

This tip-sheet summarises key points for protection from Gender-Based Violence (GBV) when considering Cash-Based Interventions (CBI's). It is applicable to CBI integrated into GBV programming and GBV mainstreaming in cash programming. It is intended to assist the GBV Area of Responsibility and partners to consider ways CBI's can be used to minimise protection risks and enhance protection benefits. The use of cash is not inherently risky; no more than any other aid modality. Associated protection risks depend on context, age, gender and diversity and need to be identified, assessed and mitigated across the program cycle through tailor-made interventions.

GENDER-BASED VIOLENCE AND CASH-BASED INTERVENTIONS TIP-SHEET

TERMINOLOGY

Cash based intervention (CBI): Refers to the provision of assistance to individuals, groups or communities through cash and vouchers, and is an alternative modality to doing in-kind distribution or direct service provision. CBI's are not a programme, they are a modality that helps to achieve programmatic results (such as enabling populations to meet basic needs, assist with livelihoods recovery, or improve access to services). CBI's are used when target populations are facing an issue of **accessibility** to goods and services due to insufficient income/money and other barriers that limit their access. When a market is well-provisioned and can scale-up its supply when faced with increased demand, CBIs might be the preferred intervention modality because they inject money into the local economy, and provide the dignity of choice to target populations. If a population is facing an issue of **availability** of **quality** goods and services however, provision of cash or vouchers may cause inflation due to insufficient supply. In this case, in-kind, or a combination of CBI and in-kind may be required for the initial stages of response until the local economy can support a large cash-influx. Considerations and preferences of affected population should play a prominent role in the design of CBI.

Conditional versus Unconditional: Refers to whether a condition must be met before a beneficiary may obtain the cash or voucher. Examples of conditions that may be applied include work (cash for work), attendance at a training, bringing children for doctor's checkups, instalments for livelihoods grants being provided upon proof of proper expenditure of previous instalment, and disarmament.

Restricted versus Unrestricted: Refers to how the money can be spent. Unrestricted means that it can be spent on whatever the beneficiary wishes. Restricted grants are typically provided through vouchers, which limits the expenditure to a specific place (eg. only at selected grocery stores), or a commodity (a voucher worth x kg of rice), or a cash value (a voucher worth x money to be spend at participating retailers). Restricted CBIs are usually adopted when the program requires that the cash be spent on a specific commodity or service, however this commodity or service is not the highest priority of the target population. Unrestricted cash grants (that can be spent on anything), will usually be spent on a household's most urgent unmet need. If your program requires cash to be spent on a specific service or commodity that is not considered a top priority by households, use vouchers to restrict expenditure.

Cash delivery mechanisms: Refers to the delivery mechanism of how the beneficiary will receive the cash/voucher. Mechanisms include cash envelopes, bank cards, electronic vouchers, distributions through 3rd party service providers, mobile banking etc. Key considerations when selecting the cash transfer mechanism include local availability of services, distance to services, access (including safety) of beneficiaries to services, costs, speed and ease of set-up, speed and ease of making changes, and intended duration (one delivery versus regular instalments).

KEY MESSAGES

- Do not assume that CBI's are not suitable modality to be used in GBV programming. Use evidence base to inform your decision.
- The evidence shows that:
 - ✓ When lack of financial resources and economic opportunities are the contributing factor of GBV, CBI may be an appropriate modality to respond to and mitigate the risks of GBV.
 - ✓ CBI may reduce GBV risks even though it was not specifically designed to do so, though the risk reduction is usually short-term.
 - ✓ Combining CBI with appropriate services may result in more sustainable protection impact that goes beyond the duration of cash transfer.
- In programmes that aim at achieving protection outcomes, have a good understanding of gender dynamics in communities and the determinants of GBV risks you want to reduce. Determine if they have economic causes that can be addressed through CBI's, ie develop a theory of change, pathways flowchart and/or a result framework to visualise the causal logic. The objectives should stem from the causal logic and gender analysis.
- Follow 'Do No Harm' approach and mainstream analysis and mitigation of protection risks in the design and implementation of CBI using, for instance, UNHCR protection risks and benefits analysis tool available at http://www.globalprotectioncluster.org/assets/files/tools_and_guidance/cash-based-interventions/erc-protection-risks-and-benefits-analysis-tool-web_en.pdf
- Work in multi-functional / multi-sectoral teams when designing, implementing and monitoring programme, including SGBV specialists, cash officers, protection, health practitioners, education specialists, social workers, engineers, etc. A multi-functional team brings together different professional expertise, skills and functions that enable comprehensive analysis and consensus on common goals, outcomes and approaches.
- Do not underestimate community-based protection measures and capacities; assess, build them in and strengthen them in your programme design as part of community-agency risk mitigation measures.
- Communication and engagement of affected population should be systematically incorporated into cash programmes in a way that complements existing mechanisms and avoids creating parallel ones. Communication and feedback mechanisms should reflect preferences of affected population and adhere to best practice to ensure safety and access.
- Beneficiaries' right to privacy and the protection of personal data must be considered and adhered to per best practice standards and guidelines.

RECOMMENDATIONS PER PHASE OF PROGRAMME CYCLE

ASSESSMENT

- Conduct thorough gender analysis to understand gender dynamics in communities - use existing sources of information – household economy and other assessments, studies, reports, gap mapping, case management data, trend analysis - to identify economic and/or livelihoods-related causes of GBV.
- Incorporate gender analysis throughout the programme cycle to understand the impact of crisis on different Age, Gender, Diversity (AGD) groups and how crisis may have affected roles and dynamics in society between these different groups.
- Ensure active participation of women, girls and other at risk groups throughout project cycle, including engaging them in gender analysis, identifying criteria for beneficiary selection, reviewing assessment methodology and tools, mechanisms for cash delivery and locations of distribution points, transfer amounts, frequency, duration and complementary services delivered alongside cash.
- Assess community practices, experiences and norms related to understanding of different forms of GBV, perceptions of cash and income generation, role of men and women in household economy. This will help decide who within household should be the recipient of cash.
- Determine if different age, gender and diversity groups (ie women with a disability or other marginalised women, including the elderly or LGBTQI population of women) face different risks associated with the introduction of cash and have different needs, ie

Learning in action:

In North-Eastern Nigeria, International Rescue Committee learned that targeting women as recipients of unconditional cash transfers, regardless of context, could be perceived by men as undermining their position in the household and society and thus place women at risk of, for instance - domestic violence, if men are not involved in targeting-related discussions. Moreover, if the main purpose of cash transfer is addressing the basic needs of household within limited period of time, its design may not be suitable to address women's empowerment or have a transformative effect on gender relations, as was the case with IRC's programme. Ultimately, the decisions about who within the household should be the recipient of unconditional cash transfer were informed by a protection benefits and risk analysis conducted jointly by IRC with the local communities in programme locations. In Adamawa State, the community decided that it should be women receiving cash, due to their role in household economy, ie being in charge of the home and food related issues. Meanwhile, in Borno State, men felt that it should be them receiving cash transfers because they were the defacto head of household. Ultimately, 'sensitisation' sessions with communities opened up discussions on roles and responsibilities of men and women in household economy, bargaining power within and between households, and women were given the option to decide whether they want to be recipients of cash or not.

Existing referral systems were expanded to absorb new cases based on 1) general socio-economic vulnerability; 2) being GBV survivor or at risk of GBV, and cash was identified as a means to mitigate the GBV risks; and 3) other special cases.

IRC's targeting criteria in North-Eastern Nigeria was responsive to local socio-cultural norms, ie when defining what constitutes a 'household'. In recognition of polygamous relations / marriages, each wife with dependents was considered by IRC's an independent household in order to minimize risks associated with the cash transfer at the household level..

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organise single-sex focus group discussions to illicit perceptions of threats, risks and mitigation measures in place and whether cash assistance is appropriate.

ANALYSIS OF PROTECTION RISKS, VULNERABILITY AND CAPACITY

- Use existing GBV assessments and safety audit information which is being collected by existing GBV service providers.
- If there's no existing data available, conduct community-based mapping of GBV risks, threats, vulnerabilities, community capacities, mitigation measures and practices. Consider if this approach can be promoted as a common way of identifying and mitigating risks, ie by a wide range of responders in country.
- Use any existing protection analysis for the area as well as the gender analysis to identify root causes of GBV risks and determine jointly with the community whether CBI can reduce these risks (or some of them), either alone or in combination with other types of assistance and other actors.
- Look within and beyond the household unit: disaggregate information or include samples of individuals using an AGD approach.
- Different AGD groups have different ways in which they prefer to express their preferences, give feedback and inform. Solicit views of different AGD groups on the best ways feedback and complaints can be received considering community practices and norms. Determine if accountability framework is in place and can be used or needs to be

Learning in action: ActionAid in Somalia integrated its accountability to affected population mechanism and its GBV referral pathway. The organisation learned through focus group discussions that men and women have different ways in which they prefer to express their preferences, give feedback and disclose incidents of violence. The results of FGDs varied not only by sex, but by age and location as well, indicating that local context analysis is crucial. This informed the design of the accountability to affected population mechanism using a variety of approaches - the quick response cards as cash and food vouchers, transparency boards, complaints desks, and toll free numbers for suggestions, feedback and referral in a confidential manner. Complaints desks, staffed by female and male staff, were integrated into the community structure and connected to 'Women Coalition' network groups, which helped amplify women's voices about GBV and harmful practices in Somalia. Coalition members were part of the GBV referral pathway.

GPC Good Practices and Lessons Learned Workshop on Protection in Cash-based Interventions, Hargeisa, Somalia, 5 June 2017

established. This will allow community feedback related to labour exploitation, work-related accidents and insurance scheme (ie cash for work), sexual exploitation and abuse, corruption and fraud, etc.

DESIGN

- Determine program objective, outcomes and implementation strategy in coordination with a multi-functional team (GBV, child protection, case workers, cash, livelihoods, education, programme, etc), partners and communities. Use key people within the community to support design – people who are identified by local organisations or CSOs as well as through the protection/gender analysis.
- Decide if cash is adequate modality to reach programme objectives and if so, what mechanism and for which part of programme. Consider complementary programming with a focus on behavioural changes based on a curriculum across the period of the project in order to achieve longer-term outcomes.
- Build in flexibility to the outputs to be able to adjust the programme according to monitoring to achieve the outcomes.
- Be clear on your exit strategy from the start and communicate it in ways that are understood by everybody in the community, including different AGD groups, etc.
- Adapt recognised standards, such as minimum standards for prevention and response to GBV in emergencies as well as key indicators, to the local context to develop logical framework / theory of change.

- Develop a targeting strategy. This should be based on risk, vulnerability and capacity analysis conducted jointly with communities in the previous phase.
- Ensure targeting method is linked with your theory of change – objective of your programme and expected outcome, and supports protection outcomes (reduces risks) and in what way.
- Consider targeting based on qualitative methods rather than quantitative only. When CBI is used to contribute to women's protection, empowerment and resilience of specific GBV cases, allowing the targeting to be more strongly informed by a case management process, eliminating generic scoring based on potentially irrelevant indicators is more likely to lead to protection outcomes relevant to GBV, ie reduce GBV risks. Involve skilled case managers to help determine when cash should be provided as part of case management.
- Ensure the selection criteria and processes is clear to everybody – staff, referring agencies, community, government, etc.
- Consider how your programme can handle cases that were not included initially in the beneficiary list but are referred through different channels, ie establish a formal appeal process for vulnerable cases so staff can automatically review cases that fall within a certain borderline score or identify re-inclusion categories.
- Plan the level of participation and leadership of different AGD groups in CBI, including the ratio of male-female staff in regular and leadership positions, strategies for hiring and retaining women and other at-risk groups.
- Assess awareness of CBI staff on basic issues related to gender, GBV, women's rights, social exclusion, sexuality, referral mechanisms and build in knowledge development component, if need be.
- Review existing community outreach material relevant to CBI to ensure it includes basic information about prevention and response to GBV.

Women's Refugee Commission (WRC) developed a toolkit for optimising cash-based interventions for protection from GBV. It includes 1) focus group discussion/interview tool and accompanying guidance to assess and mitigate potential risks, as well as a post-distribution monitoring tool and accompanying guidance to monitor risks; 2) protocol to assess and address GBV survivors' needs for cash assistance within GBV case management services, as well as a post-distribution monitoring tool and accompanying guidance to monitor risks.

WRC, Toolkit for optimising cash-based interventions for protection from GBV, accessed at <https://www.womensrefugeecommission.org/components/zdocs/document?id=1549-mainstreaming-gbv-considerations-in-cbis-and-utilizing-cash-in-gbv-response>

To learn more about the roles and responsibilities of cash and GBV actors in mainstreaming GBV considerations in CBIs and utilising cash within GBV response see also WRC's video at <https://www.youtube.com/watch?v=S9RYLGMjCUI&feature=youtu.be>

- Incorporate GBV prevention and mitigation strategies into SOP's, guidelines, personal

Learning in action:

International Rescue Committee in Jordan learned that when lack of financial resources and economic opportunities for refugees in the urban context are the main cause of GBV against women and girls, cash can be an appropriate modality to respond to and mitigate the risks of GBV. Moreover, combining unconditional cash transfers with appropriate services, rather than distributing cash alone, can result in a decrease of GBV, and thus cash can have a protection outcome. The programme found out that cash paired with recipients' participation in gender discussion groups (GDGs) and psychosocial services offer a more sustainable protection impact beyond the duration of cash transfer.

Lynn Yoshikawa, "Integrating cash transfers into Gender-based Violence programs in Jordan: benefits, risks and challenges", UNHCR, IRC (November 2015), pp. 5-6, accessed at <http://www.cashlearning.org/downloads/erc-irc-action-research-web.pdf>

Beneficiary perception surveys can be a good way to prod motivations and causes of GBV prior to deciding on suitability of CBI as a response and risk mitigation option. For instance, in Afghanistan, a study among internally displaced persons living in informal settlements in Kabul, identified economic factors, such as unemployment, food shortages and drug addiction, as main drivers of household violence and a source of intra-household tension. This data was used to inform IRC's future programming.

"The impact of cash transfer programmes on protection outcomes in Afghanistan", UNHCR, NRC, Samuel Hall (December 2015), pp. 20-22, accessed at <http://samuelhall.org/wp-content/uploads/2016/02/ERC-NRC-Action-Research-Afghanistan.pdf>

data protection and other CBI tools.

MARKET ANALYSIS

- Consider safe and equitable access to markets, ie freedom of movement for all ADG groups, distance, market operation time ('working hours', seasons), availability and quality of services, ie health services, social services, cost of transport to access relevant services, etc.
- Include questions on women's and girls' role in the economy, including labour, household economy, women's roles in private and public spaces, and what risks may arise related to attempts at changing these roles.
- Consider market types and capacity, ie availability and quality of products, goods and services relevant to GBV. Identify GBV-related market systems for goods and services necessary for your programme, ie hygiene items, medicines, food, health and education services, legal and para-legal services, transport, communication and their cost, access, availability, adequacy, quality.
- Assess/monitor if items distributed in-kind by organisations and/or government are being sold in the local market.
- Summarise market assessment findings and determine the amount of cash that should be transferred to cover goods, services, labour, transport, etc.

IMPLEMENT

- Communicate about project details (objectives, expected outcome, cash transfer modality, delivery mechanisms, frequency and timeframe) in ways that can be easily understood by different AGD groups.
- Involve women and at-risk groups as staff and leaders in the delivery of CBI with due caution where this poses a potential safety and security risk to women or increases the risk of GBV.
- Offer beneficiaries a choice in selecting CBI modalities and consider multiple delivery mechanisms to be used for cases at risk of GBV.

Learning in action:

CBI's, like any humanitarian assistance require tailor-made approach, adapted to the local context.

In December 2017 in Loutété, DR Congo, displaced women were able to purchase 'dignity kits' provided by UNFPA. "People are able to buy any combination of items that include sanitary pads, soap, buckets, undergarments, skin cream, combs or clothing, using the same mobile money account" set up by World Food Programme (WFP) to buy food. "Women already receiving food through mobile money transfers would be eligible for the dignity kits—all it would take was a top-up to their phones to cover the cost of the additional items."

"Cash for dignity: putting women first. WFP and UNFPA assist displaced women and girls in the Republic of the Congo", accessed at <https://insight.wfp.org/cash-for-dignity-putting-women-first-ed09bb601d58>

In Northern Iraq, Norwegian Refugee Council and UNFPA learned that displaced women prefer dignity kits to be distributed in-kind over receiving CBI to purchase kits themselves. They reported that they did not feel safe traveling between camps and the shops, and getting a male companion to visit shops was not always easy. Dignity kits women received were customising to their needs and preferences in terms of type, size and colour, and they liked what they received. Moreover, putting family needs above their own, these women doubted that they would have spent cash on personal items for themselves, such as underwear or items of personal hygiene. Finally, they considered the community centers, where dignity kits were distributed, as trusted and safe spaces, where they could access additional support. NRC learned that investing in understanding perceptions of displaced women and the risks they face as well as giving them choice and respecting their preferences may have helped mitigating potential protection risks, related to safety and dignity of displaced women.

GPC Good Practices and Lessons Learned Workshop on Protection in Cash-based Interventions, Gaziantep, Turkey. 16 November 2016

- Tailor cash transfers to mitigate any associated risks of GBV and for those at risk of GBV as per varying needs.
- Engage men and boys as supportive partners through workshops and discussions on gender issues and implementing strategies.
- Assign a CBI focal point to regularly liaise with GBV service providers and support the delivery and monitoring of cash to particularly vulnerable individuals.

Learning in action:

Cash transfer programme might reduce protection risks even when not specifically designed to do so (ie had only food consumption and nutrition-related objectives) as found by the independent study of WFP's cash, food and food voucher programme combined with nutrition training among Columbian refugees and marginalised host community in Northern Ecuador. The study showed that cash and in-kind transfers reduced physical or sexual violence against women by 30 per cent by "decreasing stress and conflict, improving household well-being, and enhancing women's decision making, self-confidence and freedom of movement" (see violence reduction pathways flowchart at p. 7). The study highlights that "the positive effects observed in this study seem to depend on circumstances that may not exist in all settings or programmes, such as the inclusion of a training component".

Buller A. M. et al, "The way to a man's heart is through his stomach?: a mixed methods study on causal mechanisms through which cash and in-kind food transfers decreased intimate partner violence", BMC Public Health 16 (2016), accessed at <https://bmcpublichealth.biomedcentral.com/track/pdf/10.1186/s12889-016-3129-3?site=bmcpublichealth.biomedcentral.com>

MONITORING, EVALUATION, LEARNING

- Develop monitoring and evaluation systems that collect data disaggregated by sex, age, disability and other relevant vulnerability factors, tracking adaptive and risky coping mechanisms related to GBV and not limited to economic vulnerability.
- Analyse data regularly to measure GBV risk reduction and the effectiveness of mitigation mechanisms throughout programme cycle.
- Integrate qualitative methods of data collection within quantitative methods, ie post-distribution monitoring.
- Utilise GBV reporting mechanism(s) that are appropriate to the context, ie was designed with inputs of AGD groups.
- Monitor GBV risks, vulnerabilities, risk reduction capacities as they may change

over time. Be attentive to these changes and remain flexible to adapt implementation accordingly.

- Capture learning as you go – document positive and negative consequences and consider how these lessons can be used by your organisation and others to inform future programming.

Learning in action:

International Rescue Committee in its resilience building against GBV programme in Jordan learned that "post-distribution monitoring (PDM) and assessment indicators should be clearly linked to the factors which make women and girls vulnerable. One major challenge to this has been the program silos across two program units. As cash is a tool to strengthen protection of women and girls as a temporary measure, the development and management of the criteria and monitoring should continue to be heavily informed by specialized women's protection staff."

Lynn Yoshikawa, "Integrating cash transfers into Gender-based Violence programs in Jordan: benefits, risks and challenges", UNHCR, IRC (November 2015), p. 26, accessed at <http://www.cashlearning.org/downloads/erc-irc-action-research-web.pdf>

- Do not leave any complaints and feedback unaddressed.

SELECTED RESOURCES ON CBI AND GBV

- Women's Refugee Commission (WRC) Toolkit for optimizing cash-based interventions for protection from GBV: mainstreaming GBV considerations in CBIs and utilizing cash within GBV response (2018), accessed at <https://www.womensrefugeecommission.org/component/zdocs/document?id=1549-mainstreaming-gbv-considerations-in-cbis-and-utilizing-cash-in-gbv-response>
- WRC, Integrating Protection/GBV Mitigation into Livelihood Programs checklist, accessed at https://www.womensrefugeecommission.org/joomlatools-files/docman-files/integrating_protection_checklist.pdf

- Buller A.M. et al, “A mixed-method review of cash transfers and intimate partner violence in low and middle-income countries”, Unicef, Office of Research Innocenti working paper (February 2018), accessed at https://www.unicef-irc.org/publications/pdf/CT%20%20IPV_Review_Innocenti%20WP%202018-02.pdf
- Hagen-Zanker J. et al, “The impact of cash transfers on women and girls. A summary of the evidence”, ODI briefing (March 2017), accessed at <https://www.odi.org/sites/odi.org.uk/files/resource-documents/11374.pdf>
- IASC, The Gender Handbook for Humanitarian Action (2017), Cash-Based Interventions chapter, pp. 94-117, accessed at https://reliefweb.int/sites/reliefweb.int/files/resources/iasc_gender_handbook_2017.pdf
- Buller A. M. et al, “The way to a man’s heart is through his stomach?: a mixed methods study on causal mechanisms through which cash and in-kind food transfers decreased intimate partner violence”, *BMC Public Health* 16 (2016), accessed at <https://bmcpublikealth.biomedcentral.com/track/pdf/10.1186/s12889-016-3129-3?site=bmcpublikealth.biomedcentral.com>
- WRC UNHCR, Guide for protection in Cash-Based Interventions (2016), accessed at <https://www.womensrefugeecommission.org/empower/resources/1280-protection-in-cash-based-interventions>
- Lynn Yoshikawa, “Integrating cash transfers into Gender-based Violence programs in Jordan: benefits, risks and challenges”, UNHCR, IRC (November 2015), accessed at <http://www.cashlearning.org/downloads/erc-irc-action-research-web.pdf>
- “The impact of cash transfer programmes on protection outcomes in Afghanistan”, UNHCR, NRC, Samuel Hall (December 2015), accessed at <http://samuelhall.org/wp-content/uploads/2016/02/ERC-NRC-Action-Research-Afghanistan.pdf>
- Bell E., “Violence against women and cash transfers in humanitarian contexts”, DfID (24 February 2015), accessed at <https://reliefweb.int/sites/reliefweb.int/files/resources/cash-transfers-humanitarian-settings.pdf>
- IASC Guidelines for integrating gender-based violence interventions in humanitarian action. Reducing risk, promoting resilience and aiding recovery (2015), accessed at https://gbvguidelines.org/wp/wp-content/uploads/2015/09/2015-IASC-Gender-based-Violence-Guidelines_lo-res.pdf
- Gender equality and cash transfer programmes in crisis, IASC guidance on Gender Equality and Cash Transfer Programmes (June 2015), accessed at https://www.humanitarianresponse.info/system/files/documents/files/guidance_on_ge_and_ctps_june_2015.pdf

SELECTED RESOURCES ON CBI IN GENERAL

- The Cash Learning Partnership (CaLP), accessed at www.cashlearning.org
- CaLP CaLP Glossary of Cash Transfer Programming (CTP) Terminology (October 2017), accessed at <http://www.cashlearning.org/resources/glossary>
- CaLP Cash-Based Assistance - Programme Quality Toolbox, accessed at <http://www.cashlearning.org/resources/--pqtoolboxcashlearning-->
- CaLP Cash Toolboxes, accessed at <http://www.cashlearning.org/toolkits/toolkits>
- CaLP Tools for Implementation per project cycle, accessed at <http://www.cashlearning.org/resources/tools>
- CaLP video library and webinars, accessed at <http://www.cashlearning.org/resources/video-library>
- Regional and country-based Cash Working Groups, accessed at <http://www.cashlearning.org/where-we-work/where-we-work-overview>