

Africa Cash Roadmap 2022-2025



SECTIONS & THEMATICS | **STEPS with relevant CHALLENGES EXAMPLES (C) and GUIDANCE/ SOLUTION OPTIONS (G)**
Green frames are activities reflected in the CVAP self-assessment

1- MUST-DO PRIOR TO CVA INTERVENTION

(E) All steps of this section should be fulfilled completely by the end of 2022

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 (in ref to [CIE M3_1_2_1](#))

(G) Links to [CVAP](#) components: 1.1, 1.4, 2.2, 2.4, .3.4, 3.5, 4.1, 4.4, 4.5

1.1- Stakeholder's CVA acceptance & support	NS CVA acceptance & support <input type="checkbox"/> governing board <input type="checkbox"/> senior leadership <input type="checkbox"/> staff <input type="checkbox"/> volunteers <input type="checkbox"/> branches	Government CVA acceptance at <input type="checkbox"/> national <input type="checkbox"/> provincial level	Vulnerable population affected by a disaster preference for CVA <input type="checkbox"/> selected <input type="checkbox"/> non-selected	RCRCM Partners support to CVA <input type="checkbox"/> Partner National Societies (PNS) <input type="checkbox"/> IFRC/ ICRC	Donors support to CVA <input type="checkbox"/> one <input type="checkbox"/> two to three <input type="checkbox"/> more than three	<input type="checkbox"/> Humanitarian organizations general use of CVA in context
<p>(G) Advocacy field guide</p> <p>(G) CVA evidence</p> <p>(G) Transform aid</p> <p>(G) Internal preparation and case studies</p> <p>(G) Cash in 2020</p> <p>(G) Grand Bargain 2020 (Workstream 3)</p>	<p>(C) Reluctance to change</p> <p>(C) Fear "misuse"</p> <p>(C) Governance limited involvement in CVA</p> <p>(G) NS engage in advocacy activities at different levels</p> <p>(G) Share in-country other NGO's experience</p> <p>(G) CVA included in the NS strategic plan & vision</p> <p>(G) Board & management involved & engaged to own CVA</p> <p>(G) NS include CVA in the induction package for all</p> <p>(G) NS include CVA in the support function's job description</p> <p>(G) NS do small-scale pilots to prove CVA feasibility & effectiveness</p> <p>(G) Covid-19 encourages to use CVA through FSP to minimize contact</p>	<p>(C) Block CVA, for example, refusing mobile money in refugee camp, accepting vouchers only</p> <p>(C) Doubt on CVA objectives, for ex when distributed during electoral periods</p> <p>(C) Feels in competition against NGO's CVA when gov. itself is distributing NFIs</p> <p>(C) National level supports and understand CVA but district level request to add non-vulnerable persons in the targeting</p> <p>(G) NS work hand in hand with gov. as partners, explain CVA, establish MoU</p> <p>(G) Invite gov. at CWG, distributions, PDM, lessons learned session</p> <p>(G) NS engage in advocacy alongside other actors</p>	<p>(C) Population might fear conflicts within the HH &/or with the non-selected groups</p> <p>(G) NS includes preferences of affected populations during assessment</p> <p>(G) NS scale gradually CVA interventions to gain confidence</p> <p>(G) NS engage in awareness activities with populations to explain the process, objectives etc. ("Myths vs reality")</p>	<p>(C) CVA not integrated in the NS strategy due to lack of support</p> <p>(C) PNS do not allocate funding to CVA, for ex due to mistrust in NS with few experience</p> <p>(G) NS convenes PNS to give them the chance to start, to build on experience, to learn from others on CVA</p> <p>(G) NS engages IFRC/ ICRC to play a leading role in promoting the use of CVA with partners</p> <p>(G) NS lobby for 'unearmarked' funding</p>	<p>(C) Dependence risk/or risk of not being able to engage in CVA when no or only one donor supports CVA programs</p> <p>(C) Traditional perception of delivering humanitarian aid in form of food and NFI only</p> <p>(G) Diversify funding sources</p> <p>(G) Sensitize, advocate but also let the donors influence each other (snowball effect)</p> <p>(G) Document NS CVA capacities to showcase CVA distribution</p>	<p>(C) Difficulty to launch CVA when no other humanitarian organizations are engaged in CVA in-country</p> <p>(G) Conduct stakeholder mapping in country (CIE M2_1_4_3)</p> <p>(G) Approach other humanitarian and development actors to share CVA advocacy (CIE M1_1_5_2)</p> <p>(G) If no other actors do CVA, engage with RCRCM peers in other countries for advice and learning on CVA set-up as necessary</p>

1.2- Financial Service Provider (FSP) procurement (G) FSP Procurement and FSP Packages	<input type="checkbox"/> FSP mapping in-country	<input type="checkbox"/> 1 framework agreement signed	<input type="checkbox"/> More than 1 FSP contract agreement (not must, but highly recommended)	<input type="checkbox"/> Official identification to fulfil KYC regulations
	<p>(C) FSP distribution points far from affected populations (C) FSP coverage unreliable (C) FSP poorly present in the intervention areas (C) Vulnerable populations do not have access to banks nor phones (C) FSP face a risk to move cash to remote locations (G) NS conducts financial service provider mapping, analysis (CiE M2_4), or link to national Cash Working Group and support this on the same (G) Assess geographical at-risk area to cross-check FSP coverage</p>	<p>(C) A contract agreement process takes up to 3-4 months to implement (C) Using IFRC procurement process is complex and delay the intervention. Need training to understand it (C) Remittance company agents rely on local leaders to identify affected population (C) FSP cost (G) NS establishes IFRC compliant framework agreements (multiple use and multiyear, minimum 2 years) with FSP (see FSP standard contract template), or piggyback ICRC existing contract to start (G) Not CVA FP task but team task together with Log, Fin, Legal (G) Contract must ensure an alignment between FSP HQ and local agents (G) Negotiate FSP costs and seek assistance to do so if too high (G) NS trains FSPs on humanitarian principles & accountability (CiE M4_5_1_3)</p>	<p>(C) 1 contract only can lead to 3 types of risks: - dependence/ monopole - unreliable service quality - partial geographical coverage (rural area) (G) Select FSP who complement one another in terms of delivery mechanism, and coverage (G) Engage affected populations on their preferences (G) Discuss at CWG and understand other actors' use of FSPs (G) Lobby FSP to activate their network in uncovered area (in coordination with other actors)</p>	<p>(C) FSP requires ID cards which is not always available; meaning displaced population, people who lost their ID during a disaster, or people who never had an ID card cannot receive assistance through FSP (C) Proxy (CiE M4_5_5_4) or alternate not always possible & can lead to abuse (G) NS lobby Government to deliver IDs (with FSP support), or engage in an alternative delivery mechanism (G) NS encourage affected population to create personal mobile money account, or ask for an official ID (G) NS engage with Kenya/Uganda NS to learn about DigID project (NS's are testing digital identities, a one to one identity system to be authorized by the Government (regulatory) for FSP (KYC relaxed) & other humanitarian actors use (one platform))</p>
1.3- IM need	<input type="checkbox"/> Cash IM design	<input type="checkbox"/> Data protection & responsibility	<input type="checkbox"/> Data literacy to digitize: <input type="checkbox"/> collection <input type="checkbox"/> management: cleansing, collating, storing, updating <input type="checkbox"/> visualizing, analysing	<input type="checkbox"/> End-to-end solutions for e-CVA: collection, management and payment mechanism
(G) IM training	<p>(C) NS are uncertain which questions to ask to get the right support (G) 510.Global is available for advice on the design of the CVA program through an IM lens</p>	<p>(C) Interacting with FSP (data transfer, KYC regulations), other agencies, government (social protection), all convey a risk of personal data sharing (G) Ensure compliance with Government data protection regulations (G) Disseminate to staff & volunteers to ensure there are no breaches (G) Use FSP secured platforms to transfer data (no email, no USB)</p>	<p>(C) FSP require digital data on affected population but registration keeps being paper-based (C) No skills to automate transfers to FSP platform (C) A lot of data is required & slow the registration process (G) Ensure adapted skills to all staff & volunteers involved in data digitization</p>	<p>(C) Missing interface in Red Rose to transfer field data straight to FSP platform (C) Red Rose remote support might cause delay in the communication flow as based in Turkey (G) Outsource tailor made system, for ex to Red Rose, paid service framed by an IFRC global framework agreement where "a la carte" options are possible, using data management service but not money transfer one for ex</p>

		<p>(G) Password protect targeted population data & ensure limited access</p> <p>(G) Never post lists of targeted households publicly</p> <p>(G) Refer to Data protection in CVA</p>	<p>(G) Digitize CVA with 510 Global team (RCRCM) remote support in 2022</p> <p>(G) Collect data digitally with KoBo</p> <p>(G) Create your account in IFRC KoBo platform</p> <p>(G) NS take up Red Rose or other data management platform</p>	<p>(G) Include outsourcing option cost in the DREF & EA budget</p> <p>(G) Self-registration tool & e-voucher distribution "121 platform", can be customized by 510 team</p> <p>(G) Ready-to-use IFRC barcode "MegaV" tool</p>		
1.4- Context considerations	<p>Modality</p> <p><input type="checkbox"/> #1 Cash transfer preferred to voucher</p> <p><input type="checkbox"/> # 2 Value voucher preferred to commodity voucher and in-kind</p>	<p><input type="checkbox"/> Needs assessment & selection process/ vulnerability criteria</p>	<p><input type="checkbox"/> Market functionality & access</p>	<p>Risk management for</p> <p><input type="checkbox"/> affected populations</p> <p><input type="checkbox"/> RCRCM volunteers & staff</p>	<p>CWG to coordinate with government & other organizations to</p> <p><input type="checkbox"/> calculate & update MEB</p> <p><input type="checkbox"/> transfer value</p> <p><input type="checkbox"/> social protection</p> <p><input type="checkbox"/> share single population register</p>	<p><input type="checkbox"/> Secondary data</p>
	<p>(C) Stakeholders fear that the HH will not use the cash to purchase seeds & tools/other expected purchases, so prefer vouchers</p> <p>(C) NS fear that the affected population will spend cash on antisocial items & prefer to distribute vouchers</p> <p>(G) Monitor for evidence and set an acceptance level for people spending on other things than implied by soft restrictions</p> <p>(G) For livelihoods, potentially create conditionalities (not restrictions!)</p> <p>(G) If unrestricted cash assistance is not feasible or appropriate, NS will consider value vouchers over in-kind</p>	<p>(C) Dependency on Government imposing selection criteria</p> <p>(C) Vulnerability criteria are mainly social (age, ability, ...) and do not consider economic criteria (remittance income, savings, ...)</p> <p>(G) Participatory approach</p> <p>triangulating:</p> <ul style="list-style-type: none">- community- national & local authorities- key informants <p>See CIE M2_1 & M2_2</p>	<p>(C) Difficult access in remote regions due to road conditions and long distance</p> <p>(G) Build in transport allowance in cash transfer</p> <p>(G) Set up transport opportunities as part of project design</p> <p>(G) Lobby for vendors to bring goods closer to affected population or engage in market support activities</p> <p>(G) Set up vendor fair close to affected population</p> <p>(G) Check existing data (CIE M5_3_2_1), refer to RAM (focus on tool 2) & market assessment (CIE M2_3)</p>	<p>(C) Registration data is handled by different people, including the Government, which is a risk for the affected population</p> <p>(C) No connectivity in remote area, so the only way to distribute CVA is cash in envelope, but this is a risk for the population</p> <p>(C) Difficulty for the volunteers to register in conflicting & unsecured area, or remote after a disaster occurred</p> <p>(G) Minimum Security Requirements and training of staff and volunteers on security</p> <p>(G) Conduct an exhaustive risk analysis and management including corruption, digital literacy, diversion of assistance, delays of providing assistance, delivery mechanisms capacity, etc.</p> <p>(G) Special training by ICRC and CaLP (LINK1, topic 3)</p>	<p>(C) When no CWG, NS suffers of unharmonized or not well calculated transfer value</p> <p>(C) No CWG as none, or only few, humanitarian actors are engaged in CVA</p> <p>(C) Government population register is not up-dated (more than 5 years-old)</p> <p>(G) NS participates in and/or co-leads national Cash Working Group (ex in humanitarian response)</p> <p>(G) Discuss with the Government on the benefits to have an up-dated population register to avoid duplicates</p>	<p>(G) Conduct secondary data analysis (sources ex in CIE M1_1_1_1) prior to engaging in primary data collection to save time and avoid duplicate</p> <p>(G) Collaborate with other actors on feasibility analysis and needs assessment to avoid respondent's fatigue</p> <p>(G) Avoid reinventing the wheel but also replicating same challenges & issues</p>

2- RESPONSE OPTIONS		(E) A minimum of 6 steps of this section should be fulfilled on a yearly base		
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. (G) Links to CVAP components: 2.2, 3.2, 3.4, 5.1				
2.1- Sectors application	<input type="checkbox"/> Basic-needs, food security, livelihoods	<input type="checkbox"/> Shelter, WASH, Health, Nutrition, Protection, DRR	<input type="checkbox"/> Multipurpose cash transfers	<input type="checkbox"/> Group cash transfers (GCTs)
	(C) Short timeframes for DREF (G) Consider at minimum 2-3 disbursements for food security for outcomes related to coping strategies (G) Increased use of unrestricted cash in livelihoods projects combined with multiple instalments (see FSL needs assessment tools)	(C) More complex, less tools, mix mechanism (G) CVA interventions go beyond basic needs (G) Market assessments account for multi-sector needs and potential use of cash in other sectors (G) Cash for shelter/ rent : consult shelter and cash coordinators + protection cluster/sector if active in country & ‘Housing, Land and Property’ (HLP) (G) Ensure referrals other actors	(G) If distributing cash across more than one sector , NS considers multipurpose cash rather than sector specific cash (G) The transfer value is calculated based on harmonised and validated MEB (CIE M3_2)	(G) Focus on facilitation of communities own efforts in responding to needs (G) Use GCTs as an alternative delivery modality (G) Align to IFRC Community Resilience Roadmap (G) Can be used in resilience, recovery, sudden-onset
2.2- Delivery mechanisms	Different mechanism implemented <input type="checkbox"/> one <input type="checkbox"/> two-three <input type="checkbox"/> more than three	<input type="checkbox"/> Create, test, simulate, validate & update SOP	<input type="checkbox"/> Avoid to deliver CVA without FSP assistance	<input type="checkbox"/> National Social Protection system
	(G) IFRC CVA process flow (C) Mobile money is not adapted to all situations, for ex, people who can not read can not understand the SMS messages (C) If only mobile money is implemented, persons without phone rely on another party (local leader, family member etc.), risking to not receive the full amount (C) Bank was selected for security reason, but location is far from the community (G) Different mechanisms can be tested internally before scaling, for ex for volunteers per diem payment (G) Back-up options (see decision tree page 7) allow to : - do not depend on 1 company - adapt quickly to affected population diversity within the same intervention	(C) It takes time to disseminate SOPs to all branches (G) Include all mechanisms experienced (G) Include data protection process (G) Get inspiration from existing SOP (Kenya example)	(C) Difficult to scale and a lot of work to do multiple instalments (C) Cash in envelopes is the only option in remote area where people do not have phone nor bank account (C) Risks of transporting and distributing cash on NS (G) NS try to identify service provider that can conduct direct cash distribution (e.g. FSP, security agent, remittance agent) and take on risk (G) If NS does distribution, take out insurance on cash	(C) The Government social protection supports the most vulnerable with direct cash or bank transfer but the system is decreasing due to abuses (G) NS investigate social protection linkages (G) NS engage in or link to social protection where relevant : collaboration, harmonized tool, common platform with other humanitarian actors, MoU, piggyback, vertical/ horizontal expansion

2.3- Implemen- tation timing	<input type="checkbox"/> Within 3-4 months	<input type="checkbox"/> Within 3-4 weeks	<input type="checkbox"/> Within 24-48 h	<input type="checkbox"/> Prior to actual disaster hits = Early Action	
	(C) If FSP contract is not already in place (C) Affected population can not wait that long, meaning that a parallel NFI process needs to be initiated, which double the workload (G) Preparedness not completed	(G) FSP contract in place or valid for exceptional approval (G) Preparedness partially completed	(C) Donor requests to distribute CVA in 1-2 days after a disaster, pushing the need to have a pre-existing framework agreement with FSP & have stock pre-positioned (G) Preparedness fully completed (G) Should be the target implementation timing	(C) Need to set triggers / understand forecasting (G) Pre-registration of most likely affected population (G) Focus on transferring CVA prior to disaster (G) CVA used to diversify, protect and recover e.g. livelihoods, productive assets (G) Include CVA in NS contingency plans	
2.4- Length & frequency	<input type="checkbox"/> One-time short-term 1-3 months		<input type="checkbox"/> Multiple instalments over 3-6 months	<input type="checkbox"/> Multiple instalments over 6-12 months	
	(C) Often one instalment is not enough to cover needs (G) One instalment of CVA per household/individual (G) Can also be several months of CVA in one instalment, e.g. if people are far from disbursement point		(G) Several instalments of CVA per household is prioritised to increase impact	(G) Same HHs get CVA different times of year: every month, or fitted to seasonal calendars (example by country and generic), for chronic crisis (several hunger/ lean periods with MPC, e.g. 2x 3 months of instalments over 1 or 1.5 years)	
2.5- Cash transfer value	<input type="checkbox"/> Minimum Expenditure Basket (MEB)	<input type="checkbox"/> Food Basket (FB)	<input type="checkbox"/> Sector-specific	<input type="checkbox"/> Accounting for security & preferences	<input type="checkbox"/> Revision
	(G) CIE M3_2 (G) Programme quality toolbox (G) Cash transfer values are set according to Minimum Expenditure Basket (MEB) set by or harmonized with National Cash Working Group (NCWG)	(G) Cash transfer value is set according to the Food Basket (FB) if only service food security/basic needs (G) Aligned to CWG and/or government FB	(G) Cash transfer value is set with relevant cluster/sector and based on needs and market prices	(G) Affected populations are consulted on their preference for ex: - Several smaller cash transfers - One big cash transfer (also depend on delivery mechanism)	(C) Difficult to handle currency deviances , depreciation & appreciation when floating exchange rate (G) Monitor prices & provision the risk in the budget to adapt the transfer value
2.6- Cash+	<input type="checkbox"/> Organise awareness sessions in line with the needs assessment (nutrition, WASH, income generating activities, etc.)	<input type="checkbox"/> Cash for livelihoods / safety nets approach (linkages to Zero Hunger)	<input type="checkbox"/> Financial inclusion and financial management	<input type="checkbox"/> PGI-sensitive CVA	<input type="checkbox"/> Market support activities
	(C) Food security outcomes are not met without nutrition and sanitation (G) Depending on the needs assessment, combine CVA with relevant awareness session to strengthen resilience: - Food & nutrition	(G) Cash+ in FSL include 3 main components: unrestricted cash transfers, productive inputs (can also be by CVA), and technical/skills training. The cash+ activities can be tailored to both short- and longer-term programming	(G) NS engages population supported with cash transfers in training on financial management (seek to amplify impacts on	(C) Risk of abuse when the affected population depend on an external person to access the assistance (for ex if do not have a personal phone) (G) NS integrates activities related to protection, gender equality, gender-based violence, and inclusion when using CVA modalities for a non-discriminatory access to	(G) NS considers market support activities in areas where markets may not be fully functional. This can for example be cash support (not loans) to individual traders for restocking or transport,

	<ul style="list-style-type: none"> - Livelihoods & income generating activities/ budgeting workshop/ agronomy - Shelter & “build back safer” - WASH & clean water - ... <p>(G) NS links to other humanitarian actors and/or government units that can support awareness raising and with whom to establish referrals</p>	<p>(G) NS trains affected population on livelihoods skills, financial literacy and management, gender equality to boost livelihoods recovery and income generation</p> <p>(G) NS supports both on- and off-farm livelihoods activities through CVA</p>	<p>economic well-being).</p> <p>(G) Receiving the cash should not be conditional to training participation</p>	<p>assistance and services (minimum standards for CVA page 80 to 88)</p> <p>(G) NS conducts household-level consultations on who to target as primary recipient of cash</p> <p>(G) NS engages in discussion groups with women, men, girls, boys and leaders, including persons with disabilities from the different groups, on shared decision making and sharing of burdens etc.</p> <p>(G) NS trains staff and volunteers on PGI, gender analysis, GBV and child protection referrals</p>	<p>or support to reconstruction of market structures, for example through trade unions</p> <p>(G) Market analysis informs FSL programming including possibly engaging in market activities, marketing of products, understanding ranges of livelihoods and how these may be supported through CVA</p>
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2.7- Technical sector linkages	□ Forecast-based and Early Action	□ Red Ready and Preparedness for Effective Response (PER)	□ Urban Response	□ Migration	□ Environmental considerations in CVA
	<p>(C) Use in sudden onset emergencies if not prepared</p> <p>(C) Government regulations not accepting cash transfers</p> <p>(G) Pre-registration of Households in pre-selected at-risk area based on trend and frequency forecasting (support from Climate Centre, Government institutions, RCRCM technical advisors)</p> <p>(G) Trigger cash transfers when a threshold is reached (prior to disaster), for ex drought scalability framework based on the vegetation index</p> <p>(G) Can be aligned to support the national social protection programme</p> <p>(G) References and examples</p>	<p>(C) Africa Red Ready and PER is not yet rolled out for all NS</p> <p>(G) NS ensure to align PER plans and CVA preparedness Plan of Action</p> <p>(G) Ensure that CVA preparedness take priority in PER/Red Ready from NS perspective</p> <p>(G) NS utilise PER focus on branch development to support and strengthen branch-level CVA capacities</p> <p>(G) Recognition of CVA in the NS DRM Policy as a standard response option</p> <p>(G) CVA taskforce members/focal point involved during the PER Process</p> <p>(G) NS reference CVA in their PER workplans and mainstream CVA in their preparedness plans</p>	<p>(C) Livelihoods recovery depends on market & capacity constraints but also local regulations</p> <p>(C) Difficulty to engage with governments & authorities due to # of actors</p> <p>(C) Risk to exacerbate existing protection issues</p> <p>(C) Urban affected population selection requires more time</p> <p>(G) e-Payments tend to be more secured, quick & widely accepted</p> <p>(G) Large market offer can fill in the wide variety of affected population needs</p> <p>(G) Always opt for unrestricted cash transfers as people's needs differ significantly in urban areas. This also contributes to the informal economy, of which women are more often engaged</p> <p>(G) Focus on urban and peri-urban livelihoods interventions using CVA</p> <p>(G) Toolkit for urban context</p>	<p>(C) Lack of ID &/or desire to not be identified</p> <p>(C) Inability to comply with KYC</p> <p>(C) No phone in country / No SIM card</p> <p>(C) Distrust of humanitarian & development, state actors, politicisation of migration</p> <p>(G) CVA is an effective and dignified way to provide services - migrants know their needs best</p> <p>(G) CVA is adaptive to diverse needs of migrant and displaced populations</p> <p>(G) CVA may support existing social and support services</p> <p>(G) CVA can target both migrating people and host community to encourage acceptance</p> <p>(G) Lessons learned</p>	<p>(G) Market assessments include environmental benefits analysis (e.g. local purchase vs. in-kind transported from elsewhere)</p> <p>(G) Energy supply for affected populations should be considered and sustainable energy sources for people (e.g. to cook) are included in MEBs</p> <p>(G) Awareness raising on environmental management and resilience can be built into projects using CVA modalities</p> <p>(G) NS links to Tree Planting and Care Initiative (South Africa example)</p>

3- CAPACITY		(E) A minimum of 3 steps of this section, 1 per thematic, should be fulfilled on a yearly base				
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.						
(G) Links to CVAP components: 1.2, 2.1, 2.2, 2.3, 3.3, 3.4, 3.5, 4.1, 5.2, 5.3						
3.1- CVA-specific capacities at HQ	<input type="checkbox"/> CVA focal point part-time or part of general role	<input type="checkbox"/> Dedicated & endorsed CVA focal point full time	<input type="checkbox"/> 1 CVA focal point full time + 1 deputy	<input type="checkbox"/> NS internal cash technical working group (cash TWG)		
	(C) No time to deepen all CVA aspects which risks to damage program's quality (C) High turnover which makes difficult to build on CVA experience (G) Requests for support from PNS/ IFRC/ ICRC/ CWG to save time in generic topics & focus on program-specific ones (G) Lobby with partners for full-time CVA FP	(C) Not possible when the NS structure is small (C) Not necessary when that are no CVA interventions all year long, difficult to sustain (G) Lobby with partners for full-time CVA FP (G) Set-up ToR for CVA FP (CIE M1_2_1_1) and get endorsement from senior management (G) Ensure CVA FP has decision-making power	(G) Kenya for example splits CVA position between operation/ field program officer & strategic/ research (G) Set-up ToR for CVA FP and deputy and get endorsement from senior management (G) Ensure CVA FP has decision-making power	(G) Establish group of different functions that support CVA preparedness & implementation: programme and support staff, volunteers, branches (G) Establish ToR to segregate duties (CIE M1_2_2_1) (G) Include NS CVA vision, strategy & research priorities (G) Responsible of the CVA risk register set up and maintenance		
3.2- HQ support functions roles & responsibilities in CVA	Finance & accounting: <input type="checkbox"/> pre-positioned funding for CVA ("cash for cash") <input type="checkbox"/> reconciliation process	<input type="checkbox"/> Procurement & Logistics: FSP agreement	Internal audit: <input type="checkbox"/> segregation of duties <input type="checkbox"/> quality insurance <input type="checkbox"/> authorization policies	CEA based on community preferences: <input type="checkbox"/> feed-back mechanisms (hotline, WhatsApp, community committee...) <input type="checkbox"/> consult & communicate widely on selection process <input type="checkbox"/> explain cash transfer mechanism through trusted channels of communication (including FSP)	IM/ ICT: <input type="checkbox"/> data management <input type="checkbox"/> equipment	PMER quality insurance: <input type="checkbox"/> price monitoring <input type="checkbox"/> market analysis <input type="checkbox"/> exit survey <input type="checkbox"/> PDM <input type="checkbox"/> donor reporting <input type="checkbox"/> lessons learned
	(G) CVA and IM trainings	(C) Impact on finance workload and procedures (G) Evaluate FSP structure & capacity, health & credibility, fund flow process, reporting abilities, user interface, reconciliation process & cost (G) Internally, understand funds	(C) Impact on procurement workload and procedures (G) Refer to IFRC Procurement manual , detailing cash process in a chapter 3.6 (G) Refer to FSP Procurement SOP for the Africa Region	(C) Impact on audit workload and procedures (C) Fraud & corruption risks within the NS (G) Engage in review of CVA risk register (G) Evaluate & test the adequacy & effectiveness of the internal controls, governance & risk	(C) Community misunderstanding of selection criteria lead to rumours about corruption, nepotism, abuse towards volunteers & staff, mistrust in RCRCM (C) Selection is more sensitive with cash as more coveted (C) Community tensions, rumours created when appropriate complaint mechanisms are not established and maintained (C) Community marginalised groups do not access their cash when they do not understand the transfer modalities	(C) Impact on IM/ ICT workload and procedures (C) No or old IT equipment (software & hardware: computers, tablets, phones, power bank), nor the capacity to maintain (G) Support services should include a full time cash IM position

	transfer rules to ensure a timely and fluid flow through the different steps (G) Categorize CVA activities in accounting systems to be able to report them separately (G) Reconcile all along the CVA program (CIE M4_5_5) (G) Training (G) Risk & compliance	(G) Work together with legal to clear the FSP contract agreement (G) Training	management processes	(G) NS use IFRC CEA toolkit to establish high quality activities, adapt them to all (multiply formats: text, pictures, icons), train staff & volunteers (tool 14) (G) NS consults a cross-section of the community (triangulation) on preferences for engaging with the NS, cash transfer modality, selection process, ... and use their trusted feedback channels (G) Collaborate with PGI to look at handling sensitive feedback & gender & diversity analysis (G) Twilio API to send automated bulk messages to affected population phones (G) Obi4Wan to receive and answer WhatsApp messages from the affected population (G) WhatsApp business API to automate Q&A	(G) see IM thematic 1.3- (G) Training	(G) Covid-19 example (G) See CIE Module 5
3.3- Continuous CVA training, refresher & material support	<input type="checkbox"/> CVA focal point(s)	<input type="checkbox"/> Board members <input type="checkbox"/> Management <input type="checkbox"/> Government authorities <input type="checkbox"/> Support staff <input type="checkbox"/> Volunteer leaders <input type="checkbox"/> Branches	<input type="checkbox"/> NDRT	Volunteers <input type="checkbox"/> HQ <input type="checkbox"/> Branches		
(G) CVA and IM trainings	(C) High turnover that prevent building on experience (G) Mix on-line & in-person trainings on CVA & Cash IM (G) NS invests in CVA FP's level 2 and 3 trainings	(C) Lack of training on CVA & IM (data protection, ...) (C) High turnover in support functions which slows down the process and decrease program's quality (C) Capacity built in the HQ but not in the branches (C) CVA not included in the DM training (G) Invite to in-situ distributions, PDM and lessons learned workshops (G) Mandatory for all staff to take CVA online training (G) Include different functions in CVA level 1 and 2 trainings (G) Mandatory CEA , PGI , risk management (topic 3) training for RCRCM members	(G) Integrate CVA in NDRT trainings, under general DM budgets/training (G) NDRT can go from branch to branch to spread CVA trainings	(C) High turnover mainly due to job priorities or unsatisfaction (poor management or low per diem vs other NGOs) (C) Lack of training on CVA & IM (G) Volunteers management system & retention program (G) Encourage CVA learning through mentorship, info sharing, trainings, webinars, discussions (for ex in WhatsApp group) (G) Train minimum 4 volunteers per district so in case 2 leave, the other 2 can train new comers (G) Open internal job postings to volunteers (G) On-line mandatory training on CVA , CEA , PGI , risk management (topic 3)		

4- COORDINATION, INSPIRATION & SUPPORT			(E) A minimum of 3 steps of this section, 1 per thematic, should be fulfilled on a yearly base			
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.						
(G) Links to CVAP components: 1.2, 2.1, 3.4, 4.2, 4.3, 4.4, 4.5, 5.2						
4.1- National	<input type="checkbox"/> NS internal coordination during CVA response	<input type="checkbox"/> RRCRM working group with NS, PNS, IFRC, ICRC	<input type="checkbox"/> Peer to peer nationally (NDRT)	<input type="checkbox"/> Case studies, success stories, NS promotion & knowledge-sharing	<input type="checkbox"/> Innovation	<input type="checkbox"/> Academic institutions
	(G) NS establishes ad hoc working group or links to existing cash TWG (see also 3.1-) (G) Ensure NS coordination branch and NHQ	(G) NS establishes an internal structure for movement coordination around CVA in country, including NS CVA focal, potentially cash TWG, and all movement partners (supporting or interested in cash activities including CVA preparedness)	(G) Internal surge structure (G) Shadowing missions (G) Main-streaming CVA	(G) NS produces case studies to promote NS and CVA, to encourage others to replicate and keep on improving (G) NS facilitates lessons learned sessions including key stakeholders	(C) CVA push NS to investigate & test new technologies (this is however regarded a positive challenge) (G) Where relevant, NS invests in external partnerships & innovation for improved CVA (G) NS invests in new digital tools (G) NS learns from other NS' experiences , e.g. DigID (Kenya and Uganda)	(G) NS work with academic institutions, for example agronomists university for livelihoods programs, with architect university for shelter programs, ...
4.2- Regional	<input type="checkbox"/> RRCRM CVA sub-regional communities of practice (CoP)		<input type="checkbox"/> Peer to peer regionally		<input type="checkbox"/> IFRC regional technical teams: urban context, early action, FbF, shelter, FSL, cash IM, CEA, PGI, and risk management	
(G) Contact list	(C) No Portuguese-speaking CoP (concern 5 countries) (G) Participates in and/or co-leads sub-regional movement-level CVA Community of Practice (CoP) (G) Reports CVA implementations through "Counting Cash" (G) Participates actively in CVA learning sessions		(G) Remote learning and sharing by searching and consulting complementary NS (link to CVA CoP/NS self-assessment) (G) Surge missions - link to RRMS / Rapid Response Team (G) Participates in shadowing missions in "experienced" NS (G) Visit other NS to support and learn from each other (G) "Experienced" NS organize workshops on CVA & IM for the other regional NS		(G) NS interested in linking CVA with technical areas reach out for learning and support (G) NS participates in guidance/learning sessions offered by the regional technical team	
4.3- Worldwide	<input type="checkbox"/> Global IFRC CVA team	<input type="checkbox"/> Cash Peer Working Group (CPWG)	<input type="checkbox"/> Peer to peer out of the region		<input type="checkbox"/> On-line Cash-hub helpdesk	<input type="checkbox"/> On-line monthly webinar (Cash-hub & CaLP)
(G) Contact list	(G) NS engage with Global Cash team on request (G) NS are open to support from global functions e.g. on IM, digitalisation, CVA preparedness...	(G) Selected NS participate in CPWG (G) NS report back from CPWG activities	(C) Language differences (C) Experience levels do not match required profiles (G) Turkish RC invites out of the region NS to share experience (seminars) (G) Surge role profile and platform (G) Rotational CVA delegate scheme in Turkey (G) British RC Cash school		(G) Can be used to ask any kind of cash related question	(C) Primarily offered in English so info not accessible to FR/ PT/ SP-speaking NS (50% of African NS) (G) NS engage in webinars as participants and speakers (G) NS flags areas they are interested in to cash hub or regional CVA coordinator