



PHILLIPPINES CASE STUDY 2023

CASH TRANSFER PROGRAMME (CTP) IN A URBAN WASH PROGRAMME

Using cash, vouchers or other market based approaches to reach WASH outcomes

ACKNOWLEDGEMENTS

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INTRODUCTION

Introduction to the case studies on the use of MBP and CVA for WASH outcomes in the RCRCM

The RCRCM has been implementing CVA and investing in cash preparedness for many years. The Movement is uniquely placed to become a world leader in the provision of CVA in emergencies. The IFRC's Cash Roadmap highlights the IFRC's commitment to increase CVA whilst recognising the need to invest in cash preparedness and organisational mainstreaming to achieve this goal. Since 2012, the IFRC, ICRC and several National Societies (NSs) have been supporting the institutionalisation of CVA within several NSs to help integrate CVA into their disaster response activities.

As stated in the IFRC Plan and Budget 2021-2025, "Cash and voucher assistance is the IFRC's preferred form of material assistance, as a responsive and flexible modality that promotes human dignity, choice and community resilience."

While MBP has been widely used in livelihoods, food security, and relief sectors, the WASH sector has been relatively slow to embrace it. Over recent years humanitarian aid organisations have increasingly used market-based programming (MBP) to deliver water, sanitation and hygiene (WASH) in emergencies. CVA and Market-based modalities include the distribution of cash and vouchers, and this approach has many advantages to enable recipient vulnerable households to access WASH basic needs and services they need more efficiently and effectively, contributing to economic recovery, as well as supporting local WASH markets to deliver these goods and services at humanitarian standards.

MBP in humanitarian settings, such as cash distributions, can provide the support that is more tailored to individual needs. It shifts the focus from in-kind assistance to technical support, community engagement and the support of local economies to recover, rather than disrupting local markets with imports. Still, there is not enough evidence within the RCCM that these approaches have resulted in a positive effect on WASH outcomes. As a result, the evidence, level of expertise, specific training materials, and dedicated tools are underdeveloped and need to be improved and disseminated across the RCRCM WASH sector.



These case studies present the analysis and mapping of available evidence of the effect of market-based modalities used in the emergency WASH sector within the Red Cross Red Crescent Movement. The documents highlight examples of the application of Market Based Programming (MBP) and Cash and Voucher Assistance (CVA) approaches in delivering humanitarian WASH, for example, latrines rehabilitation using the distribution of cash or the replacement of hygiene items with vouchers in the Red Cross Red Crescent Movement representing various regions and contexts (e.g., protracted conflict, natural disaster, protracted crises, population displacement, epidemic outbreaks, both emergency and longer-term etc.).

The case studies were developed with the intent to provide examples of good practice and demonstrate the breadth and diversity of contexts in which NSs work to provide MBP and CVA for WASH outcomes and identify some common learnings and potential opportunities to NSs that are considering using Market Based Programming and CVA to support WASH outcomes.

PROJECT DETAILS

Region: Southeast Asia

Country: Philippines

National Society: Philippine Red Cross Society

Specific location: Cebu City

Year intervention started: 2019

The focus of your intervention utilising CVA: Hygiene promotion, Sanitation

Response Phase for your intervention: Development

The number of people reached: 20,000

Type of beneficiaries targeted: LIC Low Income / low capital, Urban slums

Modality of CVA: Cash for Work

Transfer mechanism used: Paper vouchers

Implementing partners: Local Authorities, Philippines Red Cross with technical support of Netherlands Red Cross Society

BACKGROUND

The intervention is part of an existing urban WASH programme implemented in urban slums in Cebu. Cash for development programme: building for urban slums (funded by the Netherlands RCS). The Urban Cash programme was previously implemented in Manila and then scaled up in Cebu.

The intervention focused on the construction of latrines for low-income communities living in urban slums (proactive crisis). Initially, the team identified one of the main needs, the improvements of existing sanitation facilities. To support the construction of latrines the team put in place the use of both cash and voucher (CVA) modalities.

To address the challenges experienced by the implementing chapter and local stakeholders in working in informal settlements, the PRC introduced multiple mechanisms to engage and work with the dynamics of the partner communities.

During the construction phase of the implementation, the WASH Unit, along with the PRC Cebu Chapter, started the Cash for Work (CFW) mechanisms. This intervention was aligned with the overall mainstreaming efforts of PRC's WASH programming.

The decision to use Cash for the WASH interventions was designed and planned in participation with the community members, facilitated by the established RC 143 community-based volunteers. As this intervention was designed and implemented to complement the PHAST (Participatory Hygiene and Sanitation Transformation) activities in the community, workers (labourers) were recruited, selected, and assigned by the community members.

The selection of the specific modality, delivery mechanism and service provider was discussed and decided by the local government units, the community members and RC 143 volunteers. The selection process considered protection risks and benefits, for individuals, households, and communities.

Market assessment and analysis were done – to identify which method and service provider is available and accessible locally. The labour cost utilized during this phase of the project was based on the locally approved and applied daily wage.

A brief outline of the project

This method was piloted in one (1) of the eight (8) project communities in consideration of the communities' interests, dynamics, commitment, and the remaining timeframe of implementation. The method adapted included:

- Weekly release of the CFW (Cash for Work) through Palawan Express (money remittance service) every Saturday.
- The foreman secures the needed documents to verify and compute for each worker:
 - Daily time record
 - Identification cards or barangay certificates
 - Signed service agreement
- These documents shall be submitted to the chapter for verification first, then the chapter will then process the transfer of the total amount through Palawan Express.
- Once the transaction is processed, the issued reference number will then be sent to the foreman as he is the designated and assigned community representative to claim the remittance.
- Once the remittance is claimed, the foreman will then issue the weekly compensation for each of the works, securing signed copies of the acknowledgement receipt.

Note that this phase started and was completed during the Covid 19 pandemic. This also contributed to the actual completion of the project since we mobilized local community members instead of acquiring contractor-based services which would have been more costly and challenging to handle because of the pandemic and the social distancing restrictions.

People get their salary through Cash (contracted service provider) salary a weekly basis. The voucher can be presented to a shop for getting construction supplies.

Vouchers were used as hygiene promotion cards. People when attending the hygiene promotion sessions, they collect stickers (Similar to a Fidelity Card and reward points system). Then the people can exchange the stickers in the local store and get hygiene products. Volunteers validate the attendance of community members in the hygiene sessions. The use of Cash in an urban area is helpful to diversify hygiene promotion and pay the water bills at the water kiosk. The PHAST approach was modified for the urban context.

FINDINGS

In terms of cross-sectoral **program delivery**, it is found that the project team explored numerous options; successful cases of program delivery abound as a result. Examples include:

- The implementation of the Red Cross 143 (RC 143) program (recruitment, training, and mobilization) in the community.
- The implementation of DRR (Disaster Risk Reduction) activities including awareness raising and drills.
- WASH awareness-raising activities including clean-up drives.
- Aside from project deliverables, the PRC was able to support the community by implementing its regular activities including blood donation and first aid training.
- The local government representatives also noted (Barangay Captain and council) that the project contributed to the DRR, and health programs are done in the community.
- These activities help their community and barangay in training their tanods brigades and community representatives on DRR which benefited the barangay in general.



On balance, program implementation is found as being more integrated than a business-as-usual approach. Yet, due to several pre-existing constraints, it remains far from ideal. Most of the community members and volunteers are looking for tangible output before/while attending the community sessions.

In terms of **efficiency**, the review finds that advances towards integration brought clear benefits. Yet, there is room for improvement, in procedures. The absence of a standard reporting format allowed multiple reporting formats are being used by PRC, making reporting very time-consuming. Efforts to integrate some aspects of monitoring are recognized. However, late timing, inadequate sampling, and knowledge gaps in data analysis render this undertaking ineffective.

Concerning **relevance**, there is no doubt that the numerous interventions are highly relevant: in terms of processes, the RC143 volunteers serve as integrated 'anchors' for all program activities. While feedback channels could have been more systematic, the input from/ through RC143 and community volunteers ensured that village voices were heard, and their concerns addressed.

Team efforts are also recognized to address cross-cutting issues. Needs assessments amongst persons with disabilities as well as targeted and layered approaches depending on the level of vulnerability ensured relevant interventions.

LESSONS LEARNT

Adapting the project due to the lockdown and Covid 19 pandemic was one of the main challenges.

- The NS focused and prioritized activities and locations with existing enablers.
- The PHAST tool was modified for the the urban context.
- The NS sought external expertise to review VCA (Vulnerability Community Assessment) reports and to develop/ review Community Action Plans.
- The team developed user-friendly terms of reference for RC 143.
- The NSs advocated for for more systematic integration of government stakeholders.
- The NS provided community facilitation training to the PRC volunteers.
- The NS deliver monitoring and evaluation training to selected team members and in

Good practices

Volunteering within Philippine Red Cross is carried out by people who are committed to the Red Cross Fundamental Principles, respect the Emblems and are motivated by their own free will without the expectation of material or financial gain. Our volunteers serve vulnerable people and work towards a more humane and peaceful world. They contribute their time, abilities, diversity, and skills regularly or occasionally in the delivery of humanitarian services, in resource mobilization, administrative, governance or advisory functions.

Philippine Red Cross is committed to improving quality, standards, capacities, and volunteer retention by creating a welcoming and socially inclusive environment. This environment means providing volunteers with training, supervision, regular evaluation, and recognition; insurance protection, equipment and psychosocial support; and a supporting local structure relevant to the tasks that they carry out.

Feedback from the community

From the feedback of the community members, including the selected workers, this mechanism allows to development of a sense of ownership and accountability throughout the process. This was an opportunity for them to contribute to the improvement of their current situation while earning for their families.

Replicability and scalability of the intervention

In order to provide replicability and scalability of the intervention, it would be necessary to:

- Develop additional guidance for resilience programming.
- Develop outcome-oriented templates for planning, monitoring, and reporting.
- Be flexible to accommodate changing needs and diverse conditions.
- Use adapted vulnerability and capacity assessments (VCA) as the foundation for integrated planning.

ANNEX / ABBREVIATIONS

List of abbreviations

PRCS	Philippines Red Cross Society
CTP	Cash Transfer Program
WASH	Water Sanitation and Hygiene
RCRC	Red Cross Red Crescent
UNICEF	United Nations International Children's Emergency Fund
CVA	Cash Voucher Assistance
RAM	Rapid Assessment of Markets
IEC	Information, education and communication
HHs	Households
IPC	Infection, Prevention and Control

REFERENCES

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2. **Collaborators for this Case Study:** British Red Cross and RCRCM Cash and WASH TWG



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