

Home-Based Workers' Access to Social Protection:

Lessons Learned from the IDPoor Programme in Cambodia



By Aura Sevilla and Men Sinoeun

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Acknowledgements

The authors would like to thank those who contributed to the completion of this report. First and foremost, we would like to thank Laura Alfes, WIEGO Social Protection Director, for the invaluable supervision, support and tutelage during the course of the research study. We would also like to convey our sincerest gratitude to Mike Rogan, WIEGO Research Associate, for reviewing the survey questionnaire; Lundy Saint, who served as our data processing specialist; and Jonathan Belke, volunteer data scientist, for reviewing the statistical tables and data analysis. This report also benefitted greatly from critical review and insightful feedback from Florian Juergens-Grant and technical advice from Finn Koh of the International Labour Organization, Cambodia. Finally, this report will not be possible without the home-based workers who participated in the survey and the leaders of HomeNet Cambodia who made invaluable contributions to the design and implementation of the survey.

Publication date: January 2023

ISBN number: 978-92-95122-19-2

Please cite this publication as: Sevilla, Aura and Men Sinoeun. 2023. Home-Based Workers' Access to Social Protection: Lessons Learned from the IDPoor Programme in Cambodia. WIEGO Resource Document No. 30.

Published by Women in Informal Employment: Globalizing and Organizing (WIEGO) A Charitable Company Limited by Guarantee – Company N°. 6273538, Registered Charity N°. 1143510

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Manchester, M2 7EN
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Home-based workers¹ in Cambodia and their families face a wide range of occupational, environmental, and health risks that can push them into poverty. Home-based work in Cambodia includes various types of small-scale manufacturing activities such as weaving, making clothes, handicrafts, and wood and metalworking. Even before the COVID-19 pandemic, their work was often characterized by uncertainty and insecurity. Despite their economic contributions, they bear all the risks and costs of their work and receive limited social benefits and entitlements.

This joint WIEGO and HomeNet Cambodia study adds to the limited research on home-based workers and their access to social-protection programmes in Cambodia. In September 2021, a survey was conducted among 311 members of the Artisans' Association of Cambodia (AAC) in Phnom Penh, Siem Reap, and Battambang, with two main objectives: to provide an overview of the situation of home-based workers in Cambodia, and to analyze whether vulnerable home-based workers were able to access the IDPoor Programme – a government tool to register and identify poor households that is used as the basis for providing pro-poor social programmes including social assistance.

A key finding from the study is that the characteristics of the survey respondents all suggest a high level of vulnerability related to poverty and informality. Some 40 per cent of respondents rated themselves as either “extremely poor” or “poor”, while almost half rated themselves as “just getting along”. Using some of the proxy indicators of the IDPoor Questionnaire, many respondents were found to be vulnerable to poverty. Three-quarters of respondents suffered from a major financial issue/crisis such as losing their work, while a similar number took out loans to pay for health services, improve their livelihoods, and pay interest on existing debts.

Access to the IDPoor Programme is crucial to mitigate against the risks faced by home-based workers, yet many are left out. Since social insurance schemes in Cambodia do not extend to informal workers, many low-income and vulnerable home-based workers rely on government-based social assistance. However, despite the level of vulnerability found among respondents, the majority (70 per cent) of home-based workers surveyed were non-IDPoor household members.

This report shows that, while there are innovations in accessing IDPoor, further efforts can be made to broaden and enable inclusion of non-destitute but still vulnerable groups. Poverty among home-based workers may occur seasonally or during a period of crisis. Targeting the poorest among this group therefore requires a highly dynamic targeting system that captures their evolving realities. The national rollout of the On-Demand IDPoor (OD-IDPoor) is a step in the right direction as this enables year-round registration. However, OD-IDPoor should expand its categories to include near-poor or vulnerable households and design a different programme to prevent them from slipping into poverty. This neatly aligns with the vision of the National Social Protection Policy Framework and will be important in developing a shock-responsive social protection system.

Further implementation issues that were identified include the need to increase the awareness of the IDPoor Programme (including digital literacy), and enhance transparency and accountability. As the government moves toward the digitalization of the IDPoor Programme, active measures must be taken to ensure trust and integrity at the commune level. The function of the technologies and how certain score or classifications are determined should be transparent and well understood by intended beneficiaries. A crucial intervention will be promoting a more active role for grassroots organizations to include informal workers in the design, implementation, and monitoring of the OD-IDPoor Programme.

¹ Home-based workers produce goods or provide services from in or around their own home, including in a structure attached to their home (Bonnet, et al. 2021)

Acronyms

AAC	Artisans' Association of Cambodia
HEF	Health Equity Fund
HH	Household
HNSEA	HomeNet South-East Asia
MoP	Ministry of Planning
NSPF	National Social Protection Policy Framework
OD-IDPoor	On-Demand IDPoor
OECD	Organization for Economic Co-operation and Development
VRG	Village Representative Group

Note:

In October 12, 2022, the Kingdom of Cambodia Ministry of Planning launched the *New IDPoor Procedures and Expansion to At-Risk Households—The Foundation of Cambodia's Social Protection System*. The new procedure and implementation guidelines were not included in the analysis of this report.

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Introduction

Cambodia has made great strides in reducing poverty over recent decades, with it falling from nearly half the population in 2007 to just 10 per cent in 2016 (UNDP 2020). However, millions of Cambodians are living just above the poverty line and vulnerable to falling back into poverty. A high proportion of Cambodia's population, particularly those working in the informal economy, are vulnerable to financial shocks and domestic stresses, and are yet to benefit from a comprehensive social protection system.

To address this, the government approved the National Social Protection Policy Framework (NSPF) in 2017 outlining the development of: 1) social security for citizens in both the formal and informal sectors who have sufficient income; and 2) social assistance to citizens who live below and near the poverty line, with special attention to children and pregnant women, people with disabilities, and the elderly (Kingdom of Cambodia, 2017). Notably, the Framework does not cover working-age poor or the development of a national social protection floor.

The Framework's social assistance component focuses on those living below the poverty line and those close to the poverty line with high vulnerability to crisis. Furthermore, the Framework identifies establishing and updating a targeting system to identify eligible people to receive benefits from social assistance programmes (ibid.).

Since 2008, the government has developed and used an identification system for poor and extremely poor households. The Identification of Poor Households (IDPoor) Programme is a mandatory tool for identifying and registering poor households. Using a hybrid model to combine a proxy means test survey and a community-based selection process, it provides information on poor households to government and non-governmental agencies in order to help them target services and assistance to the poorest and most vulnerable households. The model relies on a scoring system that attributes to each surveyed household a poverty score that is used to classify it as non-poor, very poor (IDPoor 1), or poor (IDPoor 2).

To counter the impacts of COVID-19, Cambodia's government rolled out rapid cash transfers at scale. These included the "Cash Transfer Programme for Poor and Vulnerable Households during COVID-19" to poor households registered in the IDPoor database. In addition, the government fast-tracked the implementation of OD-IDPoor, enabling households to apply for IDPoor in between the 3-year census sweep.

According to a review undertaken by the Organization for Economic Co-operation and Development (OECD) in 2017, IDPoor faced several challenges identifying the poorest households. While it has come a long way in addressing a number of issues, additional efforts could deliver further improvements in the targeting efficiency (UNDP 2020). The COVID-19 pandemic also highlighted the need for a dynamic and up-to-date register of people needing long-term support and those exposed to livelihood-, health-, and/or climate-related shocks.

Taking the situation of home-based workers as an example, the COVID-19 pandemic devastated their livelihoods and left them with no income for months. A multi-city longitudinal study by WIEGO found that home-based workers were the hardest-hit

sector compared to domestic workers, street vendors/market traders, and waste pickers in the sample (WIEGO 2021). In mid-2021, the typical earnings of this group were only 2 per cent of pre-pandemic levels, reflecting the depth of devastation in this predominantly female sector (ibid.). However, many were unable to access social assistance because they were not considered the poorest or the most destitute.

This report is based on research conducted in Cambodia and provides an overview of the situation of home-based workers in the key cities of Phnom Penh, Siem Reap, and Battambang. It draws out the main lessons from the implementation of the IDPoor Programme according to the perspectives of this occupational group. The aims were to understand the relative vulnerability of home-based workers – IDPoor and non-IDPoor household members – using some of the proxy indicators from the IDPoor Survey, and to establish whether IDPoor is accessible and inclusive to vulnerable home-based workers. The research, undertaken in partnership with WIEGO, AAC, and HomeNet South-East Asia (HNSEA), utilized quantitative methods to gather and analyze data. From September to October 2021, 311 home-based worker members from AAC were surveyed using simple random sampling.

Methodology

HomeNet Cambodia and WIEGO undertook a survey of home-based workers in 3 key cities in Cambodia from September to October 2021. The survey reached 311 home-based worker members from AAC, 280 of whom are women. The survey's focus was on understanding the profile of home-based workers, applying indicators drawn from the IDPoor to measure their vulnerability, and assessing their experience in accessing IDPoor. The intention was to establish whether the IDPoor Programme is accessible and inclusive to vulnerable home-based workers.

The research findings will be used to develop HomeNet Cambodia's social protection advocacy strategy, which will engage with local authorities and other stakeholders to enable the inclusion of poor and vulnerable home-based workers in the IDPoor Programme.

Survey questionnaire

The survey questionnaire included modules on demographic profile; household characteristics such as assets, health/disability, income, and debt; and questions about respondents' experiences in accessing the IDPoor Programme. Questionnaire development drew on existing tools, including the WIEGO Informal Economy Monitoring Study (IEMS) (WIEGO, 2012) and questions used in the IDPoor Programme Survey (MoP, n.d-a) to identify vulnerability and eligibility.

Scope and limitations

The survey was carried out by home-based worker leaders in Phnom Penh, Siem Reap, and Battambang. Limited geographic coverage, a relatively small sample size, and the sampling method establish certain limitations of the present study. With only 3 sample locations, it does not provide a comprehensive review of the IDPoor Programme or statistically generalizable data. In addition, the relatively small sample size (311 respondents) indicates that some caution is needed when interpreting the results.

While some of the indicators used to measure the vulnerability of home-based workers came from the IDPoor Programme Survey, the process of obtaining and analyzing the data is not comparable to the selection process for the IDPoor Programme.

Table 1: Survey locations and number of respondents

Survey location	Number of respondents
Phnom Penh	102
Siem Reap	146
Battambang	63
Total	311

Figure 1: Map of Cambodia indicating survey locations



Figure 2: Aura Sevilla (WIEGO) conducted questionnaire training online



Figure 3: Lundy Saint (Ministry of Planning) shared an overview of the IDPoor procedure during questionnaire training



Figure 4: Home-based worker leaders conducted interviews in Siem Reap



The IDPoor Programme

The IDPoor Programme’s main objectives are “to reduce duplication of efforts and resources by different institutions and organizations in identifying their target groups for various poverty reduction interventions, and to ensure that assistance is provided to those households who most need it” (MoP, n.d-b).

IDPoor utilizes a hybrid targeting approach combining proxy means testing and community-based targeting. Table 2 offers a comparison of the two methodologies. It should be noted that methods targeting the poor are complex, especially in developing countries with large informal economies, given that incomes and assets cannot be easily assessed (Kidd and Wylde 2011). For example, Brown et al. (2018) in assessing the use of proxy means testing found high inclusion and exclusion error rates across nine African countries. There is also evidence linking community-based targeting to elite capture and nepotism. By combining the advantages of proxy means testing with those of community-based targeting, the hybrid approach aims to “ensure transparency and acceptance by involving the whole community in the targeting process, while reinforcing some consistent criteria and reducing the risk of bias through a more objective proxy means test” (BMZ 2017).

Table 2: Comparison of targeting methodologies

	Definition	Pros	Cons
Proxy means testing	Correlate easily quantifiable or observable “proxies” – such as assets (for example, ownership of a radio, type of roof material on the house) or behaviours (children attending school) – with consumption, allowing interviewers to calculate a score and then apply an established eligibility cut-off line	Relatively efficient yet locally adaptable way to identify poor households (Lavallée et al. 2010)	Inclusion and exclusion errors from this method can still be significant (AusAID 2011) Fail to account for the multidimensional character of poverty and ignore communities’ perceptions of poverty (Savadogo et al. 2015)
Community-based targeting	Involves community members themselves gathering to rank or identify those households that they defined as poor, usually with some discussion amongst the group at the outset on the definition or criteria associated with poverty (Alatas et al. 2012)	Can be more accurate than proxy means tests in identifying the very poor Yields greater satisfaction in the community, which often has positive repercussions such as fewer disagreements or protests when programmes are implemented (Yusuf 2010; Alatas et al. 2012)	The risk of inclusion error – that relatively rich households will be included due to corruption Elite capture (higher status community members influencing the distribution of benefits), or because the community does not have the full picture of some households’ real assets (Handa et al. 2012).
Hybrid approach	Combines the advantages of a proxy means test with those of community-based targeting		

Source: Federal Ministry for Economic Cooperation and Development (BMZ) (2017)

Background and key milestones

IDPoor's origin is linked to the inconsistent and limited effectiveness of the Health Equity Fund (HEF) in protecting poor patients, and the fragmented social assistance landscape in Cambodia with different programmes operating across sectors, each implementing its own poverty targeting mechanism. As a response, in 2005 Cambodia's Ministry of Planning (MoP) together with development partners began formulating a national, cross-sectoral poverty-identification mechanism (Kaba et al. 2018).

In 2011, by virtue of Sub-Decree 291 on Identification of Poor Households (Kingdom of Cambodia 2011), all services for poor people were required to use IDPoor to target beneficiaries. In 2014, the identification process was extended to urban areas using an adapted procedure and questionnaire (MoP n.d-b).

Each year, on a rolling basis, approximately one-third of villages conduct the extensive community-led process, ensuring all urban and rural areas are covered during a 3-year period. In 2017, the MoP had already begun to develop OD-IDPoor to allow households to apply for IDPoor between rounds. Due to the COVID-19 pandemic, the government accelerated the roll-out plan that had been scheduled for 2020–2022, enabling an additional 191,000 households to be eligible for the emergency cash transfer (Pagnathun et al. 2021: 40).

Table 3: Key milestones

Year	Key milestones
2006	IDPoor established
2011	Sub-Decree 291 on Identification of Poor Households approved All services for poor people are required to use IDPoor to target beneficiaries
2014	IDPoor extended to urban areas The identification process was extended to urban areas using an adapted procedure and questionnaire
2017	OD-ID Poor pilot The MoP had already begun to develop OD-IDPoor to allow households to apply for IDPoor between rounds
2020	OD-IDPoor fast-tracked and scaled up In August 2020, the government announced that IDPoor would be fully on-demand and eliminated the 3-yearly census sweeps
2022	Launch of the New IDPoor Procedures and Expansion to At-Risk Households In October 2022, launched the new (IDPoor) mechanism "to expand access to social benefits to more vulnerable households across the country and increase the system's shock responsiveness" (Kingdom of Cambodia: MoP, 2022) ²

² The newly launched procedures and guidelines were not included in the analysis of this report.

Benefits of being an IDPoor household member

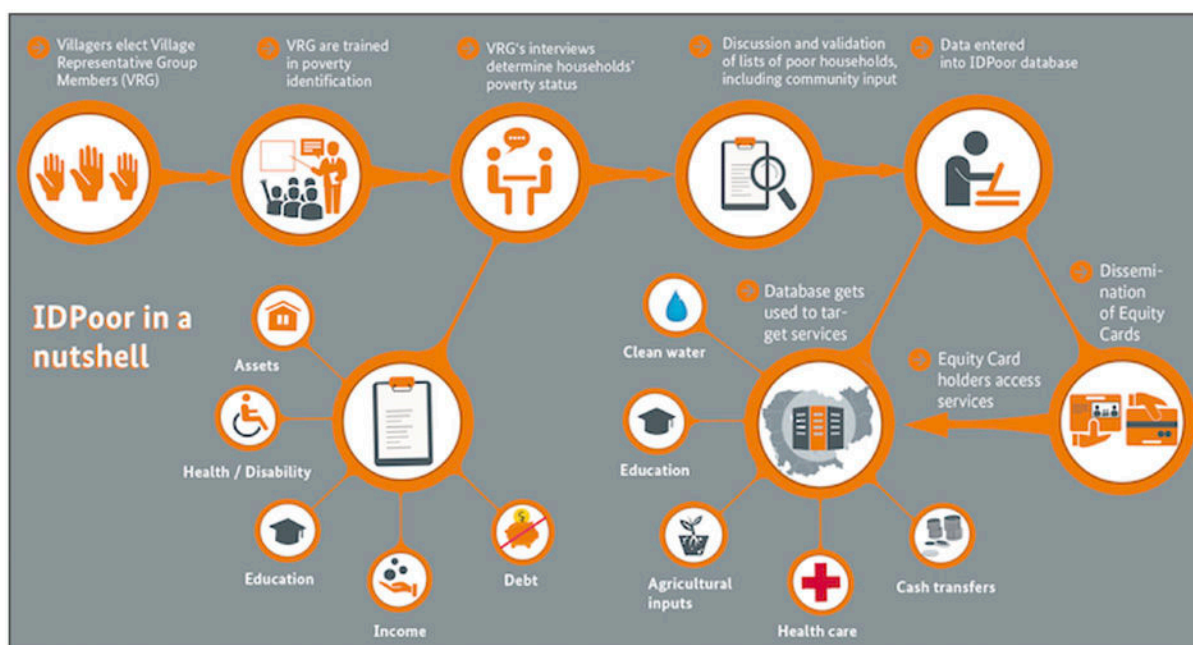
With a valid IDPoor Equity Card, households³ are entitled to several benefits (UNDP 2022):

- Free health-care services, including a travel allowance to and from hospital, and free meals during treatment at a public health facility.
- Reduction or waiving of some administrative fees by municipal or district authorities.
- School scholarships and food programmes for students.
- Legal protection.
- Discounts or free-of-charge installation of clean water and electricity.
- Social land concessions and agricultural-related assistance.
- Cash transfer benefits for pregnant women, and children under 2 years of age.
- Cash transfer during the COVID-19 pandemic.
- Other important social assistance benefits.

IDPoor registration and selection process

The initial IDPoor registration process was implemented in annual rounds, covering one-third of the country every year, making it a 3-yearly census sweep. The survey was conducted by the Village Representative Group (VRG) elected in each village, with support and training from the Commune Council. Figure 5 depicts the core steps in identifying poor households in rural and urban areas.

Figure 5: IDPoor process until 2021



Source: Kingdom of Cambodia MoP (n.d.-b): IDPoor Process

³ A household is defined as “members who share meals from the same cooking pot or share the expenses for food” (UNDP 2022).

An issue with the 3-yearly census sweeps was that they left out many individuals and groups that fell in and out of poverty between sweeps. The more immediate and responsive OD-IDPoor approach was introduced to supplement the 3-yearly census sweeps but, prompted by the COVID-19 pandemic, the government made IDPoor fully on demand and eliminated census sweeps.

On-Demand ID Poor: From census sweep to dynamic targeting

In 2017–18, the MoP piloted an on-demand version of IDPoor in 19 communes to “establish a complementary mechanism to identify households that fall into poverty between the three-yearly rounds” (Birdsall 2022). The on-demand approach enabled IDPoor enrolment when in need, instead of waiting for the next round.

According to Birdsall (2022), accuracy, objectivity, speed, and data quality were enhanced owing to the digitalization of the process. Using the IDPoor app installed on tablets, Commune Councils, instead of VRGs, administer IDPoor questionnaires and the captured data goes directly into the national database. Scoring subjectivity has been eliminated as scores are calculated automatically without the interviewers seeing them (previously interviewers had to make judgements and manually compute the poverty scores). New IDPoor functionalities also allow household data to be continuously updated, enabling Commune Councils to directly upload changes to the national IDPoor database at any time and remove households whose socio-economic situation has improved. Based on a pilot study conducted in 2021, the Department of Identification of Poor Households under the Ministry of Planning reported that IDPoor had an 86 per cent accuracy rate (ibid).

However, the benefits of speed and greater inclusivity of the on-demand approach is not without trade-offs. The original intention of the hybrid approach of community participation has been “somewhat diminished” since implementation now lies with the Commune Councils instead of the elected VRGs (ibid.). For instance, there are claims that the registration process is being undermined by nepotism. In fact, from June to December 2020, 14,400 IDPoor cards were cancelled, often because the households consisted of relatives of Commune Council members managing the registration process (UN ESCAP 2022). Another limitation is the lower coverage of the on-demand registration process compared to house-to-house surveys, with many vulnerable and marginalized groups lacking information about how to register and facing stigma which prevents them from coming forward (Birdsall 2022).

Table 4 compares the key distinguishing features as well as the relative advantages and disadvantages of the two registration processes, which are important to consider in the adoption of OD-IDPoor.

Table 4: Comparing On-Demand and Census-Sweep approaches

	"Pure" On-Demand Approaches	Administrator Driven Approaches (e.g. Census Sweep)
Key distinguishing features	<ul style="list-style-type: none"> • Initiative: People > State • People: Specific individuals, families, households • Timetable: Applicant's own timing – anyone can apply when in need 	<ul style="list-style-type: none"> • Initiative: State > People • People: Groups of people registered <i>en masse</i> • Timetable: Administrative factors such as capacity and financing; registration conducted every 2–8 years, depending on choices
Relative advantages	<ul style="list-style-type: none"> • Dynamic, ongoing entry and easy to update (including changes linked to lifecycle events) • More democratic nationally – everyone has the right to be interviewed at any time • Lower total costs due to self-selection of non-eligible out of registry process (interviewing fewer non-eligible households) • Permanent process helps build and maintain administrative and logistical structures 	<ul style="list-style-type: none"> • Better chance of reaching the poorest and other vulnerable groups, who are less informed and more stigmatized (less likely to apply) • Lower marginal registry cost (per household interviewed) due to economies of scale with travel • If conducted often enough, there is a high chance of capturing positive changes to household conditions (less likely to be reported) • House checks conducted during survey process (no misreporting assets, collection of geodata, etc.)
Relative disadvantages	<ul style="list-style-type: none"> • Poor may not participate because they lack information, fear stigma, and face other barriers to access (illiteracy, distance, disability, etc.) • Costs can be higher if social workers must verify information provided (via home visits) • Can be a slow process involving long queues and bureaucracy • Requires a large network of trained staff at local level • Unlikely for people to report positive changes to household conditions • Does not allow for easy collection of household's geodata 	<ul style="list-style-type: none"> • Periodic surveys can lead to static/inflexible registries – especially if target population is linked to life-course events (pregnancy, children, 0–3, old-age, etc.) • Members of eligible households may not be home or respond when the survey is conducted • Costly in areas with many non-eligible households or where households are very dispersed • Re-registration very costly and often postponed beyond recommended 2 years

Source: Barca and Herbar (2020)

Criteria and categories

The proxy means test uses a set of proxies, with each one given a weighting based on its estimated impact on household expenditure (see Box 1 on page 13). The interviewers, in this case the VRGs, check if households have these proxies and a score is calculated using the agreed weighting. The interviewers then review the scores and categorize all households into poverty levels (Table 5).

Table 5: Score-based classification of households

Category	Score
Level 1 (very poor or extremely poor)	59–68
Level 2 (poor)	45–58
Other (non-poor)	0–44

Source: Adapted from Kingdom of Cambodia: MoP (2017)

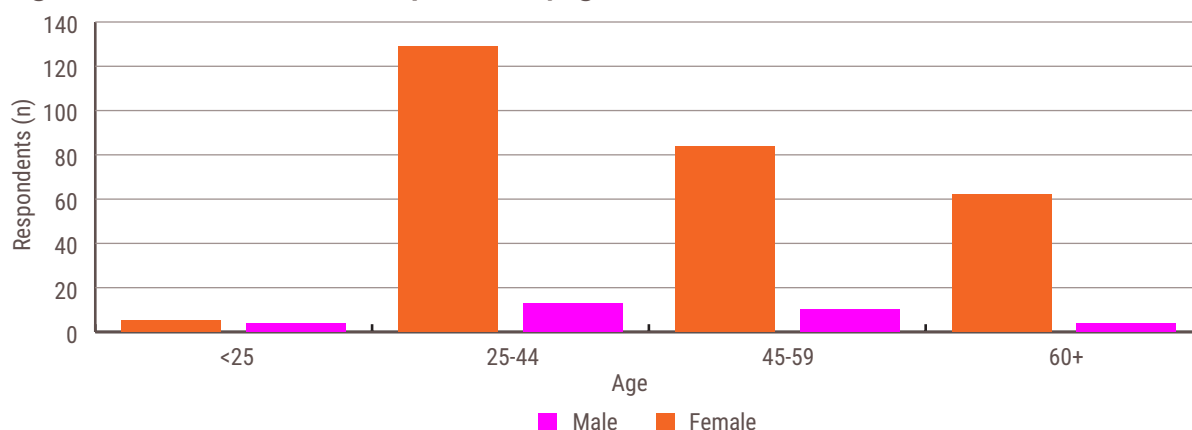
The interviewer then considers any special circumstances (Box 1) that may make the household vulnerable and whether there are grounds to change its IDPoor status. However, IDPoor lacks a category for vulnerable (non-destitute poor) people, thereby excluding those who may not be destitute but are vulnerable enough to still be in a database that provides access to social protection. Inclusion of the destitute and the vulnerable, such as informal workers, in the social protection system could improve awareness and data on their needs. This could be used for all kinds of programmes and support directed to vulnerable people (which can be different from those for the poor), and create the foundation for day-to-day and shock-responsive social protection, and inclusive economic growth.

Baseline characteristics of respondents

Respondent profile

The majority of respondents are women (280 out of 311) and 129 of them are young adults (age range 25–44 years) and 84 are middle-aged adults (45–59 years)(Figure 6). 186 are married and living together, and 76 are widowed. The majority of home-based workers surveyed have low education levels, with 114 having completed some primary education and 100 of respondents not having attended school at all. (Figure 7).

Figure 6: Home-based worker respondents by age and sex



Box 1: IDPoor Questionnaire, Proxy Indicators, and Special Circumstances

The questionnaire consists of four sections: A) Basic information about who participated in the interview; B) A demographic section to identify all household members; C) Proxy indicators, with scoring; and D) Additional household information for consideration by the VRG, which is unscored. In section D interviewers indicate if a household has particular vulnerabilities (e.g. members with disabilities or chronic illness).

Proxy indicators

Section C includes questions on the following proxy indicators:

- House: owned or rented; materials used for the roof and walls; overall condition; and size in square metres
- Sources of income: including farming, fishing, other labour; the kinds of animals owned; and the number of people in the household who earn and do not earn income
- Assets: whether the household owns a radio or television or generator, and modes of transportation (bicycle, motorbike, ox cart, etc.)
- Food: whether the household has borrowed rice in the past 12 months

VRGs may decide to change the poverty category if the household experienced the following in the past 12 months:

Unexpected accidents or serious crises

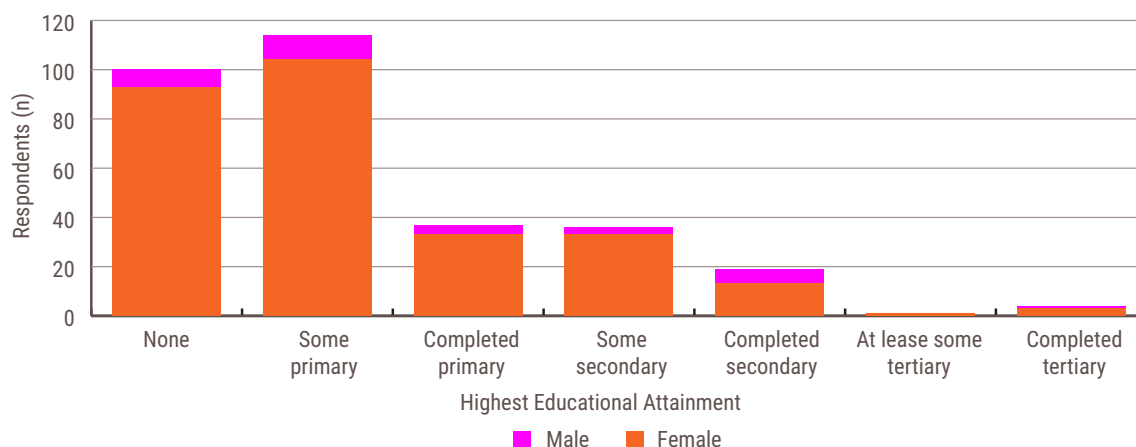
- Household members fell seriously sick/chronically sick/died
- Household members lost their job or their income-generating activities, or have undergone a huge decrease in their income
- Drought
- Flood

Special circumstances

- Within the last 3 years, this household has already been identified as a poor or vulnerable household
- The household does not have a home or is living on the street or in institutional care
- The household has changed address to an urban area within the last 12 months
- All household members are elderly people (60 years and older)
- All household members are children (18 years old and younger)
- The head of the household or his/her spouse is a person with disability
- The head of the household is a divorced person or a widow/er who needs to raise at least 3 children under 12 years of age
- The head of the household is a divorced person or a widow/er who needs to take care of a person older than 60
- There are orphans or vulnerable children without parental support living in the household
- There are people living with HIV or tuberculosis or other chronic diseases in this household
- There is serious violence in the household
- There are household members who are addicted to drugs or alcohol
- Households with a head of household who is currently on remand or serving a prison term
- Households who have female member(s) working for night-time entertainment services

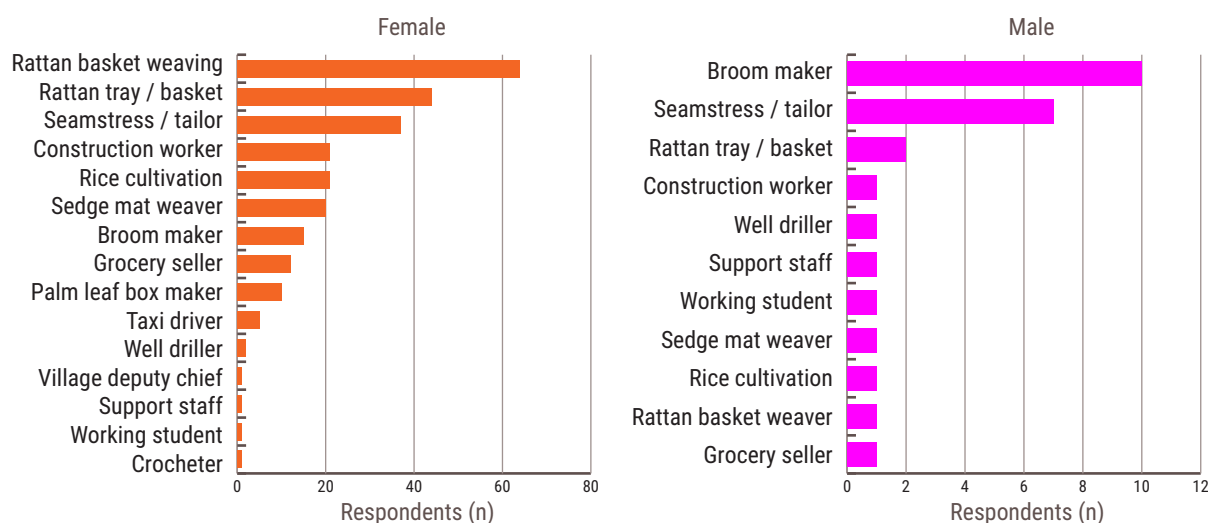
Source: BMZ (2017); Kingdom of Cambodia: MoP (2017)

Figure 7: Educational attainment by sex



The majority of respondents are engaged in primary occupations that are seasonal, with low and irregular income (Figure 8). Most are basket tray weavers (21 per cent), followed by rattan tray/basket makers (15 per cent) and seamstress/tailor (12 per cent). A total of 28 respondents did not indicate their primary occupation. Self-employed home-based workers assume all the risks of being independent contractors. They buy their own raw materials, supplies and equipment, and pay utility and transport costs, and may have unpaid family members working with them.

Figure 8: Primary occupation by sex



Household profile

Respondents' household characteristics such as assets, health/disability, income, and debt were assessed using the key indicators from the IDPoor Survey.

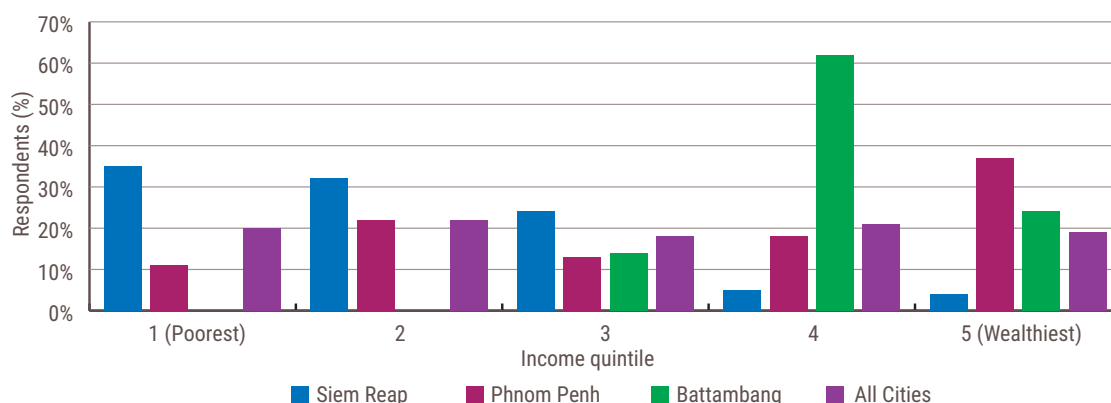
Household Income

Household income was derived by asking respondents: "How much is your household income in the last 12 months?". Some found it difficult to accurately recall their income in the past year, while others reported their monthly household income, therefore caution should be taken in interpreting the results.

Respondents were asked about their household income from the period of September 2020 to October 2021. Strict lockdowns were still being imposed during this period, and some respondents recalled not having had any income for some months. Overall, respondents only reported an median annual household income of KHR1,390,908 (USD339). Phnom Penh Battambang reported the highest median annual household income of approximately KHR5.745 million (USD1,398), followed by Phnom Penh at KHR3.62 million (USD881) while Siem Reap has the lowest average household income with only KHR1 million (USD243).⁴

Annual household incomes were ranked and divided into five equal groups (quintiles), with 1 indicating the poorest 20 per cent and 5 the wealthiest 20 per cent (Figure 9). If someone is in the bottom wealth quintile, they are among the poorest people in the sample. If they are in the top quintile, they are among the wealthiest.⁵ Sixty-five per cent of respondents from Siem Reap are in the two bottom quintiles and only 5 per cent are in the top quintile, which means that a relatively large number of respondents in Siem Reap are poor. The opposite is observed in Phnom Penh and Battambang where the largest group is found in the wealthiest quintile. Battambang is relatively the wealthiest as eighty-six (86) per cent of respondents are in the top 2 highest quintiles vs 55 per cent in Phnom Penh and 9 per cent in Siem Reap.

Figure 9: Distribution of household income by quintile and city



Self-assessed economic wellbeing

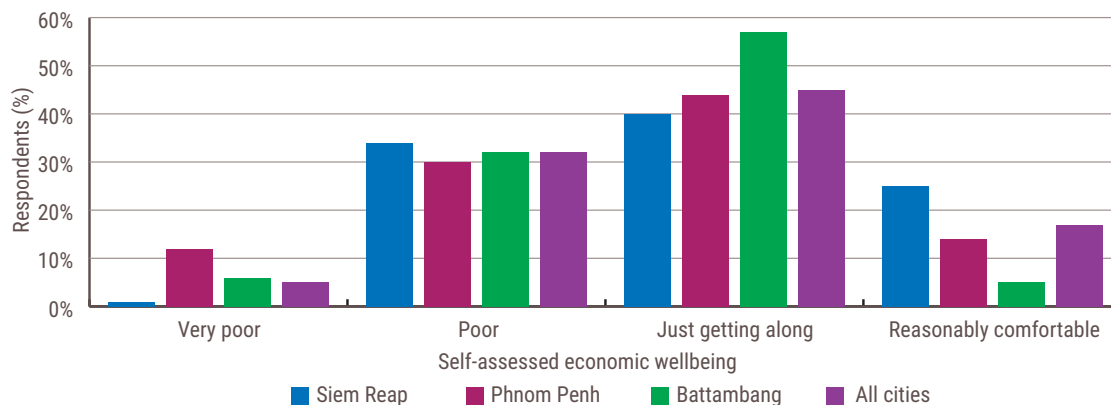
Respondents were asked to rate their economic wellbeing from “very poor” to “wealthy”. None of the respondents assessed themselves as “very comfortable” or “wealthy” which is also supported by the low median household income. Almost half of the respondents (45 per cent) reported that their household was “just getting along” while one-third reported they were “poor”, and 5 per cent considered themselves “very poor” (Figure 10). Siem Reap had the highest percentage of respondents reporting they are reasonably comfortable despite having the lowest median household income and most

⁴ KHR–USD currency exchange rate on August 17, 2022: USD1= KHR 4107.17 (<https://www.xe.com/>)

⁵ This index is a measure of relative rather than absolute wealth, so this tool does not tell the proportion of respondents that live below specific absolute poverty lines. It should be noted that people in the middle or second highest quintile may still be poor in absolute terms, even though they are wealthier than most of the respondents. See more about the Equity Tool at <https://www.equitytool.org/>

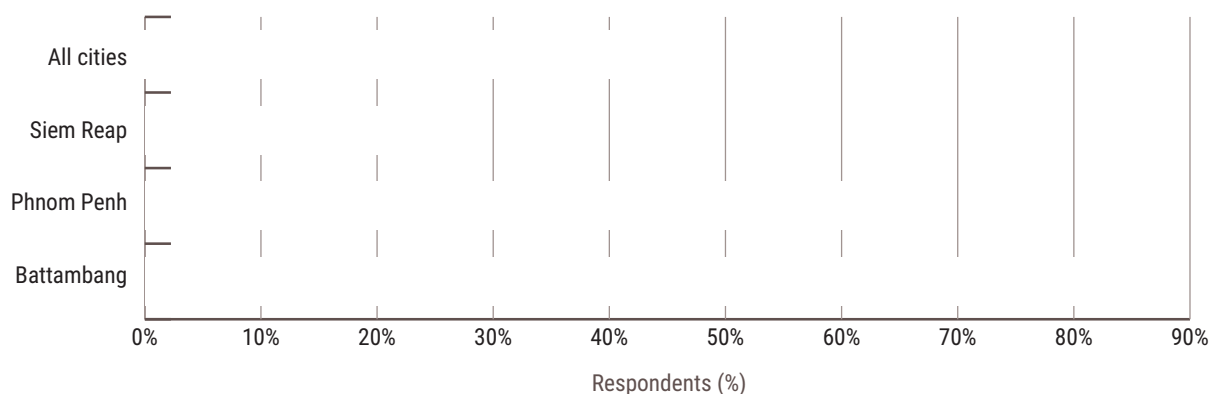
of its respondents are relatively the poorest. On the other hand, despite being relatively the wealthiest in terms of household income, Battambang had the least percentage of respondents reporting that they were “reasonably comfortable”. This suggests that perception of poverty among respondents is not based on household income alone.

Figure 10: Self-assessed economic wellbeing by city



Almost half (48 per cent) of the respondents reported their household had been identified as poor or vulnerable in the last 3 years (Figure 11).

Figure 11: Respondents’ households identified as poor or vulnerable in the last 3 years



Health and disability

Forty-two (42) per cent of respondents reported a family member with a chronic disease, injury and/or disability, with the percentage highest in Battambang (67 per cent). High blood pressure and diabetes affects 48 per cent and 24 per cent of the respondents’ households with a chronic disease, respectively. (Figure 12). Only 11 respondents reported having a family member with a disability based on the Washington Group on Disability Statistics’ question sets⁶ (Figure 13). Twenty eight (28) respondents reported “some difficulty” particularly on seeing and walking or climbing steps.

⁶ The Washington Group on Disability Statistics recommends that persons with disabilities be defined as those who experience a lot of difficulty or cannot operate at all in at least one of the six functional domains (seeing, hearing, walking, cognition, self-care, and communication).

Figure 12: Kind of illness or injury the family member had in the past 12 months

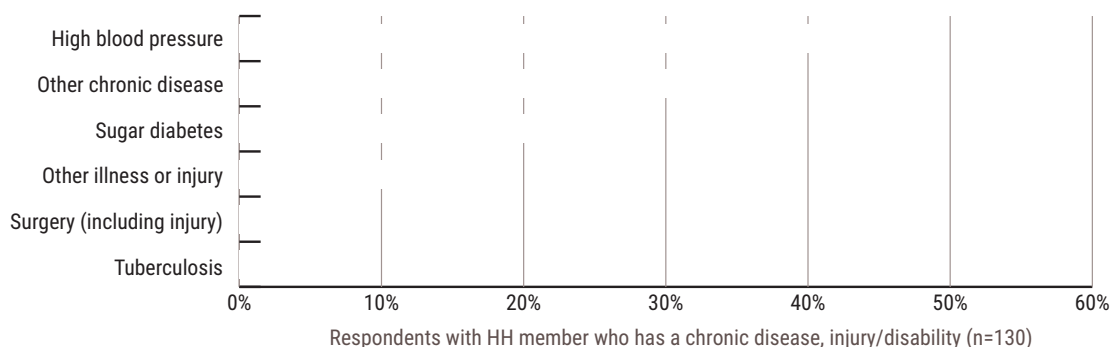
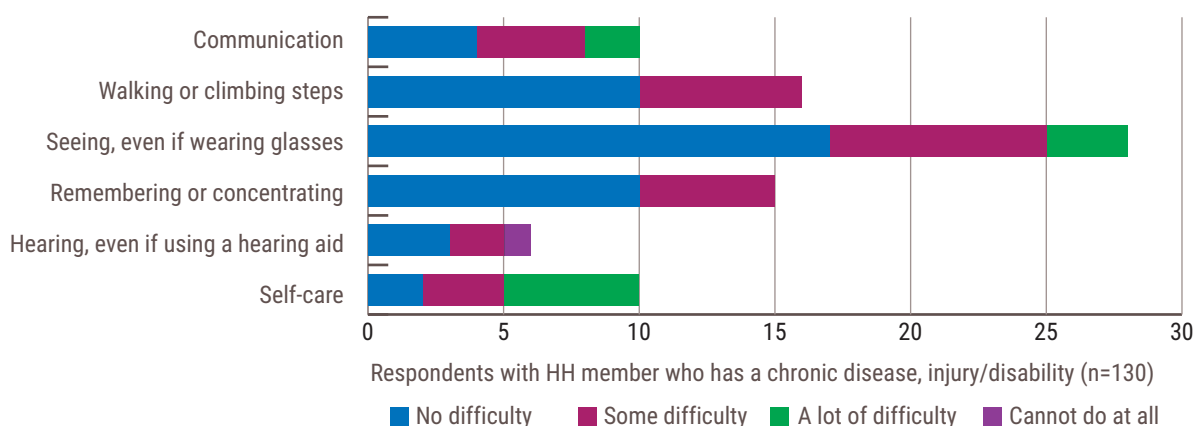


Figure 13: Number of respondents and the level of difficulty in functional domains



Housing condition and assets

Housing conditions are important to home-based workers as their homes double as their workplaces. However, results from the survey show many home-based workers live in sub-standard housing. While most respondents (80 per cent) have a house/room owned by their household, most of the building materials are generally used for low-cost housing. The majority of respondents reported that their roof material is galvanized iron/aluminium/metal sheets (70 per cent). Some 36 per cent reported that their wall material is wood/plywood, while 42 per cent reported that their floor material is wood/bamboo planks (Figure 14). Many respondents do not have access to potable drinking water. The main source of drinking water was reported as tubed/piped well or borehole (44 per cent), followed by public tap (29 per cent), and piped in dwelling or on premises (19 per cent) (Figure 15). In Siem Reap, very few (12 per cent) respondents have access to piped water in their dwellings and the majority (84 per cent) obtain water via a tubed/piped well or borehole. The majority (83 per cent) of respondents have their own hygienic toilet (Figure 16).

Figure 14: Housing materials used by the respondents' households by type and city (percentage)

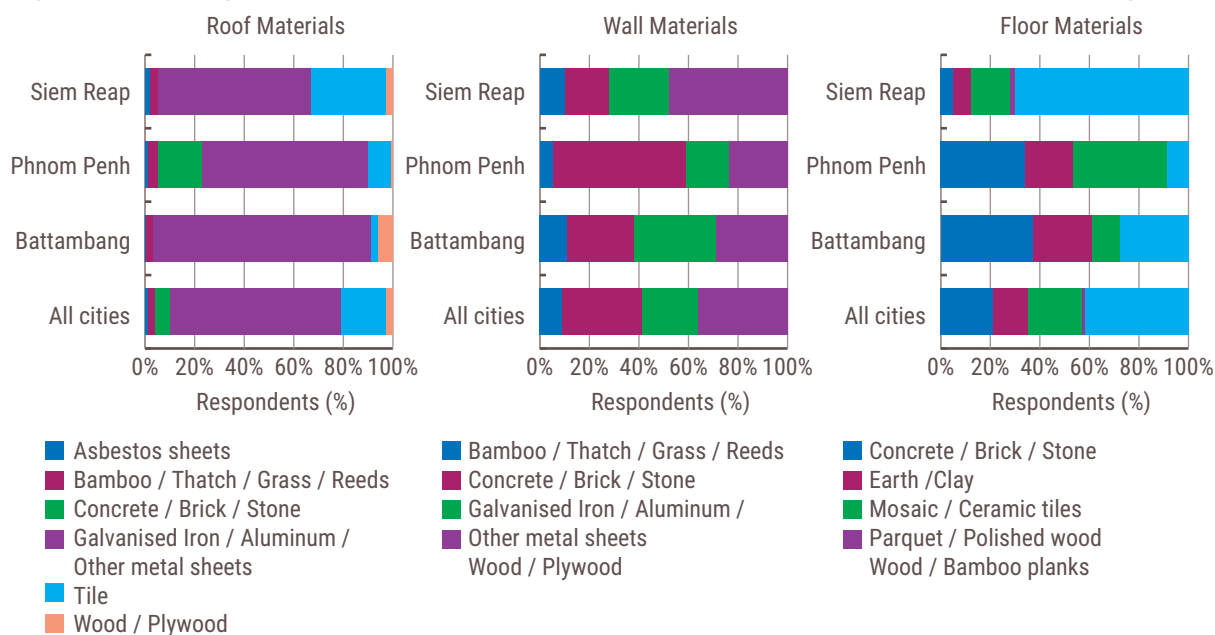


Figure 15: Primary source of drinking water of the respondent's household by type and city (percentage)

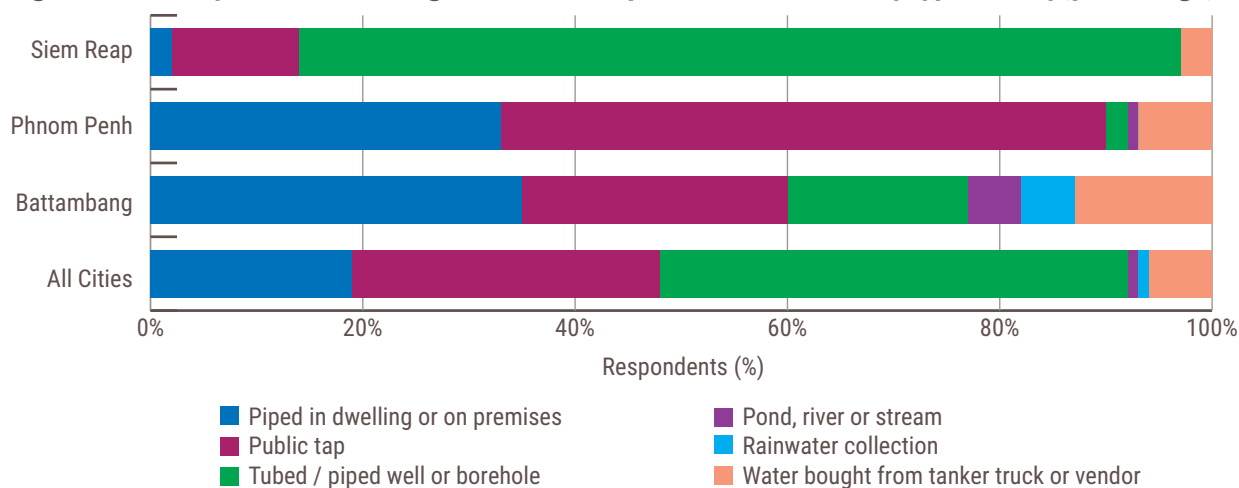
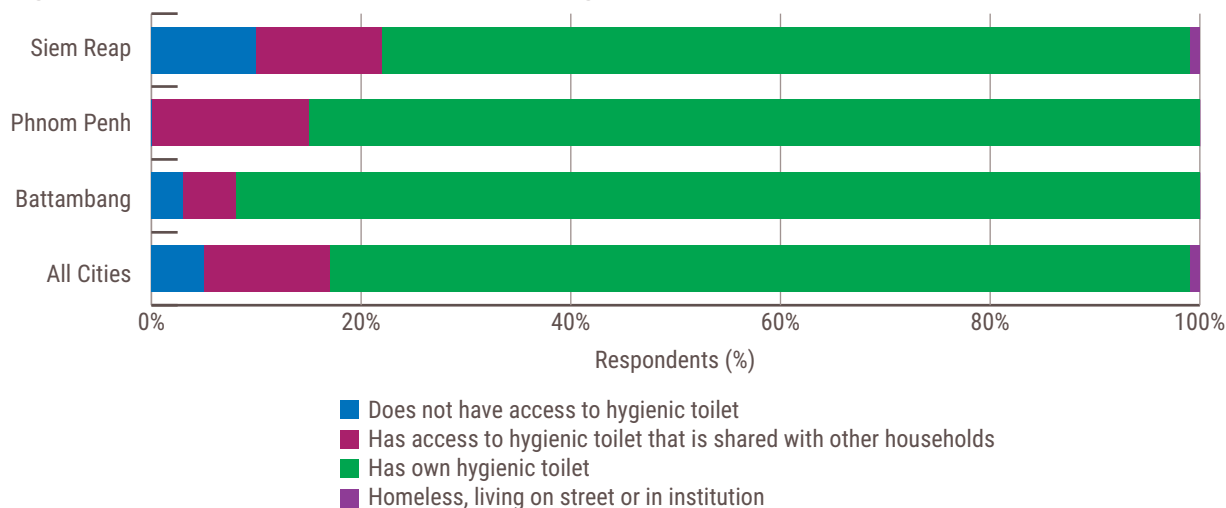
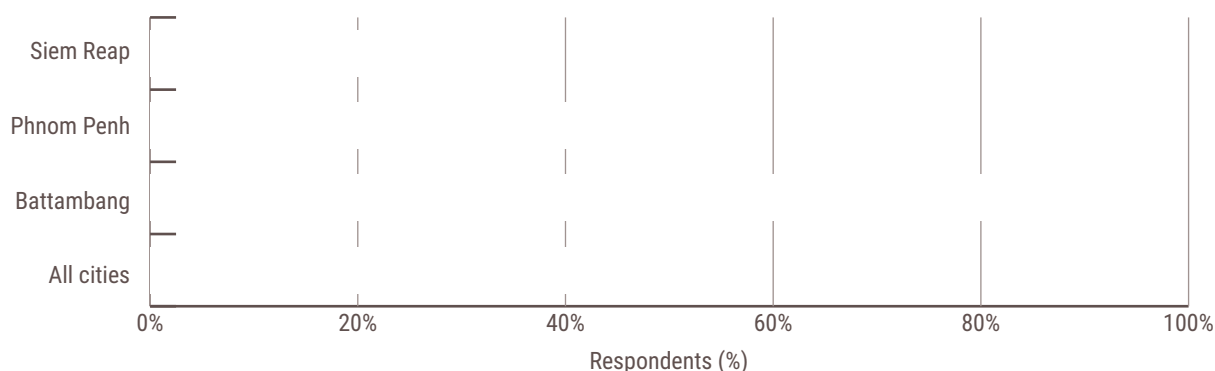


Figure 16: Respondents' household access to hygienic toilet by city



Assets such as a means of transport (e.g. a motorcycle) are important in running a business. Slightly over half of the respondents (53 per cent) own a mode of transportation including motorized and non-motorized vehicles (Figure 17).

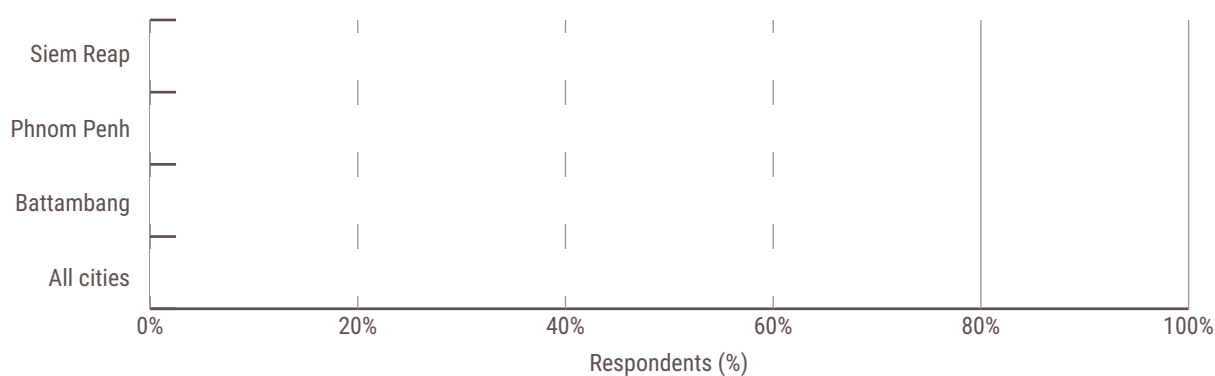
Figure 17: Percentage of respondent households that own any mode of transportation by city



Debts/loans

Almost three-quarters of all respondents have an outstanding debt/loan, with the highest percentage of respondents in Phnom Penh (77.5 per cent) (Figure 21). The majority (67.4 per cent) obtained their loans from banks or microfinance institutions (observed in all cities), followed by relatives (17.9 per cent) and moneylenders⁷ (7.1 per cent) (Figure 19). Loans are mainly used for paying for health services (38 per cent), improving livelihoods (37 per cent), and paying interest or outstanding debt (32 per cent) (Figure 20).

Figure 18: Percentage of respondents reporting their households have any outstanding debts/loans by city



⁷ Moneylenders are private individuals who give short-term loans and usually have higher interest rates than private institutions

Figure 19: Loan sources, by city

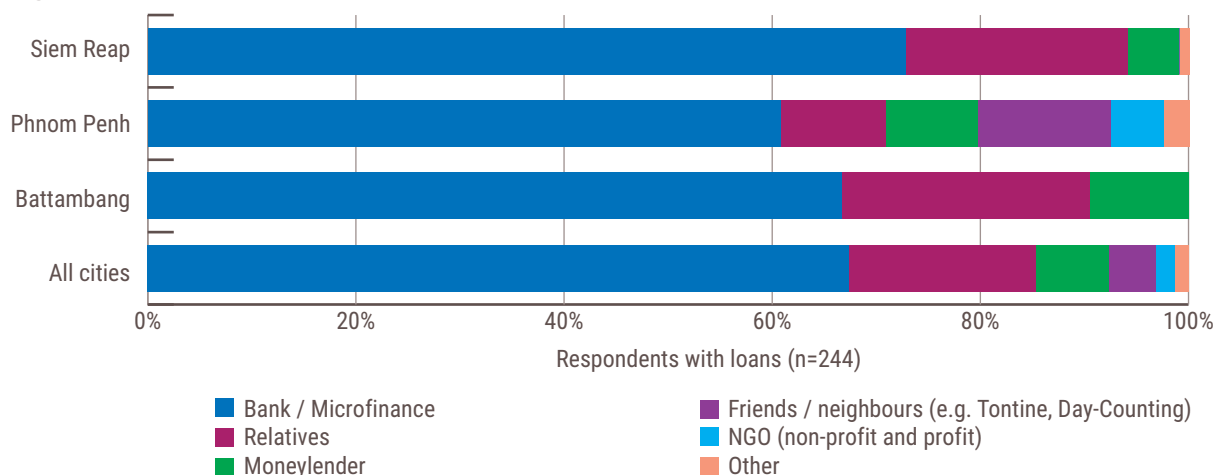
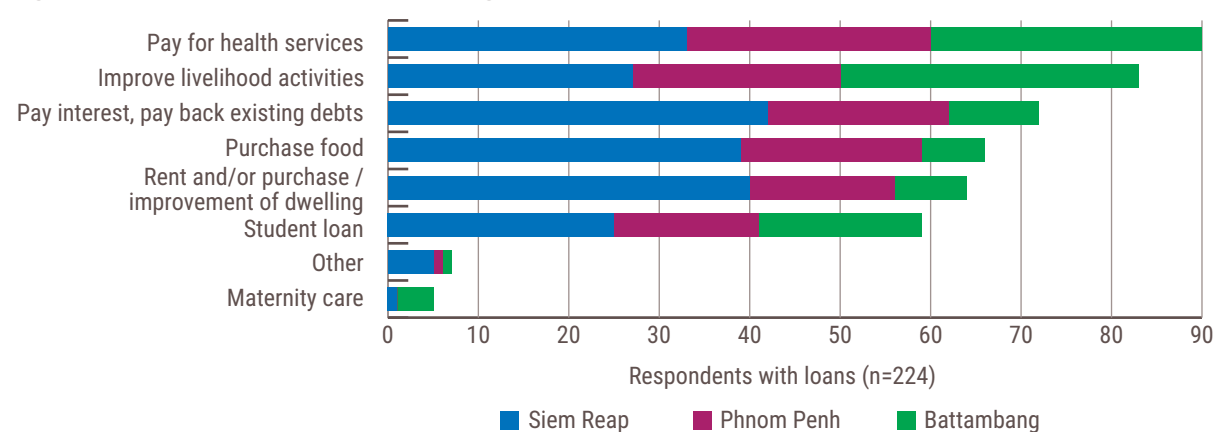


Figure 20: Primary reasons for obtaining loans, by city



Note: Respondents could report more than one reason

Special circumstances (crises)

Three-quarters of all respondents reported a major problem or crisis that caused their households to lose income, have a shortage of food, sell assets, or borrow money from September 2020 to October 2021. The highest incidence was in Siem Reap (79 per cent) (Figure 21). When asked about the crisis, the majority reported a household member had lost their source of income (79 per cent), followed by drought (18 per cent) (Figure 22).

Figure 21: Respondents experiencing a household crisis in the past 12 months (Sept 2020-Oct 2021)

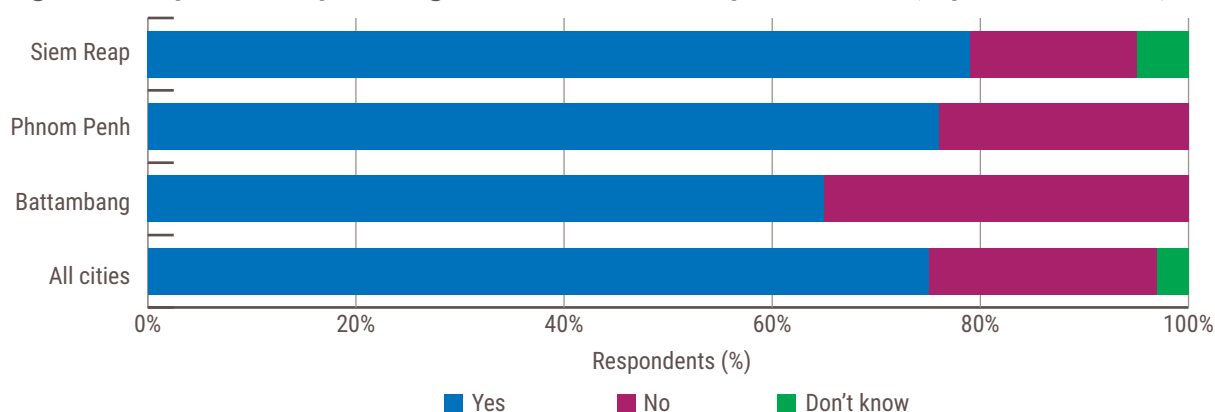
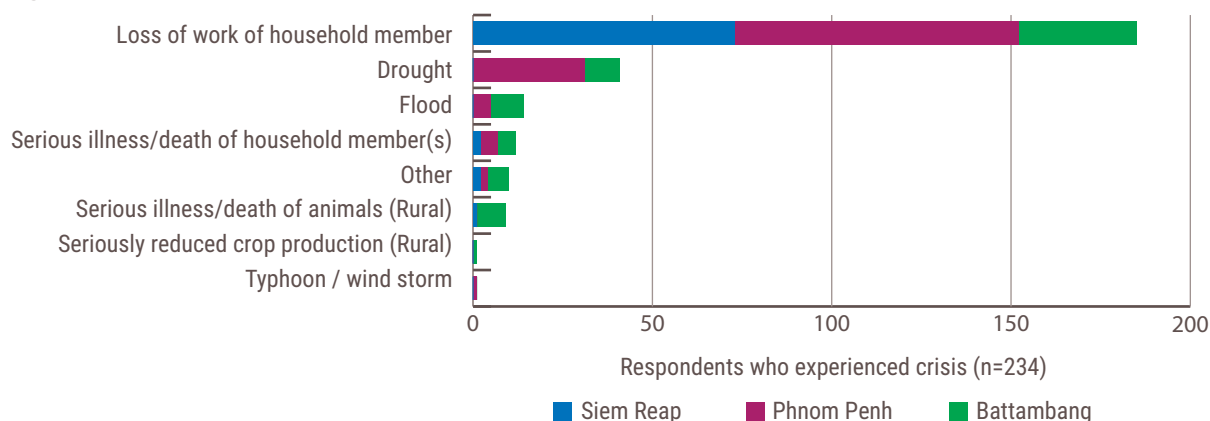
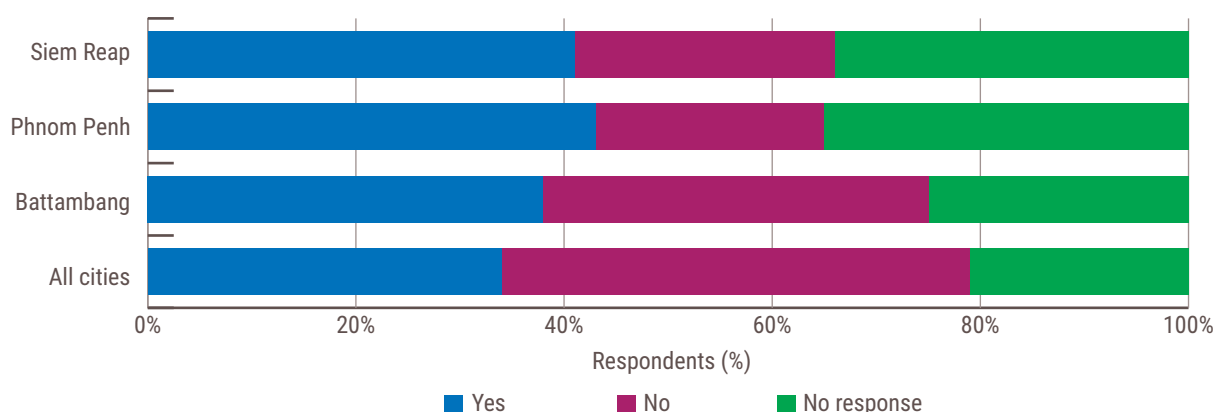


Figure 22: Type of household crisis or major problem experienced from Oct 2020-Sept 2021, by city



Note: Respondents could report more than one major problem/crisis

Figure 23: Respondents with adult household members foregoing income to provide care, by city



Some 37 per cent of respondents reported they have an adult household member unable to earn income because they take care of someone who is seriously/chronically ill or severely disabled. The highest incidence of this is in Siem Reap (45 per cent) (Figure 23).

Who are IDPoor household members?

Of the 311 respondents only 32 per cent are IDPoor household members. Battambang has the highest percentage of respondents who are ID Poor members (57 per cent) followed by Phnom Penh (21 per cent) and Siem Reap (21 per cent). IDPoor respondents rated their households as “very poor” (9 per cent) and “poor” (41 per cent) (Figure 24). Almost half reported they were “just getting along” and less than 10 per cent considered themselves “reasonably comfortable”. It is noteworthy that only slightly more recipients were “just getting along” than “very poor”. This could mean that the relatively better-off are incorrectly included in IDPoor, or they are just able to get along because they have an IDPoor Equity Card. There was no observed gender difference in IDPoor household members as the proportion of women and men is similar (31.8 per cent and 32.3 per cent respectively) (Figure 25). However, coverage tends to increase by age. Almost half of those in the aged 60 and older are IDPoor household members compared to none aged 25 or younger.

Figure 24: Respondents who are IDPoor household members based on their self-rated economic status (%)

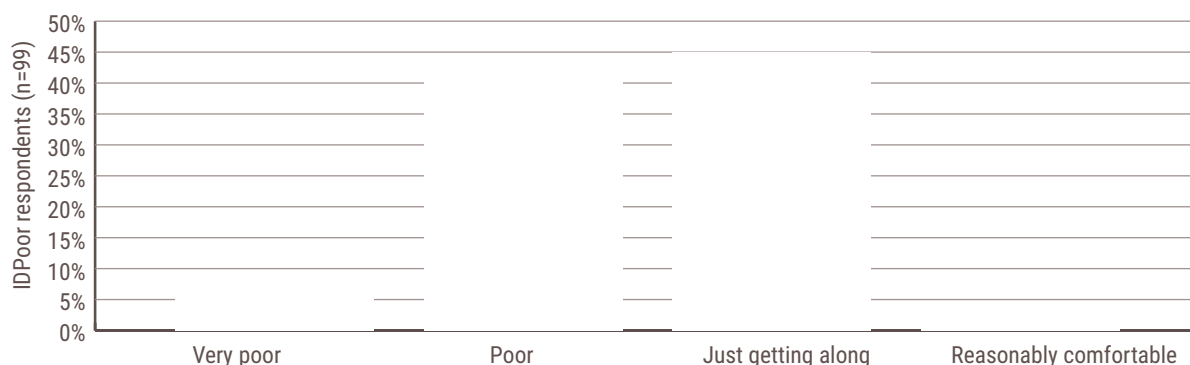
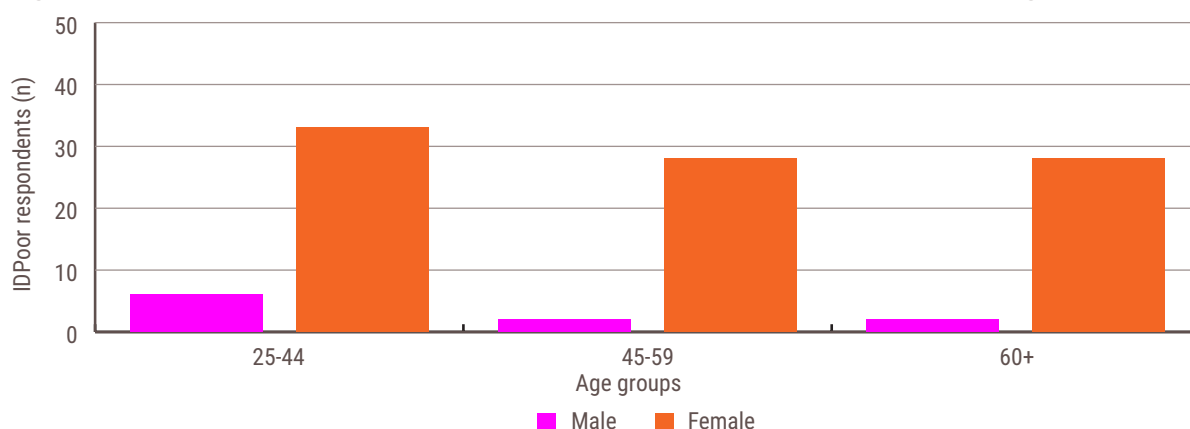
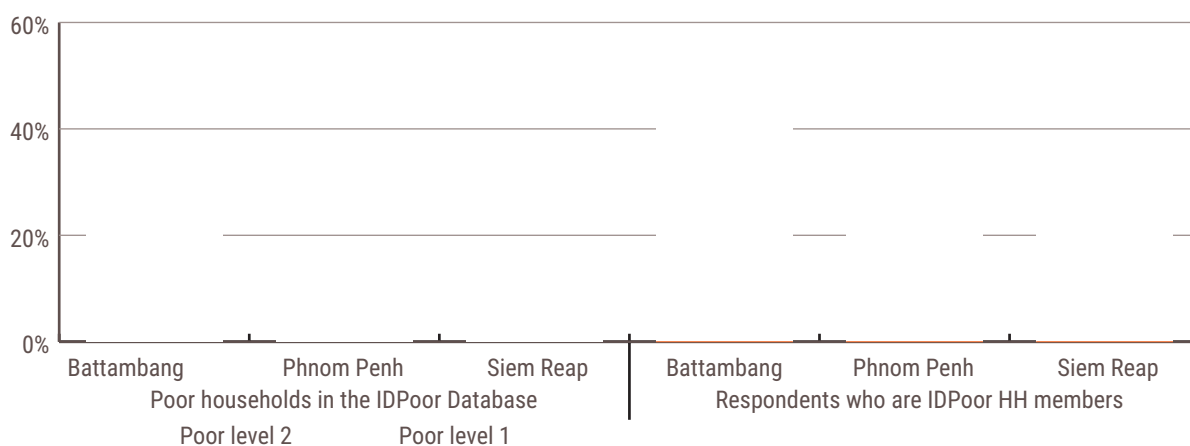


Figure 25: Number of respondents who are IDPoor household members, by sex and age



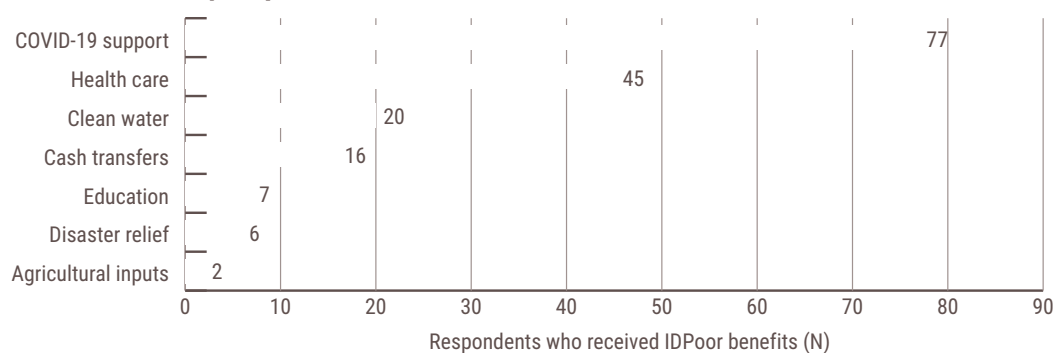
Battambang has the highest proportion of respondents who are IDPoor household members at slightly more than half, followed by one-third of respondents in Phnom Penh. Siem Reap has the lowest with only one-fifth registered. Comparing the results with the data from the *IDPoor Atlas Database* (Kingdom of Cambodia Ministry of Planning n.d.-c), Battambang has the highest number of poor households registered in the system. Notably, Siem Reap has a higher number of households registered than Phnom Penh, but there were fewer respondents who are IDPoor household members in Siem Reap than in Phnom Penh (Figure 26).

Figure 26: Actual percentage of poor households in the IDPoor database compared to respondent households who are IDPoor household members



Almost all the respondents who are IDPoor household members (95 out of 99) reported receiving associated benefits. When asked about these benefits, 74 (75 per cent) reported they had received COVID-19 support and health care (Figure 27). Emergency cash support and health care were important in mitigating the economic and health risks of the pandemic. Reasons why not all IDPoor respondents received emergency cash support were not identified by the survey and require further investigation. The majority of recipients (58 per cent) reported they did not receive help in registering for IDPoor.

Figure 27: Benefits received by respondents who are IDPoor household members



Note: Respondents could report more than one benefit received

Who are non-IDPoor household members?

Strikingly, 68 per cent (or 212 respondents) are non-IDPoor household members. Of these, 25 respondents reported they used to be IDPoor household members but were not re-certified as poor during a subsequent round of assessment, whereas 187 had not been registered at all. Using income level and self-rated economic status data, many relatively poorer home-based workers are seemingly left out. For instance, in terms of household income, 48 per cent of respondents who are not registered were in the two poorest quintiles (Figure 28). In terms of self-assessed economic status, 32 per cent of non-IDPoor respondents reported they are “poor” or “very poor” while the majority (45 per cent) are “just getting along” (Figure 29). This suggests that many non-IDPoor respondents are “at risk” and can be pushed into poverty during economic fallout or crises.

Figure 28: Income distribution quintile of respondents who are non-IDPoor household members

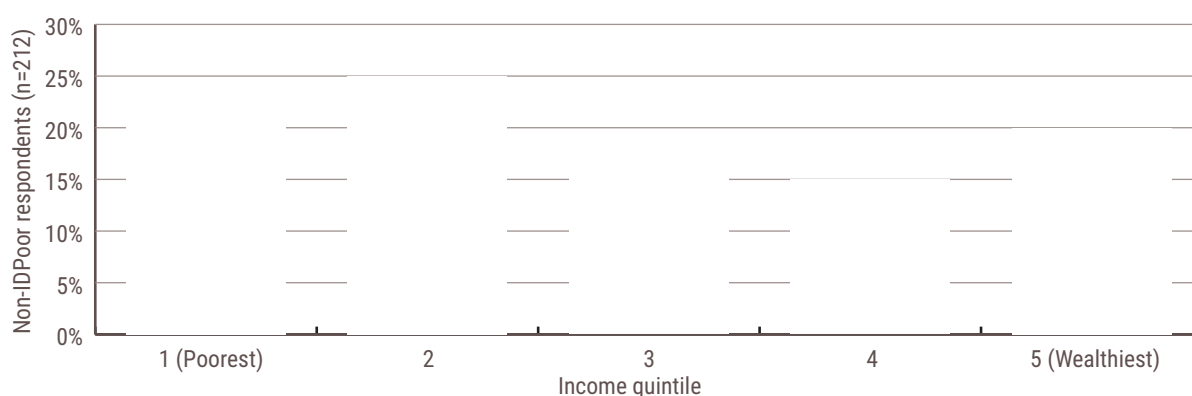


Figure 29: Self-assessed economic status of respondents who are non-IDPoor household members

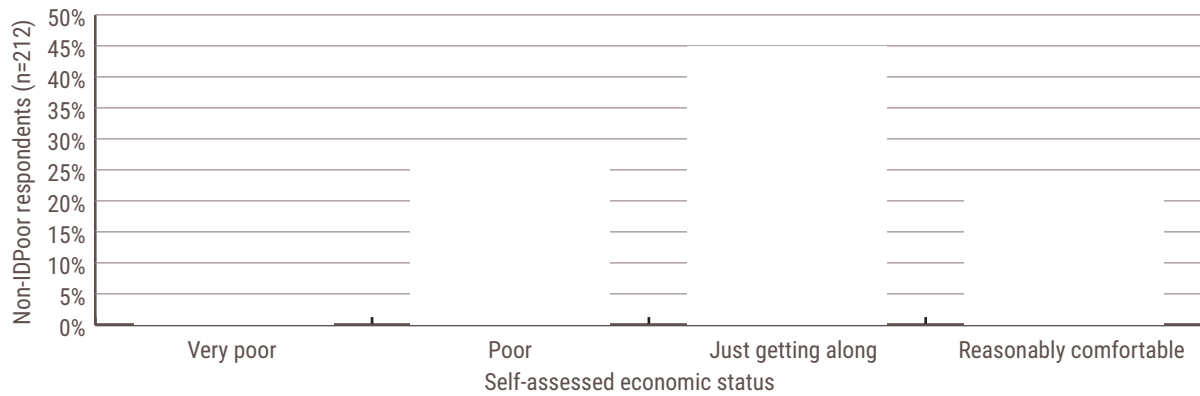
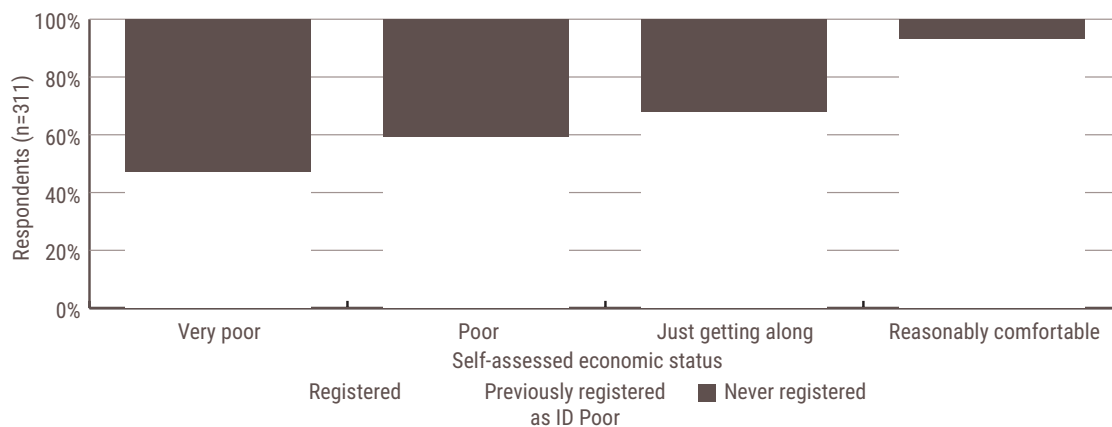


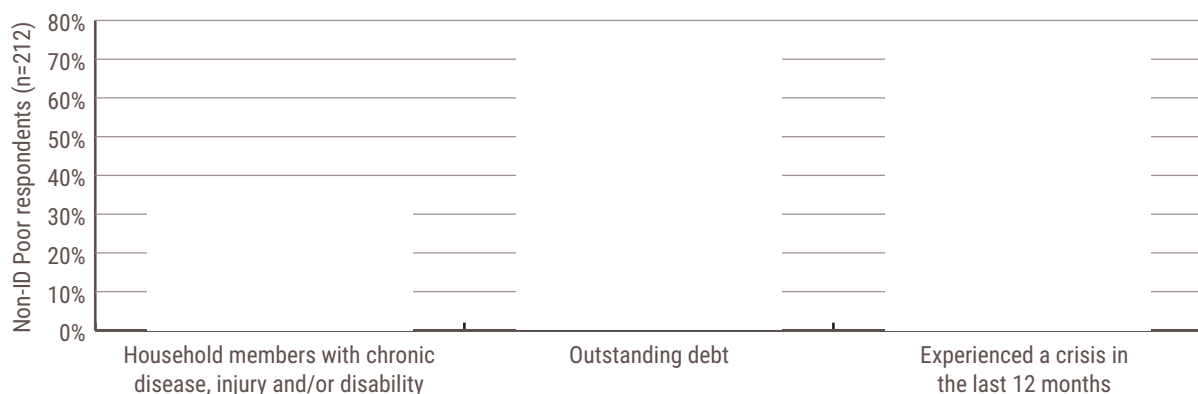
Figure 30 shows that there are more non-IDPoor recipients than recipients among respondents who rated their households “poor” (60 per cent compared to 40 per cent) and that half are also omitted among respondents who rated their households “very poor”. While the coverage of IDPoor decreases as economic well-being improves, proving it is targeting the poorest, further investigation should be conducted to identify potential inclusion/exclusion errors.

Figure 30: Respondents’ self-rated economic status and whether they are registered for IDPoor



Aside from income and assets, the IDPoor Survey assesses other household circumstances to determine vulnerability. These include the presence of health risks in the family and special circumstances such as crises in the past 12 months that caused the household to lose income, experience food shortage, sell assets, or borrow money. Accumulation of debt is also assessed to determine liabilities. Taking these indicators into consideration, many non-IDPoor respondents may be vulnerable households. Figure 31 shows that almost 40 per cent of non-IDPoor respondents reported having someone in their households with chronic disease, injury and/or disability, and almost three-quarters have outstanding debt. The majority of non-IDPoor respondents also reported that their households had experienced crises in the past year (September 2020 to October 2021).

Figure 31: Respondents who are non-IDPoor household members with health risks, debt, and/or experience of a crisis in the past year

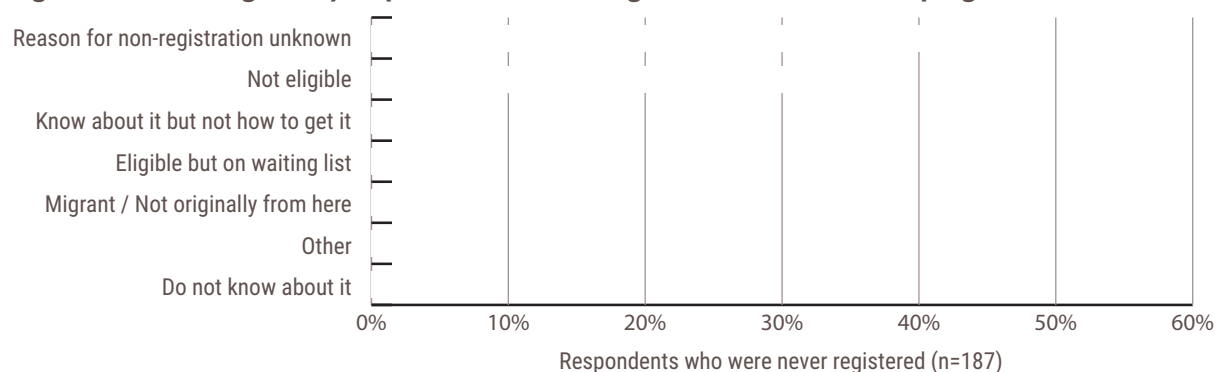


Awareness and accountability of the IDPoor Programme

The nature of the targeting process helps to explain the relatively limited awareness and understanding of the programme, especially among non-recipients. Many home-based workers are unaware of the reasons why they are non-IDPoor household members, why people are chosen, or how former IDPoor household members were removed from the programme. When the respondents were asked if they knew why people are selected for the programme, almost a third (32 per cent) reported they did not know.

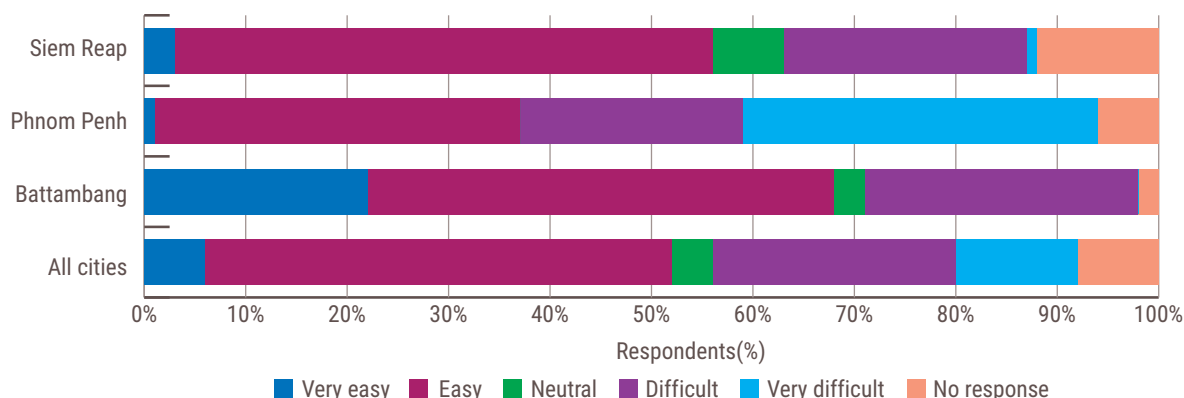
Meanwhile, of the 187 who were never registered as IDPoor household members, almost half (49 per cent) reported that they did not know the reason for their non-registration to the programme (Figure 32). Among the 25 respondents who said they were previously IDPoor household members, 16 respondents said they were unaware of the reason why they were removed.

Figure 32: Reasons given by respondents for non-registration to the IDPoor programme



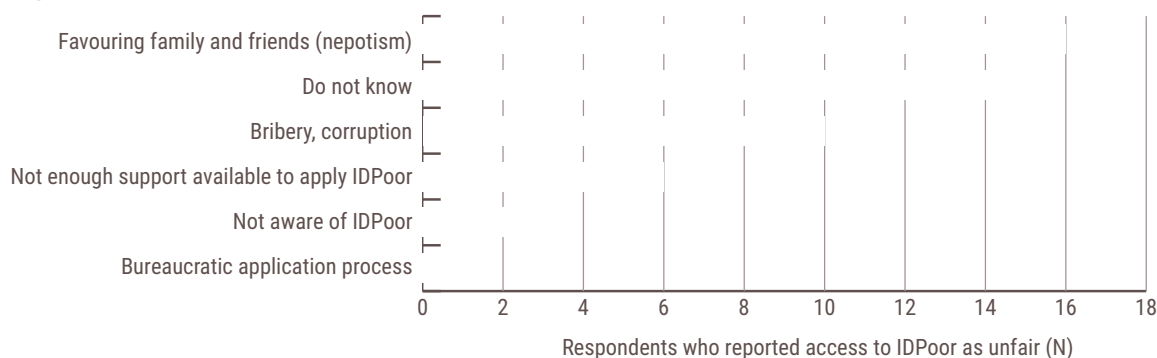
Around 40 per cent of respondents reported that accessing IDPoor was either “difficult” or “very difficult”. Battambang reported the highest percentage of respondents who said that accessing ID poor is “very easy” and “easy” (66 per cent). This may be because more than half of the respondents (57 per cent) in Battambang are IDPoor household members (Figure 33).

Figure 33: Perceived difficulty among respondents accessing IDPoor



Asked if the selection process is fair, only 51 respondents (16 per cent) reported that the way of selecting people to receive IDPoor is unfair. Sixteen of the respondents who reported the selection as unfair said it was because it favoured family and friends (nepotism) (Figure 34).

Figure 34: Reasons why respondents reported access to IDPoor as unfair



The majority of respondents (63 per cent) reported the Commune Council was how they found out about IDPoor (Figure 35). The Commune Council is also a point of support if they have any issues with the programme, followed by Village Representative Group (VRG) Coordinators or Members (24 per cent) (Figures 36). In terms of grievances, 38 respondents (12 per cent) presented a complaint to the VRG or any village leader. Asked about the types of complaints that were made, the 17 reported they were mistreated at registration or by the VRG, while 12 mentioned delayed benefits, and 8 referred to not being registered for IDPoor (Figure 37). Out of 38 complaints filed, 24 were resolved. All complaints in Battambang were resolved, while half of the complaints in Phnom Penh and the only complaint in Siem Reap had not yet been resolved.

Figure 35: How respondents first learn about IDPoor

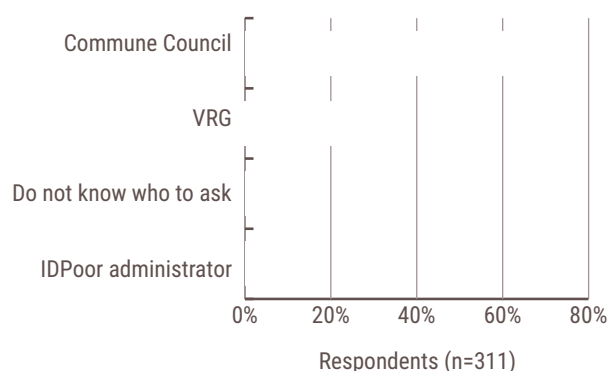


Figure 36: How respondents ask for help if they have an issue with IDPoor

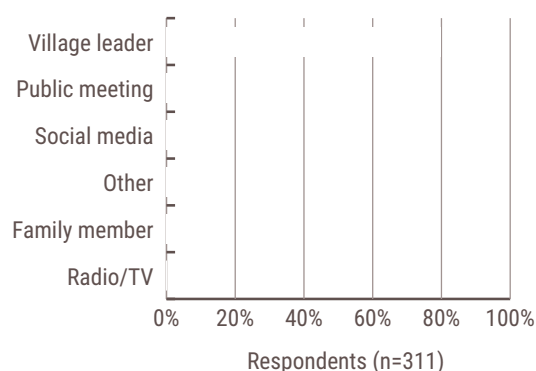
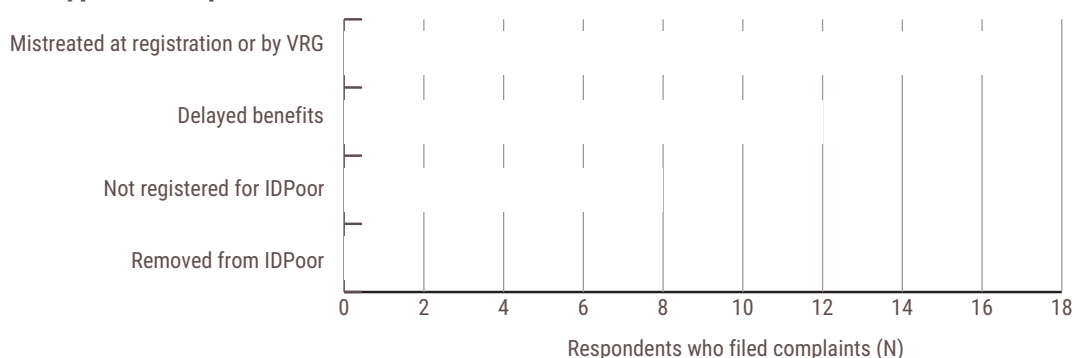


Figure 37: Types of complaints



All these issues will become more challenging if left unaddressed during the transition to an on-demand-only system. This will require significant investment in outreach, support and communications as local organizations need to be brought into the process.

Conclusions and recommendations

The overall picture provided by this study is that Cambodia’s home-based workers and their families face a range of occupational, environmental and health risks that can push them into poverty, from which they are not sufficiently protected. Their work is often characterized by uncertainty and insecurity, which was true even before the pandemic. Despite their economic contributions, they bear all the risks and costs of their work and receive limited social benefits and entitlements. While there have been efforts to extend social insurance schemes to informal workers, reach remains limited. Low-income and vulnerable home-based workers therefore rely on social assistance from the government. As the “glue that binds the social assistance efforts together” (BMZ, 2017) the IDPoor Programme has the pivotal task of ensuring the poor and vulnerable are identified and can receive various social and health programmes. However, as shown in the study, many vulnerable home-based workers are yet to be included in the IDPoor Programme. Although the government has been pilot testing OD-IDPoor since 2017, the national roll-out has only recently been scaled up and many informal workers have not yet been reached.

Despite recent developments and progress, proxy means testing may need to be specifically adapted to allow for greater accuracy among informal workers. For example, many informal workers own a mobile phone or a motorcycle – not because they are luxuries, but because they are essential to their business operations. Similarly, home-based workers may invest more in their homes because these are also their workplaces, and this should not count against them in terms of access to benefits.

A key learning from the COVID-19 crisis is the importance of inclusion of vulnerable groups such as informal workers in social protection data systems. These are people who live close to poverty and can easily slip into poverty as a result of one shock event. It is therefore important to have them in the system to enable an adequate response. This does not mean that the vulnerable will receive the same support as the very poor, but it will allow help to reach them through different support measures. Building more inclusive data systems will be a key challenge for shock-responsive social protection.

On the basis of the findings, the following recommendations are proposed:

1. On the adoption of the OD-IDPoor Programme, three key issues related to the scheme's operations should be considered:
 - a. Adopting a systemic approach to IDPoor Programme outreach and registration to enable dynamic inclusion of vulnerable informal workers such as home-based workers. This includes **strengthening grassroots involvement in information sharing, outreach and the to-be-developed Grievance Redress Mechanism.**
 - b. The digitalization of the IDPoor Programme is a welcome development in improving uptake and dynamic inclusion by streamlining the registration process. However, there are widely recognized challenges using digital technology in social protection, including the fact that this may exclude those on the wrong side of the digital divide. This can be mitigated through **adequate consultation during the development process and ensuring manual options are still included while digital literacy is being expanded.**
 - c. Strengthen the transparency and accountability of the IDPoor Programme by:
 - Increasing awareness of the programme among potential recipients through a range of information, education, and communication materials.
 - Addressing the information gap in the decision-making process that determines eligibility and including clear documentation processes as part of the validation process.
 - Establishing and publicizing clearer mechanisms for submitting grievances and complaints.
2. On the **design** of the OD-IDPoor Programme, revisiting and revising the indicators and categories to capture a broader set of vulnerable home-based workers should be considered. Aside from “very poor”, “poor” and “non-poor”, the categories should be expanded to identify “vulnerable” populations. This requires a review of the indicators and scoring that have adverse impacts on informal workers, such as asset ownership, and their potential exclusion from the targeting formula.

3. The voice of grassroots-based organizations, such as informal worker organizations, together with civil society and trade unions, should be included at all levels of social protection decision-making. This may include representation on the National Social Protection Council or a parallel or interconnected platform. Such a platform is an important mechanism for participation and building innovative approaches that enable progress in the formalization of the informal economy.

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About WIEGO

Women in Informal Employment: Globalizing and Organizing (WIEGO) is a global network focused on empowering the working poor, especially women, in the informal economy to secure their livelihoods. We believe all workers should have equal economic opportunities, rights, protection and voice. WIEGO promotes change by improving statistics and expanding knowledge on the informal economy, building networks and capacity among informal worker organizations and, jointly with the networks and organizations, influencing local, national and international policies. Visit www.wiego.org.