

ANNEX 4: SET OF EVIDENCE

	Country 1 : Nicaragua Country 2 : Niger Commentaires Région/District : (disaster response droughts)	Country 1 : Nicaragua Country 2 : Niger Commentaires Région/District : (disaster response droughts)	Country 1 : Niger Country 2 : Commentaires Région/District : Maradi
	Target 1 : 0-24 months Target 2 : Household Target 3 :	Target 1 : 0-24 months Target 2 : Household Target 3 :	Target 1 : SAM Target 2 : MAM Target 3 :
	Context : Emergency/Crisis Duration : Not specified Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Emergency/Crisis Duration : Not specified Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)
PATHWAYS	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Access to health services (physical or power purchase) Pathways 4 :	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Access to health services (physical or power purchase) Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : General Food distribution SBCC : None	Health Services : None Distribution : Supplementary feeding (MAM) SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	None	Not specified
IMPACT	Low	Low	High
RELIABILITY	Low	Medium	High

ANNEX 4: SET OF EVIDENCE

COMMENTS			Here, the researchers compare the effectiveness of seven preventative strategies—including the distribution of nutritious supplementary foods with and without additional household support (food or CVA) and CVA alone—on the incidence (occurrence) of moderate and severe acute malnutrition among children aged 6–23 months living in 48 villages in the Madarounfa district of Niger between August and December, 2011
SOURCE (LINK)	https://www.alnap.org/system/files/content/resource/files/main/pega-et-al-2015-the-cochrane-library-sup-2.pdf	https://www.alnap.org/system/files/content/resource/files/main/pega-et-al-2015-the-cochrane-library-sup-2.pdf	https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1001714

ANNEX 4: SET OF EVIDENCE

	Country 1 : Bangladesh Country 2 : Commentaires Région/District :	Country 1 : Myanmar Country 2 : Commentaires Région/District :	Country 1 : Pakistan Country 2 : Commentaires Région/District : (Dabu District)
	Target 1 : 0-59 months Target 2 : Household Target 3 :	Target 1 : Pregnant and Lacting Women Target 2 : 0-24 months Target 3 :	Target 1 : Poor/Very Poor/Ultra Poor Target 2 : 0-59 months Target 3 :
	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)
PATHWAYS	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Appropriate Hygiene practices Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access to health services (physical or power purchase) Pathways 3 : Access (physical or power purchase) to food (quality and quantity) Pathways 4 : Access to Hygiene services (latrine, drinking water)	Pathways 1 : Appropriate Feeding practices Pathways 2 : Availability of commodities (Food supplies, hygiene, products, medicines) Pathways 3 : Access (physical or power purchase) to food (quality and quantity) Pathways 4 : Appropriate Hygiene practices
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Both experience
NUTRITION SPECIFIC INTERVENTIONS	Health Services : CMAM only Distribution : None SBCC : Both	Health Services : None Distribution : Not specified SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	None	Wash (soft and/or Hard)	Food Security and livelihoods (Income Generating Activities/ Agriculture)
IMPACT	High	Medium	Medium
RELIABILITY	High	High	High

ANNEX 4: SET OF EVIDENCE

COMMENTS	A rigorous evaluation found that only one of the five options – cash plus nutrition BCC – achieved a statistically significant reduction in child malnutrition rates: driven by improvements in child's diet and reductions in illness		
	Impacts on stunting were larger for children who were exposed to the program for a longer period of time and concentrated in poorer areas. The cash-only intervention had relatively limited impacts , with no impact on the proportion of stunted children on average.		
SOURCE (LINK)	https://ssrn.com/abstract=3467596		
	https://www.poverty-action.org/study/impact-maternal-cash-transfers-child-malnutrition-myanmar		
	Here, the researchers compare the effectiveness of seven preventative strategies—including the distribution of nutritious supplementary foods with and without additional household support (food or CVA) and CVA alone—on the incidence (occurrence) of moderate and severe acute malnutrition among children aged 6–23 months living in 48 villages in the Madarounfa district of Niger between August and December, 2011		
	https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002305		

ANNEX 4: SET OF EVIDENCE

		Country 1 : Niger Country 2 : Commentaires Région/District : (Aguié District, Maradi)	Country 1 : Uganda Country 2 : Commentaires Région/District : (Karamoja)	Country 1 : Niger Country 2 : Commentaires Région/District : (Affala and Takanamatt in Tahoua)	
		Target 1 : Poor/Very Poor/Ultra Poor Target 2 : 0-59 months Target 3 :	Target 1 : 0-59 months Target 2 : Household Target 3 :	Target 1 : 0-59 months Target 2 : Household Target 3 : Pregnant and Lacting Women	
		Context : Emergency/Crisis Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Not specified Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	
	PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Availability of commodities (Food supplies, hygiene, products, medicines) Pathways 3 : Appropriate Feeding practices Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Availability of commodities (Food supplies, hygiene, products, medicines) Pathways 3 : Pathways 4 :	
	CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Restricted (Vouchers)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	
	NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Not specified	Health Services : None Distribution : None SBCC : None	Health Services : CMAM only Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	
	NUTRITION SENSITIVE INTERVENTIONS	None	None	None	
	IMPACT	Medium	High	Low	
	RELIABILITY	Medium	Medium	High	

ANNEX 4: SET OF EVIDENCE

COMMENTS	Improvements recorded despite decline in child health and women's well-being. Suggest it's plausible that cash in an emergency can safeguard living standards but cannot attribute change in status to CVA.	Uganda (not humanitarian per se) Unenforced condition only for enrollment at early childhood development centres; therefore categorised has UCT rather than CCT	Modified 6 month UCT plus 4 months supplementary feeding did not reduce the prevalence of GAM compared with the standard 4 month UCT plus 4 months SF. Baseline prevalence of GAM remained elevated at endline possibly driven by increased fever/malaria in children.
	https://www.cambridge.org/core/journals/public-health-nutrition/article/role-of-unconditional-cash-transfers-during-a-nutritional-emergency-in-maradi-region-niger-a-prepost-intervention-observational-study/24E95FC5C6F8DEACD004CF50FBAC6967	https://documents.wfp.org/stellent/groups/public/documents/resources/wfp257677.pdf	https://admin.concern.net/sites/default/files/media/migrated/evidence_from_a_cluster_randomised_trial_of_unconditional_cash_transfers_in_niger.pdf

ANNEX 4: SET OF EVIDENCE

	Country 1 : DRC Country 2 : Commentaires Région/District : (Bipemba)	Country 1 : Niger Country 2 : Commentaires Région/District : (Maradi)	Country 1 : Burkina Faso Country 2 : Commentaires Région/District : (Tapoa)
	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Access to health services (physical or power purchase) Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : CMAM only Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : CMAM only Distribution : Not specified SBCC : Not specified	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Food Security and livelihoods (Income Generating Activities/ Agriculture)	Food Security and livelihoods (Income Generating Activities/ Agriculture)	Food Security and livelihoods (Income Generating Activities/ Agriculture)
IMPACT	High	Low	Low
RELIABILITY	High	High	High

ANNEX 4: SET OF EVIDENCE

COMMENTS		Moderate Malnutrition cash Study (MMS) with Save the Children If CVA benefits are to be maximised to help prevent the occurrence of wasting in under-fives, then attention needs to focus on removing health-related barriers.	CMAM active in intervention areas but not specific to intervention. UCTs do not prevent undernutrition; absence of significant improvements Women reported using approx. ¼ of monthly UCT to buy food for the child while main portion used to increase hh food stock
SOURCE (LINK)	https://bmcmmedicine.biomedcentral.com/articles/10.1186/s12916-017-0848-y	https://www.researchgate.net/publication/264732719_Seasonal_unconditional_cash_transfers_and_wasting_in_Niger/link/53ece0730cf23733e804d49c/download	https://www.ncbi.nlm.nih.gov/pubmed/28539413?dopt=Abstract

ANNEX 4: SET OF EVIDENCE

	Country 1 : South Soudan Country 2 : Commentaires Région/District : (Warrap State)	Country 1 : Mali Country 2 : Commentaires Région/District : (Kayes region)	Country 1 : Niger Country 2 : Commentaires Région/District : (Tahoua)
	Target 1 : 0-59 months Target 2 : Household Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :	Target 1 : 0-24 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :
	Context : Stable Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Not specified Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Availability of commodities (Food supplies, hygiene, products, medicines) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : Not specified Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : CMAM only Distribution : Not specified SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	Multisectorial	Not specified	Food Security and livelihoods (Income Generating Activities/ Agriculture)
IMPACT	High	Medium	High
RELIABILITY	Medium	Medium	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS			
SOURCE (LINK)	https://www.actionagainsthunger.org/sites/default/files/publications/Cash_Grant_Supported_Income_Generating_Activities_Twic_and_Gogrial_West_Counties_Warrap_State_Southern_Sudan_09.2010.pdf	https://academic.oup.com/ajcn/advance-article-abstract/doi/10.1093/ajcn/nqz238/5575337?redirectedFrom=fulltext	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5825977/

ANNEX 4: SET OF EVIDENCE

	Country 1 : Niger Country 2 : Commentaires Région/District : (Maradi, Tessaoua district)	Country 1 : Bangladesh Country 2 : Commentaires Région/District : (Jaldhaka, Hatibandah, Narayanganj)	Country 1 : Yemen Country 2 : Commentaires Région/District : (Al Hodeidah)
	Target 1 : Poor/Very Poor/Ultra Poor Target 2 : 0-59 months Target 3 :	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : 0-24 months Target 2 : Pregnant and Lacting Women Target 3 :
	Context : Protracted-chronic/seasonal Duration : Not specified Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Emergency/Crisis Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Appropriate Hygiene practices Pathways 3 : Appropriate care practices (health include) Pathways 4 : Access (physical or power purchase) to food (quality and quantity)
CASH AND VOUCHER ASSISTANCE	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Labelled Restriction : Not Restricted (cash)	Conditionnality : Labelled Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Community and social mobilization/Mass communication	Health Services : CMAM only Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : CMAM only Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	None	Education	Multisectorial
IMPACT	Low	Medium	High
RELIABILITY	Medium	Medium	High

ANNEX 4: SET OF EVIDENCE

COMMENTS			LCT+ may decrease probability of children being diagnosed with MAM/SAM Soft conditions effective in conflict settings to encourage participation without risk of consequences.
SOURCE (LINK)	https://resourcecentre.savethechildren.net/node/3983/pdf/3983.pdf	http://documents.worldbank.org/curated/en/275011468003307908/pdf/WPS7077.pdf	http://www.ifpri.org/publication/cash-nutrition-intervention-yemen-impact-evaluation-study

ANNEX 4: SET OF EVIDENCE

	Country 1 : Kenya Country 2 : Commentaires Région/District : (Garissa District including Dabaab refugee camps)	Country 1 : Kenya Country 2 : Commentaires Région/District : (Garissa District including Dabaab refugee camps)	Country 1 : Bolivia Country 2 : Commentaires Région/District : (Bolivian Chaco)
	Target 1 : 0-59 months Target 2 : Household Target 3 :	Target 1 : Household Target 2 : 0-59 months Target 3 :	Target 1 : Household Target 2 : 0-59 months Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)	Context : Emergency/Crisis Duration : < 1 year Outcome : NUTRITIONAL STATUS (MAM, SAM rates; WHZ; WAZ; MUAC)
PATHWAYS	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate Hygiene practices Pathways 4 : Access (physical or power purchase) to food (quality and quantity)	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate Hygiene practices Pathways 4 : Access (physical or power purchase) to food (quality and quantity)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Access to Hygiene services (latrine, drinking water) Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Restriction : Restricted (Vouchers)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : CMAM + IMCI + maternal health Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	Not specified	Food Security and livelihoods (Income Generating Activities/ Agriculture)	Wash (soft and/or Hard)
IMPACT	Medium	Medium	Medium
RELIABILITY	Medium	Low	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	<p>Vouchers for Fresh Foods</p> <p>Significant increase in consumption of more than 4 food groups and iron-rich foods</p> <p>Part of ACF Meta-Evaluation of FFVs</p>		
SOURCE (LINK)	<p>https://www.usaid.gov/sites/default/files/documents/1866/14.%20%20Atelier%20Food%20Voucher%20ACF%20Fresh%20Food%20Voucher%20Meta%20Evaluation%202012.pdf</p>	<p>https://www.actionagainsthunger.org/sites/default/files/publications/External_Evaluation_Fresh_Food_Voucher_Project_by_Action_Against_Hunger_Dadaab_Refugee_Camp_Kenya_04.2009.pdf</p>	<p>http://www.cashlearning.org/downloads/resources/evaluations/ACF%20Bolivia%20FFV%20Evaluation%20June%202011.pdf</p>

ANNEX 4: SET OF EVIDENCE

	Country 1 : Niger Country 2 : Commentaires Région/District :	Country 1 : Indonesia Country 2 : Commentaires Région/District : (Java Central)	Country 1 : Somalia Country 2 : Commentaires Région/District : (Mogadiscio)
	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Household Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Emergency/Crisis Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Availability of commodities (Food supplies, hygiene, products, medicines) Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : Supplementary feeding (MAM) SBCC : None	Health Services : None Distribution : Not specified SBCC : Not specified	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Not specified	Not specified	Wash (soft and/or Hard)
IMPACT	Medium	Low	Medium
RELIABILITY	Medium	Low	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS	Evaluation of distribution strategies to prevent malnutrition Cash at x4 value of special foods gives similar nutritional impact to provision of SF items	CVA programmes can play an integral role in helping households protect their consumption of essential nutrients during crisis. Specifically targeted micronutrient supplementation programmes may have to accompany CVA to ensure that key micronutrients are not sacrificed during crises. If the relative price of the staple increases during a crisis, households receiving a CVA may choose to spend more of their additional income on that same staple as long as it continues to be the cheapest source of calories and energy.	UCT did not appear to reduce the risk of acute malnutrition incidence Attribution not achieved.
SOURCE (LINK)	http://nutritioncluster.net/?get=002086%7C2014/07/MAM-Decision-Tool-final-June-2014-corrected.pdf	https://www.enonline.net/fex/41/cash	https://www.researchgate.net/publication/328583464_A_cash-based_intervention_and_the_risk_of_acute_malnutrition_in_children_aged_6-59_months_living_in_internally_displaced_persons_camps_in_Mogadishu_Somalia_A_non-randomised_cluster_trial

ANNEX 4: SET OF EVIDENCE

	Country 1 : Malawi Country 2 : Commentaires Région/District : (Districts of Chikwawa and Machinga)	Country 1 : Yemen Country 2 : Commentaires Région/District : (Hajjah and Ibb)	Country 1 : Lebanon Country 2 : Commentaires Région/District : (Districts of Akkar, Bekaa, Mt Lebanon)
	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Emergency/Crisis Duration : 1-3 years Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Emergency/Crisis Duration : 1-3 years Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Access to health services (physical or power purchase) Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : Supplementary feeding (MAM SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : General Food distribution SBCC : None	Health Services : Not specified Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Food Security and livelihoods (Income Generating Activities/ Agriculture)	Food Security and livelihoods (Income Generating Activities/ Agriculture)	None
IMPACT	Medium	Low	Medium
RELIABILITY	Medium	High	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS			
	http://www.cashlearning.org/downloads/wfp225957.pdf	https://www.unicef-irc.org/publications/965-comparing-the-productive-effects-of-cash-and-food-transfers-in-a-crisis-setting-evidence.html	Not focused on nutrition-sensitive activities or nutrition outcomes; dietary diversity not measured as part of a nutrition or anthropometric outcome
SOURCE (LINK)			https://data2.unhcr.org/en/documents/download/43901

ANNEX 4: SET OF EVIDENCE

	Country 1 : Bangladesh Country 2 : Commentaires Région/District :	Country 1 : Niger Country 2 : Commentaires Région/District : (Maradi)	Country 1 : Burkina Faso Country 2 : Commentaires Région/District :
	Target 1 : 0-24 months Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :
	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Emergency/Crisis Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate Hygiene practices Pathways 4 : Appropriate care practices (health include)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Availability of commodities (Food supplies, hygiene, products, medicines) Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	None	None
IMPACT	High	Medium	High
RELIABILITY	High	Medium	High

ANNEX 4: SET OF EVIDENCE

COMMENTS	Along with reduction in illness UCT is efficacious in reducing micronutrient malnutrition but have limited effects on chronic undernutrition	Improvements recorded despite decline in child health and women's well-being. Suggest it's plausible that cash in an emergency can safeguard living standards but cannot attribute change in status to CVA.	Quantitative study Eggs, fats, B-12; more dairy; iron-rich or fortified 2/3 of treatment arms had minimum DD compared to 1/3 of control arm Seasonal UCT can be recommended in actions addressing children's dietary intake during the lean season
	https://ssrn.com/abstract=3467596	https://www.cambridge.org/core/journals/public-health-nutrition/article/role-of-unconditional-cash-transfers-during-a-nutritional-emergency-in-maradi-region-niger-a-prepost-intervention-observational-study/24E95FC5C6F8DEACD004CF50FBAC6967	https://www.ncbi.nlm.nih.gov/pubmed/28566529?dopt=Abstract

ANNEX 4: SET OF EVIDENCE

	Country 1 : DRC Country 2 : Commentaires Région/District : (Bipemba, Kasai-Oriental)	Country 1 : Burkina Faso Country 2 : Commentaires Région/District : (Topoa province)	Country 1 : South Soudan Country 2 : Commentaires Région/District : (Juba)
	Target 1 : SAM Target 2 : 0-59 months Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :	Target 1 : Pregnant and Lacting Women Target 2 : 0-59 months Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Hygiene practices Pathways 3 : Appropriate Feeding practices Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : CMAM only Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	None	Food Security and livelihoods (Income Generating Activities/ Agriculture)	Multisectorial
IMPACT	High	Medium	Low
RELIABILITY	High	Low	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS	<p>60% of the intervention group's households had achieved a high dietary diversity, whereas only 17% of the non-intervened group had an acceptable dietary diversity at this time Assume reduced RUTF sharing within HH.</p>	<p>Multiannual, seasonal UCT increased dietary diversity in children and their caregivers. They can be recommended in actions aiming to improve maternal and child diet diversity.</p> <p>Other factors not accounted for.</p>	
SOURCE (LINK)	<p>https://bmcmmedicine.biomedcentral.com/articles/10.1186/s12916-017-0848-y</p>	<p>https://www.cambridge.org/core/journals/public-health-nutrition/article/effects-of-multiannual-seasonal-unconditional-cash-transfers-on-food-security-and-dietary-diversity-in-rural-burkina-faso-the-moderate-acute-malnutrition-out-mamout-clusterrandomized-controlled-trial/7AB291809858C8950F2A1AC667E26971</p>	<p>http://www.cashlearning.org/downloads/user-submitted-resources/2019/09/1569515599.WV_Impact%20of%20CVP%20on%20nutrition%20outcomes_case%20studies_full%20report_July%202019.pdf</p>

ANNEX 4: SET OF EVIDENCE

	Country 1 : Bangladesh Country 2 : Commentaires Région/District : (Khulna and Satkhira districts, and Dacope & Korya)	Country 1 : Niger Country 2 : Commentaires Région/District : (Tessaoua district, Maradi region)	Country 1 : South Soudan Country 2 : Commentaires Région/District : (Warrap state)
	Target 1 : Pregnant and Lacting Women Target 2 : Poor/Very Poor/Ultra Poor Target 3 : 0-59 months	Target 1 : Poor/Very Poor/Ultra Poor Target 2 : 0-59 months Target 3 :	Target 1 : 0-59 months Target 2 : Household Target 3 :
	Context : Stable Duration : 1-3 years Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)
PATHWAYS	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access to Hygiene services (latrine, drinking water) Pathways 3 : Appropriate Feeding practices Pathways 4 : Access to health services (physical or power purchase)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Access to health services (physical or power purchase) Pathways 3 : Access to Hygiene services (latrine, drinking water) Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Both	Health Services : None Distribution : None SBCC : Community and social mobilization/ Mass communication	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Women empowerment	None	Multisectorial
IMPACT	Low	Medium	Low
RELIABILITY	Low	Low	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	<p>Anecdotal feedback about decrease in GAM; assumed increase in micronutrient intake but not properly evidenced; self-reported improvement in FC because of SBCC</p> <p>Increase in quality, quantity, frequency of meals; moderate CSI</p> <p>Attribution not clear; qualitative study.</p>	<p>Pilot Safety Net</p> <p>Larger transfer may have been considered to increase meat consumption or micronutrient supplements</p>	<p>Seasonal and general food availability changes including increasing food prices for staple foods might have pushed hhs to invest in core staples rather than additional food items in some areas.</p>
SOURCE (LINK)	<p>http://www.cashlearning.org/downloads/user-submitted-resources/2019/09/1569515599.WV_Impact%20of%20CVP%20on%20nutrition%20outcomes_case%20studies_full%20report_July%202019.pdf</p>	<p>https://resourcecentre.savethechildren.net/node/3983/pdf/3983.pdf</p>	<p>https://www.actionagainsthunger.org/sites/default/files/publications/Cash_Grant_Supported_Income_Generating_Activities_Twic_and_Gogrial_West_Counties_Warrap_State_Southern_Sudan_09.2010.pdf</p>

ANNEX 4: SET OF EVIDENCE

	Country 1 : Yemen Country 2 : Commentaires Région/District :	Country 1 : Kenya Country 2 : Commentaires Région/District : (Narobi : Korogocho, Mukuru)	Country 1 : DRC Country 2 : Commentaires Région/District : (Masisi)
	Target 1 : 0-24 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :
	Context : Emergency/Crisis Duration : 1-3 years Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Emergency/Crisis Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Access to health services (physical or power purchase) Pathways 4 : Access to Hygiene services (latrine, drinking water)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Labelled Restriction : Not Restricted (cash)	Conditionnality : Labelled Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Restricted (Vouchers)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Multisectorial	Food Security and livelihoods (Income Generating Activities/ Agriculture)	None
IMPACT	High	Low	Low
RELIABILITY	High	Medium	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	<p>Fresh food consumption relates to seasonal availability CVA were important in allowing households to maintain or even increase purchases of non-staple foods Impacts strongest among poorest households</p>	<p>Measure HDDS ; IDDS ; CSI ; anthro measures only at endline W/H; MUAC HH initially encouraged to spend cash on food and then on business investments. HH ate more foods but not more in larger quantities. Suggests a need to combine more effectively with nutritional programming.</p>	<p>Vouchers cause some distortion and result in resale of some items; No significant or added benefits to use of vouchers here; CVA were the more cost effective modality for both the implementing agency and program recipients in this context (ldps)</p>
SOURCE (LINK)	<p>http://www.ifpri.org/publication/cash-nutrition-intervention-yemen-impact-evaluation-study</p>	<p>https://www.alnap.org/help-library/evaluation-of-concern-kenyas-korogocho-emergency-and-food-security-cash-transfer</p>	<p>https://www.povertyactionlab.org/evaluation/comparing-cash-and-voucher-transfers-humanitarian-context-evidence-democratic-republic</p>

ANNEX 4: SET OF EVIDENCE

		Country 1 : Somalia Country 2 : Commentaires Région/District : (Urban : Banadir region and Rural : Bay, Hira,, Gedo, Juba, Mudug, Shabelle)	Country 1 : Philippines Country 2 : Commentaires Région/District : (Cagayan de Ora and Iligan)	Country 1 : Kenya Country 2 : Commentaires Région/District : (Dabaab Refugee Camps)	
		Target 1 : Household Target 2 : Target 3 :	Target 1 : Pregnant and Lacting Women Target 2 : SAM Target 3 :	Target 1 : Household Target 2 : MAM Target 3 :	
		Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Emergency/Crisis Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	
	PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	
	CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Restricted (Vouchers)	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Restriction : Restricted (Vouchers)	
	NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : Blanket Feeding (Under 2, Under 5, PLW) SBCC : None	Health Services : CMAM only Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	
	NUTRITION SENSITIVE INTERVENTIONS	None	None	None	
	IMPACT	Medium	Medium	High	
	RELIABILITY	Low	Low	Low	

ANNEX 4: SET OF EVIDENCE

COMMENTS	<p>No clear attribution possible due to seasonal variations and different agency approaches.</p> <p>Strong evidence that both the cash and voucher interventions enabled households to purchase food, increase the number of meals consumed each day and increase dietary diversity</p> <p>Urban voucher recipients had comparable high-value food (HVF) consumption (75%), challenging the assumption that, because recipients receive only cereals, pulses, oil and sugar, they naturally have lower dietary diversity</p> <p>Intra-household conflict was reported in both voucher and cash projects</p>		<p>Assessed as contribution to overall decrease in GAM rate; vouchers were linked to improved availability of fresh foods in market and health education.</p> <p>Increase in consumption of more than 4 food groups and iron-rich foods; beneficiaries more than 3x as likely to eat eggs and twice as likely to eat iron-rich foods.</p> <p>Negative impact: created rumours of intentional underfeeding – suggest need to link with positive action such as GMP</p>
SOURCE (LINK)	<p>https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/8521.pdf</p>	<p>https://www.ennonline.net/fex/46/philippines</p>	<p>http://www.cashlearning.org/downloads/resources/evaluations/evaluation-of-the-acf-fresh-food-voucher-project-dadaab-kenya.pdf</p>

	Country 1 : Haiti Country 2 : Commentaires Région/District : (Port-au-Prince and Gonaïves)	Country 1 : Haiti Country 2 : Commentaires Région/District :	Country 1 : Pakistan Country 2 : Commentaires Région/District : (flood recovery) in Sindh Province
	Target 1 : Household Target 2 : Pregnant and Lacting Women Target 3 : 0-59 months	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :
	Context : Emergency/Crisis Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Emergency/Crisis Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate Hygiene practices Pathways 4 : Access to health services (physical or power purchase)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Restriction : Restricted (Vouchers)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : General Food distribution SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Wash (soft and/or Hard)	Not specified	None
IMPACT	High	Medium	Medium
RELIABILITY	Low	Low	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS	Vouchers for meat, fish, vegetables, fruit	Part of voucher used to acquire staple foods	Implemented 5 months after rapid-onset crisis Voucher not specific to fresh foods but “included” fresh foods No specific nutritional objective (generic consumption rather than diversity but still measured through HDDS)
	https://www.usaid.gov/sites/default/files/documents/1866/15.%20%20ACF%20Haiti_Aligning%20Case%20Study_EN_Aug%202012_LD%20(2).pdf	https://www.usaid.gov/sites/default/files/documents/1866/14.%20%20Atelier%20Food%20Voucher%20ACF%20Fresh%20Food%20Voucher%20Meta%20Evaluation%202012.pdf	https://www.usaid.gov/sites/default/files/documents/1866/14.%20%20Atelier%20Food%20Voucher%20ACF%20Fresh%20Food%20Voucher%20Meta%20Evaluation%202012.pdf

ANNEX 4: SET OF EVIDENCE

	Country 1 : Bolivia Country 2 : Commentaires Région/District :	Country 1 : Malawi Country 2 : Commentaires Région/District : (Dowa District)	Country 1 : Nicaragua Country 2 : Niger Commentaires Région/District :
	Target 1 : 0-59 months Target 2 : Pregnant and Lacting Women Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : DIETARY INTAKE (Quantity and Quality of Diet; Protein and Micronutrient Intake; Frequency of Meals)	Context : Emergency/Crisis Duration : < 1 year Outcome : HEALTH STATUS: Frequency of Illness; Treatment of Disease	Context : Protracted-chronic/seasonal Duration : Not specified Outcome : HEALTH STATUS: Frequency of Illness; Treatment of Disease
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate care practices (health include) Pathways 4 :	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	Food Security and livelihoods (Income Generating Activities/ Agriculture)	None
IMPACT	Low	High	Low
RELIABILITY	Low	Low	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS	<p>Implication that RCV was insufficient to prevent macronutrient decline.</p> <p>Part of a larger drought-mitigation programme; level of overlap between DRM recipients and RCV recipients unclear.</p>		
SOURCE (LINK)	<p>https://www.usaid.gov/sites/default/files/documents/1866/14.%20%20Atelier%20Food%20Voucher%20ACF%20Fresh%20Food%20Voucher%20Meta%20Evaluation%202012.pdf</p>	<p>http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.114.9379&rep=rep1&type=pdf</p>	<p>https://www.alnap.org/system/files/content/resource/files/main/pega-et-al-2015-the-cochrane-library-sup-2.pdf</p>

ANNEX 4: SET OF EVIDENCE

	Country 1 : Niger Country 2 : Commentaires Région/District : (Maradi)	Country 1 : Bangladesh Country 2 : Commentaires Région/District :	Country 1 : South Soudan Country 2 : Commentaires Région/District : (Warrap state)
	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Household Target 3 :
	Context : Emergency/Crisis Duration : < 1 year Outcome : HEALTH STATUS: Frequency of Illness; Treatment of Disease	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : HEALTH STATUS: Frequency of Illness; Treatment of Disease	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : HEALTH STATUS: Frequency of Illness; Treatment of Disease
PATHWAYS	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Appropriate Feeding practices Pathways 4 :	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Appropriate care practices (health include) Pathways 3 : Appropriate Hygiene practices Pathways 4 : Appropriate Feeding practices	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	None	Multisectorial
IMPACT	Low	High	High
RELIABILITY	High	High	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	Highlight the importance of the health-related determinants of child undernutrition and suggest that a potential role of emergency CVA may be to enable and promote health service access where services exist. Medical expenditures, child illness, low baseline WHZ, and poverty—to be associated with a high risk of the development of acute malnutrition.	Along with improved DD	Suggest might have been due to seasonal changes or improved hh level income overall.
SOURCE (LINK)	https://journals.sagepub.com/doi/10.1177/0379572116654772	https://ssrn.com/abstract=3467596	https://www.actionagainsthunger.org/sites/default/files/publications/Cash_Grant_Supported_Income_Generating_Activities_Twic_and_Gogrial_West_Counties_Warrap_State_Southern_Sudan_09.2010.pdf

ANNEX 4: SET OF EVIDENCE

	Country 1 : Haiti Country 2 : Commentaires Région/District :	Country 1 : Malawi Country 2 : Commentaires Région/District : (Dowa District)	Country 1 : Somalia Country 2 : Commentaires Région/District : (IDPs) : Mogadiscio
	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :
	Context : Emergency/Crisis Duration : < 1 year Outcome : HEALTH STATUS: Frequency of Illness; Treatment of Disease	Context : Emergency/Crisis Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Appropriate care practices (health include) Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Access to Hygiene services (latrine, drinking water) Pathways 3 : Appropriate Feeding practices Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : Blanket Feeding (Under 2, Under 5, PLW) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Not specified	Food Security and livelihoods (Income Generating Activities/ Agriculture)	Wash (soft and/or Hard)
IMPACT	Low	Medium	Medium
RELIABILITY	Low	Low	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	Below SPHERE standards	Meals per day ; food expenditures; HDDS	Increased monthly hh expenditure; no division of expenditure amounts Lack of attribution or accounting for complementary activities. (see also Fenn et al, 2017 REFANI
	https://www.usaid.gov/sites/default/files/documents/1866/14.%20%20Atelier%20Food%20Voucher%20ACF%20Fresh%20Food%20Voucher%20Meta%20Evaluation%202012.pdf	http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.114.9379&rep=rep1&type=pdf	https://www.researchgate.net/publication/328583464_A_cash-based_intervention_and_the_risk_of_acute_malnutrition_in_children_aged_6-59_months_living_in_internally_displaced_persons_camps_in_Mogadishu_Somalia_A_non-randomised_cluster_trial

ANNEX 4: SET OF EVIDENCE

	Country 1 : Niger Country 2 : Commentaires Région/District : (Maradi, Aguié District)	Country 1 : Niger Country 2 : Commentaires Région/District : (Zinder)	Country 1 : Yemen Country 2 : Commentaires Région/District : (Hajjah and Ibb)
	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :
	Context : Emergency/Crisis Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Emergency/Crisis Duration : 1-3 years Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : General Food distribution SBCC : None	Health Services : None Distribution : General Food distribution SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	None	None
IMPACT	Medium	Low	Medium
RELIABILITY	Medium	High	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	Suggest it's plausible that cash in an emergency can safeguard living standards but cannot attribute change in status to CVA.	Food basket recipients experienced larger positive impacts on FCS and diet quality Households receiving cash spent a large portion (38%) of monthly transfers on bulk grain purchases and were 30% more likely than in-kind households to do so in the lean season. Bulk grain purchases were considered a strategy to take advantage of seasonally low food prices.	Measured daily caloric intake
SOURCE (LINK)	https://www.cambridge.org/core/journals/public-health-nutrition/article/role-of-unconditional-cash-transfers-during-a-nutritional-emergency-in-maradi-region-niger-a-prepost-intervention-observational-study/24E95FC5C6F8DEACD004CF50FBAC6967	http://ebrary.ifpri.org/cdm/ref/collection/p15738coll2/id/128125	https://www.unicef-irc.org/publications/965-comparing-the-productive-effects-of-cash-and-food-transfers-in-a-crisis-setting-evidence.html

ANNEX 4: SET OF EVIDENCE

		Country 1 : Zambia Country 2 : Commentaires Région/District : (Mongu and Kaoma districts)	Country 1 : South Soudan Country 2 : Commentaires Région/District : (Juba)	Country 1 : Bangladesh Country 2 : Commentaires Région/District : (Khulna and Satkhira districts, and Dacope & Korya)	
		Target 1 : Household Target 2 : Target 3 :	Target 1 : Pregnant and Lacting Women Target 2 : 0-59 months Target 3 :	Target 1 : Pregnant and Lacting Women Target 2 : Poor/Very Poor/Ultra Poor Target 3 : 0-59 months	
		Context : Emergency/Crisis Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Stable Duration : 1-3 years Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	
	PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate Hygiene practices Pathways 4 :	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access to Hygiene services (latrine, drinking water) Pathways 3 : Appropriate Feeding practices Pathways 4 : Access to health services (physical or power purchase)	
	CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)	
	NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : None SBCC : Community and social mobilization/ Mass communication	Health Services : None Distribution : None SBCC : Both	
	NUTRITION SENSITIVE INTERVENTIONS	None	Multisectorial	Women empowerment	
	IMPACT	Low	Low	Low	
	RELIABILITY	Low	Low	Low	

ANNEX 4: SET OF EVIDENCE

COMMENTS	Public works programmes Assume people purchased amounts of food similar to food ration and therefore of similar nutritional value Significant time costs to market noted	Dietary diversity still low and protein/MN intake may not be sufficient	Self-reported improvement in FC because of SBCC
	https://www.odl.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/872.pdf	http://www.cashlearning.org/downloads/user-submitted-resources/2019/09/1569515599.WV_Impact%20of%20CVP%20on%20nutrition%20outcomes_case%20studies_full%20report_July%202019.pdf	http://www.cashlearning.org/downloads/user-submitted-resources/2019/09/1569515599.WV_Impact%20of%20CVP%20on%20nutrition%20outcomes_case%20studies_full%20report_July%202019.pdf

	Country 1 : Niger Country 2 : Commentaires Région/District : (Tessaoua distrctit, Maradi region)	Country 1 : Ecuador Country 2 : Commentaires Région/District : (Colombian refugees) in Carchi and Sucumbios	Country 1 : Niger Country 2 : Commentaires Région/District : (Koni and Illela departments) in the Tahoua region and Tessaoua department in the Maradi region
	Target 1 : Poor/Very Poor/Ultra Poor Target 2 : 0-59 months Target 3 :	Target 1 : Poor/Very Poor/Ultra Poor Target 2 : Target 3 :	Target 1 : 0-24 months Target 2 : Pregnant and Lacting Women Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Emergency/Crisis Duration : < 1 year Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Both experience	Conditionnality : Labelled Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Community and social mobilization/ Mass communication	Health Services : None Distribution : General Food distribution SBCC : Both	Health Services : None Distribution : Blanket Feeding (Under 2, Under 5, PLW) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	None	None	None
IMPACT	Low	Low	Medium
RELIABILITY	Medium	Medium	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	Pilote Safety Net	WFP Condition on nutrition training attendance Cash impact is low	Label is 'cash to protect BSFP rations' BCC during distributions Measured SF utilisation, meal frequency and food expenditure, CSI; understanding of BCC (not KAP) General increase in SAM (MUAC) in area; attributed to malaria epidemic
	https://resourcecentre.savethechildren.net/node/3983/pdf/3983.pdf	https://www.sciencedirect.com/science/article/pii/S0304387813001715	https://www.unicef.org/evaldatabase/files/Niger-HQ_2010-007_UNICEF_Cash_Transfer_-_Final_Evaluation.pdf

ANNEX 4: SET OF EVIDENCE

	Country 1 : OPT Country 2 : Commentaires Région/District : (financial crisis)	Country 1 : Malawi Country 2 : Commentaires Région/District : (Dowa District)	Country 1 : Niger Country 2 : Commentaires Région/District : (Maradi, Aguié District)
	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :
	Context : Emergency/Crisis Duration : 1-3 years Outcome : HOUSEHOLD FOOD SECURITY (Expenditure on HH foods; Access to diverse foods; Availability of diverse foods)	Context : Emergency/Crisis Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Emergency/Crisis Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate care practices (health include) Pathways 4 :	Pathways 1 : Availablity of commodities (Food supplies, hygiene, products, medicines) Pathways 2 : Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	Food Security and livelihoods (Income Generating Activities/ Agriculture)	None
IMPACT	Medium	Medium	Medium
RELIABILITY	Low	Low	Medium

ANNEX 4: SET OF EVIDENCE

COMMENTS	To address declining protein consumption due to high food prices		
	Improved for women and girls		
SOURCE (LINK)	Suggest it's plausible that cash in an emergency can safeguard living standards but cannot attribute change in status to CVA.		
	https://www.usaid.gov/sites/default/files/documents/1866/14.%20%20Atelier%20Food%20Voucher%20ACF%20Fresh%20Food%20Voucher%20Meta%20Evaluation%202012.pdf		
	http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.114.9379&rep=rep1&type=pdf		
	https://www.cambridge.org/core/journals/public-health-nutrition/article/role-of-unconditional-cash-transfers-during-a-nutritional-emergency-in-maradi-region-niger-a-prepost-intervention-observational-study/24E95FC5C6F8DEACD004CF50FBAC6967		

ANNEX 4: SET OF EVIDENCE

	Country 1 : Burkina Faso Country 2 : Commentaires Région/District : (Tapoa)	Country 1 : DRC Country 2 : Commentaires Région/District : (Bipemba, Kasai-Oriental)	Country 1 : Bangladesh Country 2 : Commentaires Région/District :
	Target 1 : 0-24 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : SAM Target 2 : 0-59 months Target 3 :	Target 1 : 0-24 months Target 2 : Target 3 :
	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Access to health services (physical or power purchase) Pathways 3 : Pathways 4 :	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Appropriate care practices (health include) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : CMAM only Distribution : RUTF SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	Women empowerment	None	None
IMPACT	Low	High	High
RELIABILITY	Medium	High	High

ANNEX 4: SET OF EVIDENCE

COMMENTS			Part of TMRI BCC session materials were derived from Alive & Thrive (A&T) in Bangladesh
SOURCE (LINK)	http://europepmc.org/articles/pmc5450256	https://bmcmmedicine.biomedcentral.com/articles/10.1186/s12916-017-0848-y	https://onlinelibrary.wiley.com/doi/full/10.1111/mcn.12498

ANNEX 4: SET OF EVIDENCE

	Country 1 : Burkina Faso Country 2 : Commentaires Région/District : (Nahouri)	Country 1 : Nicaragua Country 2 : Niger Commentaires Région/District :	Country 1 : Kenya Country 2 : Commentaires Région/District : (Districts of Kilifi, Tana River, Marsabit, Kitui, Mwingi, Makueni, Machakos, Mbeere and Tharaka)
	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : 0-24 months Target 2 : Household Target 3 :	Target 1 : Pregnant and Lacting Women Target 2 : 0-59 months Target 3 :
	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Emergency/Crisis Duration : Not specified Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Emergency/Crisis Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring
PATHWAYS	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access to health services (physical or power purchase) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Access to health services (physical or power purchase) Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Access to health services (physical or power purchase) Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Both experience Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Restricted (Vouchers)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : None SBCC : None	Health Services : CMAM only Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	Education	None	Multisectorial
IMPACT	Medium	Low	Medium
RELIABILITY	Medium	Low	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS	Giving cash to fathers leads to better nutritional outcomes during years with low rainfall	Small increase in proportion of children who received nutrient-dense foods and/or supplements	Value voucher
	http://documents.worldbank.org/curated/en/944741467047531083/pdf/WPS7730.pdf	https://www.alnap.org/system/files/content/resource/files/main/pega-et-al-2015-the-cochrane-library-sup-2.pdf	https://sarpn.org/documents/d0002197/Kenya_RAP_CRS_Oct2006.pdf

ANNEX 4: SET OF EVIDENCE

	Country 1 : Ethiopia Country 2 : Commentaires Région/District :	Country 1 : Mali Country 2 : Commentaires Région/District : (Kayes)	Country 1 : South Soudan Country 2 : Commentaires Région/District :
	Target 1 : Household Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :	Target 1 : Pregnant and Lacting Women Target 2 : Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Stable Duration : 1-3 years Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Emergency/Crisis Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Appropriate care practices (health include) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access to health services (physical or power purchase) Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Hygiene practices Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : CMAM only Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	None	None	Multisectorial
IMPACT	High	Medium	Low
RELIABILITY	Low	Low	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS		Child health identified as main motivator to attend CHCs and cash was viewed as bonus (Le Port et al, 2019 10.1093/cdn/nzz084)	Cash amount was not distinct for nutrition or livelihoods activities
SOURCE (LINK)	https://www.odg.org/sites/odg.org.uk/files/odg-assets/publications-opinion-files/424.pdf	https://academic.oup.com/ajcn/advance-article-abstract/doi/10.1093/ajcn/nqz238/5575337?redirectedFrom=fulltext	http://www.cashlearning.org/downloads/user-submitted-resources/2019/09/1569515599.WV_Impact%20of%20CVP%20on%20nutrition%20outcomes_case%20studies_full%20report_July%202019.pdf

ANNEX 4: SET OF EVIDENCE

		Country 1 : Bangladesh Country 2 : Commentaires Région/District : (Khulna and Satkhira districts, and Dacope & Korya)	Country 1 : Ecuador Country 2 : Commentaires Région/District : (Colombian refugees) : provinces of Carchi and Sucumbíos	Country 1 : Bangladesh Country 2 : Commentaires Région/District : (Jaldhaka, Hatibandah, Narayanganj)	
		Target 1 : Pregnant and Lacting Women Target 2 : Poor/Very Poor/Ultra Poor Target 3 : 0-59 months	Target 1 : Poor/Very Poor/Ultra Poor Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Household Target 3 :	
		Context : Stable Duration : 1-3 years Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	
	PATHWAYS	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access to Hygiene services (latrine, drinking water) Pathways 3 : Appropriate Feeding practices Pathways 4 : Access to health services (physical or power purchase)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Pathways 3 : Pathways 4 :	
	CASH AND VOUCHER ASSISTANCE	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Both experience	Conditionnality : Labelled Restriction : Not Restricted (cash)	
	NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : Both	Health Services : None Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	
	NUTRITION SENSITIVE INTERVENTIONS	Women empowerment	Women empowerment	Education	
	IMPACT	Low	Low	Medium	
	RELIABILITY	Low	High	Medium	

ANNEX 4: SET OF EVIDENCE

COMMENTS			
		WFP	Attendance at BCC encouraged but not mandatory.
		Conditional on nutrition training attendance (BCC)	Suggest positive impact on food consumption and high protein content food
SOURCE (LINK)	http://www.cashlearning.org/downloads/user-submitted-resources/2019/09/1569515599.WV_Impact%20of%20CVP%20on%20nutrition%20outcomes_case%20studies_full%20report_July%202019.pdf	http://www.ifpri.org/publication/impact-evaluation-cash-food-vouchers-and-food-transfers-among-colombian-refugees-and	http://documents.worldbank.org/curated/en/275011468003307908/pdf/WPS7077.pdf

	Country 1 : Niger Country 2 : Commentaires Région/District : (Koni and Illela departments) in the Tahoua region and Tessaoua department in the Maradi region	Country 1 : Yemen Country 2 : Commentaires Région/District : (Al Hodeidah)	Country 1 : Bolivia Country 2 : Commentaires Région/District : (Bolivian Chaco)
	Target 1 : 0-24 months Target 2 : Pregnant and Lacting Women Target 3 :	Target 1 : 0-24 months Target 2 : Pregnant and Lacting Women Target 3 :	Target 1 : Household Target 2 : 0-59 months Target 3 :
	Context : Emergency/Crisis Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Emergency/Crisis Duration : 1-3 years Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Emergency/Crisis Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring
PATHWAYS	Pathways 1 : Appropriate Feeding practices Pathways 2 : Appropriate care practices (health include) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate Feeding practices Pathways 2 : Appropriate Hygiene practices Pathways 3 : Appropriate care practices (health include) Pathways 4 : Access (physical or power purchase) to food (quality and quantity)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Access to Hygiene services (latrine, drinking water) Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Labelled Restriction : Not Restricted (cash)	Conditionnality : Labelled Restriction : Not Restricted (cash)	Conditionnality : Restriction : Restricted (Vouchers)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : Blanket Feeding (Under 2, Under 5, PLW) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : CMAM only Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : CMAM + IMCI + maternal health Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	None	Multisectorial	Wash (soft and/or Hard)
IMPACT	Medium	High	Medium
RELIABILITY	Medium	High	Low

ANNEX 4: SET OF EVIDENCE

COMMENTS	BCC during distributions Label is 'cash to protect BSFP rations' BCC practice is an issue of constraints	Impacts for both knowledge and practice are stronger for illiterate women and for women living with their mother-in-law rather than their own mother	Voucher for fruit, vegetables, milk, cheese, eggs, yoghurt, meat Decrease in anemia rates recorded (blood testing) Level of overlap between RCV recipients and DRM recipients unclear
	https://www.unicef.org/evaluation/files/HQ_2010-007_UNICEF_Cash_Transfer_-_Final_Evaluation.pdf	http://www.ifpri.org/publication/cash-nutrition-intervention-yemen-impact-evaluation-study	http://www.cashlearning.org/downloads/resources/evaluations/ACF%20Bolivia%20FFV%20Evaluation%20June%202011.pdf

ANNEX 4: SET OF EVIDENCE

	Country 1 : Haiti Country 2 : Commentaires Région/District : (Port-au-Prince and Gonaïves)	Country 1 : Malawi Country 2 : Commentaires Région/District : i (Dowa District)	Country 1 : Niger Country 2 : Commentaires Région/District : (Maradi)
	Target 1 : Household Target 2 : Pregnant and Lacting Women Target 3 : 0-59 months	Target 1 : Household Target 2 : Target 3 :	Target 1 : 0-59 months Target 2 : Poor/Very Poor/Ultra Poor Target 3 :
	Context : Emergency/Crisis Duration : < 1 year Outcome : CARE PRACTICES: Knowledge and practice of IYCF (breastfeeding, complementary, etc); Hygiene Behaviours; Time for Caring	Context : Emergency/Crisis Duration : < 1 year Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services	Context : Emergency/Crisis Duration : < 1 year Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate Hygiene practices Pathways 4 : Access to health services (physical or power purchase)	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Appropriate care practices (health include) Pathways 4 :	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Appropriate Feeding practices Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Restriction : Restricted (Vouchers)	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	Wash (soft and/or Hard)	Food Security and livelihoods (Income Generating Activities/ Agriculture)	None
IMPACT	High	Medium	Medium
RELIABILITY	Low	Low	High

ANNEX 4: SET OF EVIDENCE

COMMENTS	Vouchers for meat, fish, vegetables, fruit	Particular impact noted for people with chronic illnesses	
	https://www.usaid.gov/sites/default/files/documents/1866/15.%20%20ACF%20Haiti_Aligning%20Case%20Study_EN_Aug%202012_LD%20(2).pdf	http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.114.9379&rep=rep1&type=pdf	https://journals.sagepub.com/doi/10.1177/0379572116654772

	Country 1 : Kenya Country 2 : Commentaires Région/District : (Kitui and Makueni)	Country 1 : Burkina Faso Country 2 : Commentaires Région/District :	Country 1 : Nicaragua Country 2 : Niger Commentaires Région/District : (disaster response droughts)
	Target 1 : Pregnant and Lacting Women Target 2 : 0-59 months Target 3 :	Target 1 : 0-59 months Target 2 : Target 3 :	Target 1 : 0-24 months Target 2 : Household Target 3 :
	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services	Context : Protracted-chronic/seasonal Duration : < 1 year Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services	Context : Emergency/Crisis Duration : Not specified Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services
PATHWAYS	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Appropriate Feeding practices Pathways 3 : Pathways 4 :	Pathways 1 : Access (physical or power purchase) to food (quality and quantity) Pathways 2 : Access to health services (physical or power purchase) Pathways 3 : Pathways 4 :	Pathways 1 : Appropriate care practices (health include) Pathways 2 : Access (physical or power purchase) to food (quality and quantity) Pathways 3 : Access to health services (physical or power purchase) Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Unconditional Restriction : Not Restricted (cash)	Conditionnality : Unconditional Restriction : Restricted (Vouchers)	Conditionnality : Unconditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : CMAM + IMCI + maternal health Distribution : General Food distribution SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : General Food distribution SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	None	None
IMPACT	Medium	Low	Low
RELIABILITY	Low	Medium	Medium

COMMENTS	<p>Value voucher</p> <p>Links between programme coverage and health outcomes not clear.</p>		
SOURCE (LINK)	<p>https://sarpn.org/documents/d0002197/Kenya_RAP_CRS_Oct2006.pdf</p>	<p>http://europepmc.org/articles/pmc5450256</p>	<p>https://www.alnap.org/system/files/content/resource/files/main/pega-et-al-2015-the-cochrane-library-sup-2.pdf</p>

ANNEX 4: SET OF EVIDENCE

	Country 1 : Burkina Faso Country 2 : Commentaires Région/District :	Country 1 : Niger Country 2 : Commentaires Région/District :	Country 1 : Afghanistan Country 2 : Commentaires Région/District :
	Target 1 : 0-59 months Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :	Target 1 : Household Target 2 : Target 3 :
	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services	Context : Protracted-chronic/seasonal Duration : Not specified Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services	Context : Post conflict Duration : 1-3 years Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services
PATHWAYS	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Appropriate care practices (health include) Pathways 3 : Pathways 4 :	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Appropriate care practices (health include) Pathways 3 : Access to Hygiene services (latrine, drinking water) Pathways 4 :	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Both experience Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Conditional Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : None Distribution : None SBCC : None	Health Services : None Distribution : None SBCC : Community and social mobilization/ Mass communication	Health Services : None Distribution : None SBCC : None
NUTRITION SENSITIVE INTERVENTIONS	None	None	None
IMPACT	Medium	High	High
RELIABILITY	Medium	Medium	High

ANNEX 4: SET OF EVIDENCE

COMMENTS	CCT required health centre visits; larger impact than UCT (consistent with findings from development programs in Latin America)	Pilot Safety Net	CCT may be effective to stimulate demand for health services in post-conflict settings
	Impact only applies for older children i.e. 2 years and up	Nut Status deterioration coincided with increase in illness (malaria and diarrhea)	Programmes that incentivise families and community health workers together show 8% point increase from baseline
SOURCE (LINK)	http://documents.worldbank.org/curated/en/944741467047531083/pdf/WPS7730.pdf	https://resourcecentre.savethechildren.net/node/3983/pdf/3983.pdf	https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)61338-0/fulltext

ANNEX 4: SET OF EVIDENCE

	Country 1 : Bangladesh Country 2 : Commentaires Région/District :	Country 1 : Yemen Country 2 : Commentaires Région/District :
	Target 1 : Pregnant and Lacting Women Target 2 : Poor/Very Poor/Ultra Poor Target 3 :	Target 1 : 0-24 months Target 2 : Target 3 :
	Context : Protracted-chronic/seasonal Duration : 1-3 years Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services	Context : Emergency/Crisis Duration : 1-3 years Outcome : UNDERLYING – HEALTH SERVICES AND ENVIRONMENT: Expenditure on HH needs i.e. health and sanitation; Vaccination rates; Access to Health Services; Uptake of Health Services
PATHWAYS	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Pathways 3 : Pathways 4 :	Pathways 1 : Access to health services (physical or power purchase) Pathways 2 : Access to Hygiene services (latrine, drinking water) Pathways 3 : Pathways 4 :
CASH AND VOUCHER ASSISTANCE	Conditionnality : Conditional Restriction : Not Restricted (cash)	Conditionnality : Labelled Restriction : Not Restricted (cash)
NUTRITION SPECIFIC INTERVENTIONS	Health Services : IMCI and/or maternal health Distribution : None SBCC : Interpersonal/Proximity communication (counselling, supports groups...)	Health Services : None Distribution : Supplementary feeding (MAM) SBCC : Interpersonal/Proximity communication (counselling, supports groups...)
NUTRITION SENSITIVE INTERVENTIONS	None	Wash (soft and/or Hard)
IMPACT	Low	High
RELIABILITY	Low	High

ANNEX 4: SET OF EVIDENCE

COMMENTS	More awareness of health services and ability to afford to use them	Program impact on treating water for children under two years of age is higher among literate women
SOURCE (LINK)	http://www.cashlearning.org/downloads/user-submitted-resources/2019/09/1569515599.WV_Impact%20of%20CVP%20on%20nutrition%20outcomes_case%20studies_full%20report_July%202019.pdf	http://www.ifpri.org/publication/cash-nutrition-intervention-yemen-impact-evaluation-study