

Guidance to the cash roadmap tool

2025 RCRCM objective = 50% CVA, being the assistance delivered directly to HHs (i.e. between in-kind and CVA); excluding services



This cash roadmap tool is the result of the interviews conducted with African National Societies in October 2021.

The roadmap aims to **visualise at once the main CVA process pieces, in order to deliver an efficient and qualitative response to the affected populations**. The roadmap contains several elements related to cash preparedness (highlighted in green frame) and for some National Societies those activities might overlap with your CVAP Plan of Action. However, please indicate those activities here as this allows us to get a full overview of activities by African National Societies. To be noted that the cash roadmap does not replace the "fast track" minimum requirements, which is a short-term approach (3 months).

Each National Society has their own way to strengthen capacities on CVA and to implement CVA. This map is your tool to choose your path, pick process steps, consider challenges already faced and get direct links to guidance & inspirations. We hope that it will support ownership of CVA processes in your National Society.

The map will be filled on an **annual basis** and we will use the same tool to review and update the cash roadmap as well as country operational plans in subsequent years (2023, 2024, 2025).

How to use the tool:

The Cash Roadmap consists of 4 overall sections. Within each section, National Societies pick a number of steps that they want to work on in 2022 (this is done annually). Each section specifies the minimum requirements for **engagement (E)**. The selection is done via a Kobo Survey. After filling in the online Kobo survey, which reflects this map, the CVA Coordinator will return the results to National Societies who can then return to this map to use the guidance and links; either in this offline format or the online format available on the Cash Hub ([add link](#)).

Important note: Filling in this roadmap is not the task of the National Society CVA Focal Person alone. Ideally, **several staff members in the National Society, including leadership, and potentially partners (PNS, IFRC, ICRC) engage in the mapping.**

(C) = Stands for examples of **CHALLENGES** experienced and reported by African National Societies.

(G) = Stands for **GUIDANCE or OPTIONS** for working with the specific activity. Furthermore, links to relevant resources are provided.

1 - MUST-DO PRIOR TO CVA INTERVENTION

*Section 1 of the map outlines key minimum actions for NS to implement efficient, timely and quality CVA. This first part starts by the feasibility, compiling the core of CVA process steps, part referring to CVA preparedness. Rule #1 being "DO NO HARM", do CVA only if feasible.
(E) All process steps should be fulfilled completely by the end of 2022*

2 - RESPONSE OPTIONS

Section 2 of the tool focuses on response options; i.e. designing your CVA to obtain quality outcomes. Different tested response options are listed below, which are within RCRCM mandates and priorities. Further guidance to develop CVA beyond basic needs can be obtained by reaching out to your IFRC CVA focal points at cluster delegations or regional level.

(E) A minimum of 6 process steps should be fulfilled on a yearly base

3 - CAPACITY

Section 3 of the tool groups the different options to put in place an efficient, qualitative and robust NS internal CVA structure. It includes HR part with CVA focal point options, the 6 support services need and how to professionalize this NS team.

(E) A minimum of 3 process steps, 1 per thematic, should be fulfilled on a yearly base

4 - COORDINATION

Section 4 of the tool represents a combination of coordination elements, from internal up to global. NS engagement at these different levels brings complementary inspiration and support to achieve an efficient and qualitative CVA.

(E) A minimum of 3 process steps, 1 per thematic, should be fulfilled on a yearly base