### Meeting #8 Minutes

**Extended meeting – CVA for Health Outcomes session**

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<th>Date:</th>
<th>Wednesday 13th April 2022 - 11:30 (Beirut time)</th>
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| **Attendees:** | Facilitator: Gabriella D’Elia  
Presenters: **Cash for Health TWG** - Ansa Masaud Baloch Jørgensen (NRC); Danièle Wyss (ICRC)  
**Algerian Red Crescent:** Billel Aouali  
**British Red Cross:** Praxedes Merchán  
**Danish Red Cross:** Veerle Schouten, Mohanad Shakerallah, Jytte Roswall  
**Egyptian Red Crescent:** Pilar Badran  
**Iraq Red Crescent Society:** Raed Sejjad Nassim  
**Lebanese Red Cross:** Hikmat Al Amine  
**Libya Red Crescent:** Ahmed Massoud  
**Palestine Red Crescent Society:** Eman al Deek  
**Qatar red Crescent:** Ahmed Salem Ahmed  
**Syrian Arab Red Crescent:** Nabeel Allaham  
**Yemen Red Crescent Society:** Hend Mohammed, Abdullah Azab  
**ICRC:** Kalkidan Belete ALAMIREW  
**IFRC:** Sonja Veronica BJORKLUND |

| **Agenda:** | 1. Presentation for the CVA for Health Outcomes WG  
2. Introduction of new members  
3. Updates from members  
4. Updates from facilitator – governance, additional Preparedness and Capacity building resources  
5. AOB |

**Meeting minutes:**

1. **Presentation for the CVA for Health Outcomes WG**
   Ansa Masaud Baloch Jørgensen and Danièle Wyss, co-chairs of the RCRCM Cash for Health Outcomes TWG provided an overview of CVA for Health interventions and plans within the movement.

   **Main takeaways:**
   - CVA interventions can effectively support Health outcomes (financial access to basic services/referrals, coverage of transportation costs/costs incurred while accessing health services, coverage of medicines costs, coverage of supplements etc)
   - Need to build and maintain trust in the system to ensure wider acceptance of CVA from Health departments
   - C4H interventions have so far mostly been piloted/implemented in urban settings
   - C4H works best if combined with service provision/capacity building/education-awareness
   - If assistance is provided for health services only, Vouchers can be the best option (but good to include coverage of Health costs – including mental Health - in MPCA)
   - Need for continuous (re)assessment of situation
   - Ongoing research: development of Cash-ready Emergency Response Units
• **ICRC:** examples
  o Ukraine (civilians affected by conflict, includes burial costs),
  o Lebanon (after increase in maternal deaths decided to provide Transfers conditional to accessing ante-natal care in the first 6 weeks of the pregnancy - ICRC follow up if women do not attend services; e-transfers through a card, with the possibility of providing a top up to cover additional needs)
  o DR Congo (CVA for risk reduction, one-off transfer, conditional),
  o Nigeria (CVA for nutrition – support in covering nutrition-related expenses; support to livelihoods of patients’ households and caregivers)
  o 2 CVA Focal Points within the Health department

• **Norwegian RC** is working on the Cash-ready ERUs (4 years process)
  o Evidence: patients accessing the ERUs are injured, elderly, and/or have chronic diseases → need support beyond immediate ERU services (also for follow up visits)
  o Includes joint training of Health and CVA personnel deployed with the ERU
  o Examples from Syria, Bangladesh
  o Cash for Health Delegate, and building a roster of CVA for Health experts

*The TWG will shortly share a survey for NS – please make sure your NS fill it in (it is very short)*

2. **Introduction of new members**
Yemen Red Crescent Society has recruited a CVA Focal Point - Hend Mohammed

3. **Updates from members**
   
   **Egyptian Red Crescent:** assistance to Palestinian refugees from Syria (UNRWA) – PDM data collection ongoing; Aswan floods response: 222 households will receive CVA through and FSP (Fawri); a new project to assists people from Africa is in the pipeline, funded by the Swiss Embassy in Egypt – FSP procurement ongoing;
   
   **Palestine Red Crescent Society:** the 2 CVA Focal Points are attending CWG meetings in Gaza and West Banks, respectively.
   
   **Syrian Arab Red Crescent:** winterisation intervention completed; CVA activities for the Covid response continue in Aleppo, in collaboration with BRC (3+3 months, will finish in July); working on 2 pilots in collaboration with DRC; ongoing collaboration on CVA with NGOs: Adra (winterisation, food vouchers), AVSI (Education), TdH (Medical – paper vouchers). SARC is currently working on an extended FSP mapping

4. **Updates from facilitator**
   
   Rescheduled for next month to leave space for the CVA for Health session.
   Governance of CoP to be discussed in May

**Meetings schedule**
The CoP meets every second Wednesday of the month at 11:30 Beirut time until March 2023 – the frequency of schedules will be reviewed during March 2023 meeting.

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