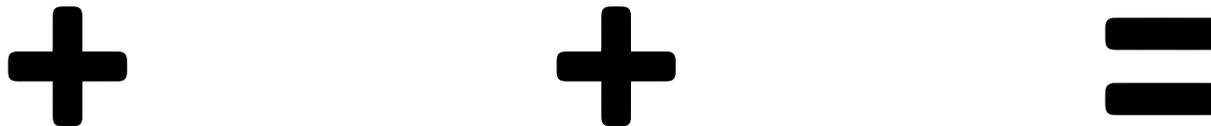


CONSIDERING & INCORPORATING CVA INTO NUTRITION PROGRAMMING – A 3 STEP DECISION-MAKING TOOL



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This tool is intended to support nutrition practitioners with how to assess appropriateness of cash and vouchers assistance (CVA) in emergency nutrition programming, to support, complement, maximize other modalities more routinely considered in nutrition programming. This tool takes the user through the full response option analysis process, identifying key considerations and directing the user to the most relevant tools as per the following steps:



This tool is complemented with Annexes:

Annex 1: CVA Use / Attribution in Underlying Causes

Annex 2: NCA Methodologies

Annex 3: Set of evidence

Annex 4: Evidences Matrix (Excel file)

Annex 5: Core considerations for CVA in nutrition programme design and implementation

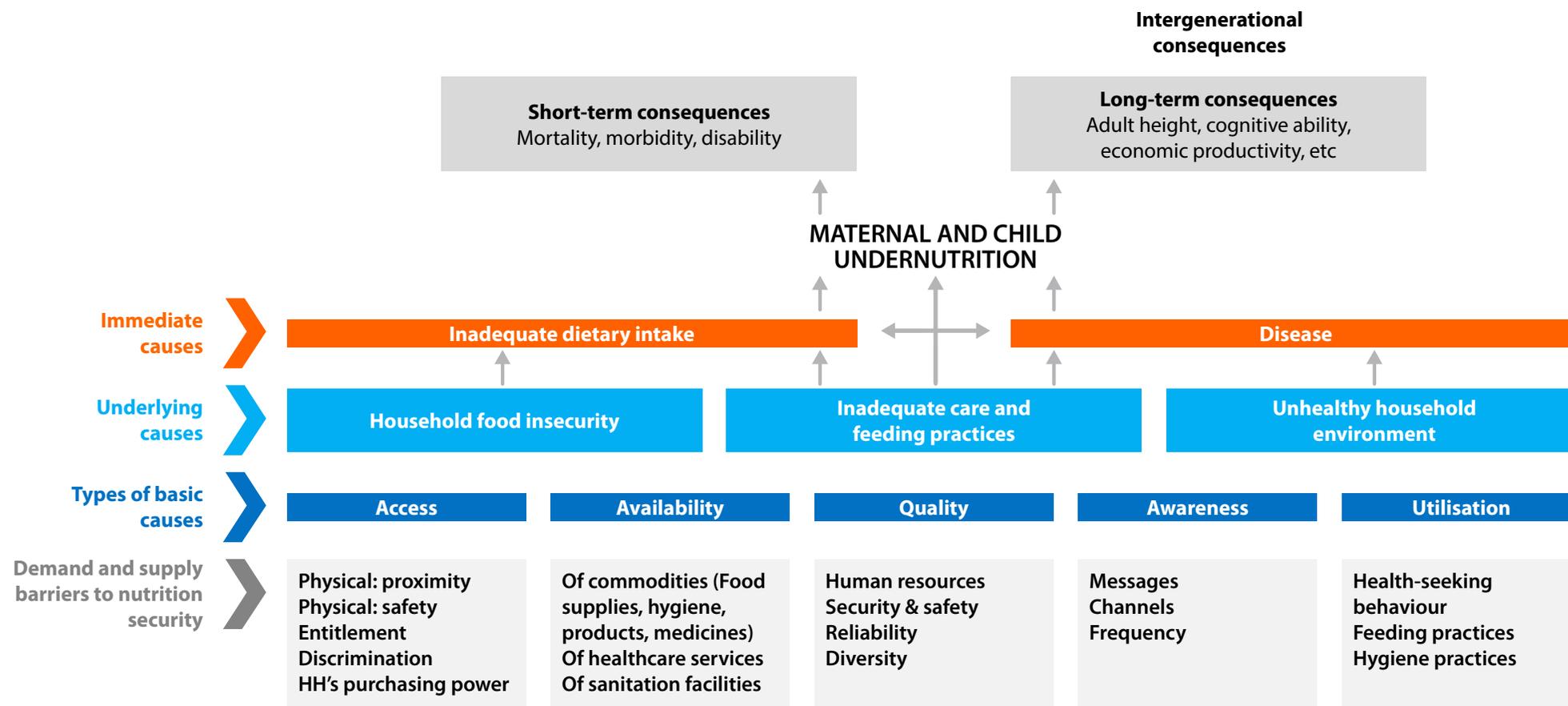
Annex 6: Glossary



Step 1: CONTEXT ANALYSIS – CONTEXTUALISING THE CONCEPTUAL FRAMEWORK OF MALNUTRITION

Step 1 helps nutrition practitioners identify the causes of malnutrition in their context and analyses what barriers are linked to demand and supply.

Pathways to Health and Nutrition outcomes: demand and supply barriers to nutrition security



Determinants of malnutrition could be directly or indirectly linked to poverty depending on the 5 sub-levels: access, availability, quality, awareness and utilization. Each sector (Food security and livelihood, Access to Wash and Health Services and Appropriate Care Practices) can be disaggregated using the 5 sub-levels as shown in Annex 1.

There are various methodologies (Annex 2) that could be used to identify the direct, underlying and basic determinants, including the sub-levels per sector. The selection of the most suitable methodology will depend on:

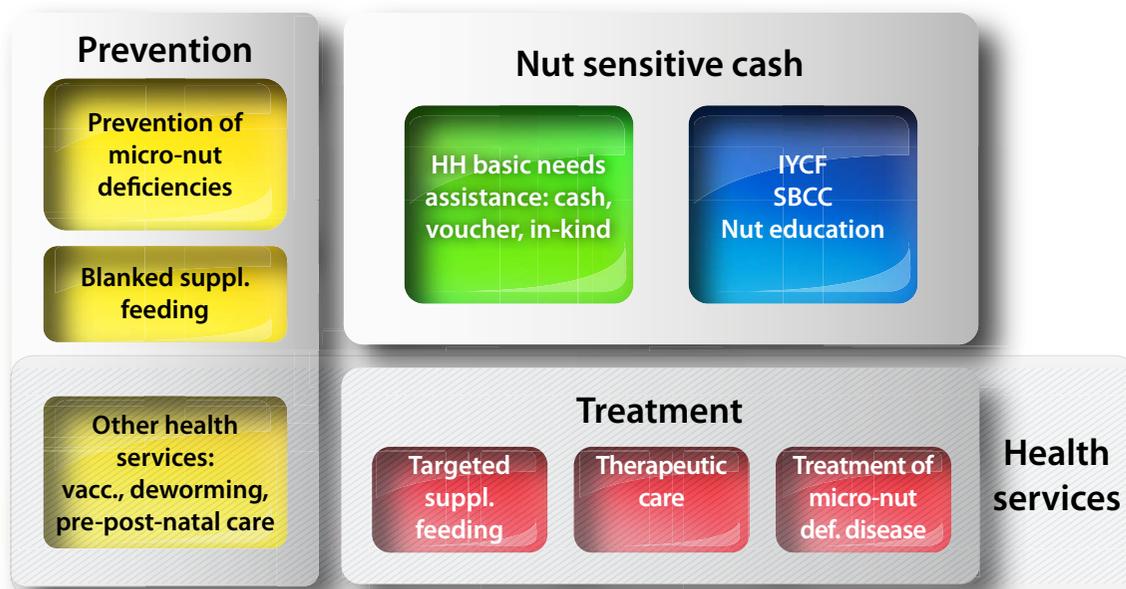
- Objectives of the assessment: have an overall understanding of the situation, or an in-depth understanding of a specific sector (eg: Health Services)
- Resources available: duration of the project, funding, technical expertise available at country and HQ levels

Step 2: ASSESS APPROPRIATENESS OF CVA TO TACKLE MALNUTRITION CAUSES

How is CVA fitting in the nutrition response?

Evidence has shown that, to be more impactful, CVA should be complemented by nutrition specific activities and sensitive interventions. Nutrition Specific activities could include health system strengthening including CMAM and provision of basic health services, Food blanket and supplementation, SBCC and IEC. Nutrition Sensitive interventions could include food security and livelihood and wash activities and women empowerment, potentially through CVA.

CVA components in a nutrition response¹



Quality and awareness: *CVA will not address quality and awareness issues. Nutrition will need to consider other options for those sub-levels, however CVA could be combined to speed up / deepen impact or impact other sub-levels.*

Which set-up is the most impactful based on evidence

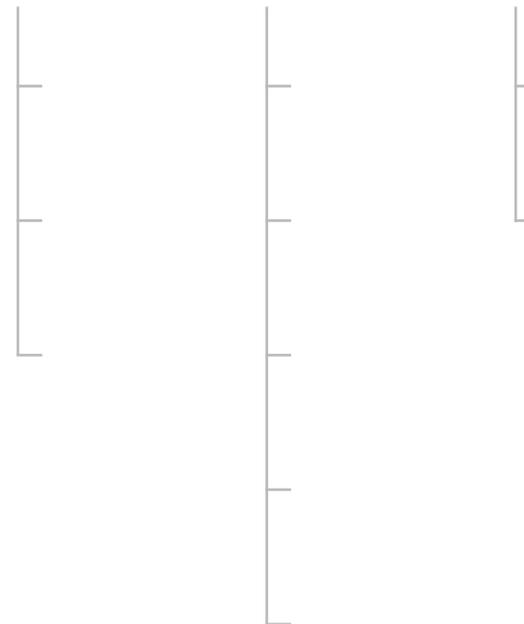
It is not possible to identify a given set of activities to address a particular set of determinants, as it is highly context dependant, but evidence has shown that some combination might be more impactful.

The database (annex 2) is listing a non-exhaustive set of evidence, and their impact, sorted according to a series of indicator: Context, duration, Outcome, Pathway (according the 5 sub-levels), type of CVA, type of nutrition specific and sensitive interventions, Impact and reliability. While each evidence has been gathered in a particular context and thus cannot be expected to have the same result in a different context, it can still provide guidance on the best combination of interventions to implement. It is complemented with Annex 3, a visual graph compiling some existing evidence on the CVA use / attribution to underlying causes of malnutrition.

¹Webinar *Using cash and voucher assistance for nutrition outcomes*, Andre Durr

Step 3: CORE CONSIDERATIONS FOR CVA-IN-NUTRITION PROGRAMME DESIGN & IMPLEMENTATION

Once the best set of combination is identified (step 2) to address contextualized malnutrition causes (step 1), this table aims at helping humanitarian workers how to design the programme. The table lists for each modality key considerations and direct practitioners to operational tools to guide them and help them tailor each modality to achieve programme objectives. However, not all tools should be used: only those for modalities where expertise is missing. Also, beyond specific considerations for each modality, the graph below aims at encouraging combination of modalities: not to select which modality is the most appropriate and how to design it but rather how to best design each modality as part of an integrated approach. The full list of modalities is available (*Annex 5*).



Cash and Voucher Assistance
SBCC: Review of existing nutrition and health services & CSOs /Community diagnosis and barrier assessment /Designing/scaling up communication strategy and tools
Cross Cutting: Gender