



# UNFPA's Commitments to Scaling up Cash & Voucher Assistance



**This document outlines UNFPA’s historical engagement and experience with Cash and Voucher Assistance (CVA) as a programming tool. It clarifies UNFPA’s unique positioning on CVA within the humanitarian sphere and underlines seven commitments that UNFPA will make at strategic and programmatic levels with regards to the scale-up of CVA across the organization. Programmatic and operational guidance at global and country levels should align with the commitments herein.**

## UNFPA’s Global Commitments to CVA

In 2016, UNFPA joined donors, other UN agencies and NGOs in its commitment to scaling up high quality, well-coordinated cash and voucher assistance (CVA) that maximizes results for women, girls and youth during crises, leaving no one behind. UNFPA signed the Grand Bargain commitments,<sup>1</sup> six of which relate to CVA, including the increased routine use of CVA alongside other tools; building an evidence base and developing standards for cash programming in order to better understand its risks and benefits; and aiming to increase the use of cash programming beyond current low levels, where appropriate. UNFPA is now a member of Grand Bargain Workstream 3 on “Increasing the use and coordination of cash-based programming,” as well as related sub-groups on cash, gender and social protection. In September 2020 UNFPA became a member of the Cash Learning Partnership (CaLP),<sup>2</sup> the central strategic, policy and practice network for CVA linking donors, UN agencies and NGOs, academia and the private sector.

## UNFPA’s Experience with CVA

UNFPA has used CVA as part of its programming for many years, and has recently diversified the model and objectives of its CVA across a number of contexts (see table below), including to cover the costs of transport and accommodation for women seeking SRH and GBV clinical care, life-saving emergency assistance for GBV survivors or women facing high risks of GBV, vouchers to incentivize ANC and facility-based deliveries and cover the cost of emergency obstetric care. While not considered CVA as such,<sup>3</sup> UNFPA has also provided incentive payments to health workers and volunteers in Women’s Safe Spaces and to youth engaged in contact tracing during Ebola, public health messaging and as survey enumerators.

<sup>1</sup> [The Grand Bargain official website.](#)

<sup>2</sup> [Cash Learning Partnership.](#)

<sup>3</sup> CVA definition according to the [Cash Learning Partnership](#): The provision of cash transfers or vouchers given to individuals, household or community recipients; not to governments or other state actors. This excludes remittances and microfinance in humanitarian interventions (although microfinance and money transfer institutions may be used for the actual delivery of cash). See an abbreviated Glossary in annex to this Policy.

Since April 2020 during the COVID-19 pandemic, UNFPA has used CVA to support continued access to services for women and girls, leveraged mobile phones to deliver electronic vouchers along with text messages, and scaled up its CVA for urgent hygiene and protection needs in Northwest Syria (Turkey cross-border), Mozambique, the Philippines, Palestine and Syria country offices.

### Examples of CVA in UNFPA country programmes (non-exhaustive list)

COUNTRY	INTERVENTION	YEAR
Bangladesh	Vouchers to purchase fresh food, conditional on ANC, encouraging facility-based deliveries.	2019
GBV Sub-Cluster, Burundi	Organized a joint workshop with the national Cash Working Group where GBV, Protection and Cash experts learned together about the integration of GBV risk mitigation in CVA. <sup>4</sup>	2019
Cameroon	Cash to patients with obstetric fistula complementary to surgery.	
Colombia	Emergency cash transfers for GBV high risk – urgent relocation; (planned) unconditional cash for dignity items.	2019-2020
DRC	CVA to 3,000 women following the distribution of dignity kits as part of COVID response.	2020
Egypt	Emergency and interim cash for GBV survivors (refugees and asylum seekers), through UNHCR delivery system, complementing GBV response services at Women’s Safe Spaces.	2020
Jordan	Cash for work for supporting vulnerable women and girls refugee to volunteer in outreach and other components of WGSS activities	2017
Mozambique	Electronic vouchers for essential/ hygiene items, complemented by radio and SMS messaging.	2020

<sup>4</sup> <https://reliefweb.int/report/burundi/burundi-case-study-gendercash-revolution-how-can-we-reduce-gbv-risks-cash-and-voucher>

<b>Myanmar</b>	CVA to reimburse transport costs to SRH services.	2019-ongoing
<b>Palestine</b>	CVA for GBV prevention as part of COVID response.	2020
<b>Philippines</b>	CVA for access to SRH, to Cash for Work for women and youth volunteers who conduct GBV prevention education sessions.	2019-ongoing
<b>GBV Sub-Cluster, Somalia</b>	Advising Cash Working Group on GBV/ protection risk analysis and monitoring for large-scale cash by partners.	2020
<b>Syria</b>	Top-up to WFP e-voucher with a hygiene and protection grant – pilot and scale-up to 3.37M USD.	2020
	Vouchers for facility-based delivery (at facilities meeting quality standards).	2012-2014
<b>Yemen</b>	Enrolment of new IDPs for rapid response mechanism (RRM) - delivery of kits- linked to referrals for multipurpose cash assistance.	2018 - ongoing
	Vouchers for emergency obstetric and neonatal care.	2017 - ongoing
<b>GBV Working Group, Whole of Syria / Turkey cross border hub (WoS/TXB)</b>	Development of inter-agency guidance for GBV actors on integrating CVA into case management and context-specific monitoring template of cash in case management, based on global inter-agency toolkit/ standards. Both have been widely used amongst WoS/TXB partners and shared as examples to adapt in the region and globally.	2019

## Why is UNFPA investing in scaling up CVA in its humanitarian programming and coordination?

**CVA is a programming modality, or tool, which can contribute to women and girls' access to SRH services in emergencies including GBV prevention and response by addressing financial barriers.** A number of studies from the field have shown that cash transfers as part of comprehensive SRH, gender and GBV programming can contribute to improved access to services, life-saving emergency obstetric care and life-saving safe housing, as well as increased feelings of empowerment and potentially reduced violence for women and young people in emergencies. As with any other programming tool or modality, it is important to recognize that CVA can also create new GBV risks and/or exacerbate existing risks. Women and girls may face increased risk of intimate partner violence, sexual exploitation, denial of resources or other forms of GBV if new resources—whether cash, voucher or kits/other in-kind assistance—are introduced into humanitarian contexts without adequate GBV risk analysis, mitigation mechanisms, and ongoing monitoring of safety considerations throughout the programme cycle.<sup>5</sup>

There is robust evidence that vouchers increase service utilization for earlier and more frequent antenatal care as well as skilled birth attendance.<sup>6</sup> CVA can also help to address financial barriers that may include the costs of transport, accommodation or essential hygiene items. Where a lack of income in the household is one of the contributing factors to GBV or harmful practices, such as early marriage, CVA can contribute to GBV prevention alongside case management and other social and economic support such as information and discussion sessions for women and men, job training and placement, access to education, etc. Cash has been shown to alleviate household stress, which can reduce intimate partner violence and also contribute to mental health and psychosocial well-being.<sup>7</sup>

Evidence shows that CVA is most effective as a tool to increase access to services and help to reduce GBV when it is integrated into well-designed programmes that include gender and GBV analysis, community outreach including gender discussion groups and health messaging, collaboration with local women's organizations, and linkages to livelihoods programming for both women and men -- all of which are part of UNFPA's global programming. CVA that is designed with protection and "multipurpose" objectives can also contribute to overall well-being and self-reliance.<sup>8</sup> It can enable diverse women and girls to meet their basic needs or to cover the indirect costs of training, mentorship

<sup>5</sup> The limited evidence that is available on cash transfers and GBV outcomes in humanitarian settings shows mixed results. See evidence reviews and field learning on the [Cash Learning Partnership Gender and Inclusion resource page](#), especially the [Gender and Cash Transfers](#) literature review (UN WOMEN, 2018).

<sup>6</sup> Gorter (forthcoming) and [literature review](#) by the Royal Tropical Institute (KIT) and the Global Health Cluster.

<sup>7</sup> [Integrating Cash Transfers into Gender-based Violence Programs in Jordan: Benefits, Risks and Challenges; Improving humanitarian assistance across sectors through mental health and psychosocial support.](#)

<sup>8</sup> See, among others: [Protection Outcomes in Cash-based Interventions and Examining Protection and Gender in Cash and Voucher Transfers.](#)

or other social and economic opportunities. CVA can provide additional flexibility and discretion for persons at heightened risk of exclusion or GBV linked to their age, living with a disability or with HIV/AIDS, or diverse gender and sexual orientation.<sup>9</sup>

**UNFPA is uniquely positioned as both an operational UN agency, working closely with local and national partners, and as the coordination lead of the GBV Area of Responsibility and national GBV coordination groups to promote quality cash and voucher assistance within its humanitarian programming.**

UNFPA has unique proximity to local women's and youth organizations, Women's and Girls' Safe Spaces, national social services and Ministries of Health as part of its longstanding work on SRH, GBV prevention and response and programming for youth and adolescent girls. Strong rapport with these institutions is critical not only for the proper identification of beneficiaries, but also in order to strengthen institutional capacity to ensure continuity of services during crises. Thus UNFPA supports both demand (purchasing power through CVA) and supply (institutions and services) for reproductive health and rights. This represents a comparative advantage with regards to other agencies that are scaling up CVA, and donors appreciate that UNFPA can contribute to an inclusive vision as part of the Grand Bargain commitments to improved quality, coordination and evidence of CVA.<sup>10</sup> This is also reflected in UNFPA's membership in both the Cash and Localization workstreams of the Grand Bargain.

As the lead of the GBV Area of Responsibility under the Global Protection Cluster, UNFPA's GBV Coordinators advocate for GBV risk mitigation across multipurpose cash assistance and sectoral cash and voucher assistance (see table above). In response to a growing demand for specific support for GBV Coordination and CVA, the Humanitarian Office has put in place a roving secondee from the Swiss Agency for Development and Cooperation from Oct. 2020-Sept 2021 who will work closely with UNFPA's global CVA Specialist in the HO. In 2020, UNFPA is also increasing its participation in global coordination fora focused on women's health, GBV prevention and response and CVA, including the Cash task teams of the Global Protection and Health Clusters and the Grand Bargain Cash workstream.

<sup>9</sup> [As the movement for CTP advances how can we ensure people with disabilities are not left behind...?](#)

<sup>10</sup> For example, Switzerland has pushed for a strong Cash and Gender/GBV focus in the GBV AOR REGA team including funding one of the REGA whose role includes advocacy on this area in 2019-2020 and has recently agreed to second a CVA/GBV roving support in the RTSU. The UK (DFID) is also interested in exploring the cash-gender-localization nexus in 2020-2025 (informal communications with DFID senior humanitarian advisers, June 2020).

## **CVA is an approach that can contribute to bridging humanitarian and development programming in a cost-effective manner, in an increasingly challenging global economic context.**

In addition to working across preparedness, conflict and recovery contexts, UNFPA is committed to advancing the humanitarian-development-peace nexus, leveraging its long-term presence in many countries. UNFPA is engaged with partners such as WFP, UNICEF and UNHCR to consider linking humanitarian cash assistance to national social protection schemes for increased resilience, sustainability and national ownership. This is also in line with key donor expectations that humanitarian CVA will “use, link to or align with local and national mechanisms such as social protection systems, where possible and appropriate.”<sup>11</sup>

The increasingly urban nature of humanitarian crises and displacement, potentially reduced humanitarian funding in some contexts and the need for cost-effectiveness require new approaches to reaching those we serve and to reducing women and girls’ barriers to accessing GBV and SRH services. In hard-to-reach areas, mobility-restricted areas due to the COVID-19 pandemic, and regions where international procurement of essential hygiene items is relatively expensive but local markets are functioning, such as Latin America and the Caribbean, cash or vouchers can be provided for women and youth to purchase their own essential items. UNFPA need not create its own systems for this purpose, either, but can and is “piggybacking” on UNHCR, UNICEF and WFP’s CVA delivery systems, further reducing start-up costs. In protracted and recurring crises this could potentially save a significant amount of money on procurement while affording the dignity of choice to the people we serve. To this end UNFPA will consider establishing a corporate MoU with WFP or other sister UN agencies to maximize cost-recovery and consistency in data protection and sharing.

CVA is a unique modality in that it can leverage new technologies such as mobile banking, foster partnerships with other humanitarian actors as well as the private sector in areas such as targeting and delivery, and link to public-private partnerships and national social protection schemes to bridge with development programming and financing. At the local and individual level, CVA can be delivered through local vendors and financial service providers, and boost local market actors including local women who sell hygiene or other essential items in the local market.

CVA inherently offers greater choice and agency to recipients than in-kind assistance. For survivors, making their own decisions can be a crucial part of their healing process. For example, they can opt to use cash for rent rather than shelters and avoid further stigmatization. CVA as part of case

<sup>11</sup> [Common Donor Approach for humanitarian cash programming](#) agreed by Australia, Canada, Denmark, EU/DG ECHO, Germany, Norway, Sweden, Switzerland, UK and USA (Feb. 2019).

management is often integrated into comprehensive support services at Women's and Girls' Safe Spaces, where it can be linked to other social support and training to contribute to self-reliance and economic independence. CVA can also support digital and financial literacy for older women, adolescent girls and others, for example through training and use of electronic vouchers and mobile money.

### **CVA is a core tool for UNFPA's operational delivery.**

As with other humanitarian tools, it will benefit from a more robust ecosystem of support. Without endorsement of and investment in the CVA Commitments and related deliverables, the HO will not be able to adequately provide training and technical support to COs, leading to inconsistent quality and potential harm to our beneficiaries, as well as potential financial and reputational risk for UNFPA.

Given the global evidence and standards and UNFPA's experience and positioning noted above, the following commitments will inform UNFPA's programming, coordination and advocacy with respect to CVA going forward.

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## UNFPA's Commitments with respect to humanitarian Cash and Voucher Assistance (CVA):

1. In line with UNFPA's mandate and with donor commitments to CVA that is "part of a larger humanitarian assistance programme that mainstreams protection and gender concerns and that include referral systems to other services...including protection services,"<sup>12</sup> **UNFPA commits to scaling up CVA within its humanitarian SRH, GBV and youth-oriented programming.** This includes programming to influence Sexual and Reproductive Health seeking behavior and access to services; access to life-saving GBV services and related referrals; access to essential / dignity items and other context-specific objectives as appropriate, for women, girls and young people of diverse characteristics, including GBV survivors and women and girls at risk, older women, those living with disabilities and HIV/AIDS, and LGBTIQ persons.
2. **UNFPA will advocate with donors for increased funding for, monitoring and evaluation of humanitarian CVA that includes a strong gender and protection lens,** in terms of the programmatic objectives or the integration of GBV risk mitigation. This commitment reflects the growing evidence base on the need for strong gender and protection risk analysis and mitigation measures across CVA in order to maximize its effectiveness, regardless of its objective.<sup>13</sup> To contribute to this evidence base, UNFPA will also conduct rigorous research on CVA outcomes in terms of GBV and SRH, identify successful models and key lessons learned to apply to future programming.
3. **UNFPA will leverage its leadership of the GBV AOR and national GBV and SRH Sub-Clusters and Working Groups to advocate for GBV risk mitigation across all members' CVA, and for the inclusion of gender, GBV and protection considerations in multipurpose cash assistance.** GBV Coordinators will advocate for GBV risk mitigation across humanitarian CVA. Coordinators will maintain regular contact with national Cash Working Groups, promote and contribute to GBV Risk Analyses for CVA and monitoring of GBV risks for CVA. They will also advocate for the consideration of women's essential items and miscellaneous protection needs (a small protection top-up) as part of the calculation of the Minimum Expenditure Basket (MEB) and as part of the amount of multipurpose cash transfers that is ultimately delivered to beneficiaries.

<sup>12</sup> [Joint Donor Statement on Humanitarian Cash Transfers](#) by senior officials from EU/DG ECHO, Germany, Norway, Sweden, Switzerland, the UK and the USA (March 2019).

<sup>13</sup> UNFPA contributed to [The Importance of Acting on Grand Bargain commitments for a meaningful focus on gender in cash and voucher assistance responses to the COVID-19 pandemic](#), (May 2020).

4. Just as UNFPA's distributions of "dignity kits" have served as an entry point for UNFPA's GBV prevention and response programming, **UNFPA will similarly consider CVA as an entry point for humanitarian SRH and GBV programming** that meets minimum standards<sup>14</sup> and promotes resilience for women and girls. For example, UNFPA in Mozambique is delivering mobile text messages on SRH, IPC for COVID-19 and GBV prevention on the same phones where women will receive electronic vouchers for essential items, and a free text-messaging hotline will be set up for feedback.
5. **UNFPA will seek to link humanitarian CVA to cash programming in national social protection systems**, and will advocate for top-ups to government cash transfers (vertical expansion) or for the inclusion of additional beneficiaries (horizontal expansion) to include vulnerable women and girls, youth and others at risk of GBV and/or lacking financial access to emergency SRH services. UNFPA will explore potential linkages with the World Bank on safety nets and social protection.
6. **UNFPA will prioritize multipurpose-- unrestricted and unconditional-- cash wherever feasible and appropriate**, for its inherent flexibility and choice for recipients, unless political barriers, markets or programme quality dictates otherwise.<sup>15</sup> This includes the consideration of cash transfers for women and girls to directly and locally purchase their own non-medical grade essential items (dignity and hygiene items) rather than distributing "dignity kits" whenever possible. Vouchers may be used when the programme includes specific objectives and outcomes with regards to the quality of supply, such as certain essential items or health facilities. UNFPA may also consider using "labelled"<sup>16</sup> cash transfers, with additional information and training sessions to promote specific outcomes, as an alternative to restricting the use of cash through vouchers. A gender/GBV/protection lens - from early on and throughout the programme cycle - is a critical added value that UNFPA can provide, to ensure that women and girls can access multipurpose cash.
7. **UNFPA will ensure that a risk mitigation framework and related accountabilities** are developed with inputs from a multi-functional team at headquarters level and operationalized across Regions and Country Offices. This will include staff training on operational risk management and fraud. The risk mitigation framework will form part of corporate guidance and policy on CVA.

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14 [Minimum Initial Service Package \(MISP\)](#).

15 [Joint Donor Statement on Humanitarian Cash Transfers](#) by senior officials from EU/DG ECHO, Germany, Norway, Sweden, Switzerland, the UK and the USA (March 2019).

16 Labelled cash transfers are those that do not require engagement in certain activities or obligations (conditions) in order to receive the cash, but strongly encourage the spending of the cash on certain items, such as hygiene items, or for a certain purpose, such as safe accommodation.



12

## UNFPA CVA RESOURCES

[Cash and Voucher Assistance: Your Role as a GBV Coordinator](#)

[CVA and COVID-19 Tip Sheet for GBV and SRH Programming](#)

[CVA Tip Sheet - Overview of CVA](#)

[Burundi Case Study: How can we reduce GBV risks in cash and voucher assistance?](#)

[Le cas du Burundi : Comment atténuer les risques VBG dans les transferts monétaires?](#)

[UNFPA Asia Pacific Humanitarian Community webpage - Cash and Voucher Assistance](#)

[Cash & Voucher Assistance and Gender- Based Violence Compendium \(inter-agency companion to the IASC GBV Guidelines\)](#)

## CVA GLOSSARY

<b>Humanitarian Cash &amp; Voucher Assistance (CVA):</b>	The provision of cash transfers or vouchers given to individuals, household or community recipients; not to governments or other state actors. This excludes remittances and microfinance in humanitarian interventions (although microfinance and money transfer institutions may be used for the actual delivery of cash).
<b>Conditionality:</b>	Prerequisite activities or obligations that a recipient must fulfil in order to receive assistance. Conditions can in principle be used with any kind of transfer (cash, vouchers, in-kind, service delivery) depending on the intervention design and objectives. Some interventions might require recipients to achieve agreed outputs as a condition of receiving subsequent tranches. Examples of conditions include attending school, building a shelter, attending nutrition screenings, undertaking work, training, etc. Cash for work/assets/training are all forms of conditional transfer.
<b>Delivery Mechanism:</b>	Means of delivering a cash or voucher transfer (e.g. smart card, mobile money transfer, cash in hand, cheque, ATM card, etc.).
<b>Financial Service Provider (FSP):</b>	An entity that provides cash or voucher transfer services, which may include e-transfer services. May include e-voucher companies, financial institutions such as banks and microfinance institutions or mobile network operators.
<b>Labelled cash transfers:</b>	Cash transfers that do not require engagement in certain activities or obligations (conditions) in order to receive the cash, but strongly encourage the spending of the cash on certain items, such as hygiene items, or for a certain purpose, such as safe accommodation.
<b>Modality:</b>	Modality refers to the form of assistance (e.g. cash transfer, vouchers, in-kind, service delivery) or a combination (modalities).
<b>Multipurpose Cash Transfers / Grants / Assistance (MPC / MPG / MPCA):</b>	Periodic or one-off transfers corresponding to the amount of money required to cover, fully or partially, a household's basic and/or recovery needs. Designed to address multiple needs, with the transfer value calculated accordingly. MPC transfer values are often indexed to expenditure gaps based on a "minimum expenditure basket" or other monetized calculation of the amount required to cover basic needs. All MPCs are by definition unrestricted, as they can be spent as the recipient chooses.

**Restriction:** Limits on the use of assistance by recipients. Restrictions apply to the range of goods and services that the assistance can be used to purchase, and the places where it can be used. The degree of restriction may vary – from the requirement to buy specific items, to buying from a general category of goods or services. Vouchers are restricted by default since they are inherently limited in where and how they can be used. In-kind assistance is also restricted. Cash transfers are unrestricted in terms of use by recipients.

**Selection criteria:** The criteria used to select recipients/beneficiaries of CVA. Sometimes called targeting criteria.

**Targeting:** Methodology used to select recipients/beneficiaries.



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