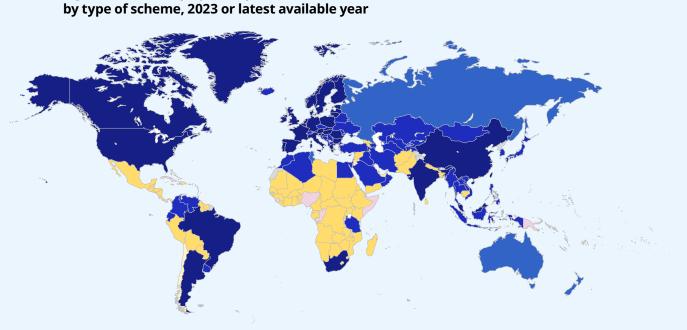


Note: Global and regional aggregates are weighted by the labour force aged 15 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to changes in the methodology.

* Includes mandatory separation payment funds, mandatory individual savings accounts and mandatory private insurance. Specifically, Chile and Jordan have a combination of individual savings accounts with other types of schemes. Colombia, Costa Rica, Dominica, Ecuador, Honduras, Panama, Peru and the Bolivian Republic of Venezuela have separation payments that operate through mandatory funds. The United Arab Emirates implements the unemployment insurance through mandatory private insurance.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

Figure 4.25 Unemployment protection (cash benefits) anchored in law,



- Social insurance and tax-financed benefit (15), or with separation payment (23, including 1 under the form of savings account)
 Social insurance only (16), or with separation payment (33, including 3 under the form of savings account)
 The financed action payment (2), any its separation payment (4).
- Tax-financed schemes only (2), or with separation payment (4)
- Mandatory individual savings accounts with subsidized social insurance (1)
- Mandatory individual savings accounts or mandatory private insurance, with separation payment (2)
- Separation payment only (80, including 5 under the form of savings account)
- No statutory scheme (18)

No data

Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Note: The number between parentheses refers to the count of countries or territories.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

Box 4.14 Why individual savings accounts are not social insurance unemployment benefits

While unemployment individual savings accounts fulfil the very important objective of securing income and preventing poverty when jobs and earnings are suspended, they cannot be considered as social insurance, as they do not align with some of the internationally agreed principles embedded in ILO Conventions Nos 102 and 168. This is because unemployment individual savings accounts:

- do not provide for risk pooling through collective financing and limit solidarity;
- do not provide adequate and predictable protection, especially to workers who face a higher probability of unemployment and with lower income; and
- are perceived as personal savings and, in some legislation, can be withdrawn to address other lifecycle risks (for example, housing, education and health).

The cost of unemployment individual savings accounts is higher for two reasons. First, the saving or contribution rate must be set at a necessarily high level to build individual savings. Then, tax revenues are necessary to support unemployed workers who cannot accumulate sufficient savings, if any.

Unemployment individual savings accounts can serve as a valuable supplement to social insurance or tax-funded unemployment protection schemes, enabling access to funds for addressing immediate family or business development needs. However, they should not be considered as a substitute for social protection measures.

Source: ILO (forthcoming a; forthcoming f).

Effective coverage for unemployment protection and challenges in the current labour market context

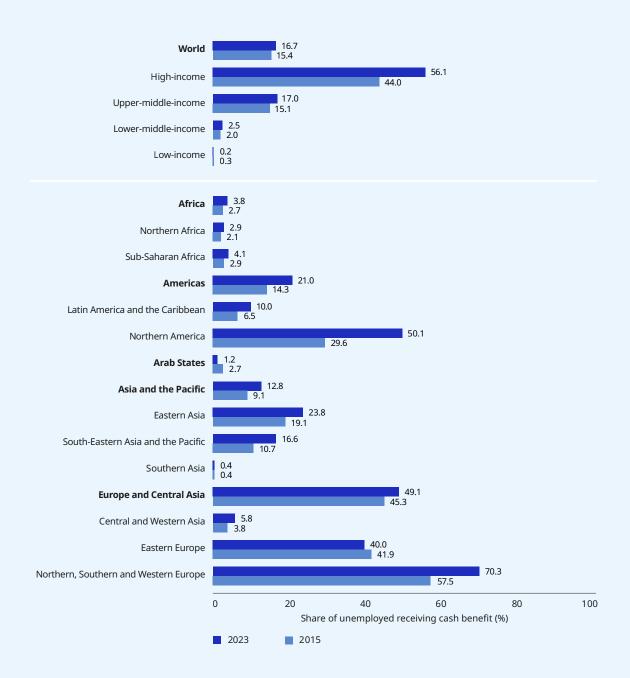
While nearly one in two workers is legally covered, only 16.7 per cent of the unemployed receive benefits, with 56.1 per cent in high-income countries, 2.5 per cent in lower-middle-income countries and 0.2 per cent in low-income

Over 168 million unemployed persons are left without unemployment benefits, of whom nearly 102 million men and 66 million women, with large regional disparities. countries (figure 4.26). Thus, over 168 million unemployed persons are left without unemployment benefits, of whom nearly 102 million men and 66 million women, with large regional disparities (figure 4.27). Scheme design features such as restrictive gualifying conditions, legal exclusions of certain types of contracts and economic sectors or household income thresholds, as well as significant employment informality, can explain the low effective coverage.

The interpretation of low coverage rates must consider the broader labour market context. While the global unemployment rate has reverted to the pre-pandemic level (5.1 per cent in 2023) (ILO 2024k), the unemployment rate does not accurately reflect labour market deficits in least developed countries and other developing countries, where workers cannot afford to be unemployed. Instead, the composite measure of labour underutilization - covering time-related underemployment (17.6 per cent of the extended labour force) and potential labour force (10 per cent of the extended labour force) in addition to unemployment - is a complementary indicator (ILO 2022I). Another complementary measure to the unemployment rate is the jobs gap, which refers to the number of persons who want to work, regardless of whether they are searching for a job or are available for one.⁴⁶ In 2023, globally, 435 million were considered as being in the jobs gap or 11.0 per cent of the extended labour force and willing non-jobseekers, more than double the unemployment count (ILO 2024h). Post-COVID-19 employment recovery is further marred by persistent decent work deficits, evident in declining real wages, informal employment prevalence and working conditions deterioration (ILO 2024k).

⁴⁶ Whereas the "jobs gap" measure includes persons who want a job but are not seeking or available for one (also known as "willing non-jobseekers"), the composite measure of labour underutilization mentioned above does not include them, given their very marginal attachment to the labour market, in line with the <u>Resolution to amend the 19th International Conference of Labour Statisticians resolution concerning statistics of work, employment and labour underutilization.</u> <u>I adopted by the 19th International Conference of Labour Statisticians (ICLS)</u>. The "jobs gap" also does not include time-related underemployment. The 19th International Conference of Labour Statisticians dealt with the limitations of the unemployment rate and debated in depth which labour underutilization measures could adequately complement it, concluding by introducing the following four labour underutilization measures: LU1 (unemployment rate); LU2 (combined rate of time-related underemployment and unemployment); LU3 (combined rate of unemployment and potential labour force); and LU4 (composite measure of labour underutilization).

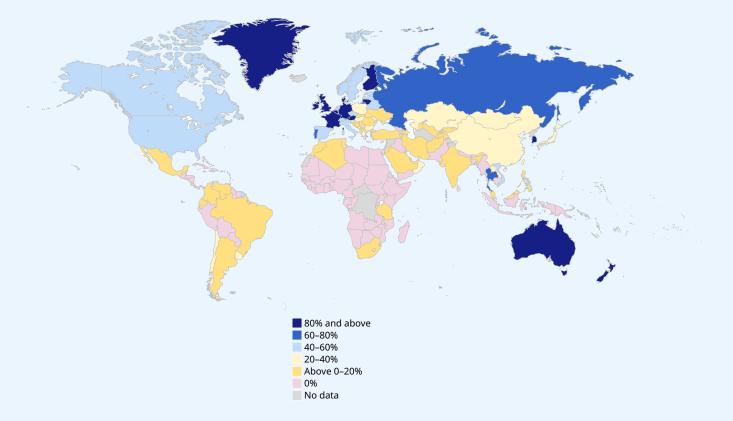
Figure 4.26 SDG 1.3.1 on effective coverage for unemployment protection: Share of unemployed persons receiving cash benefits, by region, subregion and income level, 2015 and 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates weighted by the number of unemployed. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions. Effective coverage data for 2023 is still affected by the high numbers of 2020 and 2021, when countries deployed large unemployment protection responses to the COVID-19 crisis, funded by the State's budget (for example, United States).

Sources: ILO modelled estimates, 2024, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Figure 4.27 SDG indicator 1.3.1 on effective coverage for unemployment protection: Share of unemployed persons receiving cash benefits, 2023 or latest available year (percentage)



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Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

Special attention to youth

In 2023, the global youth unemployment rate stood at 13.3 per cent, its lowest level since 2008. However, the share of youth not in employment, education or training (NEET) remains high at 21.7 per cent in 2023, representing 269 million young people globally, two thirds of whom are women.⁴⁷ Often engaged in short-term or apprenticeship contracts, young people, as new labour market entrants, lack coverage under unemployment protection schemes (ILO 2024k; Carter, Bédard and Peyron Bista 2013; Dubois and Hyland 2024). To address this gap, countries are implementing innovative measures. In 2024, Algeria introduced a specific unemployment benefit for young jobseekers and new entrants

with low incomes.⁴⁸ China has adopted a one-time subsidy policy to incentivize enterprises to hire university graduates and registered unemployed, including within two years of graduation, contingent upon social insurance registration (ILO 2023j; UN 2022). Additionally, some countries offer a partial or full waiver on



In 2023, the global youth unemployment rate stood at 13.3 per cent, its lowest level since 2008.

⁴⁷ The NEET rate focuses on employment, education and training, and does not inform on participation in unpaid work (including unpaid care and domestic work and unpaid apprenticeships or traineeships), which impacts the difference in youth NEET rates for men and women.

⁴⁸ "<u>Allocation chômage: le ministre de l'Emploi dévoile de nouveaux chiffres</u>", Algérie 360, 13 February 2024.

unemployment insurance contributions for new entrants conditional on registration with public employment services (for example, Austria, Bahrain, Belgium, Denmark, Oman, Romania and Slovenia), while other recognize vocational training or apprenticeships as qualifying periods for unemployment protection (Carter, Bédard and Peyron Bista 2013; Dubois and Hyland 2024; Ghailani et al. 2022). Such practice aligns with Convention No. 168 and the newly adopted Quality Apprenticeships Recommendation, 2023 (No. 208), which recommend extending social protection coverage to apprentices.

Ensuring unemployment protection coverage in all types of employment

Unemployment benefits have proven to reduce poverty, sustain consumption and positively impact health and well-being during job transitions (Paul and Moser 2009; O'Campo et al. 2015). They provide income support that can postpone decisions to take an informal or precarious job (Florez and Perales 2016; Asenjo and Pignatti 2019). Coordination and integration with active labour market policies increase employability

Inter

Integrating income security and labour activation can effectively bridge protection gaps and facilitate transitions to formal employment. and jobs-skills matching, and encourage a return to a suitable employment, with positive effects for individuals, enterprises and the economy (Faberman and Ismail 2020; Asenjo, Escudero and Liepmann 2022; Peyron Bista and Carter 2017). Nevertheless, the COVID-19 crisis exposed the vulnerability of workers who are neither poor nor registered with social insurance: the so-called "missing middle". Short-term and part-time contracts are

largely legally excluded, and self-employed coverage, even when it exists, often remains voluntary (for example, in 13 European Union Member States and the Republic of Korea). While combined contributory and non-contributory benefits tied to active labour market policies are common in high- and middle-income countries, low-income countries often struggle to implement such comprehensive public policies, due to insufficient investment (Asenjo, Escudero and Liepmann 2022; Carranza and McKenzie 2024). Yet, integrating income security and labour activation can effectively bridge protection gaps and facilitate transitions to formal employment, especially in the context of environmentally sustainable structural transformations.

South Africa's Unemployment Insurance Fund and the Social Relief Distress provisions, which were scaled up during the COVID-19 pandemic, demonstrate the efficacy of combined approaches.^{49,50} The COVID-19 crisis brought about digital innovations - such as nowcasting models using consumption, employment and economic data - to identify real-time social protection needs, including in developing countries (for example, Brazil, Chile, Egypt, Guatemala, Mexico, Pakistan, the Philippines, South Africa and Togo) (Pignatti, Galian and Peyron Bista 2024; Montt, Ordoñez and Silva 2020). It also pushed countries such as Chile, Italy and Spain to extend unemployment insurance to domestic workers (Dubois and Hyland 2024; Carter, Bédard and Peyron Bista 2013; ILO 2023j).

However, in many countries, non-nationals lack unemployment protection due to legal exclusion and the absence of administrative measures to secure portability of benefits (Carter, Bédard and Peyron Bista 2013; Keyes, Carter and Bédard 2015; ILO 2023s; 2024d; 2018d). Persons with disabilities face persistent barriers to employment, and unemployment benefits can secure their income until their (re)insertion into the labour market (UNDESA 2019; Baptista and Marlier 2022). With the rapid development of platform work, several countries are exploring unemployment protection measures for these workers (for example, Canada and European Union Member States).

Unemployment insurance coverage should also be extended to wage workers in agriculture. In addition, an integrated approach such as the Benazir Income Support Programme in Pakistan and Start Your Own Business in Sri Lanka can benefit self-employed and subsistence farmers, especially women (de Mel, McKenzie and Woodruff 2014). Public work programmes also offer income security and new skills, with a focus on rural areas. The long-term decent work impact of these programmes could be strengthened through a more systematic connection with public

⁴⁹ Government of South Africa, "Social Relief of Distress".

⁵⁰ Government of South Africa, "The Unemployment Insurance Fund Continues to Ease the Lockdown Burden with Timely Relief Payments", 26 April 2020.

employment services and other labour market policies (ILO 2016b).

In light of the complex challenges within labour markets, reliance solely on unemployment insurance schemes, typically tailored to formal and registered employment, falls short of providing sufficient coverage. Effective interventions require holistic approaches and the integration of policies and measures to (a) enhance working conditions and wages, employability and formalization; and (b) address underemployment – frequent among women and youth – and job search discouragement. Such holistic approaches have been applied in Argentina, Bahrain, Brazil, China, India, Malaysia and Mauritius. Multiple studies have shown the immediate and long-term efficacy of integrating social protection with active labour market policies in high-income countries (Asenjo, Escudero and Liepmann 2022; Sianesi 2008; Vooren et al. 2019). However, such integration and the role of public employment services still needs to be strengthened and adequately financed in low- and middle-income countries (Carranza and McKenzie 2024). Integrated unemployment protection systems – contributory and taxfinanced benefits tied to active labour market policies – foster an enabling environment for decent work and improved skills matching. This, in turn, benefits all workers and enterprises, including small and medium-sized ones, and positively impacts economic outcomes (Martin 2015; Immervoll and Scarpetta 2012; Peyron Bista and Carter 2017). Policymakers can strategically leverage such integration in the context of climate and environmental transition to move workers to decent and formal employment (Asenjo, Escudero and Liepmann 2022).

Adapting unemployment protection schemes to better respond to climate challenges and labour market transformations

Shifting production and consumption models towards more environmentally sustainable practices entails moving away from resourceintensive and polluting industries, and boosting

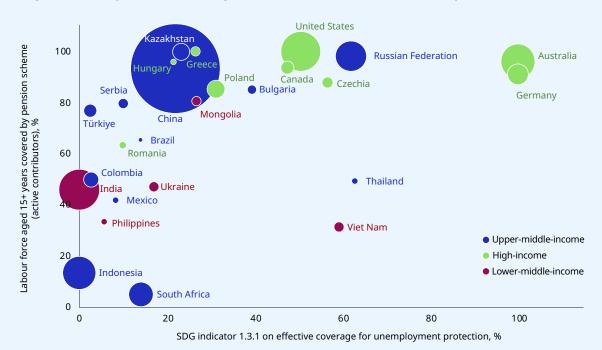


Figure 4.28 Effective unemployment protection coverage among the 25 largest coal producers, by volume of coal production, 2023 or latest available year

Note: The latest data available for Indonesia are for 2022, prior to payment of first unemployment benefits in 2023.

Source: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ILOSTAT; national sources and <u>Eurostat Survey on Income and Living Conditions</u>; <u>Worldometer</u>.

the circular economy. Such transitions can potentially impact employment in certain economic sectors, in particular energy, transport, steel, agriculture, construction, finance and insurance (ILO 2023g; 2023y; Montt, Fraga and Harsdorff 2018) (see section 2.2).

The world's largest 25 coal producers, which are likely to be severely impacted by the energy transition, have an unemployment insurance scheme, alongside an old-age scheme for early retirement benefits. However, the performance of these schemes still requires improvement; only 7 of the 25 schemes have achieved effective unemployment protection coverage exceeding 50 per cent (figure 4.28). Indonesia, South Africa and Viet Nam have already recognized the critical intersection between climate and social goals in their Just Transition Energy Partnerships (Kramer 2022).

Close to two thirds of all renewable energy jobs are based in Asia, with China alone accounting for 42 per cent of the global total (IRENA and ILO 2022). In this region, only 38.6 per cent of the labour force is legally covered by an unemployment protection scheme. This low legal coverage diminishes the potential that unemployment protection schemes could play in facilitating access to reskilling programmes or geographical relocation, necessary to address skills, sectoral, spatial and temporal misalignment caused by the energy transition.

In addition, beyond income security and reemployment, it is crucial to ensure continued access to social health protection, maternity and child benefits during periods of unemployment (ILO Convention No. 168). This is particularly important in reducing vulnerabilities to climate change. Addressing immediate and slow-onset climate impacts calls for extended, innovative and more resilient unemployment protection schemes. This section discusses concrete adaptations of unemployment protection schemes to better respond to the challenges posed by the just transition imperative.

Unemployment insurance schemes

Unemployment insurance demonstrated its efficacy in supporting workers and employers affected by climate-related shocks during the 2011 flood in Thailand through the extension of the benefits period and contribution reduction (ILO 2012). Chile recently reformed its unemployment scheme to address catastrophes, including natural disasters (Government of Chile 2023). Unemployment insurance, tied with job placement and reskilling programmes, is also an effective enabler for supporting mitigation policies, such as in Germany and Spain. Canada, Germany and Japan's unemployment insurance schemes include an occupational or mobility allowance to encourage jobseekers to take new employment in other regions or participate in retraining programmes (Carter, Bédard and Peyron Bista 2013). Other concrete measures may be the removal of legal barriers - such as (a) the exclusion of micro, small and medium-sized enterprises; self-employed workers; apprentices; temporary or part-time workers; (b) age-based criteria; and (c) overly strict qualifying conditions - or the provision of governments' subsidies for new entrants to the labour market, persons with disabilities, workers those with short contribution periods, and long-term unemployed people (ILO 2020k; 2021q).

Early retirement pensions

In environmental transition contexts, early retirement pensions provide income security for older workers unlikely to find new employment, on a voluntary basis. For instance, in the coal phase-outs negotiations, Germany and Spain offered early retirement pension to miners aged above 58 and 48, respectively (WRI 2021a; 2021b). However, in recent years, there has been a trend of limiting possibilities for early retirement in an effort to increase retirement age in the context of population ageing. In such cases, active labour market policies tailored to the needs of older workers, alongside income support measures, become all the more important to facilitate a just transition promoting intergenerational solidarity (Bischler et al. forthcoming).

Employment retention programmes

In times of crisis, job retention and wage subsidy schemes can effectively protect workers' incomes while maintaining the employment relationship, thus reducing the cost of rehiring employees (ILO 2021q; Chung 2021; Tsuruga 2020). These programmes, either financed by workers' and employers' contributions or general taxes, were widely implemented during the COVID-19 pandemic (ILO 2023j). While they can effectively support industries copying with temporary climate shocks, they do not address slow-onset structural unemployment and their effect will remain limited unless extended to small and medium-sized enterprises.

Social assistance schemes

Social assistance and unemployment assistance schemes (typically tax-financed) aim to secure a basic income, and prevent poverty and socioeconomic exclusion, for individuals who are not covered by unemployment insurance or have exhausted their entitlements. They can also support rural workers moving towards decent jobs by combining income, reskilling and entrepreneurship support - such as Nicaragua's Atención a Crisis scheme, which helps rural households transition from agriculture subsistence to non-agriculture self-employment in response to increasing climate risks (Marcours, Vakis, and Premand 2020). Once established, social assistance schemes can rapidly expand their support to individuals and families in case of climate shocks, using early warning mechanisms and high-frequency data to forecast economic shocks on households (Pignatti, Galian and Peyron Bista 2024). However, tax-financed unemployment programmes often provide lower benefits than unemployment insurance schemes and are limited to lowest-income households.

Public employment programmes

Public employment programmes provide financial support to individuals and families, while participating in reconstruction efforts following climate-related shocks, building climate-resilient infrastructure and promoting green agriculture production. In the aftermath of Typhoon Haiyan in 2013, the Philippines' Department of Labour and Employment initiated the Integrated Livelihood and Emergency Employment Programme aimed at providing short-term wage employment and supporting entrepreneurship, tied to social security registration (ILO 2015a).

The environmental transition will inevitably transform labour markets, demanding innovations in unemployment protection and active labour market policies (Boeri and Cahuc 2023). Unemployment insurance, which already exists in 87 countries, can support workers affected by the climate and environment transition. However, relying solely on social insurance is not sufficient to protect workers in all types of employment and ensure a just transition (see section 3.2.2). Therefore, in parallel with efforts to improve unemployment insurance performance, governments must consider introducing integrated unemployment protection systems, combining unemployment benefits from social insurance or tax-financed mechanisms with active labour market policies. Immediate actions include:

- expanding legal scope and relaxing qualifying conditions for unemployment benefits;
- investing in and strengthening active labour market policies including public employment services;
- leveraging nowcasting models to rapidly respond to economic shocks;
- introducing early warning and climate information into the governance of schemes; and
- exploring innovative approaches for reaching workers in all types of employment.



4.3 Social protection for older women and men: Pensions and other non-health benefits

- Ensuring adequate protection in old age remains a challenge, particularly for women, individuals in low-wage occupations, those engaged in precarious employment, workers on digital platforms, and migrants. This challenge will probably be exacerbated by climate change, in the form of involuntary migration, fragmented careers or general climate-induced economic pressure.
- Pensions are the most prevalent form of social protection globally. Worldwide, 79.6 per cent of individuals above the retirement age receive some form of old-age pension. Nonetheless, more than 165 million individuals above statutory retirement age do not receive a pension.
- In many countries, especially those with widespread informal employment, extending contributory pensions has been challenging. The introduction of tax-financed pensions provides an important source of income for older persons, especially for previously excluded groups. Yet, in some countries, benefit levels are insufficient to guarantee a social protection floor for older persons
- The trends to expand and adapt pension systems exhibit significant variability across and within regions. In countries boasting extensive and well-established social protection systems, where populations are ageing, the primary challenge lies in preserving a delicate equilibrium between financial sustainability and pension adequacy. Other countries still face extension- and financing-related challenges in their pension systems, such as low economic development, pervasive informality, limited contributory capacities, poverty, fiscal resource constraints and increases in the cost of living.
- The climate crisis threatens the financial sustainability and adequacy of pension schemes. Consequently, pension schemes must adapt to contend with climate-related risks to ensure long-term sustainability and protect the quality of life of beneficiaries. Pension funds can also help combat the climate crisis through strategic investments in sustainable and low-carbon assets. By aligning their investment strategies with environmental sustainability and embracing responsible investment principles, pension funds can become key players in global mitigation efforts, ensuring a sustainable future for all generations.





4.3.1 Ensuring income security in old age to realize older people's right to social security

Guaranteeing income security for individuals in old age is a fundamental aspect of the human right to social security; a precondition for reducing vulnerabilities and increasing resilience in the context of climate change (box 4.15). Public pension schemes are essential in providing this support, using a mix of mechanisms to ensure financial stability for older people. This support is further enhanced by the provision of accessible social services such as healthcare, home assistance and long-term care, which are all integral to securing a dignified life in old age.

The role of income security in mitigating poverty and reducing vulnerability of older people is critical, and it directly contributes to the fulfilment of SDG target 1.3, among other SDGs. To ensure inclusivity and leave no older individual without support, it is vital for policymakers and legislators to develop and sustain broad-based social protection frameworks, adhering to the principle of universality. In line with Recommendation No. 202, an effective blend of contributory and non-contributory pension schemes can provide comprehensive protection for all.

4.3.2 Types of pension schemes

Globally, pension systems exhibit a large degree of diversity, frequently combining contributory and tax-financed schemes to ensure universal, adequate and comprehensive protection (box 4.15). While recognizing different forms of provisions, international social Guaranteeing income security for individuals in old age is a fundamental aspect of the human right to social security; a precondition for reducing vulnerabilities and increasing resilience in the context of climate change.

security standards provide a set of principles that guide countries and ensure adequate protection to the population. Central to this framework, public pension schemes have been instrumental

Box 4.15 International standards on old-age pensions

The rights of older people to social security and an adequate standard of living are laid down in the major international human rights instruments, the Universal Declaration of Human Rights, 1948, and (in more general terms) in the International Covenant on Economic, Social and Cultural Rights, 1966.¹ International social security standards provide a comprehensive framework of core principles and benchmarks for the establishment, development and maintenance of adequate old-age pension systems.

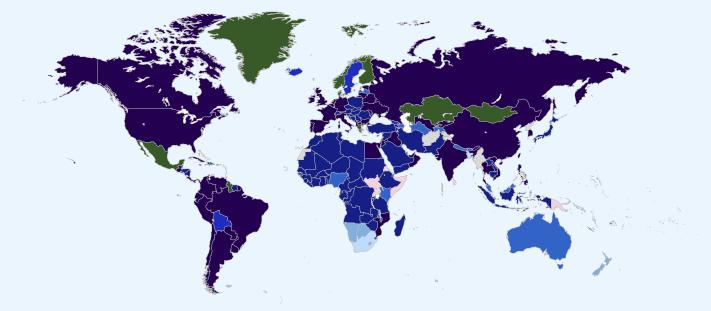
Convention No. 102 and Recommendation No. 202, together with the Invalidity, Old-Age and Survivors' Benefits Convention, 1967 (No. 128) and its Recommendation No. 131, provide an international reference framework for pensions and other social security benefits to ensure income security, as well as access to healthcare, in old age. They state that adequate old-age pensions should be provided at guaranteed levels upon completion of a qualifying period, and regularly adjusted to maintain pensioners' purchasing power until the beneficiary's death (see Annex 3). Pensions can be provided through contributory schemes and/ or by universal or means-tested (or pension-tested) non-contributory schemes. Contributory pensions should ensure income maintenance by guaranteeing minimum replacement rates corresponding to a prescribed proportion of past earnings, or minimum benefit levels. Non-contributory pensions, including means-tested ones, should be at least sufficient to maintain the beneficiary and their respective family in health and decency (Convention No. 102, Art. 67(c)). Together, these benefits should guarantee a dignified life in old age as a result of comprehensive social protection systems, including floors that also provide higher levels of pensions. Given rapidly ageing societies and the financing challenges involved, Recommendation No. 202 confirms the State as the entity entrusted with the overall and primary responsibility for social protection, including that of ensuring the financial, fiscal and economic sustainability of pension systems with due regard to social justice and equity.

¹ Universal Declaration of Human Rights, Arts 22 and 25(1); International Covenant on Economic, Social and Cultural Rights, Art. 9. See also UN (2008) and ILO (2021a).

While recognizing different forms of provisions, international social security standards provide a set of principles that guide countries and ensure adequate protection to the population. in securing adequate income for older individuals, significantly contributing to poverty reduction and inequality mitigation. Many countries have expanded their pension systems over time by (a) extending coverage to so far uncovered categories including self-employed workers; (b) integrating components that ensure minimum pension levels; and (c) in some instances, introducing additional measures designed to provide higher benefit levels.

Among the 222 countries and territories for which data exist, 213 offer old-age pensions as periodic cash payments through at least one scheme. Of these, 178 use public social insurance as the dominant mode of provision, 119 employ a mix of both contributory and non-contributory schemes, 86 only use contributory scheme(s), and 8 only use tax-financed schemes (figure 4.29). Furthermore, 30 countries and territories provide universal benefits to all beyond a specific age or in combination with tax-financed means-tested benefits, while 97 offer solely means-tested benefits (either income- or pensions-tested) to older individuals ineligible for any other pension. A small minority of four countries and territories still only provide one-time lump sum payments

Figure 4.29 Old-age protection (pensions) anchored in law, by type of scheme, 2023 or latest available year

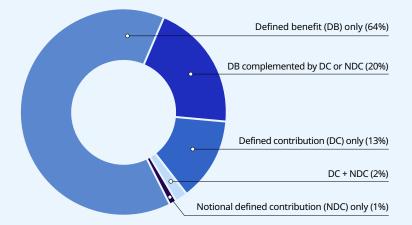


- Social insurance and tax-financed universal pension (9), or with additional means-tested (4) or pension-tested (1) benefit
- Social insurance and tax-financed means-tested (70) or pension-tested (12) benefit
- Social insurance only (75), or with another contributory benefit (7)
- Contributory benefit other than social insurance and tax-financed universal pension (9), or with additional means-tested benefit (1) Contributory benefit other than social insurance only (4), or with tax-financed means-tested (7) or pension-tested (6) benefit
- Tax-financed universal pension only (5), or with additional means-tested benefit (1)
- Tax-financed means-tested benefit only (2)
- No statutory cash benefit (5), or lump sum only (4)
- No data

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Note: The number between parentheses refers to the count of countries or territories.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources. Figure 4.30 Financial mechanisms for old-age pensions: Share of countries with defined benefit or defined contribution pension schemes, 2023 or latest available year



NDC = notional defined contribution; DC = defined contribution.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

instead of periodic benefits, utilizing provident funds or similar initiatives.

Regarding contributory schemes, defined benefit pension schemes – which are founded on the principle of collective financing – are prevalent in 84 per cent of countries. Among those, around a quarter are complemented by either a mandatory defined contribution scheme or a notional defined contribution scheme. Furthermore, 13 per cent of countries depend solely on mandatory defined contribution schemes, which are based on individual accounts, and only 1 per cent exclusively rely on notional defined contribution schemes (figure 4.30).⁵¹

4.3.3 Legal coverage

More than half (51.4 per cent) of the working-age population worldwide are covered by statutory mandatory and voluntary contributory schemes, and therefore potentially qualify for a contributory pension upon reaching the prescribed age. Yet, only 39.4 per cent of the working-age population are covered under a mandatory scheme, while an additional 12.0 per cent are covered under voluntary schemes, for which uptake often remains below expectations and therefore does not lead to effective access to pensions. This is often attributable to low contributory capacities as well as the perceived remoteness of retirement,

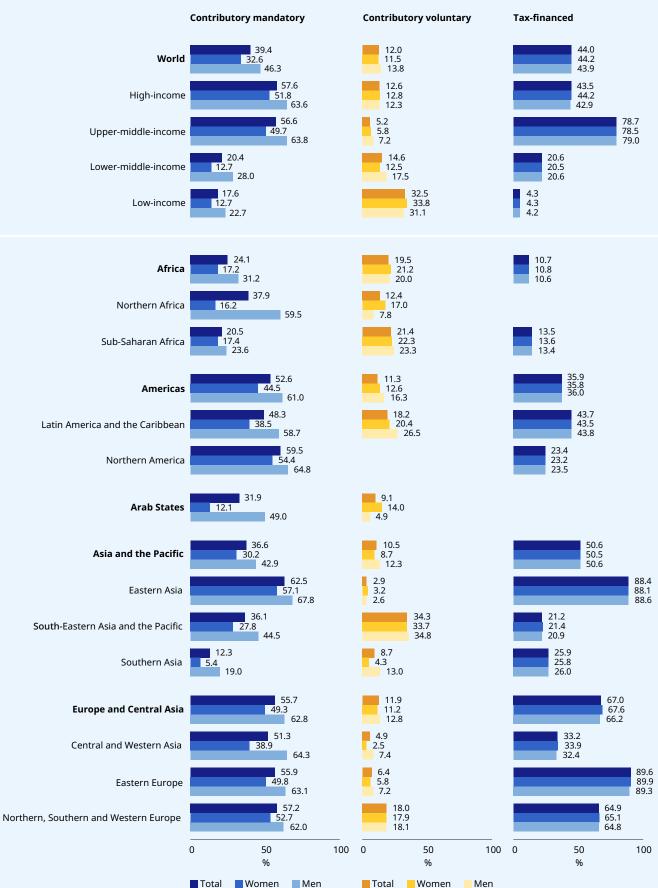
which contrasts with the immediate financial needs of households.

At the same time, 44.0 per cent of the global working-age population have legal coverage under a universal or meanstested non-contributory (tax-financed) scheme, making them potentially eligible for a non-contributory benefit upon reaching the retirement age (see figure 4.31).

In mandatory contributory pension schemes, the legal coverage rate for women is lower than that for men, with 32.6 and 46.3 per cent of In mandatory contributory pension schemes, the legal coverage rate for women is lower than that for men, with 32.6 and 46.3 per cent of the total working-age population respectively.

⁵¹ This term describes notional or fictitious individual personal accounts under a public pay-as-you-go scheme.

Figure 4.31 Legal coverage for old-age protection: Share of working-age population aged 15 and over covered by old-age pensions, by region, subregion, income level, sex and type of scheme, 2023 or latest available year (percentage)



Note: Global and regional aggregates are weighted by the working-age population aged 15 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to changes in the methodology. The total does not always correspond to the sum by type of scheme due to possible simultaneous coverage by multiple social protection benefits.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

the total working-age population respectively. This gender gap mirrors the lower participation of women in the labour market, and their over-representation in many contexts among selfemployed individuals, contributing family workers (especially in agriculture) and domestic workers, or other categories of workers excluded from legal coverage. In the Arab States, the legal coverage of women under mandatory contributory schemes is markedly low at 12.1 per cent, whereas the coverage for men is at 49.0 per cent. Similar patterns are evident in Northern Africa and Southern Asia. Moreover, while some of these uncovered women may still ultimately qualify for survivors' pensions at least, these benefits do not offer the same level of security as pensions accrued directly through their own contributions.

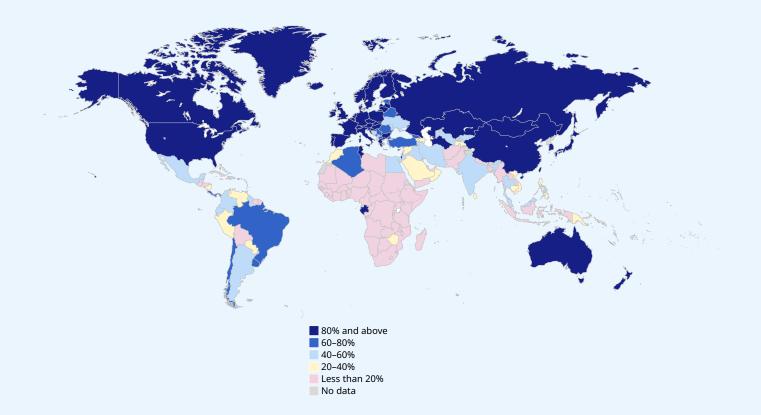
4.3.4 Effective coverage: Monitoring SDG indicator 1.3.1 for older people

The effective coverage of pension schemes can be monitored using two complementary indicators: one concentrating on the working-age population making contributions to a pension scheme, and the other on older persons who are actually receiving pension benefits.

Effective coverage of people of working age (contributors)

Globally, 58.5 per cent of the global labour force actively contribute to a pension scheme and can expect to receive a contributory pension upon retirement (figure 4.32). However, substantial

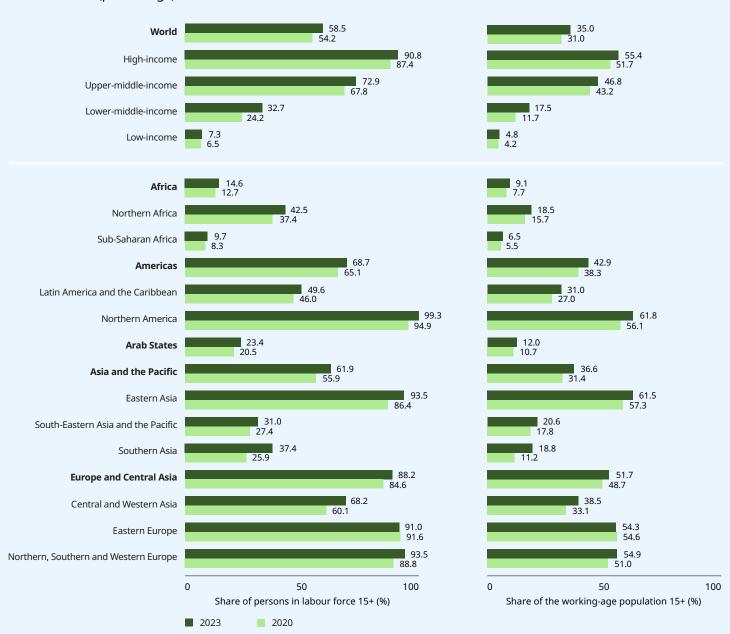
Figure 4.32 Effective coverage for old-age protection: Share of persons in labour force aged 15 and over covered by a pension scheme (active contributors), 2023 or latest available year (percentage)



Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Figure 4.33 Effective coverage for old-age protection: Share of persons in labour force and working-age population aged 15 and over covered by a pension scheme (active contributors), by region, subregion and income level, 2020 and 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by the labour force and working-age population aged 15 and over.

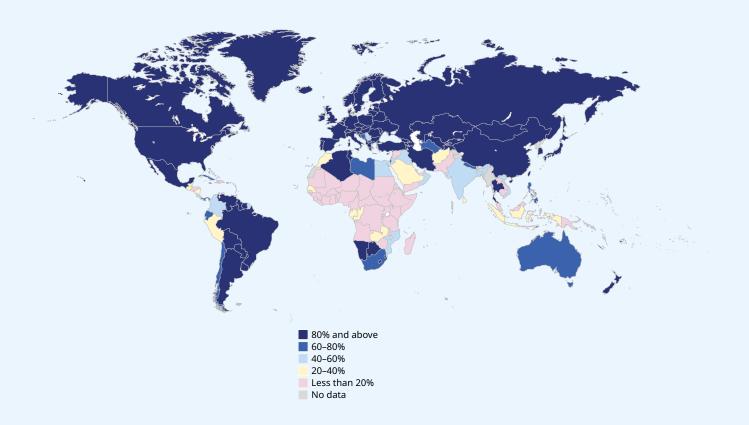
Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

regional differences exist, with coverage rates of only 9.7 per cent in sub-Saharan Africa, in contrast to Eastern Europe or Northern America, where the large majority of workers contribute (91.0 and 99.3 per cent respectively). The number of persons of working age who are actively contributing to a pension scheme sheds light on the anticipated pension coverage for this cohort in the future. Figure 4.33 provides this indicator in two variants: as a proportion of the labour force, and as a proportion of the working-age population. Yet, only one third of the working-age population (35.0 per cent) contributes to pension schemes, which is a significant concern, particularly for women. Especially in low-income countries, the small coverage ratio of 7.3 per cent of the labour force, and 4.8 per cent of the working-age population, is troubling. As a result, a significant number of individuals reach retirement age without any pension entitlements under contributory schemes, due to high levels of informality, linked to limited contributory capacity and compliance, and weak governance and institutional capacities. At the same time, there has been a significant increase in pension coverage in upper- and lower-middle-income countries, with coverage rates of 72.9 per cent and 32.7 per cent of the labour force, respectively. Some of this progress may be the result of initiatives to extend the coverage of contributory schemes to workers who are currently in informal employment, especially those with contributory capacity (ILO 2021i). Equally, tax-financed pensions remain an essential complement to guarantee a basic level of income security in old age for previously uncovered individuals.

Effective coverage of older people (beneficiaries)

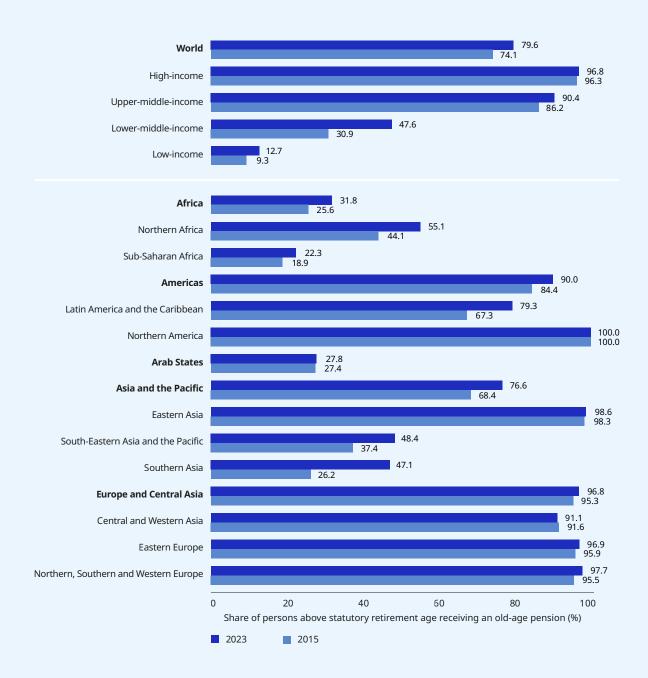
Globally, 79.6 per cent of individuals above retirement age receive a pension, whether through contributory or non-contributory means, yet with large regional variations (figures 4.34 and 4.35). Pension coverage has significantly increased in some parts of the world since 2015 – for example, in Southern Asia, and South-Eastern Asia and the Pacific, to 47.1 and 48.4 per cent of persons above

 Figure 4.34 SDG indicator 1.3.1 on effective coverage of social protection: Share of persons above statutory retirement age receiving an old-age pension, 2023 or latest available year



Boundaries shown do not imply endorsement or acceptance by the ILO. See full ILO disclaimer.

Figure 4.35 SDG 1.3.1 on effective coverage for old-age protection: Share of persons above statutory retirement age receiving an old-age pension, by region, subregion and income level, 2015 and 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by population aged 65 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

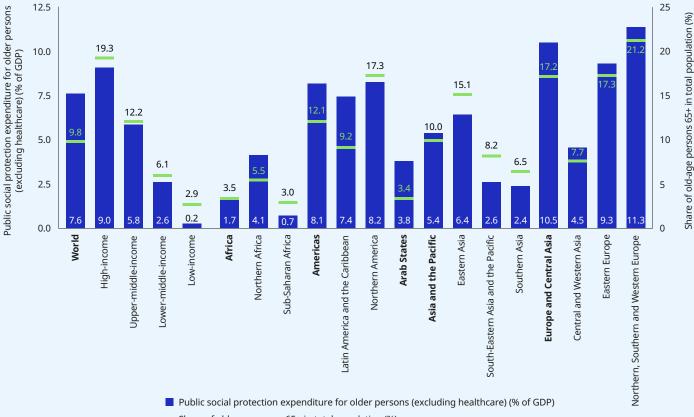
retirement age respectively, which represents a major progress. In sub-Saharan Africa, rates have also increased to 22.3 per cent, although more efforts are required to ensure universal pension coverage.

Worldwide, 49.2 per cent of women and 63.2 per cent of men receive contributory pensions (see figure 3.9). When it comes to tax-financed pensions, the effective coverage of older persons above statutory age is significantly lower, at 34.2 per cent and 26.9 per cent for women and men, respectively.

4.3.5 Expenditure on social protection for older people

The expenditure on pensions serves as a useful indicator of the maturity of pension systems, exhibiting a strong correlation with the share of older individuals within the population. More specifically, the extent of national public pension spending is shaped by multiple factors, such as the demographic composition of a country, effective coverage rates, benefit adequacy and variations in the policy mix between public and private provision of pensions and social services. Globally, public expenditure on pensions and other nonhealth benefits for older people averages 7.6 per cent of GDP (figure 4.36). However, substantial

Figure 4.36 Public social protection expenditure (excluding health) for older persons (percentage of GDP) and share of old-age persons aged 65 and over in total population (percentage), by region, subregion and income level, 2023 or latest available year



Share of old-age persons 65+ in total population (%)

Notes: See Annex 2 for a methodological explanation. Public social protection expenditure for older persons (excluding healthcare) global and regional aggregates are weighted by GDP.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ADB, GSW, IMF; OECD; UNECLAC; UNWPP, national sources.

regional variations still exist, with expenditure levels ranging from 10.5 per cent of GDP in Europe and Central Asia to 1.7 per cent in Africa.

Countries find themselves at diverse phases of population ageing, with significant differences linked to income levels (figure 4.36). Developing countries exhibit younger demographic profiles and emerging pension systems. This constitutes a strategic opportunity to pre-emptively enact necessary adjustments and adapt to upcoming challenges to extend coverage and enhance the long-term economic sustainability of their pension frameworks, which is essential for a just transition in light of climate-related challenges.

4.3.6 Closing gender gaps in access to pensions

Gender gaps in pensions continue to be a significant challenge, largely due to persistent gender inequalities within the labour market

Globally, while 40.9 per cent of working-age men contribute, only 29.1 per cent of women do. and wider societal disparities discussed below. Women in many countries are less likely to engage in paid employment and to contribute to a pension. Globally, while 40.9 per cent of working-age men contribute, only 29.1 per cent of women do (Chapter 3, figure 3.9). Gender disparities are particularly pronounced in low- and lower-

middle-income countries, where only 2.9 and 9.6 per cent of women of working age contribute to a pension scheme, respectively (see section 3.2.5).

Women's access to adequate pensions is further inhibited by persistent gender wage gaps and

frequently interrupted employment histories, often related to women's disproportionate caregiving responsibilities and the lack of quality care services (ILO 2024a). Some countries have introduced mechanisms in public pension schemes to mitigate such inequalities, such as pension care credits for both women and men, or minimum pension guarantees. As benefits in private pension schemes are more rigidly tied to contribution histories, these seldom incorporate compensatory measures. Moreover, they sometimes present gender-specific actuarial tables, which are disadvantageous for women given their lower contributions, earlier retirement and longer average life expectancy (Behrendt and Woodall 2015; Behrendt 2000).

Tax-financed pensions become crucial in securing at least a basic level of income security. They narrow gender gaps in coverage, particularly in low- and lower-middle-income countries, yet often do not address benefit adequacy gaps. Women's

participation in contributory schemes, especially social insurance schemes, is therefore essential for reaching gender equality (ILO 2021a).

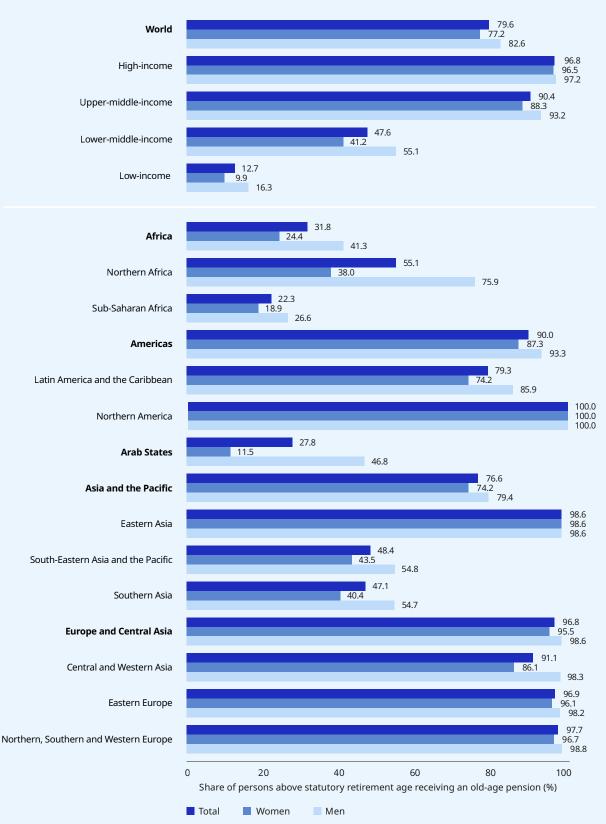
Globally, contributory and tax-financed pensions provide at least a basic level of income security for 82.6 per cent of older men and 77.2 per cent of older women (figure 4.37). Gender gaps are particularly large in regions with low labour

force participation of women and in the absence of tax-financed pensions, as in Northern Africa or the Arab States. Moreover, low overall coverage rates are of particular concern for women who tend to constitute the majority of older persons (see section 4.3.4).

Low overall coverage rates are of particular concern for women who tend to constitute the majority of older persons.



Figure 4.37 SDG 1.3.1 on effective coverage for old-age protection: Share of persons above statutory retirement age receiving an old-age pension, by sex, 2023 (percentage)



Notes: See Annex 2 for a methodological explanation. Global and regional aggregates are weighted by population aged 65 and over. Estimates are not strictly comparable to the previous *World Social Protection Report* due to methodological enhancements, extended data availability and country revisions.

Sources: ILO modelled estimates, 2024, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

4.3.7 The adequacy of pensions to provide genuine income security to older people

While striving for universal coverage, ensuring the adequacy of pensions remains a pivotal goal. However, devising a universally applicable method to assess pension adequacy presents significant challenges. Pension adequacy encompasses both objective indicators (such as the replacement rate or the pension's ability to meet basic living needs) and subjective measures (such as beneficiaries'

One potential indicator of adequacy is the effectiveness of pensions as a means of reducing income inequality. perceptions of how well their pensions maintain living standards or mirror their contributions to economic and social progress during their working years).

One potential indicator of adequacy is the effectiveness of pensions as a means of reducing income inequality. Indeed, pension schemes account for inequality

reduction, especially through contributory schemes, and lesser but still substantial impacts through non-contributory ones (Razavi et al., forthcoming b). For instance, in 17 out of 35 countries, contributory pensions reduce the Gini coefficient by more than 15 per cent, and even by at least 30 per cent in Czechia, Poland and Serbia. In 25 out of 35 countries, however, noncontributory pensions are only responsible for a reduction in income inequality of less than 4 per cent. And while guaranteed non-contributory pensions remain an undeniable and critical part of national social protection floors, this data also suggests that contributory schemes might be more effective in tackling income inequality.

Furthermore, ILO research⁵² on 233 contributory pension schemes across 137 countries reveals that the average old-age pension amounts to

approximately 43 per cent of the average wage in these countries. Meanwhile, minimum pensions amount to only 32.7 per cent of the minimum wage – levels insufficient to make ends meet.

For tax-financed pensions, the situation is equally alarming: based on the review of 100 schemes from 79 countries, the average and minimum benefits represent merely 27.7 and 20.4 per cent of the minimum wage, respectively. In 38 countries, the minimum level of tax-financed pensions remains well below the national poverty line (see figure 4.38 for selected countries). As a result, older people relying on a tax-financed pension for their income are still poor. This concerns close to 31 per cent of persons above retirement age, 34.2 per cent of older women and 26.9 per cent of older men (see section 4.3.4).

Another potential measure of adequacy is the replacement rate, describing the ratio of pensions to pre-retirement earnings. Average replacement rates in earnings-related public pension schemes in many European countries are projected to

decline by 2070 (European Commission 2021). In certain instances, the anticipated reductions are substantial, with rates expected to decline significantly below the minimum benchmarks set by ILO social security standards of at least 40 to 45 per cent of prior earnings – in Conventions Nos 102 and 128, respectively – following a contribution or employment period of 30 years.

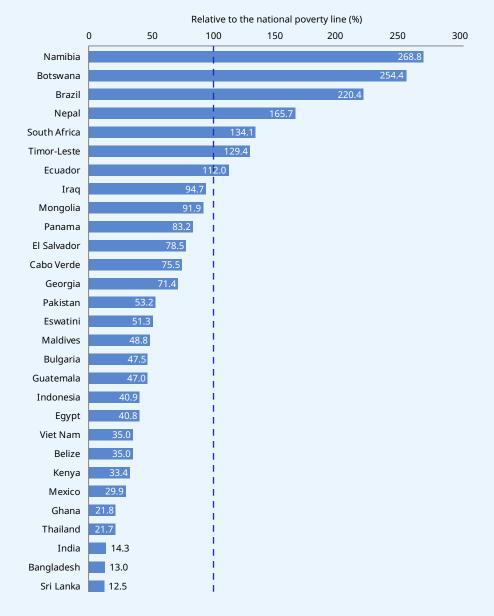


Average replacement rates in earningsrelated public pension schemes in many European countries are projected to decline by 2070.

Pensions, as long-term benefits, must maintain their purchasing power and real value over an extended period. International social security standards require regular indexing of benefit levels. Country practices differ widely, ranging from ad hoc mechanisms to automatic indexation, and these practices vary across different pension schemes (table 4.4).

⁵² ILO estimates based on the analysis of administrative data on level of benefits compiled through the Social Security Inquiry. Analysis included only cash benefits provided to older persons.





Note: Where tax-financed benefit schemes offer several benefit levels, the minimum level is shown here.

Sources: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; ISSA <u>Social Security</u> <u>Programs Throughout the World</u>; <u>ILOSTAT</u>; national sources.

Table 4.4 Indexation methods of old-age pension schemes, 2023 or latest available year

Indexation method	No. of schemes
Price indexation	92
Wage indexation	39
Mixed prices or wages	44
No regular indexation method	62
No statutory requirement to adjust benefits	18
No information	108
Total	363

Note: "No information" in most cases means "no indexation".

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

While less than half of pension schemes reviewed (48.2 per cent) use price, wage or mixed indexation methods, the majority of pension schemes resort to ad hoc adjustments, often influenced by political considerations, endangering the purchasing power of benefits, especially in inflationary contexts. The absence of regular indexation or only ad hoc adjustments are concerning. Without consistent adjustments aligned with real wage increases or cost of living measures, the living standards of older individuals will decline, leading to a higher incidence of old-age poverty especially for older women.

4.3.8 Reforming pension systems in a challenging context

Concerned about pension scheme sustainability, governments across various regions announced a total of 296 measures between 2013 and 2023, aimed at containing pension expenditures and enhancing their economic sustainability. Some 136 measures postponed the retirement age. Specifically, they included increases in normal retirement age, introduction or modification of penalties for early retirement or incentives for delayed retirement, and proposals to lengthen the eligibility period or impose stricter eligibility criteria (table 4.5).

Pension reforms aimed at long-term sustainability have been driven by short-term crises and challenges but also by more fundamental and

slow-moving generational factors, such as demographics, wage stagnation, inadequate contribution rates, the prevalence of precarious and unprotected forms of employment, widening inequalities and the decreasing labour share of income. Consequently, many countries implemented adjustments to safeguard the financial health of their pension systems, yet often with implications for pension adequacy. Many of these adjustments target benefit levels or eligibility criteria, such as increasing penalties for early retirement, elevating the statutory age for pension eligibility, or linking retirement age adjustments to life expectancy (see table 4.6).

Structural or parametric reforms should align with the benchmarks set out in international social security standards to achieve the dual goal of ensuring financial, economic and fiscal sustainability, while also prioritizing equity and social justice.

Structural or parametric reforms should align with the benchmarks set out in international social security standards to achieve the dual goal of ensuring financial, economic and fiscal sustainability, while also prioritizing equity and social justice (see box 4.16). Fundamental normative principles include ensuring:

- adequate and predictable benefits for the lifetime of beneficiaries as legal entitlements;
- the transparent, accountable and sound financial management and administration of pension schemes, notably by involving

Table 4.5 Government announcements of pension reforms (contraction), 2013–23

Type of measure (expenditure rationalization and revenue adjustment)	No. of cases
Delaying pension receipt: Raising retirement age (96), incentivizing late or penalizing early retirement (22), tightening eligibility or increasing length of contributory period (18)	136
Modifying calculation formula or indexation method (33), reducing benefit level (31), introducing or increasing taxes (9), reducing benefit duration (5), freezing indexation of benefit (5), reducing package of services/benefits (1), decreasing benefit subsidies (1)	85
Increasing contribution rates (35), contracting coverage (8), reducing incentive for voluntary coverage (1), reducing or suspending contributions subsidy (1)	45
Privatizing or introducing individual accounts (16), suspending or closing existing scheme (11), coordinating several programmes (2), introducing notional accounts (1)	30
Total number of measures	296
Source: ILO, World Social Protection Database, based on ILO Social Protection Monitor.	

▶ Table 4.6 Old-age pensions: Parametric reforms in selected countries, 2021–23

Country and year	Measure
France (2023)	Increased the minimum retirement age from 62 to 64 by 2032 and accelerated the increase in the contribution period required for a full pension. Aims to improve pension finances by 2030 and gradually eliminate special pension schemes.
Mexico (2021)	Implemented reforms to the mandatory individual account pension scheme by increasing employer contributions, adjusting government contributions, reducing the minimum contribution period for an old-age pension, boosting the guaranteed minimum pension, and capping administrative fees. The Government estimates an increase of future pension adequacy by an average of 40 per cent.
Uruguay (2023)	Gradually increased the minimum retirement age from 60 to 65 based on birth year and contributions. The distribution of pension contributions between schemes was modified and the calculation basis for old-age pensions changed to the best 20 years of salary, among others. Exceptions exist for long working careers or in physically demanding jobs.
Japan (2023)	The retirement age for civil servants in Japan was raised from 60 to 61, thereby also addressing Japan's workforce shortages. The plan is to gradually raise the retirement age to 65 by fiscal year 2031. Japan's broader strategy is to utilize the experience of older workers and mitigate the impacts of an ageing workforce.
Switzerland (2022)	Decided by referendum to gradually increase the retirement age for women to match that of men by 2028.

Source: ILO <u>World Social Protection Database</u>, based on ILO <u>Social Protection Monitor</u>; OECD <u>Pensions at a Glance</u> 2023.

representatives of workers and protected persons and employers in pension fund management;

- the collective financing of pensions based on solidarity; and
- the regular review of benefit levels to safeguard purchasing power.

Many recent reforms aimed at maintaining financial stability with measures to set lower minimum contribution requirements for workers with intermittent contribution patterns, offer contribution credits for periods of unemployment, and enhance the transferability of benefits across different employment scenarios. Now, not only do such reforms ensure more inclusive and just pension systems, they are also crucial in preparing for a future where challenges related to climate change will disrupt traditional employment patterns. Increasing the normal retirement age is a prevalent measure taken around the world as countries strive to improve their pension scheme's sustainability (figure 4.39). A reason for this preference is that it represents a relatively simple and effective measure of improving financial

sustainability in a contributory old-age pension scheme, the main driver of the underlying cost in partially funded pension schemes being the ratio of pensioners to contributors. As recently witnessed in France and elsewhere, increasing the retirement age is always a sensitive issue that requires proper analyses, communication and social dialogue.



Increasing the normal retirement age is a prevalent measure taken around the world as countries strive to improve their pension scheme's sustainability.

Box 4.16 Lebanon: A new retirement scheme to improve income security in old age

Lebanon established a new social pension scheme for private sector workers in December 2023, aligned with international labour standards and good international practices, in a crucial step towards ensuring a decent standard of living for older persons in Lebanon.

The new scheme replaces the current end-of-service indemnity. Lifelong monthly pension benefits will be granted upon retirement, disability or death to the insured or surviving family members. There are two minimum pension guarantees to ensure decent living standards for pensioners, one aligned with the requirements of ILO Convention No. 102. Pensions are automatically indexed to the cost of living against inflation, whereas the end-of-service indemnity rapidly loses value during high inflation periods.

The new scheme also supports formalization. First, employers, self-employed, agricultural and domestic workers can join the social security system for the first time, provided they contribute at the required minimum levels. Second, the pension formula considers contributions over an entire career creating a robust and direct formalization incentive.

Pension adequacy will depend crucially on the evolution of salaries declared to the National Social Security Fund. While real salaries have been gradually adjusting to align with new price levels, salaries declared to the National Social Security Fund have remained anchored to the minimum wage.

The new pension scheme is partially funded and benefits are partly financed out of future contributions of current and future contributors, hence providing more financial resilience to economic shocks. After periods of high inflation, wages will be adjusted to the higher cost of living and consequently future contributions to the pension scheme will also be adjusted. Moreover, in a collectively financed pension scheme, in line with the ILO principles of collective financing and social solidarity, the impacts of demographic, economic or investment shocks are supported collectively and amortized over a very long period of 75 to 100 years.

Source: Based on ILO (2023n).

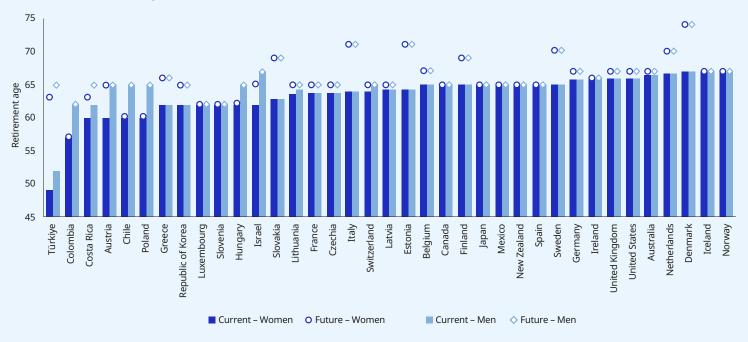


Figure 4.39 Lowest statutory retirement age for a full career in selected countries (OECD), by sex, 2023

Source: OECD, based on information provided by countries; see "Country Profiles of Pensions Systems".

Beyond financial sustainability, there are other aspects to consider, such as: increased life expectancy versus healthy life expectancy; ratio of life spent working versus that spent in retirement; labour force participation and pension coverage; and preferential eligibility conditions for arduous jobs. It is never simply a question of mechanically raising the retirement age; there are many aspects to consider, as highlighted by the International Labour Conference (ILO 2013b).

Some might presume that a low retirement age helps reduce youth unemployment, opening up more employment opportunities for younger workers. However, the existence of such a link is not conclusive, since younger workers do not necessarily have similar skills to older workers, and cannot automatically slot into the role of those retiring (Jasmin and Abdur Rahman 2021).

Keeping older workers in the labour force cannot be achieved solely with incentives or disincentives provided via pension provisions. Employment needs to be more attractive to older workers in various ways. Employers need to join the effort and offer flexible work arrangements, skill development opportunities, training programmes, as well as workplace adaptation. Corporate and personal tax incentives could also contribute to a better balance. Increasing labour force participation rates and the share of contributors, including women and non-nationals, also helps to rebalance the ratio of pensioners to contributors (ILO 2021b).

The ongoing trend of increasing retirement age represents a crucial, albeit contentious, strategy to enhance the sustainability of pension schemes given shifting demographic profiles and economic realities. While being a straightforward solution to cost increases, a comprehensive approach that addresses broader social, economic and health-related considerations is needed: a broad perspective that balances financial viability with social justice, health disparities and labour market dynamics.

4.3.9 The climate crisis and the role of pension schemes

Impacts of the climate crisis on pension schemes

The unfolding climate crisis will impact the adequacy and sustainability of pension schemes in several ways, regardless of whether they are fully or partially funded, pay-as-you-go, contributory or tax-financed. Simultaneously, pension schemes can play a huge role in mitigating the drivers of the climate crisis, especially in how the funds are invested.

Climate change will affect demography, economy and investments, impacting pay-as-you-go and fully funded schemes differently. Pay-as-you-go schemes are more affected by demographic and economic factors, while fully funded schemes are more sensitive to investment outcomes.

On the demographic side, the climate crisis will adversely impact the health of populations, either directly (due to increased frequency and severity of extreme events) or via increased temperatures, sea levels, ocean acidity and air pollution. Climate impacts on coastal erosion, food availability and water supplies can also have a socio-economic impact on a given population's overall health, safety and quality of life, with implications for birth rates, mortality and migration. These health impacts will differ by region, income level, gender, age and comorbidities (IAA 2020).

On the economic side, climate-related risks are generally classified into two categories: physical risks, linked to the frequency and severity of climate events; and transition risks, linked to efforts for a transition towards a lower-carbon economy. Both sources of risks would have an impact on labour force participation rates, employment rates, productivity levels, real wage growth, prices and consumption. For instance, if wages and benefit levels do not keep up with inflation, social security systems may suffer from a labour force with less incentive to contribute to public pension schemes (IAA 2020).

The potential downside is often expressed in terms of reduction of GDP. Indeed, modelling climate change and the reaction of society is extremely complex, requiring assumptions about multiple unknown factors for each scenario. These include (a) future emission levels; (b) how quickly the climate will warm for different emission levels; (c) whether climate or ecosystem tipping points occur; (d) the level of damage as the climate warms, and the effectiveness of mitigation policy efforts; (e) how quickly societies react to physical changes; (f) the pace and scale of the transition in different countries, economies and sectors; and (g) how to incorporate land use, technological change and nature (Trust et al. 2023).

In response, some social security institutions have started to factor into their actuarial valuations the impact of a potential GDP reduction on their pension scheme (see box 4.17).

The ultimate impact of climate change on countries' GDP will not only depend on the national and global response to the crisis, but also on several factors that are difficult to predict and model. For instance: by how much will the planet warm for a given level of greenhouse gas emissions? How quickly will this warming happen? And what is the highest temperature at which society can still operate normally? By providing answers and making reasonable assumptions as a result, some models suggest that if the world warms by 3°C, countries could lose between 30 and 80 per cent of their GDP. Higher temperature rises of 4–6°C, could cause extreme economic damage, beyond what we can currently predict (Trust et al. 2023).

The unfolding climate crisis will impact the adequacy and sustainability of pension schemes in several ways, regardless of whether they are fully or partially funded, pay-as-you-go, contributory or tax-financed.

Box 4.17 The Canada Pension Plan and its illustrative climate scenarios

For instance, a recent actuarial report of the Canada Pension Plan analysed downside risks with three scenarios on how the climate crisis could reduce GDP, along with their impact on the Canada Pension Plan's minimum contribution rate (see table below). The table shows the corresponding decreases in GDP in 2030, 2050 and 2100 as well as their average return in three scenarios involving an orderly, a disorderly/delayed, and a failed transition.

Year	Reduction in GDP			Reduction
	2030	2050	2100	in average return
Transition scenario				
Orderly	-5%	-10%	-10%	0.09%
Disorderly/delayed	0%	-15%	-20%	0.17%
Failed	0%	-8%	-30%	0.31%

Illustrative climate scenarios - Cumulative Canadian GDP impact relative to baseline scenario

Source: Government of Canada (2022).

Mitigating the climate crisis

At the end of 2021, the market value of the global capital market (that is, fixed income securities and equities) was US\$251 trillion (SIFMA 2022), 24 per cent (US\$60 trillion) held by pension funds (public and private).⁵³ For many countries, pension assets represent more than 100 per cent of their GDP, such as Canada (131 per cent), the Netherlands (165 per cent) and Switzerland (133 per cent).⁵⁴

Pension funds have already embarked on de-financing fossil

fuels.

Pension funds, given their long-term investment horizon, are uniquely positioned to contribute to climate crisis mitigation. For instance, they can divest from high carbon assets toward low-carbon assets. As major shareholders, they can also exercise their

voting rights to influence company policies to reduce carbon footprints and promote sustainable business models. They can demand transparency from private equity firms on environmental and community impacts of investments. Strengthening regulations that require pension schemes to report against climate change risks also helps mitigation efforts, including the United Nations Principles for Responsible Investment (box 4.18). Pension funds have already embarked on de-financing fossil fuels (see section 2.2.3).

Most large investment management firms have signed the United Nations Principles for Responsible Investment. The research of one investment firm with US\$9 trillion in assets shows that an orderly transition would result in higher economic growth compared to no climate action at all, and also create a more constructive overall macroenvironment for clients'



Investment.

financial returns (Black Rock 2024). Moreover, many investment management firms are also members of industry associations related to

⁵³ Statista, "Total pension funds assets of selected countries worldwide in 2021".

⁵⁴ Statista, "Ratio of Pension Assets to GDP in Selected Countries in 2022".

Box 4.18 United Nations Principles for Responsible Investment

Convened by the United Nations Secretary-General, the United Nations Principles for Responsible Investment were developed by an international group of institutional investors and reflect the increasing relevance of environmental, social and corporate governance issues to investment practices. Signatories commit to six fundamental investment Principles:

- Principle 1: Incorporate environmental, social and corporate governance issues into investment analysis and decision-making processes.
- Principle 2: Be active owners and incorporate environmental, social and corporate governance issues into their ownership policies and practices.
- Principle 3: Seek appropriate disclosure on environmental, social and corporate governance issues by the entities in which they invest.
- > Principle 4: Promote acceptance and implementation of the principles within the investment industry.
- Principle 5: Work together to enhance their effectiveness in implementing the principles.
- Principle 6: Report on their activities and progress towards implementing the principles.

As of 2024, there were already 5,382 signatories to these Principles, 76 per cent of whom were investment managers, 14 per cent asset owners, and 10 per cent service providers.

Source: UNPRI (n.d.).

sustainability and to the transition to a low-carbon economy, such as:

- Task Force on Climate-Related Financial Disclosures
- Taskforce on Nature-related Financial Disclosures
- Net Zero Asset Managers Initiative
- Glasgow Financial Alliance for Net Zero
- Climate Action 100+

Furthermore, most large pension funds, such as the National Pension Service of the Republic of Korea, the National Civil Pension Fund of the Netherlands, the California Public Employees Retirement System, and the Canada Pension Plan Investment Board, are also signatories of the United Nations Principles for Responsible Investment.

However, the fiduciary duties and solvency constraints faced by pension funds in certain jurisdictions create significant financial and regulatory barriers that hinder their ability to fully embrace environmental, social and governance and socially responsible investment strategies. These constraints limit investment actions related to pension savings, operating within a framework of prudence and loyalty to the benefit of the fund's beneficiaries. Unfortunately, this can act as an impediment to sustainable investment practices.

Conversely, pension fund fiduciaries who fail to consider or manage climate-related financial risks and opportunities, may find themselves personally liable for economic, reputational or organizational losses resulting from that failure. They may also have an obligation to disclose how they manage climate change financial risks and opportunities on an ongoing basis (Bauslaugh 2021).

Following the recommendations of the Task Force on Climate-related Financial Disclosures, most pension schemes are now publishing their objectives on reduction of greenhouse gas emissions in their annual reports as well as metrics on their performance to reach these objectives. For example, the Canada Pension Plan Investment Board has been publishing metrics on the carbon footprint of its investment portfolio in its annual report since 2019. Specifically, between 2019 and 2023, the Canada Pension Plan Investment Board investment portfolio on long-term capital ownership reduced its carbon footprint from 64 tonnes of CO₂ equivalent per million of Canadian dollars down to 46 (Government of Canada 2023; 2019). This shows how pensions funds can directly contribute to mitigation efforts.

Pension funds can also contribute to mitigation efforts through their investment strategies. One option is to use financial instruments that finance green projects and provide investors with regular or fixed income payments, such as green bonds. Such investments can help generate financing for the required structural transformation and address climate risks by connecting environmental projects with capital markets, thereby channelling more capital towards sustainable development (World Bank 2021).

Intergenerational equity: From being part of the problem to being part of the solution

Clearly, there are sound ethical and financial reasons for the "greening" of pensions funds to contribute to mitigation efforts and help finance a just transition. However, it would be necessary to monitor the actual impact of all the climate initiatives undertaken by pension funds to make sure that all these promising initiatives are not simply greenwashing.

Pension funds have a responsibility to disclose to their members their environmental, social and

governance conformity, as many workers and employers may be unaware of how their pensions contributions might impact the climate crisis. Social dialogue in the governance of funds is essential to make sure that income security in old age does not come at the expense of a viable and liveable planet.

Moreover, the greening of pension funds can be justified from an intergenerational equity vantage point. Current investment practice should not compromise the liveability of the planet for future generations who, without

mitigation action, will be saddled with a terribly degraded planet that cannot provide standards of living we enjoy today.

It is time for pensions funds to move from being net contributors to the climate crisis to being net mitigators. They can do this through divesting from fossil fuels in an orderly manner and seek authentically greener investment options. This is both rational and ethical.



It would be necessary to monitor the actual impact of all the climate initiatives undertaken by pension funds to make sure that all these promising initiatives are not simply greenwashing.



4.4 Social health protection: Towards universal health coverage

- The right to social health protection is not yet a universal reality. Despite laudable progress, barriers to healthcare access remain in the form of out-of-pocket health expenditure incurred by households, physical distance, limitations in the range, quality and acceptability of health services, long waiting times linked to shortages and unequal distribution of health and care workers, and opportunity costs such as lost working time.
- A legal framework analysis of 164 countries shows that 83.6 per cent of their populations have a right to access healthcare services for free or with limited co-payments. The proportion was less than two thirds in lowincome countries, providing a clear illustration of uneven legal coverage across income groups. Furthermore, some regions rely on voluntary mechanisms and/or employer liability, rather than mandatory or automatic mechanisms which are more robust in providing effective protection.
- Almost two thirds of the global population is effectively protected by a scheme. Coverage has stalled since 2020, showing important implementation gaps. Enhanced legal and effective protection data should be a priority for monitoring progress on coverage and adequacy. This necessary improvement includes the systematic collection of data disaggregated by sex, age, place of residence, disability, migratory status, income levels and socio-economic conditions to track progress on equity.
- Out-of-pocket expenditure on healthcare is increasing globally and pushed 1.3 billion people into poverty in 2019. Collective financing, broad risk pooling and rights-based entitlements are key conditions to support effective healthcare access for all in a shock-responsive manner. The principles provided by ILO standards are more relevant than ever on the road to universal health coverage. Ratification of ILO Conventions Nos 102 and 130 is a key marker of long-term commitment.
- Investing in the availability of quality healthcare services is crucial. This requires improved working conditions, social protection coverage and contractual modalities of millions of health and care workers. The COVID-19 pandemic further pushed workers out of the sector, jeopardizing any strategy to extend access to healthcare without hardship delivered by well-trained, supported and motivated staff.
- Stronger linkages and better coordination between access to medical care and income security are urgently needed to address key determinants of health. The climate crisis is directly impacting people's health, while also exacerbating existing socio-economic inequalities, which act as powerful determinants of health equity. Health and well-being should not be the privilege of the few, and the inequalities triggered by the climate crisis call for urgent investments.



4.4.1 The crucial role of social health protection for a just transition

Climate change impacts human health (see Chapter 2) and the financial capacities of households to cope with increased healthcare expenditure. Thus, robust, adequately prepared and equipped social health protection systems are needed (ILO 2024f). Social health protection includes a series of public or publicly organized and mandated private measures to achieve effective access to affordable healthcare services and adequate sickness benefits for all (see section 4.2.3). Both are supportive of the objective of universal health coverage. The second political declaration of the high-level meeting on universal health coverage, adopted by the United Nations General Assembly in September 2023, recognizes the fundamental importance of "social protection mechanisms ... to ensure universal and equitable access to quality health services without financial hardship for all people" (UN 2023c). The SDG targets on universal health coverage (3.8) and universal social protection (1.3), are synergetic priority measures aimed at achieving a healthy and dignified life for all. The lack of affordable quality healthcare risks creating both poor health and impoverishment, impacting the most vulnerable. Consequently, the principle of universality of coverage was underlined in social security standards early on (box 4.19).

Box 4.19 ILO standards on access to healthcare without hardship

Universality and coverage extension: In 1944, the Medical Care Recommendation (No. 69) introduced the principle of universality, setting out that access to healthcare services without hardship should be secured for all members of the community, "whether or not they are gainfully occupied" (Para. 8).¹

Population coverage: As a priority, coverage should be extended to the entire population across four basic guarantees, one of which is essential healthcare without hardship as per ILO Social Protection Floors Recommendation, 2012 (No. 202) (ILO 2021a; 2017b; 2019f).

Adequacy of coverage: Countries should progressively improve the comprehensiveness and level of healthcare benefits, ensuring higher protection. ILO standards establish a minimum level of benefit to be guaranteed by law. The benefit level encompasses two dimensions:

- (a) the range of healthcare services effectively accessible: while social protection floors should at least include the provision of "essential healthcare" as defined nationally (including free prenatal and postnatal care for the most vulnerable), countries should progressively move towards greater protection for all, as reflected in Conventions Nos 102 and 130, which require the provision of a comprehensive range of services in national law. To be considered adequate, in line with human rights compliance monitoring mechanisms, health services need to meet the criteria of availability, accessibility, acceptability and quality (Recommendation No. 202, Para. 5(a)) (UN 2000b); and
- (b) the financial protection against the costs of such services: ILO instruments provide legal entitlements to healthcare "without hardship". Out-of-pocket payments should not be a primary source for financing healthcare systems. The rules regarding cost-sharing must be designed to avoid hardship, with no or limited co-payments and free maternity care.

Financing and institutional arrangements: ILO standards promote collectively financed mechanisms, recognizing recourse to a range of taxes, and contributions made by workers, employers and governments. Likewise, the standards recognize a range of institutional arrangements, namely national health services, by which public services deliver affordable health interventions, and national health insurance, through which an autonomous public entity collects revenues from different sources to purchase health services, from public providers only, from both public and private providers or from any combination of such institutional arrangements.

¹ The right to health was subsequently formally enunciated by human rights instruments: the Universal Declaration of Human Rights, 1948 and Article 12 of the International Covenant on Economic, Social and Cultural Rights. The human rights to health and social security are understood as the obligation to guarantee universal effective access to adequate protection (UN 2008; 2019b). Social health protection is rooted in this framework and represents the optimal mechanism to substantiate these human rights (ILO 2020j).

The climate crisis engenders changes that directly and indirectly impact human health, including adverse extreme weather events (affecting mortality and morbidity), greater suitability for communicable diseases, vector- and water-borne diseases and the emergence of new diseases and health security threats such as pandemics, as well as their interplay with non-communicable diseases (Romanello et al. 2021). Furthermore, indirect impacts include disruption to livelihoods, food systems and human mobility, and the overall intensification of socio-economic inequalities (Romanello et al. 2023), which act as determinants of health equity.

Responding to the climate crisis requires both access to healthcare without hardship and income security as mutually reinforcing instruments to

Advancing social health protection in coordination with other life-cycle social protection guarantees and health system strengthening efforts, creates the opportunity to further address the social determinants of health. tackle inequality and promote greater human health and wellbeing that are respectful of the planet. Advancing social health protection in coordination with other life-cycle social protection guarantees and health system strengthening efforts, creates the opportunity to further address the social determinants of health (Commission on Social Determinants of Health 2008; WHO 2019b). Such coordination establishes a common agenda to mobilize fiscal space for health and social protection, and crucially ensures no one is left behind.

The cost of ignoring these trends is anticipated to be far higher than acting now (Romanello et al. 2023). Institutions in charge of social

health protection need to act now to continue to meet population needs and to anticipate covariate risks that impact expenditure and operations (see figure 4.40), including:

ensuring universal health coverage by rapidly extending social health protection coverage to all, throughout the life cycle, with a focus on uncovered groups most impacted by climate change;

- reviewing the design of social health protection benefits to ensure their responsiveness to the changing burden of disease induced by climate change, and to maximize health and climate action;
- adapting the management and administration of schemes to: (a) minimize their greenhouse gas emissions; (b) implement purchasing strategies that incentivize greenhouse gas emission reduction and non-renewable waste from health and social care service providers; and (c) adapt registration and benefit delivery systems to persons facing adverse climate events and/or displacement;
- securing robust and sustainable financing adapted to the changing circumstances of social health protection and adequately coordinated with health, climate and disaster risk management policies and other social protection benefits; and
- closing the research gap on strategies and practices that social health protection institutions have successfully established to address those challenges.

Monitoring progress in social health protection requires considering population coverage and benefit adequacy (that is, the range of health services covered and the extent of financial protection), both in law and in practice. The SDG framework fosters additional data collection and provides proxies for such dimensions relating to effective coverage (WHO and World Bank 2020). Nevertheless, enhanced data are needed - particularly on legal coverage, public awareness and care quality - as they are all still poorly or unsystematically captured (Kruk et al. 2018). The complexity and interdependency of these dimensions, and lack of systematic data collection make monitoring social health protection difficult. Available indicators and important data gaps are discussed below.

Institutions in charge of social health protection need to act now to continue to meet population needs and to anticipate covariate risks that impact expenditure and operations.

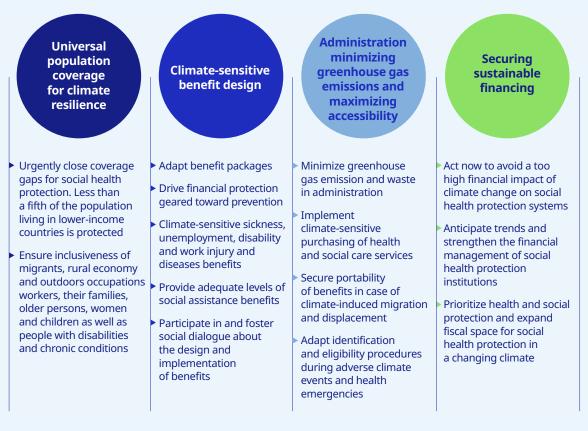


Figure 4.40 Social health protection for climate action

Source: ILO (forthcoming d).

4.4.2 Population coverage

Legal coverage

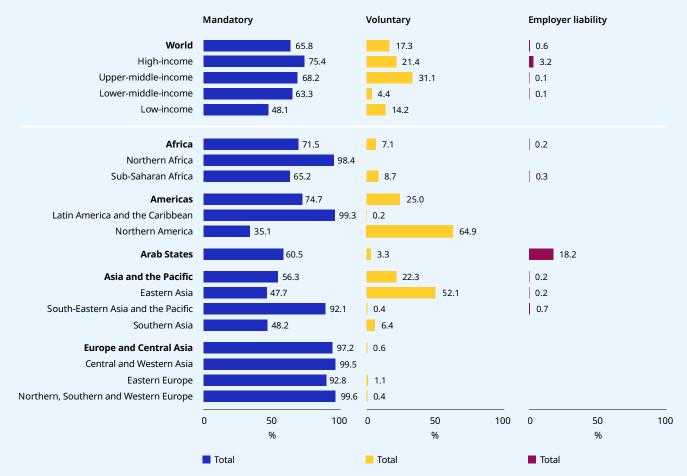
Social health protection is anchored in the human rights framework and entitlements to it must be enshrined in national legislation. Based on a legal review in 164 countries, 83.6 per cent of the global population is legally entitled to access healthcare services without hardship (see figure 4.41). Therefore, almost one in five individuals live in countries that do not legally recognize such entitlements. This proportion is twice as high in low-income countries and concerns only slightly more than half of Southern Asia's population. Interestingly, several countries, in particular in Africa, expanded the scope of legal coverage in the last decade. Some countries, such as Comoros, Côte d'Ivoire, Morocco and Sierra Leone materialized their commitment through the recent ratification of Convention No. 102, including the part on medical care provisions.

In some regions of the world, countries rely on voluntary rather than mandatory provision for some population groups. For instance, this concerns two thirds of Northern America's population and half of Eastern Asia's. In the United States, the workforce is largely left to access health insurance through voluntary provision, despite reforms. Countries with such guarantees in the law - as well as those where mandatory or automatic coverage is not effectively enforced - face difficulties in

implementing universal population coverage in practice for several reasons, including a lack of adequate financing mechanisms and awareness (ILO 2021d). This can lead to either requesting contributions from protected persons that are

Based on a legal review in 164 countries, 83.6 per cent of the global population is legally entitled to access healthcare services without hardship.

Figure 4.41 Share of the population legally entitled to access healthcare services without hardship, by region, subregion, income level and type of mechanism, 2023 (percentage)



Note: Global and regional aggregates are weighted by population.

Sources: ILO estimates, World Social Protection Database, based on the Social Security Inquiry; ISSA Social Security Programs Throughout the World; ILOSTAT; national sources.

incommensurate with their financial means⁵⁵ and/or to reducing benefit adequacy through less comprehensive benefit backages, lower cost coverage and/or low-quality service. This effectively makes them unattractive or inaccessible to right-holders (ILO 2021d).

Some countries place an obligation on the employer to either pay for the healthcare costs incurred by their employees or contract voluntary private insurance on their behalf. In the Arab States, the high proportion of the population legally covered through this mechanism – almost one in five persons – mainly comprises migrant workers (ILO 2023s; 2023r). These workers are typically engaged in sectors that are poorly protected from both labour and migratory standpoints (ILO, ISSA and ITCILO 2021). As evidenced throughout this chapter, employer liability is not a robust substitute for social protection mechanisms. When it comes to

⁵⁵ Voluntary schemes typically lead to adverse selection and, therefore, higher health expenditures to be borne by social health protection schemes. In turn, schemes may request higher contribution rates for persons to be protected or reduce benefit adequacy through less comprehensive benefit backages, lower cost coverage and/or low quality of service, making them unattractive or inaccessible to right-holders in practice.

healthcare expenditure, such mechanisms play a small role globally and do not allow broad risk pooling (WHO 2021). Furthermore, employer liability provisions may reinforce asymmetric contractual arrangements for migrant workers (ILO 2020b; 2023r).

A greater effort is needed to translate international commitments to human rights and international social security standards into national legislation. Inequalities between country income groups and regions in this respect need to be urgently addressed. In some contexts of extreme fragility, international protection has been awarded to populations under the mandate of the Refugee Convention, 1951. The climate crisis is likely to create conflicts over resources which may sometimes be of a protracted nature. Strong national legal frameworks aligned with international instruments are thus needed more than ever. They hold the potential to help bridge the humanitarian-development nexus, as they encompass solutions adapted to the entire migration cycle (see section 2.1.2).

Effective protection and awareness of entitlements

For individuals to effectively access health services without hardship when needed, it is important for such access to be considered a right and to be embedded in the legal framework. It is equally important for individuals to be aware of their legal entitlements and the modalities to avail themselves of such entitlements. A proxy indicator is the share of population protected by a social health protection scheme, based on a combination of administrative and survey data (see Annex 2). In striving for universal protection, a large number of countries across all income levels have made laudable progress in extending the effective reach of social health protection mechanisms over the past decades, resulting in 60 per cent of the world's population being protected by a scheme (figure 4.42).

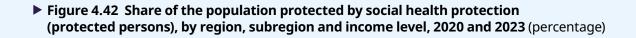
The global coverage rate has stalled, with almost no progress since 2020. Coverage varies strongly across economic development levels, showing stark inequalities and an uneven trend between 2020 and 2023 (figure 4.42). Coverage in low-income countries even decreased

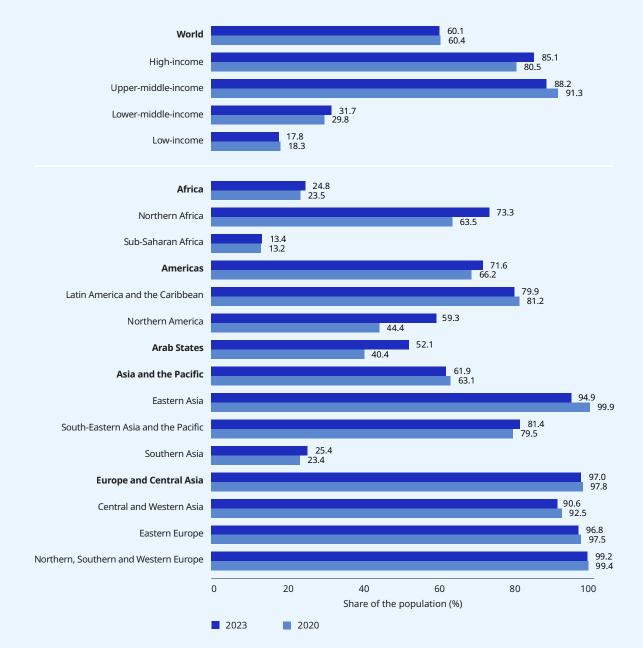


The global coverage rate has stalled, with almost no progress since 2020.

slightly. Therefore, more than four in five persons in low-income countries are left unprotected. Slight progress in high-income countries was driven by the implementation and progressive take-up of the amendments to the Affordable Care Act adopted in the United States. While coverage slightly increased in lower-middle-income countries, there was a setback in the uppermiddle-income category, driven by a decrease in coverage in China, where it remains voluntary for some population groups. Southern Asia and sub-Saharan Africa remain far below global averages. Low- and lower-middle-income countries, as well as sub-Saharan Africa and Southern Asia, experience the largest gaps between legal coverage and effective protection, illustrating difficulties in enforcing legal frameworks and in giving effect to people's rights in practice.

A better measure of effective coverage must include within-country inequalities across different population groups. Indeed, coverage gaps tend to mirror social, economic and geographical inequalities. For instance, analysis of available data for 58 countries shows that a lack of money to pay for health services is invoked as a reason for forgoing care among women aged 15 to 49 across the household income spectrum. The pattern follows a clear social gradient, with over 65 per cent of women in the lowest income quintile invoking the same explanation, while almost 30 per cent invoke it in the richest quintile (WHO and World Bank 2023). Distance to a health facility was also invoked by almost half of the rural women surveyed, while having to take transportation was invoked for 40 per cent of them (WHO and World Bank 2023). Upholding the right to social health protection is therefore of utmost importance in countries' endeavours to address health-related gender inequality.





Note: Based on data collected for 127 countries and territories representing over 90 per cent of the world's population. Regional estimates are weighted by the total population. The figure represents the best estimate of people protected by a healthcare scheme for their primary coverage. Mechanisms include: national health insurance; social health insurance mandated by the State (including subsidized coverage for the poor); national healthcare services guaranteed for free or with small co-payments; and other programmes (such as user fee waivers and vouchers). For primary coverage, 202 schemes were identified and included. This is substantially more than in 2020. Therefore, in order to generate trends, the 2020 estimates were recalculated, including the new countries and schemes for which data points are available in both periods. Only public or publicly mandated privately administered primary healthcare schemes were included. Supplementary public and private programmes were not included.

Source: ILO estimates, <u>World Social Protection Database</u>, based on the <u>Social Security Inquiry</u>; and OECD <u>Health</u> <u>Statistics 2023</u>; national administrative data published in official reports; information from regular national surveys of target populations on awareness of rights.

What creates gaps in population coverage?

Gaps in population coverage can be rooted in legal provisions, implementation and, most often, a combination of both, compounded by lack of adequate financial resources. Such gaps largely overlap and reinforce existing socio-economic inequalities. Social health protection policies should aim primarily at addressing these gaps, levelling the playing field with regard to financial protection when accessing healthcare.

Eligibility restrictions

Employment or income status

In some countries, especially in sub-Saharan Africa and Southern Asia, legal frameworks still exclude some population groups based on employment or income status. Provisions often exist for employees in the formal sector (or sometimes only civil servants) and for the poor and/or children under a certain age threshold, but not for the entire population. For instance, in India, several public schemes cover different categories of the population: civil servants, railway personnel, and military and private sector salaried workers are mandatorily covered by different schemes. The population below the poverty line is registered in the PM-JAY scheme, while the rest of the population is left without public options in many states (ILO 2021d).

Even when legal provisions exist, countries that rely largely on voluntary legal provisions, such as the United States, also have greater difficulties in making progress in practice. Among the countries that rely on voluntary mechanisms in the law or in practice, most only do so for specific groups, often based on employment status, and often excluding some workers in temporary, part-time and selfemployment (ILO 2021d).

Contribution or premium payment by the individual

International social security standards promote collectively financed mechanisms, in particular taxes, and social contributions made by workers, employers and governments. Scheme-level data indicate that most countries rely on a diversity of financing mechanisms, and that both social contributions and taxes play a strong role in financing social health protection. While it is advisable to combine various sources of funding to ensure the maximum allocation of public resources for the population to access health services without hardship, it is crucial that financing arrangements should not create barriers to eligibility. International social security standards recognize the principle of universality, stipulating that access to healthcare services without hardship should be secured for all, "whether or not they are gainfully occupied" (ILO Recommendation No. 69). Countries wishing to use social security contributions or regulated insurance premiums must put in place non-contributory mechanisms that guarantee mandatory coverage for all.

It is equally important that countries wishing to collect social security contributions or regulated insurance premiums as part of their social health financing mix (a) consider the needs of workers in diverse employment situations and (b) avoid putting the burden of contributions solely on households, which would impact disproportionately low-income earners. Contribution levels need to be based on actual ability to contribute and be part of a wider financing mix that avoids regressive taxation (see section 3.4.3).

Migration status

Eligibility for social health protection is often restricted for non-nationals, in law or in practice. This is of growing public health concern, since human mobility, whether voluntary or forced, within or across countries, is happening on an unprecedented scale and is anticipated to grow with climate change (UNHCR 2023; IOM 2023).

It is therefore imperative to extend social health protection entitlements to non-nationals based on equality of treatment. It is also necessary to ensure the portability of healthcare entitlements for migrants, including refugees, and to provide adapted services (see section 2.1.2) (IOM 2019; Orcutt et al. 2020; ILO, ISSA and ITCILO 2021). Some countries are making efforts towards the inclusion of refugees in



Eligibility for social health protection is often restricted for non-nationals, in law or in practice.

their social health protection system, despite numerous challenges (see box 2.9). This tends to be more difficult for countries with large influxes and/or weak or nascent social health protection systems with low coverage and low institutional capacities (ILO and UNHCR 2020).

Box 4.20 Efforts to monitor the satisfaction of public health insurance beneficiaries in India

The Employees' State Insurance Corporation, which is one of the biggest public health insurance schemes in India, conducted a study capturing the health-seeking behaviour of protected persons and registered employers as well as their awareness and attitude. The findings underscore the differential experiences and perceptions of beneficiaries in the diverse implementation contexts of four states. The results highlight that, while the Employee State Insurance Corporation beneficiaries appreciate the extensive benefit package, they would gain from stronger awareness of their entitlements. An important area of focus for increasing overall service utilization would be the provision of primary healthcare services. The scheme can contribute in a larger way to universal health coverage by increasing outpatient and inpatient healthcare service utilization at its facilities. One option, as the study indicates, would be to actively track and improve the levels of beneficiary satisfaction.

Source: ILO (2022a).

Low awareness of rights

Raising public awareness of rights and entitlements, combined with efforts to improve health literacy, is essential for empowering people to demand healthcare services. Entitlements can only play a role in improving quality, accountability and trust in the system when people understand them and how to avail themselves of them. Institutions in charge of social health protection can and should contribute to this effort (see box 4.20). Such steps should coincide with interventions to improve benefit adequacy (see section 4.4.3), scheme accountability and the associated perceptions of fairness and trust in the system (ILO 2021h).

Moreover, institutions in charge of social health protection have a fundamental duty to ensure accessibility and inclusivity by adapting information on rights and entitlements for vulnerable population groups, such as persons with disabilities, ethnic minorities and the illiterate. This adaptation involves employing various communication channels, formats and languages to effectively reach these communities. By doing so, these schemes can empower individuals within these groups to better understand and exercise their entitlements, thereby promoting equitable access to healthcare services. Ultimately, this proactive approach fosters a more inclusive and fair social health protection system for all.

Unattractiveness due to complex administrative procedures, perception of low quality of healthcare services, or a combination of those factors

Geographic distance, complex and lengthy administrative procedures, cultural differences, administrative illiteracy, issues related to identification documents, can be important barriers. They disproportionately affect rural populations and vulnerable population groups such as persons in precarious employment and migrants (ILO 2021d).

When investments in the supply of healthcare services that are included in social health protection mechanisms (usually public healthcare providers, and sometimes also private ones) are insufficient and affect users' perceptions of quality, the incentive for people to use such mechanisms is low. Lack of geographical accessibility, lack of perceived quality or ill-adapted services are all elements of benefit adequacy that strongly impact the attractiveness and use of social health protection. Consequently, strategies to reduce the financial barriers of access cannot be devised without also considering the need for health system strengthening.

4.4.3 Adequacy

Legal entitlements as well as registration or regular monitoring of entitlement awareness presented in the previous section do not automatically translate into effective access to available, accessible, acceptable and quality healthcare services at times of need. Many barriers can remain, compromising adequacy:

- The availability, accessibility, acceptability and quality of healthcare services may be poor, not allowing effective access in practice or access at a level that would allow improvements in health status.
- Benefit packages may be limited, covering few services and leaving patients to cover high outof-pocket expenses.
- High official co-payments or informal payments may be requested, leaving an important share of the total costs of care to be borne by patients.

A systematic way of collecting data is urgently needed to understand the extent to which core elements of adequacy (benefit packages, costs covered and network of providers) are guaranteed by law. Nonetheless, data available for SDG indicators 3.8.1 and 3.8.2 provide some insights into the effective coverage for these aspects, as displayed below. Improving the national and global monitoring of quality of care and patient experience indicators is equally important (Kruk et al. 2018).

Legal entitlements to adequate healthcare services and financial protection

Given the importance of the range of services and level of benefit offered for social health protection to be effective, their grounding in the national legal framework should be a matter of priority to guarantee people's rights to health and social security. Bridging the current data gap for these dimensions is urgently needed. While some systematic information collection exists for European countries, it is not the case for other countries and regions (see Annex 2).

When legal frameworks provide differentiated entitlements in terms of benefit packages, cost coverage and/or dedicated network of healthcare providers, they can reinforce inequalities and fail to contribute to social cohesion. Some countries have made progress in defining a unique benefit package to be accessed



For social health protection mechanisms to maximize their contribution to health equity, the careful design of legal entitlements is crucial.

by their entire population without co-payment or with low co-payments for all in a unified network of service providers. Other countries, however, have not yet overcome a segmentation in entitlements embedded in their legal frameworks. For instance, a review of legal frameworks for social health protection in El Salvador, Guatemala and Honduras showed that, despite legal entitlements for the entire population, the nature of those entitlements in terms of the range of services covered, and/or the network of service providers from which to avail services, is different across population groups (ILO, forthcoming c). For social health protection mechanisms to maximize their contribution to health equity, the careful design of legal entitlements is crucial. When people are entitled to access the same services in the same facilities, a clear pathway towards greater equity is laid out. This needs to be done in a way that levels the playing field towards higher levels of protection and avoids levelling down benefits.

Effective service coverage

Despite the adoption of a dedicated SDG on health and well-being, more than four decades after the Declaration of Alma-Ata on primary healthcare, over half of the world's population do not receive essential health services when they need them, with large disparities across countries (WHO and World Bank 2023). Though more data is needed to analyse the situation across a wider range of services, the monitoring provided by SDG indicator 3.8.1⁵⁶ clearly shows that the

⁵⁶ It computes 14 tracer indicators for specific medical interventions across four clusters, including reproductive, maternal, newborn and child health interventions as well as interventions across communicable and non-communicable diseases, and service capacity and access (WHO and World Bank 2023).

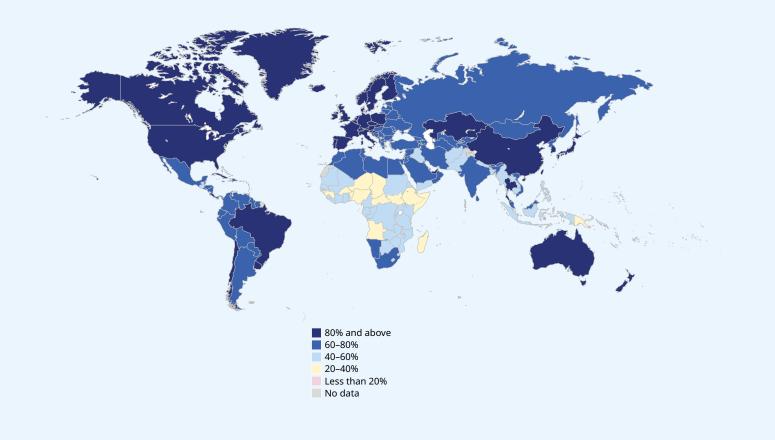


Figure 4.43 SDG 3.8.1 Universal Health Coverage Service Coverage Index – Average coverage of essential health services, 2021 or latest year available (percentage)

Boundaries shown do not imply endorsement or acceptance by the ILO. <u>See full ILO disclaimer</u>. Source: Based on data from the WHO <u>Global Health Observatory</u>.

basic package guaranteed by ILO standards⁵⁷ is inaccessible for the majority of the world's population (figure 4.43).

The Service Coverage Index, measured by SDG 3.8.1, increased as essential interventions were made accessible to an estimated 10 additional percentage points of the global population over the past decades. Yet, progress is largely due to improved access to services related to communicable diseases, and particularly

greater availability of HIV anti-retroviral treatment (WHO and World Bank 2023). The related health spending tends to rely on international sources for a number of low-income countries, meaning that the progress achieved may be threatened by decreasing international aid budgets. Efforts towards the integration of single-disease programmes within existing health schemes and systems would ensure sustainability of these health gains.

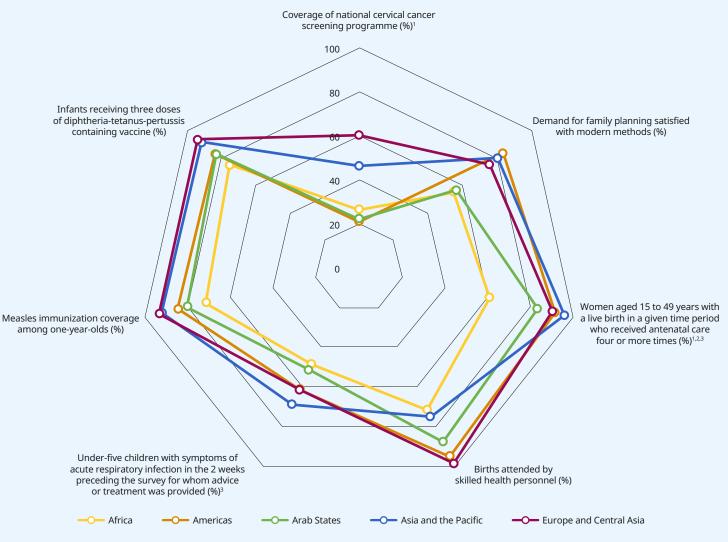
⁵⁷ Convention No. 102 provides for care of a preventive and curative nature, and stipulates that health benefits should comprise at least a basic set of interventions, including pre- and postnatal care and at least general practitioner care, including: domiciliary visiting; specialist care at hospitals for inpatients and outpatients, and such specialist care as may be available outside hospitals; essential pharmaceutical supplies, as prescribed by medical or other qualified practitioners; hospitalization where necessary; and pre- and postnatal care for pregnancy and childbirth and their consequences, either by medical practitioners or by qualified midwives, and hospitalization where necessary (ILO 2020j). Convention No. 130 goes further, including dental care and rehabilitation services (ILO 2020j).

Analysis shows that progress in the other subindices was slower and even stagnated after 2015 (WHO and World Bank 2023). Remaining service coverage deficits are unevenly distributed across geographical locations, income levels, population groups and types of health interventions (Lozano et al. 2020). For instance, deficits are particularly severe for interventions addressing non-communicable diseases, while there is a shift towards these conditions in the global burden of disease due to lifestyle changes and population ageing, which is worsened by climate change effects (Vos et al. 2020; Tessier, De Wulf and Momose 2022). Similarly, progress in interventions that are considered particularly cost-effective, such as reproductive, maternal,

newborn and child health, have been both slow and uneven across and within countries (see section 4.2.2).

Disaggregated data (by sex, age, location, migration status and income) is needed to identify more thoroughly the population groups left behind and devise inclusive policies (Lozano et al. 2020). Yet, recent analysis already illuminates the importance of the social gradient and the array of social, economic and geographic determinants of access to reproductive, maternal, newborn and child health services (see section 4.2.2). Important inequities in access remain both across regions (see figure 4.44) and wealth quintiles (see figure 4.45). More efforts are needed to ensure

Figure 4.44 Unequal advances in service coverage for reproductive, maternal, newborn and child health services, by region and type of service, 2023 or latest available year (percentage)



Notes: To be interpreted with caution – estimates based on reported data coverage below 40 per cent of the population: ¹ Africa and Arab States; ² Europe and Central Asia; ³ Asia and the Pacific, and Europe and Central Asia. Regional estimates are weighted by total population.

Source: ILO estimates based on data from the WHO Global Health Observatory.

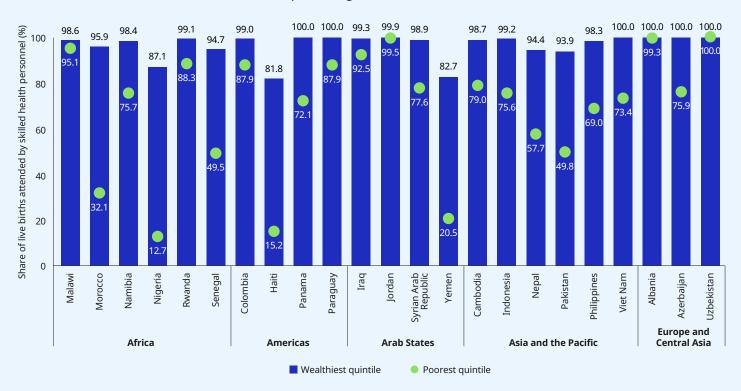


Figure 4.45 Inequities in access to maternal healthcare services: Share of live births attended by skilled health personnel by wealth quintile, selected countries by region, 2019 or latest available data (percentage)

Source: ILO estimates based on data from the WHO Global Health Observatory.

access to free, quality maternity care in line with ILO standards (see box 4.19), and to expand maternity cash benefits (see section 4.2.2). Access to both quality healthcare and income security is

More efforts are needed to ensure access to free, quality maternity care in line with ILO standards, and to expand maternity cash benefits. essential to ensure a healthy pregnancy, childbirth and post-partum period (Shaw et al. 2016). This reduces maternal and infant mortality, and ensures that pregnancy and childbirth do not jeopardize women's rights, including their right to work and rights at work (see box 4.21).

Alongside medicine and medical devices, a central component of the availability of healthcare services is investment in infrastructure

and equipment, and the recruitment and retention of a qualified health workforce (ILO 2022k). This applies for both public and private health sectors (section 4.3.3 and box 4.22). Important inequalities persist across countries and regions, and between rural and urban areas when it comes to the availability of such physical and human resources (see figure 4.46).

Ensuring available and quality care requires decent jobs creation in the health sector, which faced a deficit of ten million workers before the COVID-19 pandemic, projected to further increase by 2030 (High-Level Commission on Health Employment and Economic Growth 2016; WHO 2022b). A large number of these jobs are needed in nursing and midwifery. Nurses and midwives play a key role in improving service coverage and are central to progress in reproductive, maternal, newborn and child health service coverage, alongside community health workers. These workers often face the most severe decent work deficits, including higher risks of violence and harassment, as indicated in Recommendation No. 206 (ILO 2022k). Hiring, training and retaining nurses and midwives, including in rural areas, is a key building

Box 4.21 Strategies to reduce the cost of maternity care in Asia

Some countries exempt maternal or child healthcare services from co-payments, such as the Lao People's Democratic Republic, Malaysia, the Republic of Korea and Viet Nam. In Malaysia, the majority of maternal health services are exempted from user fees that apply to other services. Success in reproductive, maternal, newborn and child health outcomes for Malaysia is attributed in part to this policy. A similar strategy has been adopted in Brunei Darussalam with comparable success.

Similarly, the Philippines' National Safe Motherhood initiative has been successful at ensuring availability of services and PhilHealth coverage for reproductive, maternal, newborn and child health services. Under this programme, all women about to give birth are automatically enrolled in PhilHealth through point-of-care enrolment at a health facility (Government of the Philippines 2015).

Some countries have established co-payment exemptions for specific groups. Often policies that exempt or further reduce co-payment amounts for reproductive, maternal, newborn and child healthcare are embedded within broader exemption policies. Japan has a lower co-payment rate of 20 per cent for schoolchildren in the national health insurance scheme, while the Lao People's Democratic Republic's national health insurance scheme exempts pregnant women and children under 5 years old from copayments.

Some countries have set up additional cash support programmes. Subnational maternal health voucher schemes in Bangladesh and Myanmar have been designed to ensure that lower-income mothers and children receive the most essential reproductive, maternal, newborn and child health services. This has improved reproductive, maternal, newborn and child health indicators and reduced out-of-pocket health spending. However, it has also substantially increased caesarean section delivery in Bangladesh. In Singapore, efforts were made to include complicated deliveries within the benefit package of MediShield Life in 2019, though it remains subject to co-payments (Chen 2023). With a view to ensuring the greater ability of families to cover health and other costs related to childbirth, the Central Provident Fund Board put in place a cash payment for newborns.

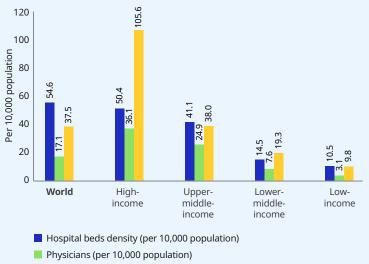
Source: ILO (2021d).

Box 4.22 Private health services

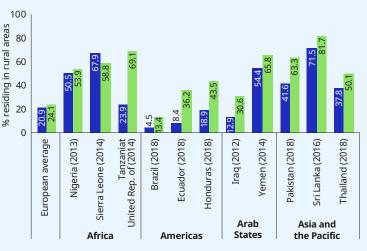
The provision of health services may be realized by public or private entities and, in practice, health systems are often pluralistic, combining both (Mackintosh et al. 2016). In some countries, private sector involvement can allow additional investments in infrastructure and service expansion. Nevertheless, a strong regulatory role of ministries of health is essential to ensure quality care and equitable access to health as a public good for all. It is also important that social health protection agencies tasked with purchasing health services closely align their incentives with the national vision for service provision. Where a large share of health services are provided by the private sector (including health interventions essential to the guaranteed benefit package), efforts should be deployed to ensure financial protection. Indeed, evidence from Bangladesh, India and Nigeria indicates that dominant private sector provision without appropriate social health protection mechanisms often goes hand in hand with high out-of-pocket expenditure on health (Mackintosh et al. 2016; Islam, Akhter and Islam 2018).

Figure 4.46 Deficits in staff and infrastructure at the heart of inequalities in access to healthcare, 2022 or latest available year





Nurses and midwives (per 10,000 population)

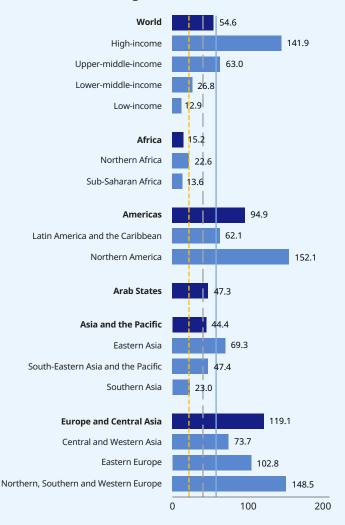


c) Inequities in the availability of health workers in urban and rural areas, selected countries

Health and social care workforce in rural areas (as % of total)

Population in rural areas (as % of total)

b) Skilled health staff density against three thresholds across regions



Health professionals (physicians, nurses and midwives) per capita

---- Threshold World Health Report 2006 – 22.8

– – Threshold ILO – 41.1

 Threshold WHO/United States Agency for International Development – 59.4

Notes: More details on the use of those reference points can be found in GHWA and WHO (2013). The European average represents 28 countries for which data were available (see Annex 2). See also: ILO (2023v). Regional and income level estimates are weighted by total population.

Source: ILO Labour Force Surveys, ILO-OECD-WHO Working for Health Programme and the WHO World Health Observatory.

block to availability, accessibility, acceptability and quality of care in line with ILO standards (ILO 2018a). Nurses and midwives account for nearly half the global health workforce, and are predominantly women (WHO 2019a). Investing in improving their working conditions, in line with the Medical Care Recommendation (No. 69), the Nursing Personnel Convention, 1977 (No. 149) and its Recommendation (No. 157), is urgent and

Nurses and midwives account for nearly half the global health workforce, and are predominantly women. requires adopting a gender lens to also ensure the delivery of non-stigmatizing and womancentred health services (ILO 2022k). The ILO in collaboration with the OECD and the WHO, through the Working for Health (W4H) Programme, supports the implementation of the recommendations of the United Nations Secretary-General's High-Level Commission on Health

Employment and Economic Growth (2016) and assists countries in scaling up health workforce investments.

The COVID-19 pandemic highlighted the essential role of these front-line care workers and the need to secure decent work for them, including social protection and occupational safety and health (ILO 2020a; 2023x). Some health and care workers still lack social protection themselves, yet paradoxically are delivering every day on the promise for universal health coverage (ILO 2022k). In some subsectors, such as long-term care services, issues of attractiveness and retention were highlighted by the COVID-19 pandemic in several countries with ageing populations (Tessier, De Wulf, and Momose 2022).

Financial protection

One billion people worldwide faced catastrophic health spending in 2019, defined as out-of-pocket expenditure exceeding 10 per cent of total yearly household consumption or income. This posed a major poverty risk and significant disparities across regions (see figure 4.47) and country income groups remain (WHO and World Bank 2023). Globally, the share of the global population who faced catastrophic health expenditures – exceeding 10 per cent of household income or consumption – has risen by almost 4 percentage points between 2000 and 2022, with a particularly pronounced increase in middle-income countries (WHO and World Bank 2023). At the same time, low catastrophic health spending and, more broadly, low out-of-pocket expenditure could stem from foregone care (due to insufficient service coverage and/or additional barriers) rather than being the result of improved financial protection. This reinforces the need to analyse all dimensions of coverage in tandem (ILO 2021d).

Inequality also prevails within countries. Available survey data shows important disparities across age of the household head and household age composition more generally. Households headed by older persons and households composed only of older persons have a significantly higher incidence of catastrophic health spending (WHO and World Bank 2023). Various factors are at play,

including both higher needs for acute and potentially highcost care in the last years of life, and lower income in old age. Thus, it is crucial to have social health protection, an adequate old-age pension and longterm care without hardship, although important gaps remain in this respect (Tessier, De Wulf and Momose 2022).

Households globally bear a significant share of healthcare costs, owing to a combination of factors operating at the country level:

- The absence of universal entitlements to social health protection and/or their ineffective implementation pushes the costs of healthcare onto households, creating incentives to delay or forgo necessary care, and directly impacting health outcomes. Low public expenditure on health correlates with higher rates of impoverishment due to out-of-pocket expenses (figure 4.48).
- Limited benefit packages (covering few services) push individuals to pay out-ofpocket expenses for any other services they require. This is increasingly common in emerging economies where service coverage has increased since 2000, but social health protection policies lag in updating their benefit packages. Benefit packages must be adapted to population needs as well as developments in the disease burden and in service availability, and must therefore be periodically updated in line with international social security standards.
- Limited benefit levels (with remaining official user fees and/or co-payments) or the existence

Households headed by older persons and households composed only of older persons have a significantly higher incidence of catastrophic health spending.

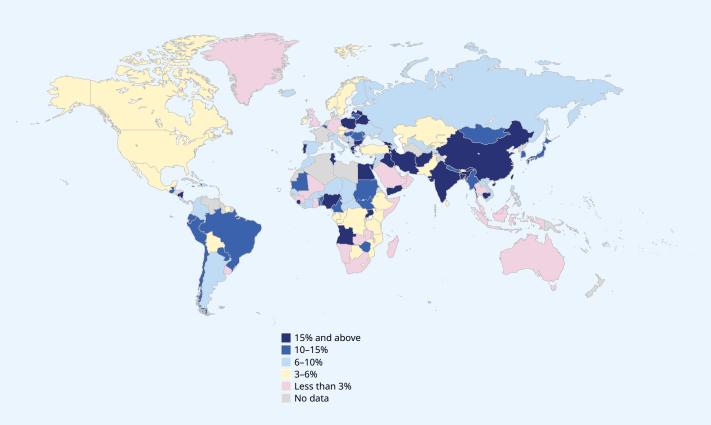


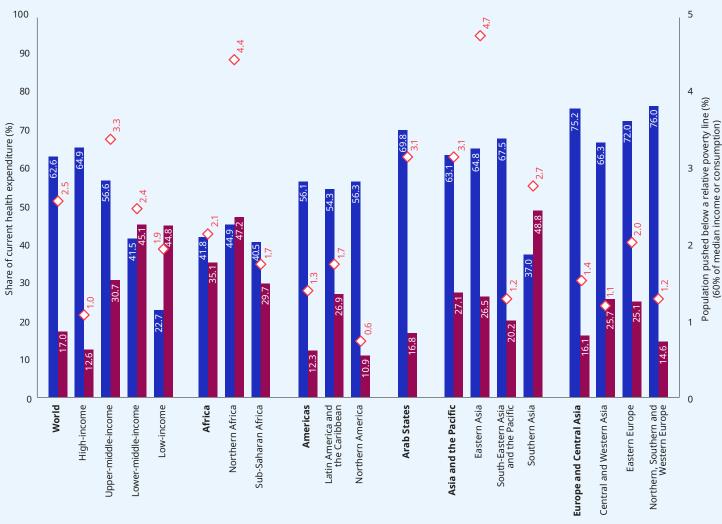
Figure 4.47 SDG 3.8.2 Incidence of catastrophic health spending (at more than 10 per cent of household income or consumption), 2021 or latest available year

Boundaries shown do not imply endorsement or acceptance by the ILO. <u>See full ILO disclaimer</u>. Source: Based on data from the WHO <u>Global Health Observatory</u>.

of high informal payments represent a significant share of the total cost of care borne by patients. Therefore, even non-catastrophic health expenditure has a significant impoverishing effect (WHO and World Bank 2023). Convention No. 102 stipulates that benefit levels need to be periodically reviewed to stay responsive to population needs.

Since 2000, the share of the global population pushed to the relative poverty line has continuously increased, accounting for almost 1.3 million people in 2019 (WHO and World Bank 2023). Yet, these impoverishing effects are unevenly felt across geographical locations and household composition. Indeed, analysis shows that this indicator's incidence is three times higher in rural areas than in urban areas, and highest in households that are multigenerational or mostly composed of youth (WHO and World Bank 2023). These realities underline the relevance of guaranteeing the right to social health protection for all as an urgent priority.

It is noteworthy that out-of-pocket spending on health does not include the costs of care seeking (such as transportation costs and lost working time) or lost income due to incapacity to work while convalescing (WHO and World Bank 2023). Therefore, when considering these costs, the impoverishment impact is likely to be much higher. This was demonstrated, for instance, by tuberculosis patient cost surveys supported by the WHO (WHO 2017; 2023a). This evidence led to the integration of social protection in the global strategy to end tuberculosis and the development of guidance in that regard by the WHO and the ILO (WHO 2015a; WHO and ILO 2024). Figure 4.48 Impoverishment due to out-of-pocket healthcare expenses: Share of the population pushed below a relative poverty line (60 per cent of income or consumption) and share of general government and out-of-pocket expenditure in total health expenditure, by region, subregion and income level, 2021 or latest available year (percentage)



Domestic general government health expenditure as share of current health expenditure (%)

Out-of-pocket expenditure as share of current health expenditure (%)

Impoverishment due to OOP expenditure – share of population pushed below a relative poverty line (%) (60% of median income or consumption)

Note: Global and regional estimates are weighted by current health expenditure for domestic general government health expenditure and out-of-pocket expenditure, and by population for the impoverishment due to OOP expenditure.

Source: ILO estimates based on data from the WHO <u>Global Health Expenditure Database</u> and the <u>World Bank World</u> <u>Development Indicators</u>.

4.4.4 Persistent gaps in public financing for health

Insufficient funding is a key determinant of persistent deficits in access to healthcare without hardship. It increases financial hardship risks and lack of effective access to adequate healthcare services. Both taxes and social contributions are captured within general government health expenditure, which represented 62.6 per cent of current health expenditure globally in 2022, with significant regional disparities (figure 4.49).

Public domestic financing is the largest source of health financing globally. External health expenditure has a much smaller role, but can be significant in Africa and in the Arab States. International solidarity plays a role in addressing the immediate health needs of the most vulnerable in many humanitarian settings (box 4.23). Consequently, greater alignment with social health protection programmes – and health and social protection policies in general – can support efforts to bridge the humanitariandevelopment nexus. It can also increase the positive synergies between external and domestic expenditure on health and social protection system strengthening (ILO and UNHCR 2020).

Although there is consensus that the efficient allocation of resources should be prioritized and geared towards quality care for positive health outcomes, various reports have noted that guaranteeing universal health coverage

with appropriate levels of financial protection is challenging if general government health expenditure is below 5 per cent of GDP (Jowett et al. 2016; Røttingen et al. 2014). The regions of Africa, the Arab States, and Asia and the Pacific fall

Greater alignment with social health protection programmes – and health and social protection policies in general – can support efforts to bridge the humanitariandevelopment nexus.

Box 4.23 Accessing healthcare without hardship in the context of protracted crises: Bridging the humanitarian-development nexus

With multiple ongoing conflicts in their immediate vicinity, Lebanon and Jordan are among the countries with the highest share of refugees hosted within their populations. This situation poses important challenges to the existing medical infrastructure, arrangements in place for social health protection and, more broadly, for social policies to secure the well-being of those populations at par with nationals. In both countries, the UNHCR and the UNWRA have taken measures, based on the mandate of the Refugee Convention, 1951, to avoid catastrophic health spending by covering some secondary and tertiary care interventions, at least for the most vulnerable.

Those measures are not counted as part of the coverage for social health protection as they are not directly rooted in national law and are largely managed under separate mechanisms from the ones applicable to nationals. Nevertheless, refugees represent an important share of the population, which makes these parallel mechanisms an important purchaser of healthcare services at the national level (ILO 2021e). For instance, coverage under the medical assistance programme for Palestinians represented almost 15 per cent of the population in Jordan and almost 20 per cent in Lebanon in 2021. While this holds true and contributes to saving lives every day, the parallel and temporary nature of these measures, as well as the fact that they are entirely funded out of external sources, tend to act as barriers to their contribution to broad risk pooling and improved purchasing practices of public providers in these countries (ILO 2021e). Moving towards greater alignment with national social health protection policies could contribute to bridging the humanitarian-development nexus and reinforcing these policies towards higher levels of inclusiveness and strengthened primary levels of care.

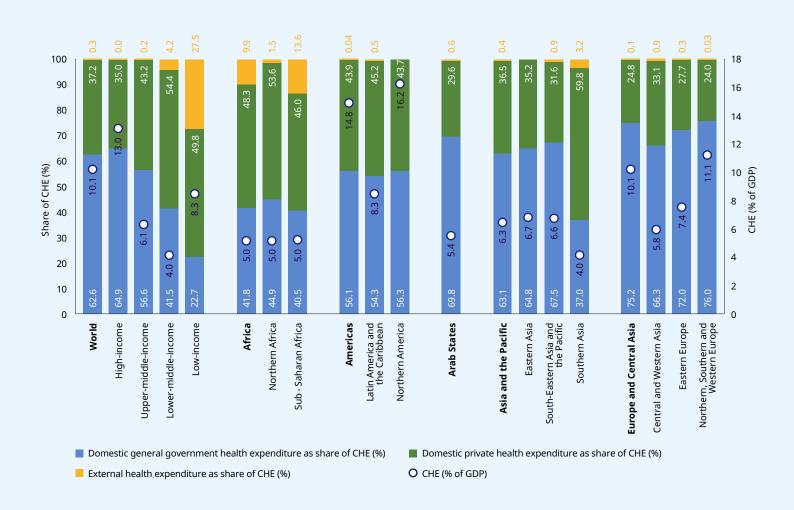


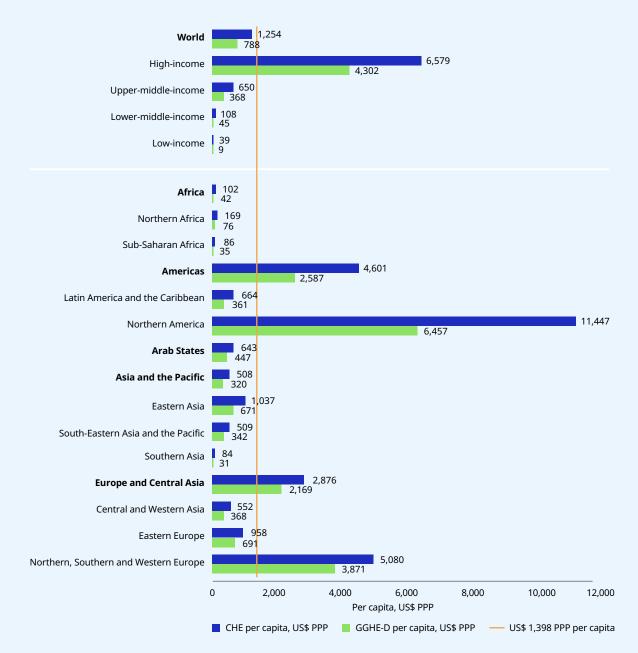
Figure 4.49 Current health expenditure (CHE) (percentage of GDP) and composition of CHE (percentage), by region, subregion and income level, 2022

CHE = current health expenditure.

Source: ILO estimates based on data from the WHO Global Health Expenditure Database.

below this target; a tendency most pronounced in Southern Asia, Northern and sub-Saharan Africa, and South-Eastern Asia and the Pacific (figure 4.50).

Increased public spending on health from pooled sources (such as earmarked and non-earmarked taxes, and social contributions) positively correlates with lower out-of-pocket expenditure on health, while no such correlation was found with funding from voluntary private health insurance (WHO and World Bank 2020). This suggests that publicly mandated schemes, aligned with ILO standards, provide the most appropriate pathway towards financial protection inclusive of the poorest and most vulnerable. Moreover, Northern America, largely driven by the United States, has the lowest share of its population with both mandatory legal entitlements to healthcare benefits and effective protection by a publicly led social health protection scheme within highincome countries (figures 4.41 and 4.42). Yet, it also has the highest current health expenditure as percentage of GDP globally, suggesting that publicly led schemes grounded in a legal framework are also an important catalyst of efficient resource allocation. Figure 4.50 Current health expenditure (CHE) per capita and domestic general government health expenditure (GGHE-D) per capita, by region, subregion and income level, 2022 (US\$ PPP)



CHE = current health expenditure, GGHE-D = domestic general government health expenditure, US\$ PPP = US\$ purchasing power parity.

Note: Analysis suggests that countries need to allocate US\$1,398 PPP per capita in pooled health spending to reach 80 in the Service Coverage Index (Kruk, Ataguba and Akweongo 2020). Regional estimates are weighted by total population

Source: ILO estimates based on data from the WHO Global Health Expenditure Database.

Policy orientations

LO LO

- 5.1 Universal social protection for a fairer, more economically secure and greener future
- 5.2 Keeping the promise of leaving no one behind
- 5.3 Reinforcing social protection systems: Policies, legal frameworks and institutional capacities
- 5.4 Ensuring sustainable and equitable financing of social protection
- 5.5 Promoting universal social protection to advance social justice and a renewed social contract



- Social protection is an enabler of climate action and the accomplishment of a just transition and greater social justice. Social protection systems, as part of an integrated policy response, enable societies to better manage climate shocks, and realize the imperatives of mitigation and adaptation in an equitable manner. Social protection compensates and cushions people, and it protects enterprises from the adverse impacts of these policies. It is key for combating growing inequality and vulnerability, poverty and social exclusion, and for building fairer and more inclusive societies and sustainable and productive economies.
- To play this role, social protection systems need to be reinforced, and become universal and robust. Doing so would send a strong signal from States that they intend to protect their people through a reinvigorated social contract. A socially just and viable future requires closing protection gaps, and ensuring the provision of social protection is rights-based and anchored in law.
- Safeguarding the planet and the well-being of humans requires further investment to achieve universal and robust social protection systems. Domestic resource mobilization is critically important for addressing both life-cycle and climate risks in a sustainable and equitable way. In addition, countries with limited fiscal capacities that are often also highly vulnerable to climate crises need international financial support to enable them to fill financing gaps and build their social protection systems.
- Social protection can contribute to rectifying long-standing global and domestic inequalities and inequities. Wealth inequities within and between countries, and differentiated risks, unfairly place the burden of the climate crisis on the most vulnerable. Social justice must inform climate action and a just transition, with human rights at the heart of the process. The climate crisis can only be overcome through common effort but with differentiated responsibility proportional to capacity, while recognizing that special remedial responsibility lies with those primarily responsible for the crisis. This has major implications for financing social protection at the domestic level, and the role of international financial support for countries with insufficient economic and fiscal capacities as a key element of social justice.



5.1 Universal social protection for a fairer, more economically secure and greener future

Mitigating the climate crisis and achieving a just transition are accomplishable goals. Yet, without giving sufficient attention to building universal social protection systems, the

Social protection is among the most powerful policy tools that governments can deploy to manage these challenges fairly by ensuring that everyone is protected.

necessary adaptation and transformations that they require risk exacerbating people's vulnerabilities, worsening inequality, poverty and living standards, and becoming divisive and socially and politically unsustainable. This risks further eroding the social contract. Countries must intensify their efforts to address the existential threat of the climate crisis, while at the same time accommodating demographic, technological and other transformations. Social protection is among

the most powerful policy tools that governments can deploy to manage these challenges fairly by ensuring that everyone is protected. This can help secure the political legitimacy of climate policies. Rectifying inequities intrinsic to the climate crisis demands global justice, including solidarity in financing. Time is quickly running out for arresting runaway global heating, and less than six years remain to achieve the 2030 Agenda.

As the global community reviews the progress made in achieving the SDGs, and seeks a stronger consensus on climate action, financing for development and social development, preparing for the Second World Summit for Social Development in 2025, this is time for bold action. The key role of universal social protection for safeguarding people and the planet needs to be fully recognized to inform international and national policy action, including muchneeded investment to ensure sustainable social protection systems.

There are enormous gains to be had if universal social protection is accorded its due policy priority in a just transition. As part of an integrated policy framework, it can ensure that everyone can reap the benefits of a new greener prosperity, a reinvigorated social contract, and a rejuvenated planet more hospitable to life and future generations. The opportunity is there if policymakers want to take it.

5.2 Keeping the promise of leaving no one behind

5.2.1 Ensuring universal access to adequate social protection

While this report has demonstrated the progress made in extending social protection since 2015, it has also highlighted how much still needs to be done to ensure universal access to adequate social protection. Building on the existing international normative framework and commitments, the following policy orientations are key to leaving no one behind:

Pivoting from reducing poverty to preventing poverty

To reduce vulnerability and strengthen resilience, social protection policies need to pivot. Reducing

poverty by providing benefits to those who are currently in poverty is essential. However, relying only on poverty-targeted benefits is insufficient to meet today's and tomorrow's challenges, as these benefits can, at best, provide protection only for those who are already poor, but they are

far less equipped to prevent poverty. Therefore, in addition to lifting people out of poverty, social protection needs to shift to play a more important role in protecting people from falling into poverty in the first place – this is key for reducing vulnerability and enhancing resilience (Razavi et al. 2022; UN Women, forthcoming). This requires more attention to those elements of social



Social protection needs to pivot to play a more important role in protecting people from falling into poverty in the first place.

protection systems that can prevent (and not only alleviate) poverty, ensuring that everyone is protected for the necessities of life, so that health issues, the loss of a job or livelihood, disability, old age or having children do not become poverty risks, considering that these are often magnified by climate risks. Social protection systems need to provide robust mechanisms that deliver adequate protection throughout people's lives in a way that is anchored in rights and is sustainably and equitably financed through collective mechanisms (in particular progressive taxes and social insurance contributions) to allow for the necessary risk sharing and redistribution. This is key for enabling people to engage in decent and productive work, and for ensuring that social protection policies are well coordinated with labour market, employment, care and tax policies (Razavi et al. 2022).

Ensuring a solid social protection floor as the foundation of national social protection systems

Ensuring a nationally defined social protection floor that guarantees at least a basic level of social security including access to healthcare and income security, is indispensable and should be given the highest priority, especially in a polycrisis context fuelled further by climate change. Particular attention should be given to extending coverage to previously uncovered categories of the population, promoting gender equality and leaving no one behind, including rural populations, indigenous and tribal peoples, migrants and displaced populations (FAO, ILO and UNICEF 2022).

Progressively reaching higher levels of protection to ensure adequate protection

To enable a just transition, countries will need to strengthen their social protection systems to provide comprehensive and adequate protection across different branches of social protection (see Chapter 4). To address the health impacts of the climate crisis, social health protection, sickness benefits and employment injury protection play an equally important role.

Many countries use a combination of inclusive social insurance and tax-financed schemes to realize universal social protection by ensuring adequate levels of coverage, allowing for broad risk sharing, solidarity, gender equality, portability, and sustainable and equitable financing of their social protection system. Social insurance schemes providing broad and adequate coverage are essential. They ensure that the social protection system as a whole functions efficiently. In many cases, social insurance schemes combine financing from contributions with general taxation for those with limited contributory capacities. At the same time, social protection policies need to be part of a wider policy framework that ensures well-designed labour regulation and employment protection mechanisms, effective labour market institutions, and other measures to protect workers' rights and ensure fair competition for enterprises (ILO 2023c).

Enabling workers to better navigate the future of work

For a just transition to succeed, social protection systems need to enable workers and employers to better navigate the changing world of work. Workers in all types of employment, sectors and occupations, including the self-employed, need to be adequately protected (ILO 2021i) – this is essential for workers and enterprises alike. Attention to realizing gender equality and the inclusion of vulnerable categories of workers – such as workers in agriculture, domestic work and on digital platforms, own-account workers, migrant workers and refugees – are essential for a just transition.

Extending social protection is also a precondition for facilitating the transition from the informal to the formal economy, which can have a massive impact on eradicating poverty and reducing inequalities, and can further contribute to higher productivity and the formalization of employment and the economy (FAO, ILO and UNICEF 2022). Social protection enables well-functioning and sufficiently flexible labour markets that generate productive and decent employment without unduly shifting financial risks on to individual workers and employers (see section 3.3). In fact, social security is not a hindrance to flexibility – it is a precondition for it.

It should not be forgotten that social protection systems also contribute directly or indirectly to the creation of employment, including the creation of millions of decent jobs in the health and care sectors (ILO 2024a).



Social security is not a hindrance to flexibility – it is a precondition for it.

Harnessing the economic benefits of universal social protection

Social protection supports investment in human capabilities, including health, education and skills development, helps unemployed workers to reskill and find a new job, and it enables older persons to retire in dignity (see Chapter 4). In doing so, social protection is indispensable for supporting workers (and enterprises) in navigating the necessary structural transformations. It also serves as an "automatic stabilizer" for aggregate consumption and social cohesion during crises (ILO 2021q).

Together with other policies, social protection is key for decent and productive employment and a just transition, especially where it is part of an integrated policy package. A key effort to step up integrated and better coordinated approaches to extending social protection in face of the climate crisis is through existing partnerships (box 5.1) and efforts being made by the United Nations Global Accelerator on Jobs and Social Protection for Just Transitions⁵⁸ (box 5.2).

Box 5.1 Partnerships for universal social protection

Partnerships can support efforts to build universal social protection systems, and ensure that their potential to contribute to climate action is both recognized and maximized. The Global Partnership for Universal Social Protection Floors (USP2030) through its dedicated working group on social protection and climate change, plays a key role in this respect.¹ Other important partnerships include the United Nation Social Protection Floor Initiative (UN SPF-I), the Social Protection Inter-Agency Cooperation Board (SPIAC-B), Universal Health Coverage (UHC2030), and Providing for Health (P4H). Partnerships enhance collaboration and develop strategic alliances among United Nations agencies and international financial institutions, helping align institutional views and country-level action.

¹ See <u>https://www.social-protection.org/gimi/ShowProject.action?id=3121</u>.

Box 5.2 The United Nations Global Accelerator on Jobs and Social Protection for Just Transitions

The Global Accelerator supports countries in creating decent jobs, expanding fiscal space (see box 3.6), extending social protection and ensuring a just transition, harnessing opportunities presented by ongoing economic, demographic and ecological transformations into better prospects for those who are today excluded from decent jobs and social protection.

The Global Accelerator comprises governments, United Nations agencies, social partners, international financial institutions, public development banks, civil society, and the private sector, who are convinced that social justice requires sustainable development. To date, 15 pathfinder countries have joined the Global Accelerator which supports – through United Nations programmes and the identification of financing – their plans to extend social protection, create decent work and facilitate a just transition.

Source: UN (2024).

5.2.2 Making social protection systems gender-responsive

The urgency of climate action makes it imperative for national social protection systems to be genderresponsive. The climate crisis is intensifying some of the drivers of gender inequalities, for example, by causing greater health risks and increasing the time women need to allocate to fetching water and fuel and caring for sick family members. This, in turn, limits the time available for skills training, and looking for and engaging in decent employment in a fast-changing economy.

Social protection policies can contribute to addressing gender inequalities and promoting more equitable, inclusive and transformative outcomes if they are designed, implemented and financed in a gender-responsive way. Realizing this potential is contingent on creating powerful synergies: between social protection and labour protection, between social protection and labour services, and between social protection and other policies, especially health, education, care, employment, formalization and fiscal policies (Razavi et al., forthcoming a).

Bridging gender inequalities as part of a just transition will require focused policy action on key priorities.

Reinforcing social health protection mechanisms to accelerate universal health coverage

As women and girls are more affected by rising temperatures, climate-related disasters and corollary impacts (Gavrilovic et al. 2022; Lenton et al. 2023), the direct health impacts of climate change are likely to be even more debilitating if they are not able to access healthcare without hardship. Indeed, financial barriers are among the most significant impediments keeping women away from healthcare services (WHO and World Bank 2023). Publicly mandated schemes, in line with international social security standards, with comprehensive benefit packages which are inclusive of the full range of women's health needs, and which are either non-contributory or with contribution subsidies for those with little or no contributory capacity, provide the most effective pathway towards universal health coverage. They provide the necessary financial protection that is inclusive of all women.

Reinforcing social protection systems to achieve better results for women

Ensuring that social insurance schemes deliver for women means closing protection gaps and adequately covering workers in all types of employment (including part-time, temporary and self-employment) (see section 3.2.2), and incorporating effective mechanisms to recognize and compensate for care-related leave (section 3.2.5), minimum benefit guarantees and other risk-sharing mechanisms that are not usually available through individual accounts mechanisms.

Ensuring that social assistance schemes are rights-based and gender-responsive requires (a) anchoring them in national law, including clearly specified eligibility criteria, benefit levels and indexation mechanisms, and (b) where possible, transitioning from household-based to individual entitlements, based on principles of transparency, accountability and non-discrimination. This also includes revisiting behavioural conditionalities, to avoid reinforcing gender stereotypes and exacerbating women's "transaction" costs and unpaid work; and ensuring that non-compliance does not lead to punitive measures that exclude women and girls who are marginalized or in vulnerable situations (UN Women 2019). Anchoring schemes in national law also provides for better financial stability of the scheme and better financial planning, ensuring that those who are eligible for benefits have a right to receive them when needed (and do not end up on waiting lists), which is particularly important for women (Razavi et al. 2022, see also section 5.3).

Strengthening linkages between gender-responsive social protection systems and other areas

Reforms of social protection systems can contribute to addressing and, to some degree, offsetting gender inequalities in labour markets by ensuring universal access to adequate and comprehensive social protection. Yet other measures, such as addressing occupational segregation and gender wage gaps are also essential (see section 3.2.5). Strengthening women's right to work and rights at work, whether in the circular economy (such as waste pickers), the care economy (for example, childcare and long-term care workers), or the digital economy (for example, in situ or online), requires a package of interlinked policies. These must ensure occupational safety and health, adequate social protection with a view to formalizing their employment, fair wages as well as work-life reconciliation policies.

There is a critical need for policy coherence: gender-responsive social protection can undoubtedly make a major contribution to a gender equality agenda, but is most effective in combination with an integrated and coherent set of policy measures that seek to address and combat the multiple and interrelated drivers of gender inequality (Razavi et al., forthcoming a).

5.2.3 Facilitating access to care and other services

A just transition also requires strengthening linkages between social protection policies and access to care and other services, as well as other policies that contribute to people's well-being and

In 2015, 2.1 billion people across the world were in need of care, and that number is expected to reach 2.3 billion by 2030.

facilitating a work-life balance. Social protection benefits should be complemented by the provision of accessible, affordable, acceptable and quality social services and other in-kind benefits. In 2015, 2.1 billion people across the world were in need of care, and that number is expected to reach 2.3 billion by 2030 (UNRISD 2022).

Complementing child and family benefits by access to quality childcare services

For example, to improve children's development and well-being, help children attain their full potential and support family livelihoods and care needs, it is imperative that social protection cash benefits and effective access to care services work in a mutually reinforcing manner. Depending on their design and delivery, healthcare, long-term care and childcare services can help maximize and sustain the impacts of cash benefits, overcoming gender inequalities, and fostering social inclusion of children from marginalized families. Quality childcare services can foster both child development goals and support parents in combining work and family responsibilities. In practice, comprehensive early childhood education and care services attuned to the needs of working families remain scarce, particularly for younger children, and especially in developing countries. However, investment in childcare services can deliver significant economic and social dividends for families, individuals and societies by enhancing children's capabilities, supporting women's labour market choices, and creating decent jobs in the care sector (ILO 2024a; UN Women 2015).

Ensuring access to quality long-term care services

Likewise, having income security in old age through a pension should be complemented by access to appropriate healthcare and long-term care services without financial hardship. With a growing global burden of non-communicable diseases, not only should prevention be prioritized from an early age and determinants of chronic and long-term diseases addressed, but health services also need to be better coordinated with social care services that respond to the needs of older people and their aspiration to live a dignified life (WHO 2015b). While modalities for the financing and delivery of long-term care services vary greatly across countries, coherence between healthcare, social care and social protection systems is critical to ensure quality, especially in care models that are pluralistic in nature. In practice, this continuum is not always realized and coordination is often weak (see Tessier, De Wulf and Momose 2022). In the absence of effective coordination, models of longterm care that rely exclusively or predominantly on families and volunteers are likely to be both inequitable and unsustainable, given the changes in family structures and employment patterns. Affordable and quality long-term care services provide an alternative to unpaid care provided by family members, predominantly women, who form the invisible backbone of long-term care systems. Social protection systems need to assume greater responsibility so those who need long-term care can access it without hardship.

Ensuring decent work for care workers

While the care economy is a major generator of employment, with a global care workforce of 381 million workers, or 11.5 per cent of total global employment (ILO 2024a, 11), many care workers lack access to adequate social protection. In view of the potential of the care economy as a source of additional decent employment as part of a just transition, more attention needs to be given to ensuring adequate social security coverage. This requires overcoming legal, financial and administrative barriers to their coverage, including those who are particularly vulnerable, such as domestic workers, migrant workers or community health or care workers (ILO 2021i; 2023x; 2024a).

Recognizing and redistributing unpaid care – the role of social protection

Families play a key role in meeting the physical and emotional needs of children and adults. More than three quarters of all unpaid care work (76.2 per cent) is provided by women, which restrains their capacity to engage in paid work (ILO 2024a, 23). Despite the essential contribution it makes to human capabilities and well-being, and the (re)production of the labour force, unpaid work is largely an "invisible" domain (not counted as part of GDP). Yet, without the unpaid work of caregivers, most societies would cease to function and workers could not survive or perform their remunerated activities (ILO 2024a). Social protection cash benefits and services can offer relief for unpaid family caregivers and enable them to better balance work and family responsibilities (Razavi et al., forthcoming a). This includes the important role that care credits play in social insurance schemes, by recognizing and rewarding periods spent caring for children or other family members, to guarantee minimum pensions in line with international social security standards (ILO 2024a).

5.2.4 Turning the tide: Can the climate crisis make health and well-being the focus of our economies?

Human health and well-being are strongly determined by the conditions in which people live, work, grow and age (Marmot 2001). Poverty, social exclusion and inequality, which are expected to increase with the climate crisis, negatively impact health, including mental health, because they affect nutrition, education, housing, healthcareseeking behaviours, and other social determinants of health (Jay and Marmot 2009; Allen et al. 2014). These determinants are rooted in the unequal distribution of power and resources, which generates a social gradient in health at the local, national and international levels (Marmot 2006), resulting in inequities in health outcomes within and between countries (Commission on Social Determinants of Health 2008).

Addressing inequalities in health and well-being

Climate change, as well as mitigation and adaptation policies, are likely to reinforce existing social and economic inequalities that are responsible for inequity in health and well-being globally and locally (IPCC 2023c; Ragavan, Marcil and Garg 2020; Jay and Marmot 2009). The WHO Executive Board recommended that Member States "implement joint actions for health equity in addressing climate change and major societal transitions" in the framework of intersectoral action to address the social determinants of health equity (WHO 2023b). Social protection policies, by directly tackling poverty, inequality and access to essential services, play a critical role in promoting well-being and resilience (Marmot 2013; WHO

2019b), contributing to a broader shift towards an economy that promotes human well-being and remains within planetary boundaries.

Though the evidence is fragmented, many studies have shown the health impact of social protection. For example, family benefits in Latin America had a positive impact on both healthcare-seeking behaviour



Though the evidence is fragmented, many studies have shown the health impact of social protection.

and health outcomes (de Andrade et al. 2015), and unemployment insurance positively impacts health, including mental health (O'Campo et al. 2015; Kuka 2020; Tefft 2011). Many other studies identified social protection as an essential condition to sustain healthy lives. For instance, 35 per cent of the inequity in self-reported health between those who are most and least affluent is due to "systematic differences in risk and exposure to income insecurity and the lack or inadequacy of social protection" in the WHO Europe region (WHO 2019b). The comprehensiveness of the risks covered, and the adequacy of benefit levels are key parameters of the expected health impact of national social protection systems, underpinning the importance of comprehensive and adequate benefits. Stronger integration of universal social protection and universal health coverage policies will be essential in this endeavour (FAO, ILO and UNICEF 2022).

Investing in a well-being economy

The climate crisis is exacerbating existing inequalities and urgent action is required to turn the tide. A shift in socio-economic policies is needed to gear investments towards what is good for health, well-being and the environment. There are many co-benefits between health and climate policies (Watts et al. 2015). Active transport (walking or cycling) and clean public transport systems benefit both environmental and health outcomes (Romanello et al. 2023), and so does the adoption of a balanced diet that favours plant-based ingredients (Willett et al. 2019). Reaping those co-benefits requires investment in redistributive social policies that enable individuals, households and communities to undertake the necessary changes, considering that the costs of inaction on health systems will be much greater (Romanello et al. 2023; Bosello,

Roson and Tol 2006). Therefore, a major shift is needed, as promoted by the movement for well-being economies, ensuring that health and social protection system financing is not considered as a competing priority, but as a complementary investment in human well-being that can also support planetary health.

The climate crisis is exacerbating existing inequalities and urgent action is required to turn the tide.

Accelerating progress towards universal health coverage

Realizing universal health coverage is a key precondition for climate action and a just transition (see section 4.4) and requires concrete action. The ILO actively contributes to Universal Health Coverage (UHC2030), Providing for Health (P4H) and other strategic alliances to advance the policy debate and support country-level action.

5.3 Reinforcing social protection systems: Policies, legal frameworks and institutional capacities

5.3.1 Enhancing national social protection policies, strategies and legal frameworks to make them fit for purpose

To adjust to greater climate volatility, more attention is needed to strengthen national social protection policies and strategies, and to ensure a rights-based approach. This is essential to allow people and enterprises to reap the socio-economic dividends from a just transition, fostering investment in human capabilities and enabling people to seize economic opportunities.

Formulating, implementing and monitoring national social protection policies and strategies

National social protection policies and strategies are important planning instruments that can help

governments to set targets and milestones to progressively reach universal coverage (Cookson et al., forthcoming; ILO 2019f). Formulating these policies and strategies through a participatory process of effective and inclusive social dialogue ensures that policies are comprehensive, transparent, consensual and well-balanced, and therefore able to achieve greater buy-in and ownership (ILO 2018c; 2021b; Fultz and Kulke 2023). These mechanisms will also facilitate policy implementation, thus strengthening coordination across government and other relevant actors, to ensure that the policies meet the needs of the population. Social dialogue urgently needs to become the rule rather than the exception when formulating and implementing policy.

Strengthening legal frameworks for social protection systems

Reinforcing the legal basis of social protection systems is essential for a just transition. This includes extending legal coverage to those not

Box 5.3 Enhancing the rights-based nature of social assistance schemes

Poverty-targeted schemes are seldom anchored in law, and are often criticized for large exclusion errors and for opaque eligibility mechanisms. While an argument can be made for more universal schemes that cover broad categories of the population, there is a role for poverty-targeted schemes within universal social protection systems as a last-resort safeguard for individuals with additional needs that could not be met by other mechanisms and, in many cases, also owing to fiscal constraints. Yet, social assistance is not "charity" and it is possible to design poverty-targeted schemes in line with a rights-based approach.

Transparent eligibility and benefit rules and accountability mechanisms are important. In practice, this can include (a) on-demand enrolment, easier access to benefits for those entitled, (b) measures to prevent stigmatization of beneficiaries, and (c) enhanced public finance management (including with international support) to ensure resources are available to meet people's needs. By this token, social assistance programmes can change lives for the better, respect the dignity of right-holders and enhance trust in public authorities.

Sources: ILO (forthcoming b); Razavi et al. (2022).

yet protected, addressing discrimination and ensuring equal treatment and gender equality, safeguarding the adequacy of benefits and services, expanding the range of benefits to progressively achieve comprehensive protection, and ensuring that governance, financing, coordination and delivery mechanisms are fit for purpose.

Addressing remaining gaps in national legislation is essential for ensuring that qualifying conditions and benefit entitlements are prescribed by law, guaranteeing the predictability of rights and benefits, and ensuring transparency and accountability. This will contribute to a more reliable financing base (OHCHR and ILO, forthcoming) and increase public trust in the system.

As part of a wider effort to enhance social security legislation, an important priority is to apply a rights-based approach for social assistance schemes, many of which still lack a sufficiently solid legal basis and would benefit from being fully integrated in national social protection systems (see box 5.3).

Harnessing international social security standards for strengthening national systems

The international normative framework, in particular human rights instruments and international social security standards, provides essential guidance for reinforcing and adapting social protection systems to ensure a just transition and inclusive climate action. This also requires improving the level and quality of benefits and services, defining clear rights and corresponding obligations for the State and individuals alike, and ensuring sustainable and equitable financing structures.

International social security standards provide key guidance to support countries in reinforcing their social protection systems (ILO 2021a); yet, they are often insufficiently known and applied. To address this challenge, the ILO currently conducts a Global Ratification Campaign (box 5.4).

Reinforcing the legal basis of social protection systems is essential for a just transition.

Box 5.4 Global Ratification Campaign on Convention No. 102

To support countries in moving towards universal social protection systems, the ILO's Global Ratification Campaign on Convention No. 102 supports countries in ratifying and implementing international social security standards. This includes awareness-raising and capacity-building of national stakeholders to design and implement sound national social protection policies and rights-based social protection systems, as well as comparative assessments between national social security legislation and practice and international standards.

The ILO Governing Body set a target of achieving at least 70 ratifications of Convention No. 102 by 2026. Since 2021, seven countries have ratified the Convention, bringing the total number of ratifications to 66 at the day of writing.

Note: For further information, see Annex 4, the website of the <u>Global Campaign</u> and the <u>Toolkit on ILO Social Security</u> <u>Standards</u>.

Coherence with social, economic and employment policies

For the structural transformations associated with climate policies to be equitable and orderly, social protection should be well coordinated with other social and economic policies, including employment, sectoral, skills and health policies. Greater policy coherence will also maximize synergies and impact (see also section 2.2). Integrated solutions include, for example, formalizing informal employment arrangements and enterprises, bolstering public investment in the care economy and fostering decent work through integrated solutions. The latter can be achieved by providing unemployed workers with income security through employment retention, public employment or unemployment support schemes, and with training opportunities to enable them to reskill or enhance their existing skills that a just transition will demand.

5.3.2 Enhancing institutional capacities for better delivery and preparedness

This section discusses the necessity to enhance institutional capacities for better delivery and preparedness, arguing for a comprehensive and systemic approach.

Enhancing institutional capacities and preparedness

Preparedness for climate shocks and just transition policies requires comprehensive social protection systems to be in place ex ante (ILO 2021q). This means formulating and implementing national social protection strategies and policies through social dialogue now rather than later. This helps to avoid improvised responses in the midst and in the frenzy of an emergency. Systems can contribute to preventing, containing and softening the impacts of crises, promoting swift recovery and building people's capacity to cope with shocks as well as everyday risks. In the context of humanitarian crises, this requires working across the humanitarian-developmentpeace nexus, using existing health and social protection systems to the extent possible, and systematically reinforcing them (for example, ILO and UNHCR 2020). Well-established partnerships and inter-agency collaboration frameworks give the social protection sector a head start (FAO, ILO and UNICEF 2022).

Well-established partnerships and inter-agency collaboration frameworks give the social protection sector a head start.

Strengthening social protection delivery systems

In addition to a general enabling environment of rule of law, peace and security, and functioning public digital and physical infrastructure, social protection systems need to ensure sound delivery capacity at every step in the delivery chain. This will enable people to have clear entitlements and to effectively access adequate benefits and services.

This requires:

- Accessible and inclusive communication channels that ensure all members of society understand their entitlements and obligations, the administrative procedures to follow, and how to receive benefits and access services. Workers' and employers' organizations, as well as civil society organizations, can play an important role in this regard.
- Identification and authentication mechanisms that can verify people's identity when registering for a scheme or receiving a benefit or services. In some countries, the national identification system is universal and can be used for this purpose. Elsewhere, countries sometimes assign unique social security numbers at birth. In the absence of a unique identifier, schemes in some countries accept up

to 30 different types of documents to register for a benefit (such as birth certificates, voter identification, utility bills or tax records).

- Accessible and inclusive online and/or physical interfaces. Offices or mobile units should ensure that individuals can register and have their eligibility verified. Similarly, digital or physical points for contribution collection and payments or service delivery need to be easy to reach for recipients. Where digital options are absent or inaccessible, in-person support is important to ensure no one is excluded simply because of limited technological capacity (such as in remote areas). When digital systems are down or when a shock occurs, systems continuity needs to be maintained to allow for a rapid intake of large numbers of additional recipients.
- Institutional capacity needs to be strengthened across all administrative levels. This requires processes for regular monitoring and periodic evaluation as well as ensuring users have access to impartial, transparent, effective, simple, rapid and inexpensive complaints and appeal mechanisms. This is only possible with well-trained staff with decent working conditions, including adequate labour and social protection.

5.4 Ensuring sustainable and equitable financing of social protection

Social protection can only deliver for climate action and a just transition if it is sustainably and equitably financed through domestic resources and, where necessary, complemented by international financial support.

Enabling sustainably and equitably financed social protection systems

Ensuring strong social protection systems that can support a just transition requires the requisite investment. Yet, many countries are struggling to deliver on this task given limited fiscal space due to high informality and sovereign debt, which is giving rise to unsustainable debt servicing costs (ILO 2024k; UNCTAD 2024). As a result, numerous countries now find their interest payments exceeding what they spend on social protection. Also, in Latin America and the Caribbean, the rise of interest payments between 2012 and 2021 curtailed spending on key public services and contributed to a decline in public investment (UNECLAC 2023). To avoid further debt accumulation, 134 governments began to cut public spending in 2021, a trend expected to continue until at least 2025. A significant aspect of this budget tightening has involved targeting and rationalizing spending on social protection as one of the main austerity measures used to reduce overall government expenditure (Ortiz and Cummings 2022).

However, diminishing expenditure on social protection will disproportionately affect the poorest households, widening the economic divide and aggravating intersecting inequalities (Okeke, Alexiou and Nellis 2021; Seguino 2010). In

Diminishing expenditure on social protection will disproportionately affect the poorest households. turn, this will leave countries more vulnerable to the impacts of climate change, undermining the achievement of mitigation, adaptation and just transition goals. Thus, reducing investment in social protection will compromise the achievement of several targets of SDG 1 on poverty, SDG 3 on health, as well as SDG 13 on climate action (Kentikelenis and

Stubbs 2023). Safeguarding social spending for health, education and social protection is critical to achieving these objectives (IMF 2019). The USP2030 Principles for Financing Universal Social Protection (see box 5.5) reflect a broad consensus on key principles echoing the principles embedded in international social security standards.

Austerity measures are hitting current levels of social protection expenditure, which are insufficient to guarantee national social protection floors, let alone to provide progressively higher levels of protection to as many people as possible. Particularly for low- and middle-income countries, the additional investment needed to achieve SDG targets 1.3 and 3.8 is 3.3 per cent of their GDP (Cattaneo et al. 2024).

Filling financing gaps and securing sufficient fiscal space at the national level

Countries have different options to create and extend fiscal space for social protection (Ortiz et al. 2019). The key sources of financing, however, need to be domestic regular sources (such as progressive taxes and social security contributions) given that social protection systems imply regular long-term commitments that need to be sustainable to effectively protect people in the event of life-cycle and climate risks (see box 5.5).

Box 5.5 USP2030 Joint Statement: Principles for Financing Universal Social Protection

The Global Partnership on Universal Social Protection for All (USP2030) agreed the following key principles to guide the international and national financing of social protection:

- The financing of social protection should take a rights-based approach and be guided by international social security standards. States have the obligation under international human rights treaties and international social security Conventions to progressively realize the universal right to social security, including to allocate the maximum available resources to ensure the right of all individuals to social security.
- The State is the key actor for social protection financing and implementation, with six key priorities outlined for domestic resource mobilization. These include: (a) assign greater priority to social spending within government budgets; (b) enhance the progressiveness and effectiveness of the tax system to increase tax revenue and ensure equity in financing efforts; (c) increase revenues from social insurance contributions by expanding coverage of social insurance schemes; (d) improve the efficiency and transparency of public financing of social protection across all relevant levels and agencies of government and partners; (e) ensure adequate provision of shock-responsive financing; and (f) engage in inclusive social dialogue to determine the reforms and financing of the social protection system.
- International resources should support the expansion of social protection systems in countries with limited fiscal space. Given that filling financing gaps for social protection through domestic resources will not be possible in the short term for many countries, there needs to be increased international support, with a focus on the following areas: (a) increased and better coordinated international financial support for social protection; (b) debt relief and restructuring; (c) international tax reform to increase revenues; and (d) coordinated international policy advice.

It is critical that countries formalize enterprises, employment and economic transactions, and strengthen the institutions required to collect taxes and social contributions, addressing tax evasion and the avoidance of social contributions. While the role of social contributions is sometimes contested, evidence shows that the reduction of contribution rates has not led to significant employment or formalization gains, but has instead further worsened financing gaps for social protection (Calligaro and Centrángolo 2023).

More promising strategies to increase fiscal space for social protection systems and floors are budget reprioritization, higher spending efficiency, combating illicit financial flows, macroeconomic policies that favour decent job creation, and innovative sources of financing, such as taxes on carbon (see section 3.4.3 and below). Given the immense income and wealth inequalities, countries could also apply more progressive taxation, through wealth or inheritance taxes, or excess or windfall profit taxes. In the current context of debt service-related development distress (UNECLAC 2023), if a portion of government debt could be renegotiated with lower interest rates, this could free a sizeable share of financial resources to devote to investments in social protection and essential services.

Filling financing gaps through international support

While domestic resource mobilization must remain the cornerstone of national social protection systems, in the case of low-income countries, an estimated financing gap of 52.3 per cent of their GDP (Cattaneo et al. 2024) makes international support absolutely necessary, so that countries can address immediate financing needs and build their social protection systems over time. However, official development assistance remains both unpredictable and at levels below the internationally agreed goal of 0.7 per cent of gross national income of the highincome countries (in 2022, the average rate was 0.37 per cent). According to data collected by the OECD Development Assistance Committee, only five countries met this goal. Despite some increase in the share of official development assistance allocated to employment and social protection as a result of the COVID-19 pandemic, official development assistance (ODA) allocations to social protection still remain very low.⁵⁹ Moreover, the climate finance disbursed so far has not been in addition to ODA, which implies it is tapping into ODA and therefore reducing what ODA commitments can do in other areas (Mitchell, Ritchie and Tahmasebi 2021).

To unlock social protection financing opportunities especially for low-income countries, in 2021, ILO constituents requested the Office to explore options for mobilizing international financing for social protection, including as a Global Fund for Social Protection (ILO 2021m; De Schutter and Sepúlveda 2012). ILO-commissioned research on the diverse experiences of global health, agriculture and climate funds suggests that a putative global fund for social protection could give priority to low-income countries to gradually build their national social protection floors. This would complement and support domestic resource mobilization efforts (Yeates et al. 2023). However, there are also risks to creating new vertical funds, including the risk of them being under-resourced and creating fragmentation in the area of financing social protection. Ensuring effective coordination with ongoing climate financing efforts is also key (see below). While private sources of finance can make substantial new funds available, great care is needed to ensure that ethical and vested interest concerns and due diligence are soundly anchored in governance structures and processes to avoid this. The full involvement of diverse representatives government (different ministries), social partners and civil society groups (such as users and beneficiaries) - from countries of the global South in global-level deliberations is also crucial for the legitimacy of funds (Yeates et al. 2023).

The recently concluded agreement on a globally aligned minimum tax rate of 15 per cent on multinational corporations, despite some loopholes, could serve to retain domestic resources in the countries where firms are operating. The world is "awash" with capital, with soaring stock markets and a surge in private wealth.⁶⁰ The challenge is to tap into this potential source of finance. There is growing support, including from ministries of finance of major countries, for a minimum 2 per cent wealth tax for billionaires (Elliott 2024), although the details still need to be worked out.

⁵⁹ See <u>https://www.oecd.org/development/financing-sustainable-development/development-finance-data/idsonline.htm</u>.

⁶⁰ As of 1 January 2024, the ten richest people in the world are worth nearly US\$1.47 trillion – US\$30 billion more than a month earlier (Forbes 2024).

Harnessing climate finance for social protection at national and international level

Social protection plays an important enabling function for climate change adaptation, mitigation and loss and damage response, and in facilitating a just transition towards greener economies (Chapter 2). To fulfil this role, social protection systems need to be sustainably and equitably financed. Harnessing climate finance could be essential to complement other financing sources for social protection to support a just transition (see section 3.4.3).

In countries hardest hit by climate change, leveraging international climate financing, including loss and damage funding arrangements, should help reinforce and adapt social protection systems to ensure that people, societies and economies are better prepared to tackle the risks of the climate crisis. However, this requires a greater recognition of the role of social protection for climate action both by climate finance institutions and by applicants to climate finance, including national governments. The first concrete step to move in this direction is to introduce clear commitments regarding the role of social protection for climate action in the context of countries' nationally determined contributions, national adaptation plans, as well as pledges for net zero and sovereign green bonds. At the same time, the total available international climate finance flows need to

expand significantly, especially those available for financing adaptation needs.

At the national level, the removal of explicit fossil fuel subsidies and the introduction or expansion of carbon pricing measures (that is, the removal of implicit fossil fuel subsidies) could free up or generate additional fiscal revenue. By redistributing some of these savings or this revenue through the social protection system, governments can compensate people for the associate price increases, thus helping to make climate policies equitable and feasible. This also constitutes an important opportunity for filling some of the social protection financing gaps, particularly in middle-income countries, which spend much more on explicit fossil fuel subsidies and have higher revenue potential from carbon pricing than low-income countries.

At the same time, maximizing the reduction of emissions and boosting government revenues through carbon pricing requires international cooperation, for example by introducing an international carbon price floor (Roaf, Black and Parry 2021). Emerging proposals suggest directing revenues collected through such international financing arrangements towards funding the adaptation needs of low- and middle-income countries (UNFCCC 2023b). If directed towards social protection, such cross-country transfers would promote fairer burden sharing and help address income and health losses from climate change through revenues generated from pricing emissions where they happen.

5.5 Promoting universal social protection to advance social justice and a renewed social contract

This report has demonstrated the key role of universal social protection to enable people to cope with often intertwined climate and life-cycle risks, as well as the uncertainties of longer-term transformations. Being adaptive and shock-responsive, such systems are essential for preventing and alleviating poverty, reducing vulnerabilities and inequalities, and increasing social inclusion and resilience.

Universal social protection is pivotal to renewing the social contract (ILO 2024i), which is essential for promoting well-being, social cohesion and the pursuit of social justice (UN 2021; ILO 2023b; UNPRI 2024). Strong social protection fosters state-society trust and can guarantee that all members of society are well protected.

However, recent decades have seen a rapidly eroding social contract. Multiple elements have created a "state of fracture" (UNRISD 2022) and shaken people's trust in the State, including: converging and protracted economic, health, environmental and



Universal social protection is pivotal to renewing the social contract. humanitarian crises; migration and displacement pressures, discrimination and exploitation; austerity and privatization of public services; elite capture of power; concentration of wealth; and political polarization. Rising levels of inequality, poverty and hunger globally, further demonstrate the need for a reinvigorated social contract (Razavi et al. 2020).

A reinvigorated social contract can secure public buy-in for urgently needed climate policies, including for mitigation measures, such as carbon tax policies or the reduction of fuel subsidies which – without adequate compensation – could aggravate economic insecurity for large parts of the population, including but not limited to the very poorest.

Simultaneously strengthening social protection systems and actively working to rebuild a social contract taking into account environmental boundaries and human impact is now crucial. Rights-based social protection systems therefore contribute to enhancing good governance, transparency and accountability, building on principles of participation, social dialogue and democracy, to restore trust and a shared sense of purpose and fairness.

- Annex 1 Glossary
- Annex 2 Measuring social protection coverage and expenditure
- Annex 3 Minimum requirements in international social security standards

- Annex 4 Ratification of up-to-date ILO social security Conventions
- Annex 5 Social protection effective coverage
- Annex 6 General government actual expenditure on social protection including and excluding health care, latest available year
- Annex 7 Social protection legal coverage – <u>online only</u>
- Annex 8 Key features of main social security programmes by function – <u>online only</u>



Annex 1 Glossary

This glossary focuses on the basic concepts, definitions and methodology guiding the analytical work of the ILO on social security or social protection.⁶¹ It does not set out to assert any universal definitions; its purpose is simply to clarify how terms and concepts are used in this report and in the ILO more broadly.

Cash transfer programme: A non-contributory scheme or programme providing cash benefits to individuals or households, usually financed through taxation, other government revenue or external grants or loans. Cash transfer programmes⁶² may or may not include a means test.

Cash transfer programmes that provide cash to families subject to the condition that they fulfil specific behavioural requirements are referred to as conditional cash transfer programmes. For example, beneficiaries may be required to ensure that their children attend school regularly, or to use basic preventive nutrition and healthcare services.

Cash transfer(s): A generalized catch-all term used mainly to describe social assistance benefits. However, social protection systems have, since their very inception two centuries ago, disbursed cash transfers. Irrespective of whether they are contributory or non-contributory, social protection schemes provide cash benefits (cash transfers). For instance, unemployment insurance, pensions and employment injury schemes all provide cash benefits. Eight of the nine functions of social protection provide cash benefits.

Contributory scheme: A scheme in which contributions made by protected persons (actual or potential beneficiaries) directly determine entitlement to benefits (acquired rights). The most common form of contributory social security scheme is a statutory social insurance scheme, usually covering workers in formal wage employment and, in some countries, the self-employed. Other common types of contributory schemes, providing – in the absence of social insurance – a certain level of protection include national provident funds, which usually pay a lump sum to beneficiaries when particular contingencies occur (typically old age, invalidity or death). In the case of social insurance schemes for those in wage

or salaried employment, contributions are usually paid by both employees and employers (though, in general, employment injury schemes are fully financed by employers). Contributory schemes can be wholly financed through contributions but are often partly financed from taxation or other sources; this may be done through a subsidy to cover the deficit, a general subsidy replacing contributions altogether, or through subsidies directed specifically at certain groups of contributors or beneficiaries. Such groups include persons who do not contribute as they (a) are caring for children or studying, (b) are in military service or unemployed, (c) have an income too low to make full contributions, or (d) receive benefits below a certain threshold due to low contributions in the past).

Employment guarantee scheme: A public employment programme that provides a guaranteed number of days of work per year to poor households, generally providing wages at a relatively low level (typically at the minimum wage level if this is adequately defined).

Means-tested scheme: A scheme which provides benefits upon proof of need and which targets certain categories of individuals or households whose means are below a certain threshold. These schemes are also often referred to as "social assistance schemes" (see also below). A means test is used to assess whether the individual's or household's own resources (income and/or assets) are below a defined threshold, in order to determine whether the applicants are eligible for a benefit and, if so, the level at which that benefit will be provided. In some countries, proxy means tests are used; through which, eligibility is determined without actually assessing income or assets, on the basis of other household characteristics (proxies such as household composition, housing characteristics, productive assets or level of education of household members) that are deemed more easily observable. Means-tested schemes may also include entitlement conditions and obligations, such as work requirements, participation in health check-ups or (for children) school attendance. Some means-tested schemes also include other interventions that are delivered on top of the actual income transfer itself.

⁶¹ The glossary draws largely on the definitions, concepts and methods provided in previous editions of this report (ILO 2010; 2014c; 2017b; 2021q).

⁶² Strictly speaking, this term would encompass all social transfers provided in cash, including fully or partially contributory transfers. However, it is usually understood as limited to non-contributory transfers.

Non-contributory scheme: A scheme that does not normally require a direct contribution from beneficiaries or their employers as a condition of entitlement to receive relevant benefits. Such schemes are financed through taxes or other state revenues, or, in certain cases, through external grants or loans. The term covers a broad range of schemes, including universal schemes for all residents (such as national health services), nonmeans-tested categorical schemes for certain broad groups of the population (such as children below a certain age, or older people above a certain age) and means-tested schemes (such as social assistance schemes).

Public employment programme: A government programme offering employment opportunities to certain categories of people who are unable to find other employment. Public employment programmes, which are also known in some countries as public works programmes, include employment guarantee schemes (see above), "cash-for-work" and "food-for-work" programmes.

Social assistance scheme/programme: A scheme that provides benefits to vulnerable groups of the population, especially households living in poverty. Most social assistance schemes are means-tested.

Social insurance scheme: A contributory social protection scheme that guarantees protection through an insurance mechanism, based on: (a) the payment of contributions before the occurrence of the insured contingency; (b) the sharing or "pooling" of risk; and (c) the notion of a guarantee. The contributions paid by (or for) insured people are pooled together, and the resulting fund is used to cover the expenses incurred exclusively by those individuals affected by the occurrence of the relevant (and clearly defined) contingency or contingencies. In contrast to commercial insurance, risk-pooling in social insurance is based on the principle of solidarity, with contributions typically related to a person's capacity to pay (for example, proportional to earnings) as opposed to premiums that reflect individual risks.

Many contributory social security schemes are presented and described as "insurance" schemes (usually "social insurance schemes"), despite comprising mixed characteristics, with some non-contributory elements in terms of entitlement to benefits. This allows for a more equitable distribution of benefits, particularly for people with low incomes and short or broken work careers, among others. These non-contributory elements take various forms, and are financed either by other contributors (redistribution within the scheme) or by the State.

Social protection: Social protection, or social security, is a human right and is defined as the set of policies and programmes designed to reduce and prevent poverty, vulnerability and social exclusion throughout the life cycle. Social protection includes nine main areas: child and family benefits; maternity protection; unemployment support; employment injury benefits; sickness benefits; health protection (medical care); old-age benefits; invalidity and disability benefits; and survivors' benefits. Social protection systems address all these policy areas through a mix of contributory schemes (social insurance) and non-contributory tax-financed benefits (including social assistance).

As a human right, social protection (or social security) is enshrined as such in the Universal Declaration of Human Rights (1948), the International Covenant on Economic, Social and Cultural Rights (1966), and other major United Nations human rights instruments. States have a legal obligation to protect and promote human rights, including the right to social protection, (or social security) and to ensure that people can realize their rights without discrimination. The overall responsibility of the State includes ensuring the due provision of benefits according to clear and transparent eligibility criteria and entitlements, and the proper administration of the institutions and services. Where benefits and services are not provided directly by public institutions, the effective enforcement of the legislative framework is particularly important for the provision of benefits and services (UN 2008).

"Social protection" is a current term used to refer to "social security", and the two terms are generally used interchangeably. It must be noted, however, that the term "social protection" is sometimes used to cover a broader range of services than "social security", including protection provided between members of the family or members of a local community. On other occasions, "social protection" is also used with a narrower meaning, understood as comprising only measures addressed to the poorest, most vulnerable or excluded members of society. The ILO and other United Nations institutions use both in discourse with their constituents and in the provision of relevant advice to them.

Social protection floor: ILO Recommendation No. 202 stipulates that Member States should establish and maintain national social protection floors as a nationally defined set of basic social security guarantees which secure protection aimed at preventing or alleviating poverty, vulnerability and social exclusion (ILO 2012). These guarantees should ensure at a minimum that, over the life cycle, everyone in need has effective access to at least essential healthcare and basic income security. These together ensure effective access to essential goods and services defined as necessary at the national level. More specifically, national social protection floors should comprise at least the following four social security guarantees, as defined at the national level:

- access to essential healthcare, including maternity care;
- basic income security for children;
- basic income security for persons of working age who are unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and disability; and
- basic income security for older persons.⁶³

Such guarantees should be provided to all residents and all children, as defined in national laws and regulations, and subject to existing international obligations.

Recommendation No. 202 also states that basic social security guarantees should be established by law. National laws and regulations should specify the range, qualifying conditions and levels of the benefits giving effect to these guarantees, and provide for effective and accessible complaint and appeal procedures.

Social protection floors correspond in many ways to the notion of "core obligations", namely the obligation to ensure the realization of, at the very least, minimum essential levels of rights embodied in human rights treaties (UN 2012; 2014).

Social protection programme or scheme (or social security programme or scheme):

A distinct framework of rules to provide social protection benefits to entitled beneficiaries. Such rules specify the geographical and personal scope of the programme (the target group), entitlement conditions, the type of benefits provided, the amounts of such benefits (cash transfers), periodicity and other benefit characteristics, as well as the financing (through contributions, general taxation and/or other sources), governance and administration of the programme.

While "programme" may refer to a wide range of programmes, the term "scheme" is usually used in a more specific sense referring to a programme that is anchored in national legislation and characterized by at least a certain degree of formality.

A programme or scheme can be supported by one or more social security institutions governing the provision of benefits and their financing. It should, in general, be possible to draw up a separate account of receipts and expenditure for each social protection programme. It is often the case that a social protection programme provides protection against a single risk or need, and covers a single specific group of beneficiaries. Typically, however, one institution administers more than one benefit programme.

Social security: The fundamental right to social security is set out in the Universal Declaration of Human Rights (1948) and other international legal instruments. The notion of social security adopted here covers all measures providing benefits, whether in cash or in kind, to secure protection from, among other things:

- lack of work-related income (or insufficient income) caused by sickness, disability, maternity, employment injury, unemployment, old age or death of a family member;
- lack of (affordable) access to healthcare;
- insufficient family support, particularly for children and adult dependants; and
- general poverty and social exclusion.

Social security thus has two main (functional) dimensions, namely "income security" and "availability of medical care", reflected in the Declaration of Philadelphia (1944), which forms part of the ILO's Constitution, in the following terms: "social security measures to provide a basic income to all in need of such protection and comprehensive medical care".⁶⁴ Recommendation

⁶³ Recommendation No. 202, Para. 5.

⁶⁴ Art. III(f). These two main dimensions are also identified in the ILO Income Security Recommendation, 1944 (No. 67), and the Medical Care Recommendation, 1944 (No. 69), respectively, as "essential element[s] of social security". These Recommendations envisage that, first, "income security schemes should relieve want and prevent destitution by restoring, up to a reasonable level, income which is lost by reason of inability to work (including old age) or to obtain remunerative work or by reason of the death of a breadwinner" (Recommendation No. 67, Guiding principles, Para. 1); and, second, that "a medical care service should meet the need of the individual for care by members of the medical and allied professions" and "the medical care service should cover all members of the community" (Recommendation No. 69, Paras 1 and 8). Recommendation No. 202 also reflects these two elements in the basic social protection guarantees that should form part of national social protection floors (for more details, see box 1.3).

No. 202 stipulates that, at least, access to essential healthcare and basic income security over the life cycle should be guaranteed as part of nationally defined social protection floors, and that higher levels of protection should be progressively achieved by national social security systems in line with Convention No. 102 and other ILO instruments.

Access to social security is essentially a public responsibility, and is typically provided through public institutions financed from either contributions or taxes, or both. However, the delivery of social security can be and often is mandated to private entities. Moreover, many privately run institutions exist (of an insurance, self-help, community-based or mutual character), which can partially assume certain roles usually played by social security (such as the operation of occupational pension schemes) to complement and perhaps largely take the place of elements of public social security schemes. Entitlements to social security are conditional either on the payment of social security contributions for prescribed periods (contributory schemes, most often structured as social insurance arrangements) or on a requirement, sometimes described as "residency plus", under which benefits are provided to all residents of the country who also meet certain other criteria (non-contributory schemes). Such criteria may make benefit entitlements conditional on age, health, labour market participation, income or other determinants of social or economic status and/or even conformity with certain behavioural requirements.

Two main features distinguish social security from other social arrangements. First, benefits are provided to beneficiaries without any simultaneous reciprocal obligation (thus, it does not, for example, represent remuneration for work or other services delivered). Second, it is not based on an individual agreement between the protected person and the provider (as is the case, for example, in a life insurance contract); the agreement applies to a wider group of people and so is collective in nature.

Depending on the category of applicable conditions, a distinction is also made between non-means-tested schemes (where the conditions of benefit entitlement are not related to the total level of income or wealth of the beneficiary and her or his family) and means-tested schemes (where entitlement is granted only to those with income or wealth below a prescribed threshold). A special category of "conditional" schemes includes those which, in addition to other conditions, require beneficiaries (and/or their relatives or families) to participate in prescribed public programmes (for example, specified health or educational programmes).

Social security system or social protection system: The totality of social security or social protection schemes and programmes in a country, taking into account that the latter term is often used in a broader sense than the former.

All the social security schemes and institutions in a country are inevitably interlinked and complementary in their objectives, functions and financing. Thus, they form a national social security system. For reasons of effectiveness and efficiency, it is essential that there is close coordination within the system, and that – especially for coordination and planning purposes – the receipts and expenditure accounts of all the schemes are compiled into one social security budget for the country so that its future expenditure and financing of the schemes comprising the social security system are planned in an integrated way.

Social transfer: All social security benefits comprise transfers either in cash or in kind: that is, they represent a transfer of income, goods or services (for example, healthcare services). This transfer may be from the active to the old, the healthy to the sick, or the affluent to the poor, among others. The recipients of such transfers may be in a position to receive them from a specific social security scheme because (a) they have contributed to such a scheme (contributory scheme), (b) they are residents (universal schemes for all residents), (c) they fulfil specific age criteria (categorical schemes) or meet specific resource conditions (social assistance schemes), or (d) they fulfil several of these conditions at the same time. In addition, it is a requirement in some schemes (employment guarantee schemes, public employment programmes) that beneficiaries accomplish specific tasks or adopt specific behaviours (conditional cash transfer programmes). In any given country, several schemes of different types generally coexist and may provide benefits for similar contingencies to different population groups.

Targeted scheme or programme: See social assistance scheme.

Universal scheme/categorical scheme: Strictly speaking, universal schemes provide benefits under the single condition of residence. However, the term is also often used to describe categorical

schemes, which provide benefits to certain broad categories of the population without a means test or a proxy means test. The most common forms of such schemes are those that transfer income to older people above a certain age, to all persons with disabilities, or to children below a certain age. Some categorical schemes also target households with specific structures (one-parent households, for example) or occupational groups (such as rural workers). Most categorical schemes are financed by public resources.

Universal social protection: It refers to social protection systems that ensure everyone has access to comprehensive, adequate and sustainable protection over the life cycle, in line with ILO standards. Achieving universal social protection entails actions and measures to realize the human right to social security by progressively building and maintaining nationally appropriate social protection systems. Rights-based social protection floors and higher levels of protection, guarantee that the rights and obligations of all parties concerned - workers, employers, governments, state institutions - are anchored in law and duly observed to ensure human well-being and a dignified life. The State has primary responsibility for establishing the legal and administrative architecture and sustainable financing of social security, and is the final guarantor of its proper administration and good governance. Universal social protection is crucial for the prevention and reduction of poverty, inequalities and social exclusion, effectively maintaining workers' incomes and living standards. In the context of covariate shocks and crises, it can respond effectively, enabling access to healthcare and stabilizing aggregate demand by supporting income security and business continuity. A universal social protection system bolsters the social contract: as an investment in human capabilities, decent work and inclusive economies, it ensures the willingness of everyone to pay taxes and make social contributions, thereby sustaining the system and fostering social cohesion.

Annex 2 Measuring social protection coverage and expenditure

Social protection coverage

Measurement of effective coverage for SDG indicator 1.3.1

This report provides a comprehensive data set for the monitoring of SDG indicator 1.3.1, based on the data compiled through the Social Security Inquiry together with other sources. The data set was submitted to the United Nations Statistics Division in the framework of SDG monitoring; in particular, in the context of SDG 1 ("End poverty in all its forms everywhere"), the ILO is responsible for producing estimates on SDG indicator 1.3.1: "Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work injury victims, and the poor and the vulnerable."

The indicator reflects the proportion of persons effectively covered by social protection systems, including social protection floors (for the definition of "effective coverage" and how it is measured, see below). It covers the main components of social protection – child, family and maternity benefits; support for people without jobs, people with disabilities, victims of work injuries and older people⁶⁵ – with the aim of gauging progress towards SDG target 1.3, and towards the goal of providing at least a basic level of support in all the main contingencies of the life cycle, as defined in Recommendation No. 202. Health coverage, although it is one of the four basic guarantees of the social protection floor, is monitored not under SDG indicator 1.3.1 but under SDG indicators 3.8.1 and 3.8.2 (see the definition of "effective coverage" and criteria for its measurement in the next section of this annex). Calculations include separate indicators to distinguish effective coverage of social protection cash benefits for children, unemployed people, older people and people with disabilities, pregnant women and

mothers with newborns, those who have suffered injury at work, the poor and the vulnerable. For each case, coverage is expressed as a share of the respective population group. Effective coverage for workers in the event of sickness, although it is reflected in Recommendation No. 202, is not included within SDG indicator 1.3.1.

Indicators are calculated as follows:66

- Share of the population covered by at least one social protection cash benefit: ratio of the population receiving cash benefits⁶⁷ under at least one of the contingencies or social protection functions (contributory or noncontributory benefit), or actively contributing to at least one social security scheme to the total population.
- 2. Share of children covered by social protection benefits: ratio of children or households receiving child or family cash benefits to the total number of children/households with children.
- 3. Share of women giving birth covered by maternity benefits: ratio of women receiving cash maternity benefits to women giving birth in the same year (estimated based on agespecific fertility rates published in the United Nations' World Population Prospects or on the number of live births corrected for the share of twin and triplet births).
- 4. Share of persons with disabilities receiving benefits: ratio of persons receiving disability cash benefits to persons with severe disabilities. The latter is calculated as the product of prevalence of disability ratios (published for each country group by the WHO) and each country's population.
- 5. *Share of unemployed receiving benefits:* ratio of recipients of unemployment cash benefits to the number of unemployed persons.
- 6. *Share of workers covered in case of employment injury:* ratio of workers protected by injury insurance to total employment or the labour force.

⁶⁵ Healthcare is included under other SDG indicators, such as those under SDG target 3.8.

⁶⁶ For the detailed metadata visit <u>https://unstats.un.org/sdgs/metadata/files/Metadata-01-03-01a.pdf</u>.

⁶⁷ Excluding healthcare and sickness benefits.

- 7. Share of older persons receiving a pension: ratio of persons above statutory retirement age receiving an old-age pension (including contributory and non-contributory) to persons above statutory retirement age.
- 8. Share of vulnerable persons receiving benefits: ratio of social assistance cash benefits recipients to the total number of vulnerable persons. The latter are calculated by subtracting from total population all people of working age who are contributing to a social insurance scheme or receiving contributory benefits, and all persons above retirement age receiving contributory benefits.

Aggregate coverage indicators

Two aggregate measures of coverage are used in this report: the first aggregate indicator reflects *legal coverage*,⁶⁸ the second *effective coverage* (for more detail, see below).

- The share of the population enjoying comprehensive social security protection is estimated based on the number of people of working age who enjoy comprehensive legal social security coverage – that is, who are covered by law in respect of eight areas (sickness, unemployment, old age, employment injury, child/family benefit, maternity, invalidity, survivors) specified in Convention No. 102.⁶⁹
- The share of the population covered by at least one social protection cash benefit (SDG indicator 1.3.1(a), see above) reflects the effective coverage of the population in at least one area⁷⁰ – that is, the share of the total population receiving contributory or noncontributory benefits in at least one area or actively contributing to at least one social security scheme.

Measuring social protection coverage: Concepts and criteria

General considerations

Measuring social protection coverage is a complex task. Several dimensions need to be considered in order to arrive at a comprehensive assessment. In practice, few countries have available the full range of statistical data necessary for such a comprehensive assessment of social security coverage; nevertheless, partial information is available for a large number of countries. Many countries have acknowledged the need to undertake better regular monitoring of social security coverage and are stepping up their efforts to improve data collection and analysis; the SDG agenda, and especially targets 1.3 and 3.8, have been instrumental in encouraging this work.

Social security coverage is a multidimensional concept with at least three dimensions:

- Scope. This is measured by the range (number) and type of social security areas (branches) to which the population of the country has access. Population groups with differing status in the labour market may enjoy different scopes of coverage, and this factor must be taken into account in assessing overall scope.
- Extent. This usually refers to the percentage of people covered within the whole population or the target group (as defined by, for example, gender, age, income level or labour market status) by social security measures in each specific area.
- **Level.** This refers to the adequacy of coverage in a specific branch of social security. It may be measured by the level of cash benefits provided, where measurements of benefit levels can be either absolute or relative to selected benchmark values such as previous incomes, average incomes, the poverty line and so on. For health benefits, it is measured as the range of health services covered and the level of financial protection (support value) provided in relation to those services. Measures of quality are usually relative, and may be objective or subjective - for example, the satisfaction of beneficiaries as compared with their expectations would be a subjective measure.

In measuring coverage, a distinction is made between legal coverage and effective coverage in each of the three dimensions above, so as to reflect different dimensions of coverage. Table A2.1 summarizes these various dimensions.

⁶⁸ Legal coverage is sometimes referred to as "statutory coverage", taking into account that provisions may be rooted in statutory provisions other than laws.

⁶⁹ Access to healthcare is not included.

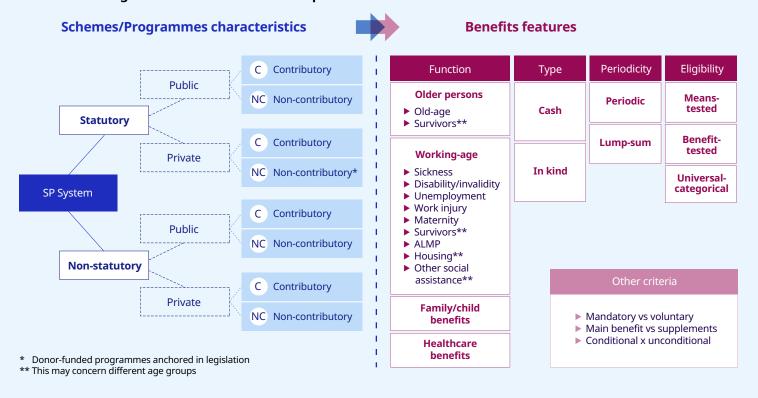
⁷⁰ Excluding sickness benefits and access to healthcare.

Table A2.1 Multiple dimensions of coverage: Examples of questions and indicators

Dimension of coverage	Legal coverage	Effective coverage
Scope	Which social security areas are anchored in the national legislation? For a given group of the population: for which social security area(s) is this group covered according to the national legislation?	In which areas is social security provision actually implemented? For a given group of the population: for which social security areas is this group effectively covered (benefits actually being available)?
Extent	For a given social security area (branch): which categories of the population are covered according to the national legislation? What percentage of the population or labour force is covered according to the national legislation?	For a given social security area (branch): which categories of the population enjoy actual access to benefits in case of need (currently or in the future)? The "beneficiary coverage ratio": for a given social security area, what percentage of the population affected by the contingency receives benefits or services (for example, percentage of older persons receiving an old-age pension; percentage of unemployed receiving unemployment benefits)? The "contributor coverage ratio": for a given social security area, what percentage of the population contributes to the scheme, or is otherwise insured by the scheme, and can thus expect to receive benefits when needed (for example, percentage of working-age population or of the labour force contributing to a pension scheme)? By extension, the "protected person coverage ratio" would include people who, in the future – assuming that legislation is unchanged – would be entitled to a health benefit (as a service user, beneficiary, contributor or dependant, according to the type of national system) or a non-contributory cash benefit, through either a universal scheme or a means-tested scheme, provided they meet the eligibility criteria.
Level Source: Based on ILO (For a given social security area: what is the level of protection provided according to the national legislation? For cash benefits: what is the prescribed amount or replacement rate according to the national legislation? For healthcare benefits: what is the prescribed health package and level of co-payment, if any?	For a given social security area: what is the level of protection actually provided (for example, for cash benefits, average level of benefit as a proportion of median income, minimum wage or poverty line; for health benefits, effective use of services and level of financial protection (affordability))?

Source: Based on ILO (2010).

Figure A2.1. Overview of social protection schemes and benefits characteristics and features



SP = social protection, ALMP = active labour market policies.

The diagnostic overview is used at the stage of data analysis to properly categorize the collected social protection data under schemes and benefits in a country (see figure A2.1).

Legal coverage

Estimates of the scope of legal coverage usually measure the number of social security areas (branches) by which – according to existing national legislation – a population or specific groups within it is or are covered. The list of the nine branches covered by ILO Convention No. 102 is used as guidance.

Estimates of the extent of legal coverage use both information on the groups covered by statutory schemes for a given social security area (branch) in national legislation and available statistical information quantifying the number of people concerned at the national level. A population group can be identified as legally covered in a specific social security area (for example, old age, unemployment protection, maternity protection) if the existing legislation sets out that this group is mandatorily covered by social insurance, or that the group will be entitled to specified non-contributory benefits under certain circumstances – for instance, to an old-age state pension on reaching the age of 65, or to income support if income falls below a specified threshold. A legal coverage ratio for a given branch of social security is the ratio between the estimated number of people legally covered and – as appropriate – the labour force or working-age population in the relevant age range. For example, since Convention No. 102 allows a ratifying country to provide coverage through social insurance, through universal or meanstested benefits, or a combination of these, it also formulates alternatives to minimum requirements for the extent of coverage, as follows:

- 1. prescribed classes of employees, constituting not less than 50 per cent of all employees; or
- 2. prescribed classes of the economically active population, constituting not less than 20 per cent of all residents; or
- 3. all residents whose means during the contingency do not exceed prescribed limits.

For healthcare, the legal coverage estimates the number of people belonging to the population groups identified under the law⁷¹ as covered by the social health protection scheme(s). This takes into account all public or publicly led schemes that

⁷¹ The legal framework of 160 countries representing over 90 per cent of the global population was analysed.

provide a healthcare benefit package to a given population without hardship (that is, effectively committing to a level of financial protection against the costs of healthcare in law or regulation) as a primary cover, both contributory and noncontributory. The provisions for employer liability were also mapped and an estimate is available.

The level of legal coverage for specific branches of social security is usually measured for cash benefits by benefit ratios or replacement ratios calculated for specified categories of beneficiaries, using benefit formulas or benefit amounts specified in the legislation. For example, Convention No. 102 sets minimum replacement rates for cash benefits in seven of the nine specified branches (see tables in Annex 3). It stipulates that such minimum rates should apply to a defined "standard" beneficiary meeting qualifying conditions, and be guaranteed at least to those with earnings up to a certain prescribed selected level. For healthcare benefits, the extent of the prescribed benefit package is necessarily a qualitative indicator against the main components of a comprehensive package as defined in ILO standards, including promotive, preventive, curative and rehabilitative care. The extent of healthcare provision that can be accessed also needs to be stipulated in legislation. The level of co-payment is measured as a percentage of the costs of care left to the patient to cover out of pocket. Currently, data on legal provisions for benefit packages and financial protection are not collected systematically and in a uniform fashion across regions, and therefore could not be reported in this edition of the World Social Protection Report.

Effective coverage

Measurements of effective coverage should reflect how the legal provisions are implemented in reality.⁷² Effective coverage is usually different from (and usually lower than) legal coverage because of non-compliance, problems with enforcement of legal provisions, or other deviations of actual policies from the text of the legislation. In order to arrive at a full coverage assessment, measures of legal and effective coverage need to be used in parallel.

Measurements of the scope of effective coverage in a country reveal the number of social security areas (branches) for which there is relevant legislation that is actually enforced – that is, whether in all such areas the majority of the population legally covered are also effectively covered (as measured by the extent of effective coverage; see below).

When measuring the extent of effective coverage, a distinction has to be made between measurement in terms of protected persons and in terms of actual beneficiaries. Protected persons are those who have benefits guaranteed but are not necessarily currently receiving them – for example, people who contribute to a pension scheme are protected, but not yet receiving a pension. Similarly, people affiliated to a healthcare scheme are effectively protected, although they receive the benefit only when they have a specific health need (for example, immunization, injury or illness).

In respect of protected persons, the contributor coverage ratio reflects, in the case of contributory schemes, the number of those protected should they be affected by the contingency covered, now or in the future: that is, the share of the employed population (or alternatively the population of working age or in the labour force) who contribute directly or indirectly to social insurance in a given social security area and are thus likely to receive benefits when needed. An example is the share of employed people contributing to a pension scheme. The protected person coverage ratio includes all people entitled to benefits (both contributory and non-contributory), assuming no change to legislation. For health benefits, even in contributory schemes, the protection granted usually extends to the dependants of the contributor; hence, for healthcare benefits, the protected persons coverage ratio represents the share of the population protected by a scheme, regardless of whether they are contributing or not. The share of the population protected by social health protection (figure 4.43) reflects this methodology.73

⁷² Based only on statutory schemes.

⁷³ Based on data collected for 127 countries and territories representing over 90 per cent of the world's population. Regional estimates are weighted by the total population. It represents the best estimate of people protected by a healthcare scheme for their primary coverage. Mechanisms include: national health insurance; social health insurance mandated by the State (including subsidized coverage for the poor); national healthcare service guaranteed for free or with small co-payments; and other programmes (user fee waivers, vouchers, and so on). A total of 202 schemes for primary coverage were identified and included. This is substantially more than in 2020. Therefore, in order to generate trends, the 2020 estimates were recalculated including the new countries and schemes for which data points are available in both periods. Only public or publicly mandated privately administered primary healthcare schemes were included. Supplementary public and private programmes were not included. Multiple sources were used for this indicator, including data from ILO Social Security Inquiry and OECD Health Statistics 2023 database, national administrative data published in official reports, and information from regular national surveys of target populations on awareness on rights.

In respect of **actual beneficiaries**, the beneficiary coverage ratio describes the share of the population affected by a certain contingency (such as older people or the unemployed) who actually benefit from the appropriate social protection benefits (in these examples, old-age pensions or unemployment benefits). This ratio reflects the number of those actually receiving benefits, for example the number of recipients of any pension benefits among all residents over the statutory pensionable age, or the number of beneficiaries of some kind of income support among all those unemployed, or all below the poverty line. For healthcare benefits and sickness cash benefits, measurement of actual benefit provision in relation to the occurrence of such contingencies is challenging, and there is no consensus on the optimal methodology to capture these dimensions of coverage.

Measurements of the level of effective coverage aim to identify the levels of benefits (usually related to certain benchmark amounts or benefit packages) actually received by beneficiaries, such as unemployment benefits or pensions paid, compared to average earnings or the minimum wage or the poverty line. In the case of contributory pension schemes, the effective level of benefit may also relate to future (potential) benefit levels. In the case of healthcare, SDG indicator 3.8.1 is an index by which to measure effective access to a range of health services and infrastructure in times of need by a given national population (WHO and World Bank 2017).⁷⁴ When it comes to the level of financial protection afforded when effectively accessing health services, there is an international consensus on the use of out-of-pocket payments made by households on healthcare and its impact on poverty as a proxy indicator for the lack of financial protection, as reflected in SDG indicator 3.8.2 (WHO and World Bank 2017).

When assessing coverage and gaps in coverage, three types of schemes need to be distinguished, namely: (a) contributory social insurance or other types of contributory schemes; (b) universal schemes covering all residents (or all residents in a given category);⁷⁵ and (c) means-tested schemes potentially covering all those who pass the required test of income and/or assets. In the case of social insurance, it makes sense to look at the number of those who are actual members of, and contributors to, such schemes, and who thus potentially enjoy coverage in the event of any of the contingencies covered by their social insurance - sometimes with their dependants. These people fall into a category of persons "protected" in the event of a given contingency. The concept of protected persons may also apply where people are covered by universal or categorical programmes if all residents, or all residents in a given category (for example, a certain age range), are entitled to certain benefits or to free access to social services by law and in practice in the event of the given contingency. It is, however, rather difficult to specify who is in fact effectively protected in the case of benefits granted on the basis of a means test or proxy means test, or in the form of conditional cash transfers.

The above measures of extent and level of coverage are specifically applied to certain areas (branches) of social security (and sometimes even only to specific schemes or types of scheme); they do not attempt to provide a generic measure of social security coverage. Ensuring the specificity of coverage indicators by area is essential to establish a meaningful analysis and ensure its relevance for policy development. In the case of healthcare benefits, the level of benefit coverage needs to encompass both the extent of services used in practice and the financial protection awarded against the costs of healthcare. SDG indicators 3.8.1 (service coverage) and 3.8.2 (catastrophic expenditure on health) are used as proxies to monitor the level of effective coverage along those two dimensions.

Social protection expenditure

Data on social protection expenditure are collected according to different standards around the world, including the International Monetary Fund's Government Finance Statistics (GFS) 2014 standard and other national standards. Figures on social protection expenditure are presented both including and excluding general government expenditure on health, with a view to disaggregating cash and care benefits. The source for general government expenditure is the WHO's Global Health Expenditure Database.^{76,77}

⁷⁴ The additional indicators displayed in this report on health service use and availability are sourced from the WHO Global Health Observatory (methodology and metadata accessible at: <u>https://www.who.int/data/gho</u>), while indicators on the health workforce are calculated using labour force survey data from the ILO–OECD–WHO <u>Working for Health Programme</u>.

⁷⁵ Such schemes are also referred to as categorical schemes.

⁷⁶ https://apps.who.int/nha/database/.

⁷⁷ WHO GHED.

Data on expenditure for this report were obtained from various sources (see table A2.2).

► Table A2.2 Comparison of different definitions used to measure social protection expenditure

Source	Definition	Functions/areas covered
International Monetary Fund (IMF) https://www.imf.org/external/ pubs/ft/gfs/manual/pdf/ ch6ann.pdf	Expenditure on social protection Government outlays on social protection include expenditures on services and transfers provided to individuals and households, and expenditures on services provided on a collective basis. Expenditures on individual services and transfers are allocated to groups 7101 (sickness and disability) to 7107 (social exclusion); expenditures on collective services are assigned to groups 7108 (research and development Social Protection) and 7109 (Social Protection not elsewhere classified). Collective social protection services are concerned with matters such as formulation and administration of government policy; formulation and enforcement of legislation and standards for providing social protection; and applied research and experimental development into social protection affairs and services.	Sickness, disability, old age, survivors, family and children, unemployment, housing, social exclusion (social assistance), research on social protection, general administrative expenditure on social protection.
Organisation for Economic Co-operation and Development (OECD) https://data.oecd.org/ socialexp/social-spending.htm https://data.oecd.org/ healthres/health-spending. htm	<i>Expenditure on social protection</i> Social expenditure comprises cash benefits, direct in-kind provision of goods and services, and tax breaks with social purposes. Benefits may be targeted at low-income households, the elderly, disabled, sick, unemployed or young people. To be considered "social", programmes have to involve either redistribution of resources across households or compulsory participation. Social benefits are classified as public when general government (that is, central, state and local governments, including social security funds) controls the relevant financial flows. All social benefits not provided by general government are considered private. Private transfers between households are not considered as "social" and not included here.	Old age, survivors', incapacity-related and family benefits; active labour market policies; unemployment and housing benefits; and benefits in other social policy areas.

► Table A2.2 (cont'd)

Source	Definition	Functions/areas covered
United Nations Economic Commission for Latin America and the Caribbean (UNECLAC) http://estadisticas.cepal.org/ cepalstat/WEB_CEPALSTAT/ MetodosClasificaciones. asp?idioma=i	Expenditure on social protection UNECLAC uses the EUROSTAT/OECD definition. See "Classification of final expenditure on GDP" at <u>https://</u> www.oecd-ilibrary.org/economics/ eurostat-oecd-methodological- manual-on-purchasing-power- parities_9789264011335-en	Older people, disabled people, people suffering from occupational injuries and diseases, survivors, unemployed, destitute, family and children, homeless, low-income earners, indigenous people, immigrants, refugees, alcohol and substance abusers, etc.
Government Spending Watch (GSW) http://www. governmentspendingwatch. org/research-analysis/ social-protection	<i>Expenditure on social protection</i> All government spending which boosts economic development for the poor and promotes inclusive and employment- intensive growth that can help meet this goal. Government Spending Watch data focus on the direct government interventions that have been most effective in reducing poverty and providing employment, known as "social protection" spending.	Social safety nets, social funds, social welfare assistance/ services, labour market interventions and social Insurance programmes (including pensions). Excludes all social services provided by government that could be classified as education or health, nutrition, or water, sanitation and hygiene.
Asian Development Bank (ADB) https://www.adb.org/ sites/default/files/ publication/632971/ki2020. pdf	<i>Expenditure on social protection</i> Government expenditure on social protection includes expenditure on services and transfers provided to individuals and households, and expenditure on services provided on a collective basis. Expenditure on social protection is allocated to sickness and disability, old age, survivors, family and children, unemployment, housing, social exclusion not elsewhere classified, and social protection research and development.	Sickness, disability, old age, survivors, unemployment, etc.
World Health Organization (WHO) http://apps.who.int/gho/data/ node.wrapper.imr?x-id=1	Expenditure on health General government expenditure on health comprises the sum of health outlays paid for in cash or supplied in kind by government entities, such as ministries of health, other ministries, parastatal organizations or social security agencies (without double counting government transfers to social security and extrabudgetary funds). It includes all expenditure made by these entities, regardless of the source, so any donor funding passing through them is included. It also includes transfer payments to households to offset medical care costs, extrabudgetary funds to finance health services and goods, and both current and capital expenditure.	Health

► Table A2.2 (cont'd)

Source	Definition	Functions/areas covered
National	<i>Expenditure on social protection</i> When the source is national expenditure on social protection it is taken from the <u>Social Security Inquiry</u> or other national sources. In this context, in-kind benefits are often excluded.	Sickness, disability, old age, survivors, unemployment, etc.

Global and regional estimates

Regional results for effective and legal coverage indicators are obtained as averages of figures from countries in each region weighted by the population group concerned. For effective coverage, estimates are based on administrative data produced by the countries and collected via the ILO Social Security Inquiry. For SDG regions with insufficient country coverage, imputations were used. Regional and global estimates were produced in cooperation with the ILO Department of Statistics (see methodological details below). Regional results for expenditure indicators are obtained as averages of figures from countries in each region weighted by the total GDP of the corresponding country. The GDP data used were current GDP in US dollars according to the IMF.

Regional and income groupings

The regional and income groupings used are listed in tables A2.3 and A2.4. Maps are built using the United Nations template.¹

► Table A2.3 Regional groupings

Region	Subregion (broad)	Countries and territories
-	-	
Africa	Northern Africa	Algeria, Egypt, Libya, Morocco, Sudan, Tunisia, Western Sahara
	Sub-Saharan Africa	Angola, Benin, Botswana, Burkina Faso, Burundi, Cabo Verde, Cameroon, Central African Republic, Chad, Comoros, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Djibouti, Equatorial Guinea, Eritrea, Eswatini, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mauritius, Mayotte, Mozambique, Namibia, Niger, Nigeria, Réunion, Rwanda, Saint Helena, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, Somalia, South Africa, South Sudan, Sudan, Tanzania (United Republic of), Togo, Uganda, Zambia, Zimbabwe
Americas	Latin America and the Caribbean	Anguilla, Antigua and Barbuda, Argentina, Aruba, Bahamas, Barbados, Belize, Bolivia (Plurinational State of), Brazil, British Virgin Islands, Cayman Islands, Chile, Colombia, Costa Rica, Cuba, Curaçao, Dominica, Dominican Republic, Ecuador, El Salvador, Falkland Islands (Malvinas), French Guiana, Grenada, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Jamaica, Martinique, Mexico, Montserrat, Netherlands Antilles, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts and Nevis, Saint Lucia, Saint Martin (France), Saint Vincent and the Grenadines, Sint Maarten (Kingdom of the Netherlands), Suriname, Trinidad and Tobago, Turks and Caicos Islands, United States Virgin Islands, Uruguay, Venezuela (Bolivarian Republic of)

The designations employed in ILO publications and databases, which are in conformity with United Nations practice, and the presentation of material therein do not imply the expression of any opinion whatsoever on the part of the ILO concerning the legal status of any country, area or territory or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. The final status of the Abyei area, which is enclosed with dotted lines, is not yet determined. A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas). Non-self-governing territories have been demarcated with (*).

Non-metropolitan territories, for whom a declaration has been submitted in accordance with Article 35 of the ILO Constitution, are contained in the ILO's Information System on International Labour Standards (NORMLEX).

► Table A2.3 (cont'd)

Region	Subregion (broad)	Countries and territories
	Northern America	Bermuda, Canada, Greenland, Saint Pierre and Miquelon, United States
Arab States	Arab States	Bahrain, Iraq, Jordan, Kuwait, Lebanon, Occupied Palestinian Territory, Oman, Qatar, Saudi Arabia, Syrian Arab Republic, United Arab Emirates, Yemen
Asia and the Pacific	Eastern Asia	China, Hong Kong (China), Japan, Korea (Democratic People's Republic of), Macao (China), Mongolia, Republic of Korea, Taiwan (China)
	South-Eastern Asia and the Pacific	American Samoa, Australia, Brunei Darussalam, Cambodia, Cook Islands, Fiji, French Polynesia, Guam, Indonesia, Kiribati, Lao People's Democratic Republic, Malaysia, Marshall Islands, Micronesia (Federated States of), Myanmar, Nauru, New Caledonia, New Zealand, Niue, Norfolk Island, Northern Mariana Islands, Palau Islands, Papua New Guinea, Philippines, Samoa, Singapore, Solomon Islands, Thailand, Timor-Leste, Tokelau, Tonga, Tuvalu, Vanuatu, Viet Nam, Wallis and Futuna Islands
	Southern Asia	Afghanistan, Bangladesh, Bhutan, India, Iran (Islamic Republic of), Maldives, Nepal, Pakistan, Sri Lanka
Europe and Central Asia	Northern, Southern and Western Europe	Albania, Andorra, Austria, Belgium, Bosnia and Herzegovina, Channel Islands, Croatia, Denmark, Estonia, Faeroe Islands, Finland, France, Germany, Gibraltar, Greece, Guernsey, Iceland, Ireland, Isle of Man, Italy, Jersey, Kosovo, ¹ Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Monaco, Montenegro, Netherlands, North Macedonia, Norway, Portugal, San Marino, Serbia, Slovenia, Spain, Sweden, Switzerland, United Kingdom
	Eastern Europe	Belarus, Bulgaria, Czechia, Hungary, Poland, Republic of Moldova, Romania, Russian Federation, Slovakia, Ukraine
	Central and Western Asia	Armenia, Azerbaijan, Cyprus, Georgia, Israel, Kazakhstan, Kyrgyzstan, Tajikistan, Türkiye, Turkmenistan, Uzbekistan

Note: Figures do not always include all the countries and territories in a region because of missing information or unreliable data.

► Table A2.4 Income groupings

Income group	Countries and territories
High-income	Andorra, American Samoa, Antigua and Barbuda, Aruba, Australia, Austria, Bahamas, Bahrain, Barbados, Belgium, Bermuda, British Virgin Islands, Brunei Darussalam, Canada, Cayman Islands, Channel Islands, Chile, Croatia, Curaçao, Cyprus, Czechia, Denmark, Estonia, Falkland Islands (Malvinas), Faroe Islands, Finland, France, French Guiana, French Polynesia, Germany, Gibraltar, Greece, Greenland, Guam, Guernsey, Guyana, Hong Kong (China), Hungary, Iceland, Ireland, Isle of Man, Israel, Italy, Japan, Jersey, Kuwait, Latvia, Liechtenstein, Lithuania, Luxembourg, Macao (China), Malta, Martinique, Monaco, Nauru, Netherlands, Netherlands Antilles, New Caledonia, New Zealand, Niue, Norfolk Island, Northern Mariana Islands, Norway, Oman, Panama, Poland, Portugal, Puerto Rico, Qatar, Republic of Korea, Réunion, Romania, Saint Kitts and Nevis, St Martin (French part), Saint Pierre and Miquelon, San Marino, Saudi Arabia, Seychelles, Singapore, Sint Maarten (Dutch part), Slovakia, Slovenia, Spain, Sweden, Switzerland, Taiwan (China), Trinidad and Tobago, Turks and Caicos Islands, United Arab Emirates, United Kingdom, United States, United States Virgin Islands, Uruguay, Wallis and Futuna

¹ As defined in UN Security Council resolution 1244 of 1999.

Income group	Countries and territories
Upper-middle- income	Albania, Anguilla, Argentina, Armenia, Azerbaijan, Belarus, Belize, Bosnia and Herzegovina, Botswana, Brazil, Bulgaria, China, Colombia, Cook Islands, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Equatorial Guinea, Fiji, Gabon, Georgia, Grenada, Guadeloupe, Guatemala, Indonesia, Iraq, Jamaica, Kazakhstan, Kosovo, ² Libya, Malaysia, Maldives, Marshall Islands, Mauritius, Mexico, Montenegro, Montserrat, Namibia, North Macedonia, Occupied Palestinian Territory, Palau, Paraguay, Peru, Republic of Moldova, Russian Federation, Saint Lucia, Saint Vincent and the Grenadines, Serbia, South Africa, Suriname, Thailand, Tonga, Türkiye, Turkmenistan, Tuvalu, Venezuela (Bolivarian Republic of)
Lower-middle- income	Algeria, Angola, Bangladesh, Benin, Bhutan, Bolivia (Plurinational State of), Cabo Verde, Cambodia, Cameroon, Comoros, Congo, Côte d'Ivoire, Djibouti, Egypt, Eswatini, Ghana, Guinea, Haiti, Honduras, India, Iran (Islamic Republic of), Jordan, Kenya, Kiribati, Kyrgyzstan, Lao People's Democratic Republic, Lebanon, Lesotho, Mauritania, Mayotte, Micronesia (Federated States of), Mongolia, Morocco, Myanmar, Nepal, Nicaragua, Nigeria, Pakistan, Papua New Guinea, Philippines, Saint Helena, Samoa, Sao Tome and Principe, Senegal, Solomon Islands, Sri Lanka, Tajikistan, Tanzania (United Republic of), Timor-Leste, Tunisia, Ukraine, Uzbekistan, Vanuatu, Viet Nam, Western Sahara, Zambia, Zimbabwe
Low-income	Afghanistan, Burkina Faso, Burundi, Central African Republic, Chad, Democratic Republic of the Congo, Eritrea, Ethiopia, Gambia, Guinea-Bissau, Korea (Democratic People's Republic of), Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Rwanda, Sierra Leone, Somalia, South Sudan, Sudan, Syrian Arab Republic, Togo, Uganda, Yemen

► Table A2.4 (cont'd)

Note: Figures do not always include all the countries in a region because of missing information or unreliable data. World Bank income level classification accessed on 31 January 2024.

Estimating global and regional aggregates of social protection indicators: Methodological description

The global and regional estimates presented in this report are based on econometric models designed to impute missing data when nationally reported data are unavailable. The output of the models is a complete time series modelled estimates for eight social protection coverage rates disaggregated by sex for 189 countries and territories from 2009 to 2023. The countrylevel estimates (reported and imputed) are then aggregated to produce global and regional estimates of the social protection indicators.

Data coverage

Input data used in the model were collected through the ILO Social Security Inquiry. The number of countries with at least one year of data reported included in the global and regional estimations is as follows: overall coverage by social protection (at least one year data point available between 2009 and 2023), 181 countries; older persons, 183 countries; persons with severe disabilities, 165 countries; mothers with newborns, 161 countries; children, 169 countries; unemployed, 177 countries; vulnerable population, 171 countries; employment injury, 169 countries. Detailed information on the share of the global and regional populations for which data were reported to the ILO through the Social Security Inquiry is provided in table A2.8 for each indicator.

Description of the econometric model

For each social protection coverage rate, there are two main econometric models for which regional and global aggregates are generated. For countries for which at least one data point exists, the imputations are created using a country fixed effect model. In contrast, in countries with no available data, imputations are created through a fixed effect using the interaction of three variables: gender, year and regions (older persons, disability, and unemployment coverage); gender, year and income groups (total and maternity coverage); or gender, year and a dummy for developing economies (vulnerable,

² As defined in UN Security Council resolution 1244 of 1999.

children, and injuries coverage). The two distinct models are chosen from an array of models based on the cross-validation methodology, which selects the models with the highest accuracy in predicting the coverage rates in pseudo out-of-sample simulations. The models use as explanatory variables: log GDP per capita; the share of government spending as a percentage of GDP; the share of population under the age of 15; labour force participation, self-employment, and informality rates; and subregional and income group dummies. As the old-age coverage indicator has greater data coverage than the other indicators, it is the first indicator estimated and its modelled estimates are later included as an explanatory variable for the overall social protection coverage rate. In turn, the overall coverage modelled estimate is then used as an explanatory variable for the rest of the indicators (except for coverage for older persons). After the predictions of the fixed effect models described above, a moving average smoothing function is applied, followed by a linear interpolation and extrapolation to shift estimated coverage rates to match the observed data.

Moreover, since the model predictions are disaggregated by sex, female and male estimates are rebalanced to ensure that the implied total sex rate obtained from summing the demographic breakdowns match the total rate as the one collected from the ILO Social Security Inquiry.

Table A2.5 Regional groupings used in the regressions

Africa
Americas
Arab States
Asia and the Pacific
Europe and Central Asia

Note: Regional groupings in the regression are based on the ILO classification of geographical regions.

Table A2.6 Income groups used in the regressions

Low-income
Lower-middle-income
Upper-middle-income
High-income

Method of producing global and regional aggregates

The regional and global aggregates are obtained by weighted averages of the underlying countrylevel estimates (reported or imputed). The weights used for each coverage rate, which are equivalent to the denominators for each rate, are listed in table A2.7.

Table A2.8 contains figures on data coverage by ILO regional classifications for each indicator based on data reported through the aggregation of denominators or weights listed in table A2.7.

► Table A2.7 Denominator for each indicator

Indicator	Denominator	Source of denominator
Overall coverage	Total population	UN, <i>World Population Prospects</i> , 2022 revision
Older persons	Population aged 65 and above	UN, <i>World Population Prospects</i> , 2022 revision
Persons with severe disabilities	Total population	UN, <i>World Population Prospects</i> , 2022 revision
Mothers with newborns	Female population aged 15–49	UN, <i>World Population Prospects</i> , 2022 revision
Children	Population aged 0–14	UN, <i>World Population Prospects</i> , 2022 revision
Unemployed	Total unemployed	ILO modelled estimates, November 2023 edition
Vulnerable population	Total population	UN, <i>World Population Prospects</i> , 2022 revision
Employment injury	Total employed	UN, <i>World Population Prospects</i> , 2022 revision

Table A2.8 Data coverage underlying global and regional aggregates (share of regional population in 2023 for which at least	
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Region	Aggregate estimate	Persons with severe	Vulnerable persons	Older persons	Mothers with	Children	Unemployed	Employment iniurv
		disabilities			newborns			•
World	0.99	0.96	0.98	1.00	0.91	0.95	0.99	0.98
Africa	0.99	0.86	0.93	1.00	0.85	0.89	0.98	0.95
Americas	1.00	0.98	0.97	1.00	0.62	0.96	0.99	0.98
Arab States	0.87	0.85	0.87	1.00	0.86	0.65	0.86	1.00
Asia and the Pacific	0.99	0.99	66.0	0.99	0.99	0.99	0.99	0.99
Europe and Central Asia	1.00	1.00	66.0	1.00	1.00	0.99	1.00	0.96
Broad subregion								
Northern Africa	1.00	1.00	0.85	1.00	0.97	1.00	1.00	0.97
Sub-Saharan Africa	0.99	0.83	0.95	1.00	0.82	0.87	0.97	0.95
Latin America and the Caribbean	1.00	0.97	0.96	1.00	0.88	0.95	0.99	0.96
Northern America	1.00	1.00	1.00	1.00	0.10	1.00	1.00	1.00
Arab States	0.87	0.85	0.87	1.00	0.86	0.65	0.86	1.00
South-Eastern Asia and the Pacific	1.00	1.00	1.00	1.00	0.98	0.98	1.00	1.00
Southern Asia	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
Northern, Southern and Western Europe	1.00	1.00	1.00	1.00	1.00	1.00	1.00	0.99
Eastern Europe	1.00	1.00	0.97	1.00	1.00	0.97	1.00	0.89
Central and Western Asia	1.00	1.00	1.00	1.00	1.00	1.00	0.98	1.00

Sources of data

This report is based on the ILO World Social Protection Database,¹ which provides in-depth country-level statistics on various dimensions of social security or social protection systems, including key indicators for policymakers, officials of international organizations and researchers, including the United Nations monitoring of the SDGs.

Most of the data in the ILO World Social Protection Database are collected through the ILO Social Security Inquiry, the ILO's periodic collection of administrative data from national ministries of labour, social security, welfare, social development, finance and other areas. The Social Security Inquiry questionnaires and manual are available <u>online</u>.

For measuring legal coverage, the main source is the ISSA <u>Social Security Programs Throughout the</u> <u>World</u>, used in combination with labour force and working-age population data from ILOSTAT.

Other data sources include the following:

- For indicators of effective coverage: existing global social protection statistics, including those of Eurostat, the World Bank ASPIRE database, UNICEF, UN Women and ISSA.
- For indicators of legal coverage: HelpAge International, and the Mutual Information System on Social Protection (MISSOC).
- For health coverage: WHO Global Health Observatory Data Repository; UN, World

Population Prospects, 2022 revision; World Bank, World Development Indicators and Global Consumption Database.

- For indicators on expenditure: the GDP data used are current GDP in US dollars according to the World Bank; data on expenditure from the International Monetary Fund (IMF), Eurostat, OECD, UN Economic Commission for Latin America and the Caribbean (UNECLAC), Asian Development Bank (ADB), Government Spending Watch (GSW), WHO Global Health Expenditure Database and national sources such as ministries of finance and/or economics.
- For population and labour market indicators: ILOSTAT; UN, World Population Prospects, 2022 revision. Definitions used for these indicators are available in the resolution concerning statistics of work, employment and labour underutilization, 19th International Conference of Labour Statisticians (ICLS), October 2013.² The ILO World Social Protection Database also draws on national official reports and other sources (which usually are largely based on administrative data) and on survey data from a range of sources including national household income and expenditure surveys, labour force surveys, and demographic and health surveys, to the extent that these include variables on social protection.

Where new data from the above-mentioned sources were not available, data from previous editions of the *World Social Protection Report* were used.

¹ The data are disseminated through the ILO <u>World Social Protection Data</u> dashboards with interactive graphs, maps and tables.

² See <u>https://www.ilo.org/media/456076/download</u>.

Annex 3. Minimum requirements in international social security standards

International social security standards have come to be recognized globally as key references for the design of rights-based, sound and sustainable social protection schemes and systems. They also give meaning and definition to the content of the right to social security as laid down in international human rights instruments (notably the Universal Declaration of Human Rights, 1948, and the International Covenant on Economic, Social and Cultural Rights, 1966), thereby constituting essential tools for the realization of this right and the effective implementation of a rights-based approach to social protection. International social security standards are primarily tools for governments which, in consultation with employers and workers, are seeking to draft and implement social security law, establish administrative and financial governance frameworks, and develop social protection policies. More specifically, these standards serve as key references for:

- the elaboration of national social protection policies, including social security extension strategies;
- the development and maintenance of comprehensive national social protection systems and the progressive achievement of universal social protection;
- the design and parametric adjustment of (contributory or tax-financed) social security schemes;
- the establishment and implementation of effective recourse, enforcement and compliance mechanisms;
- the good governance of social security and improvement of administrative and financial structures;
- the realization of international and regional obligations, and the operationalization of national social protection strategies and action plans; and
- working towards the achievement of the SDGs, particularly Goals 1, 3, 5, 8, 10 and 16.

The ILO's normative social security framework consists of nine up-to-date Conventions and

nine Recommendations.³ The most prominent of these are the Social Security (Minimum Standards) Convention, 1952 (No. 102), and the Social Protection Floors Recommendation, 2012 (No. 202). Other Conventions and Recommendations set higher standards in respect of the different social security branches, or spell out the social security rights of migrant workers. ILO standards establish qualitative and quantitative benchmarks which together determine the minimum standards of social security protection to be provided by social security schemes in certain life contingencies, with regard to:

- the definition of the contingency (what risk or life circumstance must be covered?);
- the individuals protected (who must be covered?);
- the type and level of benefits (what should be provided?);
- any entitlement conditions, including any qualifying period (what should a person do to get the right to a benefit?); and
- the duration of benefit and any waiting period (how long must the benefit be paid/provided for, and when must it commence?).

In addition, they set out common rules of collective organization, financing and management of social security, as well as principles for the good governance of national systems. These include:

- the general responsibility of the State for the due provision of benefits and proper administration of social security systems;
- solidarity, collective financing and risk pooling;
- participatory management of social security schemes;
- guarantee of defined benefits;
- adjustment of pensions in payment to maintain the purchasing power of beneficiaries; and
- the right to complain and appeal.

Tables A3.1 to A3.9 provide a summary overview of some of the key requirements set out in ILO standards.

³ Workmen's Compensation (Agriculture) Convention 1921 (No. 12); Income Security Recommendation 1944 (No. 67); Medical Care Recommendation, 1944 (No. 69); Social Security (Minimum Standards) Convention, 1952 (No. 102); Equality of Treatment (Social Security) Convention, 1962 (No. 118); Employment Injury Benefits Convention, 1964 (No. 121) and Recommendation, 1964 (No. 121); Invalidity, Old-Age and Survivors' Benefits Convention, 1967 (No. 128) and Recommendation, 1967 (No. 131); Medical Care and Sickness Benefits Convention, 1969 (No. 130) and Recommendation, 1969 (No. 134); Maintenance of Social Security Rights Convention, 1982 (No. 157) and Recommendation, 1983 (No. 167); Employment Promotion and Protection against Unemployment Convention, 1988 (No. 168) and Recommendation, 1988 (No. 176); Maternity Protection Convention, 2000 (No. 183) and Recommendation, 2000 (No. 191); and Social Protection Floors Recommendation, 2012 (No. 202). These instruments are reproduced in the compendium *Building social protection systems: International standards and human rights instruments* (ILO 2021c).

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	Convention No. 102: Minimum standards	Convention No. 130 ^ª and Recommendation No. 134 ^b : Advanced standards	Recommendation No. 202: Basic protection
What should be covered?	Any ill-health condition, whatever its cause; pregnancy, childbirth and their consequences.	The need for medical care of a curative and preventive nature.	Any condition requiring healthcare, including maternity.
Who should be covered?	At least: 50% of all employees, and wives and children; or categories of the economically active population (forming not less than 20% of all residents, and wives and children); or 50% of all residents. 	 C.130: All employees, including apprentices, and their wives and children; <i>or</i> categories of the active population forming not less than 75% of the whole active population, and their wives and children; or prescribed class(es) of residents forming not less than 75% of all residents. (Persons already receiving certain social security benefits shall also continue to be protected under prescribed conditions.) R.134: In addition: persons in casual employers' families living in their house and working for them, all economically active persons and their families, all residents. 	At least all residents and children, subject to the country's existing international obligations.
What should the benefit be?	<i>In case of ill health</i> : general practitioner care, specialist care at hospitals, essential medications and supplies; hospitalization if necessary. <i>In case of pregnancy, childbirth and their consequences</i> : prenatal, childbirth and postnatal care by medical practitioners and qualified midwives; hospitalization if necessary.	 C.130: The medical care required by the person's condition, with a view to maintaining, restoring or improving health and ability to work and attend to personal needs, including at least: general practitioner care, specialist care at hospitals, allied care and benefits, essential medical supplies, hospitalization if necessary, dental care and medical rehabilitation. R.134: Also the supply of medical aids (for example, eyeglasses) and services for example, eyeglasses) and services for 	Goods and services constituting at least essential healthcare, including maternity care, meeting accessibility, availability, acceptability and quality criteria; free prenatal and postnatal medical care for the most vulnerable; higher levels of protection should be provided to as many people as possible, as soon as possible.

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	Convention No. 102: Minimum standards	Convention No. 130 ^a and Recommendation No. 134 ^b : Advanced standards	Recommendation No. 202: Basic protection
What should the benefit duration be?	As long as ill health, or pregnancy and childbirth and their consequences, persist. May be limited to 26 weeks in each case of sickness. Benefit should not be suspended while beneficiary receives sickness benefits or is treated for a disease recognized as requiring prolonged care.	 C.130: Throughout the contingency. May be limited to 26 weeks where a beneficiary ceases to belong to the categories of persons protected, unless he/she is already receiving medical care for a disease requiring prolonged care, or as long as he/she is paid a cash sickness benefit. R.134: Throughout the contingency. 	As long as required by the health status.
What conditions can be prescribed for entitlement to a benefit?	Qualifying period may be prescribed as necessary to preclude abuse.	 C.130: Qualifying period shall be such as not to deprive of the right to benefits persons who normally belong to the category. R.134: Right to benefit should not be subject to qualifying period. 	Persons in need of healthcare should not face hardship and an increased risk of poverty due to financial consequences of accessing essential healthcare. Should be defined at the national level and prescribed by law, applying principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of people.
^a Medical Care and Sickn	^a Medical Care and Sickness Benefits Convention, 1969 (No. 130).		

^b Medical Care and Sickness Benefits Recommendation, 1969 (No. 134).

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	Convention No. 102: Minimum standards	Convention No. 130 and Recommendation No. 134: Advanced standards	Recommendation No. 202: Basic protection
What should be covered?	Incapacity to work resulting from illness that results in the suspension of income.	 C.130: Incapacity to work resulting from sickness and involving suspension of earnings. R.134: Also covers periods of absence from work resulting in loss of earnings due to convalescence, curative or preventive medical care, rehabilitation or quarantine, or due to caring for dependants. 	At least basic income security for those who are unable to earn a sufficient income due to sickness.
Who should be protected?	At least: 50% of all employees; <i>or</i> categories of the economically active population (forming not less than 20% of all residents); <i>or</i> all residents with means under a prescribed threshold.	 C.130: All employees, including apprentices; or or categories of economically active population (forming not less than 75% of whole economically active population); or all residents with means under prescribed threshold. R.134: Extension to persons in casual employment, members of employers' families living in their house and working for them, all economically active persons, all residents. 	At least all residents of working age, subject to the country's existing international obligations.
What should be the benefit?	<i>Periodic payments:</i> at least 45% of reference wage.	C.130 : Periodic payments: at least 60% of reference wage; in case of death of the beneficiary, benefit for funeral expenses. R.134 : Benefit should be 66.66% of reference wage.	Benefits in cash or in kind at a level that ensures at least basic income security, so as to secure effective access to necessary goods and services; prevents or alleviates poverty, vulnerability and social exclusion; and enables life in dignity. Levels should be regularly reviewed.

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	Convention No. 102: Minimum standards	Convention No. 130 and Recommendation No. 134: Advanced standards	Recommendation No. 202: Basic protection
What should the benefit duration be?	As long as the person remains unable to engage in gainful employment due to illness; possible waiting period of a maximum of three days before benefit is paid; benefit duration may be limited to 26 weeks in each case of sickness.	 C.130: As long as the person remains unable to engage in gainful employment due to illness; possible waiting period of a maximum of three days before benefit is paid; benefit duration may be limited to 52 weeks in each case of sickness. R.134: Benefit should be paid for full duration of sickness or other contingencies covered. 	As long as the incapacity to earn a sufficient income due to sickness remains.
What conditions can be prescribed for entitlement to a benefit?	Qualifying period may be prescribed as necessary to prevent abuse.	C.130 : Qualifying period may be prescribed as necessary to prevent abuse.	Should be defined at the national level, and prescribed by law, applying principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of people.

► Table A3.3 Main requirements: ILO social security standards on unemployment protection

	Convention No. 102: Minimum standards	Convention No. 168 ^ª and Recommendation No. 176 ^b : Advanced standards	Recommendation No. 202: Basic protection
What should be covered?	Suspension of earnings due to inability to find suitable employment for capable and available person.	 C.168: Loss of earnings due to inability to find suitable employment for capable and available person actively seeking work. Protection should be extended to loss of earnings due to partial unemployment, suspension or reduction of earnings due to temporary suspension of work, as well as part-time workers seeking full-time work. R.176: Provides guidance for assessing suitability of potential employment. 	At least basic income security for those who are unable to earn sufficient income in case of unemployment.
Who should be protected?	At least: 50% of all employees; <i>or</i> all residents with means under prescribed threshold. 	 C.168: At least 85% of employees, including public employees and apprentices; all residents with means under prescribed threshold. Coverage should be extended to part-time workers and at least three of the ten listed categories of persons seeking work who have never been, or have ceased to be, recognized as unemployed or covered by unemployment protection schemes. R.176: Coverage should be extended progressively to all employees as well as to persons experiencing hardship during waiting period. 	At least all residents of working age, subject to the country's existing international obligations.

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	Convention No. 102: Minimum standards	Convention No. 168 ^ª and Recommendation No. 176 ^b : Advanced standards	Recommendation No. 202: Basic protection
What should be the benefit?	Periodic payments; at least 45% of reference wage.	 C.168: Periodic payments: at least 50% of reference wage; or total benefits must guarantee the beneficiary healthy and reasonable living conditions. R.176: For partial employment: total benefit and earnings from the part-time work should reach a sum between previous earnings from full-time work and the amount of full unemployment benefit, or be calculated in the light of reduction of hours of work suffered. 	Benefits in cash or in kind at a level that ensures at least basic income security, so as to secure effective access to necessary goods and services; prevents or alleviates poverty, vulnerability and social exclusion; and enables life in dignity.
What should the benefit duration be?	<i>For schemes covering employees</i> : At least 13 weeks of benefits within a period of 12 months. <i>For means-tested (noncontributory) schemes</i> : At least 26 weeks within a period of 12 months. Possible waiting period of a maximum of seven days.	 C.168: Throughout the unemployment period: possibility to limit initial duration of payment of the benefit to 26 weeks in each case of unemployment or 39 weeks over any period of 24 months; possible waiting period of a maximum of seven days. R.176: Benefit duration should be extended until pensionable age for unemployed persons having reached a prescribed age. 	As long as the incapacity to earn a sufficient income remains.
What conditions can be prescribed for entitlement to a benefit?	What conditions Qualifying period may be prescribed as C.168: Qualif can be prescribed necessary to prevent abuse. as necessary for entitlement R.176: Qualif to a benefit? or waived for	 C.168: Qualifying period may be prescribed as necessary to prevent abuse. R.176: Qualifying period should be adapted or waived for new jobseekers. 	Should be defined at the national level, and prescribed by law, applying principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of people.

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^b Employment Promotion and Protection against Unemployment Recommendation, 1988 (No. 176).

► Table A3.4 Main requirements: ILO social security standards on income security in old age (old-age pensions)

	Convention No. 102:	Convention No. 128 ^a	Recommendation No. 202:
	Minimum standards	and Recommendation No. 131 [°] : Advanced standards	Basic protection
What should be covered?	Survival beyond a prescribed age (65 years old or higher according to working ability of elderly persons in country).	 C.128: Survival beyond a prescribed age (65 years old or higher with due regard to demographic, economic and social criteria). Also, the prescribed age should be lower than 65 years old for persons with occupations deemed arduous or unhealthy. R.131: In addition, the prescribed age should be lowered based on social grounds. 	At least basic income security for older persons.
Who should be protected?	 At least: 50% of all employees; or categories of economically active population (forming not less than 20% of all residents); or all residents with means under prescribed threshold. 	 C.128: All employees, including apprentices; or or categories of economically active population (forming at least 75% of whole economically active population); or all residents; or all residents; or residents with means under prescribed threshold. R.131: Coverage should be extended to persons whose employment is of a casual nature; or all economically active persons. (Benefits should not be suspended solely for reason of being absent from the territory.) 	All residents of a nationally prescribed age, subject to the country's existing international obligations.
What should be the benefit?	<i>Periodic payments</i> : at least 40% of reference wage; to be adjusted following substantial changes in general level of earnings which result from substantial changes in the cost of living.	 C.128: Periodic payments: at least 45% of reference wage; to be adjusted following substantial changes in general level of earnings or in the cost of living. R.131: At least 55% of reference wage; minimum amount of old-age benefit should be fixed by legislation to ensure a minimum standard of living; level of benefit should be increased if beneficiary requires constant help. 	Benefits in cash or in kind at a level that ensures at least basic income security, so as to secure effective access to necessary goods and services; prevent or alleviate poverty, vulnerability and social exclusion; and enable life in dignity. Levels should be regularly reviewed.

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tion No. 202: on		From the nationally prescribed age to the death of beneficiary.	Should be defined at national level and prescribed by law, applying the principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of older persons.
Recommendation No. 202: Basic protection		From the nationally l death of beneficiary.	Should be defi prescribed by of non-discrim special needs ensuring the r persons.
Convention No. 128ª and Recommendation No. 131 ^b : Advanced standards	The amount of benefits should be periodically adjusted taking account of changes in the general level of earnings or the cost of living. (Level of benefits should be increased under certain conditions, if the person who has reached pensionable age defers either their retirement or their claim to benefits.) Benefits provided through a contributory scheme should not be suspended solely because the person entitled to the benefits is gainfully occupied.	From the prescribed age to the death of beneficiary.	 C.128: Same as C.102. R.131: 20 years of contributions or employment (for contributory schemes) or 15 years of residence (for non-contributory schemes). Entitlement to a reduced benefit after ten years of contribution or employment. Periods of incapacity due to sickness, accident or maternity, and periods of involuntary unemployment, in respect of which benefit was paid, and compulsory military service, should be incorporated in periods of contribution or employment for purposes of calculating fulfilment of qualifying period.
Convention No. 102: Minimum standards		From the prescribed age to the death of beneficiary.	30 years of contributions or employment (for contributory schemes) or 20 years of residence (for non-contributory schemes); <i>or</i> , if all economically active persons (EAPs) are covered, a prescribed qualifying period and meet the required yearly average contributory density throughout the career. Entitlement to a reduced benefit after 15 years of contributions <i>or</i> employment; <i>or</i> , if all EAPs are covered, a prescribed qualifying period and meet half the required yearly average contributory density throughout the career.
		What should the benefit duration be?	What conditions can be prescribed for entitlement to a benefit?

► Table A3.5 Main requirements: ILO social security standards on employment injury protection

	Convention No. 102: Minimum standards	Convention No. 121ª and Recommendation No. 121 ^b : Advanced standards	Recommendation No. 202: Basic protection
What should be covered?	Ill health and/or incapacity for work due to work-related accident or disease, resulting in suspension of earnings; total loss of earning capacity or partial loss at a prescribed degree, likely to be permanent, or corresponding loss of faculty; loss of support for the family in case of death of breadwinner.	C.121 : Same as C.102 .	At least basic income security for those who are unable to earn a sufficient income due to employment injury.
Who should be protected?	At least 50% of all employees and their wives and children.	 C.121: All public and private sector employees, including members of cooperatives and apprentices; in case of death, spouse, children and other dependants as prescribed. R.121: Coverage should be extended progressively to all categories of employees, other categories of workers and other dependent family members (parents, brothers and sisters, and grandchildren). 	At least all residents of working age, subject to the country's existing international obligations.
What should the benefit be?	<i>Medical care and allied benefits</i> : General practitioner, specialist, dental and nursing care; hospitalization; medication, rehabilitation, prosthetics, eyeglasses, etc., with a view to maintaining, restoring or improving health and ability to work and attend to personal needs.	 C.121: Medical care: Same as C.102; also emergency and follow-up treatment at place of work. Cash benefits: Periodic payments: at least 60% of reference work or invalidity; at least 50% of reference wage as well as funeral benefits in case of death of breadwinner. Level of benefit should be increased if beneficiary requires constant help. 	Benefits in cash or in kind at a level that ensures at least basic income security, so as to secure effective access to necessary goods and services; prevent or alleviate poverty, vulnerability and social exclusion; and enable life in dignity. Levels should be regularly reviewed.

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Recommendation No. 202: Basic protection	
Convention No. 121ª and Recommendation No. 121 ^b : Advanced standards	<i>Lump sum</i> : Same conditions as C.102 as regards substantial partial loss of earning capacity or corresponding loss of faculty, or with regard to partial loss of earning capacity likely to be permanent which is not substantial but which is in excess of a prescribed degree, with the competent authority believes that it will be used in a particularly advantageous manner. Long-term benefits to be adjusted following substantial changes in the general level of earnings and/or the cost of living. R.121 : Same as C.102 . Cash benefit : not less than 66.67% of average earnings of persons protected; Costs of constant help or attendance should be covered when such care is required. Supplementary or special benefits where unemployability or disfigurement are not taken into account in the evaluation of the loss sustained. Lump sum allowed where degree of incapacity is less than 25%; should bear an equitable relationship to periodic payments and not be less than periodic payments and not be less than periodic payments and not be less than periodic payments
Convention No. 102: Minimum standards	Cash benefits: Periodic payments: at least 50% of reference wage in cases of incapacity to work or invalidity; at least 40% of reference wage in cases of death of breadwinner. Long-term benefits to be adjusted following substantial changes in general level of earnings which result from substantial changes in the cost of living. Lump sum if incapacity is slight and competent authority is satisfied that the sum will be used properly.

Table A3.5 (cont'd)

	Convention No. 102: Minimum standards	Convention No. 121ª and Recommendation No. 121 ^b : Advanced standards	Recommendation No. 202: Basic protection
What should the benefit duration be?	As long as the person is in need of healthcare or remains incapacitated. No waiting period except for temporary incapacity to work for a maximum of three days.	 C.121: As long as the person is in need of healthcare or remains incapacitated. R.121: In addition, cash benefits should be paid from first day in each case of suspension of earnings. 	As long as the incapacity to earn a sufficient income remains.
What conditions can be prescribed for entitlement to a benefit?	No qualifying period allowed for benefits to injured persons. For dependants, benefit may be made conditional on spouse being presumed incapable of self-support and children remaining under a prescribed age.	C.121 : Same as C.102 . (In the case of occupational diseases, a period of exposure may be prescribed.)	Should be defined at the national level and prescribed by law, applying the principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of the injured persons.
^a Employment Injury Ben ^b Employment Injury Ben	 Employment Injury Benefits Convention, 1964 (No. 121). Employment Injury Benefits Recommendation, 1964 (No. 121). 		

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	Convention No. 102.	Recommendation No. 202.
	Minimum standards	Recommendation No. 202.
What should be covered?	Responsibility for child maintenance.	At least basic income security for children.
Who should be protected?	At least: 50% of all employees; or 50% of all employees; or categories of economically active population (forming not less than 20% of all residents); or 	All children.
	all residents with means under prescribed unreshold.	
What should the benefit be?	 Periodic payments; or provision for food, clothing, housing, holidays or domestic help; or combination of both. Total value of benefits calculated at a global level: at least 3% of reference wage multiplied by number of children of covered people; or at least 1.5% of reference wage multiplied by number of children of all residents. 	Benefits in cash or in kind at a level that ensures at least basic income security for children, providing access to nutrition, education, care and other necessary goods and services.
What should the benefit duration be?	At least from birth to 15 years of age or school-leaving age.	For the duration of childhood.
What conditions can be prescribed for entitlement to a benefit?	 Three months' contributions or employment (for contributory or employment-based schemes); One year's residence (for non-contributory schemes). 	Should be defined at national level and prescribed by law, applying the principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of children.

► Table A3.6 Main requirements: ILO social security standards on family/child benefits

Table A3.7 Main requirements: ILO social security standards on maternity protection	
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	Convention No. 102: Minimum standards	Convention No. 183 ^ª and Recommendation No. 191 ^b : Advanced standards	Recommendation No. 202: Basic protection
What should be covered?	Medical care required by pregnancy, childbirth and their consequences; resulting lost wages.	 C.183: Medical care required by pregnancy, childbirth and their consequences; resulting lost wages. R.191: Same as C.183. 	Essential maternity healthcare. At least basic income security for those who are unable to earn a sufficient income due to maternity.
Who should be protected?	 At least: all women in prescribed classes of employees, which classes constitute not less than 50% of all employees and, for maternity medical benefit, also the wives of men in these classes; or all women in categories of the economically active population forming not less than 20% of all residents, including, with regard to maternity medical benefit, the wives of men in these classes. 	C.183 : All employed women including those in atypical forms of dependent work. R.191 : Same as C.183 .	At least all women who are residents, subject to the country's international obligations.
What should the benefit be?	 Medical benefits: At least: Prenatal, confinement and postnatal care by qualified practitioners; hospitalization if necessary. With a view to maintaining, restoring or improving the health of the woman protected and her ability to work and to attend to her personal needs. Cash benefits: Periodic payment: at least 45% of the reference wage. 	C.183 : <i>Medical benefits</i> : At least prenatal, childbirth and postnatal care; hospitalization if necessary. Daily remunerated breaks or reduced hours for breastfeeding. <i>Cash benefits</i> : At least 66.67% of previous earnings; should maintain mother and child in proper conditions of health and a suitable standard of living. Appropriate increases in the levels of cash benefits must be considered periodically.	<i>Medical benefits</i> : Goods and services constituting essential maternity healthcare, meeting criteria of availability, accessibility, acceptability and quality; free prenatal and postnatal medical care should be considered for the most vulnerable. <i>Benefits in cash or in kind:</i> should ensure at least basic income security, so as to secure effective access to necessary goods and services, and be at a level that prevents or alleviates poverty, vulnerability and social exclusion and enables life in dignity. Levels should be regularly reviewed.

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	Convention No. 102: Minimum standards	Convention No. 183ª and Recommendation No. 191 ^b : Advanced standards	Recommendation No. 202: Basic protection
		R.191 : <i>Medical benefits</i> : Medical maternity care should also comprise pharmaceutical and medical supplies, medically prescribed tests, and dental and surgical care. <i>Cash benefits</i> : Should be raised to the full amount of the woman's previous earnings.	
What should the benefit duration be?	<i>Medical benefits</i> : Throughout the contingency. <i>Cash benefits</i> : At least 12 weeks for cash benefits.	 C.183: 14 weeks' maternity leave, including six weeks' compulsory leave after childbirth; additional leave before or after maternity leave in cases of illness, complications or risk of complications arising from pregnancy or childbirth. R.191: At least 18 weeks' maternity leave. Extension of the maternity leave in the event of multiple births. 	As long as the incapacity to earn a sufficient income remains.
What conditions can be prescribed for entitlement to a benefit?	As considered necessary to preclude abuse.	C.183 : Conditions must be met by a large majority of women; those who do not meet conditions are entitled to social assistance. R.191 : Same as C.183 .	Should be defined at the national level and prescribed by law, applying the principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of women.
^a Maternity Protection Co	^a Maternity Protection Convention, 2000 (No. 183).		

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^b Maternity Protection Recommendation, 2000 (No. 191).

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	Convention No. 102: Minimum standards	Convention No. 128 and Recommendation No. 131: Advanced standards	Recommendation No. 202: Basic protection
What should be covered?	Inability to engage in any gainful activity, likely to be permanent, or that persists beyond sickness benefit (total invalidity).	 C.128: Incapacity to engage in any gainful activity, likely to be permanent, or that persists beyond temporary or initial incapacity (total invalidity). R.131: Incapacity to engage in an activity involving substantial gain (total or partial invalidity). 	At least basic income security for those who are unable to earn a sufficient income due to disability.
Who should be protected?	 At least: 50% of all employees; <i>or</i> categories of the economically active population (forming not less than 20% of all residents); <i>or</i> all residents with means under prescribed threshold. 	 C.128: All employees, including apprentices; or or at least 75% of economically active population; or all residents, or residents with means under prescribed threshold. R.131: Coverage should be extended to persons in casual employment and all EAPs. Benefits should not be suspended solely for reason of being absent from territory. 	At least all residents, subject to the country's existing international obligations.
What should the benefit be?	<i>Periodic payment</i> : at least 40% of reference wage. To be adjusted following substantial changes in general level of earnings which result from substantial changes in the cost of living.	C.128 : <i>Periodic payment:</i> at least 50% of reference wage; to be adjusted following substantial changes in general level of earnings or of the cost of living. Provision of rehabilitation services as well as measures to further the placement of disabled persons in suitable employment.	Benefits in cash or in kind at a level that ensures at least basic income security, so as to secure effective access to necessary goods and services; prevent or alleviate poverty, vulnerability and social exclusion; and enable life in dignity.

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Convention No. 128 Recommendation No. 202: and Recommendation No. 131: Basic protection Advanced standards	R.131 : Periodic payment should be increased to at least 60% of reference wage. Minimum amount of disability benefit should be fixed by legislation to ensure a minimum standard of living. The amount of benefits should be periodically adjusted taking account of changes in the general level of earnings or the cost of living. Reduced benefit for partial invalidity.	nable to As long as the person remains As long as the inability to earn a sufficient incapacitated or until bincome remains. paid.	IoymentC.128: Same as C.102.I years of tyears of enployment or residence; qualifying employment or residence; qualifying employment or residence; qualifying period should be removed (or reduced) for period should be removed (or reduced) for young workers or where invalidity is due to young workers or where invalidity is due to an accident.Entitlement conditions should be defined at the national level and prescribed by law, applying the principles of non- discrimination, responsiveness to special hord discrimination, responsiveness to special hord periods of contribution or employment for purposes of calculating fulfilment of the purposes of calculating fulfilment of the gualifying period.
Convention No. 102: Minimum standards		As long as the person remains unable engage in gainful employment or until old-age pension is paid.	15 years of contributions or employment (for contributory schemes) or ten years of residence (for non-contributory schemes); or <i>if all EAPs covered</i> : Three years of contributions and meet the required yearly average contributory density throughout the career. Entitlement to a reduced benefit after five years of contributions or employment; or <i>if all EAPs covered</i> : Three years of contributions and meet half the required yearly average contributory density throughout the career.
		What should the benefit duration be?	What conditions can be prescribed for entitlement to a benefit?

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	Convention No. 102: Minimum standards	Convention No. 128 and Recommendation No. 131: Advanced standards	Recommendation No. 202: Basic protection
What should be covered?	Widow's or children's loss of support in the event of death of the breadwinner.	C.128: Widow's or children's loss of support in case of death of breadwinner.R.131: Same as C.128.	At least basic income security for those who are unable to earn a sufficient income due to the absence of family support.
Who should be protected?	 Wives and children of breadwinners in categories of employees representing at least 50% of all employees; <i>or</i> wives and children of members of categories of economically active population representing at least 20% of all residents; <i>or</i> all residents; <i>or</i> all resident widows and children with means under prescribed threshold. 	 C.128: Widows, children and other dependants of employees or apprentices; <i>or</i> dependants of employees or apprentices; <i>or</i> widows, children and other dependants forming not less than 75% of economically active population; or all widows, children and other dependants who are residents; or who are residents and whose means are under prescribed threshold. R.131: In addition, coverage should progressively be extended to widows and children and other dependants of persons in casual employment or all EAPs. Also, an invalid and dependent widower should enjoy same entitlements as a widow. Benefits should not be suspended solely for reason of being absent from territory. 	At least all residents and children, subject to the country's existing international obligations.
What should the benefit be?	<i>Periodic payment:</i> at least 40% of reference wage; to be adjusted following substantial changes in general level of earnings which result from substantial changes in the cost of living.	 C.128: Periodic payment: at least 45% of reference wage; benefits to be adjusted following substantial changes in general level of earnings or of the cost of living. R.131: Benefits should be increased to at least 55% of reference wage; a minimum survivors' benefit should be fixed to ensure a minimum standard of living. The amount of benefits should be periodically adjusted taking account of changes in the general level of earnings or the cost of living. 	Benefits in cash or in kind should ensure at least basic income security so as to secure effective access to necessary goods and services at a level that prevents or alleviates poverty, vulnerability and social exclusion, and enables life in dignity. Levels should be regularly reviewed.

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Convention No. 128 and Recommendation No. 202: Advanced standards	Allowances or lump sum benefits for widows who do not fulfil prescribed entitlement conditions, and/or assistance and facilities to obtain suitable employment. Benefits provided through a contributory scheme should not be suspended solely because the person entitled to the benefits is gainfully occupied.	C.128 and R.131: Until children reach As long as the inability to earn a sufficient 15 years of age or school-leaving age, income remains. or higher if apprentice, student or has a chronic illness or disability; income remains. For widows, lifelong or until engaged in gainful activity or remarried. As long as the inability to earn a sufficient income remains.	 C.128: Same as C.102; In addition, possible to require a prescribed age for widow, not higher than that prescribed for old-age benefit. No requirement of age for an invalid widow or a widow caring for a dependent child of deceased. A minimum duration of swithout child. R.131: Five years of contributions, employment or residence. Periods of incapacity due to sickness, accident or maternity and periods of incorports of incorport. Was paid and compulsory military service, should be incorporated in period. R.131: Five years of contributions, employment or residence. Periods of incorpacity due to sickness, accident or maternity and periods of incorporated in periods. R.131: Five years of contributions, employment or residence. Periods of incorpacity due to sickness, accident or maternity and periods of incorporated in periods. R.131: Five years of contributions, employment or residence. Periods of incorpacity due to sickness, accident or maternity and periods of incorporated in period.
Convention No. 102: Minimum standards		Until children reach 15 years of age; or school-leaving age; Until widows are remarried.	 15 years of contributions or employment (for contributory schemes) or ten years of residence (for noncontributory schemes); or <i>if all EAPs covered</i>: Three years of contributions and meet the required yearly average contributory density throughout the career. Entitlement to a reduced benefit after five years of contributions or employment; <i>or if all EAPs covered</i>: Three years of contributions or employment; <i>or if all EAPs covered</i>: Three years of contributions and meet half the required yearly average contributory density throughout throughout the career. For widows, benefits may be conditional on being presumed incapable of self-support.
		What should the benefit duration be?	What conditions can be prescribed for entitlement to a benefit?

Annex 4 Ratification of up-to-date ILO social security Conventions

Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.102 C.121 C.118	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers ^a C.118 ^b C.157
				A	Africa					
Angola					C. 012 (1976)					
Benin				C.102 (2019)	C.102 (2019)	C.102 (2019)	C.102 (2019) C.183 (2012)	C.102 (2019)	C.102 (2019)	
Burkina Faso							C.183 (2013)			
Burundi					C.012 (1963)					
Cabo Verde	C.118 (1987)	C.102 (2020) C.118 (1987)		C.102 (2020) C.118 (1987)	C.118 (1987)	C.102 (2020) C.118 (1987)	C.118 (1987)	C.118 (1987)	C.118 (1987)	C.118 (1987)
Central African Republic				C.118 (1964)	C.118 (1964)	C.118 (1964)	C.118 (1964)			C.118 (1964)
Chad				C.102 (2015)	C.102 (2015)	C.102 (2015)		C.102 (2015)	C.102 (2015)	
Comoros	C.102 (2022)	C.102 (2022)	C.102 (2022)	C.102 (2022)	C.012 (1978) C.102 (2022)	C.102 (2022)	C.102 (2022)	C.102 (2022)	C.102 (2022)	
Congo										C.157 (2023)
Côte d'Ivoire	C.102 (2023)	C.102 (2023)	C.102 (2023)	C.102 (2023)	C.102 (2023)	C.102 (2023)	C.102 (2023)	C.102 (2023)	C.102 (2023)	
Democratic Republic of the Congo				C.102 (1987) C.118 (1967)	C.012 (1960) C.121 (1967) C.118 (1967)	C.102 (1987)		C.102 (1987) C.118 (1967)	C.102 (1987)	C.118 (1967)
Djibouti					C.012 (1978)		C.183 (2020)			
Egypt	C.118 (1993)	C.118 (1993)	C.118 (1993)	C.118 (1993)	C.118 (1993)		C.118 (1993)	C.118 (1993)	C.118 (1993)	C.118 (1993)
Eswatini					C.012 (1978)					
Gabon					C.012 (1961)					

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Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.121 C.178	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers" C.118 ⁶ C.157
Guinea	C. 118 (1967)	C. 118 (1967)		C.118 (1967)	C.121 (1967) C.118 (1967)	C.118 (1967)	C.118 (1967)		C.118 (1967)	C.118 (1967)
Guinea-Bissau					C.012 (1977)					
Kenya				C.118 (1971)	C.012 (1964)			C.118 (1971)	C.118 (1971)	C.118 (1971)
Libya	C.102 (1975) C.130 (1975) C.118 (1975)	C.102 (1975) C.130 (1975) C.118 (1975)	C.102 (1975) C.118 (1975)	C.102 (1975) C.128 (1975) C.118 (1975)	C.102 (1975) C.121 (1975) C.118 (1975)	C.102 (1975) C.118 (1975)	C.102 (1975) C.118 (1975)	C.102 (1975) C.128 (1975) C.118 (1975)	C.102 (1975) C.128 (1975) C.118 (1975)	C.118 (1975)
Madagascar		C. 118 (1964)			C.012 (1962) C.118 (1964)		C.118 (1964)	C.118 (1964)		C.118 (1964)
Malawi					C.012 (1965)					
Mali							C.183 (2008)			
Mauritania				C.102 (1968) C.118 (1968)	C.102 (1968) C.118 (1968)	C.102 (1968) C.118 (1968)		C.102 (1968) C.118 (1968)	C.102 (1968) C.118 (1968)	C.118 (1968)
Mauritius					C.012 (1969)		C.183 (2019)			
Morocco	C.102 (2019)	C.102 (2019)		C.102 (2019)	C.012 (1956) C.102 (2019)	C.102 (2019)	C.102 (2019) C.183 (2011)	C.102 (2019)	C.102 (2019)	
Niger				C.102 (1966)	C.102 (1966)	C.102 (1966)	C.102 (1966) C.183 (2019)			
Rwanda				C.118 (1989)	C.012 (1962) C.118 (1989)			C.118 (1989)	C.118 (1989)	C.118 (1989)
Sao Tome and Principe	C.102 (2024) ²	C.102 (2024) ²		C.102 (2024) ²	C.102 (2024) ²		C.102 (2024) ² C.183 (2017)	C.102 (2024) ²	C.102 (2024) ²	
Senegal					C.012 (1962) C.102 (1962) C.121 (1966)	C.102 (1962)	C.102 (1962) C.183 (2017)			
Sierra Leone	C.102 (2022)	C.102 (2022)		C.102 (2022)	C.102 (2022)			C.102 (2022)	C.102 (2022)	

Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.118 C.118	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers ⁴ C.118 ⁶ C.157
Tanzania (United Republic of)					C.012 (1962)					
Togo				C.102 (2013)		C.102 (2013)	C.102 (2013)		C.102 (2013)	
Tunisia	C.118 (1965)	C.118 (1965)		C.118 (1965)	C.012 (1957) C.118 (1965)	C.118 (1965)	C.118 (1965)	C.118 (1965)	C. 118 (1965)	C.118 (1965)
Uganda					C.012 (1963)					
Zambia					C.012 (1964)					
				Am	Americas					
Antigua and Barbuda					C.012 (1983)		C.183 (2022)			
Argentina	C.102 (2016)			C.102 (2016)	C.012 (1936)	C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016)	
Bahamas					C.012 (1976)					
Barbados		C.102 (1972)		C.102 (1972) C.128 (1972) C 118 (1972)	C.012 (1967) C.102 (1972) C 118 (1974)		(118 (1974)	C.102 (1972) C.128 (1972)	C.102 (1972)	(118 (107A)
Belize					C.012 (1983)		C.183 (2005)			
Bolivia (Plurinational State of)	C.102 (1977) C.130 (1977) C.118 (1977)	C.102 (1977) C.130 (1977) C.118 (1977)		C.102 (1977) C.128 (1977)	C.102 (1977) C.121 (1977)	C.102 (1977) C.118 (1977)	C.102 (1977) C.118 (1977)	C.102 (1977) C.128 (1977)	C.102 (1977) C.128 (1977)	C.118 (1977)
Brazil	C.102 (2009) C.118 (1969)	C.102 (2009) C.118 (1969)	C.102 (2009) C.168 (1993)	C.102 (2009) C.118 (1969)	C.012 (1957) C.102 (2009) C.118 (1969)	C.102 (2009)	C.102 (2009) C.118 (1969)	C.102 (2009) C.118 (1969)	C.102 (2009) C.118 (1969)	C.118 (1969)
Chile					C.012 (1925) C.121 (1999)					
Colombia					C.012 (1933)					

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Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.121 C.118	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers" C.118 ^b C.157
Costa Rica	C.102 (1972) C.130 (1972)	C.130 (1972)		C.102 (1972)	C.102 (1972)	C.102 (1972)	C.102 (1972)	C.102 (1972)	C.102 (1972)	
Cuba					C.012 (1935)		C.183 (2004)			
Dominica					C.012 (1983)					
Dominican Republic	C.102 (2016)	C.102 (2016)		C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016) C.183 (2016)	C.102 (2016)	C.102 (2016)	
Ecuador	C.130 (1978) C.118 (1970)	C.102 (1974) C.130 (1978) C.118 (1970)		C.102 (1974) C.128 (1978)	C.102 (1974) C.121 (1978) C.118 (1970)		C.118 (1970)	C.102 (1974) C.128 (1978) C.118 (1970)	C.102 (1974) C.128 (1978) C.118 (1970)	C.118 (1970)
El Salvador	C.102 (2022)	C.102 (2022)		C.102 (2022)	C.012 (1955) C.102 (2022)		C.102 (2022) C.183 (2022)	C.102 (2022)	C.102 (2022)	
Grenada					C.012 (1979)					
Guatemala							C.118 (1963)			C.118 (1963)
Guyana					C.012 (1966)					
Haiti					C.012 (1955)					
Honduras	C.102 (2012)	C.102 (2012)		C.102 (2012)			C.102 (2012)	C.102 (2012)	C.102 (2012)	
Mexico	C.102 (1961) C.118 (1978)	C.102 (1961) C.118 (1978)		C.102 (1961) C.118 (1978)	C.012 (1937) C.102 (1961) C.118 (1978)		C.102 (1961) C.118 (1978)	C.102 (1961) C.118 (1978)	C.102 (1961) C.118 (1978)	C.118 (1978)
Nicaragua					C.012 (1934)					
Panama					C.012 (1958)		C.183 (2022)			
Paraguay	C.102 (2021)	C.102 (2021)		C.102 (2021)	C.102 (2021)		C.102 (2021)	C.102 (2021)		
Peru	C.102 (1961)	C.102 (1961)		C.102 (1961)	C.012 (1962)		C.102 (1961) C.183 (2016)	C.102 (1961)		

Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.121 C.178	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers ^a C.118 ^b C.157
Saint Lucia					C.012 (1980)					
Saint Vincent and the Grenadines	C.102 (2015)	C.102 (2015)		C.102 (2015)	C.012 (1998) C.102 (2015)		C.102 (2015)	C.102 (2015)	C.102 (2015)	
Suriname					C.118 (1976)					C.118 (1976)
Uruguay	C.102 (2010) C.130 (1973) C. <i>118 (1983</i>)	C.130 (1973) C.118 (1983)	C.102 (2010) C.118 (1983)	C.128 (1973)	C.121 (1973)³ C.118 (1983)	C.102 (2010) C.118 (1983)	C.102 (2010) C.118 (1983)	C.128 (1973)	C.128 (1973)	C.118 (1983)
Venezuela (Bolivarian Republic of)	C.102 (1982) C.130 (1982) C.118 (1982)	C.102 (1982) C.130 (1982) C.118 (1982)		C.102 (1982) C.128 (1983) C.118 (1982)	C.102 (1982) C.121 (1982) C.118 (1982)		C.102 (1982) C.118 (1982)	C.102 (1982) C.128 (1983) C.118 (1982)	C.102 (1982) C.128 (1983) C.118 (1982)	C.118 (1982)
				Arab	Arab States					
Iraq	C.102 (2023) C.118 (1978)	C.102 (2023) C.118 (1978)	C.102 (2023)	C.102 (2023) C.118 (1978)	C.102 (2023) C.118 (1978)	C.102 (2023)	C.102 (2023) C.118 (1978)	C.102 (2023) C.118 (1978)	C.102 (2023) C.118 (1978)	C.118 (1978)
Jordan				C.102 (2014)	C.102 (2014) C.118 (1963)		C.118 (1963)	C.102 (2014) C.118 (1963)	C.102 (2014) C.118 (1963)	C.118 (1963)
Syrian Arab Republic				C.118 (1963)	C. 118 (1963)			C.118 (1963)	C. 118 (1963)	C.118 (1963)
				Asia and	Asia and the Pacific					
Australia					C.012 (1960)					
Bangladesh					C.118 (1972)		C.118 (1972)			C.118 (1972)
Fiji					C.012 (1974)					
India	C.118 (1964)	C.118 (1964)					C.118 (1964)			C.118 (1964)
Japan		C.102 (1976)	C.102 (1976)	C.102 (1976)	C.102 (1976) C.121 (1974)³					
Malaysia – Peninsular					C.012 (1961)					
Malaysia – Sarawak					C.012 (1964)					
New Zealand					C.012 (1938)					

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Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.121 C.178	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers" C.118 ^b C.157
Pakistan					C. 118 (1969)		C.118 (1969)			C.118 (1969)
Papua New Guinea					C.012 (1976)					
Philippines	C.118 (1994)	C.118 (1994)		C.118 (1994)	C.118 (1994)		C.118 (1994)	C.118 (1994)	C.118 (1994)	C.118 (1994) C.157 (1994)
Singapore					C.012 (1965)					
Solomon Islands					C.012 (1985)					
				Europe and	Europe and Central Asia					
Albania	C.102 (2006)	C.102 (2006)	C.102 (2006) C.168 (2006)	C.102 (2006)	C.102 (2006)		C.102 (2006) C.183 (2004)	C.102 (2006)	C.102 (2006)	
Austria	C.102 (1969)		C.102 (1978)	C.102 (1969) C.128 (1969)	C.012 (1954)	C.102 (1969)	C.102 (1969) C.183 (2004)			
Azerbaijan							C.183 (2010)			
Belarus							C.183 (2004)			
Belgium	C.102 (1959) C.130 (2017)	C.102 (1959) C.130 (2017)	C.102 (1959) C.168 (2011)	C.102 (1959) C.128 (2017)	C.012 (1932) C.102 (1959) C.121 (1970)	C.102 (1959)	C.102 (1959)	C.102 (1959) C.128 (2017)	C.102 (1959) C.128 (2017)	
Bosnia and Herzegovina	C.102 (1993)	C.102 (1993)	C.102 (1993)	C.102 (1993)	C.012 (1993) C.102 (1993) C.121 (1993)		C.102 (1993) C.183 (2010)		C.102 (1993)	
Bulgaria	C.102 (2008)	C.102 (2008)	C.102 (2016)	C.102 (2008)	C.012 (1925) C.102 (2008)	C.102 (2008)	C.102 (2008) C.183 (2001)		C.102 (2008)	
Croatia	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.012 (1991) C.102 (1991) C.121 (1991)		C.102 (1991)		C.102 (1991)	
Cyprus		C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991) C.121 (1966)		C.183 (2005)	C.102 (1991)	C.102 (1991) C.128 (1969)	

Country/territory					Branch					Migrant
'	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 <i>C.118</i>	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.121 C.118	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers ^a C.118 ^b C.157
Czechia	C.102 (1993) C.130 (1993)	C.102 (1993) C.130 (1993)		C.102 (1993) C.128 (1993)	C.012 (1993)	C.102 (1993)	C.102 (1993) C.183 (2017)	C.102 (1993)	C.102 (1993)	
Denmark	C.102 (1955) C.130 (1978) C.118 (1969)	C.130 (1978) C.118 (1969)	C.102 (1955) C.118 (1969)	C.102 (1955)	C.012 (1923) C.102 (1955) C.118 (1969)			C.102 (1955)		C.118 (1969)
Estonia					C.012 (1922)					
Finland	C.130 (1974) C.118 (1969)	C.130 (1974) C.118 (1969)	C.168 (1990)	C.128 (1976)	C.012 (1950) C.121 (1968)³ C. <i>118 (1969</i>)			C.128 (1976)	C.128 (1976)	C.118 (1969)
France	C.102 (1974) C.118 (1974)	C.118 (1974)	C.102 (1974)	C.102 (1974)	C.012 (1928) C.102 (1974) C.118 (1974)	C.102 (1974) C.118 (1974)	C.102 (1974) C.118 (1974)	C.102 (1974) C.118 (1974)	C.118 (1974)	C.118 (1974)
Germany	C.102 (1958) C.130 (1974) C.118 (1971)	C.102 (1958) C.130 (1974) C.118 (1971)	C.102 (1958) C.118 (1971)	C.102 (1958) C.128 (1971)	C.012 (1925) C.102 (1958) C.121 (1972) C.118 (1971)	C.102 (1958)	C.102 (1958) C.183 (2021) C.118 (1971)	C.102 (1958) C.128 (1971)	C.102 (1958) C.128 (1971)	C.118 (1971)
Greece	C.102 (1955)	C.102 (1955)	C.102 (1955)	C.102 (1955)	C.102 (1955)		C.102 (1955)	C.102 (1955)	C.102 (1955)	
Hungary					C.012 (1956)		C.183 (2003)			
Iceland				C.102 (1961)		C.102 (1961)		C.102 (1961)		
Ireland	C.118 (1964)	C.102 (1968) C.118 (1964)	C.102 (1968) C.118 (1964)		C.012 (1924) C.121 (1969) C.118 (1964)	C.118 (1964)			C.102 (1968)	C.118 (1964)
Israel				C.102 (1955) C.118 (1965)	C.102 (1955) C.118 (1965)	C.118 (1965)	C.118 (1965)		C.102 (1955) C.118 (1965)	C.118 (1965)
Italy	C.118 (1967)	C.118 (1967)	C.118 (1967)	C.102 (1956) C.118 (1967)	C.012 (1930) C.118 (1967)	C.102 (1956) C.118 (1967)	C.102 (1956) C.183 (2001) C.118 (1967)	C.118 (1967)	C.118 (1967)	C.118 (1967)

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Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.121 C.118 C.118	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers" C.118 ^b C.157
Kazakhstan							C.183 (2012)			
Kyrgyzstan										C.157 (2008)
Latvia					C.012 (1929)		C.183 (2009)			
Lithuania							C.183 (2003)			
Luxembourg	C.102 (1964) C.130 (1980)	C.102 (1964) C.130 (1980)	C.102 (1964)	C.102 (1964)	C.012 (1928) C.102 (1964) C.121 (1972)	C.102 (1964)	C.102 (1964) C.183 (2008)	C.102 (1964)	C.102 (1964)	
Malta					C.012 (1965)					
Montenegro	C.102 (2006)	C.102 (2006)	C.102 (2006)	C.102 (2006)	C.012 (2006) C.102 (2006) C.121 (2006)		C.102 (2006) C.183 (2012)		C.102 (2006)	
Netherlands	C.102 (1962) C.130 (2006)	C.102 (1962) C.130 (2006)	C.102 (1962)	C.102 (1962) C.128 (1969)	C.012 (1926) C.102 (1962) C.121 (1966)³	C.102 (1962)	C.102 (1962) C.183 (2009)	C.102 (1962) C.128 (1969)	C.102 (1962) C.128 (1969)	
North Macedonia	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.012 (1991) C.102 (1991) C.121 (1991)		C.102 (1991) C.183 (2012)		C.102 (1991)	
Norway	C.102 (1954) C.130 (1972)	C.102 (1954) C.130 (1972)	C.102 (1954) C.168 (1990)	C.102 (1954) C.128 (1968)	C.012 (1963) C.102 (1954)	C.102 (1954) C.118 (1963)	C.183 (2015)	C.128 (1968)	C.128 (1968) C.118 (1963)	C.118 (1963)
Poland	C.102 (2003)			C.102 (2003)	C.012 (1924)	C.102 (2003)	C.102 (2003)		C.102 (2003)	
Portugal	C.102 (1994)	C.102 (1994)	C.102 (1994)	C.102 (1994)	C.012 (1960) C.102 (1994)	C.102 (1994)	C.102 (1994) C.183 (2012)	C.102 (1994)	C.102 (1994)	
Republic of Moldova							C.183 (2006)			
Romania	C.102 (2009)	C.102 (2009)	C.168 (1992)	C.102 (2009)		C.102 (2009)	C.102 (2009) C.183 (2002)			

Country/territory					Branch					Migrant
	Medical care C.102 C.130 C.118	Sickness C.102 C.130 C.118	Unemployment C.102 C.168 C.118	Old age C.102 C.128 C.118	Employment injury C.012 C.102 C.121 C.118	Family C.102 C.118	Maternity C.102 C.183 C.118	Invalidity C.102 C.128 C.118	Survivors C.102 C.128 C.118	workers ^a C.118 ^b C.157
Russian Federation	C.102 (2019)	C.102 (2019)		C.102 (2019)	C.102 (2019)		C.102 (2019)	C.102 (2019)	C.102 (2019)	
San Marino							C.183 (2019)			
Serbia	C.102 (2000)	C.102 (2000)	C.102 (2000)	C.102 (2000)	C.012 (2000) C.102 (2000) C.121 (2000)		C.102 (2000) C.183 (2010)		C.102 (2000)	
Slovakia	C.102 (1993) C.130 (1993)	C.102 (1993) C.130 (1993)		C.102 (1993) C.128 (1993)	C.012 (1993)	C.102 (1993)	C.102 (1993) C.183 (2000)	C.102 (1993)	C.102 (1993)	
Slovenia	C.102 (1992)	C.102 (1992)	C.102 (1992)	C.102 (1992)	C.012 (1992) C.102 (1992) C.121 (1992)		C.102 (1992) C.183 (2010)		C.102 (1992)	
Spain	C.102 (1988)	C.102 (1988)	C.102 (1988)		C.012 (1931) C.102 (1988)					C.157 (1985)
Sweden	C.102 (1953) C.130 (1970) C. <i>118 (196</i> 3)	C.102 (1953) C.130 (1970) C.118 (1963)	C.102 (1953) C.168 (1990) C.118 (1963)	C.128 (1968)	C.012 (1923) C.102 (1953) C.121 (1969) C. <i>118 (196</i> 3)	C.102 (1953)	C.102 (1953) C.118 (1963)	C.128 (1968)	C.128 (1968)	C.118 (1963) C.157 (1984)
Switzerland			C.168 (1990)	C.102 (1977) C.128 (1977)	C.102 (1977)	C.102 (1977)	C.183 (2014)	C.102 (1977) C.128 (1977)	C.102 (1977) C.128 (1977)	
Türkiye	C.102 (1975) C.118 (1974)	C.102 (1975) C.118 (1974)		C.102 (1975) C.118 (1974)	C.102 (1975) C.118 (1974)		C.102 (1975) C.118 (1974)	C.102 (1975) C.118 (1974)	C.102 (1975) C.118 (1974)	C.118 (1974)
Ukraine	C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016)	C.102 (2016)	
United Kingdom	C.102 (1954)	C.102 (1954)	C.102 (1954)	C.102 (1954)	C.012 (1923)	C.102 (1954)			C.102 (1954)	

Notes:

^a While all international social security standards apply to migrant workers unless otherwise stated, C.118 and C.157 are of particular relevance to migrant workers.

^b Parts of C.118 apply for selected branches (see other columns).

Congo: C.157 will enter into force on 26 October 2024.

 $^2\,$ Sao Tome and Principe: C.102 will enter into force on 7 June 2025.

³ Finland, Japan, Netherlands, Uruguay: Accepted the text of the List of Occupational Diseases (Schedule I) amended by the International Labour Conference at its 66th Session (1980).

Annex 5 Social protection effective coverage

► Annex 5.1 Social protection effective coverage (including SDG indicators 1.3.1 and 3.8.1), 2015 and 2023 (percentage of the relevant population group) – Region, subregion and income-level estimates

Full dataset available at: https://wspdb.social-protection.org.

		SDG 1.3	SDG 1.3.1 – Population covered	ulation	covered	i				Peop	le prote	People protected by social protection systems including floors	social pr	otectior	ı system	s includi	ng floor	S						ud	
	by a	t least (one social protecti (excluding health) ¹	al prote g health	by at least one social protection benefit (excluding health) ¹	lefit -																	(0)		
uoit		ву уеа г	gλ zex	(2023)	By type	əmədəz to	Children (0–15)²		€(81–0) n9rblid⊃		Mothers with newborns⁴		Workers in case of work injury⁵		Persons with severe disabilities ⁶	4	Ոոemployed ⁷	Older persons ⁸		Vulnerable persons receiving social	°zjitanad aonstzizzs	Isri9vinU - 1.8.5 DDS	HW)	Population affiliated to a social health pro	ı,əmətəs
Income level/re	2015	5023	Men	Momen	Contributory	bəɔnɕniî-xɕT	2015	5023	2015	5023	SIOS	2012	5023	2015	5023	2015	5023	2015	5023	2015	5023	2015	5023	5020	5023
World	42.8	52.4	54.6	50.1	35.0	17.3	22.1	28.2		23.9 29.	9.6 36.	6.4 32.8	8 37.4	t 32.8	38.9	15.4	16.7	74.1	79.6	26.7 3	37.3	64.5	67.4 (60.4	60.1
High-income	81.0	85.9	85.8	86.0	69.8	16.1	76.8 8	80.5	7	74.8 66	6.9 6.99	69.0 80.0	0 85.1	82.7	85.6	44.0	56.1	96.3	96.8	65.8 7	76.3	83.9	85.0	80.5	85.1
Upper-middle-income	56.5	71.2	73.3	69.1	50.1	21.1	21.8	27.8		25.0 24	24.1 32.	6 31.9	9 40.5	39.8	50.0	15.1	17.0	86.2	90.4	28.0 4	45.0	75.3	78.7	91.4	88.4
Lower-middle-income	20.9	32.4	36.1	28.6	14.9	17.5	15.0	23.5	:	17.4 25	25.9 36	36.0 12.7	7 15.6	11.1	19.1	2.0	2.5	30.9	47.6	13.1 2	22.2	54.0	58.2	29.8	31.7
Low-income	7.7	9.7	10.9	8.6	5.6	4.1	4.5	8.7	:	7.6 1	1.5 2	2.6 8.3	2 9.3	3.5	3.3	0.3	0.2	9.3	12.7	6.1	6.8	37.3	41.8	18.3	17.8
Africa	15.2	19.1	20.2	17.9	10.3	8.7	9.2	15.4	:	12.7 4	4.3 6	6.7 15.2	2 16.5	8.4	8.1	2.7	3.8	25.6	31.8	8.6	12.6	44.8	47.1	23.5	24.8
Northern Africa	33.3	35.8	35.9	35.6	25.9	6.6	22.0	30.0		24.6	7.3 10	10.4 44.1	1 49.6	5 20.8	18.6	2.1	2.9	44.1	55.1	17.2 2	20.3	62.6	65.6 (63.5	73.3
Sub-Saharan Africa	10.9	15.4	16.7	14.1	6.9	8.5	6.9	12.9	-	10.7 3.	ń	5.9 10.1	1 11.2	2 5.5	5.8	2.9	4.1	18.9	22.3	6.6	10.9	40.6	42.9	13.2	13.4
Americas	59.6	68.2	69.8	66.7	50.6	17.6	49.6	54.9	:	51.5 36.	.5 39.	0.2 56.6	6 60.8	3 71.8	74.2	14.3	21.0	84.4	90.0	46.5 5	59.6	79.9	80.0	66.2	71.6
Latin America and the Caribbean	48.6	61.2	63.4	59.0	36.8	24.4	37.7	42.3	:	37.6 26.	.2 29.	6 40	.5 44.5	5 57.3	61.3	6.5	10.0	67.3	79.3	29.5 4	42.9	76.8	76.4	81.2	79.9
Northern America	78.5	80.6	81.1	80.1	74.8	5.8	77.3 8	84.0	:	83.1 57	57.1 58.	8.9 82.1	1 86.9	96.8	96.9	29.6	50.1	100.0	100.0	75.8 8	88.8	85.4	86.3	44.4	59.3

Annex 5.1 (cont'd)

		SDG 1.3.	1 - Popt	SDG 1.3.1 – Population covered	overed	i				Peop	le prote	People protected by social protection systems including floors	social pr	otectior	ı system	s includi	ng floor	ş						ud	
	by at	: least ol	re socia xcluding	by at least one social protection benefit (excluding health) ¹	tion ben)1	etit																	or(OI		
noip	d	- By year	g) sex	(2023) - By sex	Bytype	of scheme	²(21-0) r91bild2 -		- Children (0–18)		Mothers with 		Workers in case of work injury⁵		Persons with severe disabilities ⁶	a	- Unemployed	- Older persons ⁸		- receiving social	°stitened eonstsizzs	SDG 3.8.1 – Universal	HW) อุธารงดว ทำไธอก	Population affiliated • to a social health pro	изтрани
91/l9v9l 9moznI	2015	5023	Men	Momen	Contributory	bəɔnɛniî-xɛT	5015	5023	5015	5016	5023	5012	5023	2015	5023	5015	5023	5015	5023	5015	5023	5015	5023	5050	5023
Arab States	28.1	30.0	31.4	28.4	16.2	13.8	12.3	14.2	-	12.4 6	6.4 6	6.9 24.2	2 25.7	7 16.1	15.9	2.7	1.2	27.4	27.8	17.7	20.4	60.2	62.7	40.4	52.1
Asia and the Pacific	38.7	53.6	57.0	50.2	33.6	20.0	14.3	22.4	-	17.1 25	25.8 38	38.4 22.2	2 28.5	5 18.9	30.7	9.1	12.8	68.4	76.6	20.7	34.5	63.6	68.3	63.1	61.9
Eastern Asia	63.3	78.5	80.5	76.6	63.6	14.9	7.7	9.0	:	6.7 17	17.5 29	29.0 33.1	1 43.3	3 31.5	44.7	19.1	23.8	98.3	98.6	29.0	43.0	76.1	81.2	9.99	94.9
South-Eastern Asia and the Pacific	34.4	47.6	48.8	46.3	19.4	28.2	15.8	26.3		26.9 28.	3 32	.3 23.1	1 32.0	0 22.5	30.4	10.7	16.6	37.4	48.4	15.3	39.5	59.6	62.0	79.5	81.4
Southern Asia	18.7	35.4	40.8	29.7	14.1	21.3	17.3	27.9	:	19.1 32	32.1 47.1	7.1 6.7	7 9.8	3 6.6	19.2	0.4	0.4	26.2	47.1	15.4	25.8	54.2	60.1	23.4	25.4
Europe and Central Asia	82.1	85.2	85.8	84.8	66.7	18.5	74.4	76.6		69.9 77	77.4 79	79.4 73.5	5 79.3	3 88.7	91.5	45.3	49.1	95.3	96.8	57.7	67.5	79.1	81.1	97.8	97.0
Central and Western Asia	59.3	63.3	64.3	62.4	43.8	19.5	33.9	40.7	ю :	34.0 39	39.7 44.7	1.7 49.4	4 64.4	4 53.9	61.6	3.8	5.8	91.6	91.1	31.5	39.0	74.2	74.9	92.5	90.6
Eastern Europe	82.6	86.6	87.2	86.2	73.1	13.5	92.7	93.2	∞ :	83.0 77	77.9 80.1	0.1 68.7	7 70.1	1 100.0	98.1	41.9	40.0	95.9	96.9	47.8	61.1	74.6	79.0	97.5	96.8
Northern. Southern and Western Europe	90.6	93.6	94.0	93.2	72.4	21.2	88.8	91.6	00 :	86.7 94	94.8 96.	5.5 85.0	0 90.5	5 94.7	99.8	57.5	70.3	95.5	7.79	74.5	83.6	84.1	85.0	99.4	99.2

Annex 5.2 Social protection effective coverage (including SDG indicators 1.3.1 and 3.8.1), 2023 or latest available year (percentage of the relevant population group) – countries and territories

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Country/territory	SDG 1.3.1 – Population covered				People protecte	ed by social	People protected by social protection systems including floors	ems includir	g floors						SDG 3.8.1
	by at least one social protection benefit (excluding health)'	Children (0–15) ²	Children (0–18) ³	Mothers with	Workers in case of work injury ⁵	case ury ^s	Persons with severe disabilities ⁶	severe is ⁶	Unemployed ⁷	ō	Older persons [®]		Vulnerable		Universal health
	scµewe _{it} By type of By sex			newborns ⁴									receiving social assistance benefits [®]		(WHO) ¹⁰
	لرامین Tax-financed Men Tax-financed Men Total	Year Girls Total	, Kear Girls Boys Total	Year Year	Total Women	Year	Total Men Women	Year	Total neM memen YeoY	Year Total	Year Women Men	Total	Momen	Year	Total Year
	- - -			Ā	Africa										
				Northe	Northern Africa										
Algeria	60.2 52.7 7.4 2021	72.3 2016	63.2 2016	19.6 2021	53.8	2019	3.6	2015 1	13.1 20	2020 88.6	20	2021 30.4	:	2016	74.1 2021
Egypt	36.6 34.1 38.1 22.2 14.5 2022	23.9 2022	20.5 2022	8.4 2022	67.0	2021	32.3	2022	0.0 0.0 0.0 20	2022 58.5	86.7 23.4 20	2022 18.9	10.3 24.7	2022	70.2 2021
Libya	66.1 59.4 6.7 2021	55.3 2021	46.1 2021	:	:	:	84.3	2020	0.0 0.0 0.0 20	2022 79.4 100.0	40.0	2020 40.1	:	2021 6	62.1 2021
Morocco	42.6 28.0 14.6 2023	74.2 2023	72.9 2023	4.7 2021	39.0	2019	6.5	2022	1.4 20	2021 23.4	20	2019 31.1	:	2023 6	69.5 2021
Sudan	10.4 1.9 8.5 2021	8.1 2019	: : :	3.2 2021	5.3 3.3 10.1	1 2021	0.7	2019	0.0 0.0 0.0 20	2022 10.6	20	2021 8.6	:	2021	43.5 2021
Tunisia	53.8 41.6 11.8 2021	28.6 2021	24.4 2021	22.1 2022	30.4	2021	12.4	2021	3.0 21	2019 100.0 1	100.0 100.0 20	2021 25.4	:	2021	67.1 2021
				Sub-Sah	Sub-Saharan Africa										
Angola	8.7 7.8 0.9 2022	0.3 2022	0.3 2022	0.1 2022	:	:	:	:	0.0 0.0 0.0 20	2022 15.3	20	2022 1.1	:	2022 3	36.7 2021
Benin	8.4 9.1 6.2 3.4 5.0 2020	12.0 12.5 10.8 2020	10.4 10.9 9.4 2020	2.8 2020	7.2 9.5 4.5	5 2020	0.1	2020	0.0 0.0 0.0 20	2022 9.1	20	2020 5.2	5.6 4.6	2020	37.9 2021
Botswana	13.5 6.2 7.3 2022	2.3 2022	2.0 2022	8.5 2022	35.0	2022	2.7	2022	0.0 0.0 0.0 20	2022 100.0	20	2022 7.7	:	2022 5	55.2 2021
Burkina Faso	9.7 9.7 0.0 2021	8.7 2021	7.9 2021	4.7 2021	9.0 11.9 5.4	4 2021	0.3	2021	0.0 0.0 0.0 20	2022 6.7	10.3 3.9 20	2021 4.1	:	2021	39.6 2021
Burundi	16.1 3.2 12.9 2022	20.2 21.1 18.7 2022	17.5 18.3 16.3 2022	0.4 2021	6.3 10.3 2.5	5 2021	5.7 6.7 4.3	3 2021	0.0 0.0 0.0 20	2022 13.3	18.7 8.9 20	2021 12.0	:	2022 4	41.5 2021
Cabo Verde	51.5 48.0 55.0 43.4 8.1 2020	42.3 37.1 48.1 2020 ^a	:	23.1 2020 ^a	44.7 42.7 47.3	3 2020 ^c	52.7 30.0 70.0	0 2020 ^a	7.1 7.0 7.3 20	2020 ^a 69.8	66.0 73.0 20	2020 ^a 20.2	:	2020 ^a	71.2 2021
Cameroon	10.0 9.8 0.3 2022	9.3 2022	8.1 2022	2.7 2022	11.2 14.7 7.2	2 2020	3.3	2020	0.0 0.0 0.0 20	2022 18.3	28.4 9.6 20	2020 7.7	:	2022 4	43.9 2021
Central African Republic	3.5 2019	4.9 2019	:	0.1 2020	:	:	0.3	2019	::	4.7	20	2019	:	ε Π	32.3 2021
Chad	2.5 2.5 0.0 2022	0.6 2022	0.5 2022	1.0 2020	6.8 10.1 1.	1.9 2020	0.3	2022	0.0 0.0 0.0 20	2022 5.8	20	2022	:	:	29.4 2021
Comoros	3.1 3.7 2.4 3.1 0.0 2022	0.0 0.0 0.0 2022	0.0 0.0 0.0 2022	3.7 2022	7.4 7.7 7.1	1 2022	:	:	0.0 0.0 0.0 20	2022 7.1	7.4 6.8 20	2022	:	÷	48.1 2021

Country/territory	SDG 1.3.1 – Population covered				People protected by soc	People protected by social protection systems including floors	ling floors			SDG 3.8.1
	by at least one social protection benefit (excluding health)' By type of By sex By type of scheme ¹⁴	Children (0-15) ²	Children (0-18) ³	Mothers with newborns ⁴	of work injury ^s	Persons with severe disabilities ⁶	Unemployed'	Older persons ^a	Vulnerable persons receiving social assistance benefits ⁶	- Universal health coverage (WHO) ¹⁰
	Jear Tax-financed Wen Men Total	Year Girls Total	Year Giris Boys Total	Year Year	Year Women Men Total	Year Women Year	Year Women Men	Year Women Year	Year Men Total	Total Year
Congo		•		:	14.2 2019		0.0 0.0 0.0 2020	22.1 42.4 4.7 2011		41.0 2021
Côte d'Ivoire	12.1 5.4 6.6 2022	. 9.5 2022	8.2 2022	12.0 2022	11.0 14.8 6.0 2022	: 0.3 0.5 0.1 2022	0.0 0.0 0.0 2022	16.2 20.9 11.5 2022	7.5 2022	42.8 2021
Democratic Republic of the Congo	5.2 3.5 1.7 2022	. 2.5 2022	2.6 2022	:	1.8 2.3 1.2 2022	. 0.1 0.1 0.0 2022		1.0 2.2 0.0 2022	3.9 2021	41.7 2021
Djibouti	12.3 2019	3.5 2019	:	4.8 2019	15.1 2019	:	0.0 0.0 0.0 2020	14.2 2019	4.6 2019	43.9 2021
Equatorial Guinea	5.2 5.2 0.0 2021	1.4 2021	1.2 2021	0.5 2021	13.0 2021	0.1 2021	0.0 0.0 0.0 2022	3.7 2021	0.6 2021	45.8 2021
Eritrea	8.4 0.0 8.4 2021	10.2 2021	8.6 2021	:	•	. 3.6 2021	::	: : :	:	44.9 2021
Eswatini	36.1 35.7 36.5 17.2 18.9 2022	15.9 17.1 14.7 2020	11.8 12.9 10.7 2020	13.8 2019	45.9 47.8 43.7 2022	13.8 11.2 16.5 2019	0.0 0.0 0.0 2022	100.0 100.0 100.0 2020	17.6 15.3 19.8 2020	55.9 2021
Ethiopia	7.4 7.6 4.8 4.2 3.0 2019	4.5 5.1 3.8 2019	3.8 4.3 3.2 2019	:	7.8 9.5 5.5 2019	1.3 1.4 1.1 2019	0.0 0.0 0.0 2022	4.2 4.6 3.8 2019	3.2 2019	35.1 2021
Gabon		37.0	:	:	45.0 2019	:	0.0 0.0 0.0 2020	38.8 2010	:	49.0 2021
Gambia	6.5 8.8 4.2 6.3 0.2 2019	11.1 10.3 11.9 2022 ^b	0.5 8.9 10.2 2022 ^b	5.9 2022	20.6 2019	:	0.0 0.0 0.0 2022	17.0 2015	0.3 0.0 0.5 2018	46.2 2021
Ghana	25.2 6.3 18.9 2022	: 30.4 2023 ^b	26.0 2023 ^b	69.1 2022	16.6 2019	0.1 2022	0.0 0.0 0.0 2023	15.7 23.1 7.8 2022	9.8 2022	47.8 2021
Guinea	3.7 3.7 0.0 2021	6.2 2021	5.4 2021	0.9 2021	2.9 3.4 2.0 2021	0.0 2021	0.0 0.0 0.0 2021	2.5 2021	2.6 2021	39.9 2021
Guinea-Bissau	2.5 2020	:	:	:	1.5 2020 ^a	a 4.0 2020	0.0 0.0 0.0 2022	14.7 2020	:	37.3 2021
Kenya	9.0 5.5 3.5 2021	3.2 2021	2.7 2021	6.3 2019	12.4 15.6 9.0 2019	2.4 3.4 0.8 2021	0.0 0.0 0.0 2022	19.8 2021	3.6 2021	53.3 2021
Lesotho	11.7 1.7 10.0 2021	67.2 2021	59.6 2021	:		:	0.0 0.0 0.0 2020	100.0 100.0 100.0 2021	10.2 2021	53.3 2021
Liberia	6.2 2019	. 5.8 5.2 6.3 2019	:	:	7.5 2019	:	0.0 0.0 0.0 2020	3.4 2019	2.7 2019	44.7 2021
Madagascar	15.4 10.3 5.1 2022	: 21.3 2022	19.6 2022	3.1 2022	6.2 8.2 4.2 2022	:	0.0 0.0 0.0 2022	19.2 2022	11.9 2022	34.9 2021
Malawi	19.9 20.6 19.1 2.3 17.6 2022	: 33.1 2022	29.5 2022	2.2 2022	1.5 2.1 0.7 2022	: 8.9 2022	0.0 0.0 0.0 2022	8.9 2022	18.0 17.7 18.2 2022	48.3 2021
Mali	12.6 14.0 10.0 7.2 5.4 2022	: 15.7 16.0 13.3 2022 ^b	13.6 14.0 11.6 2022 ^b	2.3 2022	4.6 6.0 2.5 2022	: 1.0 2022	0.0 0.0 0.0 2022	5.6 7.4 1.9 2022	9.8 10.0 8.4 2022	41.3 2021
Mauritania	11.2 13.5 9.0 6.5 4.7 2020	4.9 2019	4.2 2020	0.2 2019	12.0 13.7 8.5 2020	2.2 3.5 1.1 2020	0.0 0.0 0.0 2022	18.6 30.3 7.8 2019	7.1 7.4 6.8 2020	40.1 2021
Mauritius	74.7 42.3 32.4 2021	10.8 2021	9.6 2021	33.8 2021	64.5 2021	100.0 100.0 100.0 2021	1.2 2021	100.0 100.0 100.0 2021	56.2 2021	65.7 2021
Mozambique	6.0 2022	: 0.1 2022 ^a	0.1 2022 ^a	0.4 2022 ^a	6.8 9.8 3.9 2021 ^a	a 16.4 2022 ^a	0.0 0.0 0.0 2022 ^a	42.3 2022 ^a	9.2 2021 ^a	44.0 2021

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Outbound-10 ¹ Outboun	Country/territory	SDG 1.3.1 – Population covered				People protected by so	People protected by social protection systems including floors	ding floors			SDG 3.8.1
111 <th1< th=""><th></th><th>by at least one social protection benefit (excluding health)¹ By type of By sex By sex</th><th>Children (0-15)²</th><th>Children (0–18)³</th><th>Mothers with newborns⁴</th><th>Workers in case of work injury^s</th><th>Persons with severe disabilities⁶</th><th>Unemployed</th><th>Older persons⁸</th><th>Vulnerable persons receiving assistance benefits⁶</th><th>- Universal health coverage (WHO)¹⁰</th></th1<>		by at least one social protection benefit (excluding health) ¹ By type of By sex By sex	Children (0-15) ²	Children (0–18) ³	Mothers with newborns ⁴	Workers in case of work injury ^s	Persons with severe disabilities ⁶	Unemployed	Older persons ⁸	Vulnerable persons receiving assistance benefits ⁶	- Universal health coverage (WHO) ¹⁰
1 1 1 2		Men Women Contributory Tax-financed	Boys	Boys		мел Мотеп	мел Мотеп	ием Мотеп	nemoW	ием Мотеп	
316 a a 210 a <td>Namibia</td> <td> 29.7 22.5</td> <td></td> <td>:</td> <td></td> <td>:</td> <td>70.1</td> <td>0.0 0.0 2022</td> <td></td> <td>:</td> <td>و</td>	Namibia	29.7 22.5		:		:	70.1	0.0 0.0 2022		:	و
1411 <th< td=""><td>Niger</td><td>:</td><td>:</td><td>:</td><td></td><td>:</td><td>:</td><td>0.0 0.0</td><td>:</td><td>:</td><td></td></th<>	Niger	:	:	:		:	:	0.0 0.0	:	:	
12 a b a	Nigeria	5.6 9.2	:	9.1	2.0 2022	:	2.1	0.0 0.0 0.0	6 31.7 5.2	10.1	4
10.110	Rwanda	5.6 1.6	:	:		18.9 12.3	1.2	0.0 0.0	15.0 17.9	:	و
13 1	Sao Tome and Principe	14.5 7.6	:	:	2021	33.8 36.8	10.9	0.0 0.0 0.0	72.8 43.0	8.9 3.3 14.0 2021	80
344	Senegal	10.2 9.7	:	:		:	5.4	0.0 0.0	:	:	
werewe	Seychelles	47.3 63.6 47.1 14.1	:	:		78.8 96.3	97.6 85.2 100.0	2019	100.0	:	
000 <th0< td=""><td>Sierra Leone</td><td>:</td><td>:</td><td>:</td><td></td><td>:</td><td>::</td><td>0.0 0.0</td><td>:</td><td>:</td><td></td></th0<>	Sierra Leone	:	:	:		:	::	0.0 0.0	:	:	
(a)(b)(a	Somalia	0.0 0.0 0.0 0.0	0.0 0.0	0.0 0.0		0.0 0.0	0.0 0.0 0.0	0.0 0.0	0.0 0.0	0.0 0.0	
andan	South Africa	19.4	:	:		:	56.8 58.5 55.2	:	81.7 78.9	:	
(u)	South Sudan	0.0 0.0 0.0	0.0 0.0	0.0 0.0		0.0 0.0	0.0 0.0 0.0	0.0 0.0	0.0 0.0	0.0 0.0	
38.1 a. a. b. a. b. a. b. a. a. <td>Tanzania (United Republic of)</td> <td>10.8 11.4 2.2 9.1</td> <td>:</td> <td>:</td> <td></td> <td>4.8 2.8</td> <td>0.6</td> <td>21.6 4.3</td> <td>:</td> <td>8.5 10.1</td> <td></td>	Tanzania (United Republic of)	10.8 11.4 2.2 9.1	:	:		4.8 2.8	0.6	21.6 4.3	:	8.5 10.1	
31 a. 22 84 a. a.<	Togo	5.8	76.9 72.0	66.2 62.0		:	1.7	0.0 0.0	:	:	
303 51 25 202 30 202 52 52 52 52 52 53	Uganda	2.2	:	:		:	:	0.0 0.0	:	:	
6 16 17 47 2021 6.0 10 10 10 100	Zambia	4.7 25.6	:	:		:	20.9	0.0 0.0	:	:	
Altericial Altericial addended 689 601 741 666 23<2020	Zimbabwe	11.7 4.7	:	:		31.7 20.6	6.0	0.0 0.0		:	0
Latin America and the Caribbean Latin America and the Caribbean 68.9 60.1 74.1 66.6 2.3 2020 2.4 2020 95.7 82.8 100.0 2020 34.1 26.2 41.7 2020 66.1 51.7 72.02 68.4 2020 78.8 2020 34.1 26.2 41.7 2020 64.1 2020 68.4 2020 68.4 2020 68.4 2020 78.8 2020 94.1 2020 204 24.8 204 24.8 204 24.8 204 24.8 </td <td></td> <td></td> <td></td> <td></td> <td>Am</td> <td>ericas</td> <td></td> <td></td> <td></td> <td></td> <td></td>					Am	ericas					
68.9 60.1 74.1 66.6 5.3 20.20 2.4 2020 100.0 202 95.7 85.8 100.0 34.1 56.1 17.7 2020 66.1 59.1 72.7 2020 68.4 2020 2020 2020 2020 2020 201 201 201 201 201 201 2020				Lā	itin America a	and the Caribbean					
and Barbuda 65.4 63.2 2.2 2020	Anguilla	60.1 74.1 66.6	:	2020		82.8 100.0	34.1 26.2 41.7	:	59.1 72.7	:	
ina 65.9 509 151 2021 87.8 2021 73.3 2021 29.8 2021 45.8 477 43.1 2021 100.0 2021 14.3 2021 96.8 96.4 87.8 2021 33.5 2021 78.5 201 94.3 201 20.0 00.0 100.0 2021 33.5 2021 78.5 201 24.3 2021 78.5 201 24.3 2021 25.0 25.1 25.0 2021 25.0 25.1 25.0 2021 25.0 25.1 25.0 2021 25.0 25.1 25.0 25.1 25.0 25.1 25.0 2021 25.0 25.1 25.0 2021 25.0 25.1 25.1 25.1 25.1 25.1 25.1 25.1 25.1	Antigua and Barbuda	63.2 2.2	:			:	9.1	0.0 0.0	:	:	
94.3 91.7 2.7 2021 5.0 2021 4.0 2021 60.7 2021 71.7 68.3 75.0 2021 2019 100.0 100.0 100.0 2021 38.4 2021	Argentina	50.9 15.1	:	:		47.7 43.1	100.0	:	96.4 87.8	:	ŝ
	Aruba	91.7 2.7	:	:		68.3 75.0	:	2019		:	

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Country/territory	SDG 1.3.1 - Population covered				People protected by soci	People protected by social protection systems including floors	ng floors			SDG 3.8.1
	by at least one social protection benefit (excluding health) ¹ By type of By sex	Children (0–15)²	Children (0-18) ³	Mothers with newborns ⁴	vrkers in case of work injury ^s	Persons with severe disabilities ⁶	u Unemployed	Older persons ⁴	Vulnerable persons receiving social assistance benefits ^a	- Universal health coverage (WHO) ¹⁰
	کویز Tax-financed Wen Men Tax-financed Men Total	year Giris Boys Total	Total Girls Year	Women Year	Total Men Women Year	Year Women Total	Total Wen Year	Total Men Year	Total Wen Year	Total Year
Bahamas	49.1 48.2 1.7 2020	1.3 1.3 1.3 2018	1.6 1.6 1.6 2018	60.5 2019	67.4 2019	51.0 2020	26.9 2020	74.8 79.2 71.6 2019	2.1 2020	77.2 2021
Barbados	56.7 52.9 60.2 52.6 4.2 2020	13.1 2020	10.9 2020	58.2 2020	76.7 68.8 84.6 2020	65.6 62.2 68.6 2020	88.0 2020	98.4 100.0 93.0 2020	9.2 2020	76.9 2021
Belize	32.0 36.5 23.9 30.0 2.0 2021	3.0 2021	3.0 2021	15.4 2021	57.7 57.7 57.6 2021	10.7 11.7 9.7 2021	0.0 0.0 0.0 2022	37.5 47.9 27.3 2021	3.1 2021	67.6 2021
Bolivia (Plurinational State of)	38.4 8.7 29.8 2021	62.8 2021	52.8 2021	38.7 2021	13.9 14.0 13.7 2021	7.0 2021	0.0 0.0 0.0 2022	100.0 100.0 100.0 2021	32.6 2021	65.1 2021
Brazil	71.2 48.8 22.4 2022	65.9 2021	53.7 2019	48.9 2021	52.2 48.9 56.4 2022 ^c	100.0 100.0 100.0 2021	13.9 2021	88.6 100.0 67.4 2022	47.1 2020	80.4 2021
British Virgin Islands	78.3 78.1 0.2 2022	0.0 0.0 0.0 2022	0.0 0.0 0.0 2022	8.4 2022	100.0 100.0 100.0 2020	25.5 2022	0.0 0.0 0.0 2020	59.3 2022	0.7 2022	:
Cayman Islands	94.2 94.2 0.0 2021		: : :	:	100.0 2021	0.0 0.0 0.0 2022	0.0 0.0 0.0 2020	3.1 2021		:
Chile	75.3 53.9 21.4 2022	57.5 2021	48.0 2021	39.7 2021	74.4 75.5 72.7 2021	91.5 100.0 78.2 2021	24.6 2022	71.6 69.6 72.7 2021	30.0 2021	82.3 2021
Colombia	54.3 30.8 23.6 2022	33.9 2022	27.9 2022	:	45.6 2022	8.7 10.9 3.9 2022	2.7 2021	51.4 67.5 42.8 2022	34.5 2022	79.6 2021
Costa Rica	59.8 41.5 18.3 2022	44.2 42.4 46.1 2021	36.6 35.1 38.1 2021	27.8 2022	54.1 56.2 51.0 2022	76.0 81.3 60.3 2022	:	56.9 68.8 46.6 2022	31.2 2021	81.1 2021
Cuba	63.9 60.7 3.2 2022	0.2 2020	:	42.7 2020	100.0 100.0 100.0 2020	:	0.0 0.0 0.0 2022	60.9 2022	8.2 2021	82.8 2021
Curaçao	47.9 47.9 0.0 2020	:	:	:	60.4 2020	:	0.0 0.0 0.0 2022	100.0 100.0 100.0 2020	:	:
Dominica	53.2 41.9 11.3 2020	0.7 1.1 0.3 2020	1.1 1.6 0.5 2020	30.2 2020	63.3 2020	11.8 2020	0.0 0.0 0.0 2019	92.7 100.0 85.3 2020	19.7 2020	49.2 2021
Dominican Republic	61.0 22.1 39.0 2022	68.2 2022	57.3 2022	22.5 2021	47.6 44.7 51.7 2021	10.4 2019	0.0 0.0 0.0 2022	7.6 9.9 5.5 2021	50.0 2022	77.0 2021
Ecuador	46.8 49.3 44.0 25.3 21.3 2021	29.2 29.1 29.2 2021	29.8 29.8 29.8 2021	5.0 2021	35.5 34.9 36.4 2021	41.7 38.8 45.4 2021	3.8 4.7 3.0 2021	66.1 82.0 52.9 2021	29.4 30.7 26.9 2021	76.6 2021
El Salvador	18.8 20.9 14.0 17.5 3.7 2021	0.5 0.5 0.5 2021	0.9 0.9 0.9 2021	10.6 2021	32.3 2021	13.5 2021	0.0 0.0 0.0 2022	24.5 47.4 15.6 2021	4.8 2021	78.0 2021
French Guiana	61.9 10.4 51.6 2022	81.0 2021	75.8 2021	32.2 2021	16.2 16.4 15.9 2021	68.8 2021	50.0 2021	55.5 57.2 47.5 2022	57.5 2021	:
Grenada	54.3 48.6 5.7 2022		:	87.5 2020	77.3 2020	22.2 2020	0.0 0.0 0.0 2022	53.5 2020	13.1 2022	70.4 2021
Guadeloupe	88.2 43.0 45.3 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	0.0 2021	42.2 40.4 43.6 2020	100.0 100.0 100.0 2021	58.2 60.2 56.5 2021	82.3 84.6 80.6 2021	79.4 2021	:
Guatemala	12.1 12.7 6.9 10.0 2.1 2022	2.8 2022	2.4 2022	7.9 2022	21.6 20.7 23.7 2021	2.1 2.7 0.9 2022	0.0 0.0 0.0 2022	23.3 27.5 13.4 2022	2.3 2022	58.7 2021
Guyana	100.0 100.0 100.0 2020	:	:	30.1 2019	100.0 100.0 100.0 2020	45.1 2020	0.0 0.0 0.0 2020	100.0 100.0 100.0 2020	100.0 100.0 100.0 2020	75.9 2021
Haiti	6.6 3.6 3.1 2022	4.1 2019	:	1.7 2019	3.0 2022	:	0.0 0.0 0.0 2022	1.0 2022	3.2 2019	54.1 2021

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Functional problemation Control problemation Contro	Country/territory	SDG 1.3.1 – Population covered				People protected by soci	People protected by social protection systems including floors	ing floors			SDG 3.8.1
No No<		by at least one social protection benefit (excluding health) ¹ By type of By sex (feme ¹⁴	Children (0-15) ²	Children (0-18) ³	Mothers with newborns ⁴	Workers in case of work injury ^s	Persons with severe disabilities ⁴	Unemployed?	Older persons ^a	Vulnerable persons receiving social assistance benefits ⁹	 Universal health coverage (WHO)¹⁰
1 1		Men Momen Tax-fibutory	Girls Boys	Girls Boys		Mem Mem	Memen	Mem	Memen	Mem	
16 16<	Honduras	9.0 21.1	:	15.6		:		0.0 0.0		:	
(i) (i) <td>Jamaica</td> <td>29.9 34.7 21.6 11.0</td> <td>36.3 33.8</td> <td>28.3 29.3 27.3</td> <td></td> <td>32.7 48.0</td> <td>5</td> <td>0.0 0.0</td> <td>84.5 90.5</td> <td>13.1 14.9</td> <td></td>	Jamaica	29.9 34.7 21.6 11.0	36.3 33.8	28.3 29.3 27.3		32.7 48.0	5	0.0 0.0	84.5 90.5	13.1 14.9	
10 10<	Martinique	49.8 38.4	:	98.3		:	2021	:	71.3 72.8	:	
enden	Mexico	85.1 73.8 30.6	:	34.8		40.0 42.8	68.9 37.3	2022		77.0 65.9	
andan	Montserrat	81.2	:	:		:	:	:		:	
matrix661aaabaaa </td <td>Nicaragua</td> <td>17.7 12.4 15.3 0.0</td> <td>:</td> <td>0.8</td> <td></td> <td>:</td> <td>3</td> <td>0.0 0.0</td> <td>46.8 25.8</td> <td>:</td> <td></td>	Nicaragua	17.7 12.4 15.3 0.0	:	0.8		:	3	0.0 0.0	46.8 25.8	:	
uppeddefaaa <td>Panama</td> <td> 36.9 29.2</td> <td>:</td> <td>64.5</td> <td></td> <td>63.2 59.0</td> <td>40.4 25.8</td> <td>0.0 0.0</td> <td>86.4 43.6</td> <td>:</td> <td></td>	Panama	36.9 29.2	:	64.5		63.2 59.0	40.4 25.8	0.0 0.0	86.4 43.6	:	
24 32 31 32<	Paraguay	18.8 17.3	:	17.8		24.0 27.3	:	0.0 0.0	79.0 85.0	:	
83 1 532 13 1 232 14 232 14 232 14 232 24 232 24 232 24 232 24 232 243 243 <th< td=""><td>Peru</td><td>28.9 20.1 16.6 8.5</td><td>:</td><td>14.6</td><td></td><td>: : 8</td><td>12.9 9.5</td><td>0.0 0.0</td><td>39.0 30.1</td><td>12.7 7.7</td><td></td></th<>	Peru	28.9 20.1 16.6 8.5	:	14.6		: : 8	12.9 9.5	0.0 0.0	39.0 30.1	12.7 7.7	
9.2 5.3 (1 2.02 5.3 2.03 5.3 5.0 5.3 5.0 <td>Puerto Rico</td> <td> 57.8 1.1</td> <td>:</td> <td>10.6</td> <td></td> <td>49.2</td> <td>100.0</td> <td>:</td> <td>81.9 77.8</td> <td>:</td> <td></td>	Puerto Rico	57.8 1.1	:	10.6		49.2	100.0	:	81.9 77.8	:	
10113151515101110111011	Saint Kitts and Nevis	75.6 14.6	:	4.5	5 2020	98.8 100.0	:	0.0 0.0	86.7 83.1	:	
2.0	Saint Lucia	36.3 40.9 38.6 1.5	:	4.4		3 58.6 67.8	4 12.3 14.0	0.0 0.0	58.6 40.6	:	76
687 687 687 2021 67. 7.0 7.	Saint Vincent and the Grenadines	47.5 4.5	1.3 1.2	0.6 0.6 0.6		66.4 98.9	9 6.2 4.4	0.0 0.0	49.8 53.8		
68.5 20.1 10.0 20.1 20.0 57.1 20.1 20.1 20.1 20.1 20.1 10.1	Sint Maarten (Dutch part)	68.7 0.0	2.9 7.3	2.9 2.1 4.2		:	:	0.0 0.0 2021	100.0	:	
336 47 803 564 2021 60 60 <td>St Martin (French part)</td> <td>5 24.0 44.6</td> <td>:</td> <td>100.0</td> <td></td> <td>: : 9</td> <td>:</td> <td>:</td> <td>:</td> <td>:</td> <td></td>	St Martin (French part)	5 24.0 44.6	:	100.0		: : 9	:	:	:	:	
57.2 18.1 2020 15.1 2020 25.5 57.5 75.7 2022 60.1 74.3 62.2 0 0 0	Suriname	4.7 28.9	:	46.8		:	:	0.0 0.0 2021		:	
2.1 54 201 8.6 201 9.1 202 9.5 47.2 5.5 7.2 5.7 7.19 18 202 202 202 202 202 202 202 202 202 202 9.5 2021 47 202 9.5 2021 47 202 2	Trinidad and Tobago	41.9 15.3	:	15.1		57.5 79.7	74.3 46.2	0.0 0.0	100.0 63.3	:	
66.7 66.4 0.4 0.4 2022 7.4 2022 8.7.8 2021 8.7. 2021 8.7 2021 8.7 2021 1.4 2021 8.7 2021 8.7 2021 1.4 2021 8.7 2021 8.1 2021 1.6 8.1 2021 1.6 8.1 2021 1.6 8.7 2021 1.0 8.7 2021 1.0 1.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 1.0 1.4 2021 8.1 2021 1.0 1.0 100.0 <	Turks and Caicos Islands	54.6	:	:		:	:	0.0 0.0	47.2 25.7	:	
95.0 2021 55.3 2021 56.8 2021 100.0	United States Virgin Islands	66.4 0.4	:	6.3		:	:	:	:	:	
30.8	Uruguay	61.5 33.5	:	55.3		:		2021		:	
	Venezuela (Bolivarian Republic of)	:	:	:		:	:	2016		:	

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Country/territory	SDG 1.3.1 – Population covered				People protected by so	People protected by social protection systems including floors	luding floors					SDG 3.8.1
	by at least one social protection benefit (excluding health)'	Children (0–15)²	Children (0–18) ³	Mothers with	Workers in case of work iniurv ^s	Persons with severe disabilities ⁶	Unemployed	Older persons ⁸	°s	Vulnerabl	ble	- Universal health
	scheme" By type of By sex			newborns ⁴						receiving social assistance benefits ⁹	pcs	coverage (WHO) ¹⁰
	Year Tax-financed Wen Women Tax-financed Tax-financed	Year Girls Total	Year Girls Doys	Year Women	Total Wemen Year	, Kest Momen Dotsi	Total Men Women Year	Total Men Women	Year Total	Mem	Year	Total Year
	-		-	Norther	Northern America	-	-		_	-		
Bermuda	80.0 72.9 7.1 2021	1.4 2021	1.2 2021	79.9 2020	32.2 2019	9 57.8 2021	11 0.0 0.0 0.0 2020	20 92.8	2021 2 6	26.4	2021	:
Canada	95.6 75.1 20.5 2022	100.0 100.0 100.0 2021	90.9 2021	96.9 2023	83.6 2022 ^a	2 ^a 69.4 2022	.2 47.4 52.5 41.3 2022	22 100.0 100.0 100.0	2022 100.0		2021	91.0 2021
Saint Pierre and Miquelon	92.9 78.7 14.2 2021	100.0 100.0 100.0 2021	93.4 2021	100.0 2021	60.9 2021	1 100.0 100.0 100.0 2021	1 44.4 2021	21 100.0 100.0 100.0	2021 10	100.0 100.0 100.0	.0 2021	:
United States	78.8 74.8 4.1 2023	82.4 2023	82.4 2023	:	87.2 85.7 89.0 2023	3 100.0 100.0 100.0 2023	.3 50.5 2021	21 100.0 100.0 100.0	2023 8	87.6	2023	85.7 2021
				Arab	Arab States							
Bahrain	86.4 48.8 54.9 2022	7.6 2022	6.5 2022	18.2 2022 ^c	17.8 13.3 34.1 2022 ^c	2 ^c 27.8 2021	:1 46.6 50.9 45.4 2019	19 46.5 55.5 39.2	2022 7:	72.4	2021	76.0 2021
Iraq	41.7 17.8 24.0 2022	23.6 2022	20.3 2022	5.8 2022 ^c	44.6 43.9 48.8 2022 ^c	2 ^c 31.9 33.1 30.8 2022	.2 0.0 0.0 0.0 2022	22 48.9 73.3 24.7	2022 2 8	28.9	2022	58.5 2021
Jordan	26.6 2021	13.6 2021	: : :	9.6 2021 ^c	57.5 49.3 99.8 2019	9 48.5 2021	11 5.3 5.7 4.2 2019	19 46.1	2021	9.7	2021	64.9 2021
Kuwait	18.2 16.4 1.8 2022	7.0 2022	5.9 2022	22.2 2022 ^c	17.4 10.6 38.3 2021	1 9.9 2022	.2 2.8 4.1 2.0 2021	21 25.4 21.3 30.8	2022	3.8	2022	77.8 2021
Lebanon	20.0 13.5 6.5 2022	35.8 2022	29.8 2022	1.5 2022 ^c	4.6 4.9 4.0 2022	:	0.0 0.0 0.0 2022	22 10.0	2018 1	15.2	2022	72.6 2021
Occupied Palestinian Territory	16.5 4.1 12.4 2022	9.1 2022	9.7 2022	6.8 2022 ^c	0.0 0.0 0.0 2022	2 34.5 2022	.2 0.0 0.0 0.0 2022	22 25.0	2022 1:	12.9	2022	÷
Oman	21.8 23.5 19.3 19.0 2.8 2022	1.3 1.6 1.0 2022	1.5 1.8 1.2 2022	26.4 2022 ^c	27.1 23.8 43.3 2022	2 35.6 34.2 37.9 2022	.2 25.8 51.5 10.9 2022	22 46.6 57.7 38.4	2022	3.5 2.1	5.6 2022	69.9 2021
Qatar	4.1 2.3 8.6 3.5 0.6 2022	1.3 1.3 1.3 2022	1.3 1.3 1.3 2022	9.5 2022 ^c	4.0 2.0 14.2 2022	2 7.2 4.6 13.9 2022	.2 1.0 2019	19 8.0 5.6 13.4	2022	0.5 0.2	1.4 2022	76.4 2021
Saudi Arabia	64.0 33.5 30.5 2022	30.2 2022	25.7 2022	14.0 2022 ^c	23.6 25.3 16.2 2022 ^c	2 ^c 5.7 2022	.2 3.0 2022	22 24.5 24.9 1.8	2022 5 .	51.3	2022	74.4 2021
Syrian Arab Republic	: : :	:	:	:	47.8 2008	:	:	16.7	2006	:	:	64.1 2021
United Arab Emirates	4.1 1.7 4.6 2.9 1.2 2022	0.2 2022	0.1 2022	5.2 2022 ^c	3.0 1.6 8.9 2022	2 4.1 2022	.2 0.4 2022	22 19.7	2022	1.6	2022	81.8 2021
Yemen	7.0 9.2 4.5 3.5 3.4 2022	:	:	1.3 2022	11.3 9.9 28.0 2022	:	0.0 0.0 0.0 2022	22 17.8 43.3 3.9	2022	3.5 3.7 3	3.3 2022	42.5 2021

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country/removed	SDG 1.3.1 – Population covered				People protected by s	People protected by social protection systems including floors	Iding floors				SDG	SDG 3.8.1
	by at least one social protection benefit (excluding health)' rsex (sex (uding health)' rsex (sex (uding health)'	Children (0–15)²	Children (0-18) ³	Mothers with newborns ⁴	Workers in case of work injury ^s	Persons with severe disabilities ⁶	Unemployed?	Older persons ⁶		Vulnerable persons receiving social assistance benefits°	- Univ hea Cove (WF	Universal health coverage (WHO) ¹⁰
	Women Contributory B	Year Girls Doys	Total Boys Girls Year	Year Year	Total Men Year Year	Total Men Year	Year Men Vomen	Year Women	Total	Уеаг	lstoT	Year
	-	-	-	Asia and	Asia and the Pacific	-	-	_	-	-		
				East	Eastern Asia							
China	75.6 77.6 73.2 60.9 14.7 2021	2.9 2021	2.4 2021	24.2 2019	35.9 36.9 34.7 20	2021 43.9 2021	21.9 2021	100.0 100.0 100.0 2022	22 38.7	2021	1 81.0	2021
Hong Kong, China	63.3 44.2 19.1 2023	: : :	: : :	:	77.2 20	2023 77.4 2023	9.6 2023	82.5 2023	23 35.7	2023	: 	:
Japan	94.6 82.2 12.4 2020	85.4 2019	53.4 2020	41.8 2020	89.9 20	2020 51.9 2020	24.9 2020	100.0 100.0 100.0 2020	20 69.8	2020	0 83.5	2021
Korea (Democratic People's Republic of)		:	:	: :	:	: : :	: : :	:	:	:	68.0	2021
Macao, China	75.3 72.2 3.1 2022	•	:	:	:	100.0 100.0 100.0 2022	6.8 2022	100.0 100.0 100.0 2023	23 10.9	2022	2	:
Mongolia	93.5 44.2 49.4 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	100.0 2021	80.7 74.8 87.3 20	2021 100.0 100.0 100.0 2021	26.7 25.0 28.9 2021 1	100.0 100.0 100.0 2021	21 88.4	2021	1 65.0	2021
Republic of Korea	80.2 60.7 19.6 2022	35.3 2022	30.8 2022	45.6 2021	95.1 20	2019 ^c 29.4 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2022	22 49.3	2022	2 89.1	2021
Taiwan, China	78.4 77.4 79.2 74.1 4.3 2023	19.8 19.7 20.0 2023	16.5 16.4 16.6 2023	68.9 2023	87.7 79.5 97.9 20	2023 48.9 59.1 38.6 2023	6.9 5.6 8.7 2023	99.3 98.4 100.0 2023	23 16.1 14.3	.3 17.8 2023	: 	i
			Sc	uth-Eastern /	South-Eastern Asia and the Pacific							
Australia	94.0 94.4 93.7 52.8 41.2 2022	100.0 100.0 100.0 2022	83.6 83.7 83.6 2022	93.0 2022	79.9 75.8 84.5 20	2021 ^c 100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	74.4 71.9 76.5 2022	22 93.6	2022	2 86.8	2021
Brunei Darussalam	36.0 24.1 11.8 2021	:	:	52.8 2021	88.3 20	2021 100.0 100.0 100.0 2021	0.0 0.0 0.0 2022 1	100.0 100.0 100.0 2021	21 15.6	2021	1 78.3	2021
Cambodia	20.8 16.6 24.9 18.6 2.2 2022	7.0 4.5 9.8 2020	6.2 3.9 8.5 2020	42.5 2020	32.1 23.8 41.4 20	2022 0.7 2015	0.0 0.0 0.0 2022	8.1 11.5 5.7 2020	2.7	1.8 3.7 2020	0 58.0	2021
Cook Islands	100.0 100.0 100.0 76.3 38.6 2022	100.0 100.0 100.0 2022	90.0 90.4 89.5 2022	22.5 2022	:	48.6 51.2 46.1 2022	0.0 0.0 0.0 2022	67.2 71.3 63.7 2022	22 100.0 100.0	.0 100.0 2022	2 46.0	2021
Fiji	65.6 42.9 22.7 2022	10.8 2022	9.1 2022	28.4 2022	55.7 20	2020 ^c 45.6 2022	0.0 0.0 0.0 2022	100.0 100.0 100.0 2022	22 39.7	2022	2 58.3	2021
Indonesia	54.3 14.2 40.1 2021	43.6 2021	47.2 2021	29.4 2021	26.3 20	2021 2.5 2019	0.0 0.0 0.0 2022	31.2 2021	21 49.5	2021	1 54.8	2021
Kiribati	21.0 2020	1.3 2019	:	:	32.8 20	2019	0.0 0.0 0.0 2020	93.8 2020	20 5.1	2020	0 47.7	2021
Lao People's Democratic Republic	15.5 4.9 10.6 2021	:	:	8.1 2021	10.3 20	2021 0.3 2021	30.8 2021	7.0 2021	21 11.2	2021	1 51.8	2021
Malaysia	29.2 32.0 21.0 27.7 1.5 2023	1.6 2021	1.4 2021	49.9 2019	43.8 20	2023 32.2 2021	10.4 2019	18.5 24.3 13.0 2023	23 2.0	2020	0 76.0	2021
Marshall Islands	25.2 0.0 2020	0.0 0.0 0.0 2022	0.0 0.0 0.0 2022	0.0 2022	:	:	0.0 0.0 0.0 2022	62.7 2019	19 1.7	2020	0 58.9	2021
Micronesia (Federated States of)	20.0 21.9 18.1 20.0 0.0 2021	6.8 2020		:	:	16.1 2021	0.0 0.0 0.0 2020	97.0 96.9 97.0 2021	21 2.2	2019	9 47.7	2021

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Country/territory	SDG 1.3.1 – Population covered				People protected	by social prote	People protected by social protection systems including floors	ding floors			SDG 3.8.1
	by at least one social protection benefit (excluding health) ¹ By type of By sex By sex	Children (0-15) ²	Children (0-18) ³	Mothers with newborns ⁴	Workers in case of work injury ^s	- Pers	Persons with severe disabilities ⁶	Unemployed?	Older persons ¹	Vulnerable persons receiving social assistance benefits ^a	- Universal health coverage (WHO) ¹⁰
	لومعد Tax-financed Men Men Tax-financed Men Tax-financed Men	Year Girls Total	Total Girls Year	Year Women	Total Men Women	Year Total	Year Women Men	Year Wen Total	Year Wen Total	Year Women Men	Total Year
Myanmar	6.3 2019	2.1 2019	•	1.6 2019	8.5	2019 10.6	2019	0.0 0.0 0.0 2020	:	1.1 2019	52.5 2021
Nauru	65.8 33.7 32.0 2020	66.0 2019	57.9 2019	80.3 2018	88.6 88.2 89.1	2020 ^c 18.3	2019	0.0 0.0 0.0 2022	100.0 100.0 100.0 2018	45.4 2020	60.4 2021
New Caledonia	72.6 64.0 8.6 2022	98.6 2022	85.6 2022	100.0 2022	67.7	2022 59.9	2017	14.6 2020	98.8 2022	24.0 2022	:
New Zealand	100.0 100.0 100.0 2023	79.9 2023	66.3 2023	100.0 2023 ⁶	c 100.0 100.0 100.0	2023 ^c 98.9	100.0 93.1 2023	100.0 100.0 100.0 2023	100.0 100.0 100.0 2023	100.0 100.0 100.0 2023	84.8 2021
Niue	48.6 32.5 16.1 2018	84.5 2018	73.4 2018	100.0 2018	:	21.6	2018	:	100.0 100.0 100.0 2018	23.8 2018	43.6 2021
Palau	93.2 91.8 1.5 2019	:	:	31.9 2020	: : :	85.6	2019	0.0 0.0 0.0 2020	100.0 100.0 100.0 2019	17.8 2020	64.8 2021
Papua New Guinea	9.1 9.1 0.0 2022	0.0 0.0 0.0 2022	0.0 0.0 0.0 2022	:	20.5	2019 0.0	0.0 0.0 2022	0.0 0.0 0.0 2020	1.9 2022	0.0 0.0 0.0 2022	30.4 2021
Philippines	34.9 15.7 19.1 2022	9.9 9.8 9.9 2021	16.9 16.9 17.0 2021	14.6 2021	33.4	2021 2.2	2021	5.6 2021	65.6 71.4 60.7 2021	22.7 2022	58.2 2021
Samoa	20.2 14.4 5.8 2023	0.0 0.0 0.0 2023	0.0 0.0 0.0 2023	19.5 2021 ^c	44.2 43.8 44.7	2021 ^c 30.3	2022	0.0 0.0 0.0 2023	93.9 2023	6.8 2023	55.1 2021
Singapore	100.0 100.0 100.0 74.0 32.1 2023	27.8 2023	23.0 2023	63.1 2021 ⁶	c 95.9 96.4 95.3	2021 ^c 55.7	2023	0.0 0.0 0.0 2020	37.3 2021	100.0 100.0 100.0 2023	88.5 2021
Solomon Islands	17.2 20.7 12.5 17.2 0.0 2019	:	:	23.8 2020 ⁶	35.9	2021 ^c 2.4	2019	0.0 0.0 0.0 2022	0.0 0.0 0.0 2021	0.4 2019	47.3 2021
Thailand	70.1 30.3 39.8 2020	31.8 2020	26.2 2020	38.8 2020	30.9	2019 97.9	2020	62.8 2019	82.6 2020	59.9 2020	82.0 2021
Timor-Leste	23.6 6.7 16.9 2023	16.4 2023	13.7 2023	2.2 2023	14.8	2023 22.3	2023	0.0 0.0 0.0 2023	92.7 2023	18.1 2023	52.3 2021
Tonga	28.2 30.4 26.0 21.8 6.3 2022	0.0 0.0 0.0 2022	0.0 0.0 0.0 2022	26.3 2019	:	76.7	70.2 83.2 2022	0.0 0.0 0.0 2022	100.0 100.0 100.0 2022	8.1 7.3 8.9 2022	56.7 2021
Tuvalu	4.5 0.0 4.5 2019	0.0 0.0 0.0 2022	0.0 0.0 0.0 2022	0.0 2022	:	42.3	2019	0.0 0.0 0.0 2020	100.0 100.0 100.0 2019	4.5 2019	52.4 2021
Vanuatu	57.4 2019	12.9 2019	:	:	28.1	2019 0.0	0.0 0.0 2022	0.0 0.0 0.0 2022	4.1 2019	53.3 2019	47.0 2021
Viet Nam	38.3 21.2 17.1 2022	1.4 2020	1.2 2020	44.0 2019	29.6	2022 85.1	2021	59.2 2021	40.9 2019	21.7 2021	68.1 2021
				Sout	Southern Asia						
Afghanistan	7.5 2019	0.4 2019	:	1.7 2019	4.2	2019 13.6	2019	1.7 2019	24.7 2019	5.9 2019	40.9 2021
Bangladesh	22.0 3.5 18.6 2021	44.5 2021	1.9 2021	34.6 2021	12.5	2019 43.5	2021	0.0 0.0 0.0 2022	56.9 2021	19.2 2021	51.6 2021
Bhutan	11.9 5.6 6.3 2021	4.0 2021	3.2 2021	6.3 2021	28.4	2019 0.7	0.7 0.6 2021	0.0 0.0 0.0 2022	18.8 2019	6.7 2021	60.4 2021
India	48.8 17.0 31.9 2022	51.9 2022 ^d	43.0 2022 ^d	58.2 2022	8.3	2022 18.3	2022	0.0 0.0 0.0 2022	45.9 52.6 39.5 2022 ⁹	38.2 2022 ^d	63.3 2021

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Country/territory	SDG 1.3.1 - Population covered				People protected by soc	People protected by social protection systems including floors	ing floors			SDG 3.8.1	8.1
	by at least one social protection benefit (excluding health)' By type of By sex By sex	Children (0-15) ²	Children (0-18) ³	Mothers with newborns ⁴	vorkers in case of work injury ⁶	Persons with severe disabilities ⁶	Unemployed	Older persons ^a	Vulnerable persons receiving social assistance benefits ⁶	- Universa health coverage (WHO) ¹⁰	ih ih ige
	لرفعد Tax-financed Men Tax-financed Men Total	, jest Cirls Boys Total	Aear Girls Boys Total	Year Women	Total Men Women Year	year Wenen Total	Деяс Momen Men Total	Total Men Year	Total Men Momen	Year Total	Year
Iran (Islamic Republic of)	100.0 100.0 100.0 19.7 86.9 2023	86.9 2019	87.0 2019	20.4 2023	45.9 55.4 4.8 2023	3 8.7 2023	5.3 5.1 5.8 2023	87.2 2019	100.0 100.0 100.0	2019 74.3	2021
Maldives	30.1 21.3 8.8 2021	8.2 2019	:	26.3 2021 ^c	:	63.8 2021	0.0 0.0 0.0 2022 1	100.0 100.0 100.0 2021	11.2 2	2021 61.4	2021
Nepal	21.0 19.8 22.1 2.9 18.1 2022	27.5 27.7 27.3 2021	25.4 25.3 25.4 2021	1.0 2021	7.1 8.3 5.1 2022	2 27.5 2021	0.0 0.0 0.0 2022	77.2 71.7 82.1 2021 ^h	18.6 16.1 20.8 2	2021 53.7	2021
Pakistan	20.2 3.9 16.3 2022	5.2 2021	4.4 2022	5.3 2021 ^c	2.8 2.8 2.7 2021	1 9.5 2022	0.0 0.0 0.0 2022	17.4 2022	17.1 2	2022 45.2	2021
Sri Lanka	41.3 18.8 22.5 2021	36.1 2021	29.9 2021	77.8 2021	36.6 37.5 34.8 2021 ^c	1 ^c 17.8 2021	0.0 0.0 0.0 2022	31.1 2021	27.7 2	2020 66.7	2021
				Europe and	Europe and Central Asia						
				Central and	Central and Western Asia						
Armenia	49.2 35.6 13.6 2021	31.8 2021	27.1 2021	61.2 2021	33.5 37.0 30.4 2021	2021 ^c 100.0 100.0 100.0 2021	0.0 0.0 0.0 2022	81.9 86.6 79.3 2021	21.1 2	2021 68.2	2021
Azerbaijan	35.2 27.6 7.6 2023	10.3 2023	8.6 2023	28.5 2022	33.1 39.7 26.5 2022	2 100.0 100.0 100.0 2023	1.6 2.6 0.8 2016	97.0 100.0 94.2 2023	10.6 2	2023 65.7	2021
Cyprus	98.8 76.9 21.9 2022	100.0 100.0 100.0 2022	84.1 84.2 84.0 2022	82.3 2022	77.7 75.5 80.2 2022	2 18.6 2022	21.6 2022	92.7 100.0 83.6 2022	74.5 2	2022 80.7	2021
Georgia	94.6 31.6 62.9 2022	30.2 2022	25.9 2022	26.8 2019	45.5 42.4 49.1 2021	1 100.0 100.0 100.0 2022	0.0 0.0 0.0 2022 1	100.0 100.0 100.0 2022	92.0 2	2022 68.2	2021
Israel	100.0 100.0 100.0 78.5 34.6 2022	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	77.4 2022	100.0 100.0 100.0 2022	2 100.0 100.0 100.0 2022	42.8 2022 1	100.0 100.0 100.0 2022	100.0 100.0 100.0 2	2022 85.5	2021
Kazakhstan	94.3 70.4 24.0 2023	54.4 2022	47.1 2022	51.1 2022	71.9 2022	2022 ^c 100.0 100.0 100.0 2022	23.2 28.1 19.3 2022	95.7 97.5 94.9 2023	75.1 2	2022 80.3	2021
Kyrgy zstan	42.9 36.1 6.8 2022	16.0 2022	14.0 2022	35.6 2021 ^c	58.3 59.7 56.4	2021 ^c 100.0 100.0 100.0 2022	0.3 2021 1	100.0 100.0 100.0 2022	10.7 2	2022 68.5	2021
Tajikistan	29.8 29.4 30.2 16.4 13.4 2021	15.6 2021	13.5 2021	10.0 2021	0.0 0.0 0.0 2021	1 53.9 64.3 43.4 2021	6.5 7.9 3.6 2021 1	100.0 100.0 100.0 2021	13.8 13.9 13.7 2	2021 67.3	2021
Turkmenistan	42.7 36.1 6.6 2021	14.5 2021	12.6 2021	38.6 2021	52.6 2019	9 84.6 77.8 91.4 2021	:	77.2 2021	10.3 1.8 12.7 2	2021 74.7	2021
Türkiye	64.0 48.5 15.5 2022	37.4 2022	27.6 2022	62.7 2022	76.5 77.1 75.2 2022	2 44.0 54.6 33.4 2022	2.5 2.9 1.9 2022	85.9 100.0 69.4 2022	31.7 2	2022 75.6	2021
Uzbekistan	56.0 26.5 29.5 2022	51.0 2022	44.2 2022	6.3 2022	44.1 2019	9 44.5 2021	6.0 2022 1	100.0 100.0 100.0 2021	40.2 2	2022 74.8	2021
				Easter	Eastern Europe						
Belarus	36.0 2019	:	:	100.0 2020	70.9 2019	9 100.0 100.0 100.0 2020	44.6 2015 1	100.0 100.0 100.0 2020	:	78.6	2021
Bulgaria	82.8 74.3 8.5 2022	61.0 2022	50.7 2022	100.0 2022	85.1 2022	2 100.0 100.0 100.0 2022	39.4 29.7 52.2 2022	93.0 100.0 87.5 2022	37.7 2	2022 73.5	2021
Czechia	78.9 73.3 5.7 2023	41.6 2023	19.5 2023	100.0 2022 ^c	65.8 2021	1 100.0 100.0 100.0 2022	56.6 2021 1	100.0 100.0 100.0 2021	22.4 2	2023 84.2	2021

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	الجعد Tax-financed Men Men Total	Year Giris Boys Total	Year Girls Boys Total	Year Year	Total Wen Year Year	Year Men Year	Total Wen Year	Total Men Women Year	Total Wen Year Year	Total Year
Hungary	89.0 69.9 19.1 2022	100.0 100.0 100.0 2022	98.9 2022	100.0 2021	96.0 94.8 97.4 2020 ⁶	2020 ^c 100.0 100.0 100.0 2021	21.4 2022	99.0 97.3 100.0 2021	69.6 2022	79.5 2021
Poland	84.2 65.9 18.3 2023	100.0 100.0 100.0 2021	92.8 2021	95.5 2021	85.5 2022	100.0 100.0 100.0 2022	31.2 2020	82.9 100.0 72.9 2022	53.5 2021	82.0 2021
Republic of Moldova	47.5 40.7 6.8 2022	22.9 2022	19.3 2022	77.8 2022	44.0 43.9 44.1 2020	100.0 100.0 100.0 2022	25.6 2022	94.0 93.0 94.4 2022	12.3 2022	70.8 2021
Romania	79.8 56.3 23.4 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	41.0 2022	67.2 65.1 70.0 2022	100.0 100.0 100.0 2022	9.9 6.9 15.0 2022	98.9 96.8 100.0 2022	51.7 2022	78.4 2021
Russian Federation	95.4 80.3 15.1 2022	100.0 100.0 100.0 2022	84.8 2022	70.1 2021	65.2 2021	95.9 2022	61.9 2021	100.0 100.0 100.0 2022	76.4 2022	79.2 2021
Slovakia	93.1 72.6 20.5 2022	100.0 100.0 100.0 2022	80.6 2022	100.0 2022	75.2 2021	100.0 100.0 100.0 2021	19.8 2022	100.0 100.0 100.0 2021	77.2 2022	81.8 2021
Ukraine	73.0 2019	100.0 100.0 100.0 2020	:	100.0 2020	:	100.0 100.0 100.0 2020	17.0 15.0 19.0 2018	96.2 2020	39.0 2019	75.5 2021
			North	ern, Southeri	Northern, Southern and Western Europe	a				
Albania	78.1 51.3 26.8 2021	24.6 2021	19.9 2021	47.9 2019	40.7 2021 ⁶	2021 ^c 100.0 100.0 100.0 2021	2.6 2021	96.5 100.0 94.0 2021	62.1 2021	63.8 2021
Andorra	86.7 88.8 81.3 82.7 4.0 2022	12.2 2022	9.9 2022	90.4 2020	100.0 100.0 100.0 2020	12.2 11.0 13.4 2022	8.4 7.7 9.6 2022	100.0 100.0 100.0 2022	22.9 2022	78.9 2021
Austria	100.0 100.0 100.0 79.0 24.1 2022	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	89.9 2022 ^c	2022 ^c 100.0 100.0 100.0 2021	100.0 100.0 100.0 2022	99.0 91.2 100.0 2021	100.0 100.0 100.0 2022	100.0 100.0 100.0 2021	84.5 2021
Belgium	100.0 100.0 100.0 100.0 6.3 2022	100.0 100.0 100.0	2022 ^b 100.0 100.0 100.0 2022 ^b	64.8 2021	79.0 75.1 83.4 2022	100.0 100.0 100.0 2022	100.0 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	85.6 2021
Bosnia and Herzegovina	54.5 46.7 7.9 2021	14.6 2021	12.1 2021	100.0 2021 ^c	:	100.0 100.0 100.0 2020	5.3 2019	75.3 100.0 43.8 2020	14.7 2021	66.5 2021
Croatia	81.4 70.7 10.6 2022	45.7 2022	37.9 2022	100.0 2021	89.5 87.7 91.7 2022	100.0 100.0 100.0 2021	19.3 2022	93.2 100.0 73.9 2022	35.9 2022	80.2 2021
Denmark	100.0 100.0 100.0 76.3 47.2 2023	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	100.0 2022 ^c	87.7 84.6 91.2 2022	100.0 100.0 100.0 2022	95.6 77.0 100.0 2022	100.0 100.0 100.0 2021	100.0 100.0 100.0 2023	82.0 2021
Estonia	97.0 73.9 23.0 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	100.0 2022	79.5 75.7 83.4 2022	100.0 100.0 100.0 2022	44.0 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	79.3 2021
Finland	100.0 100.0 100.0 75.7 58.1 2022	100.0 100.0 100.0 2022	93.4 93.4 93.4 2022	100.0 2021	80.4 75.3 85.9 2021	100.0 100.0 100.0 2022	100.0 2021	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	85.7 2021
France	99.4 100.0 98.7 74.1 29.9 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	100.0 2021	90.2 88.9 91.5 2022	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	84.8 2021
Germany	100.0 100.0 100.0 79.2 28.9 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	91.1 2021 ⁶	c 100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	88.0 2021
Greece	84.6 73.6 11.0 2023	48.9 2023	39.6 2023	100.0 2023	76.4 2020	100.0 100.0 100.0 2019	22.3 2023	99.2 100.0 85.4 2020	41.6 2023	77.2 2021
Guernsey	91.4 82.2 9.1 2022	:	:	90.8 2019	99.8 99.8 99.8 2020	52.2 2019	100.0 100.0 100.0 2019	100.0 100.0 100.0 2022	:	:
Iceland	81.9 62.6 29.4 2023	74.7 2023	62.0 2023	100.0 2022	94.0 94.3 93.7 2021	100.0 100.0 100.0 2021	:	82.4 77.3 87.0 2021	:	88.9 2021

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Country/territory	SDG 1.3.1 - Population covered				People protected by socia	People protected by social protection systems including floors	uding floors			SDG 3.8.1
	by at least one social protection be nefit (excluding health) ¹ By type of By sex (excluding health) ¹	Children (0-15) ²	Children (0-18) ³	Mothers with newborns ⁴	Vorkers in case of work injury ^s	· Persons with severe disabilities ⁶	Unemployed	Older persons ⁴	Vulnerable persons receiving social assistance benefits*	-Universal health coverage (WHO) ¹⁰
	Total Men Women Tax-financed Tax-financed	Total Girls Year	Total Boys Girls Year	Year	Year Wen Total	Year Women Total	Total Men Vomen Year	Year Wen Total	Total Women Year	Total Year
Ireland	100.0 100.0 100.0 76.3 26.3 2022	100.0 100.0 100.0 2022	2 100.0 100.0 100.0 2022	67.8 2022	82.8 77.9 88.4 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	95.8 100.0 90.3 2022	100.0 2022	82.7 2021
Isle of Man	100.0 100.0 100.0 100.0 4.5 2022	95.1 2022	.2 78.1 2022	:	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022		100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	:
Italy	88.8 75.7 13.1 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	100.0 2022 1	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	51.5 2022	100.0 100.0 100.0 2022	53.8 2022	83.8 2021
Jersey	100.0 100.0 100.0 100.0 8.9 2022	17.5 2021	11 14.4 2021	70.5 2022 1	100.0 100.0 100.0 2021	100.0 100.0 100.0 2022	100.0 100.0 100.0 2017	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	:
Kosovo *	60.8 21.4 39.4 2022	97.7 2022	.2 78.4 2022	8.3 2022 ^f	:	63.0 2022	0.0 0.0 0.0 2021	100.0 100.0 100.0 2022	50.9 2022	:
Latvia	99.4 78.9 20.5 2022	100.0 100.0 100.0 2022	.2 100.0 100.0 100.0 2022	100.0 2022	82.1 77.9 86.3 2021 ^c	2021 ^c 100.0 100.0 100.0 2022	46.1 32.5 67.9 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	74.6 2021
Liechtenstein	92.0 90.4 1.6 2021	100.0 100.0 100.0 2021	11 97.8 2021	100.0 2021 ^c	87.7 90.3 84.7 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	16.7 2021	:
Lithuania	99.9 78.0 21.9 2022	100.0 100.0 100.0 2022	2 100.0 100.0 100.0 2022	92.7 2022	90.7 89.9 91.5 2022	100.0 100.0 100.0 2022	88.2 2022	100.0 100.0 100.0 2022	100.0 100.0 100.0 2022	75.3 2021
Luxembourg	100.0 100.0 100.0 95.3 34.7 2021	100.0 100.0 100.0 2021	1 100.0 100.0 100.0 2021	100.0 2021 1	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	57.4 2022	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	83.1 2021
Malta	86.7 87.2 86.1 74.1 12.6 2021	66.7 2021	11 56.3 2021	71.0 2021	99.5 99.3 99.7 2021	64.1 74.4 52.9 2021	61.6 55.8 72.4 2021	82.9 100.0 47.3 2021	48.7 2021	85.2 2021
Monaco	54.6 51.1 3.5 2022	62.9 2022	.2 53.4 2022	:	70.5 2022	51.2 2022	:	24.2 2022	22.0 2022	85.9 2021
Montenegro	72.2 59.5 12.7 2022	43.3 2021	36.3 2021	100.0 2020	78.2 2022	100.0 100.0 100.0 2021	23.3 2022	78.0 2020	38.8 2021	71.9 2021
Netherlands	100.0 100.0 100.0 81.9 19.4 2022	100.0 100.0 100.0 2022		100.0 2022 1	100.0 100.0 100.0 2021	100.0 100.0 100.0 2022	56.7 57.0 56.4 2022	100.0 100.0 100.0 2022	100.0 2022	85.2 2021
North Macedonia	50.5 44.3 6.2 2022	22.6 2021	18.8 2021	100.0 2020	62.5 59.9 66.5 2021	96.3 2021	4.0 2022	65.8 96.3 41.0 2021	10.8 2021	73.5 2021
Norway	99.3 78.2 21.1 2023	100.0 100.0 100.0 2023	100.0 100.0 100.0 2023	100.0 2022	96.3 99.6 92.9 2022	100.0 100.0 100.0 2023	43.3 2022	100.0 100.0 100.0 2023	96.6 2023	87.0 2021
Portugal	100.0 100.0 100.0 91.3 16.2 2022	91.5 2022	74.3 2022	100.0 2022 1	100.0 100.0 100.0 2021	100.0 100.0 100.0 2022	62.3 2022	96.7 100.0 94.3 2021	100.0 100.0 100.0 2022	87.9 2021
San Marino	88.7 98.3 79.5 88.7 2023	:		:	100.0 100.0 100.0 2023	100.0 100.0 100.0 2023	: : :	94.6 100.0 90.1 2023	: : :	77.1 2021
Serbia	65.4 57.9 7.5 2022	32.6 2021	20.8 2021	100.0 2021	66.7 2021	100.0 100.0 100.0 2021	10.0 9.2 10.7 2021	53.5 2021	32.0 2021	71.7 2021
Slovenia	97.0 74.3 22.8 2022	100.0 100.0 100.0 2021	1 86.0 2021	100.0 2021	93.2 2022	100.0 100.0 100.0 2021	39.1 2021	100.0 100.0 100.0 2022	88.4 2021	84.4 2021
Spain	78.1 79.8 76.4 65.2 12.9 2022	55.3 2022	44.9 2022	100.0 2022	81.9 81.8 82.0 2022	100.0 100.0 100.0 2022	57.2 54.8 59.3 2022	88.9 93.0 85.7 2022	38.9 2022	85.3 2021
Sweden	100.0 78.5 23.2 2022	100.0 100.0 100.0 2021	93.9 93.8 94.0 2021	100.0 2021	88.6 88.7 88.5 2022	100.0 100.0 100.0 2021	59.6 2022	100.0 100.0 100.0 2020	100.0 100.0 100.0 2021	85.3 2021
Switzerland	100.0 100.0 100.0 100.0 3.1 2021	100.0 100.0 100.0 2021	100.0 100.0 100.0 2021	100.0 2021	80.1 2021 ^c	92.7 2021	55.4 59.7 49.4 2021	99.3 100.0 98.7 2021	100.0 100.0 100.0 2021	86.3 2021
United Kingdom	93.6 67.0 26.6 2023	100.0 100.0 100.0 2022	86.0 2022	100.0 2022 ^c	81.5 79.1 84.2	2022 ^c 100.0 100.0 100.0 2023	94.1 100.0 81.6 2022	100.0 100.0 100.0 2023	100.0 100.0 100.0 2023	87.8 2021

Annex 5.3 SDG indicator 1.3.1 on effective coverage for old-age protection: Share of persons above statutory retirement age receiving an old-age pension, by type of scheme, and share of persons in labour force and working-age population aged 15 and over covered by a pension scheme (active contributors), 2023 or latest available year (percentage)

Full dataset available at: <u>https://wspdb.social-protection.org</u>.

Income level/region	B as abo	enefici an old percer ve stat	iaries re l-age pe ntage of tutory re age ^{8,14}	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{8,14}	a con of p	enefici :ributo as p ersons retir	eficiaries receiv butory old-age as percentage sons above stat retirement age	Beneficiaries receiving contributory old-age pension as percentage of persons above statutory retirement age	Be a t pe of pe	neficia ax-fin <i>a</i> nsion <i>a</i> rsons <i>a</i> retire	eficiaries receiv x-financed old- sion as percent sons above stat retirement age	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	as pe	Active o a per ircenti foi	Active contributors o a pension scheme ercentage of the lak force 15+ ¹²	Active contributors to a pension scheme as percentage of the labour force 15+12	AC of to i	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	ntribu on sch centag rking ion 15	tors eme age + ¹³
	lstoT	Men	Momen	Year	lstoT	neM	nəmoW	Year	lstoT	nəM	nəmoW	Year	lstoT	Nen	Nomen	Year	lstoT	n9M	nəmoW	Year
World	79.6	82.6	77.2	2023	55.6	63.2	49.2	2023	30.7	26.9	34.2	2023	58.5	56.4	61.6	2023	35.0	40.9	29.1	2023
High-income	96.8	97.2	96.5	2023	90.9	91.4	90.4	2023	13.4	13.5	13.3	2023	90.8	88.4	93.6	2023	55.4	60.3	50.6	2023
Upper-middle-income	90.4	93.2	88.3	2023	52.5	67.2	40.7	2023	48.0	38.1	56.7	2023	72.9	71.2	74.8	2023	46.8	52.0	41.6	2023
Lower-middle-income	47.6	55.1	41.2	2023	22.5	28.3	17.4	2023	25.6	27.3	24.4	2023	32.7	34.6	28.6	2023	17.5	25.4	9.6	2023
Low-income	12.7	16.3	9.9	2023	10.2	13.3	7.7	2023	2.6	3.0	2.3	2023	7.3	8.8	4.9	2023	4.8	6.6	5.	9 2023
Africa	31.8	41.3	24.4	2023	22.5	33.4	13.1	2023	9.8	8.3	11.6	2023	14.6	17.8	10.1	2023	9.1	12.8	5.4	2023
Northern Africa	55.1	75.9	38.0	2023	49.9	71.6	28.9	2023	5.9	4.7	9.1	2023	42.5	40.8	48.3	2023	18.5	27.6	9.4	2023
Sub-Saharan Africa	22.3	26.6	18.9	2023	11.3	17.1	6.8	2023	11.4	9.8	12.6	2023	9.7	11.9	6.9	2023	6.5	8.7	4.3	2023
Americas	90.0	93.3	87.3	2023	79.9	84.9	75.5	2023	20.1	21.1	19.6	2023	68.7	66.3	71.1	2023	42.9	47.6	37.9	2023
Latin America and the Caribbean	79.3	85.9	74.2	2023	58.3	67.8	50.0	2023	27.5	30.4	25.9	2023	49.6	47.4	51.4	2023	31.0	35.2	26.3	2023
Northern America	100.0	100.0	100.0	2023	100.0	100.0	100.0	2023	13.2	12.9	13.4	2023	99.3	99.2	99.4	2023	61.8	67.2	56.6	2023
Arab States	27.8	46.8	11.5	2023	26.6	42.4	11.5	2023	2.8	4.5	1.6	2023	23.4	22.0	27.0	2023	12.0	16.9	5.4	2023
Asia and the Pacific	76.6	79.4	74.2	2023	38.6	49.3	29.3	2023	44.4	36.9	51.4	2023	61.9	58.6	67.3	2023	36.6	43.3	29.7	2023
Eastern Asia	98.6	98.6	98.6	2023	56.8	72.7	43.3	2023	52.9	37.8	66.3	2023	93.5	93.0	94.0	2023	61.5	66.8	56.0	2023
South-Eastern Asia and the Pacific	48.4	54.8	43.5	2023	14.2	17.3	11.7	2023	34.2	37.3	31.7	2023	31.0	30.7	31.4	2023	20.6	23.7	17.6	2023
Southern Asia	47.1	54.7	40.4	2023	14.6	20.2	9.7	2023	33.0	35.0	31.2	2023	37.4	37.8	36.0	2023	18.8	28.2	9.1	2023
Europe and Central Asia	96.8	98.6	95.5	2023	95.2	98.0	93.3	2023	8.5	8.3	8.6	2023	88.2	87.3	89.6	2023	51.7	58.0	45.9	2023
Central and Western Asia	91.1	98.3	86.1	2023	82.4	95.6	75.9	2023	9.7	8.6	10.9	2023	68.2	72.1	62.9	2023	38.5	50.9	28.2	2023
Eastern Europe	96.9	98.2	96.1	2023	96.4	99.2	95.5	2023	4.5	3.7	4.9	2023	91.0	88.1	93.8	2023	54.3	59.7	49.5	2023
Northern, Southern and Western Europe	97.7	98.8	96.7	2023	96.5	97.9	94.8	2023	10.3	10.3	10.4	2023	93.5	93.0	93.9	2023	54.9	59.7	50.3	2023

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Country/territory	Ben old-ag	Beneficiaries receiving an Id-age pension as percentag of persons above statutory retirement age ^{8,14}	s receiv n as pel ove sta int age [®]	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{8,14}	Ber a contri as perce statu	Beneficiaries receiving ontributory old-age pensi percentage of persons ab statutory retirement age	es receiv old-age of persor tiremen	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	Ben a tax-fir as perce statu	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	receiv d-age p person: rement	ng ension s above age	Ac to a as perc	tive contribu pension sch entage of th force 15+ ¹²	Active contributors to a pension scheme as percentage of the labour force 15+12	s le lbour	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	Active contributors to a pension scheme as percentage of the rking-age population 15	ributors cheme e of the oulation	as 15+ ¹³
	lstoT	neM	nəmoW	Year	lstoT	nəM	nəmoW	Year	Total	neM	nəmoW	Year	letoT	nəM	nəmoW	Year	letoT	nəM	nəmoW	Year
								Africa	ជា											
								Northern Africa	Africa											
Algeria	88.6	÷	:	2021	88.6	:	:	2021	0.0	0.0	0.0	2021	69.4	70.1	66.4	2021	28.3	45.0	11.0	2021
Egypt	58.5	86.7	23.4	2022	51.4	86.7	23.4	2022	7.0	:	÷	2021	44.1	41.0	58.1	2022	18.4	28.0	8.8	2022
Libya	79.4	100.0	40.0	2020	76.1	100.0	40.0	2020	3.3	÷	:	2016	19.6	÷	:	2008	9.7	:	:	2008
Morocco	23.4	:	÷	2019	:	:	:	:	:	:	÷	÷	38.4	33.8	53.6	2021	17.5	23.4	11.6	2021
Sudan	10.6	:	:	2021	10.6	:	:	2021	0.0	0.0	0.0	2021	5.3	3.3	10.1	2021	2.6	2.3	3.0	2021
Tunisia	100.0	100.0	100.0	2021	59.8	62.6	11.6	2021	40.5	:	:	2021	81.6	81.2	82.4	2021	37.5	54.0	21.8	2021
							S	Sub-Saharan Africa	n Africa											
Angola	15.3	:	:	2022	10.4	16.2	5.8	2022	4.9	:	:	2022	16.8	:	:	2022	12.9	:	:	2022
Benin	9.1	:	÷	2020	9.1	:	:	2020	0.0	0.0	0.0	2020	7.2	9.5	4.5	2020	4.5	6.5	2.5	2020
Botswana	100.0	:	:	2022	10.6	:	:	2022	100.0	÷	:	2021	14.8	÷	:	2022	9.6	:	:	2022
Burkina Faso	6.7	10.3	3.9	2021	6.7	10.3	3.9	2021	0.0	0.0	0.0	2021	9.2	12.1	5.6	2021	6.0	8.9	3.3	2021
Burundi	13.3	18.7	8.9	2021	13.3	18.7	8.9	2021	0.0	0.0	0.0	2021	6.3	10.3	2.5	2021	5.0	8.0	2.0	2021
Cabo Verde	69.8	66.0	73.0	2020 ^a	34.9	:	:	2020 ^a	34.9	÷	:	2020 ^a	47.1	÷	÷	2020	26.6	:	:	2020
Cameroon	18.3	28.4	9.6	2020	18.3	28.4	9.6	2020	0.0	0.0	0.0	2020	12.6	16.4	8.3	2020 ^c	9.0	12.5	5.6	2020
Central African Republic	4.7	:	:	2019	:	:	:	÷	:	÷	:	÷	2.6	÷	:	2019	1.8	:	:	2019
Chad	5.8	:	:	2022	5.8	:	:	2022	:	:	:	:	6.8	10.1	1.9	2020	4.0	7.2	0.9	2020
Comoros	7.1	7.4	6.8	2022	7.1	7.4	6.8	2022	0.0	0.0	0.0	2022	8.7	9.0	8.2	2022	3.8	:	:	2022
Congo	22.1	42.4	4.7	2011	÷	:	:	÷	:	÷	:	÷	9.1	÷	:	2019	6.3	:	:	2019

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Country/territory	Bene old-age of per	Beneficiaries receiving an d-age pension as percentag of persons above statutory retirement age ^{8,14}	s receivi n as per ove stat nt age ^{8,}	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{8,14}	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	receivir l-age pe ersons ement a	ng ension above age	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	receivir l-age pe ersons ement a	ig nsion ge	Active contributors to a pension scheme as percentage of the labour force 15+12	Active contributors to a pension scheme ercentage of the lab force 15+ ¹²	tors ieme e labour	Ac to a p workin	tive cor pensior ercenta g-age p	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	s as 1 15+ ¹³
	letoT	nəM	nəmoW	Year	letoT	neM	nəmoW	Year	letoT	nem	Nomen	Year	lstoT Men	nəmoW	Year	lstoT	nəM	nəmoW	Year
Côte d'Ivoire	16.2	20.9	11.5	2022	16.2	20.9	11.5 2	2022	0.0	0.0	0.0 2	2022	11.0 14.8	3 6.0	2022	7.2	10.8	3.5	2022
Democratic Republic of the Congo	1.0	2.2	0.0	2022	1.0	2.2	0.0	2022	0.0	0.0	0.0	2022	6.4 9.0	3.6	2022	4.2	6.2	2.3	2022
Djibouti	14.2	:	:	2019	:	:	:	:	:	:	:	:	10.4	:	2019	3.2	:	:	2019
Equatorial Guinea	3.7	:	:	2021	3.7	÷	:	2021	0.0	0.0	0.0	2021	13.0	:	2021	7.1	:	:	2021
Eritrea	:	:	:	:	:	:	:	÷	:	:	÷	:	:	:	:	:	:	:	:
Eswatini	100.0	100.0	100.0	2020	14.0	17.7	11.6	2020	100.0	100.0 10	100.0	2019	45.9 47.8	3 43.7	2022	23.2	25.8	20.6	2022
Ethiopia	4.2	4.6	3.8	2019	4.2	4.6	3.8	2019	0.0	0.0	0.0	2019	7.8 9.5	5.5	2019	6.3	8.2	4.1	2019
Gabon	38.8	:	:	2010	÷	:	:	÷	÷	:	÷	:	100.0 100.0	0 100.0	2019	48.0	56.2	39.4	2019
Gambia	17.0	:	:	2015	17.0	:	:	2015	0.0	0.0	0.0	2015	18.5 24.4	t 11.9	2019	11.4	16.0	6.8	2019
Ghana	15.7	23.1	7.8	2022	12.3	18.1	5.7 2	2022	3.4	5.0	2.1 2	2022	12.7 13.4	4 8.8	2022	8.7	9.7	5.7	2022
Guinea	2.5	÷	:	2021	2.5	:	:	2021	0.0	0.0	0.0 2	2021	2.9 3.4	4 2.0	2021	1.5	2.2	0.9	2021
Guinea-Bissau	14.7	÷	:	2020	14.7	:	:	2020	0.0	0.0	0.0 2	2020	3.8	:	2020	2.1	:	:	2020
Kenya	19.8	:	:	2021	5.4	:	:	2021	14.4	12.0 1	16.5 2	2021	10.7 14.0) 7.3	2021	7.9	10.6	5.3	2021
Lesotho	100.0	100.0	100.0	2021	0.6	:	:	2019	100.0	100.0 10	100.0 2	2021	5.1 5.2	2 4.9	2019	3.3	3.8	2.8	2019
Liberia	3.4	÷	:	2019	÷	:	÷	÷	÷	:	÷	:	7.5	:	2019	5.8	:	:	2019
Madagascar	19.2	÷	:	2022	14.4	:	:	2022	4.8	:		2022	6.2 8.2	2 4.2	2022	5.3	7.2	3.5	2022
Malawi	8.9	÷	:	2022	0.5	:	:	2022	8.4	:		2022	5.7 8.5	5 2.9	2022	3.9	6.1	1.9	2022
Mali	5.6	7.4	1.9	2022	5.6	7.4	1.9 2	2022	0.0	0.0	0.0 2	2022	7.3 9.4	4.1	2022	5.0	7.6	2.3	2022
Mauritania	18.6	30.3	7.8	2019	18.6	30.3	7.8	2019	0.0	0.0	0.0	2019	12.0 13.7	7 8.5	2020	4.9	7.8	2.2	2020

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Country/territory	Ben old-ag of pe	Beneficiaries receiving an d-age pension as percentag of persons above statutory retirement age ^{8,14}	s receiv in as pe bove sta ent age	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{8,14}	Ben a contril as perce statu	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	eficiaries receiving outory old-age pensi ntage of persons abc tory retirement age	eficiaries receiving butory old-age pension ntage of persons above tory retirement age	Ben a tax-fir as perce statu	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	is receiv ld-age p person rement	ing bension s above : age	Ac to a	tive contribu a pension sch centage of th force 15+ ¹²	Active contributors to a pension scheme as percentage of the labour force 15+12		Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	Active contributors to a pension scheme as percentage of the rking-age population 15	ibutors cheme e of the ulation	as 15+ ¹³
	lstoT	Men	nəmoW	Year	lstoT	nəM	nəmoW	Year	Total	nəM	nəmoW	Year	lstoT	neM	nəmoW	Year	lstoT	nəM	nəmoW	Year
Mauritius	100.0	100.0	100.0	2021	54.0	:	:	2021	100.0	100.0	100.0	2021	72.6	:	÷	2021	31.2	:	:	2021
Mozambique	42.3	:	:	2022 ^a	14.3	:	:	2022 ^a	28.0	:	÷	2022 ^a	5.7	:	÷	2021	4.9	:	:	2021
Namibia	100.0	100.0	100.0	2022	18.4	21.7	16.4	2021	100.0	100.0	100.0	2022	10.7	11.1	10.4	2021	6.3	6.9	5.8	2021
Niger	5.8	:	:	2015	:	:	:	:	:	:	:	:	2.7	:	:	2015	1.9	:	:	2015
Nigeria	19.6	31.7	5.2	2022 ^e	19.3	31.5	4.9	2022 ^e	0.2	0.2	0.3	2022 ^e	14.9	16.4	12.9	2022 ^e	8.8	10.8	6.7	2022
Rwanda	16.7	15.0	17.9	2022	4.1	8.0	1.3	2022	12.6	7.0	16.6	2022	15.9	18.9	12.3	2022	8.4	11.3	5.8	2022
Sao Tome and Principe	54.8	72.8	43.0	2021 ^a	43.3	58.1	34.7	2021	22.2	:	:	2019	34.8	33.8	36.9	2021 ^a	18.7	23.6	14.0	2021
Senegal	25.3	:	:	2022	25.3	:	:	2022	0.0	0.0	0.0	2022	11.1	:	:	2019	5.8	:	:	2019
Seychelles	100.0	100.0	100.0	2023	59.4	:	:	2021	100.0	100.0	100.0	2023	87.7	78.8	96.3	2021	53.6	44.7	63.6	2021
Sierra Leone	7.0	:	:	2019	:	:	:	:	ł	:	÷	:	8.0	:	÷	2019	4.3	:	:	2019
Somalia	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023
South Africa	79.9	81.7	78.9	2022	6.2	÷	:	2022	73.7	75.4	72.8	2022	5.0	5.2	4.8	2022	2.9	3.4	2.5	2022
South Sudan	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023	0.0	0.0	0.0	2023
Tanzania (United Republic of)	6.0	:	:	2021	6.0	:	:	2021	0.0	0.0	0.0	2021	4.3	5.1	3.3	2021	3.5	4.5	2.6	2021
Togo	15.9	÷	:	2022	15.9	:	:	2022	0.0	0.0	0.0	2022	12.0	18.0	5.6	2022	6.9	10.7	3.1	2022
Uganda	18.3	÷	:	2022	0.0	0.0	0.0	2022	18.3	÷	÷	2022	5.8	7.3	4.3	2022	4.0	5.2	2.9	2022
Zambia	25.8	:	:	2022	9.1	13.8	5.7	2020	16.7	:	:	2022	15.2	23.4	6.2	2020	9.2	15.7	3.4	2020
Zimbabwe	19.6	:	:	2021	19.6	:	:	2021	0.0	0.0	0.0	2021	26.3	31.7	20.6	2021	17.4	22.8	12.6	2021

Country/territory	Bene	Beneficiaries receiving an	receiv	ing an	Ben	neficiari	eficiaries receiving	ving	Ber	Beneficiaries receiving	s receiv	ring	Ac	tive cor	Active contributors	S	Act	ive con	Active contributors	10
	old-ag of pe	d-age pension as percenta <u>c</u> of persons above statutory retirement age ^{8,14}	n as pei ove sta nt age ⁸	olo-age pension as percentage of persons above statutory retirement age ^{8,14}	a contrig as percel statu	iputory entage utory re	outory old-age pensi ntage of persons abo tory retirement age	a contributory old-age pension as percentage of persons above statutory retirement age	a tax-ri as perce statu	a tax-manced old-age pension as percentage of persons above statutory retirement age	f persor iremen	pension is above t age	to as per	a pensio centage force	to a pension scheme as percentage of the labour force 15+ ¹²	abour	to a pension scheme as percentage of the working-age population 15+ ¹³	sension rcentag -age po	to a pension scheme as percentage of the rking-age population 15	as 1 15+ ¹³
	lstoT	neM	nəmoW	Year	lstoT	nəM	nəmoW	Year	lstoT	neM	nəmoW	Year	lstoT	nəM	nəmoW	Year	lstoT	nəM	nəmoW	Year
								Americas	cas											
							Latin An	Latin America and the Caribbean	the Carib	bean										
Anguilla	66.1	59.1	72.7	2020	59.4	53.2	65.4	2020	9.9	5.9	7.3	2020	81.5	74.2	89.3	2020	58.1	56.0	60.0	2020
Antigua and Barbuda	84.4	:	:	2020	84.4	:	:	2020	0.0	0.0	0.0	2020	70.8	:	:	2019	63.7	÷	:	2019
Argentina	90.8	96.4	87.8	2021	87.2	:	:	2021	3.6	9.2	0.6	2021	58.6	57.5	59.9	2021	34.8	39.8	29.9	2021
Aruba	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	0.0	0.0	0.0	2021	100.0	100.0	100.0	2020	81.1	82.7	79.6	2020
Bahamas	74.8	79.2	71.6	2019	70.4	74.5	67.3	2018	4.5	4.7	4.3	2019	67.4	:	:	2019	48.8	:	:	2019
Barbados	98.4	100.0	93.0	2020	92.3	100.0	84.3	2020	6.1	2.6	8.7	2020	76.7	68.8	84.6	2020	46.6	44.0	49.0	2020
Belize	37.5	47.9	27.3	2021	32.3	44.5	20.4	2021	5.2	3.5	6.9	2021	57.7	57.7	57.6	2021	37.5	46.1	28.9	2021
Bolivia (Plurinational State of)	100.0	100.0	100.0	2021	20.3	31.2	11.2	2021	100.0	100.0	100.0	2021	13.9	14.0	13.7	2021	9.7	11.3	8.2	2021
Brazil	88.6	100.0	67.4	2022	80.9	100.0	60.5	2022	<i>T.T</i>	9.1	6.9	2020	65.4	63.4	68.0	2022	41.0	46.1	36.3	2022
British Virgin Islands	59.3	:	:	2022	59.3	:	:	2022	0.0	0.0	0.0	2022	100.0	100.0	100.0	2019	77.9	:	:	2019
Cayman Islands	3.1	:	:	2021	3.1	:	:	2021	0.0	0.0	0.0	2021	100.0	:	:	2021	100.0	:	:	2021
Chile	71.6	69.6	72.7	2021	58.8	51.2	65.2	2021	12.8	:	÷	2021	64.1	62.2	66.8	2021	37.2	42.5	32.0	2021
Colombia	51.4	67.5	42.8	2022	22.2	32.9	16.4	2022	29.2	43.3	21.7	2022	50.0	42.8	50.9	2021	31.9	32.6	26.4	2021
Costa Rica	56.9	68.8	46.6	2022	42.4	56.5	30.2	2022	14.5	12.3	16.3	2021	70.0	71.7	67.5	2022	43.2	52.5	34.0	2022
Cuba	60.9	:	:	2022	57.3	:	:	2022	3.6	:	:	2021	:	:	:	÷	:	:	:	÷
Curaçao	100.0	100.0	100.0	2020	100.0	100.0	100.0	2020	0.0	0.0	0.0	2020	11.8	10.6	12.9	2018	5.6	4.9	6.1	2018
Dominica	92.7	100.0	85.3	2020	69.1	78.0	61.9	2020	23.6	23.9	23.4	2016	72.3	57.5	92.8	2020	42.4	38.6	46.0	2020
Dominican Republic	7.6	9.9	5.5	2021	7.6	9.9	5.5	2021	0.0	0.0	0.0	2021	42.5	37.8	48.9	2021	27.5	29.0	25.9	2021

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Country/territory	Ben old-ag of pe	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{8,14}	s receivi n as per ove stat	ing an centage tutory	Ben a contrit as percel statu	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	eficiaries receiving butory old-age pensi ntage of persons abu tory retirement age	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	Ben a tax-fir as perce statu	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	s receiv ld-age p person. rement	ing ension s above age	Ac to as per	ctive cor a pensic centage force	Active contributors to a pension scheme as percentage of the labour force 15+12	rs ne abour	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	ive conf ension rcentag -age po	Active contributors to a pension scheme as percentage of the rking-age population 15	as 15+ ¹³
	lstoT	nəM	nəmoW	Year	lstoT	nəM	nəmoW	Year	lstoT	nəM	Nomen	Year	lstoT	nəM	Nomen	Year	lstoT	nəM	nəmoW	Year
Ecuador	66.1	82.0	52.9	2021	38.5	54.6	25.2	2021	27.6	27.4	27.8	2021	45.1	41.3	50.4	2021	30.2	32.6	27.8	2021
El Salvador	24.5	47.4	15.6	2021	15.0	23.7	9.7	2021	11.9	23.7	5.9	2021	30.9	31.1	26.3	2021	18.3	23.2	12.0	2021
French Guiana	55.5	57.2	47.5	2022	55.5	57.2	47.5	2022	0.0	0.0	0.0	2022	16.2	16.4	15.9	2021	9.1	9.6	8.6	2021
Grenada	53.5	:	:	2020	53.5	:	:	2020	0.0	0.0	0.0	2020	77.3	:	:	2020	52.5	:	:	2020
Guadeloupe	82.3	84.6	80.6	2021	82.3	84.6	80.6	2021	0.0	0.0	0.0	2021	42.2	40.4	43.6	2020	22.1	21.9	22.3	2020
Guatemala	23.3	27.5	13.4	2022	11.1	12.5	3.4	2022	12.2	15.0	9.9	2022	17.8	20.0	12.7	2022	10.5	16.3	4.7	2022
Guyana	100.0	100.0	100.0	2020	:	:	:	÷	:	:	:	÷	45.1	:	:	2019	22.4	:	÷	2019
Haiti	1.0	:	:	2022	0.5	0.7	0.3	2022	0.5	:	:	2019	7.9	9.4	6.2	2022	5.2	6.5	3.9	2022
Honduras	14.6	÷	:	2022	14.6	:	:	2022	0.0	0.0	0.0	2022	18.1	17.0	19.9	2021	11.5	13.1	9.9	2021
Jamaica	87.8	84.5	90.5	2022	48.1	48.1	48.1	2021	39.7	36.4	42.4	2022	39.6	32.7	48.0	2020	27.8	25.1	30.5	2020
Martinique	72.1	71.3	72.8	2021	72.1	71.3	72.8	2021	:	:	:	:	69.2	64.5	69.4	2020 ^c	36.3	34.1	36.2	2020
Mexico	100.0	100.0	100.0	2022	35.9	44.7	11.7	2022	100.0	100.0	100.0	2022	41.8	40.0	42.8	2022	25.5	31.0	19.6	2022
Montserrat	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	:	:	:	:	91.1	:	:	2021	64.9	:	:	2021
Nicaragua	35.0	46.8	25.8	2021	35.0	46.8	25.8	2021	0.0	0.0	0.0	2021	24.6	22.6	27.8	2021	16.2	18.9	13.7	2021
Panama	61.5	86.4	43.6	2022	40.6	49.1	32.8	2021	20.9	37.3	10.7	2022	61.5	63.2	59.0	2022	40.8	48.8	32.8	2022
Paraguay	82.2	79.0	85.0	2021	21.5	18.3	24.2	2021	60.7	÷	:	2021	28.9	30.1	27.2	2021	20.7	25.1	16.3	2021
Peru	36.7	39.0	30.1	2021	16.4	19.5	9.1	2021	20.3	19.5	20.9	2021	25.7	27.6	23.4	2021	18.1	21.1	15.1	2021
Puerto Rico	80.8	81.9	77.8	2022	80.3	81.9	77.8	2021	0.5	÷	:	2022	86.9	100.0	49.2	2021	36.2	60.2	15.2	2021
Saint Kitts and Nevis	84.7	86.7	83.1	2020	84.7	86.7	83.1	2020	0.0	0.0	0.0	2020	100.0	98.8	100.0	2020	75.2	75.2	75.2	2020
Saint Lucia	48.4	58.6	40.6	2020	48.4	58.6	40.6	2020	0.0	0.0	0.0	2020	63.3	58.6	67.8	2020	44.0	43.3	44.4	2020

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Country/territory	Ben old-ag of pe	eficiari e pensi ersons a retirem	Beneficiaries receiving an Id-age pension as percentag of persons above statutory retirement age ^{8,14}	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{6,14}	Bene a contrib as percen statut	neficiari ibutory entage (utory re	Beneficiaries receiving ontributory old-age pensi percentage of persons abu statutory retirement age	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	Ben a tax-fir as perce statu	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	s receiv old-age f person irement	ing bension is above t age	Ac to a as perc	Active contributors to a pension scheme as percentage of the labour force 15+12	tributor n scherr of the ខែ 15+ ¹²	s ne abour	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	iive con Jension rcentag -age po	Active contributors to a pension scheme as percentage of the rking-age population 15	s as 15+ ¹³
	lstoT	nəM	Momen	Year	lstoT	nəM	nəmoW	Year	lstoT	nəM	nəmoW	Year	lstoT	nəM	nəmoW	Year	lstoT	nəM	nəmoW	Year
Saint Vincent and the Grenadines	51.8	49.8	53.8	2019	48.8	47.5	50.2	2019	3.0	2.4	3.6	2019	7.9.7	66.4	98.9	2019	51.6	49.3	54.3	2019
Sint Maarten (Dutch part)	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	0.0	0.0	0.0	2021	93.8	94.6	93.0	2017	59.2	57.3	61.2	2017
St Martin (French part)	42.7	:	÷	2020	42.7	:	:	2020	0.0	0.0	0.0	2020	29.6	:	:	2020	23.4	:	÷	2020
Suriname	100.0	100.0	100.0	2020	41.0	:	:	2020	65.3	:	:	2020	11.4	10.2	11.9	2021	6.3	6.7	5.5	2021
Trinidad and Tobago	90.8	100.0	63.3	2022	49.7	68.9	34.6	2022	41.1	57.0	28.6	2021	67.2	57.5	79.7	2022	36.8	36.3	37.4	2022
Turks and Caicos Islands	35.5	47.2	25.7	2019	35.5	47.2	25.7	2019	0.0	0.0	0.0	2019	85.6	:	:	2019	60.7	:	÷	2019
United States Virgin Islands	95.0	:	:	2021	95.0	:	:	2021	0.0	0.0	0.0	2021	82.5	:	:	2022	43.2	:	÷	2022
Uruguay	100.0	100.0	100.0	2021	100.0	:	:	2021	5.1	:	:	2021	68.3	68.4	68.2	2019	43.5	48.6	38.8	2019
Venezuela (Bolivarian Republic of)	100.0	100.0	100.0	2019	:	:	:	÷	:	:	:	÷	33.9	31.8	37.3	2009	18.2	21.2	15.4	2009
							2	Northern America	merica											
Bermuda	92.8	:	:	2021	84.6	:	:	2020	8.2	:	:	2021	100.0	100.0	100.0	2020	63.4	67.7	60.0	2020
Canada	100.0	100.0	100.0	2022	100.0	100.0	100.0	2022	95.8	94.4	97.1	2022	93.7	92.8	94.7	2020	60.3	63.6	57.0	2020
Saint Pierre and Miquelon	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	0.0	0.0	0.0	2021	60.9	:	:	2021	55.4	:	:	2021
United States	100.0	100.0	100.0	2023	100.0	100.0	100.0	2022	2.7	2.3	3.0	2022	100.0	100.0	100.0	2021	62.0	67.6	56.5	2021
								Arab States	ates											
Bahrain	46.5	55.5	39.2	2022	33.6	42.6	26.3	2022	12.9	12.9	12.9	2018	17.8	13.3	34.1	2022	12.8	11.6	15.3	2022
Iraq	48.9	73.3	24.7	2022	47.3	70.1	23.9	2022	1.6	3.2	0.8	2022	44.6	43.9	48.8	2022	18.3	31.0	5.8	2022
Jordan	46.1	:	:	2021	:	:	:	:	:	:	:	:	52.5	:	:	2019	18.9	:	:	2019
Kuwait	25.4	21.3	30.8	2022	24.4	21.3	30.8	2022	0.9	:	:	2022	17.7	10.8	38.4	2022	12.7	9.3	18.5	2022
Lebanon	10.0	:	:	2018	10.0	:	:	2018	0.0	0.0	0.0	2018	4.7	5.0	4.0	2022	2.2	3.4	1.2	2022

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 | | Beneficiaries receiving
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Country/territory	Bene old-age of per	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{8,14}	receivi as perc ove stat nt age ^{8,1}	ng an centage tutory	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	Beneficiaries receiving ntributory old-age pensi ercentage of persons abc tatutory retirement age	receivi d-age p persons		Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	s receiv ld-age p person. rement	ing ension s above age	Ac to a as pero	tive contribu a pension sch centage of th force 15+ ¹²	Active contributors to a pension scheme as percentage of the labour force 15+ ¹²	s ne abour	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	cive con pension rcentag	Active contributors to a pension scheme as percentage of the rking-age population 16	s as 115+ ¹³
	lstoT	nəM	Nomen	Year	lstoT	nəM	nəmoW	Year	lstoT	neM	Nomen	Year	lstoT	nəM	nəmoW	Year	lstoT	nəM	Nomen	Year
Cambodia	8.1	11.5	5.7	2020	8.1	11.5	5.7	2020	0.0	0.0	0.0	2020	32.1	23.8	41.4	2022	24.2	19.5	28.7	2022
Cook Islands	67.2	71.3	63.7	2022	0.0	0.0	0.0	2022	67.2	71.3	63.7	2022	100.0	100.0	100.0	2022	99.9	100.0	84.7	2022
Fiji	100.0	100.0	100.0	2022	14.4	17.1	12.4	2022	92.8	:	:	2020	58.1	57.2	59.9	2021	33.0	43.2	22.9	2021
Indonesia	31.2	:	:	2021	8.0	:	:	2021	23.2	:	:	2021	13.5	15.0	11.2	2021	9.0	12.1	5.9	2021
Kiribati	93.8	÷	:	2020	÷	:	:	:	÷	:	:	:	42.3	:	÷	2019	18.2	÷	:	2019
Lao People's Democratic Republic	7.0	:	:	2021	7.0	:	:	2021	0.0	0.0	0.0	2021	10.3	10.0	10.6	2021	6.1	6.2	5.9	2021
Malaysia	18.5	24.3	13.0	2023	16.1	21.1	11.3	2023	2.5	3.2	1.7	2020	46.1	46.3	45.8	2023	30.4	36.4	24.1	2023
Marshall Islands	62.7	:	:	2019	62.7	:	:	2019	0.0	0.0	0.0	2019	81.8	:	:	2019	47.2	÷	:	2019
Micronesia (Federated States of)	97.0	96.9	97.0	2021	97.0	96.9	97.0	2021	0.0	0.0	0.0	2021	36.1	43.1	29.2	2020	20.6	24.5	16.6	2020
Myanmar	:	÷	÷	÷	÷	÷	:	:	÷	÷	:	÷	8.4	:	÷	2019	4.7	÷	:	2019
Nauru	100.0	100.0	100.0	2018	0.0	0.0	0.0	2018	100.0	100.0	100.0	2018	88.6	85.5	92.6	2020	54.8	59.4	50.1	2020
New Caledonia	98.8	÷	:	2022	89.0	:	:	2022	9.8	÷	:	2022	67.7	:	:	2022	38.3	÷	:	2022
New Zealand	100.0	100.0	100.0	2023	:	:	:	:	100.0	100.0	100.0	2023	100.0	100.0	100.0	2023	71.6	76.4	6.99	2023
Niue	100.0	100.0	100.0	2018	57.1	÷	:	2018	68.9	:	:	2018	50.0	50.0	50.0	2017	29.1	30.0	28.2	2017
Palau	100.0	100.0	100.0	2019	100.0	100.0 1	100.0	2019	0.0	0.0	0.0	2019	100.0	100.0	100.0	2019	66.7	77.4	55.2	2019
Papua New Guinea	1.9	÷	÷	2022	1.9	÷	:	2022	0.0	0.0	0.0	2022	29.0	:	÷	2022	13.6	:	:	2022
Philippines	65.6	71.4	60.7	2021	25.5	36.3	16.5	2021	40.1	35.1	44.2	2021	33.4	33.6	33.2	2021	19.6	23.8	15.4	2021
Samoa	93.9	÷	:	2023	0.0	0.0	0.0	2023	93.9	÷	:	2023	29.4	28.9	30.4	2021	15.8	19.1	12.5	2021
Singapore	37.3	:	÷	2021	37.3	:	:	2021	0.0	0.0	0.0	2021	88.1	88.6	87.5	2021	61.0	67.1	54.4	2021
Solomon Islands	0.0	0.0	0.0	2021	0.0	0.0	0.0	2021	:	:	:	:	33.0	40.6	24.9	2019	27.7	34.8	20.5	2019

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ls:	senefici -age pel f persor retir	eficiaries receiving e pension as perce ersons above statu retirement age ^{8,14}	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{8,14}		Benel contribu percent statuto	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	eceivin -age per ersons a ment ag		Benef tax-finar percent statuto	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	eceivin age per irsons a ment ag	g ision ibove ge	Act to a as perc	Active contributors to a pension scheme as percentage of the labour force 15+12	ributor: 1 schem 5+ ¹² 5+ ¹²		Acti to a p pei vorking-	kctive contributors a pension scheme percentage of the ng-age population	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	3S 15+ ¹³
ΝOT	Men		nəmoW	Year	letoT	Memen		Year	lstoT neM	Memen		Year	lstoT	nəM	nəmoW	Year	lstoT	nəM	women	Year
Thailand 82.6	9	:	2(2020	9.3	:		2020 7	73.3	÷	20	2020	49.3	:	:	2020	32.4	÷	:	2020
Timor-Leste 92.7	5	÷	2(2023	0.3	:	20	2023 9	92.3	:	20	2023	14.8	:	:	2023	10.0	:	:	2023
Tonga 100.0		100.0 10	100.0 2(2022	0.0	0.0	0.0 20	2022 10	100.0 10	100.0 100.0		2022	60.3	62.6	57.5	2021	32.2	40.8	24.4	2021
Tuvalu 100.0		100.0 10	100.0 20	2019	0.0	0.0	0.0 2(2019 10	100.0 10	100.0 100.0		2019	÷	:	:	÷	:	:	:	:
Vanuatu 4.1	5	÷	2(2019	4.1	:	20	2019	0.0	÷	20	2019	÷	÷	:	÷	÷	:	:	:
Viet Nam 40.9	e.	:	5	2019	:	:	:	-	12.8	:	20	2020	31.5	31.5	31.6	2022	23.2	24.7	21.8	2022
							Sc	Southern Asia	a											
Afghanistan 24.7	۲;	÷	2	2019	:	:	:	÷	÷	÷	:	÷	3.8	÷	:	2019	1.2	:	:	2019
Bangladesh 56.9	6	÷	20	2021	5.5	÷	20	2021 5	51.4	÷	20	2021	1.5	1.9	0.7	2017 ^c	0.9	1.5	0.3	2017
Bhutan 18.8	ø	÷	2(2019	:	:	:	:	:	:	:	:	13.6	÷	:	2019	7.5	:	:	2019
India 45.9		52.6 3	39.5 2(2022 ^g 1	15.7 2	20.8 1	11.0 20	2022 ^g 3	30.1 3	31.8 28.	5	2022	45.8	45.4	47.1	2022	22.8	33.5	11.4	2022
Iran (Islamic Republic of) 87.2	5	÷	2(2019	9.3	20.5	1.9 20	2019 8	87.2 8	87.2 87	87.2 20	2019	60.0	58.9	65.0	2023	25.7	40.8	10.5	2023
Maldives 100.0		100.0 10	100.0 20	2021 2	24.5	:		2021 10	100.0 10	100.0 100	100.0 20	2021	41.2	35.8	53.0	2021	26.3	27.9	22.9	2021
Nepal 77.2		71.7 8	82.1 20	2021 ^h 1	10.1	15.3	5.5 2(2021 ^h 6	67.1 5	56.4 76	76.6 20	2021	7.1	8.3	5.1	2022	2.9	4.4	1.5	2022
Pakistan 17.4	4.	:	20	2022 1	16.9	:	20	2022	0.5	:	20	2020	10.9	12.2	5.9	2020	5.7	9.8	1.5	2020
Sri Lanka 31.1	5	:	20	2021 1	12.7	:	20	2021 1	18.4	÷	20	2020	36.6	37.5	34.8	2021	18.5	26.4	11.5	2021
							Europe	Europe and Central Asia	al Asia											
							Central	Central and Western Asia	rn Asia											
Armenia 81.9		86.6 7	79.3 20	2021 7	78.9	84.7 7	75.7 20	2021	3.0	2.0 3	3.6 20	2021	33.5	37.0	30.4	2021	20.9	25.3	17.5	2021
Azerbaijan 97.0		100.0 9.	94.2 2(2023 8	81.9	90.4 70	76.7 20	2023 1	15.1	11.1 17	17.5 20	2023	33.1	39.7	26.5	2022	19.8	23.8	16.0	2022

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Country/territory	Ben old-ag of pe	Beneficiaries receiving an d-age pension as percentag of persons above statutory retirement age ^{8,14}	s receiv in as per oove sta ent age ^s	Beneficiaries receiving an old-age pension as percentage of persons above statutory retirement age ^{6,14}	Bend a contrik as percel statu	neficiar ibutory entage (utory re	eficiaries receiving outory old-age pensi ntage of persons abc tory retirement age	Beneficiaries receiving a contributory old-age pension as percentage of persons above statutory retirement age	Ber a tax-fii as perce statu	Beneficiaries receiving a tax-financed old-age pension as percentage of persons above statutory retirement age	s receiv ld-age p person rement	ing ension s above age	Ac to as per	Active contributors to a pension scheme as percentage of the labour force 15+12	tributor in schem of the la 15+12	s ne abour	Active contributors to a pension scheme as percentage of the working-age population 15+ ¹³	ive cont ension rcentag age po	Active contributors to a pension scheme as percentage of the rking-age population 15	as 15+ ¹³
	lstoT	nəM	Nomen	Year	lstoT	nəM	nəmoW	Year	lstoT	neM	nəmoW	Year	lstoT	Men	nəmoW	Year	lstoT	nəM	Nomen	Year
Cyprus	92.7	100.0	83.6	2022	82.4	100.0	65.3	2022	10.2	0.9	18.3	2022	82.3	80.2	84.9	2022	52.0	55.4	48.7	2022
Georgia	100.0	100.0	100.0	2022	0.0	0.0	0.0	2022	100.0	100.0	100.0	2022	63.0	60.8	65.5	2022	40.0	44.4	36.2	2022
Israel	100.0	100.0	100.0	2022	100.0	100.0	100.0	2022	4.3	4.3	4.2	2022	100.0	100.0	100.0	2022	63.6	67.1	60.2	2022
Kazakhstan	95.7	97.5	94.9	2023	95.7	97.5	94.9	2023	0.0	0.0	0.0	2023	100.0	100.0	100.0	2023	69.8	74.9	65.2	2023
Kyrgy zstan	100.0	100.0	100.0	2022	100.0	100.0	100.0	2021	0.4	0.4	0.4	2022	58.3	59.7	56.4	2021 ^c	34.6	44.5	25.5	2021
Tajikistan	100.0	100.0	100.0	2021	85.1	98.7	77.9	2021	31.0	40.0	26.3	2021	36.2	30.2	45.9	2021	14.8	15.4	14.3	2021
Turkmenistan	77.2	:	:	2021	70.3	:	:	2021	6.9	1.1	11.2	2021	89.9	:	:	2021	41.5	:	:	2021
Türkiye	85.9	100.0	69.4	2022	78.7	100.0	61.5	2022	7.2	6.2	7.8	2022	76.9	77.1	75.2	2022	40.5	54.8	25.8	2022
Uzbekistan	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	2.1	:	÷	2021	40.5	34.0	52.2	2022	22.8	45.1	11.4	2022
								Eastern Europe	urope											
Belarus	100.0	100.0	100.0	2020	:	:	:	:	÷	:	:	÷	66.6	:	:	2019	41.7	:	:	2019
Bulgaria	93.0	100.0	87.5	2022	92.6	100.0	87.2	2022	0.4	0.5	0.3	2022	85.1	84.5	85.8	2022	48.7	53.9	43.8	2022
Czechia	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	0.0	0.0	0.0	2021	87.9	84.7	91.4	2022	53.2	58.1	48.2	2022
Hungary	0.66	97.3	100.0	2021	0.66	97.3	100.0	2021	0.0	0.0	0.0	2021	96.0	94.8	97.4	2020	56.8	63.8	50.5	2020
Poland	82.9	100.0	72.9	2022	82.8	100.0	72.9	2022	0.1	0.1	0.1	2020	85.3	80.5	91.2	2023	49.7	53.6	46.2	2023
Republic of Moldova	94.0	93.0	94.4	2022	91.1	89.2	91.8	2022	2.9	3.8	2.5	2022	44.0	43.9	44.1	2020	18.5	20.3	16.9	2020
Romania	98.9	96.8	100.0	2022	0.66	96.0	100.0	2022	4.3	0.7	6.2	2022	63.4	61.5	66.1	2022	34.2	39.7	29.3	2022
Russian Federation	100.0	100.0	100.0	2022	100.0	100.0	100.0	2022	8.0	7.6	8.2	2022	98.3	96.5	100.0	2021	60.0	66.6	54.6	2021
Slovakia	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	0.0	0.0	0.0	2021	98.8	92.3	100.0	2021	61.0	63.0	59.0	2021
Ukraine	96.2	:	:	2020	:	:	:	÷	÷	:	÷	÷	47.1	:	:	2019	22.4	:	:	2019

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Country/territory	Bene old-age	Beneficiaries receiving an old-age pension as percentage	receivii as perc	ng an centage	Beneficiaries receiving a contributory old-age pension	eficiaries utory ol	Beneficiaries receiving ntributory old-age pen	lg nsion	Beneficiaries receiving a tax-financed old-age pension	Beneficiaries receiving x-financed old-age pen	receivir -age pe	ig nsion	Acti to a I	Active contributors to a pension scheme	ibutors scheme		Active contributors to a pension scheme as	Active contributors a pension scheme a	butors heme a	s
	of pe r	of persons above statutory retirement age ^{8,14}	ove stat nt age ^{8,1}	tutory 14	as percentage of persons above statutory retirement age	ntage of ory retii	ntage of persons ab tory retirement age	above Ige	as percentage of persons above statutory retirement age	percentage of persons abo statutory retirement age	ersons ement a	above ige	as percentage of the labour force 15+ ¹²	ntage of th force 15+ ¹²	f the lab .+ ¹²		percentage of the working-age population 15+ ¹³	percentage of the ng-age population	of the lation	I5+ ¹³
	lstoT	neM	nəmoW	Year	lstoT	neM	nəmoW	Year	lstoT	neM	nəmoW	Year	Total	neM	nəmoW	Year	lstoT	neM	nəmoW	Year
						North	ern, Sout	thern and	Northern, Southern and Western Europe	Europe										
Albania	96.5	100.0	94.0	2021	96.5	100.0	94.0 2	2021	0.5	:	:	2018	56.3	54.7	58.2 2	2021	33.4	36.4	30.4	2021
Andorra	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2020	10.0	6.8	12.9 2	2022	100.0 10	100.0 10	100.0 2	2020	76.9	79.8	73.9	2020
Austria	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2022	1.0	1.3	0.8 2	2021	91.8	94.6	88.7 2	2022	56.2	63.2	49.6	2022
Belgium	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2022	9.9	5.2	7.7 2	2022	100.0 10	100.0 10	100.0 2	2022	56.0	61.4	50.9	2022
Bosnia and Herzegovina	75.3	100.0	43.8	2020	75.3	100.0	43.8 2	2020	0.0	0.0	0.0 2	2020	60.0	62.1	56.6 2	2020	29.5	37.2	22.1	2020
Croatia	93.2	100.0	73.9	2022	93.2	100.0	73.9 2	2022	0.0	0.0	0.0 2	2022	89.5	87.7	91.7 2	2022	46.4	50.9	42.2	2022
Denmark	100.0	100.0	100.0	2021	96.8	99.2	94.7 2	2020	100.0	100.0 10	100.0 2	2021	100.0 10	100.0 10	100.0 2	2022	68.3	69.9	66.8	2022
Estonia	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2022	0.0	0.0	0.0 2	2022	79.5	75.7 8	83.4 2	2022	51.7	53.6	49.9	2022
Finland	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2022	100.0	100.0 10	100.0 2	2022	88.1	85.1 9	91.3 2	2021	52.7	53.5	52.0	2021
France	100.0	100.0	100.0	2021	100.0	100.0 1	100.0 2	2021	4.6	4.6	4.5 2	2021	96.4	95.1	97.7 2	2021	55.3	58.7	52.3	2021
Germany	100.0	100.0	100.0	2022	98.8	97.6	99.7 2	2022	11.6	15.9	8.2 2	2022	91.3	89.1	92.9 2	2022	56.3	59.8	52.5	2022
Greece	99.2	100.0	85.4	2020	94.0	100.0	80.5 2	2020	5.2	5.6	4.9 2	2020	100.0 10	100.0 10	100.0 2	2019	50.7	57.9	43.9	2019
Guernsey	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2022	0.0	0.0	0.0 2	2022	100.0 10	100.0 10	100.0 2	2020	71.7	73.1	70.3	2020
Iceland	82.4	77.3	87.0	2021	82.4	77.3	87.0 2	2021	82.4	77.3 8	87.0 2	2021	94.0	94.3	93.7 2	2021	72.0	75.9	68.0	2021
Ireland	95.8	100.0	90.3	2022	82.0	90.2	74.7 2	2022	13.8	11.8	15.6 2	2022	100.0 10	100.0 10	100.0 2	2021	81.9	88.2	75.7	2021
Isle of Man	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2022	12.8	:		2022	100.0 10	100.0 10	100.0 2	2022	62.0	:	:	2022
Italy	100.0	100.0	100.0	2022	9.66	100.0	93.9 2	2022	7.8	7.0	8.5 2	2022	100.0 10	100.0 10	100.0 2	2022	50.8	59.1	42.9	2022
Jersey	100.0	100.0	100.0	2022	100.0	100.0 1	100.0 2	2022	0.0	0.0	0.0 2	2022	100.0 10	100.0 10	100.0 2	2022	60.2	:	:	2021

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Country/territory	Bene old-age	Beneficiaries receiving an old-age pension as percentage	as perc	ig an entage	Beneficiaries receiving a contributory old-age pension	Beneficiaries receiving ntributory old-age pen	i receivii d-age pe	ng ension	Beneficiaries receiving a tax-financed old-age pension	Beneficiaries receiving	eceivin -age pe	g nsion	Activ to a p	Active contributors to a pension scheme	butors scheme		Active contributors to a pension scheme as	Active contributors a pension scheme	utors eme as	
	o ber	or persons above statutory retirement age ^{8,14}	ove stat nt age ^{8,1}	4 4	as percentage or persons above statutory retirement age	percentage of persons and statutory retirement age	persons rement a	age	as percentage of persons above statutory retirement age	percentage of persons an statutory retirement age	ersons a ement a	ge	as percentage or the labour force 15+ ¹²	force 15+ ¹²	the labo		percentage of the working-age population 15+ ¹³	percentage of the ng-age population	r the ation 19	5+13
	lstoT	nəM	nəmoW	Year	lstoT	nəM	nəmoW	Year	lstoT	nem	nəmoW	Year	lstoT Men	Momen	Year	lstoT	Men	Momen		Year
Kosovo*	100.0	100.0	100.0	2022	27.5	50.8	6.3	2022	82.8	68.3	94.1 2	2022	63.5	61.7 67	6	2022 2:	23.4	:	2	2022
Latvia	100.0	100.0	100.0	2022	100.0	100.0 1	100.0	2022	4.8	8.1	3.1 2	2022	95.0 9	95.5 9.	94.5 2021		58.3 6	65.3 5	52.5 2	2021
Liechtenstein	100.0	100.0	100.0	2021	100.0	100.0	100.0	2021	0.0	0.0	0.0 2	2022	87.7 9	90.3 8	84.7 20	2021 5:	53.5 6	60.0 4	47.3 2	2021
Lithuania	100.0	100.0	100.0	2022	100.0	100.0 1	100.0	2022	2.2	:		2018	90.7 8	6 6.68	91.5 20	2022 5	57.1 6	61.3 5	53.5 2	2022
Luxembourg	100.0	100.0	100.0	2021	98.7	100.0	96.3	2021	2.2	2.0	2.4 2	2021	100.0 10	100.0 10	100.0 20	2021 8:	89.3	95.2 8	83.4 2	2021
Malta	82.9	100.0	47.3	2021	78.7	100.0	41.4	2021	4.2	2.2	6.0 2	2021	99.5 9	99.3 9	99.7 20	2021 6:	62.9 7	71.4 5	53.6 2	2021
Monaco	24.2	÷	:	2022	19.1	:	:	2016	5.1	÷		2022	70.5	÷	20	2022 4	41.4	:	2	2022
Montenegro	78.0	:	:	2020	78.0	:	:	2020	0.0	0.0	0.0 2	2020	78.2 7	7 1.97	77.0 20	2022 4	44.6 5	51.0 3	38.6 2	2022
Netherlands	100.0	100.0	100.0	2022	100.0	100.0	100.0	2022	1.7	1.7	1.8 2	2022	100.0 10	100.0 10	100.0 2021		71.0 7	75.2 6	66.3 2	2021
North Macedonia	65.8	96.3	41.0	2021	63.6	96.3	41.0	2021	2.3	:	2	2021	62.5 5	59.9 6	66.5 20	2021 3 .	34.2 3	39.4 2	29.1 2	2021
Norway	100.0	100.0	100.0	2023	100.0	100.0	100.0	2023	15.2	:	:	2023	100.0 10	100.0 10	100.0 20	2022 ^c 6·	64.4 6	65.1 6	63.7 2	2022
Portugal	96.7	100.0	94.3	2021	96.7	100.0	94.3	2021	0.0	0.0	0.0 2	2021	100.0 10	100.0 10	100.0 20	2021 5 8	58.8 63.	S	54.6 2	2021
San Marino	94.6	100.0	90.1	2023	94.6	100.0	90.1 20	20233	:	:	:	:	100.0 10	100.0 10	100.0 20	2023 7.	74.7 8	86.9 6	63.2 2	2023
Serbia	53.5	:	:	2021	53.5	:	:	2021	0.0	0.0	0.0 2	2021	79.8	:	20	2022 4	45.0	:		2022
Slovenia	100.0	100.0	100.0	2022	100.0	100.0	100.0	2022	÷	:	÷	:	93.2	÷	20	2022 5.	54.2	:		2022
Spain	88.9	93.0	85.7	2022	83.5	88.4	79.8	2022	5.4	4.6	6.0 2	2022	85.7 8	85.6 8	85.7 20	2022 4	49.3 5.	53.9 4	45.0 2	2022
Sweden	100.0	100.0	100.0	2020	100.0	100.0	100.0	2020	34.9	17.7 4	49.9 2	2020	100.0 10	100.0 10	100.0 20	2021 6·	64.6 6	67.7 6	61.5 2	2021
Switzerland	99.3	100.0	98.7	2021	66.3	100.0	98.7	2021	0.0	0.0	0.0 2	2021	100.0 10	100.0 10	100.0 20	2022 6	67.2 7.	72.3 6	62.2 2	2022
United Kingdom	100.0	100.0	100.0	2023	100.0	100.0	100.0	2023	11.5	8.6	14.0 2	2023	91.0 9	91.7 9	90.2 20	2022 5	57.0 6	61.1 5	53.0 2	2022

Source

Main source

ILO modelled estimates, 2024; World Social Protection Database, based on the Social Security Inquiry (SSI).

Other sources

ADB (Asian Development Bank). Social Protection Index Database.

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WHO (World Health Organization). Global Health Observatory.

Notes

Global and regional aggregates are weighted by relevant population groups. Estimates are not strictly comparable to previous regional estimates due to methodological enhancements, extended data availability and country revisions. For detailed definition of the indicators, see Annex 2.

- ... Data not available
- ^a National estimate
- ^b Including school feeding programme(s)
- ^c Estimated based on legal coverage.
- ^d Including school feeding programme(s) and other food benefits for children
- ^e Based on available data mainly from central government schemes
- ^f Not yet implemented
- ^g India: Data not available for Building and Other Construction Workers Fund.
- ^h Nepal: Estimated based on available data for Public Sector Pension and Social Security Allowance Programme only.
- ¹ Somalia, South Sudan: In estimating the coverage for SDG 1.3.1, only statutory programs were taken into account, despite the country's additional coverage through non-statutory programs.
- ¹ Proportion of the population covered by at least one social protection cash benefit: ratio of the population receiving cash benefits, excluding healthcare and sickness benefits, under at least one of the contingencies/social protection functions (contributory or tax-financed benefit) or actively contributing to at least one social security scheme to the total population.
- ² Proportion of children (0 to 15 years old) covered by social protection benefits: ratio of children/ households receiving child or family cash benefits to the total number of children/households with children.

- ³ Proportion of children (0 to 18 years old) covered by social protection benefits: ratio of children/ households receiving child or family cash benefits to the total number of children/households with children.
- ⁴ Proportion of women giving birth covered by maternity benefits: ratio of women receiving cash maternity benefits to women giving birth in the same year (estimated based on age-specific fertility rates published in the UN *World Population Prospects* or on the number of live births corrected for the share of twin and triplet births).
- ⁵ Proportion of workers covered in case of employment injury: ratio of workers protected by injury insurance to total employment or the labour force.
- ⁶ Proportion of persons with disabilities receiving benefits: ratio of persons receiving disability cash benefits to persons with severe disabilities. The latter is calculated as the product of prevalence of disability ratios (published for each country group by the WHO) and each country's population.
- ⁷ Proportion of unemployed receiving benefits: ratio of recipients of unemployment cash benefits to the number of unemployed persons.
- ⁸ Proportion of older persons receiving a pension: ratio of persons above statutory retirement age receiving an old-age pension (including contributory and tax-financed benefits) to persons above statutory retirement age.
- ⁹ Proportion of vulnerable persons receiving benefits: ratio of social assistance cash benefits (including non-means-tested benefits) recipients to the total number of vulnerable persons. The latter are calculated by subtracting from total population all people of working age who are contributing to a social insurance scheme or receiving contributory benefits, and all persons above retirement age receiving contributory benefits.
- ¹⁰ Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population).
- ¹¹ Proportion of the population protected by a healthcare scheme for their primary coverage. Mechanisms include: national health insurance; social health insurance mandated by the State (including subsidized coverage for the poor); national healthcare service guaranteed for free or with small co-payments; and other programmes (such as user fee waivers or vouchers). Only public or publicly-mandated privately administered primary healthcare schemes were included. Supplementary public and private programmes were not included.
- ¹² Proportion of the labour force actively contributing to a pension scheme: ratio of workers protected by pension scheme (active contributors) to the total labour force.
- ¹³ Proportion of the working-age population actively contributing to a pension scheme: ratio of workers protected by pension scheme (active contributors) to the total labour force.
- ¹⁴ Total number of beneficiaries does not always correspond to the sum by type of scheme due to possible simultaneous coverage by multiple social protection benefits.

Annex 6 General government actual expenditure on social protection including and excluding health care, latest available year (percentage of GDP)

Income level/region	Total expenditure	Domestic general	Total expenditure	Expenditure or flo	Expenditure on social protection systems including floors, by broad age group	tems including up
	on social protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴
World	19.3	6.5	12.9	0.7	4.8	7.6
High-income	24.9	8.7	16.2	1.0	6.3	0.6
Upper-middle-income	11.8	3.4	8.5	0.4	2.7	5.8
Lower-middle-income	5.8	1.6	4.2	0.2	1.2	2.6
Low-income	2.0	1.2	0.8	0.2	0.4	0.2
Africa	5.8	2.1	3.7	0.5	1.5	1.7
Northern Africa	10.2	2.4	7.8	•0.0	2.7	4.1
Sub-Saharan Africa	4.0	2.0	2.0	0.4	0.9	0.7
Americas	23.9	8.6	15.3	0.4	7.1	8.1
Latin America and the Caribbean	15.0	4.4	10.6	0.8	2.5	7.4
Northern America	26.0	9.6	16.5	0.3	8.1	8.2
Arab States	8.3	3.8	4.6	0.003	1.4	3.8
Asia and the Pacific	11.8	3.8	8.0	0.5	2.4	5.4
Eastern Asia	13.7	4.2	9.5	0.5	2.7	6.4
South-Eastern Asia and the Pacific	9.4	4.2	5.1	1.1	2.8	2.6
Southern Asia	5.1	1.2	3.8	0.05	0.9	2.4
Europe and Central Asia	25.3	7.8	17.5	1.6	5.5	10.5
Central and Western Asia	11.2	3.8	7.4	0.5	2.4	4.5
Eastern Europe	20.1	5.3	14.8	1.8	3.7	9.3
Northern, Southern and Western Europe	27.9	8.7	19.2	1.7	6.2	11.3

Annex 6 (cont'd)

Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditu includin	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴		
				Africa				
			Nor	Northern Africa				
Algeria	10.9	3.3	7.7	0.0	4.5	3.2	2024 ^p	National
Egypt	11.2	1.7	9.5	:	2.2	5.4	2015	IMF
Libya	5.6	2.5	3.0	2.0	0.2	1.1	2023	National
Morocco	9.2	2.2	6.9	2.1	2.5	2.3	2021	National
Sudan	1.0	0.8	0.2	:	÷	:	2021	National
Tunisia	11.6	4.1	7.5	:	0.6	6.9	2015 ^a	National
			Sub-S	Sub-Saharan Africa				
Angola	3.1	1.7	1.4	0.0	0.0	1.4	2019 ^b	IMF
Benin	1.4	0.3	1.1	:	0.3	0.8	2023 ^p	National
Botswana	5.2	4.8	0.4	0.0	0.0	0.4	2022 ^b	IMF
Burkina Faso	2.9	2.7	0.2	0.0	0.2	0.0	2022 ^b	IMF
Burundi	2.2	2.2	:	:	:	:	:	National
Cabo Verde	10.8	4.7	6.0	:	÷	:	2020 ^b	IMF
Cameroon	0.6	0.5	0.1	:	:	:	1994 °	IMF
Central African Republic	1.3	1.3	0.0	:	÷	÷	2023	National
Chad	1.1	0.9	0.2	:	:	0.2	2022 ^d	National

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Total expend- iture on social protection (including healthcare)	Domestic general government health expenditure, WHO (2021)	Total expenditure on social protection (excluding	Expenditur includin Children ²	Expenditure on social protection systems including floors, by broad age group ildren ² Working age ³ Old ag	n systems e group Old age⁴	Year	Source
1.6	6.0	0.6	0.0	0.0	0.6	2023	National
3.0	1.9	1.1	÷	÷	÷	2023	National
1.1	1.0	0.0	0.0	0.0	0.0	2022	National
0.7	0.6	0.1	0.0	0.0	0.0	2019	National
3.1	1.0	2.1	0.2	1.3	0.7	2018	National
9.7	3.7	6.0	0.0	0.6	5.3	2020	National
2.0	1.0	1.0	0.5	0.4	0.1	2019	National
2.5	1.6	0.9	0.1	0.0	0.8	2021	National
2.0	1.6	0.4	0.3	0.0	0.0	2022	National
2.8	2.2	0.5	0.0	0.0	0.5	2019	National
2.1	0.7	1.4	:	÷	÷	2022 ^p	National
1.3	1.1	0.2	0.1	:	:	2021 ^p	National
3.6	2.2	1.4	0.0	0.5	0.8	2020	IMF
11.1	4.2	6.9	0.2	0.0	1.5	2022	National
1.5	1.1	0.4	0.1	0.1	0.2	2018	National
2.8	0.7	2.1	0.0	0.5	1.6	2024 ^p	National
2.6	1.4	1.2	0.0	0.3	0.9	2022	National
4.0	1.3	2.7	0.2	0.8	1.8	2022	National

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Country/ territory	Total expend- iture on social protection (including healthcare)	Domestic general government health expenditure, WHO (2021)	Total expenditure on social protection (excluding healthcare) ¹	Expenditur includin Children ²	Expenditure on social protection systems including floors, by broad age group ildren ² Working age ³ Old ag	n systems e group Old age ⁴	Year	Source
Mauritania	3.9	1.6	2.3	1.9	0.1	0.4	2022	^p National
Mauritius	12.6	3.1	9.4	0.5	3.1	5.9	2022	IMF
Mozambique	3.6	2.6	1.0	0.0	1.0	0.0	2021	^b IMF
Namibia	9.8	4.4	5.3	5.2	0.1	0.0	2021 ^b	· IMF
Niger	2.4	2.1	0.3	0.0	0.2	0.1	2022	National
Nigeria	1.2	0.5	0.7	0.0	0.7	0.0	2019	National
Rwanda	4.3	3.0	1.3	0.0	0.8	0.5	2020	National
Sao Tome and Principe	4.8	3.3	1.5	0.1	6.0	0.0	2021	National
Senegal	3.3	1.1	2.2	:	:	:	2024	^p National
Seychelles	12.3	4.0	8.2	0.3	7.9	0.1	2020	IMF
Sierra Leone	2.6	1.9	0.6	:	÷	:	2023	^p National
Somalia	0.1	:	0.1	0.0	0.1	0.0	2019	IMF
South Africa	10.4	5.0	5.4	1.4	2.5	1.5	2022	IMF
Tanzania (United Republic of)	3.4	6.0	2.5	0.0	0.5	1.4	2021	National
Togo	2.9	0.6	2.3	:	1.2	0.9	2022	National
Uganda	1.3	1.0	0.3	0.0	0.3	0.0	2022	^b IMF
Zambia	5.8	2.8	2.9	0.7	1.3	1.0	2021	National
Zimbabwe	4.1	6.0	3.2	:	:	:	2022	National

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditu includin	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴	I	
			A	Americas				
			Latin America	Latin America and the Caribbean	u			
Antigua and Barbuda	6.8	3.9	2.9	0.2	0.3	2.3	2020 ^a	UNECLAC
Argentina	17.0	6.1	10.8	1.7	2.3	6.9	2022 ^c	IMF
Bahamas	6.6	4.0	2.7	:	1.2	1.5	2021 ^a	National
Barbados	8.6	4.4	4.3	÷	÷	:	2021	UNECLAC
Belize	7.7	3.4	4.3	0.1	1.6	2.5	2020 ^a	UNECLAC
Bolivia (Plurinational State of)	10.9	5.9	5.0	0.3	0.1	4.7	2022	National
Brazil	21.5	4.5	17.0	1.4	3.8	11.9	2022	National
Chile	12.5	5.2	7.3	0.7	2.1	4.5	2022 ^a	National
Colombia	14.7	6.6	8.1	:	:	:	2022	National
Costa Rica	12.4	5.3	7.1	0.7	0.5	5.9	2023	National
Cuba	21.6	12.6	0.6	:	:	:	2020	UNECLAC
Dominica	8.6	4.2	4.5	0.3	0.5	3.9	2020	National
Dominican Republic	5.5	3.3	2.2	0.0	1.2	1.0	2023	National
Ecuador	12.5	5.3	7.3	0.0	1.1	6.1	2021	National

Annex 6. General government actual expenditure on social protection including and excluding health care, latest available year 313

Annex 6 (cont'd)

Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditur including	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age ⁴		
El Salvador	13.7	6.4	7.3	0.0	6.3	1.1	2021	IMF
Grenada	6.8	2.2	4.6	1.0	1.3	2.3	2023 ^a	UNECLAC
Guatemala	5.0	2.3	2.6	0.2	0.6	1.8	2022	IMF
Guyana	5.8	3.3	2.5	0.1	2.4	:	2020 ^a	UNECLAC
Haiti	1.6	0.4	1.1	÷	÷	:	2023 ^p	Government Spending Watch
Honduras	5.0	3.4	1.5	:	1.5	0.0	2021 ^a	National
Jamaica	6.2	5.1	1.1	0.2	0.9	0.0	2020 ^a	UNECLAC
Mexico	11.0	3.0	7.9	0.1	1.9	6.0	2022	National
Nicaragua	7.0	6.1	0.8	0.2	0.6	0.0	2023 ^a	UNECLAC
Panama	8.4	5.4	3.1	0.5	0.0	2.6	2021	National
Paraguay	11.2	4.5	6.8	0.2	3.4	3.2	2020	UNECLAC
Peru	7.1	4.0	3.1	0.4	0.4	2.4	2022	National
Puerto Rico	10.0	:	10.0	:	:	2.2	2022	National
Saint Kitts and Nevis	6.9	3.5	3.3	0.1	1.5	1.7	2019 ^a	UNECLAC
Saint Lucia	6.8	2.6	4.1	0.2	1.6	2.4	2020 ^a	UNECLAC
Saint Vincent and the Grenadines	8.1	3.6	4.4	0.3		2.8	2020 ª	uneclac

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditu includin	Expenditure on social protection systems including floors, by broad age group	in systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴		
Suriname	8.3	3.3	5.0	0.0	3.4	1.5	2020 ^a	UNECLAC
Trinidad and Tobago	12.7	3.3	9.4	0.1	4.	7.9	2019 °	IMF
Uruguay	21.5	6.9	14.6	0.0	1.3	13.3	2022	National
Venezuela (Bolivarian Republic of)	10.0	1.4	8.7	÷	÷	0.0	2014	National
			A	Americas				
			North	Northern America				
Canada	21.0	0.0	12.0	2.6	7.0	2.4	2022	IMF
United States	26.4	9.6	16.8	0.1	8.2	8.7	2022	National
			Ar	Arab States				
Bahrain	8.8	2.8	6.0	0.0	1.6	4.5	2022	National
Iraq	9.5	2.6	6.9	:	1.4	5.5	2022	National
Jordan	13.3	2.6	10.7	:	1.1	9.6	2022	National
Kuwait	13.7	5.2	8.5	0.0	0.5	7.9	2022	National
Lebanon	4.8	2.9	1.9	0.1	0.9	0.9	2022	National
Occupied Palestinian Territory	3.9	:	9. 6	:	0.3	3.5	2022	National

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditu includin	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴	I	
Oman	6.1	3.8	2.3	0.0	0.2	2.0	2022	National
Qatar	3.4	2.5	1.1	0.0	0.1	1.0	2022	National
Saudi Arabia	9.9	4.6	5.3	÷	2.0	3.3	2019	National
Syrian Arab Republic	1.4	1.4	÷	ł	÷	Ξ	÷	National
United Arab Emirates	5.6	3.4	2.2	ł	1.2	÷	2018	IMF
Yemen	1.1	0.4	0.7	:	0.0	0.7	2015	National
			Asia an	Asia and the Pacific				
			Eas	Eastern Asia				
China	10.8	2.9	7.9	0.1	2.6	5.3	2021	National
Hong Kong, China	9.6	÷	3.9	0.4	3.1	0.5	2021	IMF
Japan	26.3	9.2	17.1	2.1	2.5	12.6	2022	IMF
Macao, China	26.2	÷	26.2	:	:	÷	2022	IMF
Mongolia	20.0	4.5	15.4	9.4	6.0	0.0	2021	IMF
Republic of Korea	13.4	5.7	7.7	0.5	2.7	4.6	2020	OECD
Taiwan, China	11.0	:	11.0	0.9	4.9	5.3	2022	National

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditur includin	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age ⁴	I	
			South-Eastern	South-Eastern Asia and the Pacific	ific			
Australia	18.1	8.0	10.1	1.9	4.6	3.6	2022	IMF
Brunei Darussalam	2.7	2.1	0.6	:	:	:	2021	ADB
Cambodia	3.1	2.0	1.1	:	:	:	2021	ADB
Cook Islands	8.4	3.7	4.8	1.6	0.3	2.9	2022	National
Fiji	9.5	3.4	6.2	1.0	0.4	3.1	2022	National
Indonesia	3.7	2.2	1.5	:	÷	:	2022	IMF
Kiribati	29.9	11.1	18.8	:	:	:	2022	IMF
Lao People's Democratic Republic	1.4	0.7	0.7	0.0	0.0	0.6	2019	National
Malaysia	2.5	2.5	:	:	:	:	:	National
Marshall Islands	6.8	5.3	1.4	:	÷	:	2019 ^b	IMF
Micronesia (Federated States of)	2.3	1.9	0.4	0.0	0.4	0.0	2020 ^b	IMF
Myanmar	2.0	1.1	0.9	:	0.9	:	2019	IMF
Nauru	16.8	11.3	5.4	0.0	5.4	0.0	2018	IMF
New Zealand	18.6	7.7	10.9	2.2	2.6	5.2	2022	National

Annex 6 (cont'd)

Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditur including	Expenditure on social protection systems including floors, by broad age group	on systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴		
Palau	7.6	7.4	0.2	0.0	0.2	0.0	2019 ^b	IMF
Papua New Guinea	1.3	1.2	0.1	0.0	0.1	0.0	2020 ^b	IMF
Philippines	5.0	2.3	2.7	0.8	0.5	1.4	2022 ^b	IMF
Samoa	7.0	5.1	1.8	0.3	0.0	1.5	2021 ^b	IMF
Singapore	4.5	3.5	1.0	0.4	0.6	0.0	2022	IMF
Solomon Islands	3.8	3.3	0.4	0.4	0.0	0.0	2020 ^b	IMF
Thailand	8.5	3.6	4.9	0.0	3.0	1.9	2022	IMF
Timor-Leste	17.1	7.3	9.9	:	÷	÷	2023	National
Tonga	6.2	3.6	2.6	:	0.2	2.4	2021	National
Vanuatu	2.3	1.2	1.1	:	÷	÷	2022	National
Viet Nam	7.0	2.0	5.1	0.4	1.8	2.8	2020	National
			Sout	Southern Asia				
Afghanistan	2.6	0.7	1.8	0.1	1.3	0.4	2017	IMF
Bangladesh	1.3	0.4	0.9	0.1	0.1	0.7	2022	National
Bhutan	5.5	2.2	3.3	:	:	:	2022	ADB
India	5.1	1.1	4.0	0.0	1.0	2.8	2021	National
Iran (Islamic Republic of)	12.0	3.2	8.8	÷	÷	÷	2020	National

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditur includin	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴	I	
Maldives	12.4	7.2	5.2	0.1	3.4	1.7	2022	National
Nepal	4.0	1.8	2.2	0.0	2.2	0.0	2021	IMF
Pakistan	2.0	0.8	1.2	0.0	0.8	0.3	2021	National
Sri Lanka	4.7	1.9	2.8	:	1.5	1.3	2022	National
			Europe ai	Europe and Central Asia				
			Central ar	Central and Western Asia				
Armenia	8.7	2.2	6.5	1.0	0.9	4.6	2022	IMF
Azerbaijan	10.2	1.5	8.7	0.3	3.4	4.9	2021	IMF
Cyprus	20.5	8.0	12.5	2.5	2.2	7.8	2021	IMF
Georgia	11.3	4.5	6.8	1.7	1.1	4.1	2022	IMF
Israel	16.1	5.4	10.7	1.1	4.1	5.5	2022	IMF
Kazakhstan	6.0	2.6	3.5	0.7	1.3	3.3	2021	IMF
Kyrgyzstan	11.6	2.9	8.7	1.5	0.5	6.7	2022	IMF
Tajikistan	6.0	1.9	4.1	0.3	0.6	3.2	2022	IMF
Türkiye	10.5	3.6	6.9	0.0	2.5	4.3	2022	IMF
Uzbekistan	9.4	3.0	6.3	0.8	1.0	4.5	2021	National
			Easte	Eastern Europe				
Belarus	18.0	4.9	13.1	0.2	12.2	0.7	2022	IMF
Bulgaria	18.7	5.4	13.4	1.8	1.6	10.0	2021	IMF

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditur includin	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴	1	
Czechia	21.8	8.2	13.6	1.8	3.4	8.5	2021	IMF
Hungary	18.4	5.3	13.1	2.3	3.5	7.3	2021	IMF
Poland	21.9	4.6	17.3	2.9	2.8	11.6	2021	IMF
Republic of Moldova	19.3	5.1	14.3	1.3	4.7	8.3	2022	IMF
Romania	18.3	4.9	13.4	1.5	2.0	9.9	2021	IMF
Russian Federation	19.4	5.3	14.1	1.6	4.1	8.4	2020	IMF
Slovakia	22.1	6.2	15.9	1.2	5.7	9.0	2021	IMF
Ukraine	21.5	4.1	17.4	0.0	5.2	12.2	2022	IMF
			Northern, Southe	Northern, Southern and Western Europe	urope			
Albania	12.4	2.9	9.6	1.5	0.2	7.9	2021	IMF
Andorra	9.5	6.2	3.3	2.0	0.2	0.1	2023	^p National
Austria	30.1	9.5	20.6	2.1	4.2	14.4	2022	IMF
Belgium	29.6	8.6	21.0	2.2	7.6	11.1	2021	IMF
Bosnia and Herzegovina	19.2	6.5	12.6	0.7	2.8	9.2	2021	National
Croatia	20.9	6.8	14.1	2.1	2.3	9.6	2021	IMF
Denmark	28.1	9.2	18.9	3.8	7.9	7.2	2022	IMF
Estonia	19.3	5.7	13.6	2.5	3.5	7.5	2021	IMF

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditur	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴		
Finland	33.1	8.4	24.7	3.0	7.1	14.5	2021	IMF
France	34.1	9.3	24.8	2.2	7.9	14.7	2021	IMF
Germany	30.3	10.2	20.0	1.8	6.4	11.8	2022	IMF
Greece	26.0	5.4	20.6	1.1	3.2	16.3	2021	IMF
Iceland	19.3	8.1	11.2	2.4	5.6	3.2	2022	IMF
Ireland	13.8	5.2	8.6	0.9	3.8	3.8	2021	IMF
Italy	30.4	7.1	23.3	1.1	5.3	16.9	2021	IMF
Latvia	20.1	6.3	13.8	1.8	4.3	7.7	2021	IMF
Lithuania	19.6	5.3	14.3	1.9	5.7	6.7	2021	IMF
Luxembourg	24.1	4.9	19.1	3.5	6.0	9.7	2022	IMF
Malta	17.9	7.1	10.8	0.9	1.9	7.9	2021	IMF
Montenegro	25.5	6.5	19.0	0.7	11.5	6.5	2021	National
Netherlands	23.4	7.9	15.5	1.9	7.6	6.1	2022	IMF
North Macedonia	13.8	4.6	9.1	2.1	0.9	6.2	2022	National
Norway	23.1	8.5	14.7	2.4	6.6	5.7	2022	IMF
Portugal	25.3	7.0	18.3	1.5	3.1	13.6	2021	IMF
San Marino	24.0	7.0	17.0	0.7	2.8	13.6	2022	IMF
Serbia	19.7	6.3	13.5	÷	4.0	9.5	2023	National

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Country/ territory	Total expend- iture on social	Domestic general	Total expenditure	Expenditur including	Expenditure on social protection systems including floors, by broad age group	n systems e group	Year	Source
	protection (including healthcare)	government health expenditure, WHO (2021)	on social protection (excluding healthcare) ¹	Children ²	Working age ³	Old age⁴	I	
Slovenia	24.8	6.9	17.9	2.0	4.2	11.7	2021	IMF
Spain	26.5	7.7	18.8	1.0	5.3	12.5	2022	IMF
Sweden	28.2	9.7	18.5	2.3	5.8	10.4	2021	IMF
Switzerland	16.7	4.3	12.5	0.6	5.1	6.7	2022	IMF
United Kingdom	26.5	10.4	16.1	1.3	6.1	8.7	2021	IMF

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Notes

Global and regional aggregates are weighted by GDP for the year 2024. Estimates are not strictly comparable to previous regional estimates due to methodological enhancements, extended data availability and country revisions. For a detailed definition of the indicators, please see Annex 2.

- ... Data not available.
- ¹ Total social protection expenditure (excluding health) does not always correspond to the sum of expenditures by age group, depending on data availability, source and year, and on inclusion of non-age-group-specific expenditures.
- ² Expenditure on children includes provision of social protection in the form of childcare and family benefits.
- ³ Expenditure on working-age population includes social protection expenditure that cannot be classified under children and/or old-age benefits.
- ⁴ Expenditure on old-age benefits includes social protection expenditure for persons who are survivors of a deceased person.
- ^a Central government
- ^b Budgetary central government
- ^c Central government (including social security funds)
- ^d Social security fund (pensions)
- ^p Planned expenditure







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Advancing social justice, promoting decent work

The International Labour Organization is the United Nations agency for the world of work. We bring together governments, employers and workers to drive a human-centred approach to the future of work through employment creation, rights at work, social protection and social dialogue. This ILO flagship report provides a global overview of progress made in extending social protection and building rights-based social protection systems around the world since 2015, with an especially sharp focus on the climate crisis and the exigency of a just transition. Universal social protection systems have an important role to play as an enabler of climate action and a catalyst for a just transition and greater social justice.

Following a life-cycle approach and based on new global, regional and country data on coverage, benefits and related public expenditure, the report analyses progress in realizing universal social protection, with a particular focus on achieving the globally agreed 2030 Agenda for Sustainable Development and its Sustainable Development Goals (SDGs). The report includes access to comprehensive statistical tables containing the latest social protection data, including detailed country data on SDG indicator 1.3.1.

This global report is accompanied by regional companion reports which highlight key developments, challenges and priorities in the field of social protection in specific regions.

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