



Beneficiary selection during Covid-19

Everyone is affected by Covid-19, but some people are more vulnerable than others. Tearfund is committed to **impartiality**, which means providing assistance to the most vulnerable on the basis of **need alone**. This helps to use limited resources effectively and efficiently by **targeting those in greatest need**. Projects responding to Covid-19 must be careful to avoid generalisations, assuming that all community members have been affected in the same way. Individuals in a community are affected by poverty and emergencies in different ways; some are able to cope better or may have resources of their own to draw on, while others are much more vulnerable. **We must therefore seek out the most vulnerable in our projects.**

Restrictions on movement and physical distancing measures will limit the use of methods commonly employed to identify the most vulnerable and select beneficiaries. Therefore, finding ways to engage and identify beneficiaries remotely is critical to ensuring that our response targets and meets the needs of the most vulnerable, supports those who would otherwise be marginalised or excluded, and adheres to humanitarian principles, including to **do no harm**.

This document provides guidance on how to identify, select and engage with beneficiaries during the Covid-19 pandemic by providing examples of remote data collection tools and key considerations when engaging beneficiaries.

Impartiality and targeting

During Covid-19 our Quality Standards remain critical. When selecting beneficiaries, the principle of impartiality ensures that assistance is given on the basis of need alone, without regard for race, religion, ethnicity, ability, age, gender, sexuality or nationality. It is essential to identify the groups of people who are likely to be most vulnerable to Covid-19 and its impact.

Some projects have clear selection criteria as part of their design, but in the majority of cases selection criteria need to be discussed and agreed with the community through remote means. Careful consideration is needed to agree these selection criteria, using vulnerability mapping to keep the focus on the most vulnerable and marginalised and ensure that the assistance provided is proportionate to the level of need. Responding appropriately means understanding the social and cultural factors that make some groups and individuals vulnerable, such as age, gender, ethnicity, disability or religion. The overlapping or intersection of multiple factors can dramatically increase a

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person’s vulnerability during Covid-19, for instance gender, age and having limited or no access to water.

Examples of people who are likely to be most vulnerable during Covid-19:

- Household directly affected by the virus
- Household whose income-generating opportunities are affected by Covid-19
- Small vendors whose income-generating opportunities are affected by Covid-19
- Older people over 60
- People with pre-existing health conditions – particularly people living with HIV or people with respiratory conditions
- People living with disabilities
- Pregnant women
- Women (who are often key social and care workers)
- Survivors of gender-based violence
- Female-headed households
- Children – particularly orphans and vulnerable children
- People who rely on care for essential needs
- People who don’t have a permanent residence

Beneficiary selection step by step

| Key steps | Technique during Covid-19 | Considerations |
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| <p>Step 1: Carry out a needs assessment to understand the different ways in which people have been made vulnerable by Covid-19.</p> <p>Understanding the groups of people who are most likely to have been adversely affected by the pandemic is essential to ensure that assistance</p> | <p>Secondary data analysis would usually be used and is a good tool, particularly during Covid-19.</p> <p>It is useful to begin with gathering and analysing existing data before conducting other assessments. This can be used to track data over time and be updated accordingly.</p> <p>Consider the sources of data that already exist to help identify vulnerable categories of people eg data collected by government agencies, UN agencies, WHO, humanitarian profiles, satellite imagery.</p> | <p>Where possible, data from documents should be cross-checked through triangulation (checking information against ideally three different sources).</p> |

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| goes to those who most need it. | <p>The following online platforms may be helpful: Reliefweb, Global Disaster Alert and Coordination System, ACAPS, UNOCHA updates.</p> | |
| | <p>Always adhere to government advice regarding movement and physical distancing. If local health advice/ authorities permit you to visit the community, you can conduct a transect walk using these guidelines to identify the most vulnerable: Vulnerability guidance/ Inclusion guidance. In some cases you may be able to obtain a permit to allow you to visit communities. If you are able to visit the community, make sure you keep a distance of 2m between yourself and any other person at all times and regularly wash your hands.</p> <p>If visiting the community is not permitted, key community workers are likely to be aware of the people most affected by Covid-19 and what the most urgent needs are. Draw on established relationships.</p> <p>Conduct a remote assessment via a mobile phone. Reduce the sample of people to be interviewed; obtain phone numbers from any existing lists from government registrations and/or other agencies; call and run through a typical questionnaire.</p> | <p>Remember to follow the government guidelines and practise physical distancing.</p> <p>If you are using community informants, remember to cross-check the information with other sources.</p> <p>Churches and faith leaders will often know who the most vulnerable/affected are and what the most urgent needs are.</p> <p>Be aware of the potential for bias.</p> |
| | <p>Consider conducting household interviews via phone, SMS or WhatsApp call. Just ask the absolutely essential questions. Consider using mobile data collection tools such as Kobo Toolbox to record your data.</p> | <p>Be aware of those who are less visible (eg older people, people with disabilities, women) and those who have no access to technology.</p> <p>Disaggregate data around age, sex and disability.</p> |

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| | <p>Consider using Zoom, Skype or WhatsApp channels to conduct group calls instead of normal focus group discussions in the community.</p> <p>Keep questions short and to the point. Involve people from your existing relationships or local networks to gather information and identify those most in need eg networks of community health workers, partners, church leaders.</p> | <p>It will be harder to reach the most vulnerable due to their lack of access to an internet connection and smartphones, especially for video calls.</p> <p>It will be hard to discuss private or sensitive issues.</p> |
| <p>Step 2: Present results of needs assessment to the community, and agree the criteria to be used for identifying beneficiaries.</p> <p>Deciding beneficiary selection criteria is one of the most important decisions in the whole project cycle. The criteria should be developed with representatives of the community to ensure there are no 'blind spots' and to avoid creating conflict within the community and between the community and project staff.</p> | <p>Similar to focus group discussions, forming community committees may be particularly challenging during the pandemic</p> <p>Community consultations should include the elderly, female-headed households, people with disability, children, women and other vulnerable groups.</p> <p>As an alternative, community liaisons can obtain feedback from community members, and share information via the phone. Consider conducting a group conversation remotely (as described above). However, be aware that many beneficiaries may not have access to digital technologies.</p> | <p>When posting beneficiary lists, consider literacy levels in the community and think how you will include those who cannot read.</p> <p>Ensure that the selection criteria and assistance to be provided are clearly understood by the project staff and community. Clear justification that is easy to understand must be provided for targeting specific groups.</p> <p>Communicate with other reputable organisations working in the area to harmonise selection criteria.</p> |

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| <p>Step 3: Select potential beneficiaries.</p> <p>Once the selection criteria are agreed, the next step is to communicate, identify and select people who meet those criteria.</p> | <p>Common selection methods can be adapted for Covid-19:</p> <p>Extension targeting: Use existing systems such as community health workers, NGO networks, schools, churches or local government agencies, whose staff are already working in the community in some capacity, to select beneficiaries who meet the criteria via a phone or online call.</p> <p>Survey targeting: Use qualitative or quantitative methods to gather data on individuals, households or other groups. This is usually done through focus group discussions and community participatory poverty ranking.</p> <p>Consider interviewing community members via phone, surveys on SMS or WhatsApp, or social media channels, to establish their suitability for the project.</p> <p>Self selection: Beneficiaries self-select into the project based on need. Potential beneficiaries can provide their contact information and then be contacted to complete a survey to confirm their eligibility.</p> <p>Community-based targeting: Create a community committee to identify beneficiaries based on agreed criteria and then cross-check to ensure accuracy.</p> <p>Consider creating a virtual community group through WhatsApp messages or online video calls. If you have no access to an internet connection, consider existing relationships/community liaison</p> | <p>With extension targeting, be aware that there may be bias in whom your sources choose as beneficiaries.</p> <p>With extension targeting, it is important to map the agencies and understand their reach and aims to ensure there is a broad intervention and there isn't duplication.</p> <p>Community-based targeting could be a reliable approach, but remember to ensure that the less visible population groups are considered and consulted. In situations with low or non-existent community cohesion, community-based targeting is not appropriate eg in urban and displacement settings.</p> |
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| | <p>person/church member to run meetings with a small number of people and ensure adherence to physical distancing/government and health advice.</p> | |
| <p>Step 4: Communication strategy & enrolment</p> <p>Beneficiary selection criteria should be available to all and criteria must be widely disseminated to the affected population and shared with local stakeholders.</p> <p>Consider ways to enrol beneficiaries remotely or gather necessary information such as contact details.</p> | <p>Disseminate information for beneficiaries in a variety of ways, through community groups, audio and visual media, and community mobilisers.</p> <p>Consider the following: radio broadcasts, leaflet distribution, text messaging, phone calls, community liaison/frontline workers, vehicle megaphone announcements.</p> <p>Some ways to enrol beneficiaries remotely or gather necessary contact details are: bank card, phone numbers, address. Beneficiary registration databases and forms can be completed via phone or text.</p> <p>Ensure adherence to data protection by ensuring that personal information is stored securely.</p> | <p>Having diverse means of communication is needed to reach specific groups. Consider local languages, social and cultural norms, timing, literacy level, and those who may not be able to access digital information. This means making special efforts to target those who are illiterate, blind or deaf, or those who live in remote locations, have restricted movement (including women) or are marginalised.</p> <p>Ensure information channels are trusted and reliable.</p> |
| <p>Step 5: Review and adjust (if necessary) the selection criteria to ensure that they remain appropriate for the most vulnerable.</p> <p>Targeting can rarely be done perfectly on the first attempt, therefore it is important to review criteria and</p> | <p>Ensure you have an up-to-date contact list for beneficiaries, community-based organisations, community representatives and leaders (to maintain contact remotely).</p> <p>Update communication and feedback channels by increasing the use of technology and remote communication channels, such as hotlines, SMS, social media channels. Consider using radio for information-sharing.</p> <p>Establish remote grievance mechanisms to allow affected</p> | <p>Review beneficiary criteria and ensure they aren't creating other tensions or new vulnerabilities (eg targeting women as cash-grant recipients can sometimes increase their exposure to domestic violence if their husbands are not involved in community consultation processes).</p> |

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| allow the community to give feedback | communities to appeal decisions, lodge complaints or make suggestions. | |
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Key points for beneficiary selection:

- **Impartiality:** Everyone is affected by Covid-19, but some people are more vulnerable than others. We are committed to impartiality, which means targeting beneficiaries based on need alone. We must be aware of groups who are less visible as these people are likely to be some of the most vulnerable.
- **Do no harm:** Restrictions on movement caused by Covid-19 will make it harder for us to identify the people who are most in need. We have to find alternative means to identify beneficiaries remotely, but remember the first priority is the safety of communities, partners and staff.
- **Needs assessment:** Agree your beneficiary selection criteria by carrying out a remote needs assessment to understand the different ways in which people have been made vulnerable as a result of Covid-19, including secondary impacts. Agree remotely with the community the criteria to be used for identifying those who are most vulnerable and the assistance to be provided.
- **Clear records and communication:** Remember to keep a record of the beneficiary selection process and criteria. Ensure that these selection criteria and the assistance to be provided are clearly communicated and understood by the project staff and community and endorsed by them.
- **Do what is feasible and practical:** Use existing local networks and relationships with local partners to identify the groups who are most in need of assistance. Remember to keep things simple: now is not the time to be learning lots of new systems and skills.
- **Beneficiary feedback:** Check throughout the project that selection criteria continue to be appropriate and you are reaching the most vulnerable. If not, adjust accordingly. Ensure there are beneficiary feedback mechanisms in place.
- **In this together:** We're all learning how to operate under these abnormal circumstances. Please share anything useful that you are learning to help us all navigate this time by emailing impact.effectiveness.matrix@tearfund.org The guidance will be updated as we receive your input and learnings.
- **Ask for support:** Contact your cluster DME Adviser or your Humanitarian Coordinator for help and support.

Case studies:

Tearfund, IDP returnee WASH/basic needs project, Namrud, Iraq – 2017

The beneficiary selection for cash distribution in Namrud, Iraq, was done remotely as access to the area was limited due to checkpoint closures and the threat of clashes. As accessibility was changing frequently, there was limited access to communities. However, during the beneficiary selection phase, the area was not accessible to staff at all.

To identify which villages to assist, a rapid needs assessment was conducted for villages where Tearfund had already done security assessments for previous projects. Ideally, this would have been done with multiple community leaders and focus group discussions in the communities, but due to limited access this was not possible. Instead, the needs assessment was done through telephone interviews with key informants and *mukhtars* (community leaders) in the villages. The rapid needs assessment used a scoring system based on indicators of community-level vulnerability, such as infrastructure damage and access to services, coping mechanisms, number of IDPs and vulnerable households.

This assessment identified the four most vulnerable villages and lists of beneficiaries were requested from *mukhtars* from the four villages. The people on the list were assessed over the telephone using a household survey to identify those who fulfilled the criteria. The selection criteria were based on a nationwide tool that all agencies were required to use. (Note: when access improved in the location, the team carried out spot checks of ten per cent of households in person in order to verify the information given through the phone interviews eg verifying the level of damage to their home, number of people in the household).

An evaluation conducted after the response identified a set of recommendations. One was that, in order to have a transparent and inclusive identification and selection process, and to manage any tensions, communication of the criteria and relevant feedback mechanisms are essential. This could include the establishment and training of representative community committees as key stakeholders to ensure a consistent approach when selecting beneficiaries.

Another recommendation from the evaluation was investing in capacity building on how to manage meetings, resolve conflicts and participatory decision-making. This can ensure effective selection of beneficiaries and resolve tensions. In one location, for example, the Tearfund team helped to establish a community committee and then worked closely with them to identify and select the beneficiaries. At this location there were notably fewer complaints and when a case arose, it was the committee members who dealt with it effectively. This demonstrates the importance of communicating and involving communities in the selection process from the start, even when access is limited.

Save the Children, cash-based project, Lima, Peru – 2020

This Save the Children project began in April 2019, in response to the increased numbers of people fleeing Venezuela and seeking refuge in neighbouring countries such as Peru. The project focuses on supporting migrants with cash grants, including transit packages (to help them reach their final destination) and settlement packages (to help with setting up a new life). The most vulnerable beneficiaries, identified through analysis of secondary data and previous experience, were: female-headed households, people living with disability, pregnant women and elderly people.

Before Covid-19, beneficiaries meeting the selection criteria were identified by project staff during their visits to informal settlements and bus shelters. However, restrictions on movement due to Covid-19 now mean that the project staff have to find new ways to identify beneficiaries remotely. For example, the project staff are drawing on their existing connections and asking for referrals from local partners and other organisations who have come into contact with migrants who meet the selection criteria. They also made the decision to offer the settlement cash grants to those who had already received the transit cash grants, as these beneficiaries were already enrolled in the project and had credit cards, which made it much easier for them to receive ongoing assistance during Covid-19.

Potential new beneficiaries were asked to provide their contact details by telephone, and asked to complete an online selection survey to confirm their eligibility. To make the selection process simple, the selection and registration activities were condensed into a one-day process which could be conducted on the phone. This data was also used as a baseline for the project. The staff have also launched a WhatsApp group, to communicate information to the beneficiaries (about the project distributions and health information related to Covid-19) and as a mechanism by which beneficiaries can give feedback. It was important for the project team to be trained to use the new remote technologies effectively, eg how to conduct a survey over the phone.