SOCIAL PROTECTION SYSTEM AND FORMAL AND INFORMAL PROGRAMMES IN EGYPT, TUNISIA AND LEBANON

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1 BACKGROUND

Social protection systems are critical for ensuring that all members of society have access to the support they need to live with dignity and security. In many forms of employment, businesses are not covered whether because of the narrow legal scope of coverage, biased eligibility criteria, or non-compliance by employers. Informality is a critical issue in the Middle East and North Africa (MENA) region as it represents 68% of total employment (MENA-OECD, 2021), limiting the access of a large share of the population to social protection, including social safety nets. The prevalence of informality is particularly pronounced within the Cultural and Creative Industries (CCIs), as a significant number of individuals within these sectors remain self-employed throughout their entire careers (for instance, as independent artists, see EMEA 2021a, EMEA 2021b, EMEA 2021c and Ayadi and Forouheshfar, 2023b). Workers in green businesses, including those in the agriculture sector, often face high levels of informality. This is also evident in sectors such as fisheries and aquaculture within the blue economy. Providing access to social protection emerges as a significant challenge in these sectors, as highlighted by Ayadi and Forouheshfar (2023c) for green economy and Ayadi and Forouheshfar (2023a) for blue economy.

The MENA region comprises a diversity of countries with varying levels of social protection systems. However, some common characteristics can be identified. One key feature is that social protection systems in the MENA region are underdeveloped and fragmented. Social protection programmes are often targeted to specific groups, such as civil servants and the military, rather than being universal. Another common characteristic is that social protection systems in the MENA region often rely heavily on subsidies, which can be regressive and inefficient. Many countries in the region have implemented cash transfer programmes, which have the potential to address poverty and inequality, but these programmes often suffer from limited coverage.

This policy paper presents the forms of social protection (formal and informal) and highlights the key challenges in Egypt, Tunisia and Lebanon. It then provides policy recommendations using survey data collected from a sample of 33 MSME’s in Egypt, Lebanon and Tunisia in 2023 (table A1). It concludes with innovative proposals for strengthening social protection coverage in these countries.

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1 INVESTMED policy paper online survey, see Appendix for further details on the responses: https://docs.google.com/forms/d/e/1FAIpQLSc-WT0Jxu9NlbpWYy48dRWwVr5h6Vhd3WM71uMH1Oa9IO2Ieg/closedform

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2 OVERVIEW OF THE SOCIAL PROTECTION SYSTEM AND PROGRAMMES, FORMAL AND INFORMAL, IN EGYPT, TUNISIA AND LEBANON

2.1 Formal social protection programmes

Social protection systems covering social insurance, health, maternity care, elderly care, unemployment and illness-related assistance are not well-developed in MENA countries. Almost all MENA countries provide some level of social programmes for health, education and pensions. However, public social protection expenditure on pensions and other benefits for older people is low and coverage is generally limited to a small fraction of the population (see Figure 1 and Tables 1 and 2A).

Figure 1- Central government expenditure on Social Protection (% GDP)

Note: The specific variables selected are “Central government (Inc. social security funds) expenditure on Social Protection (% GDP)” (for Egypt and Tunisia) and “Budgetary central government expenditure on Social Protection (% GDP)” (for Lebanon). These variables were chosen as they align with the indicators utilised in the World Social Protection Data Dashboards provided by the ILO (https://www.social-protection.org/gimi/WSPDB.action?id=13)
Table 1- Social Safety net coverage

<table>
<thead>
<tr>
<th></th>
<th>Population covered by at least one social protection benefit (excluding health)</th>
<th>Universal health coverage</th>
<th>People protected by social protection systems including floors: Older persons</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Egypt</strong></td>
<td>34.72</td>
<td>68</td>
<td>57.59</td>
</tr>
<tr>
<td><strong>Lebanon</strong></td>
<td>13.9</td>
<td>73</td>
<td>9.84</td>
</tr>
<tr>
<td><strong>Tunisia</strong></td>
<td>50.21</td>
<td>70</td>
<td>85.4</td>
</tr>
</tbody>
</table>

Source: ILO dataset for the year of 2020

All the social security programmes in the region are traditional (i.e., social insurance defined benefit programmes) and over recent years (economic crisis, COVID-19 pandemic), have been developed to take into account the poor and vulnerable populations, and have integrated both a social insurance scheme and an assistance programmes.

The social protection system in Egypt consists of a mix of cash transfers, food subsidies and social insurance programmes. The government has implemented several social protection programmes aimed at reducing poverty and providing assistance to vulnerable groups. These programmes include:

1. **Takaful and Karama**: a cash transfer programme that provides financial assistance to families living in extreme poverty.
2. **The National Food Subsidy Programme**: a food subsidy programme that provides basic food items to low-income families at subsidised prices.
3. **Social Health Insurance Programme**: a mandatory social insurance programme that provides health insurance coverage to formal sector workers and their dependents.
4. **Conditional Cash Transfer Programme**: a cash transfer programme that provides financial assistance to families with school-aged children, conditional on their regular school attendance.
5. **Pension and Social Security Programme**: a social insurance programme that provides retirement pensions and social security benefits to eligible individuals.

The social protection system in Tunisia includes a range of social assistance programmes and social insurance schemes. As in Egypt, the government has implemented several social protection programmes aimed at reducing poverty and improving social welfare. These programmes include:

1. **Social Safety Net Programme**: a cash transfer programme that provides financial assistance to low-income families and vulnerable groups.
2. **Food Subsidy Programme**: a food subsidy programme that provides basic food items to low-income families at subsidised prices.
3. National Health Insurance Programme: a mandatory social insurance programme that provides health insurance coverage to formal sector workers and their dependents.

4. Pension and Social Security Programme: a social insurance programme that provides retirement pensions and social security benefits to eligible individuals.

5. Family Allowance Programmes: a cash transfer programme that provides financial assistance to families with dependent children.

The social protection system in Lebanon also consists of a mix of social assistance programmes and social insurance schemes that include:

1. National Poverty Targeting Programme: a cash transfer programme that provides financial assistance to low-income families and vulnerable groups.

2. Food Subsidy Programme: a food subsidy programme that provides basic food items to low-income families at subsidised prices.

3. National Health Insurance Programme: a mandatory social insurance programme that provides health insurance coverage to formal sector workers and their dependents.

4. Pension and Social Security Programme: a social insurance programme that provides retirement pensions and social security benefits to eligible individuals.

5. Public Works Programme: a programme that provides short-term employment opportunities to unemployed individuals, particularly those living in poverty.

Despite these programmes and progress achieved during recent decades, in terms of coverage, it remains quite low, especially since the COVID-19 pandemic, which was followed by an expansion of informal workers.

Since informality is increasing and social protection schemes are tied to employment, the majority of informal workers and irregular workers (part-time, occasional, self-employed workers) and their families remain poorly covered and benefit little from insurance and assistance programmes. In this context, individuals and families rely on informal social protection mechanisms.

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2 Informal employment comprises all workers of the informal sector (unregistered firms) and informal workers outside the informal sector (own-account workers and employees not contributing to social security, paying income taxes, or who lack certain benefits such as family leave or sick leave).
3 INFORMAL SOCIAL PROTECTION MECHANISMS

The conducted survey highlights that employees rely heavily on informal networks of support, such as family, friends and neighbours, rather than formal social protection programmes provided by the government or other institutions.

How to define these informal social protection mechanisms

An informal social protection mechanism refers to non-government or non-formal mechanisms that provide financial or in-kind support to individuals or households facing economic hardship or vulnerability. These mechanisms include support from family members, community groups, religious organisations and informal networks of friends and neighbours. It could also include loans from informal credit providers and community-based welfare programmes.

In Egypt, Tunisia and Lebanon, informal social protection mechanisms are developed and include various types of support from family members, community-based groups, civil society and international institutions.

How important are these support mechanisms?

The conducted survey highlights that family support is a key source of informal social protection, as many families rely on support from relatives to meet their basic needs: 21.21% of respondents fully rely on support from family members, whilst 30.30% rely on this a little and 18.18% rely on it a lot.

Community-based groups, such as local charities and friends and neighbours also play a significant role in providing informal social protection, as indicated in the survey results: support from community groups and informal networks of friends and neighbours are the next most relied upon forms of social protection, with around 57.6% and 62.5% of respondents, respectively, reporting some level of reliance on them.

Additionally, religious organisations provide various forms of social protection, such as education, health and shelter services, often for specific target groups such as women, children, and people with disabilities.

Support from religious organisations and community-based welfare programmes are relied upon by fewer respondents, with 33.3% and 60.6% of respondents, respectively, reporting some level of reliance on them.
In the absence of a government safety net\(^3\), these informal mechanisms have become increasingly important in these countries in recent years, due to the country’s economic and political crisis, which has resulted in widespread poverty and unemployment.

### 4 CHALLENGES

According to the results of our survey, the main challenges identified amongst MSMEs in Egypt, Tunisia and Lebanon about social protection systems are:

1. Limited coverage, legal barriers. Despite efforts to expand social protection coverage, these countries still face significant gaps in coverage: In our survey, the results have showed that MSMEs consider the lengthy and complicated administrative process (48.48\%) as crucial factors in not having formal social protection in their country.

2. Lack of awareness, trust and understanding: In our survey, a significant proportion of MSME’s (88\%) reported a lack of awareness or understanding of the available social protection programmes.

3. Financing challenges: The public social protection systems in these countries are facing significant fiscal pressures, with concerns about the sustainability of financing in the face of rising public debt and budget deficits.

4. Institutional capacity challenges: There are concerns about the limited institutional capacity of governments to effectively design and implement social protection programmes, leading to inefficiencies and delays in service delivery.

### 5 POLICY RECOMMENDATIONS

Based on the survey’s results, the following policy recommendations could be made:

**Developing safety nets:** Safety net implementation is perceived as crucial by 60\% of the respondents in our survey.

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\(^3\) A safety net is a system or programme designed to provide assistance to individuals and families who are struggling to meet their basic needs, such as food, housing and healthcare. Safety nets can take many forms, including cash assistance, food stamps, housing vouchers and Medicaid. The goal of a safety net is to provide a minimum level of support to ensure that people are not left without the resources they need to survive.
Policymakers should prioritise developing safety nets to support vulnerable groups, such as informal workers, the elderly, disabled and unemployed. These safety nets should take the form of cash transfers, food assistance, coverage of transport and energy costs, or other forms of social assistance.

Developing non-contributory schemes: Non-contributory scheme development is considered as fairly effective by 43.33% of the respondents and crucial by 26.67%.

Policymakers could prioritise developing non-contributory social protection schemes that are designed to provide support to those who cannot afford to contribute to formal social protection schemes. These schemes could be means-tested and targeted at the most vulnerable people.

Developing new social insurance schemes: The setting up of community-based insurance schemes and social protection micro-schemes specific to activity sectors and to occupations is perceived as crucial by 56.67% of the respondents in our survey, making it the most effective policy according to them.

6 PROPOSALS:

In Tunisia, Egypt and Lebanon - as in many developing countries - informal workers make up a large proportion of the workforce. These workers typically do not have formal contracts and social protection coverage (linked to the employment contract), leaving them vulnerable to accidents, illness and other unexpected events that can disrupt their income and livelihoods.

Extending social security coverage to them has significant challenges. The obstacles to achieving this goal are numerous and include issues such as a lack of trust, inadequate legislation, insufficient information and awareness, high costs and insufficient financing, burdensome administrative procedures and a lack of enforcement and policy coherence (ILO, 2021). Also, informal workers having significant differences in characteristics and situations, and one-size-fits-all policies will fail in the face of a diverse informal workforce (El Mekkaoui and al., 2021).

The development of social protection programmes and coverage could lead to formalisation.

Community-Based Insurance Schemes (CBIS) and Micro Social Protection Programmes (MSPP) could be implemented in MSMEs to provide efficient support (affordable and flexible coverage) to their employees.
Community-based insurance schemes (CBIS) are insurance programmes designed and implemented by communities to protect themselves against social and financial risks, mainly related to healthcare. CBIS are typically initiated and managed by local community organisations, such as cooperatives, or self-help groups, and rely on mutual support and pooling of resources to provide coverage to their members. These schemes aim to provide a safety net for low-income households, whilst also building social networks and community resilience. They operate on the principles of risk-sharing and solidarity, where members contribute small amounts of money into a common pool, where those who experience a loss or damage receive compensation from the pool.

To implement and expand these schemes to informal workers, it is important to involve them in the design. This can be achieved with local organisations that represent informal workers, such as informal workers associations, trade unions or community groups, to identify the most appropriate insurance. Another key factor in expanding CBIS to informal workers is ensuring that the schemes are financially sustainable and able to scale up over time. This may require partnerships with local community organisations and financial institutions.

One can describe some examples of Community-Based Insurance Schemes that have been implemented in developing countries, to provide coverage to low-income households and informal workers:

**SEWA Cooperative Insurance Society in India**: The Self-Employed Women's Association (SEWA) is a trade union and cooperative that represents informal workers, primarily women, in India. SEWA created an insurance society that provides health and life insurance to its members, who are primarily street vendors, domestic workers and home-based artisans.

**Community Health Fund in Tanzania**: The Community Health Fund is a CBIS that provides health insurance to rural communities in Tanzania. The programme is managed by local community organisations and members pay a small premium to access primary healthcare services. The programme has been successful in improving health outcomes and reducing financial barriers to healthcare for low-income households.

**Mutual Health Organisations in Ghana**: Mutual Health Organisations (MHOs) are community-based health insurance schemes that operate in Ghana. MHOs are managed by local committees, and members pay a monthly premium to access health services. The programme has been successful in improving access to healthcare for low-income households in rural areas.

This organisation has demonstrated the potential for CBIS to improve access to essential healthcare services for vulnerable populations. Thus, these Community-Based Insurance Schemes (CBIS) could be developed and tailored to the needs of informal workers, by offering affordable and
flexible coverage that addresses various risks as work-related accidents, unemployment and pension schemes.

The results of the survey state that health and work injury are considered crucial risks to cover by the majority of the respondents, with 84.38% and 68.75% respectively. Unemployment and pensions are also important, with 38.71% and 48.39% of respondents considering them crucial.

To take into account other social and economic risks, such as work-related injuries, **Micro Social Protection Programmes (MSPP)** could also be implemented in MSMEs to provide support to their employees with simple policy eligibility rules, non-punitive conditionality and information dissemination on entitlements, to ensure that employees are aware of the benefits they can receive. By offering such programmes, MSMEs can help their employees to cope with unexpected events and build a more resilient and productive workforce.

The Micro Social Protection Schemes (MSPP) could include:

- **Workers' compensation programmes**, such as insurance or other benefits to employees, to help them cope with the financial costs of work-related injuries or accidents.
- **Retirement savings programmes**, such as pension plans or provident funds, to help employees save for the future. These programmes can provide financial security and stability for employees as they approach retirement age.
- **Training and skill development programmes** to help employees to improve their skills and advance their careers. This can include technical training or leadership development.

### 6.1 How to manage MSPPs?

These schemes could be managed by a public financial institution, such as Caisse de Dépôt et de Gestion (CDG), that mobilises institutional savings towards long-term investments and that invests in national projects of high priority (education, health, etc.). With this institution, the main business lines are the management of regulated savings and public retirement schemes, banking, finance and insurance, and territorial development.
6.2 How to finance and incentivise MSMEs to develop these programmes?

These programmes could be financed in a variety of ways, depending on the specific programme and social, economic and political context:

Co-financing: Micro social protection programmes may be financed through a combination of sources, such as government funding, donor funding, private sector contributions, diaspora, and MSME employer contributions.

1. **Government funding:** Micro social protection programmes may be funded by national or local governments, either through direct financing or through subsidies provided directly to MSMEs or other implementing organisations.

2. **Private sector funding:** The private sector could provide funding for micro social protection programmes, as part of their corporate social responsibility initiatives.

3. **Donor funding:** EU, international organisations or bilateral donors may provide funding for micro social protection programmes, especially in low-income countries.

4. **Community/diaspora financing:** Micro social protection programmes may be financed by the community, such as through Community-Based Insurance Schemes and the diaspora.

In terms of incentives, our survey highlighted that “Financial incentives are seen as crucial by 60% of the respondents, making it the most effective policy according to them”. These incentives could take the form of tax breaks, subsidies, or other forms of financial support that could come from donors.

It is worth noting that enterprises that contribute to worker social protection programmes may be a worthwhile enterprise investment. Enterprises that boost their social security expenditure by 10% witnessed revenue growth of up to 2% per worker (Torm, 2019). The positive impact is particularly pronounced for smaller businesses.

The significance of generating fiscal space is heightened during periods of crisis and slow economic growth. Given the pivotal role that social investments play in advancing human rights and realising the SDGs, it is imperative that Egypt, Lebanon and Tunisia explore every possible avenue to widen their fiscal space for an improvement of social protection coverage. In both developed and developing countries, there exist various alternatives and a broad range of revenue options that can be considered (ILO, 2017). According to Ortiz and al. (2017), developing countries, such as Indonesia and Ghana, have implemented fuel subsidies as a means of establishing social protection programmes. Bolivia, Mongolia and Zambia are financing universal old-age pensions, child benefits and other schemes by taxing mining and gas. Brazil has implemented a financial transaction tax to expand social
protection coverage. Additionally, Ghana, Liberia and The Maldives have introduced taxes on tourism. Algeria, Mauritius and Panama have supplemented social security revenues with high taxes on tobacco.

Each country is unique and would develop its social protection programmes to address the specific challenges faced by its population.

Regardless of the financing mechanism, it's important to ensure that these programmes are sustainable over the long term and provide meaningful benefits to their beneficiaries. The EU can support governments in promoting regulation, monitoring and evaluation to ensure that these programmes are effective and efficient.

7 CONCLUSION

Addressing the challenges facing social protection systems in Egypt, Tunisia and Lebanon is critical for ensuring that all members of society have access to the support they need to live with dignity and security.

The recommendations and proposals provided in this policy note are aimed at strengthening social protection programmes. In the context of crisis and pandemic, these countries have implemented emergency cash transfer schemes targeting informal workers, women and the elderly. These measures are not planned for the long term. More needs to be done to extend the coverage of social security programmes with universal approach. Moreover, other mechanisms need to be developed, mechanisms that link formal and informal social protections. Micro-social protection programmes schemes (MSPP) implemented in Micro, Small and Medium Enterprises (MSMEs) can play an important role in complementing larger social protection programmes and addressing specific vulnerabilities and risks.

These programmes can include a range of benefits, such as health insurance, work injury, pensions, maternity leave, and training and skills. While micro-social protection schemes can be effective in addressing specific vulnerabilities and risks, they could face challenges related to sustainability. Setting up these programmes with financial incentives would be more effective. Additionally, scaling up these programmes to reach larger populations can be challenging, particularly in the absence of strong institutional capacity and coordination. Partnerships at regional and local level with public and regional financial institutions, such as Caisse de Dépôt et de Gestion (CDG), worker
associations, cooperatives and community-based organisations, (CBOs) are essential to reach out to the relevant populations.

Finally, it is crucial to leverage the potential of new technologies, in order to expand social protection coverage, to reduce management and administrative costs, and enhance access to benefits and services by accurately identifying beneficiaries. In fact, these new technologies (digital identification systems) are reducing the incidence of programme leakage and duplicate applications (World Bank, 2018).

8 REFERENCES:


9 APPENDIX - SURVEY RESULTS

The INVESTMED policy paper survey was distributed among INVESTMED sub-grantees active in green, blue and creative sectors in Egypt Lebanon and Tunisia. 33 answers were collected and some of the responses are presented in this Appendix.

Table 1A- Distribution of respondents by country and sector of activity

<table>
<thead>
<tr>
<th></th>
<th>Blue</th>
<th>CCI</th>
<th>Green</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Egypt</td>
<td>1</td>
<td>5</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Lebanon</td>
<td>0</td>
<td>3</td>
<td>9</td>
<td>12</td>
</tr>
<tr>
<td>Tunisia</td>
<td>2</td>
<td>6</td>
<td>6</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>3</td>
<td>14</td>
<td>16</td>
<td>33</td>
</tr>
</tbody>
</table>

Figure 1A- Proportion of youth and women in the top managerial positions

Table 2A- Current coverage status

<table>
<thead>
<tr>
<th>Are the employees in your company registered with the public social security system?</th>
<th>Freq.</th>
<th>Percent</th>
<th>Cum.</th>
</tr>
</thead>
<tbody>
<tr>
<td>No/ Non</td>
<td>8</td>
<td>25.81</td>
<td>25.81</td>
</tr>
<tr>
<td>Yes, all of the employees</td>
<td>9</td>
<td>29.03</td>
<td>54.84</td>
</tr>
<tr>
<td>Yes, only the employer</td>
<td>3</td>
<td>9.68</td>
<td>64.52</td>
</tr>
<tr>
<td>Yes, some of the employees</td>
<td>11</td>
<td>35.48</td>
<td>100.00</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.00</td>
<td></td>
</tr>
</tbody>
</table>

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ABOUT INVESTMED

Mediterranean MSMEs face important challenges in terms of competitiveness, sustainability, internationalization and capacity to innovate while urgent measures are needed to tackle common environmental challenges and untap the potential of both natural and cultural heritage to contribute to sustainable growth and economic development. Against this backdrop, the INVESTEMD project aims at addressing both economic and environmental challenges, by supporting new, sustainable business opportunities for young people and women in three Mediterranean Partner Countries: Egypt, Lebanon and Tunisia.

The INVESTMED Project (InNoVativE Sustainable sTart-ups for the MEDiterranean) is co-funded by the European Union under the ENI CBC Mediterranean Sea Basin Programme 2014-2020. INVESTMED has a duration of 30 months, with a total budget of €3.8 Million, of which €3.4 Million (90%) is funded by ENI CBC MED. It has 8 partners from Tunisia, Spain, Lebanon, Greece, Egypt, and Italy:

- Union of Mediterranean Confederations of Enterprises, BUSINESSMED (TU)
- Euro-Mediterranean Economists Association, EMEA (ES)
- European Institute of the Mediterranean, IEMed (ES)
- Beyond Group / Irada Group S.A.L, BRD (LE)
- Institute of Entrepreneurship Development, IED (GR)
- Libera Università Maria SS. Assunta, LUMSA (IT)
- Confederation of Egyptian European Business Associations, CEEBA (EG)
- Spanish Chamber of Commerce, CCE (ES)

INVESTMED will have an impact on MSMEs, start-ups and recently established enterprises where staff will be trained and coached to become more sustainable and competitive and financially supported via an open competition. Specific business incubation services will also be established for sustainable start-ups as well while relevant public authorities will benefit from capacity building and exchange of best practices to facilitate access and protect IPR for MSMEs.

The Euro-Mediterranean Economists Association – EMEA is a Barcelona-based regional think-tank that serves as a leading independent and innovative policy research institution; a forum for debate on the political and socio-economic reforms in Mediterranean and Africa; and promoter of actions and initiatives that fulfil objectives of sustainability, inclusiveness, regional integration and prosperity.

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