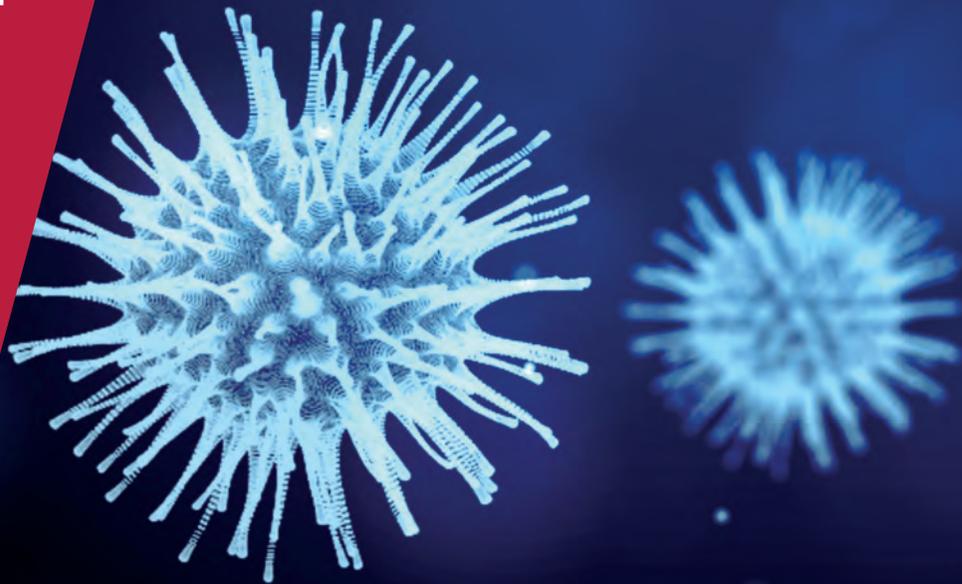


**CENTRE FOR  
ECONOMIC  
POLICY  
RESEARCH**

**CEPR PRESS**



**COVID ECONOMICS**  
VETTED AND REAL-TIME PAPERS

**ISSUE 42**  
19 AUGUST 2020

**DAILY INFLATION**

Santiago E. Alvarez and Sarah M. Lein

**HOW TO GET MASKS FROM CHINA**

Andreas Fuchs, Lennart Kaplan,  
Krisztina Kis-Katos, Sebastian S. Schmidt,  
Felix Turbanisch, and Feicheng Wang

**WHAT IF IMMUNITY WANES?**

M. Alper Çenesiz and Luís Guimarães

**DO BORDER CONTROLS HELP?**

Matthias Eckardt, Kalle Kappner and  
Nikolaus Wolf

**IMF RESPONSES TO COVID**

Kevin P. Gallagher and  
Franco Maldonado Carlin

**LABOUR MARKETS IN THE  
NORDIC COUNTRIES**

Steffen Juranek, Jörg Paetzold, Hannes  
Winner and Floris Zoutman

---

# Covid Economics

## Vetted and Real-Time Papers

*Covid Economics, Vetted and Real-Time Papers*, from CEPR, brings together formal investigations on the economic issues emanating from the Covid outbreak, based on explicit theory and/or empirical evidence, to improve the knowledge base.

**Founder:** Beatrice Weder di Mauro, President of CEPR

**Editor:** Charles Wyplosz, Graduate Institute Geneva and CEPR

**Contact:** Submissions should be made at <https://portal.cepr.org/call-papers-covid-economics>. Other queries should be sent to [covidecon@cepr.org](mailto:covidecon@cepr.org).

Copyright for the papers appearing in this issue of *Covid Economics: Vetted and Real-Time Papers* is held by the individual authors.

### **The Centre for Economic Policy Research (CEPR)**

The Centre for Economic Policy Research (CEPR) is a network of over 1,500 research economists based mostly in European universities. The Centre's goal is twofold: to promote world-class research, and to get the policy-relevant results into the hands of key decision-makers. CEPR's guiding principle is 'Research excellence with policy relevance'. A registered charity since it was founded in 1983, CEPR is independent of all public and private interest groups. It takes no institutional stand on economic policy matters and its core funding comes from its Institutional Members and sales of publications. Because it draws on such a large network of researchers, its output reflects a broad spectrum of individual viewpoints as well as perspectives drawn from civil society. CEPR research may include views on policy, but the Trustees of the Centre do not give prior review to its publications. The opinions expressed in this report are those of the authors and not those of CEPR.

Chair of the Board

Sir Charlie Bean

Founder and Honorary President

Richard Portes

President

Beatrice Weder di Mauro

Vice Presidents

Maristella Botticini

Ugo Panizza

Philippe Martin

Hélène Rey

Chief Executive Officer

Tessa Ogden

---

# Editorial Board

**Beatrice Weder di Mauro**, CEPR

**Charles Wyplosz**, Graduate Institute Geneva and CEPR

**Viral V. Acharya**, Stern School of Business, NYU and CEPR

**Abi Adams-Prassl**, University of Oxford and CEPR

**Guido Alfani**, Bocconi University and CEPR

**Franklin Allen**, Imperial College Business School and CEPR

**Michele Belot**, European University Institute and CEPR

**David Bloom**, Harvard T.H. Chan School of Public Health

**Nick Bloom**, Stanford University and CEPR

**Tito Boeri**, Bocconi University and CEPR

**Alison Booth**, University of Essex and CEPR

**Markus K Brunnermeier**, Princeton University and CEPR

**Michael C Burda**, Humboldt Universitaet zu Berlin and CEPR

**Aline Bütikofer**, Norwegian School of Economics

**Luis Cabral**, New York University and CEPR

**Paola Conconi**, ECARES, Universite Libre de Bruxelles and CEPR

**Giancarlo Corsetti**, University of Cambridge and CEPR

**Fiorella De Fiore**, Bank for International Settlements and CEPR

**Mathias Dewatripont**, ECARES, Universite Libre de Bruxelles and CEPR

**Jonathan Dingel**, University of Chicago Booth School and CEPR

**Barry Eichengreen**, University of California, Berkeley and CEPR

**Simon J Evenett**, University of St Gallen and CEPR

**Maryam Farboodi**, MIT and CEPR

**Antonio Fatás**, INSEAD Singapore and CEPR

**Francesco Giavazzi**, Bocconi University and CEPR

**Christian Gollier**, Toulouse School of Economics and CEPR

**Timothy J. Hatton**, University of Essex and CEPR

**Ethan Ilzetzki**, London School of Economics and CEPR

**Beata Javorcik**, EBRD and CEPR

**Sebnem Kalemli-Ozcan**, University of Maryland and CEPR Rik Frehen

**Tom Kompas**, University of Melbourne and CEBRA

**Miklós Koren**, Central European University and CEPR

**Anton Korinek**, University of Virginia and CEPR

**Philippe Martin**, Sciences Po and CEPR

**Warwick McKibbin**, ANU College of Asia and the Pacific

**Kevin Hjortshøj O'Rourke**, NYU Abu Dhabi and CEPR

**Evi Pappa**, European University Institute and CEPR

**Barbara Petrongolo**, Queen Mary University, London, LSE and CEPR

**Richard Portes**, London Business School and CEPR

**Carol Propper**, Imperial College London and CEPR

**Lucrezia Reichlin**, London Business School and CEPR

**Ricardo Reis**, London School of Economics and CEPR

**Hélène Rey**, London Business School and CEPR

**Dominic Rohner**, University of Lausanne and CEPR

**Paola Sapienza**, Northwestern University and CEPR

**Moritz Schularick**, University of Bonn and CEPR

**Paul Seabright**, Toulouse School of Economics and CEPR

**Flavio Toxvaerd**, University of Cambridge

**Christoph Trebesch**, Christian-Albrechts-Universitaet zu Kiel and CEPR

**Karen-Helene Ulltveit-Moe**, University of Oslo and CEPR

**Jan C. van Ours**, Erasmus University Rotterdam and CEPR

**Thierry Verdier**, Paris School of Economics and CEPR

---

# Ethics

*Covid Economics* will feature high quality analyses of economic aspects of the health crisis. However, the pandemic also raises a number of complex ethical issues. Economists tend to think about trade-offs, in this case lives vs. costs, patient selection at a time of scarcity, and more. In the spirit of academic freedom, neither the Editors of *Covid Economics* nor CEPR take a stand on these issues and therefore do not bear any responsibility for views expressed in the articles.

## Submission to professional journals

The following journals have indicated that they will accept submissions of papers featured in *Covid Economics* because they are working papers. Most expect revised versions. This list will be updated regularly.

<i>American Economic Review</i>	<i>Journal of Econometrics*</i>
<i>American Economic Review, Applied Economics</i>	<i>Journal of Economic Growth</i>
<i>American Economic Review, Insights</i>	<i>Journal of Economic Theory</i>
<i>American Economic Review, Economic Policy</i>	<i>Journal of the European Economic Association*</i>
<i>American Economic Review, Macroeconomics</i>	<i>Journal of Finance</i>
<i>American Economic Review, Microeconomics</i>	<i>Journal of Financial Economics</i>
<i>American Journal of Health Economics</i>	<i>Journal of International Economics</i>
<i>Canadian Journal of Economics</i>	<i>Journal of Labor Economics*</i>
<i>Econometrica*</i>	<i>Journal of Monetary Economics</i>
<i>Economic Journal</i>	<i>Journal of Public Economics</i>
<i>Economics of Disasters and Climate Change</i>	<i>Journal of Public Finance and Public Choice</i>
<i>International Economic Review</i>	<i>Journal of Political Economy</i>
<i>Journal of Development Economics</i>	<i>Journal of Population Economics</i>
	<i>Quarterly Journal of Economics*</i>
	<i>Review of Economics and Statistics</i>
	<i>Review of Economic Studies*</i>
	<i>Review of Financial Studies</i>

(\*) Must be a significantly revised and extended version of the paper featured in *Covid Economics*.

# The role of IMF in the fight against COVID-19: The IMF COVID RESPONSE INDEX

Kevin P. Gallagher<sup>1</sup> and Franco Maldonado Carlin<sup>2</sup>

Date submitted: 4 August 2020; Date accepted: 4 August 2020

*This paper establishes a methodology that can be used to measure the behavior of International Monetary Fund (IMF) program design and eventually the outcomes of IMF programs in response to the COVID-19 crisis. We create an IMF COVID RECOVERY INDEX by coding IMF programs based on the extent to which they recommend or condition that borrowing countries increase efforts to combat the virus, protect the vulnerable, and stage a green recovery in accordance with direction from IMF leadership and fiscal guidance notes generated by the IMF Fiscal Affairs Department. Relative to earlier research that suggests the IMF falls short in making such policies part of recovery efforts during times past, our preliminary research indicates that the IMF is indeed prioritizing health and social spending during this crisis—albeit more so in programs where it has little leverage over the implementation of such recommendations. However, IMF support for greening the recovery does not match the rhetoric from IMF leadership or from fiscal guidance notes issued by the IMF Fiscal Affairs department at this time. The IMF COVID RECOVERY INDEX will be updated in real time on the internet, and eventually be used in econometric exercises that examine the extent to which IMF support for confronting the virus, protecting the vulnerable, and mounting a green recovery is associated with those desired outcomes.*

<sup>1</sup> Professor of Global Development Policy, Pardee School of Global Studies and Director, Global Development Policy Center, Boston University.

<sup>2</sup> PhD Student, Department of Economics and Pre-doctoral fellow, Global Development Policy Center, Boston University.

Copyright: Kevin P. Gallagher and Franco Maldonado Carlin

## 1. Introduction

The COVID-19 pandemic came as an unprecedented shock to the world economy and many countries had to quickly resort to aid of the International Monetary Fund (IMF). The central banks and finance ministries of most advanced economies swiftly advanced swap lines, domestic liquidity support, and expansionary fiscal measures to shore up dollar markets and provide lifelines to the vulnerable. Few emerging markets and developing countries had access to these measures and lacked their own monetary or fiscal space to confront the virus, protect the vulnerable, and mount a sustainable recovery.

Indeed, the pandemic panic and very act of securing dollar markets resulted in a ‘flight to safety’ in the form of the largest levels of capital flight from emerging market and developing countries recorded. Exchange rates subsequently plummeted and external debt ballooned across the developing world at a time when tourism dropped alongside commodity prices—leaving fewer sources of export revenue to pay foreign debt. At exactly the time when many developing countries needed the fiscal space to fight the virus and protect their economies, they were faced with mounting external debt. Both the IMF and the United Nations Conference on Trade and Development (UNCTAD) estimate that liquidity needs for emerging markets and developing countries in 2020 alone was least \$2.5 trillion and that over 100 countries went to the IMF for emergency support (Wheatley, 2020; Georgieva, 2020a; UNCTAD, 2020)

On April 9, 2020 IMF Managing Director Kristalina Georgieva said that ‘These are the times for which the IMF was created—we are here to deploy the strength of the global community, so we can help shield the most vulnerable people and revitalize the economy’ and committed the IMF to a four point ‘all hands on deck’ approach to the crisis that would focus on supporting health systems, protecting vulnerable firms and people, containing financial panic, and mounting a recovery (Georgieva, 2020b). Over ten times between April and July of 2020 Georgieva and senior staff articulated that it is essential that ‘for our world is to become more resilient—we must do everything in our power to promote a ‘green recovery’ (Georgieva, 2020c). Expanding on this notion IMF Deputy Managing Director Tao Zhang emphasized that a green recovery should ‘promote a just transition. That means assisting vulnerable households, workers, regions, and trade-exposed or fuel producing firms. And using carbon pricing revenues in broad tax reductions or public investments that boost growth and benefit all households. (Zhang, 2020).

To back up these statements, the IMF’s Fiscal Affairs Department developed and published a set of guidances, called *Special Series on COVID-19*,<sup>1</sup> oriented to assist countries in their responses to the pandemic. Among these we highlight the following three given their parallels with the top-level guidance in Managing Director speeches and remarks:

<sup>1</sup> A complete list of the guidances and documents can be found in the IMF’s webpage. <https://www.imf.org/en/Publications/SPROLLS/covid19-special-notes>.

- **Health Expenditure** (IMF, 2020a). Outlining principles and considerations that countries should take into account in the design of actions oriented to support the monitoring, containment, and mitigation of the pandemic.
- **Support for the Vulnerable** (IMF, 2020b). Highlights different sets of fiscal measures and considerations that countries should take into consideration in the design of programs oriented to support the most vulnerable (firms and households) to address the consequences of the shock.
- **Greening the recovery** (IMF, 2020c). This document highlight different measures oriented to support a 'green' recovery. Among the possible measures, the IMF considers that the governments could finance 'green' activities, rather than "brown" ones; like climate-smart infrastructure and technologies, support adaptation, or avoid carbon-intensive investments. In addition, governments could raise carbon taxes and eliminate fossil fuel subsidies, in the context of low oil prices and fiscal reallocation needs.

In historical perspective, this is a very different set of directives than the IMF has given in the past. In response to past crises, the IMF has long prescribed fiscal consolidation that explicitly or implicitly directed countries to engage in contractionary policies that reduced spending on health and social expenditure (Kentikelenis et al, 2016). Indeed, in a study of 16 Western African countries from 1995 to 2014, Stubbs et al (2017) found that IMF programs curtailed the fiscal space for health spending in those per capital by 0.24 percent. In a broader study of IMF programs in 137 developing countries between 1980 and 2014, Forster et al (2019a) found that IMF programs lowered health system access and increased neonatal mortality. In another paper by Forster (2019b) and others, using the same sample, they found that IMF programs during that period also accentuated inequality. Other papers however, have argued IMF conditionality can potentially increase social spending through higher growth during the program period (Gupta et al, 2000, Gupta 2010). In response to these findings, before the COVID the IMF had begun to add a number of social safeguards to its programs, such as social spending floors, social benefits and transfers, and expanding unemployment assistance. While the literature on the impact of these programs on outcomes is in its infancy, there is evidence that they have been ineffective in the medium term (Gupta et al, 2018).

This short paper develops an IMF COVID RECOVERY INDEX that attempts to quantify the extent to which IMF communications and guidance on the pandemic response has become operationalized in the IMF response to the COVID-19 crisis. This short paper identifies the methodology deployed to create the index, displays preliminary results of the analysis covering 75 IMF programs from March to July 2020, and outlines a research agenda for using this new variable to examine IMF policy behavior and social outcomes.

## 2. Data and Methodology

In this section of the paper we share the methodology devised to code IMF programs in order to create an IMF COVID Recovery Index that assesses the extent to which various country programs are tailored to attack the COVID-19 virus, protect the vulnerable, and stage a green recovery.

## 2.1 The IMF's Emergency Response to the COVID-19 crisis

The IMF has received upwards of 100 requests for emergency financing since the COVID-19 crises began. At this writing, we analyze programs granted between March 23 and July 27 and will be continuing to track and code programs as the crisis continues. Table 1 shows that the IMF has supported 77 countries with 93 disbursements in the selected time frame. In dollar terms, the actions of the IMF implies a financial approval of almost US\$83.1 billion (SDR 60.5 billion) during this period.

Table 1  
SUMMARY OF IMF FINANCIAL SUPPORT INTERVENTION

	Countries	Programs	Total Disbursements		Average Disbursements per Program		
			US\$ Million	SDR Millions	US\$ Million	SDR Millions	% of Quota
Total	77	93	83,052	60,471	893	650	94.2
Conditional	10	11	13,008	9,392	1,183	854	241.6
Augmentation of Stand-by Arrangement (SBA)	2	3	10,375	7,489	3,458	2,496	139.5
Augmentation of Extended Fund Facility (EFF)	3	3	1,767	1,266	589	422	156.7
Augmentation of Extended Credit Facility (ECF)	3	3	248	183	83	61	54.5
Multiple Instruments	2	2	619	455	309	227	122.0
Unconditional	67	82	70,044	51,079	854	623	68.7
Rapid Credit Facility (RCF)	36	44	7,142	5,234	162	119	60.5
Rapid Financing Instrument (RFI)	28	35	17,173	12,546	491	358	78.5
Flexible Credit Line (FCL)	3	3	45,730	33,299	15,243	11,100	661.3
Middle East and Central Asia	12	18	13,549	9,860	753	548	74
Sub-Saharan Africa	30	36	10,637	7,765	295	216	65
Western Hemisphere	20	20	50,907	37,085	2,545	1,854	176
Asia Pacific	8	11	1,841	1,342	167	122	64
Europe	7	8	6,119	4,419	765	552	90

Source: IMF

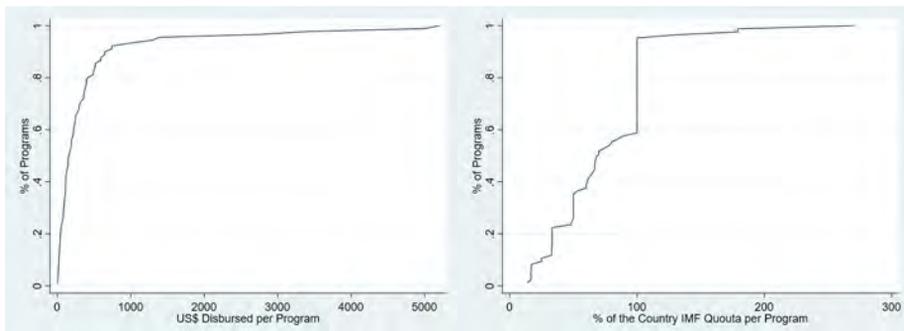
The majority of programs have been unconditional ones, disbursed through the Rapid Credit Facility (RCF), the Rapid Financing Instrument (RFI) and the Flexible Credit Line (FCL). Almost 85 percent of the disbursement programs were channeled through the RCF and RFI, which are instruments designed to help countries with urgent balance of payments needs. However, in dollar terms, more than half of the approved programs were channeled through FCL at US\$45 billion to Chile, Peru, and Colombia. Interestingly, at this writing these countries are yet to draw on these credit lines.

Some programs are augmentations of conditional programs approved before the crisis ensued (11 programs, 12 percent of the total). In these cases, the countries and the IMF modified the

agreements in order to incorporate more resources and, in some cases, re-evaluated the conditionalities associated with the programs.

The remaining 45 percent of the resources have been allocated into programs in which funds were immediately disbursed or committed to be disbursed. In these cases, the average disbursement was US\$414.7 million (SDR 301.9 million); representing roughly 74.2 percent of the countries' quota to the IMF. As can be seen in the left panel of Figure 1, close to 90 percent of the disbursements are below US\$1 billion. While as can be observed in the right panel of Figure 1, given the characteristics previously described of the RCF and RFI instruments, the majority of the programs consist of disbursements of, at maximum, 100 percent of a country's quota.

Figure 1  
DISTRIBUTION OF DISBURSEMENTS PROGRAMS BY AMOUNT AND COUNTRY QUOTA TO THE IMF



## 2.2 Constructing the IMF COVID RECOVERY INDEX

Our first objective is to evaluate the degree of commitment that the IMF and member countries have made relative to the guidances previously discussed: 1) health expenditure; 2) support for the most vulnerable; and, 3) 'green' recovery (hereafter 'three pillars'). In this sense, we reviewed the language used in the IMF Country Reports related to each disbursement program. We focus on two parts of the reports: 1) the IMF Staff Report; and, 2) the Country's Letter of Intent (LOI) sent to the IMF by the country authorities.

We score each program on a scale of 0 to 3. Zero if a country does not request or address the need to address any of the three pillars of a COVID-19 recover; three if the IMF not only endorses a country request to at least one of the three pillars, but either strongly recommends or conditions that such investments be made as part of the program. Box 1 delineates the range of indicators.

Box 1  
CODING THE IMF COVID RECOVERY INDEX

- **Indicator = 0;** if the Country Letter of Intent (LOI) does not request or address the need to the three pillars of the recovery
- **Indicator = 1;** if the LOI requests to address a pillar but that act is not highlighted or acknowledged by the IMF in their staff and subsequent reports.
- **Indicator = 2;** if the IMF, in their staff report, highlights, acknowledges, and/or explicitly endorses at least one pillar requested to be addressed by the country.
- **Indicator = 3;** if the IMF, in their staff report, recommends that a pillar be addressed or conditions the accomplishment of at least one pillar in order to obtain a disbursement.

We create individual indicator score on a scale of 0 to 3 for each of the three pillars for each program. Then, we create a composite index of those pillars to arrive at one indicator for each program, averaging the three indicator scores. We refer this composite index to as the “IMF Covid Recovery Index.” To create the index, we calculate the weighted average of each indicator associated with a particular disbursement, using the disbursement amount in SDR as weights. The appendix elaborates on the coding methodology and provides illustrative documentation of how each indicator is arrived at.

### 2.3 Data Analysis

We apply this method to the IMF disbursements that have IMF country files published on the IMF webpage and were immediately disbursed or committed to be disbursed to the requesting countries.<sup>2</sup> These programs are summarized in Table 2, resulting in a subset of for 75 programs in 65 countries, or 84 percent of those approved in our original sample. In terms of the amount disbursed, the subset accounts for almost US\$21.3 billion (or around SDR 15.6 billion), which represents 25.7 percent (or 25.8 percent in terms of SDR) of the total IMF emergency financing during the period first analyzed.

<sup>2</sup> At the moment we conduct the analysis, the IMF’s webpage did not publish the associated Country Reports related to the following disbursements:

- Congo (RCF approved on April 22 for SDR 266.50 million or almost US\$363.27 million)
- Dominica (RCF approved on April 28 for SDR 10.28 million or almost US\$14.00 million)
- Egypt (RFI approved on May 11 for SDR 2,037.10 million or almost US\$2,772.00 million)
- Guinea (RCF approved on June 19 for SDR 107.10 million or almost US\$148.00 million)

In parallel, the IMF following Flexible Credit Lines (FCL) but, at the moment we conduct the analysis, countries have not used the resources:

- Chile (FLC approved on May 29 for SDR 17,443.00 million or almost US\$23.930.00 million)
- Colombia (FLC approved on May 1 for SDR 7,849.00 million or almost US\$10,800.00 million)
- Peru (FLC approved on May 28 for SDR 8,007.00 million or almost US\$11,000.00 million)

Table 2  
SUMMARY OF IMF FINANCIAL SUPPORT INTERVENTION

	Programs	Disbursements	
		US\$ Million	SDR Millions
Total	75	25,539	18,622
Conditional	7	6,065	4,378
Unconditional	68	19,474	14,243

Source: IMF

Table 3 exhibits our preliminary results of the IMF Covid Recovery Index under the methodology previously described.

Table 3  
SUMMARY OF INDICATORS

	Composite	Health Policies	Support to the Vulnerable	Green Recovery
Total	1.83	2.35	2.56	0.59
Conditional	1.68	2.00	2.84	0.19
Unconditional	1.88	2.45	2.48	0.72

Our preliminary analysis of programs analyzed to date is that the overall score for IMF programs in response to the COVID crisis is a **1.83 of a total possible score 3**. This implies that the IMF is falling short of fully putting into practice the pillars that the institution is mentioning in high-level speeches and policy directives.

Looking more closely however, this relatively lower overall score is largely driven by very poor performance with respect to a green recovery. When the index is disaggregated into each specific guidance we observe that the overall results are positively affected by the commitments towards the health policies and support of the vulnerable guidances. In both cases, the indicator results were significantly greater than the overall composite index. **The indicator for the health policies reaches a value of 2.35, and the score representing support for the vulnerable is 2.56.**

It is interesting to note the difference between the conditional and non-conditional programs. Concerning health policy guidance, the conditional programs only receive, on average, a score, on average, of 2.00. Unconditional programs, a significant share receive recommendations from the IMF score, on average, 2.45. With respect to support to the vulnerable policy guidance, in both types of programs a significant share of disbursements received recommendations from the IMF. However, we observe a larger share of programs that receive recommendations in the case of conditional programs than unconditional ones. Nevertheless, the ability of the IMF to ensure that its recommendations are implemented is limited under unconditional programs.

On its own **the indicator for the green recovery is very low, at 0.59**. This implies that borrowing countries and the IMF are not requesting, singling out, recommending, or requiring that recovery programs address environmental degradation and climate change. The score is significantly lower in the conditional programs, even though they are tied to structural reforms.

These aggregated global results are a reflection of the results scored for each IMF program. The full distribution of our scoring are displayed in Figures 2 and 3. As can be observed in the Figure 2, the majority of IMF programs (41 programs or 54.7 percent of the total of programs evaluated) present a composite indicator of 1.33. Meanwhile, there a significant number of programs (22 programs or 29.3 percent of the total of programs evaluated) that have a composite indicator of 2.00 or above.

Figure 2  
DISTRIBUTION OF THE COMPOSITE POLICY INDICATOR RESULTS

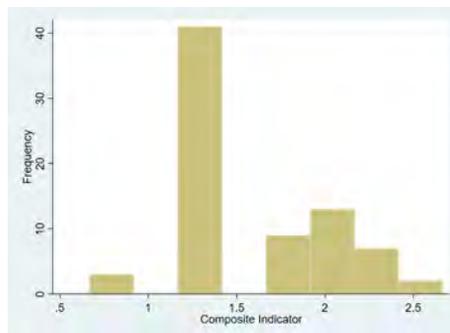


Figure 3 disaggregates the individual program scores by each recovery pillar: health policy, protecting the vulnerable, and greening the recovery. This figure shows that the vast majority of programs have recognized or recommended policies towards the improvement of the health system and the support of the vulnerable. This is different in the case of “green” recovery policies. As we observe in the lower part of Figure 3, 63 of the programs evaluated (84.0 percent of the total) do not include any mention of greening the recovery by the borrower or the IMF.

Figure 3  
DISTRIBUTION OF THE GUIDANCES POLICY INDICATORS

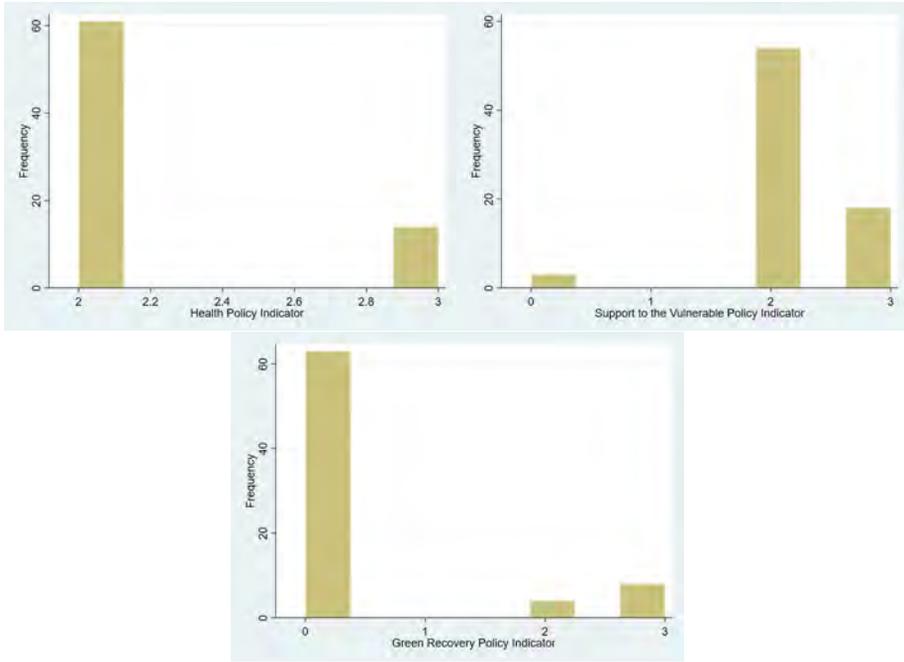


Table 4 provides an illustrative list by summarizing the countries disbursement programs that received the top ten overall index scores according to our methodology.

Table 4  
TOP 10 DISBURSEMENT PROGRAMS

	Country	Composite	Health Policies	Support to the Vulnerable	Green Recovery
1	Nigeria	2.67	3.00	3.00	2.00
2	Costa Rica	2.67	2.00	3.00	3.00
3	Bahamas	2.33	2.00	2.00	3.00
4	Bangladesh	2.33	2.00	2.00	3.00
5	El Salvador	2.33	2.00	2.00	3.00
6	Georgia	2.33	2.00	2.00	3.00
7	Solomon Islands	2.33	2.00	2.00	3.00
8	Bolivia	2.00	3.00	3.00	0.00
9	Dominican Republic	2.00	3.00	3.00	0.00
10	Gabon	2.00	3.00	3.00	0.00

Note: Gambia, Ghana, Grenada, Keynia, Maldives, Mauritania, Mozambique, Niger, Pakistan and Tunisia had the same score as Bolivia, Dominican Republic and Gabon.

The best performing disbursement programs correspond to Nigeria and Costa Rica<sup>3</sup>, which both received a composite score of 2.67. In both cases, the programs receive a score of 3.00 in the support for vulnerable population policy guidance; which implies that both countries requested financing for this issue and received recommendations from the IMF related to do so. Indeed, in both cases, the IMF recommended to implement or to scale-up targeted transfers to protect the vulnerable (IMF, 2020d, p. 8; IMF, 2020e, p. 8).

However, the scores for health and “green” recovery policies differ in both countries. In the case of compliance with the health policy guidance, Nigeria received a score of 3.00 and Costa Rica received a score of 2.00. In the first case, IMF Staff recommended that Nigerian authorities present a supplementary budget to the parliament that increases health spending. (IMF, 2020d, p. 8). In the case of Costa Rica, IMF staff highlighted and justified Costa Rica’s additional spending in response to the crisis to protect the vulnerable (IMF, 2020e, p. 11). In the case of “green” recovery policies, Nigeria received a score of 2.00 and Costa Rica received a score of 3.00. Nigeria receives a score of 3.00 because the IMF staff acknowledged and endorsed the elimination of fuel subsidies and the introduction of automatic price formulas (IMF, 2020d, p. 8 and 12). Meanwhile, in the case of Costa Rica, IMF staff recommended to raise excise duties on petrol and diesel, and to increase the property and environmental taxes (IMF, 2020e, p. 8).

The IMF programs that perform receive the lowest index scores are found in programs for the Central African Republic and the first disbursement programs to Kyrgyz.<sup>4</sup> In both cases, the programs receive a score of 0.67, largely due to the fact these program documents have few if any references to protecting the vulnerable or a green recovery and receive a zero in each instance. Meanwhile, both programs commitments to the health policy guidance receive a score of 2.00, as the IMF Staff recognized the countries health response. For instance, in the case of the Central African Republic, the Staff recognize a health plan of 2 percent of the GDP that not only seeks to address the current situation, but includes measures to strengthen the capacity of the healthcare system for the future (IMF, 2020f, p. 7 and 10). In the case of Kyrgyz, the Staff acknowledges the fiscal plan of 3.1 percent of the GDP for the health sector (IMF, 2020g, p. 5).

### 3. Preliminary conclusions and further research directions

This paper establishes a methodology that can be used to measure the behavior of IMF program design and eventually the outcomes of IMF programs in response to the COVID-19 crisis. We create an IMF COVID RECOVERY INDEX by coding IMF programs based on the extent to which they recommend or condition that borrowing countries increase efforts to combat the virus, protect the vulnerable, and stage a green recovery. Relative to earlier research that suggests the IMF falls short in making such policies part of the recovery, our preliminary show that the IMF is

<sup>3</sup> Nigeria and Costa Rica received a Rapid Financing Instrument (RFI). The first was approved on April 28 for US\$3,400.00 million (SDR 2,454.50 million), while the second was approved on April 29 for US\$508.00 million (SDR 369.40 million). In both cases, the disbursements represent 100 percent of the country’s quota to the IMF.

<sup>4</sup> Central African Republic received a Rapid Credit Facility (RCF), which was approved on April 20 for US\$38.00 million (SDR27.85 million), which represents 25 percent of the country’s quota to the IMF. Kyrgyz received two programs, a Rapid Financing Instrument (RFI) and a RCF, both approved March 26 for a total of US\$120.90 million (SDR 88.80 million), which represents 50 percent of country’s quota.

prioritizing health and social spending during this crisis. However, IMF support for greening the recovery does not match the rhetoric from IMF leadership or from fiscal guidance notes issued by the IMF Fiscal Affairs department.

We will continue to improve this index and to score the remainder of the IMF programs during the COVID era. However, the best use of the IMF COVID Recovery Index will be to serve as an independent variable to gauge the impact of IMF programs on health, social, and environmental outcomes in the wake of the pandemic. At this writing, other entities are tracking the developing country responses to the crisis on the ground. The OECD is tracking and creating a database of fiscal and tax measures for health and protecting the vulnerable across the world (OECD, 2020). Vivid Economics has created a 'Greenness of Stimulus Index' to track the extent to which country recovery programs are 'green' with respect to climate change and biodiversity (Vivid Economics, 2020). As these indicators are developed, and when more basic information is available from the IMF such as quarterly health and social spending over time, we plan to use the IMF COVID Recovery Index (and/or its individual parts) as an independent variable to examine the extent to which IMF support for health, social, and environmental outcomes during the recovery is positively correlated with such outcomes. In the meantime, we plan to publish a Tableau-based interactive web page that will make the index available to other researchers, policy-makers, the media, and civil society as part of the broader effort to foster more evidence-based decision-making and discourse on responses to the COVID crisis.

## References:

Forster, T., A. Kentikelenis, T. Stubbs, and L. King (2019a). "Globalization and Health Equity: The Impact of Structural Adjustment Programs in Developing Countries." *Social Science & Medicine*.

Forster, T., A. Kentikelenis, B. Reinsberg, T. Stubbs, and L. King. (2019b.) "How Structural Adjustment Programs Affect Inequality: A Disaggregated Analysis of IMF Conditionality, 1980–2014." *Social Science Research*. 80: 83-113.

Georgieva, Kristalina (2020a), "Transcript of Press Briefing by Kristalina Georgieva following a Conference Call of the International Monetary and Financial Committee", March 27, Washington, D.C.: International Monetary Fund.  
<https://www.imf.org/en/News/Articles/2020/03/27/tr032720-transcript-press-briefing-kristalina-georgieva-following-imfc-conference-call>

Georgieva, Kristalina (2020b), Confronting the Crisis: Priorities for the Global Economy, April 9, Washington, D.C, International Monetary Fund.  
<https://www.imf.org/en/News/Articles/2020/04/07/sp040920-SMs2020-Curtain-Raiser>

Georgieva, Kristalina (2020c) Managing Director's Opening Remarks at the Petersberg Climate Dialogue XI, April 29, Washington, DC, International Monetary Fund.  
<https://www.imf.org/en/News/Articles/2020/04/29/sp042920-md-opening-remarks-at-petersberg-event>

Gupta, S., 2010, "Response of the International Monetary Fund to its critics," *International Journal of Health Services* 40.2: 323-326.

Gupta, S., R.S. Khemani, C. A. McDonald, L. Dicks-Mireaux, and M. Verhoeven, 2000, "Social issues in IMF-supported programs," IMF Occasional Paper No. 191.

Gupta, S., Schena, M., & Yousefi, R. (2018). Expenditure conditionality in IMF-supported programs. *International Monetary Fund Working Paper*, 18/225.

IMF (2020a), Managing the Impacts of the Coronavirus: Guidance on Health Spending Policies, <https://www.imf.org/~media/Files/Publications/covid19-special-notes/enspecial-series-on-covid19managing-the-impacts-of-the-coronavirus-guidance-on-health-spending-polic.ashx?la=en>

IMF (2020b), Expenditure Policies in Support of Firms and Households, <https://www.imf.org/~media/Files/Publications/covid19-special-notes/en-special-series-on-covid-19-expenditure-policies-in-support-of-firms-and-households.ashx?la=en>

IMF (2020c), Greening the Recovery, <https://www.imf.org/~media/Files/Publications/covid19-special-notes/en-special-series-on-covid-19-greening-the-recovery.ashx?la=en>

IMF (2020d), Nigeria: Request for Purchase under the Rapid Financing Instrument -Press Release; Staff Report; and Statement by the Executive Director for Nigeria, <https://www.imf.org/~media/Files/Publications/CR/2020/English/1NGAEA2020001.ashx>

IMF (2020e), Costa Rica: Request for Purchase Under the Rapid Financing Investment-Press Release; Staff Report; and Statement by the Executive Director for Costa Rica, <https://www.imf.org/~media/Files/Publications/CR/2020/English/1CRIEA2020001.ashx>

IMF (2020f), Central African Republic: Request for Disbursement under the Rapid Credit Facility-Press Release; Staff Report; and Statement by the Executive Director for the Central African Republic, <https://www.imf.org/~media/Files/Publications/CR/2020/English/1CAFEA2020002.ashx>

IMF (2020g), Kyrgyz Republic: Request for Purchase Under the Rapid Financing Instrument and Disbursement Under the Rapid Credit Facility-Press Release; Staff Report; Informational Annex; and Debt Sustainability Analysis, <https://www.imf.org/~media/Files/Publications/CR/2020/English/1KGZEA2020001.ashx>

Kentikelenis, A., T. Stubbs, and L. King. 2016. "IMF Conditionality and Development Policy Space, 1985-2014," *Review of International Political Economy*. 23(4): 534-582

OECD (2020), Tax and fiscal policy in response to the Coronavirus crisis: Strengthening confidence and resilience, Paris, OECD. <https://www.oecd.org/coronavirus/policy-responses/tax-and-fiscal-policy-in-response-to-the-coronavirus-crisis-strengthening-confidence-and-resilience-60f640a8/>

Stubbs, T., A. Kentikelenis, D. Stuckler, M. McKee, and L. King. 2016. "The Impact of IMF Conditionality on Government Health Expenditure: A Cross-national Analysis of 16 West African Nations." *Social Science & Medicine*. 174: 220-227.

UNCTAD (2020), "The Covid-19 Shock to Developing Countries: Towards a 'whatever it takes' programme for the two-thirds of the world's population being left behind", Geneva: United Nations Conference on Trade and Development.

Vivid Economics (2020), Greenness of Stimulus Index, London, Vivid Economics: <https://www.vivideconomics.com/casestudy/greenness-for-stimulus-index/>

Wheatley, Jonathan (2020), "Emerging Market Debt Burdens May be Sorely Understated", *Financial Times*, April 3.

Zhang, Tao (2020), COVID-19: Opportunities for a Green Recovery, May 22, 2020, Washington, International Monetary Fund. <https://www.imf.org/en/News/Articles/2020/05/22/sp052220-opening-remark-zhang>

## Appendix

For this paper we evaluate the level that the IMF financial support to the countries facing the negative shock of the COVID-19 pandemic was in line with their previously developed guidances: 1) health expenditure policies; 2) support for the most vulnerable; and, 3) “green” recovery (hereafter ‘three pillars’). In order to achieve this goal, we develop a methodology that codes the IMF response using the country reports associated to each disbursements program during the COVID-19 pandemic.

Each country report the IMF addresses the previous and the current economic situation and the policies implement by the requesting countries, in order to analyze, among others, the country needs, space to reforms and their ability of repayment.

Given this information, first, we identify which policies have been implemented or proposed to be implemented by the countries related to any of the three pillars. Second, we identify which is the IMF Staff appraisal of those policies. Third, we identify is the IMF Staff recommend or conditions certain policies as part of the program.

Based on this, we translate our findings into a code that assigns a value between 0 to 3 according to the following:

- **Indicator = 0;** if the Country Letter of Intent (LOI) does not request or address the need to the three pillars of the recovery
- **Indicator = 1;** if the LOI requests to address a pillar but that act is not highlighted or acknowledged by the IMF in their staff and subsequent reports.
- **Indicator = 2;** if the IMF, in their staff report, highlights, acknowledges, and/or explicitly endorses at least one pillar requested to be addressed by the country.
- **Indicator = 3;** if the IMF, in their staff report, recommends that a pillar be addressed or conditions the accomplishment of at least one pillar in order to obtain a disbursement.

Finally, we create a composite index of those pillars from the average of the three indicators for each program. We refer this composite index to as the “IMF Covid Recovery Index”.

Below, we provide an illustrative list of examples of the analysis made for each program and their corresponding values for each pillar and the IMF Covid Recovery Index.

### 1. Afghanistan

- Disbursement date: April 29, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$220 million (SDR 161.9 million), 50 percent of quota
- Country report link:  
<https://www.imf.org/~media/Files/Publications/CR/2020/English/1AFGEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF acknowledges authorities’ plan to spend about 2 percent of GDP for critical pandemic-related spending during the year, with about 1/3 directed to health. (Page 5 of Staff Report)	The IMF acknowledges the developing, with the support of the World Bank, other development partners and humanitarian agencies, of a social relief package to be provided to the most vulnerable via the most effective means—including through cash transfers, initially to the most vulnerable households. (Pages 5 and 6 of Staff Report)	No mention.

**2. Albania**

- Disbursement date: April 10, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$190.4 million (SDR 139.3 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1ALBEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF highlights authorities’ fiscal package of 1.4 percent of GDP, which adds to the previous earthquake relief and reconstruction package (1.2 percent of GDP), that include higher spending on the health sector. (Page 5 of Staff Report)	The IMF highlights authorities’ fiscal package of 1.4 percent of GDP, which adds to the previous earthquake relief and reconstruction package (1.2 percent of GDP), that include, among others: additional unemployment benefits and social assistance, guarantee scheme for companies allowing them to continue wage payments to workers forced to stay at home due to the pandemic, accelerated pension increases in April, support	No mention.

		for small firms including the rescheduling of profit-tax installments in 2020. (Page 5 of Staff Report)	
--	--	---	--

**3. Armenia**

- Disbursement date: May 18, 2020
- Instrument: Extend of Stand-By Arrangement (SBA)
- Amount disbursed: US\$175 million (SDR 128.8 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1ARMEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
<b>1.33</b>	<b>2</b> The IMF acknowledges an estimated additional health spending of almost 0.6 percent of GDP. IMF highlights that the Government equipped the Ministry of Health with additional resources and legislative powers to expeditiously acquire medical supplies and necessary health equipment, including testing kits. (Pages 6 and 11 of Staff Report)	<b>2</b> The IMF acknowledges an estimated additional resources to support households and firms for around 0.9 percent of GDP that include, among others: direct social assistance transfers to the vulnerable (families with children and parents lost their jobs, pregnant women, families facing social problems), subsidize utilities, labor subsidies to help SME employers maintain core employees. (Pages 6 and 11 of Staff Report)	<b>0</b> No mention.

**4. Bahamas**

- Disbursement date: June 1, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$250 million (SDR 182.4 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1BHSEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
<b>2.33</b>	<b>2</b>	<b>2</b>	<b>3</b>

Covid Economics 42, 19 August 2020: 112-142

	The IMF supports authorities' fiscal measures, including the support to the health care system that with resources that rise to 0.4 percent of the GDP. (Pages 5 and 8 of Staff Report)	The IMF supports authorities' fiscal measures, including the ones oriented ensure the adequate food supply and protecting employment and scale to almost 3.3 percent of the GDP. (Pages 5 and 8 of Staff Report)	The IMF recommends putting in place mandatory hurricane insurance would strengthen private sector resilience; improving data collection, sharing, and management among agencies would enhance the resilience of the social safety net. (Pages 1 and 9 of Staff Report)
--	---	--	--

**5. Bangladesh**

- Disbursement date: May 29, 2020
- Instrument: Rapid Credit Facility (RCF) and Rapid Financing Instrument (RFI)
- Amount disbursed: US\$244 million (SDR 177.77 million), 16.67 percent of quota; and US\$488 million (SDR 355.53 million), 33.33 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1BGDEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
2.33	<b>2</b>	<b>2</b>	<b>3</b>
	The IMF highlights authorities' stimulus package measures, which includes: resources for the Ministry of Health's Preparedness and Response Plan, and support for health care sector. (Pages 9 and 14 of Staff Report)	The IMF highlights authorities' stimulus package measures, which includes: transfer programs that benefit the poor, workers in the informal economy, and other vulnerable populations, support for agriculture sector, wage support for the export industries, interest payment subsidies for working capital loans by banks to businesses. (Pages 9 and 14 of Staff Report)	As part of the Structural Reform the IMF recommend to address climate change risks through continuous efforts in mitigation and adaptation will be required to enhance the resilience and sustainability of economic growth. (Page 12)

**6. Barbados**

- Disbursement date: June 3, 2020
- Instrument: Augmentation of Extended Fund Facility (EFF)

- Amount disbursed: US\$91 million (SDR 66.15 million), 70 percent of quota
- Country report link:  
<https://www.imf.org/~media/Files/Publications/CR/2020/English/1BRBEA2020001.ash>  
[x](#)

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF highlights a higher health spending of about 0.25 percent of GDP, in addition to 0.5 percent already spent in FY2019/20. (Page 11 of Staff Report)	The IMF highlights the following measures: temporary transfers to public institutions who will face pandemic-related revenue shortfalls (about 0.5 percent of GDP), enhanced welfare schemes (about 0.25 percent of GDP), higher capital expenditure of about 0.5 percent of GDP. (Page 12 of Staff Report)	No mention.

## 7. Benin

- Disbursement date: May 15, 2020
- Instrument: Augmentation Extended Credit Facility (ECF)
- Amount disbursed: US\$103.5 million (SDR 76.013 million), 61.4 percent of quota
- Country report link:  
<https://www.imf.org/~media/Files/Publications/CR/2020/English/1BENEA2020002.ash>  
[x](#)

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.67	<b>2</b>	<b>3</b>	<b>0</b>
	The IMF supports the health response. In particular, the budget envelope for public health expenditure will be increased by 0.7 percent of GDP to allow for the purchase of medical equipment and the construction of temporary health facilities and retention areas for quarantined people.	The IMF supports the response to grant cash transfers to vulnerable households, and provide support to impacted businesses. (Pages 8 and 15 of Staff Report)  The IMF also recommends, in the short term and if the situation deteriorates, that the authorities could contemplate the	No mention.

	(Pages 8 and 15 of Staff Report)	following additional measures to support economic activity: increasing the size or expanding the coverage of transfers to vulnerable households; improving access to credit for cash-constrained businesses through guarantees or subsidized loans; broadening the range of inputs or production factors concerned by cost-based tax incentives; accelerating government payments to private sector suppliers; and reducing the turnover tax for micro and small enterprises. (Page 11 of Staff Report)	
--	----------------------------------	---	--

**8. Bolivia**

- Disbursement date: April 17, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$327 million (SDR 240.1 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1BOLEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
<b>2.00</b>	<b>3</b>	<b>3</b>	<b>0</b>
	The IMF highlights the increased health spending. In addition, the IMF recommends that should health spending needs prove larger than expected, some limited margin for maneuver may be gained through additional reductions in public investment. (Pages 5 to 7 of Staff Report)	The IMF highlights the efforts to protect the more vulnerable. In addition, the IMF recommends that will be important, in light of the limited fiscal space available, to protect other social welfare spending. (Pages 6 and 7 of Staff Report)	No mention.

9. Bosnia and Herzegovina

- Disbursement date: April 20, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$361 million (SDR 265.2 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1BIHEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.67	<b>3</b>	<b>2</b>	<b>0</b>
	The IMF highlights and supports the higher spending on the health sector. In addition, the IMF recommends that medical supplies need to be secured and deployed immediately to treat patients and reduce contagion by testing and monitoring. (Pages 4 and 7 of Staff Report)	The IMF supports the authorities' plans to pay unemployment benefits on a timely basis and expand social benefit programs for the most vulnerable. (Page 4of Staff Report)	No mention.

10. Burkina Faso

- Disbursement date: April 14, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$115.3 million (SDR 84.28 million), 70 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1BFAEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF highlights and supports the increase of health care spending and the measures for provision of free testing, care for the infected and preventive care in all regions of the country. (Pages 8 and 12 of Staff Report)	The IMF supports the authorities' plan to mitigate the economic impact of the pandemic, which includes, among others, cash transfer, particularly through the strong existing programs, local small businesses and household associations, and time-tested channels	No mention.

		of the World Food Program. (Pages 8 and 12 of Staff Report)	
--	--	---	--

**11. Cabo Verde**

- Disbursement date: April 22, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$32.3 million (SDR 23.70 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1CPVEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF highlights authorities’ measures of prevention and preparedness, and the emergency plan to cover additional expenses for personnel, training and medical equipment. (Page 6 of Staff Report)	The IMF highlights the social protection actions and the measures to support to the corporate sector. (Page 6 of Staff Report)	No mention.

**12. Cameroon**

- Disbursement date: May 4, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$ 226 million (SDR 165.6 million), 60 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1CMREA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.67	<b>2</b>	<b>3</b>	<b>0</b>
	The IMF highlights authorities’ preparedness and response plan, which increases health spending to ensure adequate infection prevention and control and improved case management. (Page 7 of Staff Report)	The IMF highlights and supports authorities’ measures to mitigate the negative financial impact of the COVID-19 pandemic on the most vulnerable, which will include strengthening existing social safety nets	No mention.

		and providing support to affected businesses and households. In addition, the IMF recommends that measures to mitigate the negative financial impact of the COVID-19 pandemic on the private sector, which could include strengthening social safety nets, subsidizing basic medications, and providing support to affected companies should be effectively implemented. (Pages 7 and 11 of Staff Report)	
--	--	---	--

**13. Central African Republic**

- Disbursement date: April 20, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$38 million (SDR 27.85 million), 25 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1CAFEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
0.67	<b>2</b>	<b>0</b>	<b>0</b>
	The IMF highlights and supports authorities' health response plan to strength the national healthcare system, which estimated cost is 2 percent of GDP and was elaborated with the support of the WHO. (Pages 3 and 10 of Staff Report)	No mention.	No mention.

**14. Chad**

- Disbursement date: April 14, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$115.1 million (SDR 84.12 million), 60 percent of quota

- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1TCDEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
	<b>2</b>	<b>2</b>	<b>0</b>
<b>1.33</b>	The IMF highlights authorities' plan that will increase health-related spending by about 0.3 percent of non-oil GDP (60 percent expected to be financed by donors) to mitigate the impact of the pandemic, which includes: training of medical and technical staff, purchase of necessary medical equipment, the construction of seven health centers in remote areas, the construction of three mobile hospitals, and securely managing entry points. (Pages 7 and 8 of Staff Report)	The IMF highlights authorities' measures to help soften the impact of the crisis on the economy, which includes: temporary suspension of payments of electricity and water bills, the establishment of a Youth Entrepreneurship Fund, reduce the business license fees and the presumptive tax, tax breaks such as carryforward losses and delays in tax payments. (Page 8 of Staff Report)	No mention.

**15. Comoros**

- Disbursement date: April 22, 2020
- Instrument: Rapid Credit Facility (RCF) and Rapid Financing Instrument (RFI)
- Amount disbursed: US\$4.05 million (SDR 2.97 million), 16.7 percent of quota; and US\$8.08 million (SDR 5.93 million), 33.3 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1CODEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
	<b>2</b>	<b>3</b>	<b>0</b>
<b>1.67</b>	The IMF highlights authorities' plan to minimize the risk of the pandemic is estimated at US\$2.2 million, which is expected to be financed	The IMF highlights authorities' fiscal stimulus, which includes: temporarily reduction of customs duties for certain products (food, medical,	No mention.

	by two donors. (Pages 7 and 8 of Staff Report)	and hygiene products), delayed deadlines for tax filings. Further the authorities intend to provide income support to SOE workers who have seen their hours reduced, and to support to the poor through direct cash transfers (not factored into projections as this measure is not firmly planned) or, if impossible, through free water or electricity supplies. In addition, the IMF recommends to consider giving targeted and temporary support for affected households, particularly among the most vulnerable. (Pages 7 and 9 of Staff Report)	
--	--	---	--

**16. Costa Rica**

- Disbursement date: April 29, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$504 million (SDR 369.4 million), 100 percent of quota
- Country report link: <https://www.imf.org/~/media/Files/Publications/CR/2020/English/1CR1EA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
2.67	<b>2</b>	<b>3</b>	<b>3</b>
	The IMF highlights authorities’ higher health expending (Pages 7 and 8 of Staff Report)	The IMF acknowledges authorities’ measures that consist, among others: subsidies and transfers for three months to the most vulnerable families economically affected by the crisis, 3-month moratorium on tax payments, targeted support to SMEs, deferred payment of social security contributions and making them proportional to the	The IMF recommends to raise excise duties on petrol and diesel, given the sharp decline in oil prices; and to impose property and environmental taxes to provide additional revenue. (Page 8 of Staff Report)

		time worked. In addition, the IMF recommends that fiscal measures should be designed to protect the vulnerable through targeted transfers, subject to ex post accountability and controls to ensure spending efficiency. (Pages 5 and 8 of Staff Report)	
--	--	--	--

**17. Cote d'Ivoire**

- Disbursement date: April 17, 2020
- Instrument: Rapid Credit Facility (RCF) and Rapid Financing Instrument (RFI)
- Amount disbursed: US\$295.4 million (SDR 216.8 million), 33.3 percent of quota; and US\$590.8 million (SDR 433.6 million), 66.7 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1CIVEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF highlights authorities' public health response package, which was elaborated with the support of the WHO and accounts for 1.25 percent of GDP. (Pages 5 and 6 of Staff Report)	The IMF acknowledges authorities' public economic support package of 1.5 percent of GDP, oriented to support vulnerable households (0.3 percent of GDP), businesses, including the informal sector and SMEs (0.4 percent of GDP), the agriculture sector (0.2 percent of GDP), to public entities (0.2 percent of GDP), and in form of tax relief to the formal sector (0.3 percent of GDP). (Page 6 of Staff Report)	No mention

**18. Djibouti**

- Disbursement date: May 08, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$43.4 million (SDR 31.8 million), 100 percent of quota

- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1DJIEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF highlights government’s policy response to scale up the healthcare system and other emergency related spending, accounting for 0.8 percent of GDP. (Pages 6 and 10 of Staff Report)	The IMF acknowledges authorities’ policy response to support families and firms affected by the outbreak, 1.7 percent of GDP. (Pages 6 and 10 of Staff Report)	No mention

**19. Dominican Republic**

- Disbursement date: April 29, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$650 million (SDR 477.4 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1DOMEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
2.00	<b>3</b>	<b>3</b>	<b>0</b>
	The IMF highlights government’s health plan. In addition, the IMF considers the authorities would need to allocate more resources to health, including by redirecting budgetary appropriations from other areas. Staff estimates conservatively that central government expenditures could be 1.25 percent of GDP higher than before the shock. (Pages 5 and 6 of Staff Report)	The IMF highlights government’s measures to support the vulnerable. In addition, the IMF considers the authorities would need to allocate more resources to social benefits, including by redirecting budgetary appropriations from other areas. Staff estimates conservatively that central government expenditures could be 1.25 percent of GDP higher than before the shock. The government needs to ensure that these public spending measures are both targeted and temporary,	No mention

		focusing on protecting those most vulnerable to the shock and on supporting demand. (Pages 5 and 6 of Staff Report)	
--	--	---	--

**20. Ecuador**

- Disbursement date: May 2, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$643 million (SDR 469.7 million), 67.3 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1ECUEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.67	<b>2</b>	<b>3</b>	<b>0</b>
	The IMF highlights government’s additional health spending of about US\$350 million (0.35 percent of GDP), though the estimated health costs vary widely (from US\$100 million to US\$800 million). (Page 8 of Staff Report)	The IMF highlights government’s additional social assistance spending of about US\$250 million (0.25 percent of GDP). The IMF recommends to expand the cash transfer mechanisms, both in amount and coverage. (Pages 8 and 14 of Staff Report)	No mention

**21. El Salvador**

- Disbursement date: April 14, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$ 389 million (SDR 287.2 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1SLVEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
2.33	<b>2</b>	<b>2</b>	<b>3</b>
	The IMF highlights government’s measures to mitigate the effects of the pandemic on public health, which include	The IMF highlights government’s measures among them: relief to individuals and companies affected by the pandemic,	IMF recommend increasing excise duties on petrol and diesel given the sharp decline in oil

	stocked hospitals with necessary equipment, increase wages of health workers and new hospital infrastructure. (Page 4 of Staff Report)	including through deferring utility payments for a three-month period, and direct transfers to almost 75 percent of households. (Pages 4 and 5 of Staff Report)	prices. (Pages 8 of Staff Report)
--	--	---	-----------------------------------

**22. Ethiopia**

- Disbursement date: April 30, 2020
- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$411 million (SDR 300.7 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1ETHEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
1.33	<b>2</b>	<b>2</b>	<b>0</b>
	The IMF highlights government’s increase in health spending 0.55 percent of the GDP, which include the fund of medical supplies, facilities, and to cut trade taxes for medical goods. (Page 6 of Staff Report)	The IMF highlights government’s additional spending needs during the remainder of the fiscal year would total \$1.64 billion (1.6 percent of GDP), which include emergency food distribution (US\$635 million, 0.6 percent of GDP), for provision of emergency shelter and non-food items (US\$282 million or 0.3 percent of GDP) and agricultural sector support, nutrition, the protection of vulnerable groups, additional education outlays, logistics, refugee support and site management support. (US\$293 million, 0.3 percent of GDP). (Page 7 of Staff Report)	

**23. Gabon**

- Disbursement date: April 9, 2020

- Instrument: Rapid Financing Instrument (RFI)
- Amount disbursed: US\$147 million (SDR 108 million), 50 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1GABEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
2.00	<b>3</b>	<b>3</b>	<b>0</b>
	The IMF highlights government’s immediate health-related spending of 0.5 percent of GDP. The IMF, for medical equipment and supplies (e.g., ventilators, testing kits, masks, etc.), recommends targeted policies such as the reduction or repeal of any customs duties or reduction in VAT rates. (Page 7 of Staff Report)	The IMF acknowledges the government plan to immediate increase social transfers 0.2 percent of GDP. In addition, the IMF considers that the delay of tax payments is appropriate, but more aggressive or permanent tax policy measures should be avoided. As well, that measures targeting both businesses and households still need to be costed, and their impacts carefully assessed to avoid any 'deadweight' effect and remain temporary. (Page 7 of Staff Report)	

**24. Gambia**

- Disbursement date: April 15, 2020
- Instrument: Rapid Credit Facility (RCF).
- Amount disbursed: US\$21.3 million (SDR 15.55 million), 25 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1GMBEA2020002.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
2.00	<b>2</b>	<b>2</b>	<b>2</b>
	The IMF highlights government’s increase in health expending for 1.8 percent of GDP. (Page 5 of Staff Report)	The IMF acknowledges the government’s social interventions, including distribution of basic foodstuffs to the needy. (Page 5 of Staff Report)	The IMF acknowledges the decrease in fuel subsidies. (Page 6 of Staff Report)

25. Georgia

- Disbursement date: May 1, 2020
- Instrument: Augmentation of Extended Fund Facility (EFF).
- Amount disbursed: US\$375.6 million (SDR 273.6 million), 130 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1GEOEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
2.33	<b>2</b>	<b>2</b>	<b>3</b>
	The IMF highlights government’s healthcare-related expenditure for Covid-19 (e.g. medical supplies, hospitalization, and quarantine costs), of 0.3 percent of GDP. (Page 7 of Staff Report)	The IMF acknowledges the government’s social interventions, including: support to affected businesses, supporting additional supplies of 10 basic commodities (e.g. rice, wheat, flour, sugar, milk powder, beans), direct transfers for employees in the private sector before Covid-19, direct transfers to families and people with severe disabilities, additional envelope to extend direct transfers to other vulnerable households, subsidies for utility bills. (Page 7 of Staff Report)	The energy reform strategy is one of the required structural reforms under the EFF, which is expected to increase market competition, promote renewable energy, and enhance energy efficiency (Page 63 of Staff Report)

26. Ghana

- Disbursement date: April 13, 2020
- Instrument: Rapid Credit Facility (RCF)
- Amount disbursed: US\$1 billion (SDR 738 million), 100 percent of quota
- Country report link: <https://www.imf.org/~media/Files/Publications/CR/2020/English/1GHAEA2020001.ashx>

IMF Covid Recovery Index	Health Policies	Support to the Vulnerable	Green Recovery
<b>2.00</b>	<b>3</b>	<b>3</b>	<b>0</b>

	<p>The IMF highlights government's promotion of selected industries (e.g., pharmaceutical sector supplying COVID-19 drugs and equipment). In addition, the Staff recommend further prioritization of health spending. (Pages 7 and 12 of Staff Report)</p>	<p>The IMF acknowledges the government's support of SMEs and employment, and the creation of guarantees and first-loss instruments. In addition, the Staff proposed expansion of targeted relief and support for SMEs, vulnerable households, and informal sector, scaling up of cash transfer programs, and clearance of existing arrears and avoidance of new ones to alleviate cash flow constraints. (Pages 7 and 12 of Staff Report)</p>	<p>No mention.</p>
--	--	---	--------------------