A global commitment to scaling up safe, high-quality cash and voucher assistance for women, girls and other key populations

1/5 of all humanitarian aid is delivered through Cash and Voucher Assistance (CVA) globally¹, and the share continues to grow. In line with its 2021 commitments, UNFPA is scaling up the use of this transfer modality within its programming.

UNFPA has evidence from diverse settings that CVA can directly contribute to the Three Transformative Results UNFPA is committed to achieving by 2030: zero unmet need for contraception; zero preventable maternal deaths; and zero gender-based violence and harmful practices.

¹ Global Humanitarian Assistance Report 2021
UNFPA’s CVA programming and coordination in the Asia Pacific region

Globally and in the Asia Pacific region, UNFPA recognizes the benefits that CVA can bring to the people it serves.

**People-centered approach:**
Cash or vouchers can provide crucial support to key populations and specific vulnerable groups in a more flexible, tailored and discreet way than other types of assistance, for example by transfers through digital means and through varied retrieval locations. With cash, pregnant women, people living with HIV, youth and adolescents with specific needs, women and girls survivors or those at risk of Gender-based Violence (GBV), sex workers and other key populations that UNFPA serves, ultimately decide how to use the cash that they are given, in a true people-centered way.

**Dignity of choice:**
By offering more choice, CVA can not only be more inclusive than other forms of support but can also contribute to women and girls’ empowerment, thereby positively impacting gender dynamics.

**Cost-efficiency:**
CVA can be a useful tool to ensure more efficient use of limited resources as it can be less costly than procuring in-kind goods during emergency responses.

**Across the nexus:**
CVA is an approach that can contribute to bridging humanitarian and development programming. CVA can naturally link to more sustainable exit strategies like governments’ social protection cash transfer programmes, which are well established in many countries in the region. To do so, UNFPA is looking to leverage its long-term presence and strong government partnerships in many countries.

In recent years, UNFPA has expanded the use of CVA and diversified the model and objectives of their CVA across a number of contexts, including to cover:

- the costs of transport and accommodation for women and key populations seeking Sexual and Reproductive Health Rights (SRHR) and GBV services
- life-saving emergency and recovery assistance for GBV survivors or women facing high risks of GBV
- the cost of emergency obstetric care
- the provision of cash or vouchers to incentivize antenatal care and facility-based deliveries
- the costs of basic dignity and hygiene-related items serving as entry point for GBV and SRHR information and services
- the cost of access to family planning services and contraceptives
Cash and vouchers as incentive for uptake of SRHR services:

In the Philippines, against the backdrop of exacerbated poverty and strong cultural birth practices, UNFPA encouraged pregnant women to access antenatal care, facility-based delivery and post-natal care through a cash incentive and by having each pregnant woman partner with a traditional birth attendant throughout the program.

- There was an increase in women attending a 1st antenatal care visit from 31% to 96% and 1st postnatal care visit from 38% to 87%, compared to the proportion of women using these services prior to the introduction of CVA in the programme in 2020.

In Bangladesh, UNFPA set up a fresh food voucher incentive to encourage an uptake of antenatal care visits and facility-based deliveries given the low rate of facility-based deliveries by women in refugee camps in Cox’s Bazar, which is linked to higher risk of maternal mortality.

- There was a 47% increase in antenatal care uptake by pregnant women in the third trimester and a 14% increase in facility-based delivery in 2019.

UNFPA is working with cash and voucher assistance in seven countries across the region to ensure that no one is left behind, particularly women and girls, working with local partners and authorities including women’s networks, health clinics, health workers and GBV case managers. Additional countries have already expressed interest in piloting the use of these modalities within their programmes in 2022.
In humanitarian settings

In the Philippines, UNFPA started providing cash assistance in its SRHR and GBV programmes in responses to the 2019 earthquake and armed conflicts, ensuring that pregnant women could access maternal health services as well as supporting the healing, access to services and coverage of basic needs of GBV survivors, women and girls at risk and people with mental health needs. This programming continued during the COVID-19 pandemic, and emergency cash assistance is now integrated into the rapid response to Super Typhoon Rai/Odette which struck the country on 16 December 2021.

CVA can also be used to support populations before predictable crises occur, based on triggers: Nepal, the Philippines and Bangladesh successfully included CVA as part of their anticipatory action project proposals in 2021. They focused on cash and vouchers for the provision of emergency medical care for pregnant women, for GBV awareness raising and for GBV survivors.

In Myanmar, UNFPA has built experience in using cash assistance to support key populations such as sex workers in urban areas during the COVID-19 pandemic. UNFPA has increasingly worked through local women-led organizations and has strengthened their capacity to deliver cash assistance. This innovative approach is far unique in the region for UNFPA cash assistance, and has the additional impact of strengthening the role of local actors who work very closely with affected communities.

In Afghanistan, as the lead of the GBV Area of Responsibility, UNFPA is working on GBV risk mitigation with cash actors at the inter-agency level to ensure that cash assistance takes into account access and privacy issues and does not create more harm.
In the “nexus” spanning across humanitarian and development work

In Bangladesh, in slums of the capital city Dhaka, UNFPA is providing adolescent girls with electronic vouchers via an innovative UN World Food Programme (WFP) blockchain app called “Building Blocks” for access to menstrual products in selected shops, through a burgeoning partnership with WFP. This voucher assistance started at the end of 2021 and is scheduled to last for at least nine months. UNFPA uses the service delivery of hygiene products as an entry point for awareness raising on topics and services related to GBV, SRH and COVID-19, including behavior change, showing how CVA for UNFPA is a key component of an integrated package of assistance.

In Indonesia, UNFPA has been responding to the needs of people living with HIV by providing cash assistance to cover the costs of transport to their antiretroviral treatment, aiming to increase the uptake of treatment. UNFPA is paving the way for improved inclusion in the Government’s social protection programmes by covering the gap of the national HIV social assistance programme through provision of cash assistance to those furthest left behind (those not covered by the national programme) and working with health officials at district level to replicate the modality of engagement.

In Pakistan, UNFPA has been providing technical assistance to the Government on a project for increased access to family planning for women beneficiaries of the Benazir Income Support Programme, a flagship Government social protection programme. UNFPA supported the set-up of a digital voucher management system with service providers to reimburse the cost of services and transport, thereby helping the Government strengthen its programme with enhanced access.

In the Philippines, cash is provided as part of a support package for adolescent girls staying in school whereby the assistance is conditional upon school attendance and aims to promote longer-term education.
Way forward

UNFPA is scaling up the use of CVA as an effective means to respond to its global mandate, in line with the UNFPA guidelines for CVA. As the country offices continue to expand the use of CVA with the support of the Asia Pacific Regional Office and the Humanitarian Office CVA team, there will be scope for new pilots and scale-up of ongoing projects, furthering the positive impact. UNFPA will also be exploring sustainability of its CVA for recovery and across the nexus with multi-year programming, looking at cash linkages to social protection in this region that has the second highest share of social assistance in the world. UNFPA will continue to expand on opportunities to replicate and scale existing partnerships in the region, such as the one with WFP to deliver blockchain-based electronic vouchers to women and girls in Bangladesh. In line with common harmonized approaches on cash and the commitment to build upon efficiencies in the humanitarian system, UNFPA delivers CVA through existing cash delivery systems.

Donor support has been critical in scaling up UNFPA’s innovative use of CVA to meet the needs of vulnerable women and girls. UNFPA looks forward to broadening its partnerships with donors, governments and humanitarian and development actors to deliver on our joint commitment of leaving no one behind, and reaching the furthest behind first.
Ensuring rights and choices for all since 1969

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