CASH AND VOUCHER ASSISTANCE THAT WORKS FOR WOMEN: 6 LESSONS FROM THE FIELD

A BRIEF FROM MULTI-COUNTRY STUDY "WHAT DOES GENDER-SENSITIVE CASH AND VOUCHER ASSISTANCE LOOK LIKE?
OCTOBER 2019
What did we seek to change?

Cash and voucher assistance (CVA) is now a common tool in humanitarian action, used to meet the diverse needs of people displaced by crisis and conflict with greater dignity.\(^1\) While there is a growing body of evidence on the effect of CVA on women’s well-being and empowerment\(^2\), in practice, an overwhelming amount of gender-sensitive CVA is currently designed using assumptions rather than evidence. Building on CARE’s commitment to be ‘cash ready’ to achieve breakthroughs with and for women and girl, CARE commissioned a study on gender-sensitive CVA that allowed actual CVA recipients to frame the discussion.

Why were we interested?

Three key issues motivated this research: (1) CARE’s ambition is to ensure that its CVA work is designed with and for women and girls, addressing their needs, challenges, and opportunities. (2) In line with this, CARE is strengthening its research, evidence, and knowledge management capacities. (3) The organization is also committed to convening others to improve policy, practice, and research on gender-sensitive CVA.

To achieve this ambition, we need to start by changing the top down approach the sector uses to design research about gender-sensitive CVA. The humanitarian community knows more about the impact of CVA on sectoral outcomes than we do about women’s and men’s perceptions of how its design and implementation actually support their needs, those of their families, and those of their communities. Collecting evidence from a user’s perspective will consequently change the way in which we use the evidence. For example, evidence suggests that the named recipient of the CVA can influence control of the transfer and access to information, but targeting women does not on its own mean that CVA is gender-sensitive (and, in some cases, this approach may even exacerbate protection risks).\(^3\)

How did we design the study?

The study adopted a user-centric approach to data collection. This ensured consistent reflection with crisis-affected people throughout the process and increased our ability to capture complexity and enhance accountability. The study aimed at understanding:

- The extent to which women, men, boys, and girls have been involved in the design of CVA and the implications of this involvement.
- The potential for CVA to foster positive and sustainable gender roles and relations that contribute to gender equity.
- Gender-related barriers and risks associated with collecting and receiving CVA including social and cultural attitudes and protection risks.

2 The Cash Learning Partnership’s Gender and Inclusion houses the most comprehensive collection on the topic.
The study was conducted in Haiti, Jordan, Malawi, Niger, and the Philippines to draw directly from the experiences of those affected by crisis in a range of environments. The priority was to hear from the project participants themselves. We engaged with 380 women and men in focus group discussions, storytelling, and individual interviews. The country-level research was supplemented by a global-level literature review and semi-structured interviews with CARE staff.

What did we learn?

1. CVA THAT WORKS FOR WOMEN IS GENDER-SENSITIVE

Before embarking on data collection, it was necessary to unpack CARE’s own understanding of CVA that is designed to produce breakthroughs for and with women and girls. Different stakeholders used different terms, including: “women-centered CVA,” “gender-informed CVA,” “gender-sensitive CVA,” and “gendered CVA.” After a series of discussions with affected people and experts, we agreed that the term “gender-sensitive CVA” most appropriately captures what the study hoped to encourage, support, and learn from.

There was a general consensus that gender-sensitive CVA should be:

- Designed to respond to the unique needs and capacities of women, men, boys, girls, and those of other genders;
- Recognize that there is diversity within gender groups;
- Developed in a manner that avoids exposing recipients to harm; and
- Built on social norms work.

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4. The for extend findings see the full report “What Does Gender-Sensitive Cash And Voucher Assistance Look Like?”

5. As highlighted in CARE’s Gender Equality Guidance Note, women and girls’ empowerment approaches must be synchronized with and complementary to engagement with men, boys, and people of other genders for gender equality. In addition, CARE’s recently revised Gender Marker supports the measurement of the integration of gender into programming along the CARE Gender Continuum from harmful to transformative. The Gender Marker enables CARE to track, improve upon, and support more effective, gender-integrated programming.
2. CVA THAT WORKS FOR WOMEN IS NOT ONLY DESIGNED FOR THEM, BUT MOST IMPORTANTLY, WITH THEM

Women’s involvement in the design of CVA varied across the study countries. In some locations there was limited participation of women, while in others, such as a program in the Philippines, CVA was designed with a specific gender focus that ensured that households were given the opportunity to decide which family member should receive the cash, the location of pay points and/or distribution sites, and the best times of day for the cash to be made available.

In those places where women were less involved in design discussions, respondents said that this resulted in less awareness of the project participants’ potential role in decision-making at the household and community levels upon receipt of the transfer. In some cases, lack of participant-led design caused difficulties in collecting their transfers due to the location of pay points and/or distribution sites, delivery times, and transfer mechanisms.

3. CVA THAT WORKS FOR WOMEN IS BASED ON ROBUST GENDER ANALYSIS

Robust gender analysis systematically included as an integral part of needs analysis, both at the start of and throughout implementation of CVA can facilitate the identification and tackling of a number of threats to gender-sensitive CVA—and particularly to CVA that considers the specific needs and capacities of women. This study found that threats can exist both outside of the household—such as safety and security issues for women when collecting their transfers—but also within the home where risks of tension and violence may be increased when women are targeted as recipients.

4. CVA THAT WORKS FOR WOMEN IS DESIGNED TO SUSTAINABLY TRANSFORM GENDER ROLES AND RELATIONS

In line with the findings of earlier studies, this study found that CVA must be combined with complementary interventions in order to promote more positive and sustainable gender roles and relations. Recipients in study countries cited healthcare, education, training and skills development, and the provision of essential services (such as legal support and financial advice) as important complementary interventions to CVA. This Cash Plus approach should be designed to work for both women and men, at both the household and community levels.

Gender-sensitive Cash Plus approaches have been adopted in the Philippines and Jordan. In the Philippines, some recipients were provided with information sessions focusing on gender equity, financial literacy, child protection, resilience building, and hygiene and sanitation in addition to receiving their CVA. Respondents confirmed that this

“...
had resulted in longer-term changes extending beyond the CVA timeframe related to improved household-expenditure decisions, enhanced budgeting and savings skills, increased resilience, and strengthened livelihoods development.

In Jordan, a case management approach was adopted in which all CVA recipients were referred for additional services providing psychosocial support, education, legal and health services, and vocational training. Provision of livelihoods support was also an important feature of Jordan’s approach.

**BLOSSOMING LIVELIHOODS IN POST-CYCLONE MALAWI**

**NSANJE – MALAWI**

Having already been widowed and finding herself responsible for five children, Mary dreamed of owning livestock in order to generate an income to provide for a better future for herself and her family. Living in a disaster-prone area, Mary struggled to survive through drought, poor harvests, and flooding. Having first received food from WFP as part of a lean season project, Mary then received CVA for the first time from a joint CARE and WFP project in response to Cyclone Idai in 2019. Mary used some of the money to buy much needed food and saved the rest. After receiving a second payment, she did the same thing, allowing her to purchase a pig to sell in case of future financial hardship. She has also used some of the CVA to rent a plot of land so that she can grow her own food, reducing her dependence on humanitarian assistance.

According to Mary, this combination of using funds for now while also investing in the future has increased her financial and food security, something she has not experienced since the death of her husband.
### TABLE 1: WHAT OTHER NEEDS DO YOU HAVE THAT WERE NOT COVERED BY CVA?⑥

<table>
<thead>
<tr>
<th>Needs</th>
<th>HAITI</th>
<th>JORDAN</th>
<th>MALAWI</th>
<th>NIGER</th>
<th>PHILIPPINES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health, nutrition and hygiene training</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Tuition and education</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Healthcare</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Vocational / professional training</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Insurance (agriculture)</td>
<td></td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Access to clean water</td>
<td></td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Financial advice</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Business development support</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
</tbody>
</table>

The study also found that the inclusion of men in CVA, such as in gender equity trainings and awareness-raising sessions, was useful in encouraging positive attitudinal change related to women’s roles, including women’s roles in financial decision-making.

**5. CVA THAT WORKS FOR WOMEN IS DESIGNED TO INCREASE THEIR ABILITY TO MANAGE THEIR FINANCES IN THE LONG TERM**

In some locations, Village Savings and Loan Associations (VSLAs) provided a complementary form of support to women receiving CVA. In Haiti, Malawi, and Niger, some women used a portion of the transfer to contribute to and participate in VSLAs, which not only had immediate impacts in terms of increasing women’s involvement in household-level financial decision-making but also enhanced women’s long term financial management skills thanks to training received through these groups. Women involved in VSLAs highlighted the role of these groups—even in humanitarian response environments—as extremely important as they provided safe spaces for women to meet, strengthened women’s voices at the community level, and strengthened participants’ financial management skills.

**6. CVA THAT WORKS FOR WOMEN IS DESIGNED TO PROTECT THEM**

Previous research has demonstrated that gender-sensitive CVA can have positive protection outcomes. However, there are also a number of gender-related protection risks associated with the provision of CVA that may manifest as gender-based violence (GBV). When these risks exist, they create barriers for women (and sometimes others) to safely access and use their transfers.

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⑥ Not included in this table are commodities or items that respondents reported could have been bought had more cash been provided (e.g., medicines, non-food items, and shelter items).

⑦ This response came from IDPs and refugees rather than from the host communities.
This study found that key issues pertaining to CVA and gender-related protection concerns, some of which are interconnected, centered around:

- CVA collection sites and CVA access;
- Safe and secure delivery mechanisms;
- Female-friendly communication mechanisms;
- Intra-household tension;
- Women’s time poverty;
- Community-level tension; and
- Protection from sexual exploitation and abuse (PSEA).

In all study countries, respondents highlighted concerns related to women’s ability to physically collect their transfers. This was often related to the distance that women had to travel, and women stressed their fear of being robbed on their way home, particularly when financial service providers arrived late at pay points. This fear of attack on the way to or from collection points was compounded by worries that the time away from home meant that these women were not able to carry out the household chores for which they were responsible.

Other safety and security concerns for women—many of which also applied to the elderly and persons with disabilities— included a lack of knowledge and understanding of technology, illiteracy, language barriers, and the lack of requisite documentation, all of which prevented easy access to the transfer. Issues of easy access to CVA can be linked to a push within the humanitarian sector to use a single CVA delivery system in many places.

While this approach has clear benefits in terms of cost-efficiency, the use of a single delivery system also risks excluding some of the very people who are most in need of assistance. This highlights the need for aid agencies to garner donor support in establishing adaptable CVA registration mechanisms and using delivery systems that can respond to the diverse and specific needs of women, girls, men, and boys of all ages and abilities. This is essential if the humanitarian community wants to truly provide impartial and accountable CVA in a way that responds to different vulnerabilities and capacities rather than neglecting these diverse needs in the pursuit of cost-efficiency.

Receipt of CVA by women was also found to create tensions within the household and community in some—though not all—study countries. In Jordan, women explained that receiving CVA had increased tension in the household in relation to financial decision-making. In Niger, the opposite was true, perhaps because it was already customary for women to handle money and be involved in financial decision-making in Niger whereas in Jordan this was more nuanced, with financial decision-making responsibility varying from household to household.

“The distance from the place of distribution and the time in the queue for the CVA can hurt pregnant women and those who come with their little babies, more than it can benefit them. You must understand that the woman takes care of the home. So, if she has to go somewhere to pick up the transfer, she will be worried about the children left at home. The place of distribution must not be far from our houses.”

FEMALE IDP, NIGER
In Malawi, some women stressed the need for an increase in the value of the transfers as the transfers were based on cluster-level guidance to cover food needs rather than all essential needs. When the money ran out, these women reported being exposed to violence or a risk of violence within their homes, leading some to state a preference for food commodities instead of cash in order to reduce unrealistic expectations about what the transfers would cover.\(^8\)

In four of the study countries, women reported harassment or fear of harassment from their own communities as not everyone had benefitted from CVA. This was a particular concern where women were named as CVA recipients and was particularly apparent for female heads of household.

Due to the household- and community-level risks associated with women’s ability to access CVA, study participants described the need to establish safe, secure, female-friendly communication mechanisms.

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\(^8\) The transfer value was set at the level of the Food Security Cluster and all agencies were expected to provide the same value of transfer. (Interview - CARE staff)
How will these learning transform the way we do CVA in CARE?

Based on what we have learned CARE will change how we implement CVA including:

**AT THE DESIGN PHASE**
- Regularly including gender and market analyses in needs assessment including that Rapid Gender Analysis (RGA) have a robust analysis of markets, gendered access (pre and post-crisis), and aspects that may shape the use of CVA in a response or project (e.g. financial inclusion, access to financial service providers (e.g. bank, mobile money)
- Analyzing the gendered protection risks for all genders and their sub-groups (e.g. elderly, people with disabilities, LGBTQI)
- Using participatory approaches that meaningfully address gender concerns and opportunities
- Integrating gender into CVA design especially *Cash Plus* activities
- Using gender markers from the outset and during evaluations to ground truth the findings

**IMPLEMENTATION AND MONITORING PHASES**
- Understanding and mitigating gendered protection risks associated with CVA for the different gender groups—and their sub-groups (e.g. elderly, people with disabilities, LGBTQI)
- Understanding the potential negative impacts on gender relations of transfer values that do not meet multiple needs
- Sensitizing and creating awareness on our CVA processes that reaches all genders and their sub-groups
- Co-creating with targeted communities communication and engagement that promotes gender equity and mitigates gender protection risks

**EVALUATION AND LEARNING**
- Involve CVA, sector and gender specialists in the design and review of evaluation and learning from projects with CVA
- Seek learning from other CARE without CVA that demonstrate promising practice towards gender-sensitivity, empowerment and transformation
- Ensure that learning from projects with CVA actionable and updates practice

**CARE, as part of the humanitarian and development community, will also promote at country and response levels:**
- The inclusion of gender analysis and institutional messaging that emphasizes the importance of gender analysis in generating effective and gender-sensitive responses
- The extension of gender expertise into CVA, including engaging GBV experts to ensure they have a sound understanding of CVA and the potential benefits and drawbacks of this approach
- Systematic training of gendered protection aspects of CVA including PSEA and GBV and how these may be affected or influenced by CVA