CASH AND VOUCHER ASSISTANCE FOR PROTECTION OUTCOMES IN MINE ACTION
TIP SHEET

Second Edition: updated in January 2024 by Edward Fraser
This tip sheet includes key terminology and messages, a summary of the latest available evidence and various tips on strategy, resource mobilization and programme cycle management in respect of using Cash & Voucher Assistance (CVA) as an assistance modality for protection outcomes in Mine Action (MA). The relevance of CVA under specific MA pillars is then explored and a list of key related resources provided.

The tip sheet was produced in close collaboration with Global Protection Cluster’s (GPC) Task Team on Cash for Protection (TTC4P) and MA Area of Responsibility (AOR). It is intended for use by anyone engaged in MA programming, with a particular though not exclusive focus on programmatic staff.

It considers only CVA for protection outcomes in MA, as opposed to MA-related considerations in other CVA programmes or other sectoral programming in MA, unless it is considered relevant to the mitigating protection risks or enhancing protection benefits.

Thanks to the generous contribution of the U.S. Bureau of Population, Refugees, and Migration (BPRM) for funding the Global Protection Cluster’s Task Team Cash for Protection (TTC4P) activities, and the copyediting and design of this tip sheet.
A. KEY TERMINOLOGY & MESSAGES

Mine action

- Explosive Ordnance (EO) include mines, cluster munitions, unexploded ordnance, abandoned ordnance, improvised explosive devices and other devices which are inevitably found during and after armed conflicts which can incapacitate, injure or kill one or more persons, as well as prevent them from accessing resources, livelihoods and opportunities due to fear of presence of explosive ordnance.  

- Despite consistent efforts to ban the use of landmines and avoid the presence of EO, there remains a critical need to clear contaminated areas and mitigate associated risks to local communities. However, clearance capacity often does not keep pace with the rate of proliferation, leaving affected communities to cope with explosive hazard risk that threatens their limbs, lives and livelihoods. Even once communities have been cleared of EO, subsequent support is often still required to restore the lives of people affected by crisis and the environments in which they reside.

- MA programming reflects the understanding that communities facing the risk of EO require assistance beyond mine clearance activities, as they face related protection risks, inhibited access to services, reduced options for safe livelihoods and depressed economies.

CVA for protection outcomes in MA

- CVA can be an effective means, where feasible and appropriate, to improve protection outcomes for individuals, households and communities affected by

---

1 This revised edition was based upon the original tip sheet from 2017.
2 https://www.globalprotectioncluster.org/Presence_of_Mine
3 IMAS 13.10: Victim assistance in mine action
EO. However, use in the MA sector has been relatively limited to date, with only a few instances of use in i) clearance, to add value to cleared land; ii) VA to improve access to medical services; and iii) risk mitigation by supporting alternative livelihoods.

- Emerging and promising practices exist, but there are several barriers to wider adoption, such as an assumption that CVA is not a suitable modality in MA overall, siloed working between MA and CVA actors, a lack of requisite capacities in MA stakeholders and a lack of evidence base to support the use of CVA for protection outcomes specifically in MA.

- Barriers to meaningful access to humanitarian assistance should be analysed and addressed by all humanitarian actors. The provision of CVA to individuals to support protection outcomes should be part of a broader approach in line with recommendations provided by other AORs.

- Figure 1, drawn from the TTC4P’s Evidence Mapping (2020) outlines potential uses of CVA in MA to improve protection outcomes.
B. EVIDENCE ON THE USE OF CVA FOR PROTECTION OUTCOMES IN MA

In general, there remains a dearth of evidence and guidance on this topic, highlighting the need for further research on the use of CVA for protection outcomes in MA.


HMA agencies have tended to focus on two of the pillars of mine action, namely Clearance and EORE. However, even if clearance and EORE activities are effective, they are typically insufficient to ensure that affected people avoid high risk behaviours in contaminated areas. As such, there is increasing recognition of the need for new approaches to risk reduction, including but not limited to livelihoods assistance and enterprise development opportunities.4

Examples of livelihood-related risk-taking behaviour, often driven by economic necessity and a lack of alternative opportunities, include:

i) collection of unexploded ordnance to be neutralized and sold as scrap metal;
ii) sale or use of extracted explosives, for example, for fishing; and
iii) people (especially youth) joining armed groups in areas experiencing armed insurgency.

CVA can, whether independently or alongside other forms of livelihood support, play a key role in facilitating alternative, safer livelihood strategies, thereby reducing risk-taking behaviour. As such, it can constitute an appropriate modality to prevent and/or respond to such protection risks, at least in the short term. In addition to standalone CVA interventions, combining CVA with other types of complementary programming and appropriate services can result in a more sustainable protection impact beyond the duration of the cash assistance itself.

Securing a decent, sustainable livelihood is especially critical for EO survivors, as well as for families of people injured or killed by EO.

It also noted that demining of transport routes will most likely support post-crisis market recovery which is likely to improve feasibility of CVA and even alter patterns of economic activity in affected areas. For example, markets may extend to previously remote or inaccessible areas, increasing the flow of consumables and expanding cash needs and aspirations in the process.

TTC4P CVA for protection outcomes In MA: evidence mapping (2020)

This report reviewed literature and interviewed practitioners, concluding that CVA can help support protection outcomes in MA programmes by supporting clearance (land release), risk mitigation and VA objectives. Examples provided include adding

---

value to cleared land, livelihood support to reduce risk-taking activities, and covering costs for survivors. However, adoption has been slower than other AORs and more evidence, capacity building, coordination, and resources are needed to increase CVA adoption in MA.

The mapping identified 47 examples of CVA use in MA programming across 16 countries, with the following main findings in respect of evidence:

- While more limited in scope and scale than the other AORs, some Protection and HMA agencies have begun to use CVA in EO-affected areas. However, **limited evidence was found across the five pillars of MA.** Examples related primarily to Risk Mitigation (considered part of EORE for the purposes of the report) and VA, with few examples found in Clearance and none in Stockpile Destruction or Advocacy;

- **Clearance** activities, though limited, included adding value to land after clearance through:
  
  i) providing CVA to purchase required inputs;
  
  ii) leveraging CVA to empower marginalized groups’ access the land; or
  
  iii) using CVA to support new irrigation canals, thus allowing cultivation throughout the year.

- **Risk Mitigation** involved reducing exposure of high risk-taking individuals to EO by helping them adopt alternative livelihoods to avoid contaminated areas, thus reducing risk-taking behaviours, as follows:
  
  i) assisting farmers with CVA to invest in new farming activities and avoid dangerous fields;
  
  ii) reducing the frequency of visits to known hazardous areas for the purpose of collecting firewood through CVA-facilitated production and sale of higher efficiency wood burning stoves; and
  
  iii) supporting reconstruction of homes damaged by EO through cash for work.

- **VA** examples, whereby CVA is used to support EO survivors and/or their families, addressed stages of treatment and recovery, as follows:
  
  i) Remedial (Emergency): cash transfers to cover transportation costs to health facilities, treatment and meals of family members accompanying the survivor;
  
  ii) Corrective (including household income and rehabilitative support): to reduce the financial burden on the family of the survivor while the survivor is completing treatment, including monthly transfers to prevent resort to negative coping strategies and cover elements of health care which are not free of charge (e.g. assistive devices);
  
  iii) Livelihood: cash transfers to support restarting livelihoods, such as for replacement of livelihood assets, complemented by access to business or vocational training;
  
  iv) School Fees: cash transfers to families of school-age survivors to encourage school enrolment and attendance; and
  
  v) Funeral Costs: cash transfers to a victim’s family to assist with related expenses.

- Overall, the report recommended that emerging practices be further piloted, resourced and scaled to better serve EO-affected communities. More specifically, it recommended accelerating adoption of IMAS 13.10 on VA to provide guidance and expectations around CVA; increasing coordination and partnership between MA and CVA actors to design and implement appropriate interventions; advocating for more resources dedicated to maximising the potential of CVA for Clearance, Risk Mitigation and VA.
Marketplace on MA at the TTC4P Global Workshop, 2023

A specific marketplace on MA was held during the TTC4P Global Workshop in 2023, attracting questions surrounding the entry point for MA in CVA interventions.

It appeared that CVA interventions were still not commonly known in the MA sector as the participants saw little relevance in its use, not least given the focus on Clearance and EORE which seemingly provide fewer opportunities for CVA than certain other pillars. However, participants shared experiences in using CVA effectively in places such as Syria and Mali, where cash was used as part of VA projects, mainly providing cash for victims to access necessary medical support, prosthetics and livelihoods. Cash interventions in the context of VA was well understood by the participants as it showed strong relevance with other sectors through case management, GBV and CP etc.

The marketplace also explored potential areas where MA could collaborate with other sectors, including having cash interventions linked to the productive use of the cleared land or providing cash assistance for relevant livelihood support to affected communities, such as building irrigation systems or providing CVA to procure necessary equipment for agricultural activities to ensure productive use of the land.

C. TIPS FOR USING CVA FOR PROTECTION OUTCOMES IN MA (strategy and programme cycle)

Strategy

• The TTC4P Evidence Mapping (2020) recommended that MA agencies improve coordination, not least with the Cash Working Groups (or equivalent) in each context, through active participation in regular meetings and adoption of harmonised approaches across the programme cycle. This is in addition to building specific partnerships with both protection and CVA actors and dedicate time and resources to build capacity of staff on CVA basics to adopt good practices in MA programming. In addition, MA agencies undertaking CVA already have a role to play in promoting CVA across the respective MA pillars, transparently showcasing successful examples and lessons learned with other MA actors.

• From a strategic perspective, it is important to consider that CVA is a modality, rather than a programme in and of itself. As such, the strategic decision on which the type(s) of programming to prioritise (e.g. protection, basic needs for EO survivors, reduced risk-taking behaviour in livelihoods) and with which overarching objectives, will typically precede the decision whether and, if so, how to use CVA.

• In addition, though standalone CVA can be optimal, in the context of MA programming, it is likely to be i) only one among several, ideally complementary, modalities or outputs across one or more pillar; and ii) most effective when part of a holistic, integrated programming approach that considers survival, recovery and durable solutions. The nature of programming and the extent of complementarity or integration will necessarily vary between different locations or contexts.
Resource mobilisation

- Considering resource mobilisation, especially when undertaking CVA for the first time, it is important to budget for initial sunk or start-up costs, such as salaries of supply chain or finance staff responsible for establishing necessary CVA procedures, as well as the staff time and other costs associated with mapping, procuring and eventually using Financial Service Providers (FSPs), or equivalent, to deliver the CVA.

- Secondly, the total budget for the CVA transfer itself is a factor of i) the number of individuals, households or community groups targeted; ii) the frequency and duration of payments; and iii) the value of each transfer. Critically, the transfer value and frequency/duration of assistance should be driven by the efficient, effective achievement of programme objectives, bearing in mind the cost of relevant goods and services on local markets and in accordance with standards set by national or local CWGs.

- Budgets should, wherever possible, incorporate flexibility to allow for evidence based CVA design adjustments throughout the course of the programme. For example, with respect to victim assistance, budgets would need to cater for the varying nature and extent of needs between different victims and their families, perhaps requiring an estimated average cost in initial budgeting but allowing for flexibility in case of lesser or greater need in specific cases.

Needs assessment & analysis

- Prior to determining whether or not and, if so, how to use CVA to achieve programmatic outcomes, it is necessary to determine through assessment and analysis the context and needs of affected population, in particular how the EO risk is impacting upon their daily lives, safety and perceptions, and how may be exacerbated due to vulnerabilities and/or limited purchasing power.

- It is also important to distinguish between financial barriers to access and others, such as a lack of availability of quality goods and services or physical security risks related to EO preventing access to marketplaces.

- Especially with respect to VA, one should engage directly with survivors to understand their unique barriers, considering that it is not disability itself that makes people vulnerable but the various barriers they face. These barriers are usually context-specific and part of the lived experience of persons with disabilities and can include barriers to accessing the cash to which they are entitled due to the use of inappropriate delivery mechanisms.

- Alongside the standard needs assessment, if and when resource transfer is considered optimal to achieve objectives, it is advised (even obliged by certain donors or agencies) to undertake a market assessment to i) understand the accessibility and functionality of critical market systems; ii) assess whether CVA is feasible and appropriate; and iii) if so, support specific CVA design decisions, such as transfer value.

1 The term “resource transfer” is intentionally modality neutral, as at this stage in the programme cycle, the modality is yet to be determined. Hence the need for a market assessment to inform modality decision-making.
Design & implementation

- It is often the case that multiple barriers prevent EO-affected individuals or communities from accessing goods and services needed to survive, recover and thrive. Hence the relevance of holistic, integrated approaches that can include delivering CVA alongside other services/activities specific to MA.

- Key considerations when selecting the CVA delivery mechanism include local availability of financial service providers, distance, safety and other barriers to access CVA delivery services, associated transaction costs, speed and ease of set-up and adaptation and intended frequency and duration of CVA. When selecting a CVA delivery mechanism, particular consideration should be given to access for persons living with disabilities, including EO survivors with mobility, sight or hearing impairments as well as survivors suffering from mental health issues (Stocktaking Paper, 2020).

- It is advised to work in multi-functional, multi-sectoral teams when designing and implementing, ensuring either standalone or mainstreamed CVA capacities. This brings together individuals with different professional expertise, skills and functions that enable comprehensive response analysis and collective determination of outcomes and programming approaches. However, MA teams can implement CVA with technical support from a CVA Advisor, or equivalent, with relevant capacities.

Monitoring & evaluation

- If a CVA programme is implemented to facilitate access to goods or services, monitoring plans should at least include related price monitoring, if not broader monitoring of market access and functionality, to ensure that i) transfer values remain sufficient to enable access on the part of CVA recipients; and ii) the programme is not causing demand-driven inflation or shortages in local markets.

- In addition, monitoring frameworks and processes should include safety, access, and ease of use of the distributed CVA. In case issues are identified, it is vitally important to gauge if they are exceptional cases or common across all CVA recipients, taking corrective action accordingly. As such, monitoring should track at least gender- and disability-disaggregated process, output and outcome indicators.

- Critically, monitoring implementation and determining adaptation should be informed by ongoing engagement with EO-affected individuals, households and communities in order to ensure assistance is necessarily bespoke to needs and actually redressing barriers faced. Especially in the case of EO survivors, MA agencies should cater for victims’ disabilities in the design of monitoring and accountability mechanisms, such as post-distribution monitoring or community

---

6 Refers to the mechanism used to deliver the cash or voucher to the recipient. Mechanisms include cash envelopes, bank cards, electronic vouchers, distributions through third party service providers, mobile banking etc.
CASH AND VOUCHER ASSISTANCE FOR PROTECTION OUTCOMES IN MINE ACTION TIP SHEET

Gift of the United States Government

In response to Russia’s invasion of Ukraine in February 2022, in addition to various reference in Factsheets produced by the TTC4P’s Regional Cash for Protection Task Force (C4PTF), the national CWG produced the following publications making reference to CVA for protection outcomes in MA:

- **C4P Definitions**: Presenting examples of C4P interventions, the document included a category of MA, with the description stating, “the cash component is designed to meet the needs of individuals who have been injured by EO or reducing the exposure of individuals to EO” and example noted as “remedial support through CVA to enable access of EO survivor to services and their family to cover basic needs”;
- **Protection Risk Analysis for CVA**: This document specifically references children suffering harm, injury or disability due to ER potentially being targeted with cash, but preferably via a caregiver depending on age; and
- **C4P Indicators**: This document included specific indicators for CVA for protection outcomes in MA, namely i) # and/or % of land mines victims targeted for CVA; and ii) # and/or % of land mines victims who report being able to access adequate medical and rehabilitation services.

The CWG also commissioned a blog piece entitled, “Humanitarian Mine Action (HMA) and Humanitarian Basic Needs and Recovery Programming in Ukraine: Recommendations” (October 2022), which highlighted that there is an urgent need for MA in Ukraine due to extensive landmine and other EO contamination, posing a serious threat to civilians. In general, it recommended that HMA organizations coordinate closely with broader humanitarian, development and peacebuilding efforts and integrate HMA with wider programming and recovery strategies.

In respect of CVA, multi-purpose cash (MPC) and cash for work (CFW) are mentioned as viable forms of emergency relief and recovery assistance in newly liberated areas typically affected by EO contamination. It recommends that basic needs and recovery programs, including those involving cash, integrate with programmes and plans of MA agencies and mainstream HMA-informed protection from both technical and operational perspectives. In addition, it highlights key areas where MA teams can assist humanitarian agencies undertaking emergency and recovery activities, including CVA, as well as how humanitarian agencies can assist MA teams supporting design of VA, Risk Mitigation and Risk Education, including the use of CVA in various forms.

Across the programme cycle, whether within or between organisations, it highlights the importance of:

- Conducting joint multi-sector needs assessments which mainstream MA and/or Knowledge, Attitude and Practices (KAP)/EO Impact Assessments which mainstream socioeconomic needs;
- Joint design and resource mobilisation, informed by collective strategy and concept notes;
- During implementation, developing effective referral mechanisms between MA and CVA actors, incl. commonly defined selection criteria; and
- Monitoring joint indicators with mutual responsibility for outcomes and frequent review of results.

One specific example has been implemented by the Danish Refugee Council (DRC), with support from Ukraine Humanitarian Fund, USAID BHA and SIDA, providing one-of conditional cash grants to EO victims to cover the cost of a range of goods and services, such as medical care, productive assets, vocational training, inclusive household rehabilitation and civil documentation. The transfer value varied depending on pre-assessed needs and was delivered via bank transfer and justified through the provision of receipts to DRC. Recipients were identified through various channels, including referrals from other programmes or agencies and an online application form.
D. TIPS FOR USING CVA FOR PROTECTION OUTCOMES IN MA (per pillar)

Pillar 1: clearance

- Though no direct examples of CVA being used in land clearance or release processes were found as part of the Evidence Mapping, there were cases of CVA helping and adding value to land after clearance and release, e.g. via cash for work to build irrigation canals on cleared land.

- MA practitioners should consider implementing integrated programmes that do not focus solely on land clearance and release but adopt a more holistic and sustainable approach. Consider, for example, programming which integrates elements of adding value to cleared land with the support of CVA, ideally through decent, sustainable livelihoods that promote the self-reliance and resilience of those affected by conflict and displacement.

- Mine clearance can also contribute to providing solutions and remedies specifically for displaced persons. For instance, integrated programming that includes elements of both clearance and infrastructure rehabilitation through conditional, unconditional, or other forms of CVA and is closely coordinated with entities responsible for refugee or IDP return can strengthen the likelihood of sustainable solutions.

- The safety of affected populations should take precedence in any programme. As such, and prior to establishing any CVA activities involving the physical presence of programme participants, a threat and explosive hazard risk assessment should be carried out. If structures are to be built or anything driven into the ground, a surface and sub-surface search should be conducted, and the area signed over to appropriate authorities or organisations prior to starting activities.

Pillar 2: explosive ordnance risk education (& risk mitigation)

- The TTC4P Evidence Mapping (2020) only noted one example specifically related to EORE, whereby cash for work was used to compensate participants trained as EORE facilitators. However, in extending the pillar to incorporate broader risk mitigation, the mapping identified a range of examples, the majority of which focused on CVA in support of reduced risk-taking behaviour in pursuit of livelihood opportunities. Where relevant, MA teams can refer individuals to the CVA and/or Child Protection (CP) programmes which do the same, i.e. reduce negative coping strategies.

- Considering EORE specifically though, assessments should explore economic barriers and opportunities to meaningful participation for differing demographic groups in EORE activities and, in turn, consider appropriateness of CVA to reducing them.

- More specifically, it is broadly recognised that there is a relationship between EORE, poverty and protection risks, especially for children. Children of families living in poverty have an increased risk of dropping out of school (where EORE is generally
conducted) and engaging in hazardous livelihood strategies, including work in EO affected areas, which further exposes them risk. As such, identifying and assisting these families in CVA can contribute to EO-related risk mitigation, assisting families to meet basic needs and ensure children remain in school.

- Especially in the case of child survivors of EO accidents, "returning to school is vital to the socio-economic inclusion and psychosocial recovery of child survivors. Survivor assistance programmes (including CVA when feasible and appropriate) play an important role in promoting inclusion and access to education for children with disabilities. Survivors are often denied education because of issues ranging from transportation difficulties and inaccessible classrooms to the additional burden of educational costs on families with considerable medical expenses."

- Regarding broader risk mitigation, assessment and analysis should explore suitably disaggregated risk perceptions, behavioural incentives and existing mitigation strategies among affected populations as relevant to EO and socio-economic activity. This will help assess the relevance of CVA in reducing risk-taking practices, for example pursuing riskier livelihoods, and their detrimental protection impacts.

Pillar 3: victim assistance

- The VA pillar arguably holds the greatest potential for the use of CVA for protection outcomes in MA, with multiple examples identified as part of the TTC4P Evidence Mapping (2020), for example CVA provided to facilitate access to emergency healthcare, rehabilitation services and/or sustainable livelihood opportunities for EO survivors.

- In general, CVA interventions should be considered in EO affected areas, or in those areas that have recently been cleared or released for safe use, targeting survivors and indirect victims (e.g. family members of those injured or killed). When requisite physical and mental healthcare products and services are available, assess whether or not victims face financial barriers to accessing them and, in turn, whether CVA is a feasible and relevant modality for the achievement of programmatic outcomes. In addition, and especially if regular access is required, it may be relevant for the CVA to be conditional on attendance at appointments.

- Survivors who are women, men, boys, girls or from other demographic groups living will likely face different experiences and face different barriers to accessing goods and services, a fact that should influence VA approaches in general, but also the selection and design of CVA as a modality. For instance, women injured by mines may be at heighten risk of divorce and abandonment by their spouses which may subsequently lead to stigma and greater economic responsibility for their households. Children, on the other hand, may be excluded from CVA programmes due to related safeguarding risks of distributing cash to minors.

---

Similarly, CVA interventions should consider that individuals’ injuries differ in nature and extent and, as such, will require at least a degree of bespoke support (e.g. adapting transfer values according to the extent of healthcare needed) to be delivered in an accessible way (e.g. ensuring delivery mechanisms are sufficiently varied to allow unfettered access by all recipients).

**WEBINAR SERIES ON VICTIM ASSISTANCE, HOSTED BY HUMANITY & INCLUSION (HI, 2023)**

In late 2023, HI hosted two webinars focusing on VA, covering data collection and mapping victims’ needs and available services, developing service directories and referral pathways, coordination across sectors to facilitate access and advocacy, during which the following references were made to CVA:

- **Individual protection assistance (IPA)** refers to a basic package of support that is given to a victim after an accident. This can include cash, for example to pay for transportation to medical facilities or to cover some emergency basic needs of the victim and the family;
- With reference to referrals, the importance of appropriate follow up and, where necessary, additional support was highlighted, i.e. to ensure that referred individuals have the financial means to access services to which they were referred or have been able to access CVA, in case they were referred to CVA programmes;
- Referring to the types of data collected from project participants when providing CVA via a Financial Service Provider (FSP), and making sure that it is kept to a minimum in order to mitigate associated data protection risks; and
- More analysis on service gaps and affected population’s needs would help determine if/how CVA could complement other efforts to fulfil victim assistance goals.
Other resources

MINE ACTION
• Global Protection Cluster – MA AOR website
• Global Protection Cluster – MA AOR Strategy
• Standard 13.10 Victim Assistance in Mine Action (IMAS, January 2023)
• Fact Sheet: How to implement victim assistance obligations? (HI, 2013)

CASH & VOUCHER ASSISTANCE

General
• CALP Network website
• CALP Resource Page, including Glossary of CVA Terms
• CALP Community Page, including CWG Directory

For Protection
• Global Protection Cluster – Task Team on Cash for Protection Task Team (TTC4P) website

CVA FOR PROTECTION OUTCOMES IN MA
• Section on MA (p16-18) in CVA for Protection: Taking Stock of CVA to Achieve Protection Outcomes in the Protection Sector in Humanitarian Settings (TTC4P, July 2020)
• CVA for Clearance, Land Release, and Survivor Assistance Event (TTC4P, June 2021)
• Section on MA (p8) in Report on the C4P Workshop Rome, Italy (TTC4P, May 2023)
• C4P Global Mapping (filtered for MA – Victim Assistance)
• Ukraine (C4P Task Force in Ukraine)
  – “Humanitarian Mine Action (HMA) and Humanitarian Basic Needs and Recovery Programming in Ukraine: Recommendations” (Blog by MarketImpact, on behalf of the Ukraine CWG, October 2022)
  – Protection Risk Analysis for CVA January 2023)
  – C4P Definitions – Working Document (June 2023)
  – C4P Indicators – Ukraine Regional Response (2023)