CASH AND VOUCHER ASSISTANCE FOR PROTECTION

TAKING STOCK OF CASH AND VOUCHER ASSISTANCE TO ACHIEVE PROTECTION OUTCOMES IN THE PROTECTION SECTOR IN HUMANITARIAN SETTINGS

JULY 2020
ACKNOWLEDGMENTS

Thanks to the members of the GPC Task Team on Cash for Protection for their collaborative input and to the researchers who mapped evidence on Cash and Voucher Assistance for Protection outcomes within the protection sector. Thanks to the Swiss Agency for Development and Cooperation (SDC) for funding the copyediting, design, and translation of this paper.

© GPC Task Team on Cash for Protection, 2020.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INTRODUCTION</strong></td>
<td></td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>BACKGROUND</td>
<td>1</td>
</tr>
<tr>
<td>DEFINING THE SCOPE OF CASH FOR PROTECTION</td>
<td>1</td>
</tr>
<tr>
<td>Protection</td>
<td>1</td>
</tr>
<tr>
<td>Cash and Voucher Assistance (CVA)</td>
<td>3</td>
</tr>
<tr>
<td>Cash for Protection</td>
<td>3</td>
</tr>
<tr>
<td><strong>CASH FOR PROTECTION CURRENT EVIDENCE, PRACTICE AND GAPS</strong></td>
<td>7</td>
</tr>
<tr>
<td>CASH RISK</td>
<td>7</td>
</tr>
<tr>
<td>CASH FOR PROTECTION</td>
<td>7</td>
</tr>
<tr>
<td>UNDERSTANDING THE USE OF CASH TRANSFERS TO ACHIEVE PROTECTION OUTCOMES IN THE PROTECTION SECTOR</td>
<td>9</td>
</tr>
<tr>
<td>Gender-Based Violence</td>
<td>10</td>
</tr>
<tr>
<td>Child Protection</td>
<td>14</td>
</tr>
<tr>
<td>Housing, Land and Property (HLP)</td>
<td>16</td>
</tr>
<tr>
<td>Mine Action</td>
<td>16</td>
</tr>
<tr>
<td>Other Gaps</td>
<td>18</td>
</tr>
<tr>
<td>UNDERSTANDING VULNERABILITY, TARGETING AND PROFILES AT RISK OF DISCRIMINATION</td>
<td>18</td>
</tr>
<tr>
<td><strong>CVA AND PROTECTION COORDINATION</strong></td>
<td>24</td>
</tr>
<tr>
<td>SILOING BETWEEN CVA AND PROTECTION</td>
<td>24</td>
</tr>
<tr>
<td>COMMUNITIES OF PRACTICE</td>
<td>24</td>
</tr>
<tr>
<td>REFERRAL MECHANISMS</td>
<td>25</td>
</tr>
<tr>
<td>LOCALIZATION</td>
<td>26</td>
</tr>
<tr>
<td>THE ROLE OF THE PROTECTION SECTOR IN MULTIPURPOSE CASH, AND THE MINIMUM EXPENDITURE BASKET (MEB)</td>
<td>27</td>
</tr>
<tr>
<td><strong>MEASURING PROTECTION OUTCOMES AND THE IMPACT OF CVA FOR PROTECTION</strong></td>
<td>29</td>
</tr>
<tr>
<td><strong>CALLS TO ACTION</strong></td>
<td>30</td>
</tr>
<tr>
<td><strong>NEXT STEPS</strong></td>
<td>32</td>
</tr>
</tbody>
</table>
INTRODUCTION

BACKGROUND
The Global Protection Cluster (GPC) Task Team on Cash for Protection (TT C4P) was established in 2017 with the aim of increasing knowledge about the use of Cash and Voucher Assistance (CVA) in the protection sector and increasing the effectiveness and quality of programmes using CVA to achieve protection outcomes. The Task Team hosts open membership, currently bringing together over 40 participants across 30 organizations1 representing a diversity of organizations, countries and experiences on both protection and CVA. Among its objectives for 2019-20, the Task Team identified as a priority the development of a taking stock paper on the use of CVA to achieve protection outcomes in humanitarian settings. This paper is the result of that collaborative effort and will be updated periodically to capture available evidence.

This paper aims to contribute to a common understanding of the use of CVA for protection outcomes within the protection sector amongst humanitarian stakeholders — including implementing agencies (UN, INGO, NGO and CBO), donors and host governments — sharing up-to-date evidence and practice. Another purpose of this paper is to highlight opportunities for the effective use of CVA within the protection sector to achieve protection outcomes, whilst also identifying gaps in knowledge, evidence and practice that require critical attention and resources. While CVA for sectoral or multisectoral outcomes may also contribute to protection outcomes, the scope of this paper is limited to the protection sector’s experience with CVA in stand-alone protection programming.

DEFINING THE SCOPE OF CASH FOR PROTECTION

PROTECTION
In a broad sense, protection in humanitarian action is fundamentally about helping people stay safe from – and recover from – the harm that others might do them: violence, coercion, deliberate deprivation and abuse. The Global Protection Cluster vision is that all people affected or threatened by disaster or armed conflict

1 Members include: WRC, IRC, CaLP, Oxfam, ICRC, INTERSOS, DCA, NRC, War Child Canada, War Child UK, UNHCR, CARE, UN OCHA, Concern Worldwide, Mercy Corps, IOM, ActionAid, WFP, Caritas Switzerland, Independent consultants, Mercy without Limits, Key Aid Consulting, European Civil Protection and Humanitarian Aid Operation (DG ECHO), World Vision International, Relief International, UN Women, Habitat for Humanity and ADRA. Membership is open on a rolling basis.
have their rights fully respected, and their protection assured by relevant and timely actions through all phases of the crisis and beyond. Protection encompass all efforts pursued by all actors to ensure that the rights of affected persons and the obligations of duty bearers under international law are understood, respected, protected and fulfilled without discrimination. Protection activities seek to keep people safe, addressing immediate protection concerns, as well as preventing or reducing protection risks. Under this understanding, protection activities may involve preventive actions that aim to stop, prevent or alleviate the worst effects of abuse and discrimination in all its forms, remedial actions to help people recover from abuse, and environment-building actions to create or consolidate an environment conducive to full respect for the rights of individuals and groups. A protection response may also involve advocacy efforts as well as assistance programmes designed to promote the rights, safety and dignity of persons of concern, including: legal assistance, community outreach, case management and creation of safe spaces for individuals at risk of protection issues.

With the endorsement of the Inter-Agency Standing Committee (IASC) Policy on Protection in Humanitarian Action (2016) which emphasizes collective responsibility and contribution to protection outcomes by all humanitarian actors, IASC affirmed the responsibility of all humanitarian actors to place protection at the core of humanitarian action as part of preparedness efforts, in immediate and life-saving activities, and throughout the duration of a crisis and beyond. As a result, all humanitarian actors— including Humanitarian Coordinators (HCs), Humanitarian Country Teams (HCTs), Clusters, Agencies and NGOs— should ensure that “the protection of all persons affected and at-risk informs humanitarian decision-making and response, including engagement with States and non-State parties to conflict” by designing and delivering a humanitarian response that is principled, timely, effective and efficient, and contributes to longer-term recovery.

In practice, all humanitarian actors must therefore commit to: (i) Addressing protection issues that intersect with formal mandates and sector-specific responsibilities; (ii) Engaging collectively to achieve meaningful protection outcomes that reduce overall risks to affected persons by decreasing threats, reducing vulnerability and enhancing capacities; (iii) Mobilizing other actors within and beyond the humanitarian system, as appropriate, to contribute to collective protection outcomes; and (iv) Evaluating commitments and progress towards placing protection at the core of the humanitarian response. It should be noted that the IASC Policy on Protection places additional responsibilities on HC, HCTs, Clusters and the Protection Cluster in terms of operationalising the Centrality of Protection.

---


3 Ibid (2016).
The Global Protection Cluster comprises four distinct areas of responsibility (AoR), namely Child Protection, Gender-Based Violence, Mine Action, and Housing, Land and Property, providing technical advice and support in their specialized areas. However, the existence of these areas of responsibility should not be interpreted as limiting protection to particular recurrent risks and threats, such as GBV, child abuse, explosive weapons or eviction, nor should it be interpreted as concerning only certain demographic groups, such as children or women. Instead, we must understand protection as all activities aimed at obtaining full respect for the rights of the individual.4

CASH AND VOUCHER ASSISTANCE (CVA)

A range of different terms have been used to refer to the use of cash and/or vouchers in humanitarian assistance. Common examples are ‘Cash Transfer Programming’ (CTP), ‘Cash Based Assistance’ (CBA) and ‘Cash Based Interventions’ (CBI). This paper will use ‘Cash and Voucher Assistance’ (CVA) as the collective term.5 In the context of humanitarian assistance, CVA refers to the provision of cash transfers or vouchers given to individuals, households or community recipients, not to governments or other state actors.6 CVA are some of the fastest growing evidence-based interventions in the humanitarian community; evidence around CVA is rapidly growing and an increasing number of interventions harnessing CVA are now evidence-based, complementing existing humanitarian assistance modalities such as in-kind and direct service provision.

CASH FOR PROTECTION

Practitioners have long recognised that CVA — along with in-kind, services and case management — are well positioned to address multisectoral needs and may contribute to protection outcomes. While CVA are well-established tools for food security and basic needs outcome areas, to date, the use of CVA in the Protection sector (the focus of this paper) has been more limited compared to its use in other sectors.7 This is in part due to poor programme

---

4 IASC definition of protection “… all activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law (i.e. International Human Rights Law (IHRL), International Humanitarian Law, International Refugee Law (IRL)).”
6 “This excludes remittances and microfinance in humanitarian interventions (although microfinance and money transfer institutions may be used for the actual delivery of cash).” (Glossary for CaLP Terminology for Cash and Voucher Assistance, http://www.cashlearning.org/resources/glossary#CVA).
design and planning which can prevent clarity on whether CVA are designed with protection as a core outcome. It is also due to the specific nature of protection programmes, ranging from delivering emergency/protection services to affected populations, technical support to governments, engagement with communities, or sometimes delivery of in-kind aid. Protection issues are complex, and consequently, protection programmes are complex, with CVA serving as modalities among others that can be harnessed to contribute to protection outcomes.

While “protection cash” or “cash for protection” as “the use of cash and voucher assistance to help achieve protection outcomes” are terms progressively used among humanitarian practitioners, there is still a perceived lack of common understanding of these concepts and practices. Confusion sometimes surrounds how CVA can be considered within the “protection continuum”, while in other cases, the issue is related to what can and cannot be considered an appropriate use of CVA for protection outcomes. Existing guidance highlights how CVA can be differentiated and used in any of the three spheres of the protection continuum (See Insert 1):

---

**Insert 1: The Protection Continuum**

---

**PROTECTION MAINSTREAMING** is the process of incorporating protection principles (i.e. meaningful access and non-discrimination, safety, dignity & do no harm, accountability, and participation and empowerment) at all stages of the programme cycle in humanitarian programmes using CVA, which could be intended to meet one or more basic needs objectives or sector-specific outcomes, such as food security, livelihoods, education, Water, Sanitation and Hygiene for All (WASH), shelter and health.

**EXAMPLE**: Ensure that targeting methodologies used in the delivery of multipurpose cash transfers to meet basic needs do not expose beneficiaries to protection risks (such as bribery and extortion) and ensure strong community sensitisation, in particular by working with community leaders to ensure that communities understand targeting methodologies to alleviate tensions and associated risks at the community level.

**PROTECTION INTEGRATION** is the design of humanitarian programmes, including CVA and other modalities, to support both protection and other non-protection assistance objectives. In this sphere of the protection continuum, programming includes sector-specific responses beyond the protection sector to achieve protection outcomes, and also actively contributes to risk reduction among the affected population. Protection integration requires all humanitarian actors to commit, wherever feasible and appropriate, to protection objectives in the design of their activities. It can therefore support the system-wide commitment to the centrality of protection as it relies on the collaboration of different actors in a multisectoral humanitarian response.

**EXAMPLE**: CVA and complementary activities from other sectors such as food security (CVA to purchase food), shelter (CVA to pay rent), education (CVA for uniforms or text books) and contribute to protection objectives (prevent risky coping mechanisms including sex work/transactional sex, exploitative/hazardous labour and child labour).
**SPECIALIZED/STAND-ALONE PROTECTION** programmes have specific protection objectives. They aim to prevent and respond to protection concerns such as violence, exploitation, deliberate deprivation or discrimination and to support beneficiaries to enjoy their rights. Protection actors and humanitarian actors with protection expertise play a key role in ensuring the implementation of specialized protection activities and services aimed at meeting specific protection objectives.

**EXAMPLE:** Use of CVA to support programmes with exclusively targeted protection activities. Activities might work towards the prevention or reduction of protection risks or threats (such as supporting legal case management where, for instance, financial barriers exist to accessing civil documentation).

**This paper focuses exclusively on the third aspect of the continuum.** However, it is recognized that CVA can be used for protection outcomes in other sectoral or multisectoral interventions. Evidence suggests that one of the major outcomes of CVA for basic needs is the reduction of risky coping mechanisms, such as school dropouts, child labour, sex work and begging. Adequate shelter, in addition to enhancing physical protection, is a source of psychological relief for those who have lost their homes due to the trauma of a disaster or crisis. Security of Tenure is not only limited to legal frameworks, but is also related to people’s perception of how secure their right to use accommodation is. Another example is providing cash for food security. Adequate caloric intake can help prevent risky coping mechanisms such as sex work, or exposure to other risks such as trafficking or forced labour (it also may reinforce positive coping mechanisms). A final example is providing cash as part of an education intervention to make uniforms, meals and books affordable, which can help reduce exposure to child recruitment, child labour, early marriage and other protection risks. The GPC TT C4P also recognizes that protection mainstreaming is an essential aspect of using CVA to achieve protection outcomes in targeted protection activities.

Furthermore, it is also recognized that further exploration into the use of CVA in integrated protection programming is needed. The TT C4P will look to specifically explore this in the future.
CASH FOR PROTECTION: CURRENT EVIDENCE, PRACTICE AND GAPS

CASH RISK

There is strong agreement that CVA as modalities are not inherently riskier than other modalities; associated risks are context, age, gender and diversity-specific, and comparable to other humanitarian modalities. Indeed, considerable work has already been undertaken on exploring potential risks that beneficiary populations may face as a result of using CVA (i.e. whether the introduction or delivery methods of CVA creates protection risks). In response to this, a number of different tools have been developed to support humanitarian practitioners ensure risk mitigation and inclusion in multipurpose cash assistance by systematically identifying risks that beneficiary populations may face as a result of using CVA in humanitarian settings.

While Cash Risk is the subject of extensive discussion and debate that could be presented here, the purpose of this paper is to explore the use of CVA to achieve protection outcomes in humanitarian settings and as such, the remaining sections of this paper are dedicated to this endeavour.

CASH FOR PROTECTION

A foundational literature review was undertaken in 2015 that summarized


11 The GPC recommend using the Protection Risks and Benefits Analysis Tool Decision Tree to identify and assign context-specific weights/importance to protection risks and benefits in terms of safety and dignity, access, data protection, market impacts, people with specific needs and risks, social relations, fraud and diversion, and durable solutions/early recovery.

research and identified remaining gaps. A number of new research efforts on cash and protection have been undertaken in recent years which have begun to document the models and results of using CVA as tools to help achieve child protection, gender-based violence (GBV), housing land and property, mine action, gender and mental health and psycho-social support (MHPSS) outcomes. A number of agencies are planning more targeted and/or larger and increasingly rigorous research in 2020.

A number of humanitarian actors have used CVA within the protection sector by pairing CVA with case management, protection monitoring and other services aimed at achieving outcomes in the protection sector. Lessons can be learned from these efforts to replicate successful models at scale and to develop further evidence on the modalities and design features of CVA that can be successfully used in different contexts to address different protection concerns as part

16 UNHCR (2019), Protection Impacts of Cash Assistance with a focus on Child Protection (Jordan, Egypt and Lebanon) https://www.unhcr.org/5e3a9c914.
24 For instance, the IRC is conducting a study in 2019-20 into understanding barriers to the use of CVA for Unaccompanied and Separated Adolescents.
of broader protection programmes and other sectoral programmes aimed at achieving protection outcomes.

There is an understanding that the use of CVA in protection programming suggests that cash assistance — along with in-kind assistance, case management and other services — has the potential to contribute to protection outcomes. For example, a cash transfer might help address aspects of a GBV response, i.e. when core GBV response services, legal services or health services are not available free of charge and financial access to these services is needed. Therefore, cash can be a key facilitator of survivors’ recovery. CVA alone are unlikely to achieve meaningful long-term protection outcomes unless integrated into holistic programming that includes case management and referral systems with complementary services and cross-sectoral programming. The challenge is to ensure that sufficient resources, including longer funding timeframes, staff capacities and availability of quality services are in place to enable comprehensive protection programming.

While the evidence on the use of CVA in protection programming is growing, there are still gaps that remain in determining the best CVA design and necessary complementary services to reach longer-term protection outcomes via complementary programming, including CVA. Efforts are still needed to understand the breadth of possible uses of CVA in the protection sector, in a strategic and coordinated manner.

UNDERSTANDING THE USE OF CASH TRANSFERS TO ACHIEVE PROTECTION OUTCOMES IN THE PROTECTION SECTOR

Efforts have been made to delineate criteria to support the decision of using cash transfers for protection outcomes, in contexts where cash transfers has been deemed feasible. For example, for the European Civil Protection and Humanitarian Aid Operation (DG ECHO), cash transfers are one of several modalities of response that can be used in a humanitarian protection action/project/programme, according to the following criteria:

THE PROTECTION ANALYSIS clearly identifies which threats are addressed by the action and how cash transfers is the most appropriate modality alongside other components of the programme;

25 This term refers to programming where different modalities and/or activities are combined to achieve objectives. Complementary interventions may be implemented by one agency or by more than one agency working collaboratively. This approach can enable identification of effective combinations of activities to address needs and achieve programme objectives. Ideally this will be facilitated by a coordinated, multisectoral approach to needs assessment and programming.

THE LOGICAL CAUSALITY AND THE PROCESS LEADING to the protection outcome through the chosen cash transfer modality are clearly and explicitly identified;

THE CASH TRANSFER is framed in a range of protection activities and processes.

Cash transfers can be used in protection programmes to address a range of household and individual protection needs and can be designed to achieve specific protection outcomes that may vary per context and are subject to context-specific protection and risk analysis. This includes unconditional cash assistance for persons at high-risk of deprivation, such as (but not strictly limited to) single parents with multiple dependents, unaccompanied minors, persons with disabilities, older persons, survivors of violence and other categories of people deemed at heightened protection risk.

Unconditional as well as conditional cash transfers might also be used to support durable solutions for displaced people, assisting voluntary return with costs associated with transportation, reintegration and basic needs. In some contexts, cash assistance and grants are used to enable access to legal assistance and remedies. For instance, cash assistance might be used to cover the cost of legal representation, civil documentation, transport to attend court hearings or visits to government offices.

Complementary programmes, which combine cash transfers with one or more types of modalities and/or activities, are another area where attention is needed. Types of complementary support can consist of (i) components that are provided as integral elements of cash transfers, such as provision of additional benefits or in-kind transfers, information or behaviour change communication (BCC), or psycho-social support, and (ii) components that are external to the intervention but offer explicit linkages into services provided by other sectors, such as direct provision of access to services, or facilitating linkages to services. To better define how the different modalities and/or activities complement each other to reach protection outcomes will help to promote this approach, while avoiding uses that do not necessarily aim directly at achieving protection outcomes.

The use of cash transfers for achieving protection outcomes may also be used to advance impact on topics such as complementary protection programmes, gender dynamics and resilience. These are areas deserving further research.

GENDER-BASED VIOLENCE:

In recent years, a number of Inter-agency efforts have been made to define GBV outcomes achieved through the use of CVA, such as the literature review conducted by UNHCR and the literature review completed by the Women’s Refugee Commission, the International Rescue Committee and the London School of Economics to develop evidence maps, to highlight key gaps and also

make recommendations for future research. When a lack of financial resources and economic opportunities are contributing factors to GBV, or when a lack of resources is the result of a GBV incident (e.g. temporary loss of a survivor’s livelihood income due to trauma), CVA may be appropriate modalities to respond to and mitigate the risks of GBV.  

<table>
<thead>
<tr>
<th>GBV OUTCOMES</th>
<th>LIMITATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduction in Risk or Exposure to GBV:</td>
<td>CVA alone cannot overcome gender-based norms and systems, such as community-wide perceptions of violence and family planning, the inability to inherit or own property, guardianship of children upon divorce, or address the absence of existing support services.</td>
</tr>
<tr>
<td>• Improved distribution of household decision-making power</td>
<td>• Persistence of poor practice (poor coordination between cash and GBV practitioners, failure to integrate cash and GBV programming and a failure to conduct ongoing gender and protection analysis) undercuts the potential of CVA contributing to GBV outcomes.</td>
</tr>
<tr>
<td>• Reduction in intimate partner violence</td>
<td>• Some Cash and GBV practitioners currently operate in silos inhibiting coordination. As a result, programming is not integrated and ongoing gender and protection analysis across the programme cycle is absent. The few studies which demonstrated integrated programming had positive impacts.</td>
</tr>
<tr>
<td>• Reduction of risk or exposure to sexual harassment, exploitation or abuse</td>
<td></td>
</tr>
<tr>
<td>• Reduction or prevention of forced and early marriage</td>
<td></td>
</tr>
<tr>
<td>• Increased asset ownership or control over resources</td>
<td></td>
</tr>
<tr>
<td>Access to Services:</td>
<td></td>
</tr>
<tr>
<td>• Gender-based violence survivor access to response and recovery services</td>
<td></td>
</tr>
<tr>
<td>• Access to reproductive health services</td>
<td></td>
</tr>
<tr>
<td>• Access to psychological/mental health services</td>
<td></td>
</tr>
<tr>
<td>Avoidance of Risky Coping Strategies</td>
<td></td>
</tr>
<tr>
<td>Reduction of reliance on or improved safety of sex work 29</td>
<td></td>
</tr>
</tbody>
</table>


29 Ibid.

30 Ibid.
EVIDENCE GAPS

1. The impact of CVA for the most excluded and marginalized groups of GBV survivors and individuals at risk, including women with disabilities, older women, married and unmarried adolescent girls, and persons with diverse sexual orientation and gender identities.

2. How different modalities of CVA (for example, conditional and unconditional as well as restricted and unrestricted transfers) and delivery mechanisms (ATM card, mobile money, cash in envelopes) influence prevention and recovery.

3. What activities paired with CVA are most effective — gender discussion groups, links to sustainable livelihoods, financial literacy training, etc. to enhance displaced women’s protection.

4. The long-term impacts once the short humanitarian programme cycle ends and displaced individuals continue to recover from shocks and may have to respond to new ones.\(^\text{31}\)

KEY FINDINGS

The majority of evidence relates to the impact of CVA on risk or exposure to GBV outcomes; less evidence is available on the impact of CVA on access to survivor services and avoidance of risky coping strategies. Evidence on the impact of CVA to deliver increased household decision-making power was the most common (52%), followed by reduced intimate partner violence (23%), increased asset ownership and control of resources (9%), and reduced early and forced marriage (6%). Engagement in sex work, access to GBV response and recovery services, and exposure to sexual harassment, exploitation, and abuse were represented in only one or two studies.\(^\text{32}\)

The majority of studies referenced MultiPurpose Cash Transfers (MPC) as the preferred cash modality, followed by Complementary programming\(^\text{33}\) and Conditional Cash transfers.\(^\text{34}\) Seventy-one percent of the interventions had positive results, 25 percent were neutral and 4 percent were negative. Findings

\(^\text{31}\) Ibid.
\(^\text{32}\) Ibid
\(^\text{33}\) Complementary programming or Cash plus, refers to the combination of different modalities and/or activities to achieve objectives. See CaLP (2019) Glossary for CaLP Terminology for Cash and Voucher Assistance, http://www.cashlearning.org/resources/glossary#CVA
\(^\text{34}\) For more information on these types of CVA modalities see CaLP (2019) Glossary for CaLP Terminology for Cash and Voucher Assistance, http://www.cashlearning.org/resources/glossary#CVA.)
show that MPC have mixed results on the prevention and mitigation of and response to GBV. In some cases, the result was positive, while in others it was neutral. In programmes that aim to achieve protection outcomes, evidence shows that having a good understanding of gender dynamics in communities and the determinants of the GBV risks you want to reduce is crucial. Determining if GBV has an economic cause that can potentially be addressed through CVA, for instance, is vital to establish – along with a robust theory of change and causal logic. Overall, the deciding factor in achieving a positive outcome was **pairing MPC with cash plus programming**—complementary activities, such as gender discussion groups and psycho-social support delivered as part of programming to support individuals at risk of GBV and survivors.\(^\text{35}\)

**Poor targeting practices were pervasive in many studies**, based on the assumptions that gender-based targeting (e.g. targeting female heads of household) would yield positive and protective results. Gender-based targeting that is based on assumptions (e.g. that women will spend CVA to enhance family well-being) rather than based on consulting crisis-affected communities who should be targeted within the household with insights on the potential risks and benefits may cause harm and reinforce gender inequality.\(^\text{36}\) Consultations with men and women (held separately) and a thorough gender and risk analysis are needed to inform targeting approaches.\(^\text{37}\)

**Positive spillover effects of CVA on GBV** included improved psycho-social well-being, such as reduced anxiety and increased morale; increased confidence to report GBV; increased ability to participate in social activities and community practices; improved community relations; and access to education. There is also some evidence that CVA may reduce GBV risks even when not specifically designed to do so, though risk reduction is usually short-term. This is also evidence that combining CVA with appropriate services may result in more sustainable protection impact that goes beyond the duration of cash transfer.

**Negative spillover effects of CVA on GBV** in the limited number of studies included the double burden on women targeted for CVA and experienced an increase to their already taxing workload due to changes in gender roles; deterioration in community relations due to jealousy from those not targeted by an intervention and allegations of corruption in the selection process; and reports of unsettled marital dynamics (such as divorce, second marriages, or abandonment, although many reports were anecdotal).\(^\text{38}\)

---


\(^{36}\) The question of targeting practices and vulnerability criteria in CVA are explored further in section 2.4 of this paper.


\(^{38}\) Ibid.
CHILD PROTECTION:

Inter-agency efforts have also been made to define Child Protection outcomes achieved through the use of CVA, such as the literature review conducted by the London School of Economics to develop an evidence map for CVA in child protection, to highlight key gaps and provide recommendations for future research. Subject to context-specific analysis, CVA might be suitable modalities to ease risky coping strategies that are harmful to children, such as child labour, early marriage and early pregnancy, and to reduce incentives to engage in behaviours harmful to children and their development, at least in a short-term. CVA do not have to target children directly to have positive effects on children, including child protection outcomes.

<table>
<thead>
<tr>
<th>CHILD PROTECTION OUTCOMES</th>
<th>LIMITATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Reduced Child Labour</td>
<td>• Supply-side limitations appear to be crucial and require a multifaceted and coordinated approach.</td>
</tr>
<tr>
<td>• Reduced Child Marriage</td>
<td>• Lack of physical security and safety concerns can be a significant barrier that CVA alone would not address.</td>
</tr>
<tr>
<td>• Reduced Exposure to Violence and Risk</td>
<td></td>
</tr>
<tr>
<td>• Alternative Care</td>
<td></td>
</tr>
<tr>
<td>• Improved Access to Services</td>
<td></td>
</tr>
<tr>
<td>• Reintegration</td>
<td></td>
</tr>
<tr>
<td>• Reduced Parental Neglect</td>
<td></td>
</tr>
<tr>
<td>• School Attendance and Retention</td>
<td></td>
</tr>
</tbody>
</table>

EVIDENCE GAPS

1. Comparative research and robust evaluations across a broader range of CVA modalities, interventions and contexts;
2. Greater emphasis on monitoring sectoral outcomes of MPC;
3. Comparative evaluation of conditionality;
4. Comprehensive programming, particularly the interaction of CVA modalities with interventions aimed at reducing non-financial barriers to education;
5. How CVA can be leveraged to achieve child protection outcomes for those with disabilities. Awareness of the limitations of CVA to child protection outcomes can better inform interventions in these sectors.

KEY FINDINGS

Evidence had mixed results: 50% positive and 45% neutral. Only one intervention with a child protection outcome was found to have a direct negative impact (which was a multipurpose cash transfer programme) on risk or exposure to violence. Based on studied interventions, child labour and exposure to risk and violence were found to be the most common outcomes. CVA may be effective in preventing child labour in the short-term in as far as CVA help to keep children in school and reduces exposure to risk and violence resulting from lack of income.

With regards to unaccompanied and separated children — CVA are associated with a decrease in children being separated from their parents and an increase in childcare by parents, close family members, or siblings. Evidence also shows that conditional cash transfers allows mothers to avoid migrating for work, and increase the time they spend caring for their children, including breastfeeding their infants and, if conditional on increased schooling for girls. CVA can also increase the time mothers spend caring for their younger children, relieving adolescent girls of this task.

Evidence of long-term impacts on child labour and practices that may enable risk and violence are lacking. Conditional cash transfers are an effective way to tackle child labour but the amount of the transfer has to offset the cost of not relying on child labour. Regardless of the modality of assistance provided reduction in child labour (often accompanied by increases in school attendance) is unlikely to be maintained beyond the duration of the intervention if cash transfers are implemented as a stand-alone activity. For sustainability reasons it is therefore recommended to integrate CVA with non-CVA activities to strengthen targeted households’ livelihoods and economic situation. Similarly, there is limited evidence of positive impacts of CVA on child marriage. Most of the studies are inconclusive, suggesting that child marriage is a complex issue, and the potential for CVA to reduce its incidence is still unclear. Positive and negative impacts related to child protection were identified, however, more rigorous studies must be done to explore the potential for both positive and negative spillover effects.

Evidence appears to indicate that CVA may be more likely to result in positive child protection outcomes if CVA include some form of design flexibility. For instance, if the delivery mechanism, amount and frequency of cash transfers can be adjusted, the programme has the ability to absorb new beneficiaries previously not included and is responsive to life circumstances, such as expansion of families by inclusion of new births, unexpected illness, disability, etc. Clear monitoring procedures and systematic monitoring and learning throughout the life of the programme allow capturing intended and unintended consequences.
for children, both in programmes designed to achieve child protection outcomes and in programmes aimed at improving nutrition, food security or livelihood of households in general.

HOUSING, LAND AND PROPERTY (HLP)
Inter-agency efforts have also been made to understand potential HLP outcomes that can be achieved through the use of CVA, such as the literature review conducted by the Global Protection Cluster\textsuperscript{40} and also the Tip Sheet developed on HLP.\textsuperscript{41} It should be noted also that the GPC TT C4P is currently undertaking evidence mapping on this area of protection. This position paper will be updated periodically to capture available evidence.

\textbf{KEY FINDINGS}
Evidence shows that market-based exchanges might assist in the de facto integration of displaced persons with host population. Fostering economic connections, including through CVA, across different economic classes may increase displaced persons access to social and economic capital. \textit{Combining CVA with other types of programming and appropriate services may result in a more sustainable protection impact} that goes beyond the duration of cash assistance. When considering cash-based assistance, the \textit{feasibility and capacity of relevant market systems, including housing, rental and markets for construction materials, need to be assessed continually throughout the response. Unrestricted} cash grants (that can be spent on anything) will always be spent on a household’s most urgent unmet need (usually the majority is spent on food).\textsuperscript{42}

MINE ACTION
Inter-agency efforts have also been made to understand potential HLP outcomes that can be achieved through the use of CVA, such as the literature review conducted by the Global Protection Cluster\textsuperscript{43} and the Tip Sheet developed

\begin{thebibliography}{9}
\bibitem{42} Ibid.
\end{thebibliography}
on Mine Action. However, evidence is still limited and as such the TT C4P is currently undertaking evidence mapping on this area of protection. This position paper will be updated periodically to capture available evidence.

Mine Action includes demining (non-technical and technical survey, marking and fencing, clearance and land release, Mine Risk Education (MRE), victim assistance (consisted of emergency and ongoing medical care, rehabilitation, psycho-social support and socioeconomic inclusion) and stockpile destruction. When selecting a delivery mechanism, considerations must be given such as access for persons living with disabilities, including landmine survivors with mobility, sight or hearing impairments as well as survivors suffering from mental health issues. It is not disability itself that makes people vulnerable, but the barriers to access that they face. These barriers are usually context-specific and part of lived experience of persons with disabilities, then work with them, and not just for them, to identify these barriers. Mine clearance capacity often cannot meet demand, leaving mine/Explosive Remnants of War (ERW) affected communities to cope with explosive hazard risk that threatens their livelihoods and subsequently, their lives and limbs. For those people who have an accident with a mine/ERW and survive, generating income tends to be a priority. Once communities have been cleared of mine/ERW, subsequent support is often required to restore the environment and lives of people affected by crisis. Applying a human-centred approach helps shifting attention to people, their livelihoods, choices and preferences from the focus on mine clearance only.

**KEY FINDINGS**

The evidence shows that intentional mine/ERW risk taking behaviour is often motivated by livelihood pressures. Economic necessity and lack of alternative income opportunities may lead to collection of unexploded ERW, which subsequently are neutralized by the villagers themselves and then sold as scrap metal with extracted explosives used (e.g. fishing). This puts them at risk of a mine/ERW accident. Prohibiting scrap metal collection might have a counter-effect, i.e. force underground trade and likely increase the risks to people that are already vulnerable in the face of serious livelihood challenges. Ultimately it is clear that CVA may facilitate alternative mine/ERW safe livelihood strategies, thereby reducing mine/ERW risk taking behaviour.  

---


45 Ibid.
OTHER GAPS

Future research should also map and analyse findings from development settings (e.g. literature on social safety nets) on cash for protection outcomes across areas of responsibility and for populations at risk and be tested in humanitarian settings.

UNDERSTANDING VULNERABILITY, TARGETING AND PROFILES AT RISK OF DISCRIMINATION

In humanitarian settings, older people, children, persons with chronic diseases, persons with disabilities, pregnant and lactating women are almost universally considered categories facing heightened or compounded risks (such as deprivation, lack of access, discrimination) and/or persons requiring specific measures to have equitable access to services (such as accessibility of facilities and communication) and, sometimes, specific services to support their own dignity and well-being (such as specific services related to Sexual and Reproductive Health, access to medication, rehabilitation).

Very often these profiles are categorized as “vulnerable”. In some cases, people with specific needs such as those for pregnant and lactating women, older people, or minorities will not always correlate with economic vulnerability, but the assessing agency can make referrals for other assistance as necessary. On the other hand, people with context-specific protection risks such as increased risk of recruitment of boys into armed groups, and early marriage for girls, are not necessarily economically vulnerable or poor. In fact, economic vulnerability and marginalization may be part of the root causes of protection risks. People are, or become, more vulnerable due to an intersecting combination of physical, social, environmental, cultural and political factors, and vulnerability is not a fixed category. The concept of Intersectionality is important to consider when exploring vulnerability as we must examine how interlocking systems of oppression mean that women and girls experience violence and discrimination differently based on their race, class, age, disability, sexual orientation,

RESOURCES: KEY RESOURCES FOR EVIDENCE-BASED CASH FOR PROTECTION CAN BE ACCESSED VIA CALP’S PROGRAMME QUALITY TOOLBOX AND THE GLOBAL PROTECTION CLUSTER/AORS. AS EVIDENCE GROWS AND NEW RESOURCES ARE DEVELOPED AND EXISTING RESOURCES ARE STRENGTHENED, IT IS ESSENTIAL THAT THESE KEY REPOSITORIES REMAIN CURRENT AND ARE WIDELY ACCESSIBLE.

46 http://www.cashlearning.org/resources/pqtoolboxcashlearning---
47 http://www.globalprotectioncluster.org/

gender identity, ethnicity and religion. Not everyone with the same characteristics will experience the same level of vulnerability. For example, persons with disabilities are often considered as a priority group in CVA programmes or considered as “highly dependent” and “weighted” accordingly in dependency ratios, without considering that they may have as well capacities or contribute to economic growth, and without identifying and addressing the barriers that they may face when accessing CVA programmes.

Protection-sensitive vulnerability targeting attempts to capture the above and simultaneously avoids resorting to the use of standardized vulnerability groups. Using outcomes derived from a protection risk analysis, CVA may be designed to address the protection concerns of individuals and groups based on:

- the risk of exposure to harm, exploitation, harassment, deprivation and abuse, in relation to identified threats;
- the inability to meet basic needs;
- the physical, information or attitudinal barriers that may prevent access to service on an equal basis with other individuals or groups;
- limited access to basic services and livelihood/income opportunities and associated risks;
- the ability of the person/population to cope with the consequences of this harm; and
- due consideration for individuals with specific requirements.

CVA programmes are often designed to enable people to meet their basic needs and access essential services that are inaccessible to them. This may or may not include people requiring specific measures to ensure equitable access to services and at high-risk of deprivation, such as (but not strictly limited to) single parents with multiple dependents, unaccompanied minors, people with disabilities, older persons, survivors of violence and other categories of people deemed at heightened protection risk.

- Aim for indirect benefits to these individuals based on identified protection risks.
- Refer these individuals or households to alternative or complementary activities/services.
Vulnerability is increasingly being understood as a complex concept. A person’s vulnerability and risks status are both context-specific and can change over time.

The GPC Guide for Protection in Cash-Based Interventions makes a number of useful recommendations to help identify persons requiring specific measures to have equitable access to services and/or who face heightened protection risks and to assess if CVA are relevant for them – and if it is not, how referrals should be made to other assistance.

- Consider CVA for all of the affected communities if resources allow.
- Consider including those on the border of the “most vulnerable” threshold used to determine.
- Eligibility, especially when those individuals or households are engaging in negative coping mechanisms that might decline with cash assistance.
- Aim to use a combination of targeting methods (e.g. community-based, administrative) to improve access and inclusion.
- Even when community-based targeting is not feasible or appropriate, engage communities in the targeting process.
- Pre-screen cases that have appealed exclusion by a first stage of targeting, if appropriate.
- Ensure that a complaint and feedback mechanism is in place and known to the wider community (beneficiaries and non-beneficiaries) before the targeting is carried out and before any changes in process or criteria.

DG ECHO lists ‘physical, social, environmental, cultural and political factors’ as determinants of a person’s vulnerability at a certain point in time. Similarly, the ICRC/IFRC recognize that people may be put in a position of vulnerability due to their age, disability, sexual orientation, health status, including HIV/AIDS and other chronic illnesses, social status, immigration and/or legal status, ethnicity, faith and nationality (or lack thereof). Both DG ECHO and ICRC/IFRC highlight that certain factors such as age, gender and poor health are usually common determinants of a person’s vulnerability to particular risks. It is always important to associate vulnerability to a particular risk, as this gives the opportunity to manage the risk, rather than labelling an individual.

**Vulnerability status also changes over time.**

At the onset of the response to a humanitarian crisis, the needs of the affected populations are often highly uncertain. As the situation evolves, new contingencies may emerge or existing ones may dissipate. Risks and vulnerabilities can change over time, and this must be considered in targeting decisions. CVA is a tool that can help identify such changes and adapt responses accordingly.

49 GPC (2017) Guide for Protection in Cash-Based Interventions


52 GPC Protection Mainstreaming Training Package (Session 4).
of an emergency, displaced populations may not have access to bank accounts or have the right permission to work. In this case, the target group’s requirements may be more homogenous and blanket assistance for a set amount of time may be appropriate and effective. However, as conditions change over time displaced populations’ requirements are likely to become more differentiated and a more comprehensive assessment of contextual requirements and vulnerabilities is required. This is illustrated further in Insert 2:

**INSERT 2: Potential Use of CVA Throughout the Assistance Cycle**

- **Meeting basic needs and access to essential services such as food, NFIs, shelter, water, and energy/utilities.**
- **Facilitating access to health and education services.**
- **Replacing lost livelihoods assets.**

Access to basic needs and essential services, livelihoods assets.
Community empowerment and self-reliance.
Incentives for community and environmental projects and for training and education.
CVA for transport, rebuilding livelihoods, house reconstruction and repair.

Assessments consistently reveal that not all persons are equally at risk because of various factors affecting their vulnerability. There may be persons of concern who are particularly at risk based on intersecting aspects of identity,

---

53 This visual has been adapted from UNHCR (2011) Operational Guidance for Cash-Based Interventions in Displacement Settings. https://cms.emergency.unhcr.org/documents/11982/48012/UNHCR+Guidance+on+Cash-Based+Interventions+describes+how+to+determine+the+delivery+mechanism+for+CBIs/2ddc49a7-a245-4f8e-9ba9-3eabe4537249.
including age, gender, ethnicity, disability status, marital status, dependency ratio and source of livelihood. These categories can be used to facilitate targeting through context-specific analysis and proxy indicators. Framing a response using CVA through an intersectional lens, allows for the design and delivery of humanitarian action that better meets the diverse requirements of affected populations, whilst promoting the fundamental protection principles that underpin all humanitarian endeavours.

Targeting persons requiring specific measures to have equitable access to services through CVA does not automatically contribute to the achievement of protection outcomes. For instance, the provision of CVA to a person with a chronic disease and mobility limitations to facilitate access to prescribed medicines would not be considered an example of Cash for Protection since the outcome is health-related. While the provision of financial support may be considered as a way of protecting the right to access a service, the provision of that support should come primarily from the “duty bearer” (i.e. the Health service provider). The responsibility of a protection actor may be to identify resources to address this situation, including referrals to CVA interventions that focus on health outcomes.

EVIDENCE GAPS

In parallel to recognizing the need to pay critical attention to the protection risks faced by particular groups, practitioners have also started to recognize the limits of resorting to one-size-fits-all conceptualizations of vulnerability. However critical gaps remain:

- An in-depth understanding on how multiple and intersecting discrimination factors that these groups may face when accessing humanitarian assistance, and which may place them at risk, and how these factors can be considered when “weighting” demographics into CVA criteria is still a gap that needs further attention.

- The level of guidance and evidence around vulnerability-based targeting in CVA vary. Overall, it is recognized that targeting should be based on protection and vulnerability analyses, and that these practices should be based on the inclusion of beneficiaries across the project cycle. However,

---

there cannot be consensus as to how to define who are the vulnerable and/or who are the most vulnerable as vulnerability changes over time and is context dependent. The factors that contribute to heightened vulnerability to certain risks and how CVA can support risk mitigation requires further study.

- Additional efforts are required to understand where the provision of support (through CVA or other means) actually responds to a situation of discrimination, whether intentional or unintentional, which would then be considered a protection issue.

- The use of CVA to support addressing specific requirements and facilitating equal access without discrimination, or to address situations of deliberate deprivation and discrimination, is an important area to further explore in humanitarian action.
A critical aspect of the effective use of CVA to achieve protection outcomes is ensuring that CVA are adequately integrated within the protection sector and that protection is adequately mainstreamed in the delivery of CVA in all sectors, including CVA within the protection sector. Irrespective of which sector CVA are being leveraged within, steps must be taken to assess protection risks and benefits, mitigate protection risks and monitor these risks and benefits. The following section of the paper explores specific aspects of coordination which are heavily influencing the effective delivery of CVA for Protection.

SILLOING BETWEEN CVA AND PROTECTION COMMUNITIES OF PRACTICE

Breaking down silos is essential to enhancing the collective impact of actors using CVA and implementing Protection programming. Humanitarian actors (including those leveraging CVA within and across sectors) and Protection actors (including those focusing on specific areas of protection cluster responsibility, for example, Child Protection, GBV, HLP and Mine Action) are currently operating in a largely siloed fashion across communities of practice and within agencies/organizations leading to lost opportunities for integrated protection programming. Similarly, CVA expertise is by large missing in the protection sector leading to lost opportunities to seize CVA as appropriate transfer modalities. Therefore, the protection sector should proactively reach out to other sectors, and cash working groups where they exist, to initiate and maintain ongoing dialogue through local, national and international fora. Lessons learned from integrating CVA Protection programming and in all sectors to achieve protection outcomes needs to be captured, published and disseminated. Overcoming notions that all humanitarian actors are not protection actors, but all have a responsibility in protection is essential to overcoming siloing. Co-leads of cash working group should also be encouraged to participate in the Protection Cluster/Sector meetings to strengthen coordination.

---

In order to break down these siloes, it is also essential that humanitarian actors, including CVA practitioners, understand basic protection principles, standards, programming approaches, and outcomes; how CVA can be integrated into integrated programming and in stand-alone protection programmes. Likewise, Protection practitioners must understand basic CVA terminology and programming approaches, including when CVA are appropriate assistance modalities in protection programmes; gain awareness and knowledge on the questions and decisions required to design and implement processes involving CVA; and understand the use of mixed-modality and complementary approaches within CVA.

Key challenges to sufficient mutual capacity strengthening include organizational leadership and financial resources. A number of multi-agency training efforts are underway, however these will require donor support for broad and sustainable roll-out (for example, through Training of Trainer modules such as adapting the GPC training on Cash and Protection) and to monitor uptake and impact.

REFERRAL MECHANISMS

Although practice exists to deliver cash within case management for protection outcomes, limited evidence exists on delivery through case management vs. stand-alone delivery. CVA and GBV guidance points out that additional evidence is needed to determine best practice and evidence-based outcomes. However, there are clear benefits to delivering CVA within protection case management, for example: adherence to protection principles, such as upholding a survivor-centred approach (including confidentiality) and case managers’ existing skills to appropriately assess needs, tailor referrals, monitor impacts and adhere to appropriate data protection standards.


Where there are several degrees removed, for example cash for access to legal services as cash for protection, more evidence is needed as well as guidance on what case managers need to ask/do to ensure that cash achieves protection outcomes. More research is needed on CVA for protection and resulting protection risks, whereby access to CVA may become a perverse incentive. While perverse incentives are not unique to CVA for protection outcomes, cash may be a motivator for the creation of or exacerbation of protection issues in order to receive cash assistance.

As CVA should not be the sole component of support for Protection Outcomes, referrals should be made widely known by protection actors to providers of CVA - within their own agencies, or through partnerships with others delivering CVA, in combination with non-CVA referrals needed to achieve protection outcomes. Although a unique internationally recognized definition of cash for protection is not currently available, it is crucial that at the country/sector level, clear eligibility criteria and uniform implementation approaches of Cash for Protection activities are agreed upon, harmonized and disseminated to actors in other sectors. Organizations in both Protection and other sectors have to be aware of the criteria for referring protection cases to CVA actors. This will help prevent referrals that cannot be followed up, which is particularly risky given the broad spectrum of activities addressed by the protection sector and will maximise the quality and efficiency of referrals.

LOCALIZATION

Supporting local organizations and systems to engage in and implement CVA for Protection is an essential way to overcome barriers of access and resulting protection risks, and to further ensure that localization agendas are concretized. At the global level, as highlighted in the Grand Bargain Cash Workstream Meeting in 2019, too often the power in humanitarian partnerships is unbalanced; dynamics favour northern and international organizations which excludes local actors from global and local fora (including country level clusters), discussions, policy, funding and implementation. This in turn impacts the quality and effectiveness of CVA overall, including CVA for Protection. It is imperative that the localization agenda prioritizes CVA for protection so that local partners can meaningfully engage and strengthen their existing capacities. In advancing the localization of protection agenda, it is also imperative that we leverage the unique added value of community-led (including women-led) organizations in the design and implementation of cash for protection activities and programming.62

Local partners are often relegated to the role of subgrantee to a larger international humanitarian organization. At the regional and country level, this means they are excluded from participation in the Protection cluster and CBPF decision-making and have been limited to the role of subgrantee to larger international humanitarian organizations to support reaching scale or to reach high-risk or remote management locations. Insufficient effort to engage local actors in country-level planning through the Protection cluster and cash working groups contributes to the lack of coordination on CVA for Protection.

Lack of meaningful capacity strengthening on CVA, including CVA-Protection issues, is also a major barrier. A tendency to bring in external capacity rather than investing locally in CVA and Protection expertise, including CVA for Protection expertise, inhibits the localization agenda. Where investments in training local partners have been made, including microgrants for community groups focused on protection outcomes, these are focused on basic technical and operational skills to enable implementation of CVA. Local actors are rarely involved in response analysis and strategic decision-making on response.

Local organizations, including those which are women-led and youth-led, have unique contributions to make to CVA for Protection responses. They understand the root causes of violence, how protection risks can be exacerbated by crisis and are uniquely placed to identify appropriate solutions to prevent, mitigate and respond, including cash for protection. Women youth, disabled persons, older persons and indigenous groups are particularly excluded from decision-making around design aspects of CVA, including cash for protection such as appropriateness of delivery mechanisms location for receipt of CVA, access to markets, including markets related to protection (e.g. alternative care, health, legal services, transport, education and birth registration), and gender-responsive complaint and feedback mechanisms. Such organizations are uniquely placed to identify ‘persons with specific needs’ who may be least visible and hardest to reach in the community by international organizations, a key population which may require CVA for Protection. Lastly, evidence is needed on social safety net and protection benefits and how these can be used in emergencies for protection outcomes.

THE ROLE OF THE PROTECTION SECTOR IN MULTIPURPOSE CASH, AND THE MINIMUM EXPENDITURE BASKET (MEB)

The presence of protection actors in cash working groups is essential to ensure that protection is properly mainstreamed throughout CVA (for example,
supporting protection-related needs assessments or developing tools to capture protection-related needs). But it is also essential for contributing to the development of a Minimum Expenditure Basket (MEB)⁶⁵ that includes non-consumption protection-related expenses (e.g. documentation, communications and transportation, legal and administrative fees) so as to not exacerbate barriers or discrimination for populations at risk, and to support non-protection agencies to monitor positive spillovers for protection outcomes derived from CVA focused on other sectoral objectives. Protection actors ensuring quality services that cannot be monetized and cannot be quantified in a MEB, such as case management, family tracing and reunification, are essential to leveraging CVA for protection outcomes.

⁶⁵ See CaLP’s forthcoming MEB decision-making tools aims to accompany practitioners and decision-makers through key stages in the process of calculating an MEB to identify what is the most appropriate path to take in relation to their particular context, identified objective, existing capacities and available resources; and access guidance on specific technical issues. The MEB is used by CVA actors to support the calculation of the transfer amount of a multipurpose/multisectoral cash grant, contribute to better vulnerability analysis and monitoring, and improve collaboration.
Discussion took place within the GPC around measuring cash for protection and it remains an open question whether separate indicators are needed vs. adding cash within the different inputs/strategies that achieve various protection outcomes. Action research methods need to be strengthened and more rigorous. Indicators should include protection output/outcome indicators, as CVA can be a powerful tool to promote protection outcomes. Given the current state of evidence on CVA for protection, the designation of an indicator for measuring protection outcomes of MPC would be premature at this stage.

Further rigorous research is needed to understand the impact of the use of CVA on protection outcomes. A recent ‘What Works’ report highlights that rigorous, ethical, longer-term evidence that adheres to the principle of do no harm is particularly lacking in conflict settings. In this regard, there is a need for further research on the use of CVA for protection in conflict settings using mixed methods quasi-experimental designs — as the use of other rigorous methods in many conflict-affected settings has proven to be highly problematic both ethically and operationally.

As previously stated, a key objective of this taking stock paper was to highlight gaps in knowledge, evidence and practice in the use of CVA for Protection, in order to channel critical attention and resources towards addressing these gaps. The following section outlines the critical areas of focus for key humanitarian stakeholders as described in this paper:

<table>
<thead>
<tr>
<th>DONORS</th>
<th>INTERCLUSTER/ HUMANITARIAN COORDINATOR/ HUMANITARIAN COUNTRY TEAM</th>
<th>CLUSTERS/ SECTORS IMPLEMENTING CVA FOR PROTECTION OUTCOMES AND/ OR PROTECTION PROGRAMMING</th>
<th>CLUSTERS/ SECTORS IMPLEMENTING CVA FOR PROTECTION OUTCOMES</th>
<th>PROTECTION CLUSTER/ SECTOR IMPLEMENTING PROTECTION PROGRAMMING</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Resource CVA for protection outcomes and protection programming and related start-up costs (i.e. start-up costs, additional staffing, capacity building, etc.) that support institutionalization as a standard aspect of humanitarian response&lt;br&gt; • Fund annual evidence-mapping led by the GPC TT C4P&lt;br&gt; • Fund action research focused on CVA for protection outcomes to build evidence in</td>
<td>• Ensure that interventions using CVA contribute to protection outcomes whenever possible&lt;br&gt; • Ensure the use of the Protection Risks and Benefits Analysis tool to decide the appropriateness of CVA as modalities&lt;br&gt; • Ensure that protection analysis is undertaken during feasibility assessments in all stages of the HPC to ensure that common</td>
<td>• Invest in capacity strengthening of humanitarian staff to leverage CVA for protection outcomes&lt;br&gt; • Endorse/adapt existing yet limited guidance and tools to align with organizational processes and establish their use in policies and protocols&lt;br&gt; • Proactively seek out partners – including other implementers and academic institutions/research-focused organizations to support quality and rigorous action research&lt;br&gt; • Actively establish partnerships/ protocols with protection actors to integrate CVA as tools, where appropriate, to better meet the protection needs&lt;br&gt; • Adopt and prioritize opportunities to tailor the delivery of CVA (e.g. capacity to switch between delivery mechanisms) to enhance preparedness for the use of CVA for protection outcomes&lt;br&gt; • Proactively identify when CVA can be used as tools for protection outcomes in support of population of concern&lt;br&gt; • Prioritize establishing and strengthening referrals with cash actors as much as referrals to other services, such as health or legal services -Lead in monitoring CVA to ensure that the introduction of the modalities promotes intended case action goals and does not expose...</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DONORS</td>
<td>INTERCLUSTER/HUMANITARIAN COORDINATOR/HUMANITARIAN COUNTRY TEAM</td>
<td>CLUSTERS/SECTORS IMPLEMENTING CVA FOR PROTECTION OUTCOMES AND/OR PROTECTION PROGRAMMING</td>
<td>CLUSTERS/SECTORS IMPLEMENTING CVA FOR PROTECTION OUTCOMES</td>
<td>PROTECTION CLUSTER/SECTOR IMPLEMENTING PROTECTION PROGRAMMING</td>
</tr>
<tr>
<td>--------</td>
<td>---------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>accordance with the priorities set forth by the GPC TT C4P to meet critical need</td>
<td>• Consider the unique parameters required to use CVA in the protection sector, which include, but are not limited to: longer-term project horizons to ensure that affected persons with protection cases have access to sufficient support and can safely graduate from case management services</td>
<td>• Include cash for protection within donor proposals based on context-specific assessments</td>
<td>• Partner with local NGOs, CBOs and women's networks to jointly develop evidence on local approaches to cash for protection</td>
<td>• Develop context-specific protocols to facilitate tailored and adaptable CVA referrals</td>
</tr>
<tr>
<td>• Allocate specific funding streams to capacity-building of local organizations not just in the delivery of CVA for protection but in engaging with global policy and programming and in-country decision-making and design of CVA for protection</td>
<td>• Ensure CVA are designed to maximise protection outcomes</td>
<td>• Centre CVA for protection within localization agendas</td>
<td>• Use rigorous methods for action research</td>
<td>• Use rigorous methods for action research</td>
</tr>
<tr>
<td>• Proactively reach out to other sectors and cash working groups to train on protection and inform opportunities for integrated programming</td>
<td></td>
<td>• Partner with local NGOs, CBOs and women-led organizations and networks to jointly design interventions in the UN response planning process, decision-making and coordination mechanisms and develop evidence on local approaches to cash for protection</td>
<td></td>
<td>• Proactively reach out to other sectors and cash working groups to train on protection and inform opportunities for integrated programming</td>
</tr>
</tbody>
</table>
NEXT STEPS

This taking stock paper will be reviewed annually by the GPC TT C4P to reflect the increasing evidence on CVA for protection in humanitarian settings. This will be informed by an annual evidence mapping undertaken by the GPC TT C4P. Advocacy efforts undertaken by the GPC TT C4P will be informed by this position paper and will entail a minimum of sharing of the current state of practice and evidence a key stakeholder convenings (such as the Global Protection Cluster Annual Retreat67 and CaLP’s Annual ‘Cash Week’).68
