



In partnership with ECHO, the Turkish Government and the Turkish Red Crescent (TRC), WFP is implementing the "e-food card programme" to provide unconditional cash assistance to over 1 million Syrian refugees. For this father the wellbeing of his children is the most important thing to achieve in life. ESSN cash assistance helps him to make sure their needs are covered.

WFP/Deniz Akkus June 2017.



4 CAPACITY

Global objective: Build sufficient capacity for cash and voucher assistance programming

Despite progress, capacity gaps remain a challenge to increasing the quality and scale of CVA

BOX 4.1 Organisations capacity building impact in timeliness and scale of CVA

78% 

Organisations agree that capacities built so far have enabled them to increase the scale of CVA

80% 

Organisations agree that capacities built so far have allowed them to increase the timeliness of CVA

Delivering more and better CVA depends, to a good degree, on the attitudes and capacities of the people and organisations involved. Feedback shows that progress has been made but more work is needed.

About 80 percent of surveyed organisations felt that the capacities they have developed so far have enabled them to increase the scale and timeliness of CVA (see box 4.1). Feedback from individual practitioners also notes progress but their views are less positive (see box 4.2), with only around half agreeing that capacity development (people and systems) has improved CVA response times over the last two years.

While 24 percent of surveyed organisations cite the lack of capacity among implementing agencies as one of the top three challenges to scaling CVA, this is significantly less than the 56 percent who felt that way in 2017.

When reflecting on themselves, only 45 percent of surveyed organisations agree they have the systems capacities and 39 percent feel they have the staff capacities needed to implement CVA at the scale required across all their operations. Digging deeper, 41 percent of surveyed organisations ranked the lack of capacity for multi-sector assessments and response analysis (which includes system and staff capacities) as the one of their biggest challenges to better quality CVA. 31 percent of practitioners ranked it the third biggest problem.

BOX 4.2 Organisations and practitioners perception on systems and staff capacity building

Organisations that think they have the system capacities needed to implement CVA to the scale required across all its operations

45%

Organisations that think they have the staff capacities needed to implement CVA to the scale required across all its operations

39%

Practitioners that agree investments made in the last 2 years to build capacities of staff have been effective at improving CVA response times

51%

Practitioners that agree investments made in the last 2 years to build capacities of systems have been effective at improving CVA response times

46%

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

The positive views about progress, combined with concerns about continuing capacity gaps, likely reflects that demand for skills and systems development is expanding as the use of CVA increases. Capacity goalposts are shifting as the use of CVA evolves and the need for new skills emerge. Overall, many view such capacity gaps as one of the biggest challenges to increasing the scale and quality of CVA, as explored further in chapter 2.

Organisations are investing in the institutionalisation of CVA, but progress is uneven

The institutionalisation of CVA can be looked at in terms of 'cash readiness' i.e. the extent to which organisations are prepared to design and roll-out quality CVA at the required scale across different



Institutionalizing a mindset for CVA across staff and local partners has been one of the biggest challenges. **Danish Church Aid**

For the RCRC Movement, preparedness of national societies is the biggest area of work in cash. It takes a lot of time to be cash ready. **ICRC & IFRC**

operational contexts in a timely manner. Most survey respondents believe that humanitarian agencies are taking steps to build the capacity of their operational systems for CVA – with 78 percent of practitioners and 93 percent of surveyed organisations agreeing this is the case.

Cash readiness varies and is influenced by factors such as an organisation's access to funding, mandate, size, degree of decentralisation and context. Key informants highlighted that some organisations focus their efforts on identified specialisations (e.g. working with specific population groups such as women and girls), specific types

of CVA intervention (e.g. large-scale MPC) or contexts where they believe they can add more value. For example, one INGO noted that in terms of system building for CVA delivery, they focus on contexts where governments lack legitimacy and UN agencies are not as well positioned to deliver CVA at scale.

BOX 4.3 Bangladesh Red Crescent cash preparedness experience

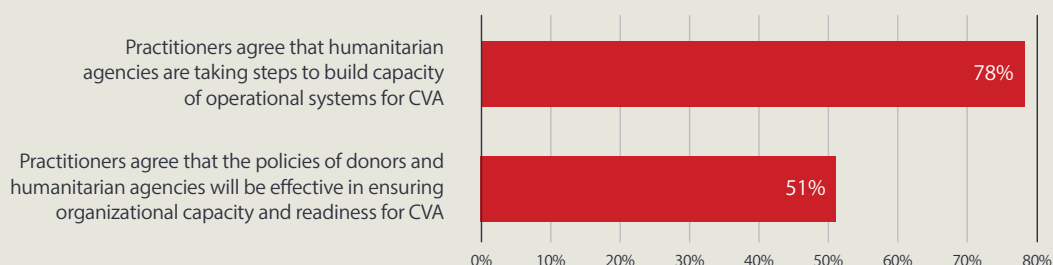
The Bangladesh Red Crescent (BDRCS), as an auxiliary to the Government of Bangladesh, provides humanitarian response before, during and after a crisis. In 2017, BDRCS started a journey – with the support of IFRC and other RCRC Movement partners – to strengthen its cash preparedness using the RCRC National Society Cash Preparedness guidance. Over the next two years they developed the internal structures, systems and procedures needed to deliver cash at scale, at speed and in ways most appropriate to communities in need. Lessons learned along the way include:

- Invest in community engagement and accountability systems to help ensure communities are supported in line with their needs
- Establish a sufficient pool of cash-trained staff and volunteers
- Create a dedicated data management team to switch to digital data collection
- Communicate effectively and coordinate well
- Develop formal agreements with a number of different Financial Service Providers to help maintain flexibility and reach.

Local, national and international actors have developed skills and capacities in CVA but existing disparities in the humanitarian system mean there has been more investment in the capacities of international organisations. Over the last two years, some international organisations have invested more in their local partnerships, both as part of their cash readiness strategy and as a commitment to localisation. For example, the RCRCM developed a two-year institutional support programme to help national societies become cash ready (box 4.3). It has recently evaluated the approach and will be issuing updated guidance based on lessons learned. Equally, World Vision International now includes cash readiness and capacity building analysis in its partnership agreements with local organisations. Overall, however, such efforts are not being undertaken systematically. Effective systemic capacity development cannot happen without more focus on local stakeholders' needs and priorities, with this happening alongside changes in the ways that local, national and international actors work together to deliver CVA, as explored in chapter 7.

The extent of cash readiness is rarely uniform across an organisation. Even where common approaches to institutionalising CVA are used, factors such as context and management buy-in within different teams or offices inevitably influences readiness. Strategic commitments, the skills and interests of senior managers and external trends are also key influencers. In addition resourcing is integral to the pace, breadth and depth of institutionalisation. Several key informants mentioned that the scarcity of internal resources and the lack of dedicated donor funding can limit capacity development options, especially for local actors. This may help explain why only 51 percent of practitioners agree that current policies will be effective in ensuring organisational capacity and readiness for CVA although it is notable that respondents based in national and sub-national offices were more positive on this issue (56% and 82% respectively), than those from from global HQs (41%).

BOX 4.4 Practitioners perception about donors' policies and humanitarian agencies' capacity building



During the period of the war, many small CBOs have improved their talent and upgraded their skills and upscaled their operations. There are maybe 20 organisations in the country which can run professional programming. These are eligible to receive funds from OCHA. **Yemen Family Care Association (YFCA)**

CVA capacity evolves depending on previous experience in a given context. CVA is quite new, for example, in Latin America where it is being used in the Venezuela crisis, compared to the Middle East where large scale CVA programmes are well established. Protracted crises, where CVA is widely used, provide time and opportunities for organisations to develop and strengthen their capacities, as highlighted by a key informant in Yemen. As such capacities of all actors need to be analysed on a case by case basis and cash-readiness plans developed accordingly.

Several key informants reflected that building initial capacity for cash readiness requires concentrated effort and a substantial investment of time and money. This can be a significant barrier when organisations first start to engage more fully with CVA. There comes a tipping point however, and once an acceptable degree of cash readiness is achieved the level of investment may reduce. For example, a key informant from UNHCR noted that they are planning to reduce investment and maintain only a small core cash team once their CVA institutionalisation strategy is completed in 2020.

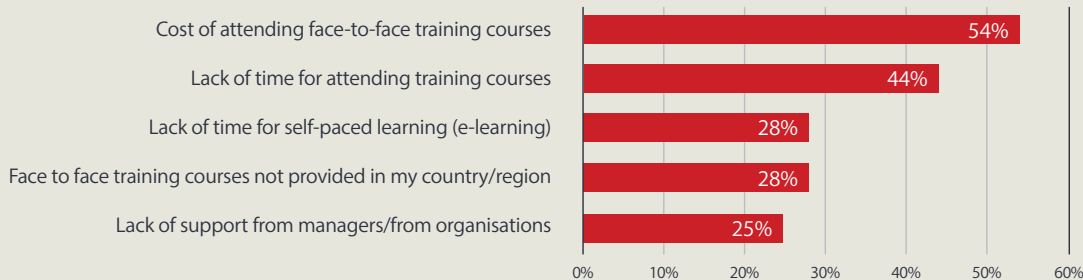
Availability and access to capacity building opportunities has increased, but further inclusion and contextualisation is needed

Access to training materials appears good. 88 percent of practitioners surveyed said they know where they can access CVA training. Results were slightly higher for HQ level respondents (94%) than those at national (86%) or sub-national level (82%). How information is circulated among practitioners and within organisations might explain these differences.

While knowing where to access CVA training is not a significant problem, there are other obstacles to undertaking training courses (box 4.5). Practitioners consider that the most significant barriers are: the lack of time for training (44%) and the cost of face-to-face courses (54%). Respondents in West and

Central Africa ranked the latter particularly high (75%). While there is still scope to improve, 78 percent of practitioners surveyed felt that existing CVA face-to-face and/or online training resources are appropriate to their needs.

BOX 4.5 Main challenges practitioners face in accessing training related to CVA in the past 2 years



Several key informants noted that, over the last two years, there has been greater focus on improving access to e-learning and other online services that support capacity development e.g. training materials, guidelines, best practices, and direct advisory or mentoring support.

BOX 4.6 Key E-learning resources

Kaya, a global learning platform, launched in 2016 and now has over 130,000 registered users.

Cash related e-learning courses and training materials, with content in Arabic, English, French and Spanish, are available on CaLP's Cash Learning Hub which is housed on Kaya. Over 15,000 users, from 185 countries, have accessed a CaLP product since 2016. The most popular e-learning course, "CVA - The Fundamentals", which is a prerequisite for a number of face-to-face courses, features in Kaya's top five performing courses, with over 7,000 enrolled users.



Training materials are good, but coaching/mentoring really helps to ensure principles are actually translated into practice. That tends to be much more effective than additional training. **Mercy Corps**

E-learning can be flexible, convenient, cost-effective and time-saving, while the trend towards micro-learning¹ can support practitioners to access short, informal, on-demand knowledge and skills. All this can help address some of the barriers highlighted above. However, using e-learning² exclusively could mean some potential loss of "social learning", with reduced benefit of the discussions, participatory activities and networking that face-to-face training more easily provides.

Adapting CVA capacity-building to systems, organisations and practitioners' needs should go beyond the face-to-face versus e-learning debate and recognise that capacity building is not only about training. Capacity building is also a process whereby practitioners and organisations learn by doing and, as several key informants indicated, recognition and support of that fact can amplify the benefits.

Mixing face-to-face training and the provision of remote technical assistance by CVA specialists, is an approach numerous humanitarian agencies are using. In scattered areas such as the Caribbean or the Pacific region, regional consultation found it is especially appreciated.

¹ Gutierrez, K. (2018) Numbers don't lie: Why microlearning is better for your learners (and you too). Shift: disruptive E-learning.

² Cooke, G. (2020) Online trainings vs face to face learning, Elucidat.

BOX 4.7 CaLP's Building Individual Expertise Programme (BIEP)

This programme involves a one-year cycle of capacity building activities, with specific trainings, individual mentoring and job placement. Participants develop and implement action plans, define individual objectives in line with organisational strategies and objectives, and learning pathways are tailored accordingly. The individual action plans are used as tools to monitor progress and require attentive follow-up and support from the participant and their manager. Two cohorts have completed the programme in West Africa, with positive outcomes.

The programme increased the individual CVA expertise of participants. Through them, it benefited their organisations and the wider community of practice at country level. Peer networks were developed beyond BIEP activities and participants actively contributed to key technical discussions at country level. They have also supported the development of more dynamic coordination in several countries.

As efforts are made to bridge capacity gaps, some key issues to consider are:

- Really effective CVA preparedness requires all actors in a country system (government, national and international organisations, private sector actors) to be cash-ready. **Investment in capacity development with an inter-agency perspective can bring benefits in cash readiness for individual organisations and the wider systems.** The inclusion of governmental stakeholders in CVA capacity development efforts, including work on the development of technical and operational guidelines, is essential. Among other things, this will facilitate debates about CVA and linkages with social protection systems and will lay the foundations for better coordination in this respect. Investing in local systems also means working towards the future and the integration of CVA with longer-term programmes. Several key informants highlighted strengthening CVA local systems and its direct relation with the predictability of funds and obtaining specific funds for preparedness, as did regional consultations.
- **Deployment of CVA experts offer opportunities for capacity development,** even where this is not their primary objective. Ideally, all expert deployments, in addition to providing direct operational support to specific interventions, need to integrate support to systems, organisational and individual capacity development in their objectives. This could mean, for example, being intentional about accompanying approaches and mentoring as well as leading or co-facilitating training.
- Organisations and practitioners are asking for **CVA capacity building processes that involve continued support rather than one-off learning courses.** Practitioners appreciate capacity building through on-the-job training, mentoring, remote support or in-situ technical assistance and seem to be more targeted and adapted to context-specific needs. As an example, see the CaLP BIEP programme³ in box 4.7.
- While CVA programming across organisations and agencies share many common threads, each organisation implements programmes based on their own policies and procedures. For example, UNHCR's internal training package takes account of UN procurement rules. An organisation-centered approach to capacity development, especially expensive single-agency learning management systems, can lead to duplication of content across platforms and organisations. A challenge for the future is **how to consolidate capacity building content development, while enabling tailoring for organisation-specific policies and country-specific contexts.**
- **Tailored CVA guidelines have advantages and disadvantages.** Developing guidelines adapted to a particular organisations' requirements and quality standards can facilitate implementation and transfer of knowledge. On the one hand, this encourages the proliferation of CVA guidelines and manuals. In addition, there are often guidelines developed at the national CWG level which support the adaptation of quality standards and processes to work in the country-specific contexts. Continued work on common standards may help reduce these tensions.

³ More information about the BIEP programme can be found here:
<https://www.calpnetwork.org/learning-tools/training/building-individual-expertise-programme/biep-wcaf/>

BOX 4.8 Making training courses more accessible and relevant

Practical suggestions to increase access and adapt training courses for different contexts, languages and stakeholders (based on feedback from key informants, regional focus group discussions (FGDs) and a FGD with CaLP-certified trainers):

- Deliver CVA courses in underserved areas
- Expand efforts to target staff of local NGOs and host government offices.
- Support the CVA capacity development of local trainers
- Train trainers within organisations and specific contexts
- Promote qualified trainers at country and regional levels
- Use pertinent examples and case studies taken from local scenarios to better contextualise courses
- Ensure training materials use simple clear language which can be easily translated to local working languages.
- Encourage on-going personal development rather than one-off training with, for example, mentoring programmes and remote technical assistance
- Increase accessibility through the promotion of online training, using different languages and reducing cost barriers.

Recruiting and retaining skilled staff remains a challenge, particularly as demand for specialised CVA skills increases

Survey data indicates that it has become harder to recruit skilled staff for cash-related roles. In 2017, 33 percent of organisations surveyed said they found it easy to recruit staff for CVA roles, as compared to 17 percent (for international staff) and 24 percent (for national staff) in 2019. This suggests an increase in demand for CVA expertise.

Retaining skilled staff, particularly given the issue of brain drain towards bigger agencies and better paid jobs, was mentioned as an issue in maintaining required capacity. Data indicates that the number of cash specialists employed in head offices has increased, with 97 percent of surveyed organisations reporting they had cash specialists at their headquarters – compared to 87 percent in the 2017 survey. While approximately two thirds of organisations continue to employ between one and five cash specialists, the percentage of organisations employing more than six HQ cash specialists has increased from 19 percent to 29 percent.

BOX 4.9 Organisations perception about recruiting suitable skilled staff for cash-related roles

The State of Humanitarian Professions report (Bioforce, forthcoming) highlights that some organisations do not define the professional skillsets and qualifications required for CVA. This is despite the existence of the Certification in CVA, which PHAP and CaLP developed in 2017, that details the essential knowledge and skills needed for everyone involved in CVA programming.

BOX 4.10 Recruiting CVA professionals

“There is no set qualification used to recruit CVA professionals and the tendency is for organisations to either recruit experienced staff within the humanitarian sector or ‘grow their own’. Very few people are recruited to CVA positions directly from outside of the humanitarian sector, but finance, market assessment, and public or private sector CVA backgrounds can be a way in. Once in a CVA function, there is a tendency for people to remain and specialise in this area of work.”

Bioforce (forthcoming) *State of the Humanitarian Professions Report*

The same report also highlights that *“the growth of cash programming has also changed the way many non-CVA staff undertake their work and it is likely that many functions and sectorial specialist roles will progressively need to include more and more CVA related competencies”*. Some key informants wondered whether the specialisation of skills needed within humanitarian programming could end up limiting the overall effectiveness of the design and implementation of CVA. On the other hand, they felt the existence of CVA specialists (with technical skills) should mean that sector specialists do not need to develop high level CVA-specific skills.

Some organisations have designed a range of introductory courses to help people adapt CVA to specific sector requirements. While training will continue to build CVA capacity amongst sectoral experts, as one key informant highlighted, they “won’t be able to do everything and CVA experts will still be needed”. Overall, key informants felt there is still a gap in the availability of people with both CVA and sector specific knowledge – particularly in sectors that have been less engaged with CVA (for example health, WASH, nutrition, protection or education). The process of CVA capacity development can provide opportunities to increase effective ways of working and collaboration between sectoral experts and CVA specialists at both institutional and operational levels, as shown by, for example, CashCap deployments to support various clusters.

Some key informants recognised that a growing number of operational staff (logistics, finance, security and others) have increased their CVA knowledge (by direct experience, internal capacity building processes or by participating in specific external trainings), contributing to increase both organisational and systems CVA capacities. However, further work is required. One key informant noted that their organisation’s biggest capacity gap is amongst their logistics and finance staff.

Surveyed organisations saw the challenge of recruiting, developing and maintaining skilled staff as a feature of the changing nature of CVA programming, and humanitarian assistance more broadly. Many key informants highlighted that, as the humanitarian sector evolves, there is need for new and specialised skills and profiles – many of which are especially relevant in CVA. Indeed, innovations and the rate of change indicate that capacity development efforts must continue to evolve, and yet may consistency struggle to match the pace of change. Key skills gaps highlighted include:

- **Technology, data systems and the digitisation of CVA**, along with the management of associated opportunities and risks. This was, perhaps, the most prominent skills gap cited. As CVA evolves, specialised skills for data management, protection, sharing and interoperability are becoming ever more crucial, along with more general aptitudes for working with digital systems.

- **Social protection** skills and experience are increasingly in demand. This includes understanding of associated policies, data management and delivery systems, working with government counterparts, and the ability to assess if and how humanitarian CVA can link to and/or support existing social assistance programmes (see chapter 8).
- **Accountability, particularly in terms of recipient perspectives**, is increasingly recognised as a critical skill within CVA and one where there is limited specialised capacity (see chapter 3 on CVA and quality).
- **Relationship management, communication and coordination skills** are also seen as key skills in the context of moves towards greater collaboration. As one key informant noted, not everyone is good at brokering relationships, but these types of 'soft' skills can be fundamental in the success or otherwise of collaborative approaches.

To fill these skills gaps might require the development of roles which are new to the humanitarian sector and/or new partnerships. In a regional focus group discussion in Latin America, for example, participants



We need to think about the humanitarian workforce of the future and how we can collectively build it. This goes deeper than a training issue. There are whole new profiles of people and new business models for engaging with them. **WFP**

highlighted the need to attract specialist staff from beyond the humanitarian sector. In some cases, more hybrid profiles may need to be developed (e.g. bridging humanitarian and development), while some areas of expertise could be incorporated into more generalist cash specialist profiles (e.g. digital competencies). In addition, many discussions highlighted the importance of demystifying CVA and not seeing it as a complex science, as many aspects of CVA can be integrated into other roles. Going a step further, several

key informants suggested that CVA related skills should be integrated into the roles of all staff working in humanitarian assistance - as is the case with in-kind assistance or services delivery.

PRIORITY ACTIONS

CVA skills are increasing and systems are being strengthened, but more is needed to ensure consistent organisational readiness for scalable quality CVA in different contexts. To make further progress in capacity development at all levels, the following actions are recommended:



All humanitarian actors should consider how their **capacity development efforts can benefit others, not just themselves. A stronger system will enable** sustainable progress in terms of scale, quality, and inclusion. This means understanding the roles of different actors within the system, and ensuring cooperation and investments go beyond individual organizational capacities to benefit other actors, coordination mechanisms, etc.



Donors should **systematically fund capacity development processes** based on clearly **identified needs of individual organisations and shared needs**.



Donors, international and local organisations should **invest in national CVA cash readiness** based on local actors' needs and priorities. This includes investing in preparedness and the institutionalization of CVA for both staff and systems, and ensuring better accessibility, contextualization and tailoring of training opportunities



Humanitarian organisations should develop **more responsive and adaptable approaches to capacity building and** organisational planning **based on changing needs** in terms of skill sets and systems. This could include further mainstreaming of CVA skillsets, reinforcing and increasing competences in specific areas of expertise, developing more mixed profiles in terms of CVA and other technical or operational roles, and identifying where there is demand for skill sets beyond more standard humanitarian profiles.



Course developers and training providers should **adapt training courses to different operational contexts, languages and stakeholders**. They should **reinforce e-learning and self-paced learning** as flexible and accessible approaches. More tailored approaches, like remote facilitated delivery, are needed, as well as ongoing support and networking, to ensure that individual capacity building contributes to a strengthening of the wider CVA community.

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