GOVERNMENTS RELY ON income assistance and social care services to protect their most vulnerable citizens. But around the globe, many social safety nets are fraying. The COVID-19 pandemic exacerbated homelessness and other economic disparities in many countries.

In the face of rising costs and client expectations, agencies are reexamining how they and their partners can provide equitable, seamless, and effective social services. They’re shifting their focus to prevention—attacking problems at their root, intervening early to keep small issues from growing, and creating pathways to greater self-sufficiency and resilience. The goal is less to patch up the safety net than to reweave it entirely.¹

**Trend drivers**

- **The COVID-19–induced economic disruption** has left many segments of the global population newly vulnerable, particularly millions of low-wage workers as well as younger employees and women in general.²

- **Demand for social care is growing** due to aging populations, rising homelessness, and food insecurity as well as increased prevalence of mental health issues and drug abuse.

- **Declining job quality** over the last few decades has left more workers in low-wage jobs that provide few or no benefits, leaving them to turn to social care agencies for help with basic needs.³

- **Many governments can’t afford to strengthen their social safety nets** without sacrificing other important priorities.
**Trend in action**

Many policymakers and service providers are shifting their emphasis from treatment to prevention. They’re creating more “wraparound” social services that integrate access to income assistance, child care, health services, housing aid, and other supports to help clients in crisis achieve stability more quickly. They’re investing in programs intended to boost the resilience of individuals and communities. And they’re looking at ways to plug the gaps in the safety net to accommodate new ways of working.

**USING DATA TO DESIGN MORE EFFECTIVE INTERVENTIONS**

Social care agencies often see their clientele through a program-centric lens, an inevitable byproduct of the way in which various programs have been established and run separately rather than as integrated parts of the safety net. Yet this approach fails to acknowledge the complexity of actual human beings, who may have multiple needs that cut across artificial program boundaries. Fortunately, this blinkered view is broadening, thanks to innovative efforts to integrate data across multiple sources with an eye toward early intervention.

In the United States, the state of Oregon uses data integration to more fully understand the impact of its programs and services on children’s lives. The Oregon Child Integrated Dataset securely combines and analyzes data from five state agencies—the Department of Education, Early Learning Division, Department of Human Services, Oregon Health Authority, and Oregon Youth Authority—to identify opportunities to produce more positive outcomes for children.

Similarly, in the United Kingdom, the Hillingdon London Borough Council’s AXIS project aims to safeguard children at risk of exploitation. From October 2017 to January 2021, using advanced technology to gather and synthesize local information, AXIS identified 314 children exposed to exploitation. The data gathered also informs meaningful interventions delivered by skilled practitioners.

Human-centered design (HCD) places people—their beliefs, values, feelings, and ambitions—at the center of the design and delivery of public programs. HCD flips traditional social-service approaches: Instead of defining operational goals and then fitting them to client needs, HCD begins with an effort to understand key stakeholders and identify the root causes of their problems. Once providers understand these unmet needs, they can use the resulting insights to improve service design and delivery.

Social care agencies are beginning to use HCD in many programs. The US Medicaid program uses it to consider the factors that keep its clients from renewing their benefits and retaining their health coverage. Labor departments use HCD to understand the experiences of persons applying for unemployment benefits, reducing opportunities for error, and the consequent burden on caseworkers. Child support agencies use it to better understand why some parents struggle to meet their support obligations and to find ways to help them.

The Government of Abu Dhabi’s Social Support Program for low-income families has deployed ethnographic research and digital design principles to enable self-service for financial and nonfinancial support. Its design guaranteed uninterrupted support throughout the COVID-19 pandemic while ensuring service equity for rural and remote communities.
Recasting the social safety net

**Americas**

**California, US**
California’s Lava Mae hosts monthly pop-up care villages, wherein multiple homeless service stations are collocated in a public space.

**Ontario, Canada**
Ontario provided reloadable Visa payment cards to low-income recipients without bank accounts.

**EMEA**

**Denmark**
The Danish Ministry of Employment offers tailored experiences by collocating services and assigning a coordinating caseworker to each citizen.

**South Africa**
The South African Social Security Agency (SASSA) debit card enables electronic receipt of benefits.

**The United Arab Emirates**
The UAE’s Masarra card services provide online benefits and discounts for senior citizens.

**The United Kingdom**
The Troubled Families Programme and Changing Futures Programme cater to families and adults (respectively) in crisis with a “whole person” approach to address clients’ unique needs.

**Asia-Pacific**

**Australia**
Services Australia uses digital mapping of user life events via MyGov and Centerlink portal to improve navigation of government services and supports.

**India**
India’s biometric universal ID Aadhaar-enabled payment system (AePS) helped transfer ₹72 billion to 800 million citizens directly into their bank accounts in FY20–21.

**New Zealand**
The Strengthening Families and Whānau Ora initiative is a Māori-focused program to help families navigate interagency casework.

**Singapore**
Singapore established one-stop-shop Social Service Offices near low-income populations.
THE IMPACT GENOME PROJECT: CODING PROGRAM “GENES”

Mission Measurement, a US-based firm that advises companies, nonprofits, and governments on social outcome measurement, created the Impact Genome Project (IGP) in an effort to standardize impact data and make it actionable. By standardizing data, the database technology platform offers benchmarking, prediction, and evidence synthesis.23

The IGP’s work is based on the idea that most social programs share identifiable program design features or “genes” that can be standardized, coded, quantified, and analyzed. Agency administrators have long struggled to benchmark and evaluate programs that serve unique client populations; without reliable standards, such comparisons are always suspect.

By generating standardized and comparable data, the IGP aims to help answer questions such as, “Why do some programs work better than others?” Comparison and benchmarking can help identify better solutions and thus guide both public policy and philanthropy more effectively.

EMBRACING INTEGRATED SUPPORTS

Most social care programs are intended to provide individuals and families with temporary assistance and benefits to get them through rough patches. But it’s usually beyond their scope to attack the source of clients’ problems or address the connections among multiple challenges. To get around these limitations, some governments are establishing holistic, all-in-one supports to address physical, mental, economic, and social needs.

The United Kingdom’s Ministry of Housing, Communities and Local Government, for instance, has adopted a multiagency approach to match clients with services appropriate to their unique needs. Its Troubled Families Programme provides each participating family with a caseworker who coordinates with various support agencies as needed, while its Changing Futures program relies on cross-sector partnerships to deliver coordinated and integrated services for individuals.24

New Zealand’s government is improving service coordination through its Strengthening Families program as well as its Māori-focused Whānau Ora initiative. Both assign caseworkers to families that use more than one social service to help them navigate available programs and ensure appropriate access to wraparound support services.

Results suggest that clients using these services have enjoyed better employment outcomes, greater stability, and more independence.41

Denmark’s Ministry of Employment service delivery model factors in each person’s ability to work. Those deemed job-ready and fit to work in their assessments receive traditional caseworkers. Those whose return-to-work timelines are more extended or whose situations are more complex are assigned coordinating caseworkers who work with other government agencies to ensure access to the most appropriate suite of services. Coordinating caseworkers aim to give each applicant a unique combination of employment assistance, social services, and benefits.15

Technology is helping government create integrated care journeys, while also supporting self-navigation for those with multiple needs. Online portals called “community resource engines,” for example, can suggest suites of complementary resources for residents seeking help with housing, food, employment, or other issues. These portals use artificial intelligence to prescreen applicants, direct them to the appropriate benefits, and trace the results from end to end.46 They can track users’ social determinants of health, give community partners tools to manage
referrals for their services, help caseworkers coordinate care, and allow residents to provide feedback on their circumstances.

**INCREASING COMMUNITY RESILIENCE**

Policymakers and providers increasingly agree that resilience is an all-important goal for social care. That requires investment in communities and natural support networks, whether extended families, faith communities, local nonprofits, or neighborhood groups.

Family and Natural Supports (FNS) programs focus on strengthening relationships between young people and adults who care about them—a parent, grandparent, aunt, uncle, sibling, neighbor, teacher, or coach—through counseling, mediation, or skill-building. Relationships with the right individuals can help keep young people connected to schools and communities and create networks they can draw upon throughout their lives.

Canada’s 2016 Without a Home study found that more than three-quarters of 1,103 homeless youths surveyed cited poor relationships with their parents as a key reason for leaving home. More than 70% of them still contacted a family member at least once a month, however, and wanted to improve their relationships with their families.

Covenant House in Toronto operates an FNS program that offers intensive clinical support and case management to help young people reconnect with family members safely.

Governments looking to bolster community resilience also seek data about what’s going well for communities. Too often, the focus is on problem areas: lost jobs, criminal convictions, homelessness, and hunger. Less attention is paid to how many elderly people are driven to medical appointments by volunteer drivers or how many previously unemployed persons find stable jobs.

Strengths-based data collection considers community assets and the positive aspects of people’s lives. Shifting the focus to what’s right can identify untapped or underused community resources and assets. In Whitesburg, Kentucky, for example, a community partnership called the Letcher County Culture Hub builds on local assets to improve community capacity and wealth. The organization has helped start new local businesses and expand others; helped local artists, farmers, teachers, and others use their skills to generate revenue; and revived two local, money-making cultural institutions: a square dance and a bluegrass festival.

By giving communities and families resources they can use to care for themselves, social care agencies can nurture resilience rather than dependency—and help communities better withstand future shocks.

**Moving forward**

The pandemic has presented a once-in-a-generation opportunity to create a social care system designed for today’s needs. Here are a few steps that can help leaders achieve long-term success:

- **Free caseworkers from repetitive tasks.** Social care agencies should invest in intelligent technology that can handle many of the tasks that take up a large portion of the typical agency worker’s day, such as data entry and report writing, and introduce self-service models that clients can navigate and use on their own behalf. These steps allow caseworkers to spend more time working directly with individuals and families on their specific needs.

- **Embrace a human-centered mindset.** Social care agencies should regularly bring clients into the room with providers, caseworkers, and other stakeholders to engage in rapid prototyping, testing, and iteration of
solutions. This deep collaboration can accelerate the development of useful solutions and eliminate unworkable ideas before costly investments are made. To scale its adoption, agency leaders should adapt their procurement approaches to facilitate widespread use of HCD.

- **Adopt an ecosystem approach.** Social care programs should serve as stewards for the entire care ecosystem, fortifying natural support networks and strengthening the resilience of the communities they serve. Community resource engines can provide valuable insight into the broad range of local supports available and highlight gaps.

- **Make data and evidence actionable.** Data and evidence should guide government organizations to the most effective solutions for social care. Evidence about performance should inform agency decisions, while real-time data on client outcomes and system performance would allow agencies to “fail and learn quickly” as they innovate.

- **Invest in outcomes and remunerate based on results.** To truly improve the well-being of families and communities, social care agencies should put outcomes at the center of program design, procurement, delivery, and evaluation.
Stitching together data to deliver benefits to over a million vulnerable citizens

COVID-19 put the focus on meaningful data integration at human services agencies to deliver benefits for those badly in need. The efforts of the Department of Social Development in São Paulo were critical to delivering timely benefits to vulnerable individuals and families.

Even before the pandemic, we had over 150 secretaires in the state of São Paulo, Brazil, come together each week to discuss how they could better work together. So, when the pandemic struck, we quickly accelerated our previous efforts at data integration, and were able to turn volumes of data into a seamless and higher-quality experience for citizens. By stitching together data from 2,000+ branches of information across agencies, the Department of Social Development in São Paulo was able to deliver benefits to over 1 million vulnerable citizens. The Bolsa do Povo is the largest social assistance program in the history of the state, unifying state income transfer actions, simplifying the sharing of information and the transfer of amounts corresponding to each beneficiary. Our team used technology, smart product design, and automated processes to redesign the “front door,” making it a customized entrance that combines existing citizen information with behind-the-scenes automation. We made it easy for people to know what social programs they’re entitled to with just a few clicks.

Our department also leveraged technology to make badly needed benefits available to those who did not hold a valid identity. With the help of third parties, we were able to create a system that helped to intelligently manage the free distribution of three meals a day via the 59 restaurants of the Bom Prato chain to homeless individuals and families. The app also made it possible for us to register homeless people and their identification details through a card with a QR code—a kind of barcode that can be scanned by the cell phone camera. We then printed this unique QR code on a PVC card and delivered it to beneficiaries, who could then use these cards to obtain meals.

Our vision going forward is to leverage and integrate systems and data using powerful tech tools to continuously improve frontline practice. For us, this means collaboration between more agencies, development of tailored programs, and bringing more eligible beneficiaries into these programs.


17. Sills et al., *Transforming social care*.


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