

The International Policy Centre for Inclusive Growth is jointly supported by the United Nations Development Programme and the Government of Brazil.

# Social protection responses to COVID-19 in Sri Lanka<sup>1</sup>

Research staff, International Policy Centre for Inclusive Growth (IPC-IG) and UNICEF Sri Lanka

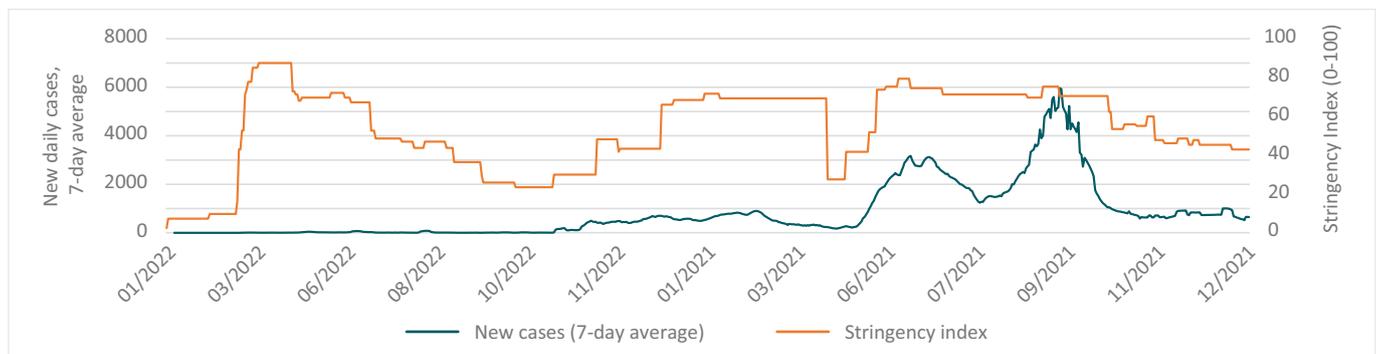
## 1 Situation and vulnerability analysis

As of 31 December 2021, there had been 587,245 confirmed cases of COVID-19 in Sri Lanka, 14,979 confirmed deaths, and 33.84 million vaccination doses administered (Our World in Data 2022). Sri Lanka's score on the Oxford COVID-19 Stringency Index—a composite measure based on nine response indicators, including school closures, workplace closures and travel bans, rescaled to a value from 0 to 100 (Hale et al. 2021)—has largely corresponded with COVID-19 outbreaks.

Figure 1 plots the seven-day average of new, confirmed daily cases of COVID-19 (blue, left-hand axis) against the government's Stringency Index score (orange, right-hand axis) between January 2020 and December 2021. Sri Lanka maintained a low level of confirmed cases of COVID-19 between January and September 2020, and adopted strong protective measures early, with the Stringency Index reaching 100 at the start of April 2020. However, there was a rise in cases in October 2020, when a cluster of garment factory and fish market workers added up to 85,844 cases (MoH 2021). As a result, the government adopted stricter measures in affected localities, as the Stringency Index increased from 26.9 in October 2020 to 81.9 on 31 January 2021 and remained consistent until the start of April as the caseload lowered. An ensuing easing of lockdown measures in late March was short-lived, however, as a sudden outbreak in April 2021 led to a return to stronger protection measures. Higher stringency levels persisted during the outbreak of the Delta variant which started in late July 2021 and culminated in a seven-day average of almost 6,000 confirmed cases per day. The easing of lockdown measures was gradually implemented from October 2021, as the daily number of cases started to decrease.

### FIGURE 1

Average number of new daily cases and COVID-19 Stringency Index for Sri Lanka



Source: Official data, Hale et al. (2021), and Our World in Data (26 January 2022).

The COVID-19 pandemic and consequent containment measures resulted in social and economic downturns in Sri Lanka. As of late December 2020, the agriculture, industry and service (including tourism) sectors contracted by 4.6 per cent according to the International Monetary Fund (IMF 2021). According to the Sri Lanka Tourism Development Authority, over 400,000 Sri Lankans were employed in the tourism sector in 2019 (173,592 directly and 229,015 indirectly) (Department of Census and Statistics 2020, 82). The country closed its borders and stopped international travel and connections with the rest of the world, particularly affecting tourism and the balance of payments (IPC-IG and UNICEF ROSA 2020).

The pandemic has also affected the social sector in multiple ways. Sri Lanka closed all schools and universities in March 2020, and schooling and learning turned to new and improvised approaches. However, not everyone was able to access and afford the technology, as approximately only 22.9 per cent of households had access to a desktop or laptop computer at the start of the lockdown, while computer literacy was estimated at only 30.8 per cent. Likewise, the health sector was overloaded by an influx of patients due to shortages of experts, infrastructure and hospital supplies (Central Bank of Sri Lanka 2021).

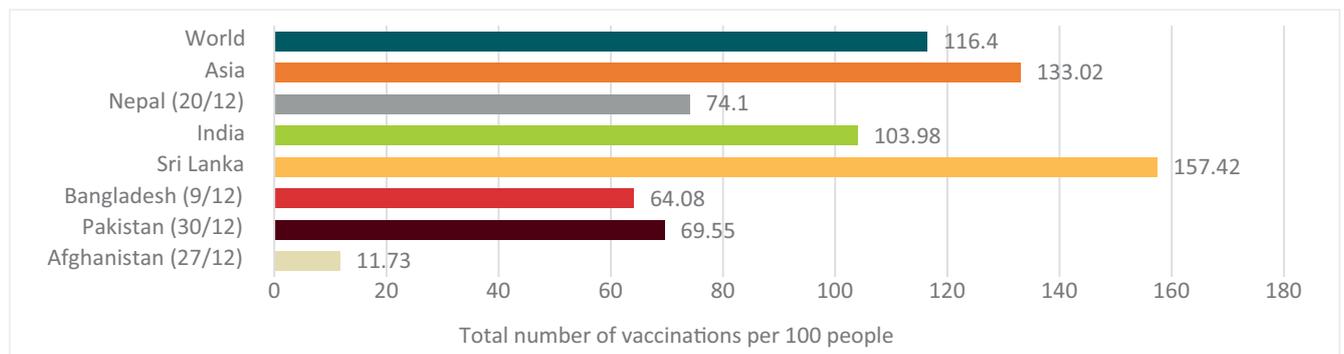
With estimates of the informal sector representing between 57.4 per cent and 68.0 per cent of total employment,<sup>2</sup> low- and middle-income households whose livelihoods rely on informal labour and income remain particularly vulnerable, given the lack of institutional provisions for social protection, notably social security and unemployment benefits. Daily wage workers who must attend work to be paid suffered due to the lockdown, as they were unable to. Women are an equally vulnerable group in the context of COVID-19 due to their greater involvement in informal employment (an estimated 1.7 million women are employed informally), especially in the case of female-headed households, which represent approximately 25.8 per cent of households or 1.4 million families (UN Women 2021a; 2021b). Other social groups disproportionately affected by COVID-19 include elderly people; children; persons with disabilities; persons living in institutional settings (prisons and detention centres, among others); health care service providers; and front-line workers, who face higher risks of transmission (IPC-IG and UNICEF ROSA 2020; Ruzaik and Begum 2021; UNICEF Sri Lanka 2020c; Kanda 2021).

In January 2021, Sri Lanka received 500,000 free doses of COVID-19 vaccine from India, and began its vaccination campaign by prioritising health workers and army officials. As of 24 August 2021, Sri Lanka received more than 27 million vaccine doses through purchases, country donations and through the WHO's COVAX.

Although slow to start, the vaccination campaign in Sri Lanka accelerated considerably in the second half of 2021: the total number of vaccination doses increased from 3.69 million on 30 June to 33.84 million on 31 December 2021—an almost tenfold increase. Figure 2 presents the total number of vaccinations (doses) per 100 people for South Asian countries with available data, as well as for Asia and the world. As of 31 December 2021, Sri Lanka had administered 157.42 total doses—including first, second and booster doses—per 100 people. This represents the highest vaccination rate among South Asian countries, followed by India (103.98 doses per 100), Nepal (74.1), Pakistan (69.55), Bangladesh (64.08) and, finally, Afghanistan (11.73).

**FIGURE 2**

Total vaccinations per 100 people for South Asian countries, Asia and the world



Source: Official data compiled by Our World in Data as of 27 January 2022. Latest figures as of 31 December 2021 or earlier (dates in parentheses).

In 2020, the Sri Lankan government allocated 0.1 per cent of gross domestic product (GDP) to containment and quarantine measures. Cash transfers to vulnerable groups amounted to around 0.6 per cent of GDP in 2020 and around 0.1 per cent of GDP in 2021 (IMF 2021). The President also announced a special fund, *Itukama*, appealing to local and foreign tax-free donations (ibid.). On 2 April 2020, the World Bank approved the Sri Lanka COVID-19 Emergency Response and Health Systems Preparedness Project (SC19ERP), which will cost USD128.6 million. This has been implemented by the Ministry of Health and Indigenous Medical Services, with the support of United Nations agencies and other stakeholders. In 2020, the government spent LKR83.68 billion on free medicines, up from LKR57.08 billion in 2019, representing an increase of almost 47 per cent (MoF 2020, 380).

As of 31 December 2021, the World Bank disbursed USD 345 million to implement SC19ERP activities to meet immediate and longer-term needs—for instance, responding to the “[...] urgent health needs and provide emergency income support to poor and vulnerable Sri Lankans, [...] and strengthen the country’s health systems for pandemic preparedness”. In addition, in response to the Sri Lankan government’s measures, the World Bank adjusted its Social Safety Net Project to support the government to meet urgent COVID-19-related needs and priorities (Kanda 2021).

## 2 Mapping of social protection responses

Social protection is a set of policies and programmes aimed at preventing or protecting all people against poverty, vulnerability and social exclusion throughout their life cycle and in response to shocks. It typically includes measures related to social assistance, social insurance, labour market programmes, and social care services. This mapping focuses on the GoSL’s social protection response to protect people from the vulnerabilities created by COVID-19. Specifically, it maps social assistance (non-contributory) and labour market programmes that the government implemented in response to COVID-19.

In 2020, the United Nations Children’s Fund (UNICEF) conducted several analyses on Sri Lanka’s social protection response, with a focus on cash transfer programmes. The Government of Sri Lanka (GoSL) responded quickly to the crisis by establishing a cash transfer programme, providing millions of monthly payments of LKR5,000 to households in April and May. Although limited to two months, this remarkable initial response reached the majority of the country’s population (UNICEF Sri Lanka 2020c). There were several other social protection measures introduced by the government in response to the socio-economic crisis. This report aims to map all those responses, both as a documentation exercise and to inform possible responses to this and future crises.

**TABLE 1**
**Mapping of main government social protection responses to COVID-19 in Sri Lanka**

No.	Social protection component	Social protection instrument	Intervention or programme	Description	Duration (months) (1 if one-off)	Existing programme or new intervention	Eligibility criteria and targeting method (pre-crisis criteria for existing programmes)	Number of new beneficiaries	Benefit amount
1	Social assistance	Emergency cash transfer	Emergency cash transfers (April, May 2020)	Comprises: (i) an expansion of existing social assistance schemes; and (ii) the development of a parallel new emergency support scheme	2	Existing programmes (including vertical and horizontal expansions)	Current beneficiaries and people on the waiting list of programmes (Samurdhi; Senior Citizens' Allowance; Disability and Chronic Illness Allowance); livelihood-affected workers; recipients of the Farmers and Fishermen's Insurance Scheme; non-beneficiary applicants approved by rural committees Only Samurdhi (existing recipients) received LKR 5,000 on top of their existing payments. Farmers and Fishermen's Insurance Scheme recipients received LKR3,000. For others (e.g., disability/elders), LKR5,000 was the total amount received, regardless of level of benefit before	5,739,364 (individuals)	Two 'one-off' transfers of LKR5,000, totalling LKR10,000
2	Social assistance	Emergency cash transfer	LKR 5,000 Relief Allowance (Oct. 2020)	Self-quarantined families received an allowance worth LKR5,000	2	New intervention	Quarantined families who lost their livelihoods	1,409,578 (households)	LKR5,000
3	Social assistance	Emergency in-kind transfers	LKR10,000 relief food bags (Nov. 2020)	Self-quarantined families received two relief bags containing LKR5,000 worth of dry food items	1	New intervention	Vulnerable families under self-quarantine in their homes due to the second wave of the COVID-19 pandemic	417,427 beneficiaries	LKR10,000
4	Social assistance	Subsidies	Special Loan Scheme for the Festive Season (Apr. 2021)	Special loan scheme for a maximum of LKR50,000 at a 0.625% monthly interest rate repayable over 11 months	-	New intervention	Public- and private-sector salaried employees; daily wage earners with State Bank accounts; government pensioners and Samurdhi beneficiaries	-	Amount depends on the earnings of the beneficiaries
5	Labour market/ employment protection	Loan deferral for self-employed workers; subsidised credit for payroll	Saubagya fiscal and financial concessions for businesses affected by COVID-19 (Jul. 2020)	Moratorium on lease instalments for self-employed persons, including owners of three-wheelers, trucks, school buses and vans, and self-employed motorists	6	New intervention	Self-employed businesses and individuals having lost jobs or income due to COVID-19. Economic sectors included: (i) tourism, export-related businesses affected by lockdown; (ii) small and medium-sized enterprises (SMEs); (iii) foreign currency earners having to repay loans in foreign currency and negatively affected; and (iv) importers of pharmaceutical drugs, medical equipment, food, fertiliser and essential raw materials, machinery and equipment	1,500,000 (households)	Debt moratorium (capital and interest). working capital loan at 4 per cent interest per annum
6	Labour market/ employment protection	Loan deferral for affected workers	Suspension of loan payment deductions from public-sector employees (Mar. 2020)	Loan payment deductions from salaries of public employees will be suspended until further notice	-	New intervention	Public-sector employees	1,500,000 (households)	-

Source: IPC-IG (2021).

The evidence concerning social protection responses in this document is based primarily on information and data compiled in the International Policy Centre for Inclusive Growth (IPC-IG) *Mapping of Social Protection Responses to COVID-19 in the Global South* (IPC-IG 2021). This research combines information on social assistance, social insurance and labour market policies adopted by national governments in response to the COVID-19 pandemic.<sup>3</sup> The mapping incorporates information from many different sources, most notably national governments, but also other sources compiling COVID-19 responses, such as the World Bank (Gentilini, Almenfi, and Norton 2020), the IMF (2021) and the International Labour Organization (ILO 2021). Information from the IPC-IG’s mapping of social protection responses is complemented by secondary sources (reports and newspaper articles, among others), and direct personal communication between IPC-IG researchers and affiliates and the GoSL and other relevant stakeholders. A of the summary main responses included in the mapping is presented in Table 1.

## 2.1 Social assistance

### Initial responses: March–May 2020

The GoSL announced on 30 March 2020 a first package of relief measures to be implemented using the structures of pre-existing social programmes. The non-contributory programmes adjusted under this initiative were: *Samurdhi*, the Senior Citizens’ Allowance, the Disability Allowance, the Kidney Disease Allowance, and the Farmers and Fishermen’s Insurance Scheme.

The main component of the relief package consisted of **cash transfers (1)**—usually worth LKR5,000—for both new and existing beneficiaries. The LKR5,000 cash transfer programme was carried out in two rounds, in April and May 2020. In total, 5.4 million transfers were delivered in April 2020 during the first round of emergency cash transfer (ECTs), which was expanded to almost 5.7 million transfers in the second round (May 2020), following appeals from previously excluded households (GoSL 2020a). The response was noteworthy, given that it was announced a mere 10 days after the imposition of the curfew and reached an estimated 66 per cent of Sri Lankan households (UNICEF Sri Lanka 2020c).

The government adjusted its largest cash transfer programme, ***Samurdhi***, which targets poor households, aiming to alleviate

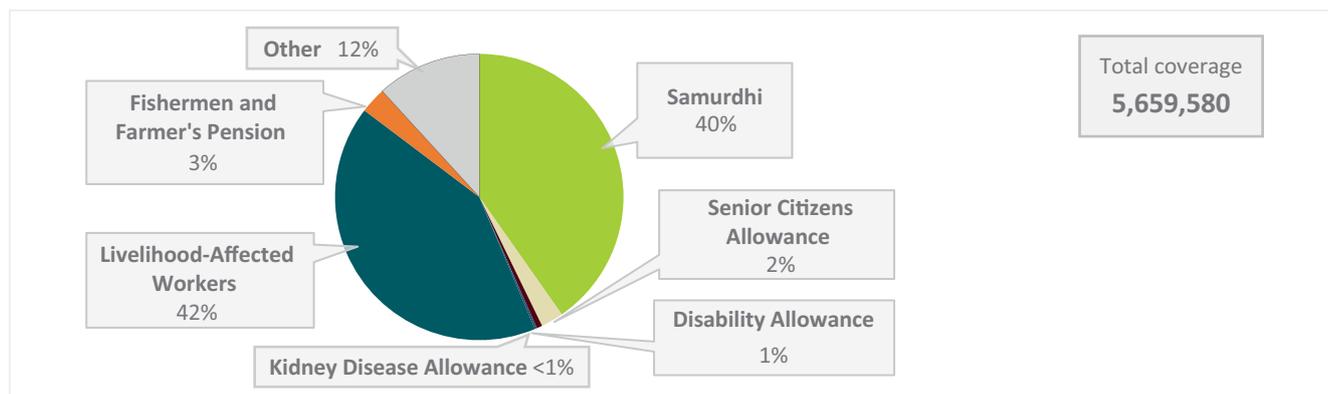
poverty. The coverage of the programme was increased by automatically providing an additional ECT of LKR5,000 to all beneficiary families and those on the waiting list (totalling 600,339 households). Other existing social assistance programmes were also expanded to ensure social protection reached the most vulnerable. The **Senior Citizens’ Allowance**, which supports elderly people (70 years old and older) in low-income households, saw both a top-up for 416,764 existing recipients—from LKR2,000 to LKR5,000—as well as an extension of the benefit (LKR5,000) to all elderly people on the waiting list (142,345 recipients) (GoSL 2020a). Similarly, key programmes were expanded for people with disabilities enrolled in the **Disability Allowance** programme, as well as patients with chronic kidney disease enrolled in the **Kidney Disease Allowance**. People on the waiting lists for these programmes were also admitted and received the benefit of LKR5,000 (GoSL 2020b). Finally, the 160,675 farmers and 4,600 fishermen enrolled in the **Farmers and Fishermen’s Insurance Scheme** received an emergency cash grant—in addition to their usual pension—worth LKR3,000.

**Rural committees set up at the divisional level were responsible for identifying self-employed workers and other individuals whose income/livelihoods were affected by the pandemic and the lockdown.** Potential beneficiaries eligible for the ECT were required to fill out an application form and submit it to the rural committee, which would then decide if the applicant was eligible or not. The speed at which Sri Lanka managed to register new recipients and make payments was remarkable, especially given the absence of strong operational and management information systems. Local government officers were rapidly mobilised to register self-employed workers, while payments were initially made to new recipients, as well as those who were normally paid via the Post Office, at their homes. The low number of COVID-19 infections nationwide indicates that registrations and payments were made without further spreading the disease (IPC-IG 2021; GoSL 2020a).

Figure 3 presents the coverage of the main ECTs in Sri Lanka by programme, which covered almost 5.7 million individuals. The figure shows that ECTs for workers whose livelihood was affected<sup>4</sup> and *Samurdhi* beneficiaries made up approximately 80 per cent of all transfers.

## FIGURE 3

Coverage of main emergency cash transfers for COVID-19 relief in Sri Lanka, May 2020



Note: Data represent coverage during the second wave of ECTs in May 2020. Unemployed graduates and preschool teachers have been removed from the original.

Source: UNICEF Sri Lanka (2020c; Table 1), based on administrative data shared by the GoSL.

## 2.2 Later ECT rounds: October 2020 to August 2021

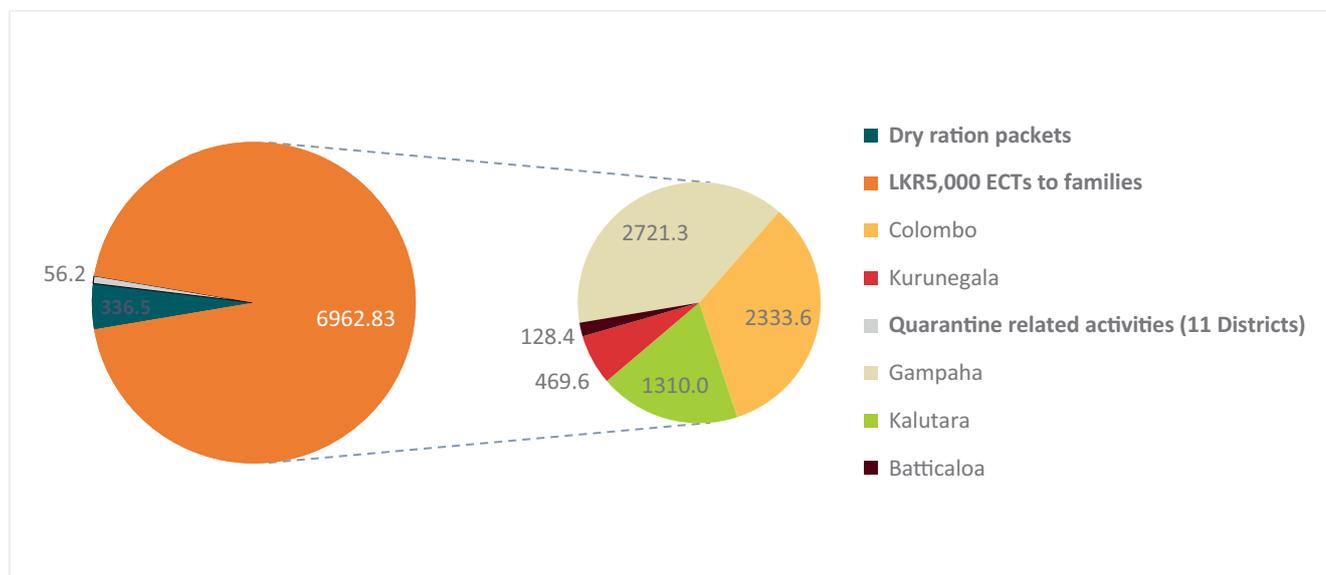
After initial ECTs were delivered in April and May 2020, further rounds of assistance from the GoSL occurred in October 2020, April 2021 and, most recently, August 2021 (though a smaller benefit amount). Alongside containment measures adopted following the surge in COVID-19 cases in October 2020, the GoSL announced several social assistance measures to offset the decrease in household income. These measures included: the **removal of import duties on essential commodities** such as dhal, canned fish, onions and sugar, to reduce the price of these commodities to final consumers; two **relief food bags worth LKR10,000 (3)** containing dry food items, reaching 417,427 beneficiaries in December 2020 (IPS 2021); and a **LKR5,000 relief allowance (2)** from the Ministry of Social Empowerment—worth LKR7.3 billion—to low-income families under self-quarantine who had lost their livelihoods due to

lockdown measures (including teachers, private bus drivers and conductors, Ayurveda doctors not in government service, handicraftsmen, women receiving maintenance, small-scale tea estate owners, provincial reporters) (GoSL 2020c).

Figure 4 presents a summary of the LKR7.3 billion of support in October 2020, divided between LKR5,000 transfers for families (LKR6.96 billion), dry ration packets (LKR336.5 million) and LKR56.2 million for other quarantine-related activities. The pie chart on the right provides a breakdown of the distribution of ECTs by district, with assistance being provided to five districts in total (Gampaha, Colombo, Kalutara, Kurunegala and Batticaloa). To be clear, these measures focused on districts affected by lockdowns at that time, and the sum spent (LKR7.3 billion) has since increased.

### FIGURE 4

October 2020 government social protection response, in LKR (millions)



Source: GoSL (2020c).

Two additional rounds of ECTs took place in April and August 2021. On 12 April, the Prime Minister announced LKR5,000 during the Sinhala and Tamil New Year to low-income and *Samurdhi* families affected by the COVID-19 epidemic. The New Year allowance was expected to reach to 4 million families, including: 1,700,000 *Samurdhi* recipient families; 780,000 families on the *Samurdhi* waiting list; 726,000 families that filed appeals; 626,000 families receiving the Senior Citizens' Allowance; 123,000 families receiving the Disability Allowance; and 44,000 families with kidney patients, and families who had lost their livelihood, based on the recommendations of the rural committees and divisional secretaries (Colombo Page 2021a). Finally, in August a one-time allowance of LKR2,000 was given to low-income families whose livelihoods had been affected by the pandemic. However, the cash allowance was given only to those who were not recipients of existing cash assistance programmes.

#### Coverage and adequacy of social assistance responses

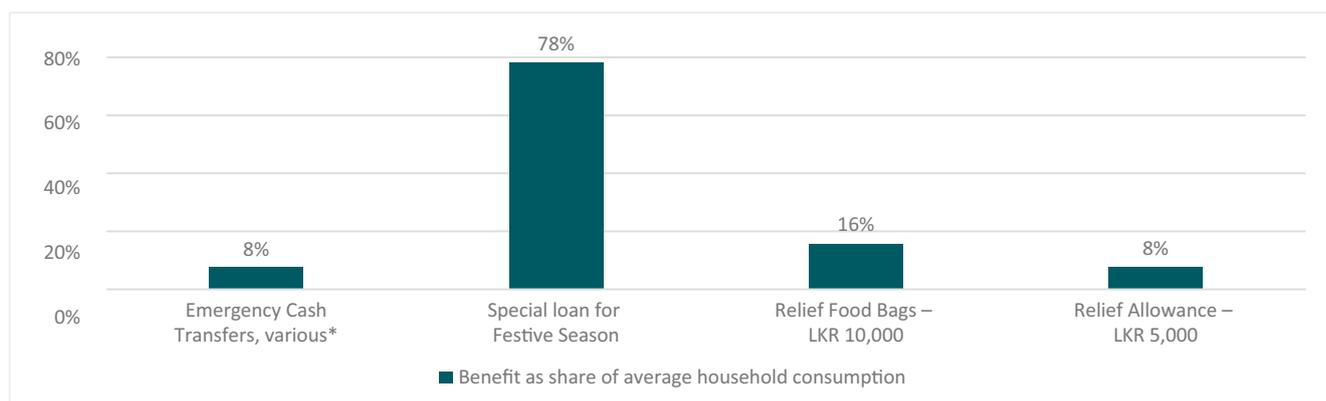
Based on estimates by UNICEF Sri Lanka (2020c) for the first round of transfers, coverage of the main ECTs was found to be

quite high, especially among the poorest decile (approximately 97 per cent), with the coverage of emergency assistance reaching an estimated 66 per cent of households. Nevertheless, a considerable proportion of the population remained excluded, including: (i) 31 per cent of households in the third-poorest decile; (ii) 31 per cent of households in the middle-income deciles; (iii) over 30 per cent of children under 10 years old; and (iv) 30 per cent of those aged 70 or over (UNICEF Sri Lanka 2020c, 15).

Despite quite encouraging results in terms of coverage, the impact of ECTs on household consumption is less clear, given the limited transfer value (LKR5,000) provided to most recipients. Figure 5 shows that ECTs worth LKR5,000 amount to approximately 8 per cent of average household expenditure. Most beneficiaries received transfers worth between 8 per cent and 16 per cent of average household monthly consumption; therefore, **issues of improving adequacy** need to be considered.

**FIGURE 5**

Benefit value (adequacy) of selected programmes and responses in Sri Lanka Source: IPC-IG (2021)



Note: \*Various ECTs include: Samurdhi, Senior Citizens' Allowance, Disability benefit, Kidney Disease benefit, and ECTs for workers whose livelihood was affected.

### 2.3 Social insurance and labour market responses

The GoSL planned to deliver pensions to 645,179 public-sector recipients, as well as to **double the benefits provided by the National Insurance Trust Fund** (also known as *Agrahara*, operating under the Ministry of Finance) for key workers—i.e. health care, police and civil security professionals (IPC-IG 2021; Gentilini et al. 2020; ILO 2020). Moreover, loan payment deductions from salaries to public-sector employees were suspended until further notice in March 2021 (6).

In terms of employment protection, the GoSL pledged to support 1.5 million self-employed workers affected by containment measures, such as owners of three-wheelers, school buses and other vehicles used for self-employment, through a **six-month moratorium on loan repayments (5)** (IPC-IG 2021; Gentilini et al. 2020). Likewise, the government instituted a **six-month moratorium on bank loans** for the tourism, garment, plantation and IT sectors, related logistics providers and small and medium-sized industries. There was also a **three-month moratorium on low-value personal banking and leasing loans**, and a **cap on the interest rates for credit card debits**, accompanied by a **reduction in the minimum monthly repayment value** (IMF 2020).

In December 2020, the GoSL agreed with the State Bank in Sri Lanka to offer a **special loan scheme during the festive season (4)**, allowing a maximum of LKR50,000 at a 0.625 per cent monthly interest rate, repayable over 11 months, starting in January 2021. The eligible groups included public- and private-sector salaried employees and daily wage earners with State Bank accounts, including government pensioners and *Samurdhi* beneficiaries. The amount of the loan depends on the beneficiary's earnings: LKR50,000 for those whose income is over LKR50,000 per month; LKR25,000 for incomes between LKR25,000 and LKR50,000; and LKR10,000 for incomes below LKR25,000. Loans are to be repaid by employees through monthly instalments from January to October 2021. The programme is implemented by the Department of Pensions and the *Samurdhi* Bank (IPC-IG 2021).

### 3 Conclusions

This brief has reviewed the social protection interventions adopted by the GoSL between March 2020 and the time of publication, in response to the lives and livelihoods lost as a result of COVID-19. The GoSL was swift to channel ECTs through existing programmes such as *Samurdhi*,

the Senior Citizens' Allowance and the Farmers and Fishermen's Insurance Scheme. The GoSL also initiated new interventions that targeted businesses (fiscal and financial concessions), vulnerable and quarantined families (emergency food and cash transfers), and the entire population (brief subsidies on essential foodstuffs). Moreover, some existing programmes extended their beneficiary coverage due to the pandemic. For instance, *Samurdhi* increased the total number of its beneficiaries by 250,000 people in 2020 (MoF 2020, 108).

While the main scope here is to map the government's interventions in response to COVID-19, it is important nonetheless to also examine the general state of flagship social protection programmes that pre-date the pandemic. As Table 2 shows, most programmes experienced an increase or no change in expenditure between 2019 and 2020 (with a significant increase for *Samurdhi* of almost LKR8 billion). However, there was also a slight decrease for *Poshana Malla*, and significant budget reductions for school nutrition programmes and *Thripasha* (more than 50 per cent and almost 50 per cent, respectively). While some of these budget reductions might be partially explained by movement restrictions caused by the pandemic (e.g. school-related programmes) or the introduction of substitute programmes (e.g. dry ration packets and subsidies on foodstuffs), it remains important to monitor the well-being of beneficiary households that have potentially experienced a loss of support due to the change in policy, especially in the case of children and pregnant women/new mothers.

Lastly, this brief calls for continued assessment of experiences and policy lessons learned from the government response to COVID-19. This involves assessing the various interventions adopted by the GoSL, and what can be used or improved for future social protection policy in Sri Lanka. Potential improvements should address the following gaps: the lack of centralised decision-making and clear communication to the public; the lack of available data; and the creation of shock-responsive social protection systems that are designed to protect people during similar shocks. Investing in these improvements would require increased assessment of the effectiveness of delivery mechanisms, the accuracy of targeting mechanisms and, more broadly, how both new interventions and existing programmes can be incorporated into a social protection strategy for Sri Lanka that considers both life-cycle and shock-responsiveness considerations.

**TABLE 2**

Government spending on flagship social protection programmes, 2019 and 2020

Flagship social protection programmes	Social protection category	2019 budget (LKR millions)	2020 budget (LKR millions)
Samurdhi	Social assistance	44,660	52,434
Elderly Assistance Programme/ Senior Citizens' Allowance	Social assistance	9,856	9,868
Thriposha	Social assistance	2,187	1,112
Poshana Malla	Social assistance	5,279	4,751
School nutrition programmes	Social assistance	5,063	2,299
Public pensions	Social insurance	227,670	257,833

Source: MoF (2020, 380: Table 31).

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2. Informal employment represented 57.4 per cent of all employment, according to the 2019 labour force survey conducted by the Department for Census and Statistics (CSL 2021, 75), while the World Bank (2020, 48: Table A.3) estimated it at 68.0 per cent in 2017.

3. Although the brief focuses on government responses, additional (and smaller) social assistance interventions for vulnerable groups have

been provided by international organisations—notably, tuition fee waivers funded by the World Bank for children from poorer families (Kanda 2021). UN Women—with support from the Government of Australia and in partnership with local non-governmental organisation Viluthu—provided emergency relief packages, including dry rations, to 1,300 women-headed households in Jaffna and Kilinochchi districts (UN Women 2021a).

4. This includes: casual workers; self-employed persons; employees of small firms or businesses who lost their job or income; and remittance recipients who did not receive regular payments.

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*The views expressed in this brief are the authors' and not necessarily those of the Government of Brazil or the United Nations Development Programme.*

## **International Policy Centre for Inclusive Growth**

SBS, Quadra 1, Bloco J, Ed. BNDES, 13º andar  
70076-900 Brasília, DF - Brazil  
Telephone: +55 61 2105 5000

[ipc@ipc-undp.org](mailto:ipc@ipc-undp.org) ▪ [www.ipcig.org](http://www.ipcig.org)

