

GUIDANCE NOTE

# HOW TO PROMOTE GENDER EQUALITY IN HUMANITARIAN CASH AND VOUCHER ASSISTANCE

GUIDELINES FOR GRAND BARGAIN CASH WORKSTREAM



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GUIDANCE NOTE

HOW TO PROMOTE  
GENDER EQUALITY  
IN HUMANITARIAN  
CASH AND VOUCHER  
ASSISTANCE



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GRAND BARGAIN  
CASH AND GENDER  
SUB-WORKSTREAM





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# ABBREVIATIONS

# AND ACRONYMS

<b>BCC</b>	Behaviour change communication
<b>CaLP</b>	Cash Learning Partnership
<b>CFA</b>	Cash for Assets
<b>CFW</b>	Cash for Work
<b>CFM</b>	Complaints and Feedback Mechanism
<b>CVA</b>	Cash and Voucher Assistance
<b>GBV</b>	Gender-based violence
<b>GEEWG</b>	Gender equality and the empowerment of women and girls
<b>IASC</b>	Inter-Agency Standing Committee
<b>PSEA</b>	Protection from sexual exploitation and abuse <sup>1</sup>
<b>SADD</b>	Sex- and age-disaggregated data
<b>UN Women</b>	United Nations Entity for Gender Equality and the Empowerment of Women

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<sup>1</sup> The term PSEA is used to mean both protection from and prevention of sexual exploitation and abuse.



# INTRODUCTION



# 1

## INTRODUCTION

The use of cash and voucher assistance (CVA) in humanitarian action is increasing rapidly.<sup>2</sup> With this rise, there is also growing demand by stakeholders to ensure CVA is more gender-responsive, addressing gender gaps and moving towards greater gender equality.<sup>3</sup> Gender-responsive CVA, which recognizes existing disparities and addresses the needs of all crisis-affected people equally, has the potential to positively impact women and girls by improving their protection and promoting their empowerment, while also strengthening sector-specific impacts which can lead to more resilient and empowered households and communities in recovery from crises.<sup>4</sup>

### BOX 1

#### Why integrating gender throughout all aspects of CVA is important

- Without appropriate gender considerations, CVA may fail to reach those left furthest behind.
- Without appropriate gender considerations, CVA may increase the risk of gender-based violence (GBV).
- CVA that promotes women's rights and choices and reduces risks and barriers for women's access and participation can potentially help start, rebuild or expand a women's means of economic livelihood.

There are, however, **challenges to implementing gender-responsive CVA in humanitarian contexts**. In emergency settings, where meeting basic needs is of primary concern, the necessary steps to implementing gender-responsive CVA may be overlooked. There is also often a lack of funding to enhance CVA features,

such as transfer size, frequency and delivery modality. These features, when optimized, help ensure that CVA works best for *all* crisis-affected persons in different types of emergencies across different political, economic and cultural settings. Yet, without proper consideration of issues such as women's and men's use of time, burden of care, mobility and cultural differences, the programme design could potentially have the opposite result, leading to greater marginalization and exclusion.<sup>5</sup>

The **purpose** of these guidelines is to **provide hands-on, practical guidance** on how to recognize and address these challenges to effectively integrate gender into CVA in humanitarian responses. They serve to help practitioners to:

- Identify where CVA might be *gender-blind*, failing to acknowledge the different roles of women, men, boys and girls and therefore not adequately responding to their diverse needs.

2 CaLP (2018). *The State of the World's Cash Report: Cash Transfer Programming in Humanitarian Aid*. Cash Learning Partnership. Available at <http://www.cashlearning.org/downloads/calp-sowc-report-web.pdf>

3 See CaLP [Gender and Inclusion](#) page.

4 UN Women (2019). *The Effect of Cash-Based Interventions on Gender Outcomes in Development and Humanitarian Settings*. UN Women. New York. Under review.

5 Ibid.

- Transition to CVA that is *gender-responsive*, where gender differences are recognized and inequalities are actively redressed.
- Finally, find ways to promote *gender-transformative* CVA that works towards redefining women and men's gender roles and relations to create greater equality.<sup>6,7</sup>

The guidelines are **intended to be used to complement and expand on** several other key gender guidance documents including:

- [Inter-Agency Standing Committee \(IASC\) Gender Handbook for Humanitarian Action](#) (herein referred to as the Gender Handbook)
- [IASC Guidelines for Integrating Gender-Based Violence \(GBV\) Interventions in Humanitarian Action](#) (herein referred to as the GBV Handbook)
- [Cash & Voucher Assistance and Gender-Based Violence Compendium: Practical Guidance for Humanitarian Practitioners](#) (herein referred to as the CVA GBV Compendium).
- [Mainstreaming GBV Considerations in Cash-Based Initiatives and Utilizing Cash in GBV Response](#) (herein referred to as the Safer Cash Toolkit)

Where possible, these guidelines refer to and link to the larger body of work on cash and gender which was produced and disseminated by the Cash Learning Partnership (CaLP).

These guidelines will be **most useful for stakeholders working with CVA** in settings affected by armed conflict, disasters resulting from natural hazards, protracted crises and other humanitarian emergencies, who do not have specialized skills and knowledge on the prevention and mitigation of GBV nor in the promotion of gender equality and the empowerment

of women and girls. Governments, donors and humanitarian coordinators can also use the guidelines as reference and as an advocacy tool to ensure that CVA is effectively addressing the needs of all crisis-affected populations.

## 1.1 Terminology

Terminology related to CVA design and implementation follows that is found in CaLP's 2018 [CVA Glossary](#). Recognizing that the terminology around gender is often understood differently by different stakeholders, these guidelines adhere to the definitions found in the [Gender Handbook](#). In addition to gender (see **Box 2**), key terms are defined below and more key definitions can be found in the Glossary of Terms provided in Annex A.

### BOX 2

#### What do we mean by gender?

Gender refers to the socially constructed differences between females and males — and the relationships between and among them — throughout their life cycle. They are context- and time-specific and change over time, within and across cultures. Gender, together with age group, sexual orientation and gender identity, determines roles, responsibilities, power and access to resources. This is also affected by other diversity factors such as disability, social class, race, caste, ethnic or religious background, economic wealth, marital status, migrant status, displacement situation and urban/rural setting. — *Gender Handbook*, p. 17.

6 See Annex A.

7 UN Women believes that emergencies and crises can present unique opportunities to fast-track gender equality and women's empowerment, with the establishment of new ways of working and new norms. **Gender-transformative** programmes attempt to redefine women's and men's gender roles and relations to create greater equality. These opportunities are valuable and such programming should be considered; however, action towards gender transformation must always be accompanied by thorough risk analysis and mitigation, to avoid increasing protection risks — including the risk of increased GBV — and achieving adverse impacts.

The guidelines use the abbreviation GEEWG (gender equality and the empowerment of women and girls) to refer to the guidelines' key aims.

As defined in the Gender Handbook, **gender equality** refers to the equal enjoyment by women, girls, men and boys — of all ages, sexual orientations and gender identities — of rights, goods, opportunities, resources, rewards and quality of life. Equality means that the diversity in behaviour, needs and aspirations of women and men are equally valued and considered.

**Gender-based violence** (GBV), as defined by the Gender Handbook, is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on power imbalances and socially ascribed (i.e. gender) differences between women, girls, men and boys. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion and other deprivations of liberty. These acts can occur in public or in private.

Finally, these guidelines acknowledge that discussions of gender also intersect with discussions of broader vulnerability, marginalization of and discrimination against different populations. This marginalization and discrimination can be based on universal factors

such as gender, age, disability and sexual identity or on context-specific factors such as religion, caste, and minority group status. Although it is not possible to name all of them here, these groups are important to this conversation in that they form intersecting vulnerabilities that must be addressed to achieve gender equality. By having an awareness of, and capturing various types of contextually discriminated-against groups, there is also a greater chance that we can target the most vulnerable in the broader community within these discriminated groups. These guidelines refer to the diversity of these populations as **marginalized groups**.

## 1.2 How these guidelines are organized

These guidelines are organized around the major activities involved in the design and delivery of CVA. Where possible, the guidelines make links to CaLP's [Programme Quality ToolBox](#) and the Gender Handbook's chapter on cash-based initiatives, where further information and guidance can be found.

Each section includes a 'good practice' checklist. Additional information and worksheets can be found in the Annexes.



This icon helps readers identify activities and considerations that have the potential to lead to gender-transformative change.



KEY CONSIDERATIONS  
FOR PROMOTING  
GENDER-RESPONSIVE CVA

## 2

# KEY CONSIDERATIONS FOR PROMOTING GENDER-RESPONSIVE CVA

## 2.1 Assessments

*This section links to the Gender Handbook: Section C, CBI Chapter: Needs Assessment and the CVA Programme Quality Toolbox: Situation Analysis.*

When considering any type of response, including the use of CVA, it is essential to understand the priority needs and specific vulnerabilities and capacities of all affected populations. Properly accounting for gender in the Needs and Market Assessments will help

identify these vulnerabilities and capacities and lead to the determination of whether or not CVA is appropriate in the current context, and if so, what might be the best modality for the targeted population.

To achieve a good quality assessment, it is crucial to carefully consider how the questions are constructed. For a list of gender-responsive questions to include in assessments addressing the feasibility of CVA, see **ANNEX 3.2 Worksheet 1: Mainstreaming gender in cash feasibility assessments.**

### GOOD PRACTICES CHECKLIST

- ✓ **Include or consult gender and protection specialists in the design and implementation of all assessments.** Including specialists early in the process will ensure that protection questions are asked in a culturally safe and appropriate way.
- ✓ **Engage with local women's groups and other support groups to identify, reach and learn about all affected populations.** These groups can help explain where different populations live, the various spaces where they can be reached, and the best channels for communication. For more information, see: [WRC/IRC's Building Capacity for Disability Inclusion in GBV Programming in Humanitarian Settings](#).
- ✓ **Ensure the assessment implementation team (translators and enumerators) is appropriately diverse.** Involve the participation of both women and men and, where feasible, involve members of identified marginalized groups. Ensure that women enumerators conduct women's focus groups and vice versa.

- ✓ **Be mindful of the context; an understanding of the community and its dynamics is critical to understand how to best structure focus groups.** Examples of contextual challenges include: (i) in some places mixing ethnicities may cause members of a minority ethnicity to fear speaking, (ii) sometimes mixing younger and older women may cause younger women to defer to older women and not express their concerns, and (iii) alternatively, older women may be ignored by younger women.
- ✓ **Make necessary accommodations to ensure widespread participation.** Schedule conversations separately with women, men and marginalized groups in places acknowledged as safe spaces for sharing information. Confirm that meeting times are convenient for participants, recognizing and accommodating those with other responsibilities such as child care.
- ✓ **Obtain informed consent prior to conducting the interviews.** Informed consent is important when interviewing affected populations, in particular if collecting sensitive data such as around GBV risks. For more information, see the [Safer Cash Toolkit](#).
- ✓ **Ask questions about “the needs, roles and dynamics of women and men in relation to CVA and how other dimensions of diversity (e.g. disability, sexual orientation, gender identity, caste and religion) intersect with them”.**<sup>8</sup> Include questions that cover a range of gender issues around key CVA dimensions such as: (i) access to markets, (ii) handling CVA, (iii) preference for CVA or in-kind assistance, (iv) gender dynamics around household income, resources and decision-making, (v) working behaviours, (vi) literacy, numeracy and comfort with technology, (vii) safety in collecting and using CVA, and (viii) identification/documentation needed for CVA. See **Worksheet 1: Mainstreaming gender in cash feasibility assessments** in Annex B for a list of possible questions to include.
- ✓ **If working with victims of violence, ensure that someone with protection/GBV training conducts these interviews.** For more information, see [UNFPA Minimum Standards for Prevention and Response to GBV in Emergencies](#).
- ✓ **Identify who is at heightened risk of GBV during and after the crisis and ask communities to identify the potential GBV risks and benefits related to different aspects of CVA.** Where possible, ensure someone with protection/GBV training conducts these interviews. If specialists are not present, address the issue in a general manner but asking about different populations (e.g. adolescent girls, women with disabilities and older women). If the community identifies a heightened risk of GBV for certain populations, discuss and identify possible prevention or mitigation mechanisms. Ask about existing coping mechanisms to see if these could be strengthened. For more information, see: (i) [UNFPA Minimum Standards for Prevention and Response to GBV in Emergencies](#), (ii) [The Safer Cash toolkit](#), and (iii) the GBV Risk Analysis Tool for CVA in the [CVA GBV Compendium](#).

## 2.2 Programme design

*This section links to the Gender Handbook: Section C, CBI Chapter: Strategic Planning and the CVA Programme Quality Toolbox: Programme Design.*

There is often a tension between humanitarian funding and reporting cycles (which tend to occur over short timeframes — often less than one year) and the

emergence of gender-transformative change, which happens over much longer timeframes. However, the arguments for integrating gender, even in short-term CVA, still hold (see **Box 1**). The following sections will discuss good practice in integrating gender in programme design when assessments show CVA is an appropriate modality. For an example of a well-designed CVA, see **Box 3**.

8 Gender Handbook, p. 97

### BOX 3

#### Good practice in CVA design

In certain social contexts, women and girls have limited freedom of movement. Displacement due to conflicts and disasters and life in a refugee camp can exacerbate this isolation. Estranged from family ties and social networks and confronted with concerns around camp safety, women are often unable to leave their homes.

UN Women, as part of its flagship humanitarian programme, Women's Leadership, Empowerment, Access and Protection (LEAP), provides gender-sensitive cash-for-work opportunities for Syrian women living in refugee camps in Jordan. In the Za'atari and Azraq refugee camps, a study of UN Women's Oasis model showed that involvement in full-time cash for work, along with access to public spaces and opportunities to engage with peers (building social capital) led to a reported decrease in domestic violence for 70 percent of the beneficiaries and an increase in household decision-making power for 78 percent of them.

Additionally, 98 percent of women beneficiaries also reported increased self-esteem and fewer feelings of isolation and depression. At the end of

cash-for-work rotations, on average 16 percent of women were interested in starting a microbusiness and 80 percent were interested in continuing to work and seeking another job. The Oasis model is a centre for resilience and empowerment of women offering multisectoral services under three pillars: (i) secure livelihoods opportunities provided via cash for work that graduates into work-permit employment opportunities or microbusinesses, (ii) GBV prevention, protection and awareness-raising services, and (iii) education opportunities linked to market needs; leadership and civic engagement initiatives; and the engagement of men in Oasis activities through peer support groups to combat GBV and harmful social norms.

In 2019, in addition to four Oasis camps, UN Women Jordan launched eight Oasis centres in non-camp settings in partnership with the Ministry of Social Development, recognizing in particular the value of the Oasis model as a holistic approach to increasing women's participation in livelihoods interventions and sustainable employment through addressing the key enabling factors — social norms, child care and transportation.

#### 2.2.1 CVA modality

The selection of the appropriate CVA modality will depend on the information collected from the various cash feasibility assessments done during the situation analysis. A gender-responsive CVA will consider not just what is possible and practical in acute emergency settings versus stable and protracted settings but also fully consider the opportunities that fit the needs and choices of the affected population. CVA modalities

that are paired with complementary programming around protection and empowerment may have a greater potential for improving GEEWG outcomes and provide an opportunity to shift gender relations towards equality.

**Table 1** describes different CVA modalities, highlighting the gender opportunities and risks. The definitions of each modality follow those found in the [CVA Glossary](#).

TABLE 1

## Gender opportunities and risks of CVA

CVA modality	
<p><b>Unconditional transfer:</b> Payment (either cash or voucher) provided without the recipient having to do anything in order to receive the assistance.</p> <p><b>Conditional transfer:</b> There are prerequisite activities or obligations that a recipient must fulfil in order to receive assistance. Types of conditions include attending school, building a shelter, attending nutrition screenings, undertaking work, training, etc.</p> <p><i>Special types of conditional transfers include:</i></p> <p><b>Cash for Work (CFW):</b> Cash payments provided on the condition of undertaking designated work. CFW interventions are usually in public or community work programmes but can also include home-based and other forms of work.</p> <p><b>Cash for Assets (CFA):</b> Cash payments provided to participants for taking part in projects to create community or public assets, such as irrigation systems, roads, etc.</p> <p><b>Complementary programming:</b> Where different CVA modalities are combined with different activities (such as protection and/or empowerment programming) to achieve specific programme objectives.</p>	
Gender opportunities	Gender risk
<p><b>Unconditional transfer:</b></p> <ul style="list-style-type: none"> <li>• A highly flexible benefit that allows women and men and members of marginalized groups to purchase according to their needs and replenish personal assets.</li> <li>• Addressing household basic needs can reduce household tensions including the risk of IPV.<sup>9</sup></li> <li>• If delivered via E-transfer, payment is potentially perceived as more dignified, discrete and private. When others do not know who is receiving the benefit, nor what day or time, this may improve safety outcomes for women and men and members of marginalized groups.</li> <li>• Does not generate any additional burden on women's time.</li> </ul> <p><b>Conditional transfer:</b></p> <ul style="list-style-type: none"> <li>• Can potentially reduce a woman's sense of isolation, particularly for women who otherwise have few opportunities to leave the house.</li> <li>• Can serve as an incentive, exposing recipients to other complementary programming (e.g. GBV services, legal services, skills trainings, awareness-raising, etc.)</li> <li>• If CFW/CFA, temporary employment can potentially boost recipients' feelings of self-worth and dignity.</li> <li>• If CFW/CFA, rebuilding community physical assets can potentially improve women's and men's psychosocial health by working and thus contributing to their own recovery.</li> </ul>	<p><b>Unconditional transfer:</b></p> <ul style="list-style-type: none"> <li>• If CVA is delivered via E-transfer, there is a risk that women will be excluded as they are often less likely to: (i) have the literacy and numeracy skills to receive payments by mobile, and (ii) have access to a mobile, airtime or charging facility.<sup>10</sup></li> <li>• Women are less likely to have the identity papers often needed to register for a CVA, particularly if it involves opening a bank account.</li> <li>• Women, particularly single heads of households, risk being excluded if the collection point is distant and there are no accommodations made for child care. This issue affects members of marginalized groups that may be targeted such as people living with disability, people living with HIV and older persons, who may have mobility challenges.</li> <li>• There is the potential that specifically targeting women for CVA may increase the risk of IPV.<sup>11</sup></li> </ul> <p><b>Conditional transfer:</b></p> <ul style="list-style-type: none"> <li>• Conditionality can potentially increase the burden on women and members of marginalized groups by taking time away from other responsibilities (such as caregiving) or by preventing them from addressing their most urgent needs. If conditions are not themselves structured to be inclusive, marginalized groups, such as women with disabilities, may be unable to fulfil conditions, jeopardizing their benefits from the programme.</li> <li>• CFW/CFA in particular may exclude members of marginalized groups who do not have the capacity to do the work proposed.</li> </ul>





#### Gender-transformative opportunities

Providing predictable transfers over a known period of time to women can potentially strengthen a woman's economic self-sufficiency and resilience.

- Complementary programming focused on women's empowerment has the potential to improve GEEWG outcomes such as women's leadership.
- Complementary programming focused on protection and empowerment that also engages men and boys has the potential to shift gender relations towards equality.
- If culturally appropriate, CFW programmes where women are encouraged to engage in work opportunities traditionally delegated to men (e.g. technology and trades such as bricklaying) may yield more work opportunities once the programme ends, potentially improving earnings and moving families towards greater gender equality.

- CFW/CFA can potentially exclude women if the type of work identified is deemed not culturally appropriate or legally permissible. At the same time, by only providing traditionally female job opportunities for women (e.g. sewing, food preparation and crafts), there is the risk of reinforcing these gender roles. New roles should consider protection risks and mitigation mechanisms, including engaging men and communities.
- Without proper consideration of how to exit a programme (e.g. when funding runs out), women (and children) and members of marginalized groups might lose access to protection and other services or revert to harmful coping strategies for survival.
- With CFW/CFA, it may raise questions of who benefits from the 'community assets' that result — (the vulnerable? women?).

9 See UN Women (2019). *The Effect of Cash-Based Interventions on Gender Outcomes in Development and Humanitarian Settings*. UN Women, New York.

10 See the GSMA report *Connected Women – The Mobile Gender Gap Report 2019*

11 Studies show that men often feel increasing levels of helplessness at not being able to provide for their families, sometimes leading to an increased risk of IPV. See UN Women (2019).

### 2.2.2 CVA scale

In the past, programmes that have a specific focus on GEEWG outcomes are often smaller in scale with fewer recipients, due to the higher costs of programming.<sup>12</sup>

However, **scale should not be an excuse to ignore GEEWG objectives.** Large-scale programmes, whose focus may be on other sector objectives, can do several simple, low-cost actions to integrate gender into their programming.

#### GOOD PRACTICES CHECKLIST

- ✓ **Ensure sex- and age-disaggregated data (SADD) for targeting and reporting.** Ideally, CVA should report on the number of women and men recipients targeted who are collecting the payment, and, if possible, the number of women and men, disaggregated by age, in the household benefiting from the cash.
- ✓ **Ensure CVA adequately addresses safety concerns of all recipients** around the collection and use of CVA, both inside and outside of the home:
  - **Some options to address safety concerns around theft traveling to/from payment sites and post-payment include:** (i) offering to include transit costs or a pick-up service, (ii) changing the location of payments, (iii) using different delivery mechanisms such as via mobiles or smart cards (see section 2.2.5), and (iv) providing secure storage locks for use at home.
  - **Some options to address concerns around GBV include:** (i) consider pairing the receipt of CVA with behavioural change communication that also engages men and boys (see section 2.2.1), and (ii) if functional protection systems exist, make efforts to ensure CVA is linked, for example, have information at the payment sites on how to reach protection services.
- ✓ **Ensure CVA addresses accessibility issues for women and different marginalized groups.** For example, ensure there is adequate infrastructure in place, including transportation networks, sidewalks, ATMs and other CVA redemption centres.
- ✓ **Ensure the CVA implementer has an effective gender policy in place.** For an example of a gender policy, see: [Gender Equality at the International Rescue Committee](#)
- ✓ **Ensure the diversity of programme staff.** For example, strive for 50 percent women staff, including supervisors at payment sites or on CFW worksites; and, where possible, include the participation of marginalized groups. Also, engage local women's and other groups who represent marginalized groups who are active and knowledgeable with respect to local issues.
- ✓ **Ensure programme staff receive training in GBV awareness and prevention,** including how to identify the signs of GBV and how to safely orient people to referral services. For more information, see: <https://gbvguidelines.org/en/capacity-building/module-4-responding-to-gbv-incidents/>

### 2.2.3 CVA value and frequency

The value and frequency of the transfer depends on programme objectives (i.e. reoccurring basic needs, livelihood asset-building, or wages for work). These components may also be guided by calculations of

minimum expenditure baskets or, in the case of CFW/ CFA, minimum wage laws. The size and frequency of the transfer may have varying effects on GEEWG outcomes and should be considered only after the information from the needs assessment has been analysed.

<sup>12</sup> CVA paired with complementary programming that uses behaviour change communication (BCC) focused on protection and empowerment messaging or that engages men and boys is often more costly to implement.

## GOOD PRACTICES CHECKLIST

- ✓ **Consider smaller, more frequent payments if:** (i) the gender needs assessment reveals cultural issues where women are not accepted to manage large amounts of cash; (ii) when there are additional security risks related to theft of the payment and E-transfers are not feasible or do not mitigate the problem; and (iii) if an objective of CVA is to link women recipients to complementary protection or empowerment programming — a greater payment frequency can provide more opportunities for contact (although implementers should be aware that increased contact could potentially be burdensome for women).
- ✓ **Consider larger, less frequent payments if:** (i) the gender needs assessment reveals cultural issues where women are not accepted to manage large amounts of cash, but there is an opportunity to pair CVA with complementary programming focused on GBV prevention targeted at both women and men; (ii) if CVA is delivered via E-transfers, thus reducing the potential safety risks associated with the collection of the payment.

### 2.2.4 Targeting

Integrating gender into targeting, the way in which one identifies and selects recipients for inclusion, is important in that in many cases, women and girls are harder to reach within communities. This is also true of marginalized groups, who may be more isolated and/

or stigmatized. When CVA fails to reach these populations, the cycle of poverty and vulnerability continues. However, many programmes target women and girls specifically and exclusively, which may lead to the marginalization of men and boys. Targeting should be based on a sound gender analysis that considers the needs and capabilities of all the affected populations.

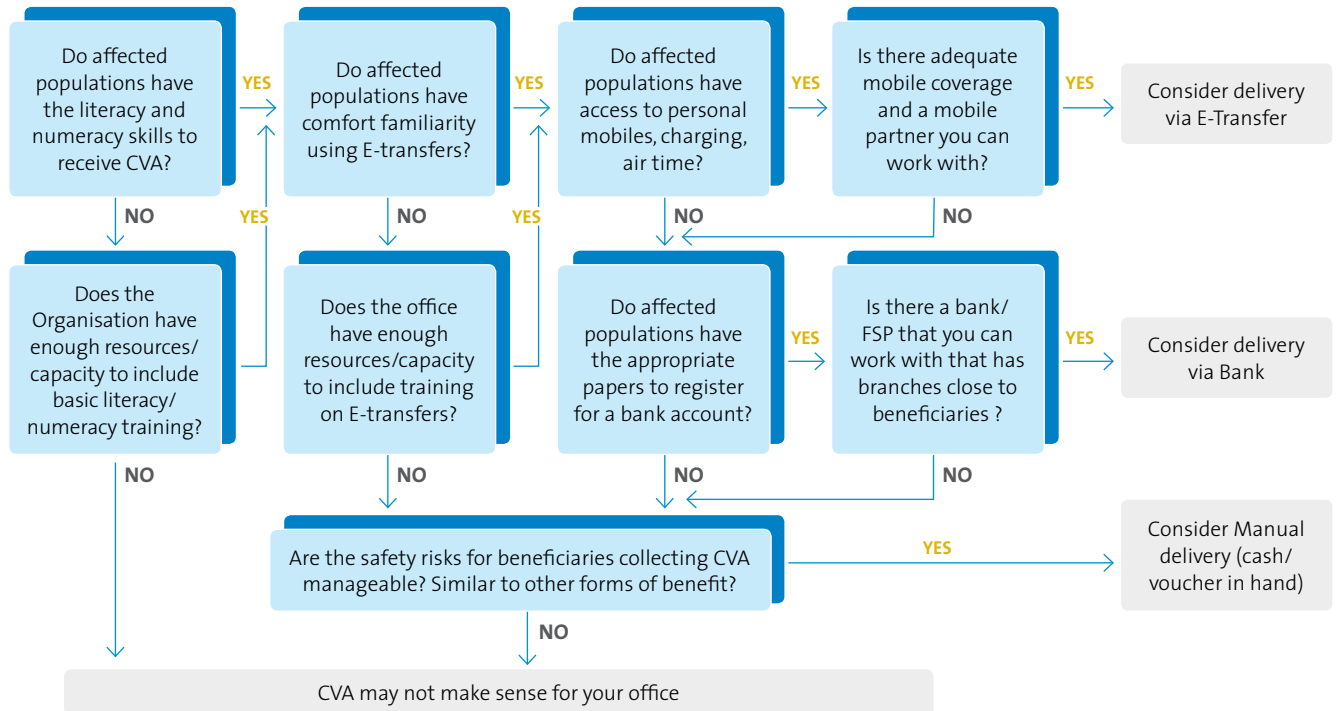
## GOOD PRACTICES CHECKLIST

- ✓ **Ensure targeting criteria are clearly linked to programme objectives.** Be able to clearly and specifically answer the question, “Why are we targeting [*enter population here*]?”
- ✓ **Ensure a good match between targeting criteria and the CVA modality.** For example, if CFW/CFA, make sure the targeted recipients can physically and culturally perform the identified types of work.  
**However, where possible, promote and encourage work and skills training in sectors not traditionally accessed by women, such as jobs in technology or construction. This type of work often offers higher wages and may generate future work opportunities after the CVA.**
- ✓ **Consider the implication of selecting households versus individuals within households as the primary recipient of the CVA.** If targeting households, in some cases, CVA may not reach the most vulnerable within the household. The decision of whether to target households versus individuals and whom within the household to enrol as the primary recipient should be informed by information coming from the needs assessment.
- ✓ **If CFW/CFA, refer to local laws to set work age limits to prevent child labour.** It should also be ensured that work does not interfere with school attendance. For more information, see: the [Safer Cash toolkit](#).
- ✓ **Engage communities in the targeting process.** Communities can help (i) identify individuals or households that fit the criteria; (ii) determine whether any key affected populations have been missed; and (iii) communicate the targeting criteria.

## 2.2.5 Selection of delivery mechanism

The decision on how the CVA is delivered must again be informed by the assessments. A decision tree to help organizations begin to think about delivery mechanisms can be found in **Figure 1**.

**FIGURE 1**  
**Delivery mechanism decision tree**



### GOOD PRACTICES CHECKLIST

- ✓ **Identify and mitigate safety and gendered opportunity costs faced by women and girls and other populations who may be vulnerable.**

If by **cash in hand (manual)**, look at the differences between different groups in (i) exposure to theft/violence in traveling to/from payment points and spending the cash and storing it at home, (ii) opportunity costs of the collection of payment (e.g. care for children), and (iii) the potential exposure of marginalized groups to discrimination at payment sites.

If by **bank account**: (i) ensure that women and men are familiar with banks and feel comfortable and safe collecting money from a bank, (ii) ensure that banks are near enough so that women don't face excessive opportunity costs (e.g. care for children, transport costs for safety reasons), and (iii) ensure that women have the appropriate identify papers to open a bank account and register for the programme and get home safely with the cash.

If by **E-transfer**: (i) ensure that women and men are familiar with bank cards or mobile phones and feel comfortable and safe collecting money in this way, (ii) ensure that women and men have adequate access to a mobile, airtime and charging of a device, (iii) ensure that there are an adequate number of pay points (ATMs or agents that accept the bank cards) within easy access for women so they don't need to spend additional resources on safe transportation or child care, (iv) ensure women have control over their phones, and (v) ensure follow-up and supervision of agents to avoid abuse of power.

## 2.2.6 Consideration of programme evolution or exit

As part of the project design, the duration of the programme should be considered, beyond simply the funding cycle, to examine in more depth sustainability and what the project may look like or evolve

into in the longer term, as rapid onset emergencies settle into protracted crises or move towards recovery. When considering sustainability, work should go into understanding local and national social protection mechanisms and programmes and how the programme might link to or become a part of other existing or emerging programmes.

### GOOD PRACTICES CHECKLIST

- ✓ **Have you adequately considered what will happen to women and girls and other affected populations if the programme is withdrawn?**
    - Will women still have access to GBV services? Other protection services?
    - Do women have independent access to social assistance programmes (as opposed to families only)?
    - What coping mechanisms will they turn to?
    - Who will be most impacted by the withdrawal? Why? How? What can be done to mitigate any negative impacts? How can positive impacts be strengthened?
  - ✓ **Have you built sufficient awareness around GBV and protection issues, including safety in informal work settings?**
  - ✓ **Are there existing social assistance programmes that you can link women, men and members of marginalized groups with to help transition your programme?**
    - ✓ If so, are there options for linking recipients of an emergency or recovery cash transfer to longer-term social assistance?
    - ✓ If so, are there options to increase the capacity of local municipal and national government agencies involved in social assistance programmes?
  - ✓ **In settings where women and men refugees are legally allowed to work, are there ways to link CVA beneficiaries to long-term options?**
    - ✓ Are there local employers that you can partner with to provide future support for apprenticeships and on-the-job training?
-  **Can you support skills training in non-traditional work for women (e.g. technology or bricklaying) so that women transitioning from your programme have more options for higher-paid jobs?**
- ✓ **In settings where women and men refugees are not legally allowed to work, are there ways to link CVA beneficiaries to long-term options?**
    - ✓ Can you provide support to refugees to start informal businesses within the camp after the CVA ends?
    - ✓ Can you design the CFW or livelihood strategy to pair host communities with refugees or IDPs to engage in a business joint venture?

## 2.3 Implementation

This section links to the *Gender Handbook: Section C, CBI Chapter: Implementation and Monitoring and the CVA Programme Quality Toolbox: Implementation and Monitoring*.

### 2.3.1 Registration and community sensitization

The critical issues with community sensitization and CVA registration are to ensure that all affected populations know about the CVA and understand how it is being targeted — who is eligible based on the programme goals.

#### GOOD PRACTICES CHECKLIST

- ✓ **Ensure that outreach and community sensitization materials and efforts include clear explanations (in the local language) of who is targeted for the programme and why.** For example, if CVA is specifically targeting women, it is important to communicate why; this may limit potential backlash from men who do not understand why they are not included.
- ✓ **Develop a plan in advance on how to communicate programme details to the community, and in particular, hard-to-reach populations within communities.** To do so, (i) leverage local women's and other groups in programme sensitization activities as they will know where different groups of people are located; and (ii) consider home visits to potential beneficiaries who are (a) not mobile (i.e. older persons, people living with disability), (b) not literate; (c) do not have access to a mobile or radio; or (d) who may be isolated for cultural reasons (e.g. stigma, ethnicity).
- ✓ **For programmes targeting women, be sure to communicate programme details to spouses and partners or other gatekeepers such as sons or in-laws.** Engaging men and boys in the sensitization efforts helps to limit men's alienation and backlash (for not being selected) and to increase chances for women's participation.
- ✓ **Ensure that communication around the CVA includes information on GBV referrals and whistle-blowing.** See, for example, [Tip Sheet: Consulting with women and girls on their access to services and perceptions of safety \(IASC GBV Guidelines Implementation Support Team\)](#)
- ✓ **During programme registration, consider providing transportation, child care or other services to the registration site.** Not addressing the specific needs of women and men and identified marginalized groups may prevent them from reaching the registration point.
- ✓ **Provide a way for individuals without proper identification to register for the programme.** This could be to have an internal programme ID card.
- ✓ **Ensure that registration systems can collect and store recipient data disaggregated at a minimum by gender and age.**
- ✓ **Ensure that recipient data is secure.** Distribution lists should *never* contain protection or referral information such as (i) reports of abuse, (ii) mental health issues, (iii) health issues such as STIs and HIV status, and (iv) sexual orientation and gender identity.

### 2.3.2 Delivery

The opportunity and risks of different types of delivery mechanisms (e.g. E-transfers, cash in hand, via a bank) were discussed in section 2.2.5. The checklist below identifies good practices in the actual delivery of the CVA.

## GOOD PRACTICES CHECKLIST

- ✓ **Operationally, strive to have women play an equal role in the CVA delivery process, while remembering to accommodate for any additional burdens this may entail (e.g. child care, mobility issues).**
  - If delivery is by **cash or voucher in hand** (manual), seek to involve women in tasks such as marking envelopes with recipient names, counting and dividing cash among envelopes, distributing envelopes to recipients, and notifying recipients of payment arrival.
  - If delivery is via a **bank account**, seek to involve women to help facilitate the opening of bank accounts, securing proper identification, and notifying beneficiaries of payment arrival.
  - If by **E-transfer**, seek to recruit and use women payment agents within communities and involve women in the notification of payment arrival.



Train and use women for some of the more skilled processes such as (i) calculating the monthly payroll and (ii) reconciling the project accounts after distribution is completed.

### 2.3.3 Complaints and Feedback Mechanisms

Humanitarian contexts provide many risks for the exploitation and abuse of affected populations, both sexual and otherwise. Gender-responsive programmes must proactively seek to mitigate these

issues rather than respond reactively. All beneficiaries have the right to file complaints regarding unfair treatment, report cases of misconduct, and seek appropriate assistance. Examples of opportunities and risks of different complaints and feedback mechanisms (CFM) are shown in **Figure 2**.

**FIGURE 2**  
Gender opportunities and risks of CFM

	Gender Opportunities	Gender Risks
24-hours dial-in-confidential hot-line	<ul style="list-style-type: none"> <li>• Confidential and anonymous - women may feel more safe lodging a complaint. Becomes even more important if CVA hotline also ends up serving as an entry point to GBV case management services;</li> <li>• Always available so it can potentially better fit into women's schedules around caregiving, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Women and girls may be less likely to have access to a mobile phone, airtime and charging capabilities;</li> <li>• If a sms (text-based) system, women and girls may be less likely to have the necessary literacy and numeracy skills to lodge a complaint</li> </ul>
Lock box	<ul style="list-style-type: none"> <li>• Confidential and anonymous - women may feel more safe lodging a complaint</li> <li>• Fairly accessible, if it is in a well-used space, so it can potentially better fit into women's schedules around caregiving, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Women and girls may be less likely to have the necessary literacy and numeracy skills to complete a form</li> <li>• If it is far away, it may be less accessible for women and men that have additional care burdens</li> </ul>
Help desk	<ul style="list-style-type: none"> <li>• Women don't need special skills (literacy, numeracy, technology) to access help</li> </ul>	<ul style="list-style-type: none"> <li>• The lack of anonymity in small and tight-knit communities, may deter people (out of fear of being found out) from using the help desk.</li> </ul>

## GOOD PRACTICES CHECKLIST

- ✓ **Ensure that all programme employees, implementing partners and volunteers working on the CVA read, understand and sign an organizational code of conduct.** A code of conduct should specifically include how to be aware of and address incidents of GBV, and how to report sexual exploitation and abuse of recipients by staff, partners or contractors of the agency. For an example, see: [IRC code of conduct](#).
- ✓ **Ensure that all staff, or at a minimum, those interacting with recipients, are trained on the concepts of gender equality and women's empowerment, GBV and the related guiding principles for GBV prevention and response.** There have been cases where a CVA hotline has also served as an entry point for GBV survivors to access case management and be referred to relevant services. It is therefore critical to ensure that staff working the hotline are fully trained on safe, ethical and appropriate referrals and that quality GBV response services are already in place. For more information, see the [CVA GBV Compendium](#) and [UNFPA \(2015\). Minimum Standards for Prevention and Response to GBV in Emergencies](#).
- ✓ **Ensure that staff understand the “Six Core Types of GBV” as outlined in the Gender-Based Violence Information Management System (GBVIMS):** rape; sexual assault; physical assault; forced marriage; denial of resources, opportunities or services; and psychological/ emotional abuse. For more information, see the [GBV Classification Tool](#) found on the [GBV Information Management System \(GBVIMS\)](#) website.
- ✓ **Identify a primary focal point for complaints within your office that is outside the programme implementation team.** This person should have a thorough briefing of the programme, types of common complaints that may emerge, and the appropriate responses.
- ✓ **Create internal guidance on CFMs which sets out the protocol on who, how and when (timeframes) to respond and give feedback to different kinds of complaints, including those that involve GBV.** This guidance should include safe referral pathways.
- ✓ **Ensure there are multiple, accessible channels for making a complaint.** Accessible in this instance means that women and men, along with marginalized groups, can easily reach or access the complaints mechanism. Examples include:
  - If a **physical site**, women must be able to (i) walk or ride without incurring excess expense; (ii) feel safe in transit to the site and while in the process of making a complaint; and (iii) must not feel stigmatized or afraid to make the complaint (there must be a layer of anonymity or privacy in making the complaint).
  - If **electronic**, targeted beneficiaries must have (i) access to mobile phones (including airtime and charging) or computers to make the complaint, and (ii) the literacy and numeracy skills to use the mechanism for the complaint, or be provided with an alternative mechanism.
  - **Proactive generation** of issues can come in the form of post-distribution monitoring reports and/or periodic focus group discussions with different populations of both women and men, marginalized group recipients and non-recipients.
- ✓ **Ensure that those accessing the CFM can speak to someone of the same gender.**
- ✓ **When designing the CFM, be sure to consult women and men recipients as to how they would like to provide feedback on the programme.**
- ✓ Create an external brochure, sign or poster that can be widely disseminated so that affected populations know the different ways to make a complaint.



- ✓ Examples of different useful complaints and feedback (see Figure 2 for the strengths and weaknesses of each) are:
  - **24-hour confidential hotline.** If this is outside the scope and resources of the programme, explore partnerships with other agencies implementing CVA and create a shared hotline.
  - **A lock box at each implementation site or frequented safe spaces.** Make sure the complaint and feedback forms are available in the local language.
  - **A helpdesk at each implementation site or frequented safe spaces.** Make sure local languages are spoken by helpdesk workers.
- ✓ **If the complaint is related to allegations of sexual exploitation and abuse by UN Agency staff, partner staff, contractor staff or volunteers, it should be reported immediately through the Protection from Sexual Exploitation and Abuse (PSEA) referral systems.** For more information on this process, see detailed guidance on the [PSEA TASK FORCE](#) site.

### 2.3.4 Monitoring and Evaluation

Incorporating gender in the Monitoring and Evaluation (M&E) system is important as it helps ensure that women’s and men’s voices are heard and that the impacts are measured, both positive and negative, of

the CVA on all recipients. For more details on indicators, see Annex **3.3 Worksheet 2: Gender-responsive indicators by result area.** **Table 2** below outlines some key gender outcome areas with regards to CVA and presents some options for the types of questions to ask of recipients.

**TABLE 2**  
**Key gender questions by outcome**

Outcome area	What you are looking for	Types of questions to consider when trying to assess effectiveness related to gender outcomes
<b>Promote gender equality and the empowerment of women and girls</b>	<ul style="list-style-type: none"> <li>• Improved women’s vocational and business skills</li> <li>• Improved women’s leadership skills</li> <li>• Changing attitudes on women and men’s roles within the household</li> <li>• Changing attitudes on women working outside the home</li> <li>• Women and girls have the skills, knowledge and confidence to claim their rights</li> <li>• Improved control over reproductive and economic decisions by women</li> </ul>	<ul style="list-style-type: none"> <li>• Does the programme contribute to creating more equitable gender roles between men and women?</li> <li>• Does the programme provide opportunities for people who face constraints related to gender, age, health status (e.g. chronic illness, disability), family status (e.g. internally displaced persons, refugees), nationality and ethnicity?</li> <li>• Does the programme facilitate access for women and other potentially marginalized groups who lack appropriate identification, levels of knowledge, and/or access to technology?</li> <li>• Does the programme facilitate the financial inclusion of women and other marginalized groups?</li> <li>• Does the programme allow better control of the redemption and utilization of assistance by both women and men, in a manner that increases both individual and family food security?</li> </ul>

<b>Promote safety and household harmony, and prevent GBV<sup>13</sup></b>	<ul style="list-style-type: none"> <li>• Elimination/reduction of frequency of different forms of GBV, such as sexual exploitation and abuse, transactional sex, early and forced marriage, IPV, etc.</li> <li>• Improved safety of women</li> <li>• Decline in tensions within the home</li> <li>• Increased awareness and access to protection services</li> <li>• Increased partner/spouse awareness of GBV</li> </ul>	<ul style="list-style-type: none"> <li>• Does the programme contribute to a more gender-equal power dynamic and/or increased harmony in the household?</li> <li>• Does the programme contribute to keeping populations targeted for assistance safe from harm or from additional safety risks — including all forms of violence associated with the collection and utilization of assistance?</li> <li>• Does the programme contribute to the reduction in exposure to and frequency of different forms of GBV?</li> </ul>
<b>Promote dignity</b>	<ul style="list-style-type: none"> <li>• Reduced isolation and improved freedom of movement</li> <li>• Promotion of dignity, feelings of wellbeing and individual self-reliance</li> </ul>	<ul style="list-style-type: none"> <li>• Does the programme contribute to the wellbeing and social acceptance of certain women and marginalized groups such as people of diverse sexual orientation and gender identity, GBV survivors, and women living with HIV?</li> <li>• Does the programme provide for the dignified participation of beneficiaries that allows for choice in purchases?</li> <li>• Does the programme work towards the acceptance of socially marginalized groups such as people living with a disability, people living with HIV or people of diverse sexual orientation and gender identity?</li> <li>• Does the programme contribute to the reduction in isolation often experienced by marginalized groups?</li> </ul>
<b>Prevent conflict and tension within the community</b>	<ul style="list-style-type: none"> <li>• More equitable and non-discriminatory structures (e.g. governments, health and education systems, security and justice sectors, and the private sector)</li> </ul>	<ul style="list-style-type: none"> <li>• Does the programme contribute to reducing ongoing conflicts and tensions between families and/or clans, minority groups, local authorities and local populations?</li> </ul>

### GOOD PRACTICES CHECKLIST

- ✓ **At a minimum, be sure to collect sex- and age-disaggregated data (SADD).**
- ✓ **Ensure that monitoring data collection is done using women and men translators.**
- ✓ **Ensure that data is collected from a representative sample of women and men recipients.**
- ✓ **Ensure that the views and stories of women and girls, in particular those coming from marginalized groups, are made visible in reporting, with their informed consent. For more information, see the [Global Women’s Institute’s manual and toolkit that includes a discussion on ethical data collection \(Section I.5\)](#)**

13 If asking about experiences of violence, (i) work closely with a GBV specialist to design the data collection activity, (ii) ensure services are available for women who are experiencing violence, and (iii) follow all the other ethical principles around GBV data collection. For more information, see the WHO Guidelines.



A large, stylized number '7' is the central graphic element. The top horizontal bar of the '7' is light blue, while the vertical stem and the bottom curve are yellow. The background is split horizontally: the top half is blue and the bottom half is yellow.

# ANNEXES

### 3.1 Glossary of terms

For more detailed information refer to the [Gender Handbook](#) and the [GBV Handbook](#).

TABLE 3  
Key gender terminology

Term	Definition
<b>Empowerment of women</b>	The empowerment of women concerns women gaining power and control over their own lives. It involves awareness-raising, building self-confidence, expansion of choices, increased access to and control over resources, and actions to transform the structures and institutions that reinforce and perpetuate gender discrimination and inequality. ( <a href="#">Gender Handbook</a> )
<b>Gender</b>	Gender refers to the socially constructed differences between females and males — and the relationships between and among them — throughout their life cycle. They are context- and time-specific and change over time, within and across cultures. Gender, together with age group, sexual orientation and gender identity, determines roles, responsibilities, power and access to resources. This is also affected by other diversity factors such as disability, social class, race, caste, ethnic or religious background, economic wealth, marital status, migrant status, displacement situation and urban/rural setting. ( <a href="#">Gender Handbook</a> )
<b>Gender equality</b>	Gender equality, or equality between women and men, refers to the equal enjoyment by women, girls, men and boys — of all ages, sexual orientations and gender identities — of rights, goods, opportunities, resources, rewards and quality of life. It is important to differentiate between gender <i>equality</i> and gender <i>equity</i> . Gender equity relates to women, girls, men and boys having access to the rights, resources, services and opportunities, etc. defined by their specific needs. For example, health provision that is gender-equitable would include not only general comprehensive health care but also a wide range of services, such as reproductive health, that are essential for the specific differing needs of women and men. In turn, gender equality means that all human beings are free to make their own choices without the limitations set by gender roles. Equality means that the diversity in behaviour, needs and aspirations of women and men is equally valued and considered. ( <a href="#">Gender Handbook</a> )
<b>Gender mainstreaming</b>	Gender mainstreaming is a strategy for achieving gender equality. Gender mainstreaming is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in all areas and at all levels. It is a strategy for making women's as well as men's concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that women and men benefit equally and inequality is not perpetuated. The ultimate goal is to achieve gender equality. (Economic and Social Council Agreed Conclusions 1997/2). ( <a href="#">Gender Handbook</a> )
<b>Gender-blind programming</b>	Gender-blind programmes are those that fail to take into account the different socially constructed roles of women, men, boys and girls and fail to address each groups' diverse needs. They maintain the status quo and will not help transform the unequal structure of gender relations. ( <a href="#">Gender Handbook</a> )
<b>Gender-responsive</b>	"Gender-responsive" describes laws, policies, programmes and public services that are formulated and/or delivered in ways that take into account gender inequalities, and respond proactively to overcome and eliminate such inequalities in order to achieve gender equality, women's rights and women's empowerment.
<b>Gender-sensitive programming</b>	Gender-sensitive programmes are those that recognize gender differences and attempt to redress existing gender inequalities. ( <a href="#">Gender Handbook</a> )
<b>Gender-transformative programming</b>	Gender-transformative programmes attempt to redefine women's and men's gender roles and relations to create greater equality. These are interventions that seek to target the structural causes as well as the symptoms of gender inequality, leading to lasting changes in the power and choices women (and men) have over their own lives, rather than just a temporary increase in opportunities. ( <a href="#">Gender Handbook</a> )

Term	Definition
<b>Gender-based violence (GBV)</b>	Gender-based violence (GBV) is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on power imbalances and socially ascribed (i.e. gender) differences between women, girls, men and boys. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion and other deprivations of liberty. These acts can occur in public or in private. Examples include rape; intimate partner violence and other forms of domestic violence. ( <a href="#">GBV Handbook</a> )
<b>GBV prevention</b>	GBV prevention refers to taking action to avoid GBV from occurring, for example, scaling up activities that promote gender equality or working with communities, particularly men and boys, to address practices that contribute to GBV. ( <a href="#">GBV Handbook</a> )
<b>GBV risk mitigation</b>	GBV risk mitigation refers to actions aimed at reducing the risk of exposure to GBV, for example, ensuring that appropriate lighting and security patrols are in place from the onset of establishing displacement camps to reduce exposure to GBV for women and girls. ( <a href="#">GBV Handbook</a> )
<b>GBV response</b>	GBV response refers to assistance and services that aim to save lives and contribute to recovery or resilience after GBV has occurred, such as immediate medical and psychosocial care for GBV survivors, or livelihoods and education programmes for mothers of children born of rape. ( <a href="#">GBV Handbook</a> )
<b>Intimate partner violence (IPV) and domestic violence</b>	While these terms are sometimes used interchangeably, there are important distinctions between them. 'Domestic violence' is a term used to describe violence that takes place within the home or family between intimate partners as well as between other family members. 'Intimate partner violence' (IPV) applies specifically to violence occurring between intimate partners (married, cohabiting, boyfriend/girlfriend or other close relationships), and is defined by the World Health Organization (WHO) as behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours. This type of violence may also include the denial of resources, opportunities or services. ( <a href="#">GBV Handbook</a> )
<b>Sexual exploitation</b>	Sexual exploitation is any abuse of a position of vulnerability, differential power or trust for sexual purposes; this includes profiting momentarily, socially or politically from the sexual exploitation of another. Sexual exploitation is one of the purposes of trafficking in persons and includes performing in a sexual manner; forced undressing and/or nakedness; coerced marriage; forced childbearing; engagement in pornography or prostitution; sexual extortion for the granting of goods, services, assistance benefits; and sexual slavery. ( <a href="#">UNHCR Sexual and GBV Against Refugees, Returnees and IDPs</a> )
<b>Transactional sex</b>	The exchange of money, employment or goods or services for sex, including sexual favours or other forms of humiliating, degrading or exploitative behaviour. This includes any exchange of assistance that is due to beneficiaries of assistance. ( <a href="#">UN Glossary on Sexual Exploitation and Abuse</a> )
<b>Targeted actions</b>	Through evidence-based assessment and gender analysis, implementing humanitarian agencies can identify the specific protection and assistance needs of individuals or groups within an affected population. Addressing the specific needs of women and girls may best be done in some circumstances by taking targeted action. In effect, women and girls may need different treatment in order to produce equality in outcomes, i.e. to level the playing field so that women can benefit from equal opportunities. This is the principle behind measures to provide special stipends to encourage families to send girls to school, for example, or to give special protection to women and girls affected by GBV. ( <a href="#">Gender Handbook</a> )

**TABLE 4**  
**Key CVA terminology**

For more detailed information, refer to CaLP’s CVA Glossary.

Term	Definition
<b>Cash and voucher assistance (CVA)</b>	Cash and voucher assistance (CVA) refers to all programmes where <b>cash transfers</b> or <b>vouchers</b> for goods or services are directly provided to recipients. In the context of humanitarian assistance, the term is used to refer to 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). The terms <b>‘cash’</b> or <b>‘cash assistance’</b> should be used when referring specifically to cash transfers only (i.e. ‘cash’ or ‘cash assistance’ should not be used to mean ‘cash and voucher assistance’). This term has several synonyms, for example, ‘cash-based interventions’, ‘cash-based assistance’ and ‘cash transfer programming’. <b>Cash and voucher assistance</b> is the recommended term.
<b>Complementary programming</b>	Complementary programming 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 the 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.
<b>Conditionality</b>	Conditionality refers to 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 (e.g. cash, vouchers, in-kind and 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. Note that conditionality is distinct from restriction (how assistance is used) and targeting (criteria for selecting recipients). Types of conditionality include attending school, building a shelter, attending nutrition screenings, undertaking work, attending trainings, etc. Cash for work, assets or training are all forms of conditional transfers.
<b>Delivery mechanism</b>	A delivery mechanism is the means of delivering a cash or voucher transfer (e.g. smart card, mobile money transfer, cash in hand, cheque and ATM card)
<b>E-transfer</b>	An E-transfer is a digital transfer of money or e-vouchers from the implementing agency to a recipient. E-transfers provide access to cash, goods and/or services through mobile devices, electronic vouchers or cards (e.g. prepaid, ATM, smart, credit or debit cards). E-transfers may also be referred to as <b>‘digital payments’</b> ; these are umbrella terms for <b>‘e-cash’</b> and <b>‘e-vouchers’</b> .
<b>In-kind assistance</b>	In-kind assistance is humanitarian assistance provided in the form of physical goods or commodities. It is restricted, by default, as recipients are not able to choose what they are given.
<b>Labelling</b>	Labelling is a programme design feature comprising activities employed by implementing agencies to influence how recipients use assistance. For example, this might include the types of messaging conveyed to recipients, possibly in combination with <i>complementary programming</i> activities. Sector-specific interventions using cash transfers may employ labelling to encourage recipients to spend the cash on items or services which will contribute to achieving sectoral objectives.
<b>Modality</b>	Modality refers to the form of assistance — e.g. cash transfer, vouchers, in-kind, service delivery, or a combination of modalities. This can include both direct transfers to the household level, and assistance provided at a more general or community level, e.g. health services and WASH infrastructure.
<b>Response analysis</b>	Response analysis is the link between situational analysis (broadly speaking, needs assessment and other contextual information) and programme design. It involves the selection of programme response options, modalities and target groups. It should be informed by considerations of appropriateness and feasibility and simultaneously address needs while analysing and minimizing potential harmful side effects.

Term	Definition
<b>Restriction</b>	Restrictions refer to limits on the <u>use</u> 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. Note that restrictions are distinct from conditions, which apply only to activities that must be fulfilled in order to receive assistance.
<b>Situation analysis</b>	A situation analysis is an overview of available secondary data and early primary data such as an initial needs assessment and other contextual information. <i>[MPG Toolkit]</i>
<b>Unconditional transfer</b>	Unconditional transfers are provided without the recipient having to do anything in order to receive the assistance.

### 3.2 More information on mainstreaming gender in cash feasibility assessments

Table 5 provides a list of areas related to CVA to explore in Needs and Market Assessments, along with the

corresponding types of questions to ask in order to understand the contextual challenges facing affected populations. These questions explore the additional risks that women and men and marginalized groups face in general and in relation to CVA activities. They also explore current coping mechanisms and potential mitigation strategies.

**TABLE 5**  
**Questions for Needs and Market Assessments by CVA area of interest**

CVA Area	Suggested list of questions to explore
<b>Access to markets</b>	<ul style="list-style-type: none"> <li>Which persons or groups have trouble accessing the market? Why? What could be done to enhance access? Probe for: <ul style="list-style-type: none"> <li>Are the markets close enough to walk to? How do those that cannot walk access the markets?</li> <li>If transport is required, can everyone in the community access the market? If not, who cannot? Why? (probe whether issues are financial, cultural, due to stigma, etc.)</li> </ul> </li> <li>Do any persons or groups feel unsafe traveling to the market? In the market? Traveling home from the market? Which persons or groups? Why? What coping mechanisms are currently used to overcome these issues? What additional measures might be put in place to overcome these risks?</li> <li>Does childcare or other family responsibilities prevent women and men from reaching markets during opening hours? If yes, what could be done to improve access?</li> <li>Are there cultural or religious practices or legal considerations that prevent women or others from going to the market without an escort? What are these? What could be done to enhance access for such persons?</li> <li>What types of market roles do women typically have? Why do women typically have these roles? Have these roles been affected by the crisis?</li> </ul>
<b>Availability of goods in the market</b>	<ul style="list-style-type: none"> <li>Are there any goods lacking from the market which individuals in this community need or want? Who is most impacted?</li> <li>What coping mechanisms do these people use in the absence of these goods?</li> </ul>
<b>Handling cash</b>	<ul style="list-style-type: none"> <li>Is it socially acceptable for women to handle cash? Why or why not?</li> <li>Is it socially acceptable for women to handle vouchers? Why or why not?</li> <li>Is it socially acceptable for women to handle in-kind assistance? Why or why not?</li> </ul>



CVA Area	Suggested list of questions to explore
<b>Household income and resources</b>	<ul style="list-style-type: none"> <li>• Who makes the decisions on the use of assets and income? How?</li> <li>• Are their specific items and commodities which women generally have decision-making power to purchase? What about for men?</li> <li>• What are the rules around purchasing in polygamous households?</li> <li>• After the crisis, have there been any changes to the way food and basic goods are distributed within your household? If yes, what are the changes? Do certain members eat different types or quantities of food? Who eats more or less? Why?</li> </ul>
<b>Preferences on types of assistance</b>	<ul style="list-style-type: none"> <li>• What types of assistance (cash, vouchers, in-kind) do people prefer and why?</li> <li>• What types of assistance have people received in the past?</li> <li>• Have people in the community any experience with cash-for-work programmes?</li> <li>• Are their specific skills that people would like to learn? Why?</li> </ul>
<b>Working behaviours</b>	<ul style="list-style-type: none"> <li>• What kind of work is culturally or legally acceptable for women? For men?</li> <li>• What types of livelihoods do women and men typically engage in?</li> <li>• What additional burdens would CVA linked to work create for women? For men? What could be done to alleviate such burdens?</li> <li>• What particular barriers do women face that could prevent them from participating in CVA (e.g. child care, pregnant or lactating women)? What could be done to overcome such barriers? How do they cope now with such barriers?</li> <li>• Are there other persons in your community who might face barriers to work? Who? Why? How could these be addressed? (probe for vulnerable and marginalized groups).</li> <li>• What type of skills gaps would prevent women and men from doing specific types of work?</li> </ul>
<b>Literacy, numeracy and comfort with technology</b>	<ul style="list-style-type: none"> <li>• What types of literacy and numeracy skills are needed to buy things in the market?</li> <li>• Are there differences in the numeracy and literacy skills of women and men?</li> <li>• Are there other persons or groups within your community who face challenges with literacy and numeracy?</li> <li>• How do people currently address these challenges? What are their coping mechanisms?</li> <li>• How do women and men currently access and use mobile phones, ATMs, etc.?</li> <li>• Are there specific barriers that certain groups face when it comes to accessing or using technology? (probe for cultural barriers to the use of technology, no access to airtime and charging, etc.) Who is most likely to face this? What could be done to overcome this?</li> <li>• Are there cultural or legal barriers that might prevent women from being able to use technology or access the banking system? How might these be best addressed?</li> </ul>
<b>Safety</b>	<ul style="list-style-type: none"> <li>• Are there any signs to suggest that CVA will create greater safety issues than in-kind benefits? What are they? Who will be most impacted? Why? How could these be addressed?</li> <li>• What protection risks did the community face before the crisis? Who was most impacted? Why?</li> <li>• Are there particular risks women faced before the crisis? What? Which women were most impacted and why? What coping strategies did women use to mitigate risks?</li> <li>• Are there reasons to believe that participating in CVA will increase these risks? Create new risks? Which types of risks? Who will be most impacted? Why? What could be done to mitigate or reduce risks?</li> <li>• Is there reason to believe that women participating in CVA will be at increased risk of intimate-partner violence (IPV)? If so, why? Who will be most impacted? How could such risks be mitigated?</li> <li>• How do women and men in the community feel about changes in gender roles? Why?</li> <li>• Do women with disabilities face any additional risks? Why? Can the risks be mitigated and how? What do they do now to cope with the risk?</li> <li>• What are the potential safety issues at cash collection points? How do these change for in-kind, vouchers, physical cash, or cash by mobile/ATM? What are the current coping mechanisms for these safety issues?</li> <li>• Who is most affected by safety issues? (probe for marginalized groups) Why? What could be done to reduce risk?</li> <li>• How will CVA impact community relations? Who will be most affected? What does the community do to address such issues normally?</li> </ul>

CVA Area	Suggested list of questions to explore
Documentation	<ul style="list-style-type: none"> <li>What documentation is typically needed to access assistance? Do women typically have the necessary documentation? If not, why not?</li> </ul>

### 3.3 More information on gender-responsive indicators by result area

When considering which indicators to use to track progress in terms of programme results, consider the following gender-responsive indicators organized by result area:

TABLE 6  
Gender-sensitive and gender-transformative indicators by result area

Result area	Indicators
<b>Programme coverage</b>	<ul style="list-style-type: none"> <li>No. of women and men receiving cash assistance, disaggregated by activity and sex as percentage of planned activities</li> <li>No. of registered versus number receiving benefit, sex- and age-disaggregated data (SADD)</li> </ul>
<b>Targeting, community sensitization and beneficiary registration</b>	<ul style="list-style-type: none"> <li>No. or percentage of community who report or perceive targeting as fair, SADD</li> <li><i>Qualitative indicator:</i> Women and men report (in Focus Group Discussions (FGDs)) that they are better aware of and accept the CVA selection process, SADD</li> </ul>
<b>Complementary programming linked to CVA</b>	<ul style="list-style-type: none"> <li>% of women who use offered childcare services</li> <li>No. or % of women beneficiaries directed/referred to other services, where possible, disaggregated by service type</li> <li>No. and % of women who receive capacity-building, SADD</li> <li>% of participants who report satisfaction with CVA complementary programming</li> <li><i>Qualitative indicator</i> (in FGDs) that explore reasons for satisfaction/ dissatisfaction with CVA programming</li> <li><i>Qualitative indicator</i> (in FGDs) discussing who used childcare services or left children with trusted individuals to join income-generating activities</li> </ul>
<b>Payments</b>	<ul style="list-style-type: none"> <li>% of planned cash distributed, disaggregated by sex</li> <li>Average waiting/queuing time at distribution point to receive entitlement</li> <li>Time in hours between distribution point and residence — linked to mode of transport (e.g. walking, bus, bicycle)</li> <li>Average transport costs between distribution point and residence, disaggregated by age and sex</li> <li>Security threats reported by women and men traveling (i) to distribution point, (ii) from distribution point, and (iii) at the distribution point</li> <li>% of recipients reporting difficulties accessing cash, disaggregated by sex and age</li> <li><i>Qualitative indicator</i> looking in more detail at the types of security threats, reasons and modes for mitigation</li> </ul>

Result area	Indicators
<b>Complaints and feedback</b>	<ul style="list-style-type: none"> <li>No. and % of beneficiaries reporting a complaint disaggregated by the type of complaint, age and sex of the recipient</li> <li><i>Qualitative indicator</i> (in FGDs) looking at (i) knowledge of complaints feedback mechanism (CFM), (ii) accessibility of CFM, and 3) satisfaction with how complaint was handled</li> </ul>
<b>Improved vocational and business skills</b>	<ul style="list-style-type: none"> <li>No. and % of beneficiaries who receive capacity-building disaggregated by age and sex</li> <li>% of beneficiaries who have acquired knowledge and skills as a result of the CVA, disaggregated by age and sex</li> <li>No. and % of women and men who successfully complete and pass a training course necessary for income-generation activities</li> <li>% of recipients who report improvements in ability and confidence as a result of vocational training, disaggregated by age and sex</li> <li><i>Qualitative indicator</i> exploring satisfaction and use of training area and training as appropriate to the beneficiaries' needs</li> </ul>
<b>Improved women's leadership skills</b>	<ul style="list-style-type: none"> <li><i>Qualitative indicator</i>: Women report (in FGDs) improved comfort in speaking their opinions aloud in public</li> <li><i>Qualitative indicator</i>: Women and men report (in FGDs) increased access of women to meetings involving traditional or religious leaders</li> </ul>
<b>Improved women's control over reproductive and economic decisions</b>	<ul style="list-style-type: none"> <li>% increase over programme duration of women in affected populations actively engaged in income-generating activities</li> <li>% of women and men reporting improved female or shared decision-making over reproductive decisions.</li> <li><i>Qualitative indicator</i>: exploring discussion with women and men FGDs on how economic decisions are made within household.</li> </ul>
<b>Changing attitudes on male/female roles in the household</b>	<ul style="list-style-type: none"> <li>% of women and men reporting more equal distribution of household responsibilities</li> <li>% of women and men reporting that the male spouse is spending more time on household tasks</li> <li>% of women and men reporting that the father is spending more time with his children</li> <li><i>Qualitative indicator</i>: exploring attitudes of women and men working within and outside the household, the types of tasks different household members engage in and how these are viewed by members within the household</li> </ul>
<b>Changing attitudes on females working outside the home</b>	<ul style="list-style-type: none"> <li><i>Qualitative indicator</i>: exploring changing attitudes by women and men of women's work outside the home over the duration of the programme and beyond</li> </ul>
<b>Women and girls have the skills, knowledge and confidence to claim their rights</b>	<ul style="list-style-type: none"> <li><i>Qualitative indicator</i>: Positive change reported by males and females (in FGDs) around women and girls engaging in leadership roles</li> </ul>
<b>Reduction in negative coping mechanisms</b>	<ul style="list-style-type: none"> <li>No. of reports of use of negative coping strategies to increase income and/or reduce expenditures</li> <li>Coping strategies index</li> <li><i>Qualitative indicator</i>: exploring in more detail who is using coping mechanisms, why, and how to mitigate negative coping mechanisms</li> </ul>

Result area	Indicators
<b>Improved safety</b>	<ul style="list-style-type: none"> <li>• % of women and girls who report feeling safe</li> <li>• <i>Qualitative indicator:</i> discussions with women, men and members of marginalized groups who report on their feelings of safety before and after the CVA</li> </ul>
<b>Decline in tensions within the home</b>	<ul style="list-style-type: none"> <li>• <i>Qualitative indicator:</i> exploring changes in household social relations — have household tensions increased or decreased during and after the CVA and the reasons why?</li> </ul>
<b>Increased awareness and access to protection services</b>	<ul style="list-style-type: none"> <li>• <i>Qualitative indicator:</i> FGDs with women, men and members of marginalized groups to explore their awareness and access to protection services before and after the CVA</li> </ul>
<b>Increased partner/spouse awareness of GBV</b>	<ul style="list-style-type: none"> <li>• Women and men reporting (in FGDs) increased knowledge around GBV/IPV</li> <li>• Women reporting that they would be able access available services, if needed</li> <li>• Women reporting that they would be willing to access available services and why</li> </ul>
<b>Reduced isolation/improved freedom of movement</b>	<ul style="list-style-type: none"> <li>• <i>Qualitative indicator:</i> exploring CVA influence on perceptions of wellbeing and safety</li> </ul>



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