

Guidance to Ensure the Approach in the Field

Gender Sensitive Cash and Voucher Assistance





CARE International is one of the world's largest humanitarian organizations, fighting global poverty and working in over 90 countries. CARE's emergency response efforts are particularly effective because we view all of our programs through a unique gender perspective, putting women and girls at the center.

CARE's focus on women and girls gives us a unique lens on leveraging cash and voucher assistance (CVA) for more and longer lasting impact. CARE is **committed to ensuring** that projects with CVA are designed with and for women and girls, addressing recipients' needs, challenges, and opportunities. CARE has invested in significant research on how **to make cash work for women and girls** through a gender sensitive approach that frames the processes and outcomes of the modalities. The organization aims to be "cash ready" to **achieve breakthroughs for women and girls**, and to respond to **gender-based violence (GBV) with cash transfers and mitigate GBV risks in projects with CVA**.

WHY DOES CARE FOCUS ON WOMEN AND GIRLS?

Women and girls make up the majority of the 1.4 billion people living in extreme poverty around the world. CARE is committed to addressing the root causes of poverty, not just its consequences. To do so, CARE works with communities to focus on girls and women, alongside men and boys, so that all people can achieve equality. This requires applying more of an intersectional lens to poverty and understanding the way that vulnerabilities are dynamic and interdependent on social and political norms.

By focusing on women and girls, who are often facing the most vulnerable situations, CARE's is able to work together with all genders so that all CVA implemented by CARE and its partners is gender sensitive, and have the potential to lead to transformative change.

GUIDANCE OVERVIEW

This guidance builds on CARE's ambition-via practice, research, evidence on CVA--and aims to support the application of gender sensitive CVA throughout the project cycle and at the response level. It is divided into two sections:

- Part A: 'What has been learned about gender sensitive CVA?,' briefly explains the recommendations that came from the research.
- Part B: 'How do we make CVA gender sensitive?,' applies the recommendations to the different phases of the program cycle with suggested indicators to make it easy to put them into practice.

The guidance is designed for CARE and partners who are involved in all stages of programming with CVA—assessment, design, implementation and monitoring, and evaluation—as well as those interacting with other agencies at response and coordination level. It provides prompting questions and topics and meant to complement other resources on CVA, gender and sectors. (See Annex I).



Part A: What has been learned about gender sensitive CVA?

Based on CARE's **research** on its programming with CVA, there are four key elements to gender sensitive CVA, relevant to all contexts. For CVA to be gender sensitive it must meet the following four elements:

- Respond to unique needs of all genders: This includes all women, men, boys, girls, and those of other genders, with special consideration or attention paid to the unique needs of those most likely to be marginalized.
- **Recognize diversity within gender groups**: Gender groups are not homogeneous, and these differences influence the recipients' experiences of the program and influence the program's impact.
- Avoid exposing recipients to harm and risk: The project with CVA must not create or exacerbate protection risks for various groups.
- Build on social norms work: The program must be contextually determined and be reflective of gender and sociocultural norms, finding the opportunities to make context-specific changes. Analysis will allow the program to find entry points within the sociocultural context to take a gender sensitive approach.

The study further identified the following six recommendations as critical for gender sensitive CVA. These recommendations intentionally put women at the center. CARE is committed to working with communities to fight poverty, which requires focusing on girls and women so that all people can achieve equality. CVA offers other tools to achieve this goal. These recommendations focus on CVA that "works for women" – meaning CVA that meets women's needs, sees their opportunities, and overcomes challenges that they face.

CVA that works for women is gender sensitive.	CVA that works for women is not only designed for them, but most importantly, with them.	CVA that works for women is based on robust gender analysis.
CVA that works for women is designed to sustainably transform gender roles and relations.	CVA that works for women is designed to increase their ability to manage their finances in the long term.	CVA that works for women is designed to protect them.

1. **CORE PRINCIPLE**: CVA that works for women is adapts with the dynamic ways social and political gender norms influence opportunities and barriers to access resources, services and structures¹.

Therefore, the programming with CVA must adapt to norms and work around inequity to ensure equitable allocation, services, and support.

2. ANALYSIS-BASED: CVA that works for women is based on robust gender analysis.

The research study found that including a robust gender analysis as an integral part of needs analysis at the start of and throughout the implementation of CVA can help identify and tackle threats to gender sensitive CVA at the household and community levels. These might include risks of increased violence in the home or barriers to program engagement such as security issues facing women when collecting their transfers.

¹ CARE defines programming that is gender sensitive as "adapts to gender norms. Works around existing gender differences and inequalities to ensure equitable allocation/services/support aligned with the pre-existing gender differences, structures, systems, and power divisions in society. Aware of the effect of leveraging inequitable gender norms for the outcomes of programming."

Market analysis needs to also include gender analysis in order to understand how different gender groups access markets; this should inform response options. This is a recognized gap in terms of capacities of humanitarian professionals. Market analysis should include an analysis of how various genders typically make decisions and how women and men spend their CVA transfers in order to better reflect the needs of women and men and those of their dependents and to contribute to strengthening local economies.

3. PARTICIPATORY: CVA that works for women is not only designed for them, but, most importantly, with them.

For CVA to be gender sensitive and work for women it must be designed with women. The study found that involving women in design discussions and acting upon their contributions has a strong effect on ensuring that program design meets their needs and, consequently, that it was more likely to be impactful. This includes making decisions relating to location of pay points, distribution sites, delivery times, and transfer mechanisms, with consideration given to women's household responsibilities, other work roles, access to financial institutions, and familiarity with technology. While the design of CVA can be influenced by external factors (e.g. donor regulations, response leave decisions, consortium mandates). However, the participatory approach of a gender analysis accounts for relevant stakeholder of all genders and is an essential step in designing an intervention with CVA that meets needs in appropriate ways. It was also found that when women were involved in design, they gained greater awareness of their potential roles in decision-making at the household and community levels upon receipt of the transfer.

4. TRANSFORMATIVE: CVA that works for women is designed to sustainably transform gender roles and relations.

CVA can contribute to positive, transformative change for gender roles if it is specifically designed to improve women's chances of recovery, independence, and future resiliency such as through support for livelihood activities or savings. The study found that CVA must be combined with complementary interventions in order to support longer-term gender-equality related goals. Gender sensitive Cash Plus² responses enabled longer-term changes beyond the CVA timeframe relating to recipient's economic empowerment and resilience as well as more positive and sustainable gender roles and relations. Gender sensitive Cash Plus may include healthcare, education, health and sanitation, psychosocial support, resilience building, training and skills development (including financial literacy), child protection, and the provision of essential services (such as legal support)³. A Cash Plus approach should be designed to work for both women and men, at both the household and community levels, and to align with identified needs. The study found that the provision of gender equity trainings and awareness raising sessions for men encouraged positive attitudinal change related to women's roles, including women's roles in financial decision-making.

5. FINANCIALLY EMPOWERING: CVA that works for women is designed to increase their ability to manage their finances in both the short and long term.

Although CVA may be initiated primarily to meet essential needs, gender sensitive CVA is most effective when it works to empower women and increase their ability to manage their finances in the long term. This is especially true when women use some of their CVA to launch their own income-generating activities (IGA) or purchase productive assets. When this occurs, it may contribute to longer-term positive gender impacts. The study found that when women had access to a **Village Savings and Loan Association** (VSLA), it provided a valuable complement to the CVA by increasing women's involvement in household-level decision-making and enhancing their financial management skills through training the groups. Women also reported that the groups provided safe spaces for women to meet and strengthen their voices at the community level.

6. **PROTECTIVE:** CVA that works for women is designed to protect them.

CVA can contribute to protection outcomes in a variety of ways. One is through helping the recipients meet their basic

² Cash plus is a complementary programming where different modalities and/or activities are combined to achieve objectives. This approach can enable identification of effective combinations of activities to address needs and achieve programme objectives. Ideally this will be facilitated by a coordinated, multisectoral approach to needs assessment and programming. See CaLP Glossary 2020

³ For more examples of this approach see What Does Gender-Sensitive Cash and Voucher Assistance Look Like?

needs. It is widely accepted that when people's basic needs are met with CVA they are less vulnerable to protection risks, like sexual exploitation and abuse, or utilizing negative coping strategies that increase their protection risks, like transactional sex or child marriage. CVA can present gender-related protection risks and, in order for gender sensitive CVA to have positive protection outcomes, it must assess and mitigate gender-related protection risks associated with CVA transfer access and receipt. Other protection considerations are related to safety, security, and harm reduction.

Protection risks associated with CVA include the following4:

- CVA registration, collection, delivery, and access: These may present risks for women relating to robbery on their journeys home after collecting their transfers as well as fear of implications from time away from household responsibilities due to long journeys to collection sites. Safety and security concerns for women also include a lack of knowledge and understanding of technology, illiteracy, language barriers, and the lack of required documentation, all of which may be differently experienced by different gender and other vulnerable groups and can increase the protection risks facing women.
- Communication mechanisms: Information-sharing and communication mechanisms need to be accessible and appropriate for different gender groups and vulnerabilities (related to literacy levels, language, and access to and use of technology) as this influences the accessibility of the transfer and engagement with the CVA project as well as protection risks. This is also critical for ensuring that women can raise concerns safely relating to protection from sexual exploitation and abuse (PSEA) risks.
- Intra-household tensions and GBV: In some contexts, women's receipt of CVA can create additional tensions and an increased risk of GBV within their households. The study found that in some contexts, if the transfer value was not enough to cover essential needs, women faced an increased risk of GBV within the household. In some contexts, if women's engagement with the CVA project threatened their ability to meet their household responsibilities due to time poverty, women might also face increased risks of tension and GBV.
- Community-level tensions: In some contexts, women experience fear or harassment within their communities due to their receipt of CVA.
- PSEA: PSEA concerns associated with accessing humanitarian aid are relevant to CVA. Whether perceived or real or from any number of people and group such as FSPs, CARE staff, or partners these concerns present an enormous risk to CVA recipients and threaten their safe access to CVA.

⁴ For assessing general protection concerns see UNHCR's **Protection Risks and Benefits Analysis Tool** and for GBV specific **Cash and Voucher** Assistance & Gender-Based Violence Compendium.

Part B: How do we make CVA gender sensitive?

In Part B, the findings from the study are translated into suggested practical applications for use by staff involved in delivering CVA programs. These recommendations are organized according to the program cycle, according to the following categories:

- Program-wide: This section translates the four core elements of gender sensitive CVA into implications for programming and some practical suggestions for how to achieve this. These recommendations relate to all parts of the program with CVA and should be reflected on at all stages.
- Design: These suggestions are relevant to planning and decision-making activities that are undertaken in the analysis and design stage of CVA, to ensure a deeper understanding and inclusion of factors that may mitigate genderrelated protection concerns and promote positive gender impacts beyond the duration of the transfer.
- Implementation: These suggestions are applicable to activities that are undertaken as part of the implementation of CVA. They are intended to help ensure that staff are provided with adequate training to implement and monitor gender sensitive CVA programs.



- Evaluation and learning: These suggestions are applicable to activities that are undertaken to evaluate and learn from the CVA program. It is worth noting that although most evaluation activity occurs later in the program cycle, it should be considered at the outset as monitoring, evaluation, and learning (MEAL) frameworks, plans, and tools are developed.
- Response/national level: This section incorporates suggestions for how to promote gender sensitive CVA in the broader humanitarian response and national context during the preparedness phase of CVA program cycle, tool development, and staff capacity building.

PROGRAM-WIDE

As stated in Part A, there are four core elements to gender sensitive CVA. The first recommendation from the research study is that "CVA that works for women is gender sensitive." The table below addresses each of these core elements and explains how these principles can be applied in CVA programs across the program cycle, with three key recommendations.

CORE ELEMENT	PROGRAM APPLICATION	RECOMMENDATIONS
Designed to respond to the unique needs of all genders	Ensure a program-wide approach to gender is taken that is inclusive of all women, men, boys, girls, and those of other genders in our understanding of gender sensitive CVA. This will enable a better understanding of how vulnerabilities, needs, rzisks, barriers, and access vary according to sex and age.	 Use the CARE Gender Marker at the design, implementation, and evaluation stages of programming to support the measurement of gender integration into programming. Doing this encourages improvements that support more effective, gender-integrated programming.
Recognizes diversity within gender groups	Build staff awareness of diversity within gender groups and how this diversity may affect recipients' experience of the project and its (intended or unintended) impacts. Explore the assumptions and generalizations held about various gender groups.	2. Define a program-wide approach to MEAL data that collects and analyzes all data by sex and age groups (disaggregated in line with the Gender Marker guidance and CARE CVA Strategic Commitment 3.3). Disability and other vulnerabilities should also be considered, and appropriate data should be collected
Avoids exposing recipients to harm and risk	Actively explore and build an understanding of safety and security issues related to provision of CVA. Consider whether CVA might create or exacerbate protection risks for different groups and define ways to limit or remove risks that recipients may face.	where practical.Build capacity of all program staff implementing programs with CVA on gender sensitive CVA through fostering a shared understanding of its contribution to women and girls'
Builds on social norms work	Ensure an understanding of social norms (in particular those relating to gender dynamics around household decision-making and cash handling) is reflected upon and utilized in CVA program.	empowerment and programmatic impact. Explore together how to practically achieve gender sensitive CVA in context.

DESIGN PHASE

RECOMMENDATIONS	CONSIDERATION QUESTIONS	INDICATORS
 Develop program-wide participation plans that address gender concerns and opportunities across all activities. Ensure participation of different gender groups in CVA design discussions, including those on gender issues. Ensure participation of different gender groups in discussions on needs and risks. Ensure the assessment team includes male and female staff with a deep knowledge of the context. Ensure staff have been adequately capacitated. Involve CARE cash and markets technical advisors (e.g. global, regional, country). 	 How will community consultation be undertaken to ensure participation plans are appropriate and inclusive of different gender groups? How will participation be built into all stages of the program cycle to include various gender groups and sub-groups? How could barriers to participation of different groups be mitigated? How can participation plans ensure CVA recipients are able to influence the program design and raise protection concerns safely? 	 Risk analysis of intervention with CVA includes gendered aspects and concerns The CVA Modality Decision Tree is used to inform CVA program design (as per CARE CVA Strategic Commitment 3.1) The GBV Risk Analysis Tool is used to inform community consultation and CVA program design (as per CARE CVA Strategic Commitment 3.1) Participation plans demonstrate understanding of different gender groups (e.g. age, ability, geographies) and appropriate means for engagement % of crisis-affected people consulted who report satisfaction with the gender sensitivity of participation plans
 Ensure needs assessments include gender and market analyses and collect and analyze data disaggregated by gender, age, and disability. Ensure the Rapid Gender Analysis (RGA) includes assessment of markets, gendered access (pre- and post-crisis), and other elements that may shape the use of CVA (e.g. financial inclusion, access to financial service providers, and technology, literacy, and numeracy). Ensure a demonstrable and logical link between the gender-specific needs identified for CVA and activities and results in the program log frame 	 How can needs, market, and gender analysis be conducted and integrated to ensure results can inform design? What considerations could be made as to the composition of staff teams conducting analyses and how this might influence results? How might the results of the RGA inform MEAL planning? 	 The RGA tool is used to inform CVA design Gender and market analyses are carried out as a part of needs assessments The log frame reflects gender-specific needs and results of RGA and market analysis

DESIGN PHASE (CONTINUED)

RECOMMENDATIONS	CONSIDERATION QUESTIONS	INDICATORS
 Engage different gender groups on the appropriate elements of program design, including timing of activities (e.g. registration, sensitization, and distribution of delivery mechanisms) and location of the activities and services to ensure everyone's access. Design options for hard- to-reach populations or those gender groups with special needs. For cash for work, analyze which activities are culturally acceptable and find options to allow for equal access to work for all genders and sub-groups. Design effective sensitization and awareness raising on CVA with and for men women, boys, girls, and non-binary people. 	 Do we understand the reproductive and productive roles of different gender groups and the timing dedicated by people, especially women, to these to accommodate CVA to these ? Do we know who the sub-groups and most vulnerable groups are? Would women, girls, men, and boys face new risks due to involvement in CVA? Which factors are essential to ensure safer transfers to women and men (e.g. amount, duration, frequency, mechanism)? What kind of work is culturally acceptable for women face? What accommodations need to be made to meet the needs of the most vulnerable and marginalized participants? 	 The needs assessment data and the participants reflect the diversity of the community RGA and needs and market assessments analyze gendered aspects of modalities, delivery mechanisms, literacy, numeracy, and risks
14. Ensure that Cash Plus activities are determined by gender analysis and participation of various gender groups in CVA design.	How can Cash Plus activities be designed to ensure longer-term and sustainable positive outcomes for women?	 Design of Cash Plus activities is informed by participation of different gender groups and RGA results Tip sheet on multi-modal responses is used to inform program design

DESIGN PHASE (CONTINUED)

RECOMMENDATIONS	CONSIDERATION QUESTIONS	INDICATORS
15. Analyze the gendered protection risks (e.g. safety and negative coping mechanisms) for all genders and their sub-groups (e.g. the elderly; people with disabilities; the lesbian, gay, bisexual, transsexual, queer, and intersex (LGBTQI) individuals; etc.) at outset and throughout the program.	 How can existing protection risks that may influence CVA design best be explored and understood for all gender groups? How can protection risks arising from or increased by CVA be explored and understood for all gender groups? What mitigation measures can be built into CVA program design and how might their effectiveness be monitored? 	 Protection risks for all genders are analyzed in the design phase Mitigating measures for protection risks are included in CVA design The CVA Modality Decision Tree is used to inform CVA program design (as per CARE CVA Strategic Commitment 3.1) The GBV Risk Analysis Tool for is used to inform community consultation and CVA program design (as per CARE CVA Strategic Commitment 3.1)
16. Budget for capacity building, necessary accompaniment for participants, and learning.	Have the "soft components" been costed into budgets and plans of action?	Budget and budget notes mention and resource the full cycle of CVA

IMPLEMENTATION & MONITORING

RECOMMENDATIONS	CONSIDERATION QUESTIONS	INDICATORS
 Sensitize and create awareness of CARE CVA processes and resources with all genders and their sub-groups among recipient communities. Co-create with targeted communities communication and engagement plans that promote gender equity and mitigate gender protection risks (including appropriate mechanisms for feedback and complaints). Processes are adequately budgeted for based on monitoring and feedback information. 	 How well are information-sharing and two-way communication mechanisms working for all gender groups? What adaptations are being made to the CVA program in response to feedback received from different gender groups? How safely can members of different gender groups make complaints relating to the CVA program? 	 % of CVA participants who rank their participation as 'strong' or 'excellent' and feedback and complaints handling as 'strong' or 'excellent' through a Rapid Accountability Review (as per CARE CVA Strategic Commitment 3.2) % of CVA participants from different gender groups who feel well informed about the program % of CVA participants from different gender groups who feel able to provide feedback and make complaints about the program
 Select and validate targeting criteria for different groups of men and women. Ensure validation of recipients is done in a public and transparent manner, including different genders. Base registration processes on input from women and men, applying accommodation as suggested by the communities. 	 Are the community committees' representative of all genders and sub-groups? Are the participants of the validation exercises representative of all genders and their sub-groups? Have the recommendations from communities been applied for the registration process? What accommodations have been made to reach communities in a gender sensitive manner? 	 Participation lists reflect the diversity of the community Validation activities are documented and cross-checked with community discussions Registration is done based on documented community input. Accommodations are documented
 Track sex and age disaggregated data to ensure that systems are in place to register and analyze sex and age disaggregated data and to train staff to fill the templates and report them. Explore and develop opportunities for feedback and further engagement with participants throughout implementation. Monitor access to CVA for different gender groups and develop indicators to measure this based on the assessed access gaps and gender relations. 	What barriers do different gender groups experience in accessing the CVA program? How can you actively explore this with recipients?	% of CVA participants from different gender groups reporting safe and easy access to the CVA program

IMPLEMENTATION & MONITORING (CONTINUED)

RECOMMENDATIONS	CONSIDERATION QUESTIONS	INDICATORS
 Review data on process from post-distribution monitoring (PDM) and feedback in "real time," paying attention to outliers based on gender, age, and other characteristics. Explore potential negative unintended impacts on gender relations (such as relating to transfer values not meeting multiple needs) as identified by recipients. 	 What are the patterns? Is feedback coming in? If not, why? How can unintended impacts be explored with recipients safely, considering the sensitivity of issues of issues relating to gender relations and protection risks? 	 The project team conducts regular group review of data (e.g. weekly, monthly) with emphasis on initial stages of CVA implementation The MEAL plan includes regular monitoring and analysis of unintended impacts with recipients
 Analyze protection risks for all gender groups throughout implementation. Ensure mitigating measures for protection risks are monitored for effectiveness. 	How can protection risks be explored safely with recipients from different gender groups?	 The implementation plan includes regular assessment of protection risks and effectiveness of mitigation measures % of CVA participations from different gender groups who report low protection concerns relating to the program

EVALUATION & LEARNING

	RECOMMENDATIONS	CONSIDERATION QUESTIONS	INDICATORS
s a 2. S C s 3. II d	Ensure that learning from CVA related to gender sensitivity is actionable and allows for program adaptation and updates broader practice. Seek learning from other CARE programs without CVA that demonstrate strong commitment to gender sensitivity, empowerment, and transformation. nvolve CVA, sector, and gender specialists in the design and review of evaluation and learning from projects with CVA.	 How can program processes and tools be changed to enable better future gender sensitive CVA? How effectively has the RGA been utilized in the CVA program? 	 Learning is documented and appropriately shared related to gender sensitive CVA % of women reporting shared decision-making on cash transfer use (as per CARE CVA Strategic Commitment 3.1) % of CVA program staff who report improved understanding of gender sensitive approaches from engagement in the program
R p 5. A g c 6. A o	nclude an evaluation/conduct an After-Action Review of the CVA aspects assessing the performance on gender sensitive programming. Assess how effectively different gender and age groups (e.g. elderly, youth) were reached and analyze causes of differences. Assess the impact of CVA (including the contribution of Cash Plus) on women's and households' economic empowerment and resilience.	How can CVA participants inform the design of the evaluation/review to ensure their meaningful participation?	 Evaluation/review design and final report include an assessment of gender sensitivity in CVA Evaluation/review design and final report ensure the assessment of experiences of different gender groups through meaningful participation Evaluation/review design and final report assess the impact of CVA program on different groups in terms of meeting needs and economic empowerment
	Jse the Gender Marker in evaluations to ground cruth findings.	How might the program improve the results of its Gender Marker assessment in future CVA programs?	 Gender markers included in evaluation/review design and final report
p t	Explore intended and unintended – as well as positive and negative – impacts beyond the life of the cash transfer on different gender groups and gender relations.	How can protection-related unintended consequences be safely explored with CVA participants from different gender groups?	Evaluation/review design and final report include assessment of intended and unintended consequences
C	Share findings with relevant stakeholders (e.g. community, governments, peers, and local authorities).	 Do other agencies have similar or dissimilar experiences? What learnings can/should be converted into advocacy to change processes and systems to enhance gender sensitivity? 	 External presentations are part of the workplan for teams supporting programming with CVA

NATIONAL/RESPONSE LEVEL

RECOMMENDATIONS	CONSIDERATION QUESTIONS	INDICATOR
Ensure that advocacy and communication activities relevant to CVA include reference to gender analysis and its importance in ensuring effective and gender sensitive responses.	What CVA policy/advocacy goals might need to better reflect gender sensitivity (including gender analysis, market access by gender, gender relations, gender- related protection issues, etc.)?	Advocacy messaging that references CVA also references the importance of its gender sensitivity and the results of the RGA Gender sensitivity is a recognized feature at coordination levels (e.g. Cash Working Groups, cluster or sectoral groups)
Carry out systematic training on the gendered protection aspects of CVA including PSEA and GBV and how these may be affected or influenced by CVA.	How can the existing knowledge and attitudes of staff in regard to protection aspects of CVA be assessed? What are the GBV risks associated with CVA? What are the existing responses for GBV response?	Staff are appropriately trained in protection aspects of CVA (including PSEA and GBV) Staff know how to mitigate GBV risks associated with CVA Staff know GBV referral pathways in their contexts and/ or use the GBV Pocket Guide
Ensure crisis preparedness plans include existing gender analysis results and consideration for post-crisis RGA and other aspects of gender sensitive CVA.	What existing data is available that can inform CVA preparedness (demographic data, gender analysis etc.)?	Crisis preparedness plans include considerations for gender sensitive CVA (e.g. Pre-Crisis Market Mapping, gender analysis on digital access).

ANNEX I: REPANT RESOURCES

CARE:

- CARE shares cash and voucher assistance page
- Playbook: CARE's strategic intent with Cash and Voucher Assistance
- **Cash and voucher assistance guidelines**
- Women lead in emergencies
- Gender Marker
- Agenda 2030
- Rapid Gender Analysis guidelines
- Rapid Gender Analysis reports
- Resilient Market Systems Standards A Compendium for Practitioners
- Value chain analysis with a resilience lens
- **Cash and Voucher Assistance Coordination Tip Sheet**
- Minimum standards for cash and voucher assistance program quality

EXTERNAL:

- IASC Gender in Humanitarian Action Framework
- Protection Risks and Benefits Analysis Tool
- Cash and Voucher Assistance & Gender-Based Violence Compendium
- Cash and Voucher Assistance & Gender-Based Violence Compendium Training
- CALP Program Quality toolkit
- The Minimum Economic Recovery Standards (MERS)
- Gender Based Violence and Cash and Voucher Assistance: Tools and guidance
- Gender Equality and Cash and Voucher Assistance: Tools and guidance



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