

gFSC Guidance: Urban targeting in the context of COVID-19

Introduction

Today, over 4 billion people around the world – more than half the global population – live in cities. Increasing urbanization leads to people living in closer proximity to one another, which heightens congestion and the risk of COVID-19 contagion.

The challenges of high population density are only exacerbated in urban slums, in which almost 1 billion people currently live globally. WFP has projected that COVID-19 and its socio-economic impacts may drive up to 120 million more people into acute food insecurity in 2020, to reach a total of 270 million. Similarly, the World Bank estimates that some 49 million more people may fall into extreme poverty by the end of this year.

The pandemic caused worldwide economic disruptions and slowdowns, emanating from sources such as reduced workforces, strict containment measures and panic behaviour. These in turn led to supply chain shocks from factory closures and cutbacks in service provisions, as well as a collapse in demand due to job losses and drastically reduced purchasing power. Informal labour is widespread in developing countries and households mostly rely on daily wages to make ends meet, with almost no access to social protection or safety nets. Those living in slums, refugee and IDP camps or in densely populated areas have limited access to basic services, particularly water, sanitation or health access and tend to rely on public transport. In crowded spaces, there is a high risk of the disease spreading as well as general vulnerability to economic containment measures.

The humanitarian food security and livelihoods (FSL) sector traditionally operates in rural areas. Few interventions are carried out in this sector, so expertise in urban settings is rather poor. Moreover, these settings have entirely different social, economic and geographic dynamics and influencing factors. A working group addressing food security issues in urban contexts has been hosted for some years by the global Food Security Cluster (gFSC). The purpose of the gFSC Food Security and Livelihoods in Urban Settings Working Group was to promote better coordination and implementation of good practices in urban humanitarian food security responses. It operated from 2012 till 2018, producing a range of helpful documents and reports that were used to develop the guidance at hand.

Targeting is one of the most – if not the most – difficult steps in humanitarian response (see Figure 1). This document was developed as per request from FSC teams in the field and a number of global partners. Members of this WG are FSC Coordinators, UN and INGO food security specialists, WASH and nutrition experts.

What is targeting and prioritization?

Targeting aims to identify geographic areas and populations most in need to enable provision of timely and relevant support (in response to a crisis or as part of a safety-net for vulnerable populations). **Prioritization** among the targeted populations is often required due to resources or other constraints such as budgetary ceilings, physical access and existing capacities.

Effective targeting cuts across the entire programme cycle and requires the involvement of cross-functional teams for:

- **Assessments:** context analysis and needs assessments
- **Design:** programme formulation and targeting and prioritization strategies
- **Delivery:** identifying eligible individuals and households and communicating targeting decisions to affected populations
- Assurance: monitoring of targeting and prioritization processes and outcomes

During the design of targeting strategies, time, capacities and financial resources required will have to be considered. A successful targeting system will minimize unintentional distribution of assistance to non-vulnerable households/individuals (inclusion errors) and ensure that households/individuals in need of assistance are not excluded from assistance (exclusion error).

Figure 1: Targeting and prioritization of impoverished and food-insecure populations affected by COVID-19 - Safeguarding and scaling up assistance for people most at risk (Source: WFP 2020)

Specific challenges for targeting in urban contexts

Urban communities are often densely packed, highly populated and feature a complex range of livelihoods, needs and available institutions. These characteristics pose specific challenges for targeting, with the risk of vulnerable households being excluded, difficulties identifying and involving partners and community leaders, and limited data availability.

Urban populations tend to be from diverse backgrounds that are influenced by various socioeconomic factors, languages, religions, areas of origin, and other factors. Unlike rural areas, urban communities are often geographically spread out and made up of more dispersed networks or groups. These groups are also dynamic, with people commuting to work or trade or moving back and forth between rural and urban settings. Urban areas also often host higher numbers of migrants, refugees and IDPs, as well as a larger number of institutions than in rural areas.

Humanitarian organizations are not always acknowledged or accepted by urban communities, who can prefer to rely on local leaders and informal networks for support. For urban targeting, complex community structures increase the risk of excluding certain groups in vulnerable situations, particularly those that prefer to remain unnoticed, such as displaced populations and people with legal status challenges. Targeting requires valid identification, strong engagement with relevant official institutions and community leaders during design and implementation of any intervention. Community networks, channels of communication and feedback will affect traditional approaches to engagement.

Urban communities, institutions and economies are generally informal, making it challenging to identify the most vulnerable people. As such, official registers can be quickly outdated or incomplete and can be lacking altogether in informal settlements. Where formal social protection systems are non-existent or insufficient, informal community-based safety nets take on an important role. This informality is another factor that heightens the risk of excluding the most marginalized households from any targeting mechanism.

Household structures and consumer habits differ from those observed in rural areas, meaning it is necessary to adjust food security indicators. Urban households are often smaller or geographically scattered. Different households might share one accommodation, yet households do not always share their meals. Their spending behaviour differs from rural households, as they must spend more on rent and consume more food away from home. For targeting, this means that the definition of a "household" as an entity must be adapted to fit the context. Household-level food security indicators such as the Food Consumption Score may therefore be of limited effectiveness for assessing needs in urban contexts.

Livelihoods and needs can be diverse, even between next-door neighbours, so a good understanding of context is key.5 Households must often prioritize between needs ranging from food, access to healthcare and education, and shelter and safety. These can differ from the needs of rural households, so urban assessments to inform targeting for food security interventions must provide a holistic understanding of needs to identify the most vulnerable.

As markets are important for livelihoods and food, they must be considered and supported when designing appropriate food security responses. Urban communities are closely linked to markets, with many households earning and spending their income there on a daily basis and depending on their proper functioning.

Widespread poverty means prioritization is absolutely necessary. Rapid urbanization and migration in many cases has led to widespread chronic poverty in often underserved urban areas, with women disproportionately affected and often experiencing limited access to resources and services. The urban poor are found in middle- as well as low-income countries. This means that interventions targeted at the acutely vulnerable must be distinguished from those aimed at the chronically poor. At the same time, acute vulnerability could be underestimated due to a lack of data, leading to the need to prioritize the extreme poor.

Insecurity and crime can increase food insecurity and diminish food access. Access to certain areas can also be limited due to extreme poverty and/or informal or unofficial security services, which can hamper data collection and identification of households for targeting. Insecurity can also restrict household movements, including for work and to access markets, thereby impacting food security.

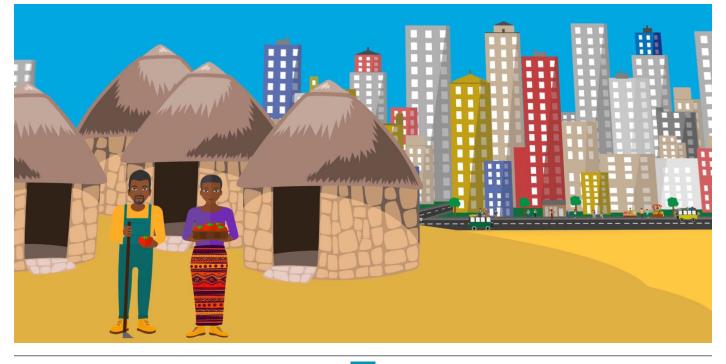
While these challenges require some rethinking and readjusting of targeting, addressing urban populations also brings opportunities that can support meaningful engagement, for example by encouraging the use of new technologies, literacy, phone ownership and internet access.

Targeting methodologies

Before choosing the targeting approach, bear in mind that targeting mechanisms are by nature imperfect. All generate errors of inclusion and exclusion. Similarly, there is no one best way to target in urban areas – each has benefits and limitations. They present trade-offs in terms of accuracy, feasibility, speed, transparency, costs, and so on, but the best is one that allows for rationing and prioritization. However, you will have to select the approach that best suits the context, available resources, and programme objectives. This means striking a balance between accuracy, timeliness and cost, while seeking to mitigate risks where possible. Given the scale of need and the limitations of each targeting mechanism, it is considered best practice to use more than one to reduce errors and further prioritize resources. In many situations, geographical targeting will be an essential first layer of targeting, dedicating resources to particular areas before combining this with other mechanisms.

The various methodologies (see Annex 1):

- Blanket or universal targeting
- Geography-based targeting (GBT)
- Institutional targeting
- Community-based targeting (CBT)
- Balanced score cards (BSC)
- Proxy means test (PMT)



Recommended targeting methodologies

The COVID-19 pandemic forced humanitarian agencies to adapt their activities to observe physical distancing measures, in a spirit of do-no-harm and not contributing to the disease's spread. New programmatic developments were also necessary for food security interventions to adopt these new approaches, meet the new challenges and support the economic and health sectors.

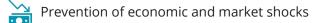
Food security and livelihoods stakeholders have traditionally developed assistance programmes based on economic vulnerabilities, targeting the poorest households above all. Support is often aimed at smallscale entrepreneurs and market stakeholders as a means to restoring the autonomy of financially fragile and at-risk populations. Ensuring business continuity through ad-hoc market interventions that target the supply and/or demand sides could prove instrumental to prevent increasing poverty. In the context of COVID-19, the food security and livelihoods sector can also support health authorities in reducing the speed of the virus' spread and preventing the most-at-risk groups from developing severe forms of the disease.

Food security interventions can be implemented for infected people and their families during home treatments and/or in health centres, as well assisting the elderly and at-risk groups to stay home, thereby reducing their exposure to the virus. The consequences of isolation should be well monitored and mitigated, as these can also exacerbate existing vulnerabilities.



Food security interventions are therefore likely to become significantly more complex in times of COVID-19, and targeting methodologies should be adapted accordingly. This guidance note covers three types of food security programming:

- Prevention of acute food insecurity
- 🔅 Prevention of COVID-19 spread



Targeting options naturally depend on the needs of local populations, and hence so does the type of programming, as well as other factors such as local context and the operational capacity of the agency. We will therefore organize our recommendations according to the type of programme that best covers the most pressing needs of the populations.

The below scenarios should cover most situations, with the agency involved selecting the best targeting options accordingly. Scenarios are based on common targeting methodologies, the specific challenges of urban settings and the very unusual situation presented by COVID-19. They have been designed to guide the choices of field officers to identify suitable solutions according to local context and the agency's operational capacity. Regarding the latter, practitioners' level of knowledge and understanding, their capacity to collect data and the type of programme they intend to implement are essential criteria when choosing the appropriate targeting mechanism.

Well-established partnerships with local stakeholders and frequent interaction with local communities are therefore key advantages, since they support humanitarian agencies' access to the area and provide in-depth knowledge of a complex environment, all of which helps in delivering timely action to address immediate needs. Agencies that were not able to establish these partnerships beforehand will have to collect more data and spend more time gathering the required information, as well as building trust with local stakeholders. As a result, three criteria have been identified as instrumental, explored in more detail in the following sections.

Selection of targeting methodologies depends on:

- Understanding of the local food security situation and its drivers
- Ability to collect data
- Sense of urgency

Key criteria

Prior level of understanding of the local food security situation and contributing factors

Urban settings are complex, rapidly changing socioeconomic environments characterized by diverse livelihoods, income sources and expenses, as well as by the high mobility of their inhabitants. As a result, urban contexts are not as straightforward to analyse as rural ones, and the usual assessment tools do not necessarily work. Targeting methodologies require prior understanding of the common drivers of food security, of livelihoods and of their vulnerabilities. Although this knowledge can be drawn from a variety of sources, it must be kept updated. Any recent information can be instrumental, whether from available literature, community-based organizations, public institutions, NGOs or others. As a result, preexisting socio-economic information and food security data are important to consider before choosing the relevant targeting mechanisms.

Accessibility of the urban setting

COVID-19 has changed people's ability to move around, especially in urban areas. Some cities have been locked down, while others have only allowed people to go outside on certain days of the week, or at certain hours of the day. Evolving perceptions and behaviours of local populations can also restrict access for outsiders, who are sometimes seen as potential propagators of the virus. As humanitarians, we have the responsibility to reduce the risk of spreading the virus through our actions as much as possible and to limit physical contact and movements.

The situation is however very much context specific, with some urban areas open for circulation and accessible while others are not. This often comes on top of other restrictions, such as high crime rates or insecurity, meaning it can be even more challenging for programme teams to get the green light from their internal security departments. Since insecurity is usually believed to be higher in slums, where the majority of poor people live, access to vulnerable populations can become even more compromised.

Local contexts greatly affect feasible targeting methodologies. For instance, door-to-door household surveys can't be implemented in inaccessible areas, while quick and one-off focus group discussions might be contemplated in volatile situations, using social distancing and wearing masks. A key point to note is that accessibility is different for each stakeholder. Each agency must assess the level of risk and make appropriate and tailored decisions. An established humanitarian stakeholder who already has good interactions with community leaders and relationships with local CSOs is likely to enjoy better access to these communities than a recent arrival. Partnerships with local actors support data collection and community engagement. Discussions should of course be held with representatives from women's groups, people living with disabilities and other vulnerable groups, in order to ensure their livelihoods and protection needs receive adequate consideration. Remote forms of communication and data collection, including phone and internet use, should be considered where possible to reduce physical contact.

Sense of urgency

The pandemic has forced food security stakeholders to extend their operations and develop specific programmes to address new and increasing vulnerabilities. Populations that were already food insecure or at risk of food insecurity are likely to become more so, while others may be at greater risk of vulnerability from increasing poverty levels. As such, both the magnitude and the depth of food insecurity are highly likely to increase due to the virus and its ensuing restrictions.

Depending on their vulnerability, populations will need rapid-onset emergency response that covers most essential food needs or livelihoods support, in order to avoid a deterioration of their economic situation. While the extreme poor should be given immediate assistance, other vulnerable populations may be assisted just after. Targeting methodologies should be adapted to the sense of urgency and the speed at which the crisis develops. The immediate needs of vulnerable households will have to be covered very quickly, while for post-emergency and development work more time could be dedicated to programme development, assessment and targeting.

A lockdown situation, high rates of new infections, high initial prevalence of IPC/CH 3+ populations, and the proximity of the contamination peak are indicators that could alert food security stakeholders of the need for quick response to cover immediate food needs. On the other hand, low rates of infection in the region and a low prevalence of IPC/CH 3+ in a post-crisis situation could instead call for preventative and/or recovery activities.



Programming

Urgent food security programming and emergency response

When a situation is deteriorating quickly, urgent food assistance is required to prevent widespread acute food insecurity. Below are three scenarios that humanitarian stakeholders may face and for which they should adapt their targeting mechanisms accordingly.

Scenario 1: No knowledge and restricted access

This scenario is the most complicated, as the agency has only poor contextual knowledge, no established partnerships, and faces access issues. In this type of situation, the most relevant targeting approach is "quick and dirty" – combining geographical targeting with universal and/or categorical food assistance programming. The agency also needs to identify how it will be able to deliver goods and services given the restricted access. Establishing partnerships with local associations is usually the way forward, following which the most important question becomes "how could we select the most vulnerable area within the city?" Coordination with other food security stakeholders through a sector/cluster mechanism can help, as this allows to avoid duplication and reduce gaps in coverage, making access to information quicker.

In addition to using all available information, geographical targeting will be guided by a few macroindicators, so that selected areas match with high socioeconomic vulnerability levels. While slums usually have very high poverty rates, they also tend to be sprawling and are made up of thousands of households, so it is important to select the poorest areas. Indicators such as percentage of physical degradation of a housing structure as a proxy of economic vulnerability have already been used in several contexts. Assessing the distance to a clean water point, marketplace, grocery shop or essential goods store can help to understand the situation, as can the percentage of closed shops and markets in times of COVID-19. Since access is restricted, where possible it is better to use phone or web surveys and satellite data. Quick focus-group discussions and a fast round of observation might also be considered in some situations, but should be restricted in areas where the risk of spreading the virus is high. A balance scorecard mechanism could also be used for geographical targeting, ranking the most vulnerable areas based on the results of certain indicators. Information about the most vulnerable populations could also be collected through focus-group discussions.

Scenario 2. No knowledge but good access

In the second scenario, the agency has good access but no prior working experience in a given urban area, poor knowledge only of associated socio-economic vulnerabilities, and a goal of responding within a month. However, since the agency has access it could collect primary data through quick door-to-door surveys (using protective measures) to identify the most vulnerable and destitute households among the overall population, following geographical targeting.

Considering the urgency, surveys should therefore be straightforward, short, simple and aimed at timely implementation and analysis. They could be limited to essential information based on just a few indicators, so that initial interventions can begin as soon as possible. In the meantime, the agency can still develop its knowledge-base and increase the complexity for a second intervention. Prior focus group discussions with community leaders, youth, women, etc., would need to take place for communication purposes, a good understanding of socio-economic vulnerabilities and a relevant selection of key indicators. The number of people per room, number of dependents, and households with malnourished children have all been used as indicators in previous household surveys in urban settings, which worked quite well. These should

be combined with indicators that depict the changing situation, so with new underlying vulnerabilities related to COVID-19, such as unemployment.

Scenario 3. Good knowledge but restricted access

According to this third scenario, the agency has recently been operating in an urban area, developing a good understanding of its economic vulnerabilities and increasing interaction with local institutions and stakeholders. Yet because of COVID-19, it has faced significant access restrictions and can no longer circulate in the urban area to develop an adhoc emergency response. Experience from previous interventions will be instrumental for quality targeting in this case, as the agency can either use the same lists of beneficiaries for its ad-hoc response, or request lists of vulnerable individuals and households from trustworthy local partners. Collecting lists of beneficiaries from recent and/or ongoing interventions can certainly support effectiveness and should be prioritized as an option. The targeting process is therefore much simpler, and the operational response can be implemented swiftly. Local authorities could also be asked to share information and data if they implement social transfers beforehand. Effective coordination with other humanitarian stakeholders is instrumental to avoid duplication and gaps in assistance. As such, agencies are expected to share their lists of beneficiaries while observing the required data protection standards.

Recovery food security programming, medium-term response, and prevention of acute and chronic food insecurity

In the below scenarios, the agency does not contemplate intervening with an emergency mechanism, but aims to implement careful targeting to minimize errors of inclusion and exclusion. This can be a second stage of a response once the emergency is over or has been addressed, or in situations where regulations do not prevent business continuity or restrict access.

Scenario 4. No knowledge and restricted access for outsiders

Careful targeting might not be possible without proper access, and the only solution would seem to be building partnerships with trustworthy local NGOs, and/or recruiting local enumerators who would face fewer challenges in accessing communities. As knowledge of the local area is poor and there is less pressure to start the programme quickly, the best option is to conduct a vulnerability assessment first through local partners. The results will provide data on the livelihoods situation, socio-economic drivers, associated vulnerabilities and so on, all of which is very useful in establishing the targeting mechanism. As a result, the NGO's capacity to collaborate with a local stakeholder and/or train and monitor local enumerators is key to the success of this scenario. The timeframe would be about two to three months to complete the assessment and complete household targeting.



Scenario 5. Good knowledge but restricted access for outsiders

Using Balanced Score Cards (BSC) can be instrumental in this scenario to make the most of reduced access to communities. Field officers need to complete targeting quickly, with a minimum of physical interaction with the community or local stakeholders. The BSC and selecting the most relevant indicators can be based on local pre-existing understanding of vulnerability criteria. Although indicators such as physiological status, quality of construction material, number of people per room, number of dependents and the percentage of income dedicated to food expenditure have already proved effective in urban settings, the selection of indicators should suit the local context and be selected on an adhoc basis. In this scenario, initial geographical targeting may not be as restricted as in scenario 2.

Scenario 6. No knowledge but good access for outsiders

Good access and available financial resources mean the agency can dedicate time and human resources to precise targeting that does not go through primary geographical targeting, and therefore avoids the limitations of this. An in-depth vulnerability assessment that analyses household resources, expenses, wealth and assets could support the development of Proxy Means Testing or a well-informed scorecard approach. However, financial constraints mean the option of Proxy Means Testing may be out of reach for individual NGOs and more likely used by either international organizations, UN agencies and/or local authorities. Proxy Means Testing could eventually support the development of a social protection system and hence a long-term approach to addressing poverty, so NGOs could select a well-informed and detailed scorecard as the way forward.



Slow the spread and mortality rate of the virus

Agencies must consider different techniques and new approaches for all targeting processes to mitigate the spread of COVID-19, including postponing or cancelling field missions. Most data collection is being done remotely, using tools such as virtual interviews with evaluation stakeholders, online surveys, and so on. To keep targeting functional, partners should guarantee the smooth assessment and distribution of food while also implementing measures to mitigate the spread of COVID-19. The following measures could be considered in consultation with the actors concerned:

Raise awareness among communities and targeted populations to follow WHO COVID-19 transmission prevention messages (wear masks, social distance, avoid crowds).

- Establish or maintain containment exemption measures for the whole programme cycle, while strengthening protection of beneficiaries or communities;.
- Avoid crowded areas that are not in accordance with physical distancing, for example by identifying collection centres closer to producers and developing storage facilities where farmers can deliver their produce without going to markets.
- Follow WHO guidance on COVID-19 mitigation and apply accordingly.

Targeting those in quarantine

There are particular challenges for targeting people in quarantine, as physical interaction should be kept to a minimum and extensive household surveys are often not even feasible. In coordination with the Health cluster and supported by data, those in quarantine can be reached and included in surveys on community-level targeting, as well as engaged through monthly food basket programmes for their area.

Targeting those most at risk (the elderly, pregnant women, etc.)

Partners' demographic data on the presence of elderly people, the sick and pregnant women are critical for prioritizing these at-risk groups, along with criteria such as large household size, highdependency ratios, sex and age of household head. Older people and those with underlying medical conditions are more susceptible to developing serious and potentially fatal infections. The fatality rate is also higher among the elderly, reflecting the presence of other diseases, a weaker immune system, or generally worse overall health.

Implementing partners should coordinate with health sectors or health authorities prior to distributions. Where possible, one or two health workers should be present at the distribution point for screening beneficiaries. Limit the number of expected beneficiaries to target small groups, in coordination with local authorities and respective stakeholders. If health partners are unable to attend distributions, ensure there is a COVID-19 focal point from the distribution team who has access to Health partners in terms of reporting any suspected cases. The focal point can also serve as a monitor and remind staff and beneficiaries of the importance of physical distancing and hand washing/sanitizing. Prioritize the elderly, the sick and pregnant and breastfeeding women and girls. Initiate community-based organizations that support groups at particular risk of severe symptoms if infected.

Targeting the acutely undernourished

While acute malnutrition tends to be less prevalent in urban areas, their densely populated and highly mobile nature mean makes it complex to access continuous treatment, and it should therefore be as much of a concern as in rural areas. Indeed, limited areas such as city slums can sometimes present higher acute malnutrition prevalence than rural ones.

For targeting purposes therefore, it is important to understand the population's nutritional situation and the impact COVID-19 may have had on it. The Standardised Monitoring and Assessment of Relief and Transitions (SMART) initiative is among those providing regular updated recommendations on the appropriate time to restart surveys, as well as on ensuring their safe administration in the context of COVID-19 (these recommendations can also be considered for other types of survey). A note on conducting SMART in urban settings is available, highlighting key aspects and case studies.

During the situation analysis, nutrition and health actors should be liaised with and existing data consulted, for example routine nutrition data, screening by community health workers or family, and mid-upper arm circumference readings (MUAC). Some data can also be used to support sampling, such as from vaccination campaigns. When designing the methodology, factors to be considered include those for targeting the most at-risk individuals, in particular children under five years-of-age and pregnant and lactating women. Selection criteria sometimes include the presence of an undernourished child in the household. To ensure that adapted or disrupted nutrition services are well understood (such as scaled up communitybased treatments) nutrition actors must be coordinated with, as this could affect the identification and treatment of at-risk groups. For example, if institutional targeting is chosen – due to changes in the protocol of community-based management of acute malnutrition or reduced access from COVID-19 – many cases undernourishment could be missed.

Targeting COVID-19 patients at home and in institutions

Identifying and mapping the sick at home and in institutions is an important starting point and must be coordinated with the Health cluster/sector in country; quarantined individuals should be included in the initial survey. Short-term, ready-to-eat food assistance is needed at least during the quarantine period and potentially during recovery.

Prevent economic and market insecurity

- Target the most strategic and at-risk businesses
- Target priority markets and market actors (including financial service providers)

As COVID-19 unfolds, FSL practitioners must respond to the immediate needs of the poor to ensure they can provide for their families' basic needs. Once resources become available, continued access to key basic food and non-food commodities in both urban and rural areas can only be possible if market functionality is maintained. COVID-19 lockdown policies have limited the movement of goods, reducing the availability of or demand for some products and affecting small business owners with limited savings, most of whom have been forced to close. Market-based interventions are thus needed to support all actors and boost demand and supply of key commodities, for example by ensuring producers can safely access markets and supporting livelihoods recovery.



- 1. **Pre-Crisis Market Assessment** to identify key markets to focus on/existing market assessments (e.g. EMMA) to have a clear pre- and post-crisis picture of the situation.
- 2. Supply/value chain analysis of key markets: it is important to see where the food is moved to/distributed in urban areas (pre-crisis as well if available), see for example the WFP supply assessment.
- **3. Market monitoring initiatives** for key commodities (food and non-food items, depending on sector) such as the REACH Joint Market Monitoring Initiative or similar tools that assess market functionality (including logistics, border closures, transport, contributions to the economy).
- 4. WFP market functionality index, which can also be implemented remotely.

Market actor selection process

Although selecting market actors can vary based on context, the following basic processes could be a good starting point to identify eligible recipients of marketbased interventions:

- Identify an entry point, such as national Chamber of Commerce, business association, UN/CSO.
- Application process (variable durationinformation on applications and criteria can be diffused through entry points and other means such as local radio stations).
- Screening, scoring and shortlisting based on eligibility through the above criteria and: verification of lists, remote surveys of all selected participants, confirmation and registration of beneficiary businesses

Key general selection criteria:

- Businesses not covered by any kind of social support.
- Impaired business functionality due to COVID-19, informed by market assessment tools.
- Key commodities/sectors: this should consider sector contributions to the economy/GDP, seasonality, and commodities relevant for COVID-19 such as personal hygiene items and cleaning material. Focus shall be on both domestic and export markets.
- Business size: focus on micro and small enterprises.
- Businesses registered with relevant institutions (business associations, national Chambers of Commerce, etc.); if not registered, an ad-hoc vetting system from peer businesses/consumers may be envisaged.
- Geographical area covered: eligible businesses should be serving areas where vulnerable people are concentrated (e.g. slums). GIS could be useful in the selection as well as socio-economic mapping of these urban areas.
- Connectedness: availability of smartphone or web access for resource transfers/CVA.
- Business value proposition: eligible businesses must present a business plan for the grant.
- Willingness to collaborate with other MSMEs: for those who have potential to grow in a resilience perspective, support clusters of MSMEs with each one collaborating to provide key commodities from production to consumption.

Conclusion

Targeting is difficult, and even more so in urban settings due to a lack of experience of food security and livelihoods organizations, the volatility of the situation, insecurity, livelihood patterns, complexity, and so on. COVID-19 is exacerbating these challenges further still.

This guidance has explored different options to help decision-makers to choose targeting options, based on the objectives of the programme:

- Prevention of acute food insecurity
- Prevention of the disease's spread
- Prevention of economic and market deterioration

It considers three criteria: level of understanding of the local food security situation and its drivers; ability to collect data; and sense of urgency.



This guidance note was written with inputs from ACF, ECHO, iMMAP, Oxfam, Save the Children, and WFP. The gFSC would like to thank all partners who have helped in preparing and reviewing this paper.

Annex 1 – Targeting methodology

Blanket or universal targeting

In some situations, targeting might not be strategically desirable or appropriate – such as the immediate aftermath of a crisis where needs are very high, affecting most of the population, and where these are homogeneously distributed so targeting could create additional tension.

Benefits: when targeting may not be methodologically or practically feasible, for example, where capacity or time are limited, there is a lack of available data or access restrictions;1 in these circumstances, blanket distribution can save time and resources spent identifying and verifying recipients.2. It may be most appropriate than targeting in the very early phase of response when most of the population may need some form of aid and data is limited. In the early stages of emergencies, incorporating it as a two-stage process with geographic area-based targeting within a city and blanket distribution of resources within those areas may be necessary in order to prioritize areas with large numbers of affected persons3.

Risks: despite being quick and easy to design, universal distribution carries the risk of inefficient aid distribution and requires carefully planned exit strategies.4 Taking into consideration the urban context, population concentration and size, alongside a reduction in global funding, targeting of assistance in urban contexts is generally of great importance and in almost all urban emergency responses will be necessary early in the response.5

Categorical targeting at household or individual level

Categorical targeting consists of selecting individuals or households belonging to a certain category of people, using observable characteristics such as households with children under the age of five, pregnant and lactating women, people with disabilities, or the gender of the household head. Simplified categorical targeting strategies are commonly used to target varying forms of humanitarian assistance, from food, cash, health and livelihoods.

Benefits: Because the categorical characteristics are observable, this type of targeting does not require collecting a large amount of data. As such, implementation is easy and allows available resources to be channelled to those considered most in need, depending on the programme's objectives. Governments usually prefer categorical targeting as it is simpler to justify (the elderly, large families, etc.).

Risks: Categorical targeting strategies are not always the most effective due to potential erroneous inclusions of households that are not part of the intended population, or the exclusion of those in need. Errors of this kind imply an ineffective use of resources.6

Geographical-based targeting (GBT)

Geographical targeting means prioritizing assistance to particular urban neighbourhoods or settlements that have been hardest hit by a crisis.

Benefits: The size and scale of needs in urban areas means no single agency or programme can meet them all, while the heterogeneous nature of urban environments means the severity of needs and vulnerabilities will vary considerably. Geographical targeting is a pragmatic, accountable, and highly effective way of rationing and prioritizing assistance and is often used as an initial targeting mechanism in urban areas.7 It is also consistent with the adoption of area-based programming as a good practice in urban areas, enabling integrated and well-

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Patel et al., 2016

MacAuslan and Farhat, 2013 IASC, 2010; Sanderson and Knox-Clarke, 2012

Sanderson and Knox-Clarke, 2012 MacAuslan and Farhat, 2013; UNHCR, 2016

Cirillo, C., Györi, M., Veras Soares, F. (2017). Targeting Social Protection and Agricultural Interventions – The potential for synergies, IPC-IG Working Paper, October 2017

MacAuslan and Farhat, 2013; Patel et al., 2016; Chaudhuri, 2015

coordinated programming for greater impact. New technologies (drones, satellite imagery, etc.) can support geographical targeting.

Risks: Geographical targeting requires an understanding of the overall economic and social characteristics of and service provision within the urban area, and of how these vary between districts or neighbourhoods, to identify those more vulnerable and that are underserved by other agencies. Detailed information is often scarce, so new methods should be considered, such as identifying slum areas based on satellite data. Focusing resources on certain areas at the expense of others will inevitably exclude those households and individuals that fit targeting criteria but who live outside the locality. Even the most robust geographic targeting will miss some, given that populations with similar needs will be spread throughout the city.8 Coordination between agencies is therefore crucial to strategically align respective geographical areas and reduce exclusion errors.

Institutional targeting

According to this approach, beneficiaries are identified due to an affiliation with a selected institution – be it a basic service provider, CSO, community-based organization, or humanitarian agency. This may also encompass health centres, hospitals, retirement homes, schools, and so on.

Benefits: These 'referral-based' mechanisms can be an advantage in urban emergencies, given the complexity of the environment and density of populations. There may be numerous service providers and community-based organizations within a given neighbourhood, with direct links to the population groups of interest, knowledge and experience of the district and extensive social capital within the community. Partnerships can support agencies to better reach and include marginalized and hidden groups (the homeless, street children, displaced persons, etc.) and sensitively and discretely identify individuals or families in need of particular specialized support (e.g. GBV survivors or those in need of counselling and legal assistance). In integrated, multi-sector urban programming, if there is strong coordination of activities between agencies and between sectors within a single agency, a humanitarian agency itself can be the source of this institutional targeting so as to reduce exclusion, create efficiency and avoid duplication of targeting efforts. 9

Risks: Services must be known to and trusted by the most vulnerable displaced households. Some of the most vulnerable lack information about existing services and may therefore not be registered users (e.g. marginalized or excluded indigenous groups, migrants or asylum seekers without ID, etc). It takes time to map and study the services and organizations that exist in the area, and taking into account the views of affected population(s) on services that are known and trusted is instrumental. It is important to consider possible risks to the target population and seek assurance that organizations will act discretely for protection purposes, in relation to discriminated groups, survivors of GBV, and so on. It could otherwise dissuade survivors from seeking access to these services for fear of their confidentiality being compromized.

Community-based targeting (CBT)

The construct of a 'community' in urban areas is heterogeneous and fluid and can lack the cohesion of communities in rural areas. Some displaced households can choose to stay anonymous, while others move regularly for economic reasons or for their own protection. Practitioners should consider the following issues:

Importance of understanding communities and community structures:

Defining what constitutes a community is a critical starting point. Geographic proximity and administrative boundaries do not necessarily indicate tightknit, cohesive communities due to population mobility and fractured social networks (Patel et al., 2016; Smith and

Sanderson and Knox-Clarke, 2012; Patel et al., 2016

⁸ 9 Solution and Milor Solution a basis for their targeting.

Mohiddin, 2015). Community leaders might not always belong to official authorities, so informal structures must be explored and understood.

- The above can lead to the systematic exclusion of vulnerable groups or individuals, partly due to the complexity, fluidity, and density of communities, and partly due to the influence of local power dynamics on the process. Just as in rural areas, practitioners must be aware of motivating factors behind participation in CBT and always take power dynamics into account (Patel et al., 2016; Sanderson and Knox-Clarke, 2012).
- It can helpful to take time during needs and vulnerability assessments to understand how households receive information, proiritize those most at risk, and ascertain what community structures exist and can be built on. Targeting that builds social cohesion in this way can have multiple benefits for these populations, however such activities are too often overlooked in humanitarian programmes. Doing so also requires time and resources and so may not be feasible in all contexts.

Importance of verification:

In cases where local power dynamics suggest a high risk of bias or exclusion, engaging community leaders can be limited to simply identifying potentially eligible cases and referring these to the agency, which then makes decisions on who should be included.

Types of targeting criteria that can be used:

Successful CBT depends on the community's capacity to perform the type of differentiation needed, which has a bearing on the targeting criteria that can be used. Categorical and statusbased indicators are easier for community members to understand and use. Socioeconomic criteria can be used but need to consider how community leaders will identify households in practice, whether through a community meeting or through house-to-house visits.

With CBT, the community identifies eligible beneficiaries. This is a common practice on programmes in rural areas where this is generally undertaken through community leaders, or a committee selected as community representatives. This may (or may not) be based on vulnerability criteria that are determined by the community or the agency.

Benefits: CBT is a growing methodology in humanitarian practice and is widely acknowledged to be effective in encouraging beneficiary participation and engagement, as well as in improving accountability. It can be an inclusive and locally driven process that is aligned with the principles of area-based programming. CBT can also be less time-consuming and costly than other data collection techniques.10 Community buy-in, local ownership and social cohesion are all benefits. If done well, this is also an opportunity to combat inequality by ensuring that there is a representative group of the population included in the CBT selection process that includes men, women, boys and girls both with and without disabilities and coming from different backgrounds.

Risks: In some urban areas, population density combined with a lack of social cohesion can make it difficult to understand who or which structures represent the 'community'. This can increase the likelihood of exclusion errors, especially for potentially marginalized groups.11 Success therefore depends on a nuanced understanding of communities and a sufficiently small enough unit of analysis. As such, urban CBT should not rely too heavily on community leaders or structures where members do not know all vulnerable households or may be prejudiced towards certain groups. In any case, accurate targeting through CBT in urban areas requires careful oversight of the process rather than unconditional devolution of the activity to community groups. It involves triangulation and verification of information received, as the most vulnerable households may be unknown to community leaders.12 As community leaders might not always belong to official authorities, informal structures should be explored and understood.

^{10 (}Patel et al., 2016) 11 (Patel et al., 2016)

 <sup>11
 (</sup>Patel et al., 2016)

 12
 (Cross and Johnson, 2011; Sanderson and Knox-Clarke, 2012; Patel et al., 2016)

Balanced score cards (BSC)

Scorecards combine a range of indicator types (status, protection, categorical, socioeconomic) that are each assigned a score. Data on these indicators are then collected through a household survey to develop a cumulative score, which determines eligibility. This mechanism has been used for the targeting of multi-sectoral assistance in recent urban emergencies.13

Benefits: The scorecard allows practitioners to target based on a nuanced and holistic understanding of vulnerability. Experience shows that going beyond economic indicators to ensure scorecards include aspects such as social networks and displacement can improve accuracy.14 The ranked scoring system captures households' relative vulnerability, versus simply including or excluding on the basis of certain criteria. This is useful in urban contexts where the scale of need and characteristics of vulnerability are great and cannot simply be categorized as "vulnerable" or "non-vulnerable". Such a process also allows for human adjustments to the inclusion and exclusion of households that are close to the threshold, based on follow-up assessments, since eligibility is based on relative vulnerability.

Risks: Although explaining scorecard mechanisms to communities can be more challenging and time-consuming than with other mechanisms that use fewer criteria and are easier to understand, it is vital that agencies implementing scorecards take the time to do this, and do this throughout the process for transparency. While including a larger number of indicators can add rigour to the targeting process, practitioners must also consider the time and resources it takes to administer a longer survey. Administering the scorecard requires an investment of time from those who are affected, and this can increase their expectation of assistance, which can lead to resentment from households that are not selected. To be meaningful for targeting, the range of indicators and their weights must be grounded in the local context, ideally supported by a multi-sectoral assessment, and the process of indicator selection requires careful analysis and review.15 Some vulnerability criteria, although relevant, may be difficult to assess through a household survey, as they can include sensitive, psychosocial and protection-related risks that require special training.

Proxy Means Test (PMT) or Score Card

PMT requires that a statistical analysis be undertaken on a sample of household data from the population of interest, to identify which characteristics are strongly correlated with poverty. This can be in the form of a defining indicator for economic insecurity, such as expenditure or consumption, with weights or scores given to these indicators according to the strength of the relationship. This approach is usually large scale, as it requires econometric support and annual updates, often overseen by governments16 or UN agencies.

Benefits: As the mechanism is (theoretically) based on a scientific process for selecting vulnerability criteria and uses a household survey approach to score prospective beneficiaries, proponents argue that this makes the mechanism more objective, and as a result more robust in identifying the 'most' vulnerable and in reducing errors (particularly inclusion errors). It is more suitable in development programming than in emergency response.

Risks: The data requirements of a PMT mean that exercises are expensive and time-consuming. Sufficient, representative data on the affected population is required to run the regressions, in order to identify the proxy indicators and define the scores. After this, the population must be surveyed using the tool that has been developed. All households within the target population must be surveyed, which again can be time and resource intensive. Furthermore, the dynamic situation in urban displacement emergencies means that these household indicators and scores may rapidly go out of date. Simple scorecards are a more pragmatic, applicable and lower-cost solution than the PMT, which is more aligned with the capacities and expertise of humanitarian teams, as is the case for any household survey.

¹³ Patel et al., 2016

¹⁴ MacAuslan and Phelps, 2012; Armstrong and Jacobsen, 2015

¹⁵ Indicators in the scorecard must be true reflections of increasing or decreasing vulnerability, and the score assigned must reflect the influence of the variable on a household's vulnerability. Setting scores too high or too low risks wrongly excluding or including households based on a single indicator. It is important to test the tool and adjust the process when it is clear that some indicators are either irrelevant or are skewing the selection. Weighting of indicators can be balanced by additional weighting provided by the enumerator, where there is a household whose vulnerability is not reflected by the scoring. However, this needs to be weil-trained for, otherwise it undermines the process.
16 A popular mechanism in the targeting of long-term national social assistance programmes, the PMT has been piloted as a mechanism for

¹⁶ A popular mechanism in the targeting of long-term national social assistance programmes, the PMT has been piloted as a mechanism for targeting humanitarian assistance in the displacement crisis affecting the MENA region, based on the understanding that economic insecurity is a defining feature of vulnerability in these contexts.