CONSIDERING AND INTEGRATING CASH TRANSFERS IN NUTRITION PROGRAMMING - A 3-STEP DECISION-MAKING TOOL

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The Cash Learning Partnership

Save the Children

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CONSIDERING AND INTEGRATING CASH TRANSFERS IN NUTRITION PROGRAMMING - A 3-STEP DECISION-MAKING TOOL

This tool is intended to help nutrition practitioners assess the appropriateness of cash transfers (CTs) in emergency nutrition programs to support, complement and maximize other modalities more commonly considered in nutrition programs. This tool guides the user through the process of analyzing response options, identifying key considerations and directing the user to the most relevant tools according to the following steps:

AXIS 1

Contextualizing the conceptual framework of malnutrition by integrating economic barriers:

*Step 1 - Review of existing data
*Step 2 - Identifying determinants of malnutrition in context
*Step 3 - Classifying determinants of malnutrition by targeting economic barriers
*Step 4 - Complementary analyses allowing the analysis of some identified barriers (optional)

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AXIS 2

Define a context-appropriate mix of interventions integrating cash transfers to combat the causes of malnutrition

Identify a mix of complementary responses cash transfer / BCC / strengthening of basic services according to the barriers identified and according to the underlying causal factors of malnutrition.

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AXIS 3

Designing effective integrated interventions to achieve nutrition results

Identify access, feasibility and risks of cash transfers
List the main design features of the different modalities to achieve the objectives.

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A mix of context-specific and evidence-based modalities, possibly including cash transfers, to achieve nutrition-specific outcomes.

This tool is supplemented by appendices explained below:
Appendix 1: Evidence Database
Appendix 2: Matrix Review of Existing Data
Appendix 3: Economic, Structural, Behavioral Barriers and Methodological Tools
Appendix 4: Methodologies according to capacities and resources
Appendix 5: Intervention Mix
Appendix 6: Basic Considerations for the Design and Implementation of cash transfers in Nutrition Programming
Appendix 7: Acronyms

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INTRODUCTION: EVIDENCE OF THE IMPACT OF CASH TRANSFERS ON MATERNAL AND CHILD NUTRITION

The literature on the impacts of cash transfers on nutritional outcomes is constantly growing.

The available evidence reaffirms the importance of context as a critical factor determining the effectiveness of any intervention involving cash transfers. In addition, many analyzes noted the heterogeneity in program design and implementation across interventions, making it difficult to draw definitive conclusions on the best interventions to achieve nutritional impact. It is important to identify the linkages between cash transfers and nutrition outcomes as well as the factors in program design and implementation that can lead to success.

Here is the table identifying the achievement of nutritional outcomes based on existing evidence in terms of cash transfer in development contexts but also in humanitarian situations.

This table is adopted from De Groot et al, 2015, and Fenn, 2017, and updated on the basis of new evidence.

Strength of evidence: * none or limited, ** increasing, * medium, **** strong**

Impact level	Positive	Mixed	No	Remarks
Impact on the nutritional status of children				
Nutritional status of the child		**		Mainly positive evidence on stunting, mixed evidence on wasting, limited and inconsistent evidence on micronutrient status.
Impact on immediate determinants				
Dietary diversity of children	**			More and more positive evidence for children, limited evidence for women
Health status of children	*			Positive Impact on treatment improvement (findings in a research)
Impact on underlying determinants				
Household food expenditure	***			
Household food consumption and dietary diversity	***			Consistent positive impact of cash transfers
Adoption of preventive health services	**			Evidence mainly from development situations
Water, Sanitation and Hygiene	*			Limited positive evidence on access to water, sanitation and hygiene items
Dietary behaviors and practices			*	No evidence mainly due to the heterogeneity of the indicators used
Psychosocial care of children			*	
Intra-household decision-making	**			
Domestic violence	**			Positive results are mainly due to a reduction in income-related tension/frustration
Caregivers' Mental Health			*	Psychosocial well-being as a positive outcome to receive cash transfers

The database lists a non-exhaustive set of evidence (Appendix 1_Evidence Database), and its impact, sorted according to a series of indicators: Context, duration, outcome, type of cash transfer, type of specific and sensitive nutrition interventions, impact and reliability. Although each piece of evidence was collected in a particular context and therefore cannot be expected to yield the same result in a different context, it can nonetheless provide insights into a cost-effective intervention mix.

AXIS 1: CONTEXTUALIZING THE CONCEPTUAL FRAMEWORK OF MALNUTRITION BY INTEGRATING ECONOMIC BARRIERS:

Objective: to help nutrition practitioners identify the causes of malnutrition in their context by integrating economic barriers.

A/ General Framework: Cash Transfers in the Conceptual Framework of Malnutrition

Cash transfers can have an impact on the underlying factors in three ways:

I. They enable households and individuals to purchase goods and access services that can have a positive impact on maternal and child nutrition.

II. Conditional cash transfers can be an incentive to participate in CSC activities and attend free priority health services.

III. Increased household income can reduce tensions within the household, reduce economic pressures, increase women's decision-making power, improve the health and well-being of the caregiver, and so on.

Source: UNICEF Global Strategy for Maternal and Child Nutrition 2020-2030, UNICEF, New York, 2019.

B/ Specific framework: the steps to be taken to contextualize the conceptual framework of malnutrition by integrating an analysis of economic barriers

• **STEP 1: Review of existing data based on the methodology of the IPC AMN analytical framework** (filling Appendix 2_Matrix review of existing data)
- **Objective (1):** The objective of the matrix is to identify existing data at the national and local level by specifying the targeted seasonalities and analyzing their level of reliability based on the temporality and sources used. For each level of cause (e.g. immediate, underlying and root causes), a list of indicators is proposed in the matrix, but additions and modifications can be made.
- **How to do it:** If an IPC AMN analysis has been done at the country level or other analyses incorporating a data review, use the data obtained to fill in the matrix (contact FAO/WFP/UNICEF - Country Cluster) in order to streamline the process. If not, rely on existing reports (surveys carried out in previous months). This should take no more than half a day; internally, with local partners.

• **STEP 2: Identification of determinants of malnutrition in context** (filling Appendix 2_Matrix Review of Existing Data)
- **Objective (2):** Identify the main factors contributing to acute malnutrition in the area based on reliable existing evidence.
- **How to do it:** If the IPC AMN analysis was made at the country level, use the results to identify the main contributing factors in the matrix. Starting from the causal pattern of malnutrition and based on the reliable evidence identified in step 1 and existing knowledge, identify the main contributing factors (major, minor, non-contributing, no data available) by doing this exercise in plenary with multi sectoral actors.

• **STEP 3: Classification of the determinants of malnutrition by targeting economic barriers** (see Appendix 3_Economic, structural, behavioral barriers)
- **Objective (3):** Classify determinants according to economic, structural and behavioral barriers.
- **How to do it:** Based on the contributing factors identified, determine the specific barriers (economic, structural, and behavioral) that need to be addressed to achieve nutritional goals. Cash transfers can help overcome economic barriers to adequate nutrition but are less effective on structural and behavioral barriers (see introductory table). The examples listed in the Appendix to illustrate each category of barrier are indicative and not exhaustive.

• **STEP 4: Complementary analyses allowing the analysis of some identified barriers** (optional)
- **Objective (4):** To have a better understanding of the major barriers (economic, structural, behavioral), if necessary, according to the needs/capacities/financial and logistical resources available.
- **How to do it:** Identify the methodology to be prioritized according to the barriers to be analyzed in more detail (see Appendix 3_ Economic, structural, behavioral barriers («methodological tools»)) and then assess feasibility according to the necessary and available capacities and resources (see Appendix 4_Methodologies according to capacities and resources).

AXIS 2: DEFINE A CONTEXT-APPROPRIATE INTERVENTION MIX INTEGRATING CASH TRANSFERS TO COMBAT THE CAUSES OF MALNUTRITION

Cash transfers alone are not always an effective strategy to have an impact on nutrition; they must be combined with other interventions targeted at strengthening basic services (availability, quality and utilization) and behavior change.

- **Objective:** to identify the mix of complementary responses Cash Transfer / BCC / strengthening of basic services according to the barriers identified and according to the underlying causal factors of malnutrition (household food security, care and feeding practices, healthy environment).

- **How to do it:** from the barriers identified in axis 1, refer to Appendix 5_ Intervention Mix to identify appropriate combinations.

Axis 3: BASIC CONSIDERATIONS FOR THE DESIGN AND IMPLEMENTATION OF CASH TRANSFERS IN NUTRITION PROGRAMMING

Once the best set of combinations is identified (Axis 2) to address the contextualized causes of malnutrition (Axis 1), this table aims to help humanitarian workers design the program and specifically the cash transfer and behavior change communication modalities, taking into account the cross-cutting gender dimension. The table lists key considerations for each modality and directs practitioners to operational tools to help them design their approach to achieve program objectives. However, not all tools need to be used: only those concerning the modalities for which expertise is lacking. (see Appendix 6_ Basic Considerations for the Design and Implementation of cash transfers in Nutrition Programming).