

Putting choice in the hands of women and girls: scaling up and consolidating safe high-quality cash and voucher assistance

The global volume of humanitarian Cash and Voucher Assistance (CVA) has increased for the sixth consecutive year and represents 1/5 of all humanitarian aid. In line with its organizational commitments, UNFPA continues to scale up the use of CVA in its programming to multiply the impact for women, girls and other individuals from key populations we serve.



Globally, US\$10 million was transferred to more than 180,000 women & girls in 20+ countries in 2022



In Asia Pacific, 84,000 women, girls, & key populations (47% of global recipients) were reached with US\$2.2 million in cash & voucher transfers



In Asia Pacific, 10 countries are active on CVA in 43 projects.



CVA is used across anticipatory action projects, sudden-onset emergency responses, and in nexus programming



CVA is delivered through mobile and bank transfers, directly in hands or through vouchers using blockchain technology



CVA is integrated in Gender-Based Violence (GBV) prevention and response and Sexual and Reproductive Health (SRH) programming, including family planning and provision of menstrual health and dignity items, to support women, girls and key populations (people living with HIV, sex workers, etc)



89% of UNFPA's CVA is provided without conditions. The conditional CVA is tied to ante and postnatal care visits as well as facility-based deliveries for pregnant women, and access to treatment and counseling for people living with HIV

"I was worried because I had to run during the eruption. I didn't even remember that I was still early in my pregnancy (when I was running). So I had to make sure that my baby was okay"

-Pregnant woman who received cash for access to antenatal care visits in Indonesia





"I am still fearful of what happened to me. I think about it every day. But now that I am less stressed about money, it comes back less strong"

-Cash recipient GBV survivor from the Philippines

"I feel secure and empowered that I have money in my hand for hospitalisation and safe delivery"

-Pregnant woman cash recipient in SRH programme in Myanmar





UNFPA recognizes that CVA can directly contribute to the **Three Transformative Results** it is committed to achieving by 2030: **zero unmet need for contraception**; **zero preventable maternal deaths**; **and zero gender-based violence and harmful practices**, and that it can bring benefits to the people it serves across the Asia Pacific region.

People-centered approach

CVA can provide crucial support in a **more flexible, tailored and discreet** way than other types of assistance. Pregnant women, people living with HIV, youth and adolescents with specific needs, women and girls survivors or at risk of GBV, sex workers, LGBTQI+ and other key populations that UNFPA serves decide how to use the cash transfers, in a truly people-centered way.

Dignity of choice

By offering more choice, CVA is not only more inclusive than other forms of support but can also contribute to **women and girls' empowerment**, 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.

Across the Nexus

CVA can contribute to **bridging humanitarian and development programming,** naturally linking to more sustainable exit strategies like governments' social protection cash transfer programmes.

UNFPA as the lead of the GBV Area of Responsibility developed the <u>Toolkit</u> for GBV risk mitigation in CVA that contributes to global evidence on the importance of doing no harm with cash interventions.

See separate country sheets for more implementation details on UNFPA's CVA.

BANGLADESH

Diversified portfolio of cash and voucher assistance in anticipatory action, emergency responses and in programming across the nexus

UNFPA provides adolescent girls with **digital vouchers via an innovative WFP blockchain app called "Building Blocks"** for access to menstrual products in their local shops, through a flagship nexus urban slum project implemented in two slums of Dhaka. UNFPA uses the service delivery of menstrual products as an entry point for awareness raising and behavior change on topics and services related to GBV, child marriage and SRH, demonstrating how CVA is a key component of an integrated package of assistance.

There is **no "one-size fits all"** when it comes to the deeply personal nature of menstruation. As women and girls prefer to meet their menstrual needs in a variety of different ways, flexibility was built in to allow women and adolescent girls to choose from a varied choice of menstrual products.



Bangladesh is also one of the first UNFPA country offices to have integrated CVA across multiple programmes:

- Cash assistance within SRH programming as an incentive for uptake of antenatal care, postnatal
 care, delivery in facilities and access to higher level of care in case of obstetric emergencies. In
 Cox's Bazar, monitoring highlighted that there was a 47% increase in antenatal care uptake by
 pregnant women in the third trimester and a 14% increase in facility-based delivery through this
 programme.
- During the 2022 flood response in the north-east part of the country, UNFPA's cash assistance
 was instrumental for vulnerable flood-affected pregnant women to reach medical facilities
 when facing an obstetric emergency and to meet the needs of women with protection concerns.

Additional readings:

- Article on https://asiapacific.unfpa.org/en/innovation-dhaka-blockchain
- Case study Vouchers for Fresh Food and Uptake of Sexual and Reproductive Health Services

INDONESIA

Cash assistance for key populations and in sudden-onset disaster responses

UNFPA Indonesia has been **responding to the needs of people living with HIV by providing cash assistance** to cover the costs of transport to access treatment and counseling. The cash assistance has been expanded and tailored to the needs of the different beneficiary profiles i.e. pregnant women living with HIV, youth living with HIV, and people living with HIV with a comorbidity like tuberculosis. It also paved the way for the integration of CVA in projects aiming to respond to the specific needs of adolescents and youth from key populations.

UNFPA is also contributing to improved inclusion of these groups in the Government's social protection programmes by covering the gap of the national HIV social assistance programme through the provision of cash assistance to those not covered by the national programme, and working with health officials at district level to replicate the modality of engagement.

In 2022, UNFPA Indonesia also used **cash assistance in disaster response, reaching both pregnant women and GBV survivors** with timely assistance to ensure that they have continued access to lifesaving services.



Additional readings:

- Case study <u>Cash Assistance for Female Sex Workers during the COVID-19 pandemic</u>
- Article on <u>Cash assistance helps make HIV services more equitable</u>
- Article on <u>Cash and voucher assistance improves maternal health in post-disaster areas</u>
- Upcoming in Q4 2023: Johns Hopkins University study on UNFPA Indonesia cash to GBV survivors

MYANMAR

Localized CVA through women-led organizations and civil society organizations



To overcome some of the operational hurdles caused by the political and economic upheaval in the wake of the February 2021 coup, UNFPA Myanmar increased partnerships with local womenled organizations and civil society organizations, strengthening their capacity to deliver cash assistance. This innovative approach is unique in the region for UNFPA's cash assistance, and has the additional impact of strengthening the role of local actors who work very closely with affected communities. This shift toward localization has become the core way of working in the country, and UNFPA now partners with 15 local organizations to deliver CVA across various programmes and objectives such as access to healthcare, support to GBV survivors, and other types of support to vulnerable women and girls.

To address period poverty in townships of Yangon, UNFPA Myanmar further expanded its CVA in 2022 with a **voucher pilot for the purchase of menstrual products in local shops.** The pilot illustrated that CVA for menstrual health and hygiene can be a successful option to provide access to menstrual supplies in a flexible, dignified, and efficient manner while also bolstering local markets. 2,400 women and adolescent girls have benefitted from this initiative to date.

Young girls who received the vouchers commented that thanks to the assistance, they were able to have "sufficient menstrual pads" and were also able to save a little money to "buy some stationery for school".

UNFPA Myanmar has also been using cash assistance to support sex workers in urban areas during the COVID-19 pandemic.

NEPAL

Cash for vulnerable women and adolescent girls in advance of disasters



CVA can be used to support vulnerable women and adolescent girls before predictable crises occur, based on triggers. For two years in a row, UNFPA Nepal included cash assistance as part of its anticipatory action project and will do so again in 2023.

For UNFPA Nepal, cash delivered in anticipation of seasonal monsoons serves to ensure sustained access to medical care and essential services for pregnant women and GBV survivors, for them to be able to take timely measures for their safety as a disaster is about to strike.

Developments in data and predictive analytics make it increasingly possible to anticipate when and where a disaster is about to strike and take necessary action in advance. In the first week of **October 2022, the trigger, linked to upcoming heavy floods, was activated in the Western part of Nepal.** UNFPA, in partnership with WFP, delivered the cash transfers to pregnant women and GBV survivors identified in the area.

The Philippines and Bangladesh are two other countries where UNFPA has recurrently planned cash as part of the collective anticipatory action facilitated by UN OCHA.

Additional reading: Anticipatory action and cash transfers for rapid-onset hazards: Practitioners' note for field testing

PHILIPPINES

Cash transfers to save lives and incentivize better practices

In the Philippines, UNFPA started providing cash assistance in its SRH and GBV programmes in responses to the 2019 earthquake and armed conflicts, ensuring that pregnant women can 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 was scaled up during the rapid response to Super Typhoon Rai/Odette which struck the country on 16 December 2021. In 2022 alone, UNFPA Philippines reached 7,400 recipients with CVA.

As part of the SRH programme, UNFPA provided a cash incentive and had pregnant women partner with a traditional birth attendant to encourage them to access antenatal care, facility-based delivery and postnatal care.

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 the cash assistance.

Additional readings:

- Case study <u>Cash for protection for survivors of GBV and women at risk of GBV.</u>
- Case study <u>Cash assistance to access sexual and reproductive health services and reduce maternal deaths.</u>
- Article on <u>Joy in the face of Adversity</u>
- Upcoming in Q1 2023: Johns Hopkins University study on UNFPA Philippines cash assistance to prevent maternal deaths.



SRILANKA

Cash assistance for pregnant women to access medical care and cover their specific hygiene and nutrition needs

The unprecedented economic crisis in Sri Lanka in 2022 resulted in a spike in the cost of living, and scarcity of food, medicine, fuel shortages and power which unequally affected women, girls and other marginalized groups. UNFPA Sri Lanka integrated cash assistance in the Sexual and Reproductive Health component of its emergency response.

UNFPA Sri Lanka provided cash assistance to 51,700 pregnant women through a key partnership with the UN World Food Programme (WFP). UNFPA built its response on WFP's targeting and cash delivery system to ensure pregnant and lactating women could meet some of their specific needs like transportation to clinics for antenatal, postnatal visits, and delivery services, and additional nutritious food and basic hygiene items. The complementary and harmonized approach with WFP ensured a more impactful assistance, whereby the recipients got both support for food assistance from WFP and for their specific needs related to their maternal health care from UNFPA. Depending on the area of intervention, the cash assistance was either received through the bank branches used by the Samurdhi Government social protection system or through Western Union (watch the video).

This was a first cash and voucher assistance experience for UNFPA Sri Lanka who is now considering a next step with linkages to social protection programmes as well as integrating cash assistance in its protection activities for women at risk of gender-based violence.

UNFPA Sri Lanka has also partnered with the Women Development Units under the Ministry of Women, Child Affairs and Social Empowerment to provide, through them, the option of small emergency cash disbursements to GBV survivors (up to US\$13) to support their access to services (e.g. transport to a safe house) and coverage of other small immediate needs, over a 3 month duration and within case management support.



PROMISING GROUNDS FOR MORE CVA IN ASIA PACIFIC

Afghanistan, Iran, the Pacific, Pakistan, Vietnam and more



In **Afghanistan**, as the lead of the GBV Area of Responsibility, UNFPA has been 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 (see the toolkit here). UNFPA Afghanistan has implemented a small CVA component to prevent child marriage.

In **Iran**, UNFPA started implementing cash assistance to strengthen access and uptake of SRH services for vulnerable Afghan refugee women of reproductive age, addressing the financial barriers they face in accessing these services. This is done with interventions on the supply-side at health facility level and through awareness-raising.

UNFPA in the Pacific is strongly interested in starting a CVA pilot in 2023 within an SRH or a menstrual health and hygiene project, with linkages to Government social protection programmes.

In **Pakistan**, UNFPA provided **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. Pakistan is also looking to further pilot CVA in 2023.

In **Vietnam**, in response to a flood emergency, UNFPA provided small cash transfers to pregnant women to be able to attend their antenatal care visits at medical facilities. This was done in partnership with the Ministry of Health and the provincial health offices.

As UNFPA country offices continue to expand the use of CVA, there will be scope for new pilots and scale-up of ongoing projects, promoting the positive impact on the health and well-being of women and girls. 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 and common harmonized approaches on cash.

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.

