

MENA CVA Community of Practice Meeting #8 Minutes

Extended meeting – CVA for Health Outcomes session

Date:	Wednesday 13 th April 2022 - 11:30 (Beirut time)	
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 Merchan	
	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: Nabeh 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),
- 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),
- 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.

MENA CVA Community of Practice meetings schedule		
Meeting #	Date	
1	1 st September, 2021	
2	6 th October, 2021	
3	3 rd November, 2021	
4	1 st December, 2021	
5	5 th January, 2022	
6	2 nd February, 2022	
7	2 nd March, 2022	