

Potential of Cash and Voucher Assistance for Child Protection and Gender Equality

A summary of promising practices from Plan International Belgium programmes in Central African Republic, Rwanda, Uganda, Burkina Faso, and Niger



Contents

Acronyms	3
Executive Summary	4
Introduction	7
Methodology.....	8
Central African Republic.....	9
Rwanda	13
Uganda.....	15
Burkina Faso	19
Niger.....	24
Conclusions and recommendations	27

Acronyms

AGSS	Adolescent Girls' Safe Spaces
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BIA	Best Interest Assessment
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CAR	Central African Republic
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CBCPC	Community-Based Child Protection Committee (CBCPC)
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CP	Child Protection Programme
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CPIE	Child Protection in Emergencies
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CSO	Civil-Society Organisation
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CVA	Cash and Voucher Assistance
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GBV	Gender Based Violence
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IDP	Internally Displaced Person
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IGA	Income-Generating Activities
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INGO	International Non-Governmental Organisation
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IPV	Intimate Partner Violence
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IRC	International Red Cross
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MdM	Médecins du Monde
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MEB	Minimum Expenditure Basket
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MHM	Menstrual Hygiene Management
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NFI	Non-Food Items
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SGBV	Sexual and Gender-Based Violence
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SRHR	Sexual and Reproductive Health and Rights
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UASC	Unaccompanied Asylum-Seeking Children
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VSLA	Village Savings and Loan Association
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Executive Summary: Exploring the potential of cash and vouchers to protect children

This case study aims to reflect on the potential of Cash and Voucher Assistance (CVA) in promoting child protection and gender equality in humanitarian contexts. The results are consolidated from the Central African Republic (Berberati Region), Rwanda (6 Districts: Nyaruguru, Bugesera, Gatsibo, Nyagatare, Musanze, Rubavu, and Rusizi), Uganda (Yumbe, Adjumani Regions), Burkina Faso (Centre-Nord Region), and Niger (Tillaberi Region).

- Look at the potential of cash and voucher distribution to achieve protection outcomes

Key results by country

In the **Central African Republic (CAR)**, families and children reported an increased level of psychosocial well-being as a result of the programme package delivered as a whole. CVA was part of a package of protection services along with case-

Central African Republic	Rwanda	Uganda	Niger	Burkina Faso
<ul style="list-style-type: none"> • Protection as a direct outcome; CVA anchored in case management • Light conditionality • Target: foster care and reunified families of UASC • Amount: cash value of CPIE sector package for UASC • Cash in hand 	<ul style="list-style-type: none"> • Food security and resilience as a direct outcome • Unconditional cash transfers • Target: vulnerable households (Rwandan Ubudehe social protection system) • Amount: social net • Mobile money 	<ul style="list-style-type: none"> • Protection (including of SGBV) as a direct outcome; CVA anchored in case management • Unconditional cash transfers • Target: families hosting UASC and of adolescents at risk of violence • Amount: based on MEB • Mobile money 	<ul style="list-style-type: none"> • Protection (including of SGBV) as a direct outcome; CVA anchored in case management • Unconditional cash transfers and vouchers • Target: adolescents at risk of, or survivors of violence • Amount: based on MEB • Cash in hand 	<ul style="list-style-type: none"> • Protection (including of SGBV) and livelihood as outcomes • Unconditional cash transfers • Target: families of adolescents at risk of violence • Amount: based on MEB • Cash in hand

Research objectives and results by country

By documenting programme practices, Plan International Belgium seeks to:

- Gather best practices and lessons learned
- Understand what worked in the past Cash and Voucher Assistance interventions

management, psychosocial support, identification, documentation, and tracing and reunification. The package contributed to **strengthening household members' knowledge of child protection and positive parenting**, as attendance to parenting groups acted as a light conditionality. Cash transfer instalments contributed to **lowering the levels of stress and anxiety in households, giving members the peace of mind needed to provide children with a protective environment**. They were used

to pay for a wide range of urgently needed goods and services and to invest in income-generating activities.

In **Rwanda**, unconditional cash transfers were delivered through mobile money, embedded in the national social security system, so that both the vulnerability criteria and the amount of cash distributed were aligned with Rwandan schemes. Activities were complemented with awareness-raising campaigns and sensitisation on COVID-19 and protection risks.

In **Uganda**, cash and vouchers were distributed to parents and caregivers, as the national legislation prevents adolescent from directly receiving cash. Two modalities were designed at different times – one project prior to COVID-19 and one project specifically addressing COVID-19 related needs. **Cash assistance was assessed against gender equality outcomes**: it was identified as a key enabler for sexual and gender-based violence (SGBV) survivors to access services, for adolescent mothers to respond to immediate needs, and for girls to feel empowered and dignified to go back to school.

In **Burkina Faso**, cash transfers were closely **linked with the set-up of income-generating activities**. This was at the core of the project design, clearly focused on a nexus approach. Overall, the monitoring of the project paid attention to risks and safety of cash distributions, with girls and women regularly surveyed during programme implementation. 100% of respondents reported a positive change in their daily lives as a direct result of the assistance delivered.

In **Niger**, CVA was designed to respond to the needs of SGBV survivors, among other protection services. CVA had a direct impact on enabling survivors to seek assistance in an **empowered and dignified** way. In addition, transfers played an indirect role in contributing to family

well-being and were appreciated by all cash recipients. CVA was distributed in a safe way, as we draw conclusions from a number of **post-distribution monitoring tools** we rolled-out during the project implementation, making direct links between CVA and adoption of negative coping mechanisms.

Key learnings from the use of CVA for protection

Strategically, Plan International prioritises cash and voucher support in its humanitarian responses to rapidly respond to children and adolescents' basic needs and to specifically support girls to go back to school; to access livelihood opportunities; and to prevent and respond abuse including SGBV. Despite the variety of contexts, the programmes shared very similar experiences and common trends in reducing child protection risks, strategies of communication with communities, as well as on some of the immediate benefits. Additionally, **CVA can efficiently pave the way for family and community resilience**, either being an entry point for livelihood strategy, or by strengthening protective environments through stress reduction and improved well-being.

Cash and vouchers can be seen as the most efficient way to address humanitarian needs, but a **safe, accessible and harmonised CVA approach** requires a number of important prerequisites: contextualized tools, trained and diverse staff, accurate analysis, ongoing monitoring, preparedness, and coordination. A well-designed CVA, with thorough risk assessment, is essential to select the right modality and ensure all safeguarding and security needs are met.

On top of this, **community engagement**, support of community volunteers and facilitators, **good communication plans**, **collaboration with local authorities**, and **coordination with other actors** are key elements that need to go hand in hand with

the CVA intervention when it comes to overcoming challenges.

When well-designed, and embedded in a larger programme package, **CVA has a strong potential to be an effective and dignifying modality to empower girls, adolescent girls, and young women.** CVA was successful at achieving protection outcomes, to boost dignity, and ensure girls were empowered, but it is far from being sufficient. CVA alone will not influence, challenge, or question gender norms that negatively impact girls and women; but it is a means to empower and challenge them, or to promote new norms that are more protective.

Recommendations and future research

This case study identifies four essentials for the use of **CVA to achieve protection outcomes**:

- the need for a thorough age and gender responsive risk assessment;
- the integration of CVA as part of a larger programme package that aims at alleviating the barriers for girls' empowerment, including their access to quality, compassionate, and confidential protection services, such as adolescent girls safe spaces (AGSS);
- budget for and design of a participatory contextual and gender analysis;
- coordination with service providers and collaboration with local authorities.

This case study recognises **a number of limitations and encourages further research.** First, results provide mainly a short-term point of view; they should be complemented with case studies that give

attention to longer-term approaches, or that are able to capture change in the longer-term, months after programmes end. We also recognise that there is still significant work to be done to ensure that risks related to cash and vouchers distribution are mitigated, and approaches are adaptable and accessible throughout the cash and voucher support. This is due to the numerous external and security factors that influence protective outcomes, gender and social norms, and CVA methodologies and criteria. Finally, this case study does not aim to be comprehensive: Plan International country offices have distributed a total of 239 million euro in cash¹¹, most of this assistance being delivered in the form of multi-purpose cash transfers in the context of food insecurity. This is not the focus of this case study. Rather, we look at the potential of cash distribution for protection outcomes.

A key gap in this study is **examining the role of local and national organizations in designing, delivering, and monitoring CVA.** In line with the localisation Pledge for Change agenda, involving local CSOs in partnership with INGOs is essential, especially when targeting girls and young women. Women-led organizations and support groups offer valuable insights into gender norms, best practices, and advocacy, strengthening policies and services for girls, women, and diverse groups.

¹ Total cumulative portfolio as of December 2023. Global CVA Data, Plan International [Updated Global CVA Infographics 2023.pdf](#)

Why explore the impact of cash and vouchers on gender equality?

Gender refers to the socially constructed differences between females and males — and the relationships between and among them — throughout their life cycle. Gender, together with age group, sexual orientation and gender identity, and other diversity factors, determines roles, responsibilities, power, and access to resources. Plan International is exploring the various modalities through which gender equality is fostered and girls' empowerment is promoted.

There is a growing body of evidence, best practices, and recommendations on how CVA can contribute to promote gender equality and reduce or prevent GBV. Yet, there are still gaps on best approaches and tools, understanding of gender norms, and how they affect girls in humanitarian settings. There are also gaps in how CVA can have an impact that goes beyond individuals and households through spillovers at the community level.

Plan International's approach to child protection in emergencies includes the protection of girls and aims to reduce risks and barriers to access and participate in activities, and expand children and adolescent opportunities to thrive, with specific attention to girls mostly affected by humanitarian crises. Plan International recognises that without appropriate gender, child protection, and safeguarding analysis and risk mitigation measures, CVA may not have the impact or the desired effect and it can negatively affect gendered social-norms and increase the risk of gender and sexual based violence and child protection violations.

Understanding gendered social norms and risks of GBV against children and adolescents before distributing cash and vouchers should be considered in all programmes and its impact should be monitored and results improved continuously.

Introduction: How is Cash and Voucher Assistance used for protection outcomes?

Cash and Voucher Assistance (CVA), along with other modalities and other services, can address multi-sectoral needs and contribute to child protection outcomes in development and humanitarian settings. The applicability and use of CVA within child protection (CP) and sexual and gender-based violence (SGBV) in emergency programming is still to be fully understood and its gender transformative potential to be explored. Consequently, more research is needed to assess the impact of CVA on child protection outcomes, including on gender dynamics, and improve the quality of our child protection and cash integrated

change, proximity to conflicts, contexts of displacement, and decreased access to secure food are exacerbating economic

programmes in a short and long-term perspective.

Economic poverty, lack of livelihoods, and limited access to basic services remain part of the key drivers of child protection risks, often leading to harmful coping strategies, particularly during and after an emergency and within protracted crises. Families may reduce daily expenditures and opt to increase household income through child labour or child marriage. The deterioration of the protective environment and the worsening security context can also lead to sexual exploitation or forced recruitment. The disruptive effects of COVID-19, climate

vulnerability and can contribute to increased debt at the household level, depleting assets.

In our programmes, CVA for child protection outcomes aims to support children, adolescents, and their caregivers with cash or vouchers, in a participative way, to mitigate and address individual protection risks of children and adolescents, support capacities already in place, restore well-being in families and communities, and ensure access to basic and specialised child protection and SGBV services.

The CVA modalities in the child protection programme presented in this case study aim to contribute to the following CP outcomes:

- **Mitigating and preventing risk of abuse and violence against children and adolescents** including SGBV;
- **Supporting child protection outcomes through the use of CVA in case management:** strictly related to identification and best interest assessment (BIA) phases, where all protection risks are taken into analysis and where the CVA receiver is identified, and the case management action plan is set-up;
- **Supporting alternative care for Unaccompanied Asylum-**

Methodology

Guided by the central question, "**how does CVA, in its different modalities, contribute to protection outcomes?**", the analyses per country help fine-tune the design of cash and voucher modalities by highlighting common challenges and promising pathways for change. The data collection analysis was guided by the willingness to understand how different modalities and contexts impacted a wide range of protection outcomes – from the reduction of child protection risks, gender-based violence prevalence, girls' and young women's empowerment, to the

Seeking Children (UASC): related to identification of UASC and provision of support to foster families and unaccompanied and separated adolescents, as well as reunification and prevention of future separations;

- Reducing **child protection risks** through integrating **education and sexual and reproductive health and rights (SRHR):** CVA helps prevent risk of school drop-out for girls and boys and reintegration of girls and boys in school, as well as the provision of Menstrual Hygiene Management (MHM) materials and messages in school;
- Reducing **child protection risks** through integrating **livelihoods:** provision of CVA to girls and children at risk can contribute to access material support, to offset opportunity costs of risky coping strategies associated with vocational training, and to remove barriers to participation for adolescent girls and mothers, such as childcare or transportation fees.

strengthening of protective environments. Data in the Central African Republic and Rwanda was collected through various evaluation milestones and specific case studies. Data in Uganda, Burkina Faso, and Niger was collected through post-distribution monitoring activities, children and adolescents' surveys as well as staff surveys. The tools used to implement cash and voucher in child protection underpin existing case studies and tools available in Plan International and the Alliance for Child Protection in Humanitarian Action (The Alliance).

Central African Republic



Conditional cash to support the needs of unaccompanied and separated children

In 2018, in Western Central African Republic, Plan International implemented a cash transfer component, part of a comprehensive delivery of child protection services, to respond to the immediate needs of unaccompanied and separated children (UASC). Based on a child protection needs assessment, baseline data indicated that a high percentage of children were suffering from high levels of emotional stress. Most households were *'struggling to make ends meet'* or *'in destitution'* and unable to meet their basic needs. For example, many households ate only one meal a day with some households going days without adequate food due to ongoing insecurity and lack of resources.

To respond to these identified needs, the project provided a set of services to UASC, including case-management, psychosocial support, life skills training, and parenting sessions, along with the provision of conditional cash transfers. The conditionality was light and flexible on purpose. As cash transfers aimed at improving the overall well-being of children, the quality of foster care, and the resilience of families to separation (prevention of separation in the long run), the team designed criteria that could reflect child protection outcomes, including parents and caregivers' regular attendance to parenting sessions and implementation of a child's best interest assessment workplan.

Designing a modality that considers risk mitigation and child well-being, and remains realistic to monitor

The project aimed to support 800 UASC and improve the quality of foster care and the quality of reunification with biological families. Three important design features had to be considered. First, based on the

Berberati, Central African Republic

- 18 Months
- Funded by the DGD - Directorate-General for Development Cooperation and Humanitarian Aid
- Conditional cash transfer with a light conditionality
- Target: unaccompanied and separated children's families (fostercare and reunified)
- Part of a child protection package with direct CP outcomes



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legislation and set-up, the recipient of the cash modality had to be either reunified families or temporary foster parents of UASC while the process of family tracing was underway.

Second, **the amount of the cash transfer was based on the value of the non-food items kits delivered to the foster family** (48,000 FCFA) as no inter-agency CVA value was set for alternative care and family reunification, and no minimum expenditure basket value was discussed in the region. This allowed Plan International to compare the initial modality – provision of items through in-kind distribution – with a cash transfer modality.

Third, the conditionality criteria were designed to consider many risk mitigation aspects. During the project kick-off, the team had to assess the trade-off of unconditional versus conditional cash transfer. Unconditional cash transfers, because of the humanitarian contexts and dire conditions of households, would be a go-to option. However, evidence suggests that **foster care involving unconditional cash can increase the risk of exploitation, abuse, and neglect, as it creates financial incentives for families to host UASC.** On the other hand, **conditional cash transfers, with protection-oriented conditions, would encourage parents and caregivers to**

create a protective environment for UASC. At the same time, the main ethical question had to do with the procedures in case some criteria were not met, as the non-payment to the foster family would put children at higher risk of neglect.

Receiving cash was made conditional on attending parenting sessions, as this was a strong potential driver for positive change in behaviour of foster families. It is important to note that the timeframe of the project did not make it possible for the project team to effectively monitor the quality of the reunification. As a result, there is no evidence of the impact of the cash transfers on protection outcomes among reunified families. We then made sure that the follow-up of the 17 criteria was kept as an entry point for case workers to intensify the social work, particularly with families that are most at risk. This contributed in confirming that the interaction of close case-management and cash transfers was the key driver of well-being improvement, and that the conditionality criteria could act as a nudge. In time, the compliance with the criteria significantly increased, with 40% of families meeting the conditions during the first transfer and up to 80% on the third transfer.

Unpacking the black box of cash transfers: enhanced parenting practices, quality of care, and overall well-being in the household

Plan International led qualitative assessments of the approach to unpack the mechanisms through which cash transfers would contribute to the improvement of key child protection outcomes. The series of three cash payments, combined with the comprehensive package of psychosocial support services, life skills activities, referrals and sensitisation sessions on

positive parenting, case management, prevention of separation, and income generation, were associated with improved child and adult-level outcomes. **The impact evaluation report² confirmed that self-reported child well-being improved over time as did household resiliency and caregiver knowledge and practice of positive parenting strategies.** Overall, more than 50% of children reported a decreased score for depression and anxiety (using the adapted Hopkins Symptoms Checklist³). Both children and caregivers demonstrated an increased knowledge of prevention of family separation strategies, as well.

Cash played a central role in the quality of the foster care and prevention of neglect, exploitation, and abuse. During group discussions, children and caregivers indicated that the child protection trainings, awareness raising, and monitoring were perceived to improve the way parents managed children and adolescents in the household. A teenage girl from Berberati said: *"Before, my host family did not treat me well, but after the training we received from Plan, I noticed a big change in the family."*⁴ This impact was driven, according to other group discussions⁵ by two complementary pathways of change. First, close social work, including referral to relevant services and the creation of a safe space within which children felt at ease to raise issues, contributed to increase the overall feeling of safety of children. The organisation of positive parenting sessions led to improved knowledge, positive attitudes, and protective practices. This was associated with the positive impact of the conditionality, with which families were increasingly compliant. Caregivers were informed of the cash conditions in advance and were followed-up with whenever the compliance to criteria was too low. A

² Insight Impact Consulting, Plan International. *Monetary Transfer, Child Protection and Digital Data Analysis: Final Evaluation Report*, February 2020.

³ Harvard Program in Refugee Trauma. Hopkins Symptom Checklist (HSCL), [https://hprt-](https://hprt-cambridge.org/screening/hopkins-symptom-checklist)

[cambridge.org/screening/hopkins-symptom-checklist](https://hprt-cambridge.org/screening/hopkins-symptom-checklist)

⁴ Plan International, Women Refugee Committee

⁵ Plan International, Insight Impact Consulting

second pathway had to do with the cash transfers themselves. Families reported that the amount and frequency of cash gave them the '*peace of mind*' needed to provide a protective environment. Cash instalments were used to pay for immediate medical expenses, quality food, as well as second-tier essential goods, school fees, and to invest in income-generating activities (IGAs). This contributed to increase the physical well-being of both the UASC, other children in the household, and caregivers, as well as improving overall mental health outcomes by decreasing stress.

The evaluation highlighted that it is essential to have clear and repeated communication regarding the modality, the conditionality, and the duration of cash transfers. However, **the main caveat of the intervention is its gender-neutral design and lack of attention to diversity**

and inclusion. A potential shortcoming was not looking at the specific protection risks of adolescent girls (attention to domestic work, child marriage, sexual exploitation), lack of trainings of social workers on harmful practices, and gender-based violence. Sensitisation and parenting sessions could have included modules on menstrual hygiene management, SRHR, GBV, and gender equality. Although some participants reported positive impacts on women economic empowerment, with responses reflecting the positive effect the cash transfers could have for women such as financial independence, increased purchasing power, and an elevated role within the extended family, the evaluation did not seek to look for specific pathways of change regarding girls' well-being.

Rwanda



Mainstreaming child protection into cash delivery mechanisms: decreasing child marriage

In mid-2020, Plan International delivered a **three-month cash programme to 8,356 Rwandan families that were the most affected by the pandemic** to meet their basic needs, particularly in terms of food. In a context of high prevalence of COVID-19 at the very beginning of the pandemic, it was necessary to focus on mobile delivery of cash. The vulnerability criteria were based on the Ubudehe programme set-up of vulnerability criteria, in close partnership with Rwandan authorities, allowing the short-term programme to be embedded in the broader social protection system, and to complement the government-led social security scheme. The programme successfully addressed the needs of the most vulnerable families as it achieved its primary objective of reducing food security risks due to income loss. 80% of cash recipients reported that food was the top expense, followed by medical expenses (40%), livestock (30%), and agricultural inputs (20%).

The modality also had a positive impact on protection risks, as **despite the worsening environment, the project contributed to decrease the adoption of all negative coping mechanisms**. Child labour decreased, from 13.1% to 9.5%, between the first and second money transfers. Only 1.6% of cash recipients had to reduce expenses on education after the transfers compared to 4.3% before. It is also suggested that because food risks were successfully reduced, the practice to send a household member to eat elsewhere was reduced from 19% to 9%, thus maintaining family cohesion.

Nyaruguru, Gatsibo and Gakenke districts, Rwanda

- 36 Months
- Funded by the European Union
- Unconditional cash transfers
- Target: vulnerable households (Rwandan Ubudehe social protection system)
- Amount: social net
- Mobile money



Funded by
European Union
Humanitarian Aid

On top of a strong focus on nutrition and food security, **the programme paid attention to mainstreaming protection and prevention of SGBV, and to design gender and age-responsive activities**. Activities to mainstream protection included a comprehensive staff training on child protection, SGBV, and safeguarding issues, as well as integrating protection messages in the information, education, and communication materials that were initially limited to health-related messages on COVID-19 prevention. The teams decided to closely follow-up **the extent to which women had control over the cash received**. The results were positive, as 83% of household heads reported that women were involved in decisions on how cash would be used – with an increase over time throughout the project implementation from 82% to 85% of respondents between surveys. Simultaneously, 98.7% of cash recipients reported that having received cash did not cause any conflict within the households.



Uganda

Cash for case management: Unconditional cash to support UASC, children, and adolescents at risk

In Yumbe, as part of the case management process, **905 UASC and other children at risk, and their caregivers**, received support in the form of CVA in 12 months through 3 cash and voucher instalments. As part of the case management process, individual response plans were developed to facilitate access to protection services, strengthen self-worth and dignity, reduce adoption of negative coping strategies, and limit child protection risks. As the national legislation prevents children and adolescents to directly receive cash from INGOs, parents, caregivers, foster families, or other adults were appointed by the case worker to receive cash support. This intervention both engaged children and adolescents from refugee settings as well as hosting communities. After consultations with parents, adolescents, and foster families to determine the safest delivery mechanisms, mobile cash and cash-in-hand were defined as the most appropriate form of support given the risk analysis, individual preferences, and the lack of cash available at financial institutions during the pandemic.

In addition to economic outcomes, **cash also contributed to improve family relationships**. Unaccompanied and separated children reported that caregivers tend to prioritise biological children when it comes to food, non-food items, and access to school. This has led these households to be closely monitored by the case management team after the CVA distribution. **After the distribution, foster children have reported that their position in the household has improved as a consequence of cash support.**

In Adjumani, the team supported **150 foster families** with multipurpose cash assistance: a one-off cash distribution of 180,000 UGX to address basic needs. The modality was adapted throughout the programmatic implementation from the initially planned mobile transfer to an

West Nile, Uganda

- Two programmes (2020-2023) both funded by the DGD - Directorate-General for Development Cooperation and Humanitarian Aid
- Unconditional transfers
- Target: families of adolescents at risk or survivors of violence, including UAS children and adolescents
- Part of a child protection package, with direct CP outcomes



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adapted mobile transfer and cash-in-hand. This adaptation was also contextual and linked to restrictions in money disbursement from financial institutions during COVID-19. In terms of security outcomes, a one-off instalment proved very safe as **99% of the caregivers and parents reported feeling safe**. Less than 1% of the project participants experienced threats as a result of the project interventions which resulted in a male partner using part of the CVA for personal use.

Cash for education: Reducing girls' school drop-out in refugee camps

A second cash assistance was dedicated to achieving education outcomes. The CVA cash modality supported 930 girls and adolescent girls who were at risk of dropping out or already out of school, experiencing or at risk of child marriage, and early pregnancies and domestic labour. Girls and adolescent girls from 5 to 18 years old at risk of school drop-out were identified by community-based child protection committees (CBCPCs) and community-volunteers. After consultation with caregivers and adolescent girls, cash-

in-hand was selected as the preferred delivery mechanism.

The project evaluation revealed that integrating CVA methodologies and materials distribution in child protection and education activities did contribute to reduce school drop-out, support school reintegration, and rapidly identify children at risk. Caregivers and adolescent head of households were able to use the cash to access basic items such as hygiene and sanitary products, cover education-related expenses, health care, clothing, and non-food items. **It resulted in an overall increase in school attendance, reduced protection risks, and minimised dropout rates as observed in the post-distribution monitoring activities.** It was reported that children and adolescents were more likely to be kept in school, particularly after schools reopened after the pandemic. For instance, families of children who could not afford the school fees were able to use the cash received to pay for school fees and other materials. But the gendered impact of the modalities came as a result of the interaction between increased resources for parents and caregivers and increased support to women teachers and specific curriculums to keep girls in schools. The factors that push girls out of school have to do with the lack of resources of families, the preference for educating boys over girls, and the quality of education – schools in Yumbe are often overcrowded and lack essential pedagogical materials. The project aimed at addressing both sides and was designed in a gender and age sensitive way, integrating, into school-kit support, hygiene kits for girls, and training for teachers to increase school accessibility and quality. As a result, **girls and caregivers reported that an increased engagement of senior women teachers contributed to increasing girls' retention in school and helped identify those in need of more support.**

A significant contribution to family and community resilience

The cash instalments were also **used in both locations by families to respond to immediate short-term needs but also to support self-organised income generating activities, which paves the way for longer-term economic resilience.** Families of children at risk supported through cash have reported to have used the money to respond to immediate needs and to buy animals and poultry, as well as materials to start-up small shops. Families knew exactly how to invest the money to increase the impact of cash and make it sustainable even though the cash instalments would end. They also reported to have actively looked for training activities to better support their capacities in investing and to support their families.

Although cash modality responds mostly to immediate needs, it is nonetheless a first step to strengthen economic resilience. In addition to cash for protection, 1,200 heads of households, out of which 77% were women, and cooperatives were supported with agricultural input (seeds and materials) to revive and/or strengthen subsistence activities. Because strengthening capacities to cope with economic shock is necessary to ensure resilience, livelihood trainings were conducted to strengthen their capacities in terms of agronomy, IGAs, and Village Savings and Loan Association (VSLAs).

The project was therefore able to link the protection component to the livelihood component as an empowering and long-term modality to support families. Parents and caregivers who joined the trainings were supported with resources to protect their families and start building their livelihood assets. This finding can contribute to the already well-reported **global evidence that cash transfer contributes to improve dignity**, and that in specific contexts **families autonomously activate positive coping mechanisms to define how to spend the money** and how to ensure they are invested in the medium-and long-run.



An enabler for SGBV survivors to access services: Caregivers & parents reported that cash support has enabled their children, especially girls, to access the services they needed. In fact, supporting children and adolescents through cash has contributed to improve girls' access to medical services through informing about the services available, providing transportation to health facilities and being able to pay for their treatments.

Targeting teenage mothers for specific support: Health service providers and case workers reported that they saw an increase of teenage mothers accessing medical services in clinics, including for pre-and post-natal care services thanks to the cash support. A young mother reported that she used the money to clear medical bills cumulated after delivery and to buy her baby clothes.

Cash as a preferred modality for girls' empowerment: The discussions with girls suggests that cash improved their ability to make choices, as cash allowed them to meet their immediate needs such as school uniforms, school bags, and school shoes. Cash is not only an instrumental way of increasing the quality of learning, but also provided girls with a sense of dignity when going to school.

Cash distributions, a women's business: 97% of the recipients were women.

Although we know who the recipients of cash were, our next post-distribution monitoring tools should also pay attention to the control over the resources – who in the household makes the decision about how it is spent.

CVA contributed to reduce child-labour:

“I was always worried thinking of where I am going to get the money for hospital and for other needs like my baby's clothes and soap. You know during postnatal care you need to wash all the time and change the baby's clothes, this kept me worried all the time but was solved by Plan Uganda cash program. With the money given to me, I was able to meet my most urgent needs.” – Programme participant

The use of cash for protection outcomes proved effective to reduce the vulnerability of children and adolescents. In Yumbe, parents and caregivers revealed that CVA directly contributed to the households' expenses and consequently decreased the need for relying on child labour. “The cash given to my family helped us to stop asking our children to go and work as we have now cash to buy basic materials,” said a participant in the focus group discussion of the project's final evaluation.



Burkina Faso

Cash and income-generating activities in a protracted crisis

Since August 2020, Burkina Faso has been experiencing an acute, complex, and volatile humanitarian crisis. The growing insecurity is leading to massive population displacement affecting mainly women and children, while the situation continues to deteriorate quickly. In only a couple of months, the conflict has spread across all regions, affecting populations in the whole country. In 2023, UNICEF estimated that 5.5 million people required humanitarian assistance in the country, including 3.2 million children. Their needs are many, but it should be noted that 1.3 million children are in need of protection services and 1.1 million children are in need of education support.⁶ The needs of children have been constantly increasing since the beginning of the crisis.

Although the situation is an acute crisis, with an increasing number of people in need, Burkina Faso has become a protracted crisis. In such a context, it is essential to develop actions along the resilience and humanitarian-development-peace nexus with multiple partners on the ground. This collaboration includes the Ministry of Education and the Ministry in charge of Humanitarian Aid, the *Action Sociale*, the Protection Cluster, and the local NGO AJPEE. Plan International developed a unique approach with our partner Search for Common Ground to engage youth and community leaders through a social cohesion strategy to address the needs of children, adolescents, and youth all along the triple nexus.

Plan International's child protection strategy promotes continuous protection for children and girls in communities and schools, with a special focus on unaccompanied children and adolescent girls. From the design stage of this project,

⁶ [Humanitarian Action for Children](#), Burkina Faso, 2023.

Sahel & Centre-Nord, Burkina Faso

- 18 months
- Multi-purpose & unconditional cash distribution
- Protection of UASC placed in temporary foster families
- IDP women and girls
- Cash to startup IGAs



Belgium
partner in development

we paid attention to making the projects gender and age responsive. We integrated a cash and voucher assistance approach to link the protection response with the longer-term strategy of creating resilient, economically sustainable environments for young women to thrive and be empowered. As part of this strategy, Child Protection in Emergencies (CPIE) programmes include cash and voucher assistance to foster families, support to adolescents at risk through mobile cash transfer, or vouchers with a specific focus on adolescent girls. Information on the impact of cash and voucher assistance was collected through post-distribution monitoring activities.

Supporting the long-term resilience of adolescent girls and young women in the three regions most affected by the crisis

Cash and vouchers were used to promote women and girls' empowerment.

In Burkina Faso, CVA was used in various interventions. One intervention in the Sahel and the Centre-Nord of the country involved multi-purpose, unconditional cash distribution for the protection of UASC placed in temporary foster families to meet their urgent needs as well as to strengthen their long-term resilience. Participants were selected based on the following vulnerability criteria: Internally Displaced People (IDP), women and girls in

vulnerable situations; women and girls who attend activities in the project's women's safe spaces; a SGBV survivor or a woman at risk of SGBV; a woman or girl not having received start-up fund support for income generating activities (IGA) nor non-food item (NFI) kit support. A total of 50 women were able to receive the cash distribution and 86% of them claimed, in the satisfaction survey, that the general safety of their child(ren) or the children of other households is better than before they received the cash. Beyond the response to immediate needs, a few participants were able to create a small project to generate income to sustain themselves. "A few women were able to start a small business with the cash transfer received," said a participant in the focus group discussion of the project's final evaluation.

The second intervention in the East, the Sahel, and Centre-Nord of the country involved cash distribution for the start-up of an IGA and targeted 650 out-of-school girls and women aged 17-49 years old at risk or survivors of SGBV. Participants were identified through activities in adolescent girls' safe spaces, women were identified by other service providers or through community-based protection mechanisms. At the initial identification steps, they were asked to confirm their willingness to join the groups that would benefit from the IGAs, and then access the IGA trainings and material support. The training was composed of 8 sessions around understanding a wide variety of subjects: the benefits of IGAs, the different types of IGAs, the feasibility assessments and potential profit, the legal framework, and administrative issues. They also participated in sessions on the basics of financial literacy, basics of business planning, and savings. The IGA sessions were accompanied by information

sessions on protection, health, and other services available to women and girls. The goal was to examine economic empowerment comprehensively, ensuring that participants would also become aware of other barriers that hinder their success.

Income-generating activities resulted in a contrasting satisfaction level among the participants. 55% of adolescent girls and young women who were supported with IGAs were very satisfied with the IGA activity six months after the training, but 5% of them reported they were not very satisfied. This is linked with the important variance of profits made – most of the profits made varied from 10,000 to 50,000 FCFA (15€ - 77€) out of an initial deposit of 100,000 FCFA (153€).

Currently, any form of cash and voucher support provided by NGOs and INGOs in Burkina Faso is suspended by the Government, particularly in the Sahel region where the worrying security situation casts doubts on CVA and IGA as a safe modality. We still consider it essential to recognise potential risks linked with challenging contexts and reflect on results that can support any advocacy effort to re-

Testimony from a programme participant

"When we arrived, my situation was very difficult, preventing me from carrying out an IGA. Thus, I was walking in the houses for domestic work. But with the support for the realization of the IGA, I started selling cakes which allowed me to make small savings (savings). After two months in this activity, the prices of inputs (flour, oil and wood) increased, which did not allow me to make any profit. So I took the savings I had obtained to buy a donkey and arrange a cart to start selling water. I was contacted to deliver water for the construction of a school behind our house. I can deliver 20 to 25 barrels of water per day, which allowed me to make tontine with other women; the savings of the tontine allowed me to buy two sheep. Currently with my activity, I can take care of my children, provide for my needs and satisfy the food needs of my family. This help has relieved me a lot so I will not know how to thank you."

establish qualitative and accountable cash and voucher support during the crisis onset in Burkina Faso.

Cash transfers and violence: risks and safety

Evidence from the literature is mixed regarding the impact of cash transfers on the individual experience of violence.⁷

Studies tend to focus on the sole outcome of intimate partner violence (IPV), while little is known about other types of violence that can arise in humanitarian contexts (e.g., sexual violence, sexual exploitation). Regarding intimate partner violence, meta evaluations suggest that there is little evidence that cash transfers lead to an increase in IPV, although some studies keep suggesting otherwise.

Overall, **the design of projects is what matters the most** to ensure CVA does not exacerbate existing violence or lead to new forms of violence. Our hypotheses, at the project design stage, is that the following factors would act as safeguarding mechanisms to prevent violence from increasing: (i) complementing CVA with close social work, communicating at large within the community on the modalities and frequency; (ii) delivering complementary actions linked to empowerment and gender equality; (iii) sensitising communities to existing referral and response mechanisms; (iv) systematically asking questions on safety in post-distribution monitoring surveys. A prerequisite should always be to conduct a participatory risk assessment that is gender and age responsive and explores power

dynamics and focuses on the accessibility, inclusiveness, and quality of formal and informal protection service providers.

How do we assess the safety of distributions? Insights from interviews with girls and women

Women and girls, as direct cash recipients or as individuals benefitting from a cash and voucher transfer, have played an active role in the project preparation, implementation, and evaluation. They have been engaged in the preparation phase, at the needs and risks assessments step, and at the very beginning of the action. The main insights at the initial phase of the action are to have a qualitative and contextual child protection and GBV risk analysis to understand risks, power dynamics, and negative coping mechanisms that affect girls and women, particularly after displacement. The objective is to assess precisely the context, and identify risks linked to the distribution of cash in order to not increase the likelihood that harmful practices and violence occur as a consequence of the distribution.

"Since I have had the support, I live in peace with my mother. (...). She no longer complains and now takes care of my son when I am not there. I can now pay for the food and water to support my mother, myself and my son" – Programme participant

Cash recipients were then interviewed to share their views on cash and voucher support as well as IGA through a post-distribution monitoring survey. Plan International considered the gender and power dynamics and decided that **interviews would be conducted by women staff**. As a result, the case study relies on interviews with 107 girls and women, with the objective to report on accountability and compliance as well as to ensure that future cash and voucher support interventions can contribute to

⁷ Plan International, [Cash and Voucher Assistance for Adolescents. An Evidence review of how cash and](#)

[voucher assistance can achieve outcomes for adolescents in humanitarian settings](#). 2020

promote a better protective environment for girls and women. Our analysis confirmed the overall satisfaction of girls and women surveyed: **cash distributions contributed to improve the feeling of safety for women and girls, but we did not take it for granted and we were right to assess safety regularly to account for any changes throughout the implementation.**

- 1** We first paid attention to the feeling of safety related to cash distributions. The first survey revealed that 11% felt afraid at some point, even if there were no specific risks or incidents. Fear was related to the capacity to manage the money, having the amount confiscated in part or entirely by the partner, lack of discretion, and fear of arousing jealousy within the community. This led the team to an essential and in-depth reflection on how to improve the communication and the preparatory steps before any further distribution.
- 2** We then paid attention to the evolution of the feeling of safety: 100% of the women interviewed reported no risk of harm and feeling safe after the distribution. 7 women reported a reduction in the risk of conflict with their husbands, 10 women reported seeking some form of savings for the money received either at the bank, with a family member, or by keeping it in the mobile wallet.
- 3** We finally explored the protection outcomes, trying to understand what the impact of cash distributions and IGA activities on protection had been. In Burkina Faso, 93% of respondents reported that their general safety and the ones of their children has improved since the cash distribution. 99% reported that they did not experience any conflict within the household (106 respondents out of 107) after receiving the IGA training and the starting pocket-money, with 1 woman declaring a conflict situation. 100% of women and girls interviewed have reported a positive change in their daily life as a result of cash and voucher assistance and their participation in IGA activities. They claim that they have improved their financial autonomy, that the activity brings direct benefits to the whole family, that they feel proud of what they do, and that they are relieved and supported. Recipients of cash confirm that the transfers provide 'peace of mind' and indirectly impact the quality of the intra-household relationships, as the case study in CAR suggested as well.

Niger



Cash and voucher assistance potential to prevent and respond to sexual and gender-based violence

Since 2021, Plan International has implemented an integrated approach to prevent and respond to child protection and SGBV, in partnership with Médecins du Monde, to strengthen protection mechanisms and access to basic care for populations affected by the humanitarian crisis. The focus is on accessing holistic, quality, and non-stigmatising care for children and adolescents affected by the humanitarian crisis, and as such, combines protection, health, and community resilience. Assistance includes voucher support for case management and for emergency support (accessing services within 72 hours), as part of a package of protection and medical services including child-friendly spaces, capacity building for service providers and main stakeholders, referral, and psychological first aid.

After careful consultation with adolescents and a risk assessment exercise, unconditional cash support was selected to rapidly address the needs of children and adolescents identified by case workers as needing SGBV support services. A total of 103 children and adolescents – including child survivors of SGBV – in need of urgent specialised medical services and other forms of support benefitted from cash assistance to access health services. In this case children, adolescents, and their families were also supported through essential non-food items chosen by the family.

A significant contribution to family well-being

Overall, monitoring data confirms that most of the cash recipients **did not report any conflict in the household because of cash and voucher distribution**. 86% reported that the cash or voucher support approach used was the most appropriate to restore family well-being. During the project

Tillabéri, Niger

- 11 Months
- Funded by the European Union
- Contributes to strengthen the protection & health resilience of communities affected by humanitarian crises
- Targeting a total of 31,779 participants including vulnerable host families IDPs and refugees
- In consortium with Médecins du Monde (MdM)



Funded by
European Union
Humanitarian Aid

implementation, we noted the exception of two unaccompanied adolescents who reported increased tension within their family after the distribution. In response to the reported tension, the case workers supported the family and the children to promote a positive attitude and behaviours, as well as positive parenting practices. In the follow-up phase, 100% of the children and adolescents interviewed reported having no conflict in the household.

Engaging continuously with the communities, families, children, and adolescents, and adapting methodologies and considering gender and inclusion during the project implementation, have been reported as essential elements of safety and quality programming to minimise risks and encourage family resilience. As a result, there has been increased trust towards the staff who faced several acceptance issues at the beginning of the project, and it has allowed for improvements in the second phase of implementation.

Monitoring data to boost engagement and feedback mechanisms

Since the beginning of the action, the cash modality was continuously fine-tuned, and communities reported being increasingly satisfied with the way cash was distributed. They were also increasingly satisfied with

the relevance of the assistance and the possibility to raise feedback and complaints. The project teams mobilised DG ECHO's Protection key objective indicator to assess how the services provided were delivered, with a strong attention to the cash and voucher assistance. After 18 months of project implementation, 82% of cash recipients reported that the assistance was delivered in a safe, accessible, responsible, and participatory way, compared to 61% after 12 months (Figure 3).

The project teams made significant progress regarding the satisfaction on the assistance and services delivered, and on the possibility to raise feedback and complaints. Recipients did not report any form of stigmatisation within the community as a consequence of cash distribution, which is a sign of a good preparation phase, regular community engagement, and effective communication. More generally, a good sense of satisfaction is reported by the families, who described well-respected confidentiality linked to an improved sense of security. They highlighted continuous support from case workers in mitigating family risks, compared to the insecurity of the area or other external factors.

Can cash contribute to decrease negative coping strategies within the household?

The post-distribution monitoring tools included additional questions on how cash and protection outcomes were linked. Cash recipients were asked to report whether a case of child marriage, a case of teenage

pregnancy, or a case of a child involved in child labour happened since the last cash distribution. The rationale is to assess whether negative coping mechanisms decrease since the introduction of cash transfers. **The data can suggest correlation between cash delivery and negative coping mechanisms.** We capture a positive correlation between child marriage and cash delivery, but a negative one between cash delivery and teenage pregnancies or child labour. Indeed, cash recipients have declared cases of early pregnancy and child labour outcomes between January and December

2022 (respectively 8 and 19 months after the project started). However, data from the project monitoring data cannot conclude as a causal effect between cash delivery and negative coping mechanisms (child labour, early pregnancy). The positive impact cash transfers have on child marriage should not be overlooked. In Niger, the child marriage rates remain high and it is strongly rooted in gendered social norms; child marriage rises in displacement communities. **In this case, cash seems to play a role in the prevention of child marriage, but we make the hypothesis that this is strongly linked to the work done in terms of prevention, within child-friendly spaces, positive parenting, and through community-based child protection mechanisms.** The suggestive evidence from the case in Niger is aligned with findings from systematic review of published literature that find encouraging results of cash transfer programming on the reduction on child marriage.

Conclusions and recommendations



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1. A flexible, adaptable, and integrated modality to achieve protection results

Cash and voucher assistance has the potential to significantly improve dignity of affected communities; it is an optimal methodology that allows a flexible response to immediate and basic needs of children and adolescents and to rapidly access services. While cash and voucher assistance can be flexible in terms of modality (cash, voucher, sometimes turned into in-kind if need be; mobile money, cash in hand), changing the value may be challenging in contexts with varying inflation.

More specifically, when cash and voucher assistance is used in case management, a case-by-case approach is essential: each child and each family will share peculiarities related to their community of origin, social and gender norms that impact their decision, the capacity they bring, and the vulnerabilities that affect them.

When protection is linked to CVA, through light conditionality, negative coping mechanisms decrease; child marriage is reduced, children's education and particularly girls' school retention rate is

increased, and the overall well-being of the family, including foster families, is improved. However, CVA does not need to focus directly on children to positively impact their well-being. The modality is flexible enough to be able to be integrated with food security, livelihoods, protection, education, nutrition, and health programming. A holistic approach addresses beneficiaries' needs more comprehensively, promotes better outcomes, and reduces the likelihood of resorting to negative coping mechanisms.

However, this requires well-trained case workers and supervisors, as well as flexibility and realistic targets against the staff capacity and the overall environment. For instance, the case work in a highly volatile environment, that aims to respond to IDP needs, will require a different staffing and logistic approach than a case work taking place in an accessible refugee camp. It is also critical for case workers to systematically conduct a risk assessment in the case management as it allows to ensure the security of children.

2. Empowering girls and women with cash distributions: what does it take?

CVA can have a tremendous impact on protecting children but also on empowering girls through various channels: facilitating access to education or in taking care of infants for adolescent mothers, increasing the feeling of safety within households for women, or ensuring SGBV survivors have access to the relevant services they need.

These pathways of change are linked with CVA. Now it is crucial to note that in these contexts, CVA was necessary to achieve some protection outcomes, precisely to boost dignity and ensure girls were empowered, but it is far from being sufficient. CVA is one aspect of a broader

protection package of services, that need to be designed in a gender-transformative way, that is looking at power imbalances, specific needs of girls, protective environments, and gender norms at work in the communities.

CVA alone will not influence, challenge, or question gender norms that negatively impact girls and women; however, it is a means to empower them to challenge themselves or promote new norms that are more protective. CVA alone cannot prevent or respond to SGBV; but when this modality is combined with social and economic empowering activities, specific school

reintegration objectives, and provision of kits and information sharing, CVA significantly contributes to helping girls ask for the support they need, feel a sense of self-esteem and dignity, and access information on their rights. CVA alone cannot prevent all negative coping mechanisms; but when families are able to

fulfil their immediate and basic needs to achieve 'peace of mind,' while simultaneously attending parenting sessions where girls receive information on their rights, health, and menstrual hygiene, the individual and collective well-being promotes protective behaviours.

3. Conditionality versus unconditionality: solving risk mitigation issues with foster care

Unconditional cash transfers as part of a protection project can be seen as a particularly risky modality, especially when cash is transferred to foster families. Evidence suggests that foster care involving unconditional cash can increase the risk of exploitation, abuse, and neglect, as it creates financial incentives for families to host UASC. **It can unintentionally create an incentive for parents and guardians to abandon the care of children to access the extra financial support. However, the case study suggests that conditional cash transfers should also be adopted very cautiously.** Although protection-oriented conditions for cash distribution would ensure that parents and caregivers create a protective environment for UASC, it poses other risks. What should case workers do with the procedures in case some criteria were not met, as the non-payment to the foster family would put children at higher risk of neglect?

This case study offers clear and pragmatic solutions that prove to be efficient to address both risks. Our projects opted for a **light conditionality to attend parenting sessions.** This acts as a nudge and encourages foster families to be accountable for the protective environment they offer. However, this modality is only possible when the CVA is designed within a larger framework of protection services, most importantly with a close, skilled, and supportive social workers.

Case workers can have a strategic role introducing positive parenting practices. Constant social work and monitoring can improve the family environment and positive parenting practices without need for specific CVA conditionalities beyond those already required of what foster families, such as attending parenting sessions and welcoming case workers' follow-up visits.

4. Safety, accessibility, and accountability: essentials to mitigate risks

Across all data available that allows us to have a cross-sectional analysis in time, we see that the feeling of safety and trust in cash distributions increases thanks to the work made by project teams: engagement with communities and regular communication on the frequency, value, and date of cash transfers. The security context can be particularly challenging to ensure that such communication is done

smoothly – access to communities can be affected, and changes in the disbursement plans can be necessary. Project teams must always pay attention to providing a communication as clear and predictable as possible, and reflect on regular post-distribution monitoring results.

Cash and voucher assistance can itself come with protection risks. To ensure that

these risks are properly identified and mitigated, it is essential to:

- Conduct child protection risk assessments at needs assessment baseline and case management stages, along with the market assessments.
- Explore, for each protection area and each suggested cash modality (cash in envelope, mobile money, etc.), (i) who would be the direct beneficiaries, (ii) what would be the potential benefits related to cash-based protection transfers, (iii) what would be the indirect impact on protective environment, (iv) what are the risks and (v) related risk mitigation to implement.
- At the case management level, it is also important to conduct a protection risk assessment to identify potential protection risks linked to CVA distribution. For instance, (i) is there a trusted caregiver and (ii) could the cash enhance the protection risks (especially if the distribution targets an adolescent head of household)?
- Have women staff on board to assess the feelings of safety and trust with cash recipients and to be allies within the communities to help identify and report incidents that could follow cash distribution in the village (while respecting confidentiality of cash recipients).
- Establish child- and adolescent-friendly feedback mechanisms and ensure they are connected to programmes using CVA.
- Set up a clear monitoring framework and methodology, ensure staff are duly trained, and implement simple and efficient reporting tools, such as comprehensive post-distribution monitoring surveys and regular application of accountability mechanisms to measure how CVA impacts protection outcomes.
- Regularly assess the feeling of safety, dignity, and access in cash distributions, as well as the comfort with which cash recipients feel they can easily raise feedback and complaints.
- Assess the effectiveness of risk mitigation measures.
- Set up action plans based on the monitoring data, targeting communication, child-friendly feedback mechanisms, feeling of safety, or accessibility.
- Explore the protection-related outcomes as part of the post-distribution monitoring surveys, such as the impact on negative coping mechanisms (child labour, sexual exploitation, child marriage), emotional and physical wellbeing, intra-household conflicts, control over money, and utilisation of cash within the household.
- Ensure that the protection staff and services are available in case of increased domestic violence and abuse.

6. Exit strategy: CVA can pave the way for family and community resilience and improved quality of care

CVA can foster a trickle-down effect when parents and caregivers decide to invest part of the cash received in self-organised IGAs to help respond to basic needs and rapidly access services and support.

Indeed, CVA distribution combined with psychosocial, peer support and case management contributes to alleviate stress levels within families. When families are able to respond to basic needs and access services, the adopting of negative coping mechanisms tends to decrease, school retention increases, and sexual exploitation is prevented. CVA seems to also indirectly benefit the quality of family relationships, foster families included, which in turn can create a protective environment for children.

Plan International and many actors are responding to the needs of an increasing number of communities affected by protracted humanitarian crises. It is essential to develop actions along the nexus that are based on needs and constraints, addressing the immediate needs of people who are displaced, refugees, or coming from vulnerable host communities, while also providing them with longer-term solutions in communities they plan to stay due to the security context. For humanitarian programmes that are along the nexus (more than 24 months long), for example, a clear youth and women economic empowerment strategy could include more specific activities: referral to training centres, link with micro-finance institutions, and investment in income-generating activities at a larger scale.

7. Essentials for a gender-responsive protection programme using CVA

Programmes working in CVA for child protection outcomes in emergencies are not different from other protection or multi-purpose cash transfer programmes, but their impact, relevance, and the gender-transformative potential they can have depends on essential steps in the design:

- **Thorough risks analysis** including the gender-specific risks, constraints, and capacities of direct or indirect recipients.
- **Embed CVA modalities in wider programme strategies** to enhance protection and material conditions for girls and women. This includes providing SGBV-responsive case management, adolescent girls' safe spaces, education, and protection services, as well as community-based protection mechanisms and

messages that are age- and gender-responsive.

- **Budget for and design a participatory contextual and gender analysis**, engaging with the population, particularly with children and adolescents to avoid perpetuating assumptions and harmful norms like child marriage and IPV. Plan International, Save the Children, IRC, and The Alliance offer child-friendly tools that should be adapted locally, with proper training for staff.
- **Coordination with service providers and collaboration with local authorities** is essential to understand CVA-related legislation and social protection frameworks, generating advocacy for at-risk groups and promoting sustainable approaches.



Plan International Belgium is an independent humanitarian and development organisation founded in 1983, which promotes children’s rights and equality for girls. We believe in the power and potential of every child. But this potential is often stifled by poverty, violence, exclusion and discrimination. And it is girls who are most affected. Together with children, young people, our supporters and partners, we strive to create a just world, tackling the root causes of the issues facing girls and all vulnerable children. In more than 80 countries, we defend the rights of girls, from birth to adulthood. So that every girl can feel safe. So that she can tell the world who she is and what she wants. So that she can fulfil her dreams. So that every girl can be free.

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Until every girl is free