Money matters: A toolkit for

caseworkers to support adult and adolescent clients with basic money management.



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# Acronyms and abbreviations

|  |  |
| --- | --- |
| **CHH** | Child-headed household |
| **CP** | Child Protection |
| **CPMS** | Minimum standards for child protection in humanitarian action |
| **CPWG** | Child Protection Working Group |
| **CVA** | Cash and voucher assistance |
| **PSEA** | Protection from sexual exploitation and abuse |
| **UASC** | Unaccompanied and separated children |
| **USAID** | United States Agency for International Development |

# Introduction

## What is the purpose of this basic money management toolkit?

This tool is for use when child protection case management clients1 receive cash and voucher assistance as part of their child protection case management response. This tool sets out guidance for caseworkers that have previously had case management training. It will help caseworkers to support their clients with basic money management.

These tools are for use when you have already identified clients who will be receiving cash and voucher assistance as part of case management response.2

##### Overall aim of the toolkit:

The toolkit provides sample scripts and tools that caseworkers can go through with a client so as to encourage the client to reflect on:

* The different needs of varied members of the household so as to encourage decisions that may benefit those who are most at risk or marginalised within the home.
* How decisions are made on money spent, who is making decisions, and why those choices are made.
* What costs incurred are basic needs and should be prioritised in the interests of all members of the household.

By having these discussions it is hoped that clients will be nudged to make choices in the use of their money that benefit them and the whole of their household.

##### Specific objectives of this toolkit:

To provide caseworkers with tools to help their child protection case management clients to:

* Be more aware of their regular and intermittent expenses and keep track of these;
* Prioritise expenses and spend within their income;
* Identify more cost effective spending habits; and
* Encourage clients to save contingency funds to cover for any financial shocks.

In addition the tools can provide real time information that can help improve the design of CVA as part of child protection case management support. The tools can indicate to caseworkers:

* If the CVA is appropriately designed (in terms of transfer amount; frequency; disbursement mechanism);
* Any issues with the financial service provider;
* Intentional or unintentional positive child protection outcomes relating to the receipt of CVA;
* Direct or indirect child protection risks relating to the receipt of CVA;
* Additional support that could be provided to the client to complement the CVA.

## What does this basic money management toolkit contain?

This toolkit includes a selection of tools from which caseworkers can pick and choose what is useful for them and their client. This includes:

* The sample scripts for caseworker to use when supporting clients with basic money management are:

1 A client is the individual at the centre of a case plan. Inter Agency Guidelines for Case Management and Child Protection, The Child Protection Working Group, 2014, [https://resourcecentre.savethechildren.net/library/inter-](https://resourcecentre.savethechildren.net/library/inter-agency-guidelines-case-management-and-child-protection) [agency-guidelines-case-management-and-child-protection](https://resourcecentre.savethechildren.net/library/inter-agency-guidelines-case-management-and-child-protection)

2 Clients will be selected for CVA support based on a number of factors. For guidance on targeting see (to include reference to the CVA for CP guidance once finalised.

* + [Sample script 1: Points to be discussed and questions to be asked at a meeting BEFORE the](#_bookmark1) [client first receives cash and voucher assistance (CVA).](#_bookmark1)
	+ [Sample script 2: Points to be discussed and questions to be asked at the first meeting after](#_bookmark2) [the client has just started to receive cash and voucher assistance (CVA).](#_bookmark2)
	+ [Sample script 3: Points to be discussed and questions to be asked during follow-up](#_bookmark3) [sessions.](#_bookmark3)
	+ [Sample script 4: Points to be discussed and questions to be asked when the cash and](#_bookmark4) [voucher assistance (CVA) is soon to end.](#_bookmark4)
	+ [Sample script 5: Points to be discussed and questions to be asked after cash and voucher](#_bookmark5) [assistance (CVA) has ended.](#_bookmark5)
* The [supporting tools for discussions between caseworkers and clients on basic money](#_bookmark6) [management](#_bookmark6) are:
	+ [Tool 1: What are the family and child’s needs?](#_bookmark8)
	+ [Tool 3: Income tracking table.](#_bookmark10)
	+ [Tool 4: Expenditure tracking table](#_bookmark11)
	+ [Tool 5: CVA exit handout](#_bookmark12)

## Who is this basic money management toolkit for?

This tool is for child protection case management teams – including case supervisors and caseworkers.

**Management:** Child protection technical advisers, managers, or officers and / or child protection case supervisors and caseworkers will first need to take the tools presented here, decide which ones are most suitable for use in their context and adapt them for use in their setting.

**Caseworkers:** The ultimate users of the tools are caseworkers. They will be working with the child protection case management clients to support them in their use of CVA.

Where the tool will be used at a distance (through for example phone calls or video-conferencing) it is best that the client already knows the caseworker. They will be more likely to have an existing relationship of trust and share issues they face in terms of household expenses and exposure to risk.

Caseworkers using this tool must:

* Have previous case management experience.
* Have been assessed using the Child Protection Case Management Quality Assessment Framework. They should have achieved an overall score of “Meets minimum levels” or “Good practice” for Section 5 “Appropriate staffing and capacity building” <https://drive.google.com/drive/folders/1eXp7ZdT9uU0rND2wnOIv4LgV68ppROoC>
* Have a clear understanding of the role that CVA is playing in the wider case plan for the client. The caseworker must know how the CVA will help to achieve the overall child protection case management goals for each particular case they are working on.
* Have a briefing on the CVA for the client. This should cover the transfer amount; modality; frequency; and duration of CVA.
* Demonstrate competencies that make them professionally suited to work with clients who may have experienced distress, trauma, or violence. See the “Personal, social, methodological, and technical competencies” set out in Appendix 1: Caseworker Competency And Skill Framework on pages 73 – 75 of The Child Protection Working Group (CPWG) (2014) Inter Agency Guidelines For Case Management and Child Protection.

### Clients:

Clients are those who are attending case management meetings with the caseworker. They are not necessarily the head of household or the primary decision maker within the home.

These tools are for use with clients:

* Who are attending case management meetings, and,
* Who are the recipients of CVA. In some instances another member of the household may be the one to receive the CVA in relation to the case, in which case both the person attending case management meetings and the individual who receives the CVA should attend meetings where basic money management will be discussed.

Clients may be either:

* Adult caregivers,
* Adolescents who are at the centre of a case, attending case management meetings, and/or receiving CVA directly themselves. This is most likely to be adolescents who are separated from their regular caregivers – for example, unaccompanied and separated children – or child-headed households.

The caseworkers can use these tools with clients who are:

* Soon to receive or already receiving cash and voucher assistance as part of their child protection case management response.
* Receiving the CVA support as a prevention or response measure relating to any form of child protection concern or risk.
* Clients who were receiving CVA before case management support started, and who are now receiving both CVA and case management support.

Clients may wish to be accompanied, as follows:

* Child/adolescent clients can, if they wish, bring a trusted adult of their choosing to the meetings.
* Clients may come in pairs – for example a client may come with their spouse, a partner, or another family member.
* Others who influence financial decisions taken by the client may accompany the client. It is not always the case that the client will be the only or primary person deciding how the CVA is spent. Caseworkers may wish to invite others to join meetings who influence financial decisions made within the home so they can work through these tools together.
* Caseworkers may want to encourage clients – especially heads of households – to bring along other members of the household whose priorities may be overlooked – such as girls, women, and children with disabilities.

When inviting others to participate in meetings consideration must be made for family dynamics and the nature of any child protection cases for which the child or family are receiving support. For example, where domestic violence is suspected, children or women may experience violence if they speak about certain spending habits by the male head of household in front of the caseworker.

**Collaboration between caseworkers and actors delivering cash and voucher assistance:** There needs to be close collaboration and strong information sharing between the caseworkers and those delivering the cash and voucher assistance.

Before CVA begins those managing the disbursement of CVA must fully brief caseworkers explaining:

* The form CVA will take. That is: explain the disbursement mechanism, transfer amount, frequency, and duration of CVA.
* How CVA will be monitored.

During CVA implementation those managing the disbursement of CVA must share:

* New information on changes in the way that CVA is being disbursed.
* Any risks encountered by other recipients of CVA.

Before CVA has begun and during the implementation of CVA caseworkers must share information with those managing the disbursement of CVA on:

* Complementary interventions that CVA recipients receive alongside the CVA.
* Any problems with the CVA identified by caseworkers or clients.

## When should you use this basic money management toolkit?

A range of scripts and tools are presented in this toolkit. The caseworker scripts are for use during case management meetings between the caseworker and their client. They should be used:

* Before CVA has started (Sample Script 1);
* After CVA has started and at intervals throughout the duration of CVA (Sample Scripts 2 and 3);
* Before CVA is due to end (Sample Script 4); and,
* One final time after CVA has already ended (Sample Script 5).

## Where should you use this basic money management toolkit?

Where the caseworker has already held meetings with the client, they should use these tools in the same space where they usually run their case meetings with their client. This is most likely to be:

1. In their own organisation’s offices; or
2. In the offices of a partner organisation or other safe space in the community; or
3. In the client’s home.

If these tools will be used when meeting a new client, the client should be involved in the choice of location for the discussions. Each client may have a different preference. Choice of location should be covered when discussing consent with the client. The location chosen should take into account four main factors.

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| **Four main factors to consider when choosing location for discussing budget management with case management clients who are recipients of CVA.** |
| **① Adherence to safeguarding standards:** The space must allow for compliance with organisational safeguarding procedures. Where children are involved in the meeting, the caseworker must be visible to others, so no unacceptable behaviour is possible without being observed. | **② Accessibility:** Settings should be chosen that can be easily, safely, and confidentially accessed by the client and any individuals accompanying them. This should take into account both the physical space and the route that would be taken to get to and from that space. For example: (1) Clients with physical disabilities should have access to transport to reach the space and should physically be able to enter the space. (2) Clients of a certain gender or ethnicity must not be exposed to high risks of violence on route to or at the space. |
| **③ Safety:** The use of the tool must take place in a location where the confidentiality of the caseworker; client and their household members can be maintained. | **④ Privacy and confidentiality:** Case management meetings should happen in a space that ensures privacy. Those outside the room should not be able to hear discussions taking place inside. |

It may be necessary to carry out the discussions by telephone or through video-conferencing when and where either:

* One or more of the above conditions cannot be met; or
* There are on-going generalised risks that cannot be mitigated – for example when a region is affected by an infectious disease outbreak; on-going security concerns; or active conflict.

In this case, you will need to discuss and agree with the client

1. What technology works best for them?
2. How to maintain safety?
3. How to maintain privacy and confidentiality?
4. What community level supports are available to them?

For tips on remote case management see: Iraq Child Protection Sub-Cluster (April 2020) [Child](https://www.humanitarianresponse.info/en/operations/iraq/document/child-protection-case-management-guidance-remote-phone-follow-covid-19) [Protection Case Management Guidance for Remote Phone Follow-up for the COVID-19 Situation](https://www.humanitarianresponse.info/en/operations/iraq/document/child-protection-case-management-guidance-remote-phone-follow-covid-19).

## How should you adapt and contextualise the basic money management toolkit?

The tool should be adapted to context and to the client the caseworker is talking to. Each individual is different and thus has different needs. The caseworker should know their client and the client’s household well. The caseworker will understand the client’s support needs. The caseworker should know and document why the client has been selected as a CVA recipient. They should select the questions and tools to be used, and adapt them for each and every client, based on the individual client’s needs and their household’s needs.

Adaptation is simply a process of selecting the questions and tools Steps in the contextualisation process:

1. Adapt scripts for seeking informed consent / assent and obtaining permissions in line with local laws.
2. Select the questions and tools most suitable to the situation of the client; their household; and the setting you are working in.
3. Adjust the scripts chosen based on the client – e.g. the clients age and stage of development; their level of education and literacy; if you are addressing a female or male head of household; if the client is an unaccompanied or separated child or a child-head of household.
4. Translate tools and scripts into local languages.
5. Tools 1, 2, 3, and 4, add or change the images / icons. Use images that will be easily understood by clients in your context. You could work with a sample of clients to create the images you will use.
6. Tool 1, Add, remove or change the categories of spending to those that are most familiar and relevant in your setting.
7. Tools 3 and 4, add or remove columns or rows to the tables.
8. Prepare elements of Tool 5 that are relevant to all clients. For example the community- friendly child protection referral pathway.

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| **Factors to consider when contextualising the scripts and tools.** |
| **Level** | **Factors** |
| **Individual characteristics** | * Gender, age, disability or chronic illness.
* Language, literacy, education level.
* Displaced, refugee, stateless.
* Livelihoods activities.
 |
| **Household characteristics** | * Client position within the home (role, decision making ability, etc.).
* Household structure (step family, foster family, etc.).
 |
| **Community** | * Local level governance structures.
* Markets.
 |
| **Society** | * Socio-cultural norms.
* National level political / governance structures.
* Legal frameworks – e.g. minimum age for children to work or have a bank account; legal ability for women to have and spend cash.
* Existing social safety nets and social protection schemes run by the government.
* Availability of certain technologies.
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| **Cash and voucher** | * CVA modalities being used in the context.
* Names of financial service providers operating in the area.
 |
| **assistance** |  |
| **programme** |  |
| **design** |  |

## What this basic money management toolkit does NOT do?

1. This tool **does not replace the full case management process** or any steps within the case management process. The suggested scripts and tools should be used during case management meetings. They are additional tools to supplement safety planning, case action planning, etc.
2. This tool **does not provide guidance on how to design your CVA before it has begun**. Though it can gather useful real time information that can help you to adjust your CVA delivery mechanism to make it safer for your clients.

For detailed guidance on designing and implementing CVA see:

* + Save the Children [Cash Transfer Programming Operations Manual](https://resourcecentre.savethechildren.net/library/save-children-cash-transfer-programming-operations-manual)
	+ MercyCorps, [Cash Transfer Programming Toolkit](https://reliefweb.int/sites/reliefweb.int/files/resources/mercy_corps_cash_transfer_programming_toolkit_part_1.pdf)
1. **This tool does not help you to identify which clients should receive CVA**. To select the clients who will receive CVA you need to have in-country processes for identifying:
2. The communities whose capacities are exceeded by needs,
3. Individual children and households who are at-risk or have experienced child protection issues;
4. Child protection risks that are linked to poverty; lack of financial resources; or livelihood precariousness; and
5. Individual children and families for whom the benefits of receiving CVA will outweigh the risks.

Tools that can help you identify communities, households, and individuals at risk include:

* Vulnerability and capacity assessment (VCA) - <https://www.ifrc.org/vca> - this is a tool that can help you identify risk at the community level.
* Household Economy Approach (HEA) - [https://www.heacod.org/fr-](https://www.heacod.org/fr-fr/Published%20Reports/Household%20Economy%20Analysis_Package21032018.pdf) [fr/Published%20Reports/Household%20Economy%20Analysis\_Package21032018.pdf](https://www.heacod.org/fr-fr/Published%20Reports/Household%20Economy%20Analysis_Package21032018.pdf) - this will help you identify the poorest economically active households in a context.
* Heightened Risk Identification Tool – <https://www.refworld.org/docid/4c46c6860.html> - this is a tool that helps to identify individuals at heightened risk. This tool is designed specifically for refugee settings, but could be adapted to other contexts.
1. This toolkit does **not impose conditionality or restrictions** on cash and voucher assistance that is otherwise unconditional and unrestricted. It seeks to make clients consider how decisions are being made, and whose needs should be taken into account when deciding how to spend CVA. Clients may wish to bring receipts along to help in the budget management process, but caseworkers should not demand or expect this. Caseworkers should not have a responsibility to report on how clients are spending their money; this would contradict the relationship of trust, care, and non-judgemental service provision that are foundations to casework.
2. This tool is **not a monitoring and evaluation tool** that provides evidence on how children’s wellbeing is impacted by CVA. Guidance that you can adapt to your context is available elsewhere on monitoring and evaluating child wellbeing. See for example:
	* Page 64 – 66 of Measuring the Hamakawa, T. and Randall, K. (2008) Unmeasurable: Community Reintegration of Former Child Soldiers in Cote d’Ivoire, Save the Children and Harvard Kennedy School, <https://resourcecentre.savethechildren.net/sites/default/files/documents/4494.pdf>
	* O’Donnell K., Nyangara F., Murphy R., & Nyberg B. (2008) Child Status index, USAID and Duke University, [https://www.measureevaluation.org/resources/tools/ovc/child-status-](https://www.measureevaluation.org/resources/tools/ovc/child-status-index/CSI%20Index-Jan-09-beta.pdf) [index/CSI%20Index-Jan-09-beta.pdf](https://www.measureevaluation.org/resources/tools/ovc/child-status-index/CSI%20Index-Jan-09-beta.pdf)
3. This toolkit **does not provide the clients with comprehensive financial literacy training**. Financial literacy skills may be developed as a complementary component to the case management and CVA interventions you are providing to your case management clients.
	* [Managing your Money: Financial Literacy Training for Community Savings Groups](https://mangotree.org/files/galleries/1382_Managing_your_Money-_Final_Draft_doc.pdf) is an example financial-literacy training manual.

# What are the guiding principles for using this basic money management tool?

Below are the 15 guiding principles that should inform and underpin all case management practice, including conversations between caseworkers and their clients relating to basic money management. These guiding principles are taken from The Child Protection Working Group (2014) Inter Agency Guidelines for Case Management and Child Protection, [https://resourcecentre.savethechildren.net/library/inter-agency-guidelines-case-management-and-](https://resourcecentre.savethechildren.net/library/inter-agency-guidelines-case-management-and-child-protection) [child-protection.](https://resourcecentre.savethechildren.net/library/inter-agency-guidelines-case-management-and-child-protection) Further details describing each of these principles are given in the guidelines.

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| **Child protection case management guiding principles** |
| 1. Do no harm. |
| 2. Prioritise best interests of the child. |
| 3. Non-discrimination. |
| 4. Adhere to ethical standards. Including those relating to safeguarding and codes ofconduct. |
| 5. Seek informed consent and/or informed assent. |
| 6. Respect confidentiality. |
| 7. Ensure accountability. |
| 8. Child friendly / child centred. |
| 9. Empower children and families to build upon their strengths. |
| 10. Base all actions on knowledge of child development, child rights and child protection. |
| 11. Facilitate meaningful participation of children. |
| 12. Provide culturally appropriate processes and services. |
| 13. Coordinate and collaborate. |
| 14. Maintain professional boundaries and address conflicts of interest. |
| 15. Observe mandatory reporting laws and policies. |

**Safeguarding concerns and life-threatening injuries or medical conditions observed or presented during the data collection process should be addressed as soon as possible. As this toolkit is to be used as part of a case management process it is assumed that there is a pre-existing set of Standard Operating Procedures, and a referral pathway that will be followed if urgent action is needed to ensure the safety and protection of a child and / or their family.**

**Any safeguarding incidents, life-threatening injuries or medical conditions that are identified during a case management meeting must be acted upon immediately.**

* **Actions taken should be based on the individual child’s needs.**
* **Any safety issues or concerns that relate to the way CVA is designed must be addressed by the time of the next disbursement.**
* **In the case of safeguarding incidents,**
	+ **Measures should be taken to prevent further safeguarding concerns or incidents from arising, and,**
	+ **Reporting must take place in line with internal agency protocols and national legal frameworks.**

# Caseworker guidance on supporting clients on basic money management

## General guidance for caseworkers on talking to your client about basic money management

### Seeking consent

At the outset of each of the meetings, the caseworker will have to seek informed consent / assent from the client. Key points to raise are:

* Explain the purpose of the basic money management discussions.
* Describe the process you will be following today.
* Indicate what information you will be collecting and storing on their finances.
* Clarify how the financial information they share with you will be stored.
* Obtain permission to proceed.

Talking about money

Throughout any form of discussion with a client on their use of CVA you may want or need to remind the client to think of the different categories of costs that exist, including:

* Regular and fixed costs. These are easy to plan for. They include costs such as rent, and school fees.
* Regular and variable costs. These we know will happen but we cannot be sure how much they will cost and we may not know when they will be charged. This includes food; electricity bills; telephone bills; school enrolment; etc.
* Occur infrequently but are predictable – taxes; insurance payments; etc.
* Shock expenses and unexpected costs. These are surprise costs you did not expect. As such you cannot plan for them and do not know how much they will be. There is a need to set aside money for unplanned costs. This may include new medical health issues; damage to your home; lost crops; etc.

Depending on the capacity and education level of the client, you may need to support them in a variety of ways, using aids, to understand these discussions about money. You can…

* Print out and use large versions of the icons (icons included here include ones for income, spending, date, different categories of household spending, etc.).
* Print out and use pictures of locations in the setting where they may work, receive money, and spend money.
* Produce some form of “fake money”.
* Work with the client to draw your own icons for key concepts that will be reoccurring during the meetings, namely: income; income source; amount spent; date; etc.

Though do remember, that this is not a financial literacy training package. For details of such training see the section above, “[What this basic money management toolkit does NOT do?](#_bookmark0)”

### Talking about needs within the home

When talking about household expenses, remind the client to consider the full range of needs of all members of the household. Always also ask if there are specific needs for certain individuals in the household:

* What are the needs of… girls? … boys? … children with disabilities? … young babies? … older adolescents? … your biological children living in another household? … someone else’s biological children living in your household? … older people in the home? …adults with disabilities? Children and adults in the household with mental health problems?
* Who spends the household income?
* How do you make decisions in the home?
	+ Who decides how income is spent?
	+ Do you ask boys and girls what they need?
	+ Do you ask your spouse / partner what they want or need?
	+ Do you ask other adults in the home what they want or need? If yes, who?
* You can ask the client to invite other members of the household who have different perspectives on needs and priorities. Be careful of any internal household dynamics and tension. These basic money management discussions should not trigger violence within the home.

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| **Dos and don’ts for talking to adolescent clients about basic money management.** |
| This is brief guidance on how to talk to adolescent clients about basic money management. More detailed guidance on communicating with adolescents is available in the adolescent CVA/CP toolkit (Need to add name and link for the toolkit when this isfinalised.) |
|  **DO** |
| **Explain why you are talking to the child about basic money management:** Explain in adolescent-friendly language the objectives of the meeting(s). How many times, when, and where you will meet. Tell the child that you want to help them so that they can use the cash or vouchers they receive most efficiently, to cover the costs of some of their basic needs.* *If they are receiving an* ***unconditional cash transfer***: Tell the client that (1) they have the right to choose how they spend the money they receive through CVA.
* *If they are receiving* ***conditional cash transfer(s) or voucher(s)***: Explain to the client that there are expectations on how they use the cash or vouchers and describe those limits and expectations to them.

**Stay neutral:** Let the child know that you are not there to judge but to listen, understand and help.**Be respectful:** Adolescents may make different choices than you would make, do not judge them for their choices, do not show signs that you are disapproving.**Listen:** Allow time for the adolescent to ask questions and get clarifications. Enable them to feel comfortable so that they can ask for advice on their choices.**Pay attention and observe:** Notice the adolescent’s body language, behaviour and physical reactions as well as they words they use. If they are uncomfortable discussing certain topics, be respectful and do not probe. Be patient, this will help you to build trust with the child, who may share more details in later meetings.**Be patient:** Allow the child the time to think through and absorb the tools and information you are giving them and the questions you are asking them. Give them a chance to think through your questions and answer during future sessions.**Use appropriate and positive body language:** Use positive body language that is culturally appropriate in the setting. Communicate care and comfort to the child using non-verbal |

|  |
| --- |
| communication techniques (for example, smiling). Sit at the same height as the child.**Continually adapt your language and approach to the age and stage of development of the child:** Choose language that is clear and understandable to children of your client’s age, with the skills and capacities they have. Take time during the first meeting to understand if the child can read, write, and if they have basic numeracy skills or not. Adapt the future conversations you will have and the tools you will use to the initial assessment of capacities. Be ready to continue to adapt and adjust your approach as you work with the child. Consider using printed icons, pictures, and “fake” money to facilitate discussions. |
| **** **DO NOT** |
| **Do not make you cannot keep.** Do not say that you will be able to help thechild in anyway they wish. There are times you will not be able to do so. Two main situations where you may not be able to do as the child wishes relate to (1) confidentiality and (2) ability to adjust the cash and voucher assistance.* *Confidentiality:* Reassure the child you are talking to that they can trust you, be open with you, and that most of what you discuss will be kept strictly confidentiality, between the two of you. You do also need to tell them that you might need to share some information if what they tell you makes you think they they, or someone they know, is in danger in some way. You would then need to talk to other people to ensure that the child and/or others are safe and protected from harm.
* *Amendments to the design of cash and voucher assistance:* Programme budgets are pre-set. CVA specifications may be established by the government, wider interagency groups, consortia, or by a donor. The CVA that the child and/or their family is receiving may be part of a larger humanitarian or development intervention that is not only targeting those affected by child protection concerns. All this means that the caseworker’s ability to adjust the amount, frequency, or duration of CVA in most cases is quite limited. The caseworker may be able to contribute feedback, but they should not promise to the child or household members that the CVA will be adjusted based on this feedback. That being said, it is vital if the CVA is posing a risk to anyone that this is immediately acted upon and adjustments are made to make the CVA safe.

**Do not force or pressure the child to talk.** It is better to go slowly and not to ask for too much information too quickly. Children can take time to absorb and understand new information given to them.**DO NOT judge clients on how they have chosen to use their CVA.** Keep your own values and worldview aside during meeting with adolescenets. Do not show judgement in your words or body language. If you are judgemental when a child tells you they have used CVA to buy cigarettes, alcohol, make-up, or other such items that you believe are not essential, the child will feel less comfortable sharing details of their life with you.**DO NOT demand detailed financial reporting by adolescents.** Clients may wish to bring receipts along to help in the budget management process, but caseworkers should not demand or expect this. Caseworkers should not have a responsibility to report on how clients are spending their money. Reporting on how money is spent would contradict the relationship of trust, care, and non-judgemental service provision that are foundations tocasework. |



## Supporting clients on basic money management through casework

### Before the client receives their first disbursement of cash and voucher assistance.

##### Scheduling:

* + This conversation should take place between a caseworker and the client a week or more before the first CVA is to be received by the client.

##### Timing:

* + The following content would likely last between **30 minutes to 1 hour 30 minutes** to complete with the client.
	+ How long it takes will depend on how good they are at maths; how familiar the client is with budgeting processes; and how much they have tracked their own expenses in the past.
	+ You may want to cover the contents in two separate sessions so as not to overwhelm the client.
	+ When working with adolescent clients, you may not be able to cover as much content in one meeting. This is especially true if the child has not handled money and budgeted before.

##### The caseworker will need:

* + A print out of the adapted sample script 1.
	+ Print outs of the tools they plan to use with the client – this can be both Tools 1 and 2, or just one of these tools.

**Sample script 1: Points to be discussed and questions to be asked at a meeting BEFORE the client first receives cash and voucher assistance (CVA).**

**Before they first receive a cash disbursement, the caseworker should EXPLAIN the following to all of their clients who will be recipients.**

*Describe your role as a caseworker in relation to the cash and voucher assistance:*

* The objectives of the discussions and tools you will be using together. Clarify that you do not impose conditions, but can support in decision-making and prioritisation.
* How you work together with the financial service provider.
* Your commitment to maintain confidentiality of any information they share, including how they are spending their money.
* You have to share information with your supervisor and/or the financial service provider if it is revealed during the conversation that the way in which CVA disbursements are currently happening is putting the client or anyone else at risk. This allows adjustments to be made, and everyone’s safety to be ensured.
* Seek informed consent/assent for engaging in these discussions with the client and for storing information shared about their finances.

*Describe the cash and voucher assistance to the client:*

*(*The Financial Service Provider may also provide the below information, but it is better the client hears it twice than not at all. It may also be that they feel more comfortable to ask questions and get

clarifications from their caseworker. )

* Why the client has been selected to receive CVA.
* How much CVA they will receive, i.e. what the transfer amount is.
* How the amount of CVA has been decided.
* When CVA will start.
* How they will receive CVA, i.e. what delivery mechanism will be used.
* How frequently the client will receive CVA.
* When it is planned CVA will end and what will happen after that.
* What support they will receive to accompany the CVA.
* Any conditions to be satisfied by clients receiving CVA.
* What monitoring or follow up will happen alongside the disbursal of CVA, and how the client will be engaged in this M&E process.

**Caseworker may then ask the client a selection of the following QUESTIONS that they feel is most relevant to the client’s situation:**

* Do you think you will feel comfortable receiving CVA in the way described above?
	+ If not, why not? What can we do to ensure you feel safe?
* Do you have plans on how you will spend this initial CVA disbursement?
* Do you want to talk through what expenses you have and see if you feel this CVA will help cover those expenses?
	+ If yes, use [Tool 1: What are the family and child’s needs?](#_bookmark6) and/or [Tool 2: Prioritising](#_bookmark9) [household expenditure,](#_bookmark9) below. You should choose the tool or tools that are appropriate to the level of education and literacy of your client.

**How to use Tool 1 and Tool 2:** [**Tool 1: What are the family and child’s**](#_bookmark8)[**needs?**](#_bookmark8) **and** [**Tool 2: Prioritising household expenditure**](#_bookmark9) **with the client in the meeting BEFORE cash and voucher assistance starts:**

* Print the tools you will be using with the client, that is the diagram in [Tool 1](#_bookmark7) and/or the table in [Tool 2.](#_bookmark9)
* Sit with the Tools you are using between the caseworker and the client.
* Ask the client “What are you family and children’s current needs?” against each of these categories. Ask them to think of regular expenses (those that happen every day, week, month); intermittent expenses; as well as shock expenses.
* What have you historically spent money on?
* Regular costs may include food, rent, mobile phone credit, and transport. Intermittent costs may include clothing, household items, etc.
* As you talk through the different categories of costs the client may incur you can:
	1. Write notes against the different categories / bubbles directly on the diagram, **OR**
	2. Complete Column A of Tool 2.
		+ For clients who are able to write, encourage the client to fill out Column A of the table in Tool 2 with their thoughts about the items they buy.
		+ As you go through the table ask them also what they think the costs of items are typically and they can start to complete Column B.
		+ For clients who are less comfortable reading and writing, the caseworker can complete Column A of the table in Tool 2 whilst ensuring the client and caseworker can both see as the caseworker writes. The caseworker must explain that they are writing what the client says, so the client can keep a record of the conversation they are having.
		+ Similarly the caseworker can write down the clients comments and thoughts as to the

usual costs of items they buy in Column B.

* When you have gone round all the categories of costs and listed the main costs the client can think of; then ask them to consider any costs they may have missed.
* Always also ask if there are specific needs for certain individuals in the household:
	+ What are the needs of… girls? … boys? … children with disabilities? … young babies? … older adolescents? … your biological children living in another household? … someone else’s biological children living in your household? … older people in the home? …adults with disabilities?
* Advise the client that you will be using Tool 2 again in the coming sessions, when you will complete the other columns.
* Ask the client to keep the completed “Tool 2: Prioritising household expenditure” and bring it back when they have future discussions.
* The caseworker may want to make a photocopy (if they have access to a photocopier) or take a photo with their phone. This allows the client to keep a copy and the caseworker to keep a copy on file. This must be done in a way that is in line with your organisation or agency’s data protection and information sharing protocols. Examples of best practice for data protection include: use only your work phone, delete photos regularly once the files are uploaded onto your computer, password , etc. The Child Protection Area of Responsibility has produced a [Draft](https://alliancecpha.org/system/tdf/library/attachments/draft_template_cp_cm_dpisp_january_2019.docx?file=1&type=node&id=35182) [Data Protection and Information Sharing Protocol.](https://alliancecpha.org/system/tdf/library/attachments/draft_template_cp_cm_dpisp_january_2019.docx?file=1&type=node&id=35182)
* If the client is comfortable doing so without the guidance of the caseworker – encourage the client to review the document and continue to add items to Columns A as they think of them between now and the next session.
* Now ask some questions about household income and how they meet the families’ needs (the arrow in the left hand corner of Tool 1).
	+ What sources of income do you have? (Answers to this question can be noted on Tool 1.)
	+ How does your family meet your needs at the moment?
		- Do you have ways to meet those needs that do not rely on this specific assistance?
		- What are barriers to meeting those needs?
		- How do you think cash and voucher assistance will help to meet those needs?

##### Questions for male heads of household (boys or men)

* Do you have a wife, partner, trusted female adult who can ask girl children in your household what their specific needs are (e.g. they may not wish to talk to male household members about need for sanitary products)?

##### Questions for female clients (women or girls)

* Are you able to choose or influence how money is spent in your home?
* Are your needs and the needs of other girl and women in the home taken into account in the household budgeting?
* Are there activities you cannot engage in (for example attending school; or accessing health services) due to a lack of resources?

##### Follow on questions on safety

* Ask some follow on questions about safety:
	+ Will you feel safe spending the CVA?
	+ If not, why not? What can we do to ensure you feel safe?
	+ Do you think some members of your household will be or feel less safe than others with the CVA?
		- If yes, who?
		- If yes, how will they feel less safe?
	+ What can we do to help you and your household feel safer?

##### Closing

* Close the session by thanking your client for their time and reminding them of the day and time you will next meet.
* Update any case files with copies of completed forms and any issues of note raised during the meeting.

### After the client receives their first disbursement of cash and voucher assistance.

##### Scheduling:

* + This conversation should take place once between a caseworker and the client, very shortly after the client receives their first CVA disbursement. Ideally within 1-2 days of receipt.

##### Timing:

* + The following content would likely last between **1hr – 1hr 30mins** to complete with the client.
	+ How long it takes will depend on how good they are at maths; how familiar the client is with budgeting processes; and how much they have tracked their own expenses in the past.
	+ You may want to cover the contents in two separate sessions so as not to overwhelm the client.
	+ When working with adolescent clients, you may not be able to cover as much content in one meeting. This is especially true if the child has not handled money and budgeted before.

##### The caseworker will need:

* + A print out of the edited Sample script 2.
	+ The completed forms from the first session between the caseworker and the client discussing basic budget management. That may be Tools 1 or Tool 2 or both.
	+ Print out of Tools 3 and 4.
	+ A calculator.

##### Caseworker tasks before the meeting:

* + Before the meeting the caseworker should contact the client to remind them to bring the completed Tools 1 and/or 2 depending on which tools they worked on during the first session.

**Sample script 2: Points to be discussed and questions to be asked at the first meeting after the client has just started to receive cash and voucher assistance (CVA).**

* Did you feel comfortable receiving the CVA?
	+ If not, why not? What can we do to ensure you feel safe next time you receive your CVA?
	+ Have you faced any new risks when receiving the CVA?
	+ If yes, what risks did you experience? What can we do to ensure you avoid these risks and feel safe next time you receive your CVA?
* Do you feel safe having the CVA in your home?
	+ If not, why not? What can we do to help you feel safe?
* Have you felt safe spending the CVA?
	+ If not, why not? What can we do to ensure you feel safe?
	+ Where do you spend your money at the moment?
	+ Have you faced any new risks when spending the CVA? If yes, what risks did you experience? What can we do to ensure you avoid these risks and feel safe next time you

receive your CVA?

* Do those selling the products you buy charge consistently the same price to you? Do they charge consistently the same price to others you know? Are there other places that sell the sell the same product that may charge a different price?
* Have you experienced any overcharging, have you been refused services, have you experienced any extortion, security issues or any other risks or challenges since the CVA distribution?

 If any risks have been faced, caseworkers should speak to their supervisor, look at how the CVA may need to be adjusted before any future disbursements, and work with the client to come up with appropriate risk mitigation measures for these risks.

 Be prepared to refer clients for mental health and psychosocial support or medical care if they reveal any experiences of abuse or violence.

### How to use [Tool 2: Prioritising Household Expenditure](#_bookmark9) with the client in the meeting AFTER they receive their first cash and voucher assistance:

* Have the copy of the table in [**Tool 2**](#_bookmark9)that you started to fill out during the last session ready.
* Sit with the table from Tool 2 between the caseworker and the client.
* Ask the client: have you thought of further items you need to add to this list? Add any items they have thought of and want to add to the list in Column A and add the costs of these items in Column B. Consider also any items where the price may have changed.

Ask the client to try to start thinking about what are priority costs for them:

* Ask them: What are needs? What are wants?
* Together start to complete Column C of Tool 2 with prioritisation ranking of 1 - 5. Where
1. Very essential. Item is necessary for the development, wellbeing, and health of individuals in the household.
2. Essential.
3. Useful / good to have.
4. Good to have, but not immediately needed. Purchase of the item could be delayed.
5. Non-essential. An item that is desired or wanted, but is not essential to any household members’ development, wellbeing, or health.
* *Remember – it is the client’s views of what is essential to them or members of their household that is important here. The caseworker must not impose their judgement of what is essential or not.*
* Ask if the client feels that these priorities would be the same for different individuals within the home? Are their specific priorities for certain individuals in the household:
	+ What are the priorities of… girls? … boys? … children with disabilities? … young babies? … older adolescents? … your biological children living in another household? … someone

else’s biological children living in your household? … older people in the home? …adults with disabilities?

 If it feels like the client has understood the other tables and tools and is comfortable enough with the prioritisation process to move on, you can now start to complete tables 3 and 4.

**How to use** [**Tool 3: Income tracking table**](#_bookmark10) **with the client in the meeting AFTER they receive their first cash and voucher assistance:**

* Have the copy of the table in [**Tool 3**](#_bookmark10)set out between you and the client.
* Explain that completing this table will enable you to see together how much money the client

and their household receive over a day, week, and month. This will help the client to see if they can afford to cover all their costs.

* Ask the client:
	+ “What income do you and your household have?”
	+ “Have you had any new income sources since we last met?”

 Complete the table as the client answers questions. Or have the client complete the table if they feel comfortable writing.

* **Completing the income-tracking table**.
	+ For Row A, Row B, Row C, etc… Complete each row with a different income source.
	+ Explain each of the columns one by one to the client.
	+ “Income source”: where the money is coming from.

 You may need/want to ask clarifying questions to understand if the household has had to resort to possible negative coping mechanisms involving children – e.g. child trafficking; child marriage; child labour; pulling children out of school; etc.

* + “Date income received”: The date the income has already been received or when in the future it will be received.
	+ “Frequency of income”: How frequently this income is expected to be received by the household. Is it daily, weekly, monthly, annual, or of an unknown frequency.
	+ “Any conditions”: Details of any conditions relating to how the income must be spent.

 After the table is complete, add up the total income. This enables you to see how much money the client and their household have to spend over the course of a set period of time.

 As will Tool 1 and 2, give the original copy of the income table to the client for them to keep. Make a copy for the case file. These can be referred to during the next meeting.

* + Ask the client: What other, non-financial, support is available to you and your household?
	+ Do you think the CVA together with your other income will cover your expected household costs?
		- If not…
			* Can certain costs be prioritised?
			* Can certain costs be delayed to following months?
			* Would you like me to help you with prioritisation of costs?
			* If yes, revise [Tool 2: Prioritising household expenditure.](#_bookmark9)
	+ Tell the client that now, to fully understand if the income they have is covering their families’ living costs, you will provide them with a tool that they are to use over time to track their spending.
	+ Run through [Tool 4: Expenditure tracking table.](#_bookmark11)

**How to use** [**Tool 4: Expenditure tracking table**](#_bookmark11) **with the client in the meeting after they receive their first cash and voucher assistance:**

* Have the copy of the table in [**Tool 4**](#_bookmark11)set out between you and the client.
* Explain that completing this table will enable you to see together how much money the client spends over a day, week, and month. This will help the client to see where most of their money goes.
* Explain that you will not fill in this form together, now, but rather that they will fill in the form as they spend money over time. You will review the completed details together when you next meet.
* Explain the table as follows:
* **Expenditure tracking table**. Explain each of the columns one by one so that the client can complete the form as they spend.
	+ “Column A: Date”: The client should note the day or date they spent the money.
	+ “Column B: Item purchased”: The client should name the item purchased.
	+ “Column C: Amount paid for item”: Here the client writes the full cost of the item.
	+ “Column D: Location purchased (Optional)”: This is optional. Here they can note the name of the shop where they purchased the item. This may help in working out if some places consistently charge higher prices than others.
	+ “Column E: Who in the household is benefiting from this item?”: This can help to identify whose needs are considered a priority within the household.

 The responses in this column should be explored in further detail during the next meeting. The case manager must think about patterns and issues of inequality and discrimination that these priorities may reflect. For example, gender inequality and the prioritisation of needs of men and boys in the home. Or the de-prioritisation of the needs of children with disabilities. Where these issues of discrimination are occurring the case manager must think of way to gently encourage a shift in attitudes and behaviour within the household.

* Advise the client that they should list spending done with the CVA and all other sources of income they receive.
* Allow the client to ask questions about filling in the form.
* Explain that during the next session you will review the table together. If the client has realised that they do not have enough income, at the end of the month reviewing spending can enable you to identify together:
	+ Where you can make savings;
	+ What costs you can delay; and,
	+ How you can prioritise.
* Give the table to the client. Advise the client to fill in as often as possible, as many details as they can in the tracking table.

##### Closing

* Remind the client to try to fill in [**Tool 4: Expenditure tracking table**](#_bookmark11)whenever they receive and spend their CVA.
* Close the session by thanking your client for their time and reminding them of the day and time you will next meet.
* Update any case files with copies of completed forms and any issues of note raised during the meeting.

### Regular follow-up sessions with the child protection case management client when they are receiving cash and voucher assistance.

##### Scheduling:

* + This conversation should take place between a caseworker and the client at follow up sessions.
	+ With UASC and CHH these points should be discussed at every meeting when the client is receiving CVA. This may be weekly, fortnightly, or monthly, depending on how often you meet with the client and how frequent their CVA instalments are.
	+ With adults you may initially want to discuss these points at every meeting. Over time, the discussions on basic money management may reduce in frequency and be only, for example, on a quarterly basis.

##### Timing:

* + The following content would likely last between **30 mins to 1hr** to complete with the client. How long it takes will depend on how familiar the client is with budgeting processes and how much they have tracked their own expenses in the past. The process will likely get faster and faster over time as they become more familiar with the tools and prepare more between sessions.
	+ The process will also get faster as the forms are more fully completed and require less updating.

##### The caseworker will need:

* + A print out of the edited Sample script 3.
	+ The completed forms from the previous sessions between the caseworker and the client discussing basic budget management. That may be Tools 1 or Tool 2 or both. As well as Tool 3.
	+ Print out of Tools 3 and 4.
	+ A calculator.

##### Caseworker tasks before the meeting:

* + Before the meeting the caseworker should contact the client to remind them to bring the completed Tool 3 as well as Tool 4, if the client has managed to complete this over the time since they last met.

**Sample script 3: Points to be discussed and questions to be asked during follow-up sessions:**

* Did you feel comfortable receiving the CVA?
	+ If not, why not? What can we do to ensure you feel safe next time you receive your CVA?
	+ Have you faced any new risks when receiving the CVA?
	+ If yes, what risks did you experience? What can we do to ensure you avoid these risks and feel safe next time you receive your CVA?
* Do you feel safe having the CVA in your home?
	+ If not, why not? What can we do to help you feel safe?
* Have you felt safe spending the CVA?
	+ If not, why not? What can we do to ensure you feel safe?
	+ Where do you spend your money at the moment?
	+ Have you faced any new risks when spending the CVA? If yes, what risks did you experience? What can we do to ensure you avoid these risks and feel safe next time you receive your CVA?
	+ Do those selling the products you buy charge consistently the same price to you? Do they charge consistently the same price to others you know? Are there other places that sell the sell the same product that may charge a different price?
	+ Ask if they experienced any overcharging, being refused services, extortion, security issues or any other risks or challenges since the CVA distribution.

 If any risks have been faced, caseworkers should work with the client to come up with appropriate risk mitigation measures for these risks.

 Be prepared to refer clients for mental health and psychosocial support or medical care if they reveal any experiences of abuse or violence.

**Reviewing** [**Tool 3: Income tracking table**](#_bookmark10) **with the client during regular follow-up meetings:**

* Take out the completed copy of [**Tool 3**.](#_bookmark10)
* Run through quickly the list of “Income sources” in the first column.
* Ask the client “Do you have any new income since we last met?”
* Did the CVA together with your other income cover your household’s costs for this period?
	+ Have you had other, non-financial, support recently?
	+ If yes, what form has this taken?

 You may want to ask clarifying questions to understand if the household has had to resort to possible negative coping mechanisms involving children – e.g. child trafficking; child marriage; child labour; pulling children out of school; etc.

**Reviewing** [**Tool 4: Expenditure tracking table**](#_bookmark11) **with the client during regular follow-up meetings:**

* Ask the client to share their [Tool 4](#_bookmark11) so you can together look at how much income was received and how money has been spent over the past period.
* Have the copy of the table in [Tool 3](#_bookmark11) set out between you and the client.
* When reviewing the completed table together, you can ask suitable questions from the list of

sample questions below. You do NOT have to ask all these questions:

* + Were there expenses you had not predicted or planned for?
	+ What was your greatest expense? What was the most expensive item you bought this month?
	+ Was this a priority spend? Will you have to spend this every month?
	+ Do you think you get a good price when you shop in this location? Could you have bought this at a cheaper price elsewhere do you think?
	+ Are there risks for you when purchasing in this place?
	+ Which of these costs relate to children? Do some costs relate to girls rather than boys? Do some costs relate to household members with special needs?
	+ What costs did you have in the past that you can no longer meet? Were there things you need that you were not able to buy over the last month?
	+ Were some of these costs things that you wanted, rather than things that you needed?
* Ask the client: “Did the CVA together with your other income your household costs for this period?”
	+ If not… let’s take a closer look together at your expenses and try to think how we can prioritise or delay certain spending, or cut costs in some way. The caseworker and client can use Tool 2 and Tool 4 together to see how they can prioritise spending and meet needs within the income the client has.
* Present some strategies for money saving if they are struggling to make their income cover their costs:
	+ **Buying in bulk:** Buying together as a whole community, or with a few other households or children within the community, so they can buy in larger quantity and potentially get a better price.
	+ **Identifying more competitive prices:** Looking at the prices of different suppliers so that they can identify who sells goods at a cheaper rate.
	+ **Reducing waste:** Identify how they can reduce certain costs by being more careful in the way they use things. For example reducing mobile phone, electricity, or heating bills.
	+ **Focusing on priorities:** Buying the priority items – those items that are classed as 1, 2, 3 in your Table from “Tool 2: Prioritising household expenditure”. It may be possible to buy items classed as 4 and 5 later when money has been saved.
	+ **Needs versus wants:** Review what items are ‘needs’ and what are ‘wants’ and work with them to prioritise needs. Identify where they might be able to be more cost effective and potentially saving for ‘wants’.

##### Sustainability:

Ask the client:

* Now we can see how much you spend each week / month, do you think you will be able to save some of the CVA for any unplanned costs or for when the CVA comes to an end?
	+ If not…
		- Can certain costs be prioritised?
		- Can certain costs be delayed to following months?
		- Would you like me to help you with prioritisation of costs? If yes, use [Tool 2:](#_bookmark9) [Prioritising household expenditure.](#_bookmark9)
* If the client has not been able to complete a full list of expenses for this session, encourage and agree with them that they will try to keep a more thorough record of what they are spending (on a daily or weekly basis) for future sessions. Explain this will enable you to review costs together the next time you meet. This will also help the client to keep track of the money they have left and help them budget until the next CVA distribution to ensure they can make their money last the whole period.

##### Closing

* Remind the client to try to fill in [Tools 3 and 4 as they receive income and spend](#_bookmark11) money between now and your next meeting. Provide the client with another copy of Tools 3 and 4 if they filled their previous forms.
* Close the session by thanking your client for their time and reminding them of the day and time you will next meet.
* Update any case files with copies of completed forms and any issues of note that were raised during the meeting.

### Discussion between the caseworker and the client when cash and voucher assistance will soon be coming to an end.

##### Scheduling:

* + This conversation should take place between a caseworker and the client at least one month before the CVA will end.
	+ You may need to remind the client several times before the end that the CVA will be ending, dependent on the client.

##### Timing:

* + The following content would likely last between **30 mins to 1hr** to complete with the client.
	+ The time it takes will depend on the capacity of the client to understand what you are explaining and the consequences of the fact that the CVA is coming to an end.

##### The caseworker will need:

* + A print out of the edited Sample script 4.
	+ The completed forms from the previous sessions between the caseworker and the client discussing basic budget management. That may be Tools 1, Tool 2, and/or Tool 3.
	+ A calculator.

##### Caseworker tasks before the meeting:

* + Confirm with financial service providers when the last CVA disbursement will be.
	+ Before the meeting the caseworker should contact the client to remind them to bring the completed Tool 3 and 4.
	+ Use Tool 5 to prepare a small hand-out that you will give to the client, this should include a community-friendly child protection referral pathway specific to the location.

##### Caution to the caseworker:

**!**

* + This conversation should prepare the client for the end of CVA. It is important to be honest that it is coming to an end and when it will end. The caseworker must be careful not to create the hope, an expectation, or to make a promise that CVA will be prolonged or recommence.
	+ Case management should not be linked to CVA. Ideally case managers will meet with their client at least once more after their CVA has ended.

**Sample script 4: Points to be discussed and questions to be asked when the cash and voucher assistance (CVA) is soon to end.**

* Do you know when the CVA is going to end?
* Have you got a plan for how you and your household will cope when the CVA ends?
* Have you managed to secure other sources of income?
* Has your income being covering your expenses?
* Have you managed to reduce costs so they will be met by your other income without CVA?
* You can review tools 3 and 4 if the client would like to look at income and expenditure in more detail.
* If they are still finding living within their income a challenge, ask which of the strategies for saving money and cutting costs that you previously discussed they have been able to apply.
	+ Needs versus wants;
	+ Buying in bulk;
	+ Identifying more competitive prices;
* Focusing on priorities; and
* Reducing waste.
* Have you managed to save any money over the time you have been receiving CVA support?
* Are you worried about CVA ending?
* What is your greatest fear after CVA ends?
	+ Can we brainstorm together ways to prevent what you fear form happening?
	+ Can we work together to find ways to reduce the stress you are feeling?

 Sometimes stress and fear can make a challenge seem worse than it is. The caseworker can introduce [relaxation activities](https://resourcecentre.savethechildren.net/library/stress-busters) that can work well for children and adults.

* Does all your family and those who depend on this income know that the CVA is coming to an end?
* Can you continue practicing some of the money saving tips we previously discussed – such as bulk buying, identifying competitive prices, etc.

**How to use** [**Tool 5: CVA exit handout**](#_bookmark12) **with the client in meetings when CVA is soon to end.**

* Ask the client if they will continue using the tools you have worked through with them?
* Ask the client if there is help you can provide them with NOW that would enable them to keep using the tools after CVA has ended?
* Prepare a small handout, using tool 5, to give to them during the meeting. This should cover:
	+ Name of the client,
	+ Name and phone number of the caseworker,
	+ The date the CVA will end,
	+ Hotline phone number or emergency contacts for child protection case referral; and,
	+ If available, copy of a community-friendly child protection referral pathway.

### Discussion between the caseworker and the client after cash and voucher assistance has ended.

##### Scheduling:

* This conversation should take place between a caseworker and the client at least once, 4 – 6 weeks after the CVA has ended.

##### Timing:

* The following content would likely take **30 minutes** to complete with the client.

##### The caseworker will need:

* A print out of the edited Sample script 5.

##### Caseworker tasks before the meeting:

* Confirm with financial service providers when the last CVA disbursement was given to the client.

##### Caution to the caseworker:

**!**

* The caseworker must be careful not to create the hope, an expectation, or to make a promise that CVA will be restarted.

**Sample script 5: Points to be discussed and questions to be asked after cash and voucher assistance (CVA) has ended.**

* How did you manage when the CVA ended?
* Did you manage to secure other sources of income?
* Did you have to reduce costs so that your household expenses could be met by your reduced total income?
	+ What items did you have to cut?
	+ How did you decide what to prioritise?
* What strategies have you used to reduce household costs or increase household income?

 Listen out for child protection risks that may be arising, for example child marriage, pulling their children from school, engaging children in child labour).

* Have certain individuals in the home been most impacted by the end of the CVA?
	+ Who in the home do you think is most impacted?
	+ How are they impacted?
* Are there any concerns that have arisen since the CVA ended that you wish to share with me?

## Supporting tools for discussions between caseworkers and clients on basic money management

### Tool 1: What are the child’s and family’s needs?

* This diagram is for the caseworker to use with the client.
* The diagram sets out different categories of spending involved in supporting a family and a child or children.
* By talking through the tool the caseworker can help the client to think of the full range of costs that are incurred to meet their needs and those of their household.


# Water, sanitation and hygiene

# Food

**Clothes and shoes**

# Transport

# Health care, medication

# Education and/or childcare

**Shelter**

Rent, utilities

**Communications**

Mobile phone, Internet, etc.

**@**

**?**

**Livelihoods inputs / productive assets**

# Other costs

**Contingency funds / savings**




### Tool 2: Prioritising household expenditure.

* Tool 2 helps the caseworker and client to become aware of the different expenses the household incurs over time. It helps in the process of prioritisation.



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category** | **Details of the expenses included under this heading** | **Column A: Item***(Name the item)* | **Column B: Budget / estimated cost.** | **Column C: Priority (1 - 5)** |
| **1. Food** | Food, drinks, baby food, fuel for cooking. |  |  |  |
|  |  |  |
|  |  |  |
| **2. Clothes and shoes** | Clothes, shoes, hats, etc. Need to consider the fact children grow fast and need regular replacements. |  |  |  |
|  |  |  |
|  |  |  |
| **3. Transport** | Purchase or rental of vehicles; vehicle repairs maintenance; insurance; taxes; servicing; fuel; use of public transport; etc.  |  |  |  |
|  |  |  |
|  |  |  |
| **4. Healthcare and medication** | Any regular medicines needed for chronic illness; vaccinations; payment to medical health service providers (doctors, midwives, nurses); health insurance; contraception,etc. |  |  |  |
|  |  |  |
|  |  |  |
| **5. Education and / or childcare** | School fees, costs of education supplies (books, pens, paper), school uniform, fees for childcare including nursery or a child minder. |  |  |  |
|  |  |  |
|  |  |  |
| **6. Water, sanitation, hygiene** | Feminine hygiene products, soap, household cleaning products, etc. |  |  |  |
|  |  |  |
|  |  |  |
| **7. Shelter** | Property tax; house rent; mortgage; household insurance; |  |  |  |



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | utilities including electricity, gas, oil. |  |  |  |
|  |  |  |
| **8. Communications** | Mobile phone, landline connection; Internet payments; etc. |  |  |  |
|  |  |  |
|  |  |  |
| **9. Livelihoods inputs****/ productive assets** | Work related equipment – fishing or farming supplies; materials; income taxes. |  |  |  |
|  |  |  |
|  |  |  |
| **10.Contingency funds/savings** | Money that is set-aside, for example, in case of ill health, for retirement, or for emergency costs. |  |  |  |
|  |  |  |
|  |  |  |
| **11.Other** | Other costs that do not fit in a category above. This may include for example, refunding debt. **?** |  |  |  |
|  |  |  |
|  |  |  |

Prioritisation ranking of 1 – 5, where….

* 1. Very essential. Item is necessary for the development, wellbeing, and health of individuals in the household.
	2. Essential.
	3. Useful / good to have.
	4. Good to have, but not immediately needed. Purchase of the item could be delayed.
	5. Non-essential. An item that is desired or wanted but is not essential to any household members’ development, wellbeing, or health.

### Tool 3: Income tracking table

|  |
| --- |
| **INCOME TRACKING TABLE** |
|  | **Income source** | **Income amount** | **Date income received** |  | **Frequency of income**(Daily, weekly, monthly, annual, unknown) | **Any conditions** |
|  |  |  |  |  |  |
| **Row A:** |  |  |  |  |  |
| **Row B:** |  |  |  |  |  |
| **Row C:** |  |  |  |  |  |

### Tool 4: Expenditure tracking table

|  |
| --- |
| **EXPENDITURE TRACKING TABLE** |
|  | **Column B: Item purchased** | **Column C: Amount paid for Column D: Location item (actual amount spent) purchased** (Optional) | **Column E: Who in the household is benefiting from this item?** |
|  | **Column A: Date** |
|  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

#### Categories of spend are: (1) Food; (2) Clothes and shoes; (3) Transport; (4) Healthcare and medication; (5) Education and / or childcare; (6) Water, sanitation, hygiene; (7) Shelter; (8) Communications; (9) Livelihoods inputs / productive assets; (10) Contingency funds/savings; (11) Other

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### Tool 5: CVA exit handout

**Name of the client Name of the caseworker**

**Phone number of the caseworker**

**Date the final payment Hotline phone number**

**/emergency contacts for child**

**protection cases**

**Local child protection referral pathway.**

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