

Frequently Asked Questions (FAQ)

COVID-19 and Cash and Voucher Assistance (CVA) Programming

1. What is the impact of COVID-19 on ongoing Country Offices (CO) CVA activities?

Most of the CVA activities require mass-gathering (e.g. for targeting, registration, distribution and Post Distribution Monitoring). A significant number of staff from across the departments need to be engaged in to complete those tasks. There is also a need of greater field movement for verification, coordination and meetings. Risk of infection or spread of the disease is higher under those circumstances. Again, the FSP (Financial Service Provider) might not be willing to continue the distribution. Moreover, the situation of lockdown could further hinder the access of beneficiaries to the markets and affect the supply chain risking for non-availability of the required items in the markets as well as the price-inflation. These situations would adversely affect the ongoing CVA operations to achieve the desired objectives.

When you need to continue your ongoing CVA initiatives, please follow the below:

- Organize the awareness raising sessions against the ongoing COVID-19 outbreak. Awareness raising can be done using distribution sites/time as an opportunity to provide leaflets/information on COVID-19 through vocal messages or via IEC material.
- On distribution sites, make sure handwashing stations and/or hand sanitizer to staff and beneficiaries are available and ensure service providers follow this advice. Personal protective equipment for staff to be ensured where needed.
- Divide all distributions into multiple sites and on different dates to avoid large crowds at all costs.
- Ensure adequate distribution site management to ensure proper 1-meter (as per the WHO/country advisory) between beneficiaries and between beneficiaries and staff.
- Avoid non-critical assessments, distributions, focus group discussions (FGD), identity verification and authentication exercises etc.
- Where crowding occurs at redemption sites, consider diversifying transfer mechanisms and contracting additional service providers (Cash and vouchers/food outlets).
- Where possible, and not when absolutely necessary, the biometric authentication function at redemption/transaction point could be abolished or turned off.
- Where contextually feasible, quickly assess and contract additional service providers to allow beneficiaries shorter transit time and more options for locations to redeem their assistance. This includes adding cash out agents, banks, mobile network operator cash points, retailers etc.
- Where possible, remotely conduct/revise market functionality/assessment to make well informed decision on modality and mechanism changes. Mainly, review your market assessment and monitoring set up and make sure your latest market information – including prices - is available, updatable remotely, and in sync with national plans if they exist.
- It is strongly advised to distribute cash through bank, use of mobile money transfer rather than cash in envelopes.
- Ask beneficiaries to leave the distribution site immediately after the collection of the supply.
- Ensure that there are clearly marked entrance and exit points in the distribution area, reception point, (identity) verification point, collection point and exit to channel off traffic and allow for personal space.
- One-meter (as per the WHO/country advisory) area around the desk to be cordoned off (with a rope or tape) at the collection point if possible. This will ensure that the collection point is accessible to only one beneficiary at a time.

- Consider increasing response through cash assistance and where possible increase the amount transferred to cover several months (eg. 2-3 months) as is possible. This will ensure that beneficiaries can prioritize, are also protected and do not go out to collect money or shop for required items every now and then.

2. My Country Office is interested to start CVA to support the affected population, is that possible under the given situations?

This largely depends on the prevailing context. For the CVA to be feasible, there should be a functioning market where the items are readily available with adequate stock; established supply chain, stable price of the items, good security environment in the markets and in the target communities, appropriate FSP and adequate technical capacity of the COs. Also, under the current situation, it is possible that FSP might not be readily available or willing to work. Coordination with the government and peer agencies might also be challenging. Also, there might be movement restrictions and risk of infection-both for the staff and other individuals. Please evaluate all these factors carefully and systematically before arriving in a conclusion.

3. Is it possible to quickly switch-over to CVA from in-kind for the ongoing projects, and if yes, how?

This should be possible in '*principle*'. It is suggested the CVA Focal Point prepares a dash-board (or matrix in a simple Excel sheet) outlining all the possible distributions through CVA and thereby analyse the local market-situations (preferably remotely) as to understand the scope of their supply. Please do look for any contingency fund under the grant from which the expenses under change in modality could be used. Should it not be there, do liaison with respective donor for the change in modality or in extreme circumstance "suspension of grant under force majeure" in accordance with the donor compliance. In many occasions, the local traders might have established 'informal' supply chain system, which could even function during the situation of restricted movements. Furthermore, it is also necessary to assess other preconditions as mentioned into the answer of Q2.

4. Why should the Country Offices adopt CVA for Covid-19 response?

Apart from the general advantages of CVA over other modalities of support such as providing choice and flexibility to the beneficiaries, cost-efficiency, less logistic hassles, and a dignified means of support, the CVA has the following particular relevance in COVID-19 response:

- The affected population might have varied needs such as livelihoods or additional health support for their family members including children. Even the needs within livelihoods might be wider- on-farm, off-farm or livestock. Again, there are numerous trades/options within these broad categories. Only the CVA can effectively meet the needs they need the most and desired by themselves contributing to the aid effectiveness.
- Feasibility study on CVA could also be undertaken remotely using telephonic means or through mobilizing local partner.
- In most of the contexts, mobile money transfer services are available and accessible-this mechanism would avoid mass-gathering.
- Voucher distribution would also help to avoid large mass gathering. Staggered/different schedule and locations could be assigned to the beneficiaries to collect their entitlements.
- Electronic transfers also help to minimize potential contamination and spread of the virus through the cash (note).
- Cash distributions could also be done using local microfinance companies, remittance companies, local banks or CSOs with relatively less direct engagement of the Plan staff.

- Cash and voucher distribution generally demands less human resources than in-kind distributions. Therefore, potential risk to the staff and stakeholders are minimized.
- Considering the lockdown/border closure, the regular supply chain (pipeline) are/likely severely disrupted. Thus, procurement, arrangements and distribution through in-kind might be logistically more challenging for the COs, while this might be relatively easier through cash and/or vouchers because in many cases, the local traders have established '*informal*' supply chain and that the materials could be available in the local markets more easily.

5. Is cash or voucher feasible when the markets are closed and movements are restricted?

This has to be comprehensively, carefully and consistently analysed. Please see answer 2.

6. What is market analysis and what are the main approaches to market analysis used in the humanitarian field?

Broadly speaking, market analysis refers to the process of gathering and using information about markets to inform decisions. It can mean many different things and can be conducted in countless contexts and for a number of very different reasons.

Emergency market analysis is distinct that it is used in humanitarian contexts, normally in order to determine whether and how relief interventions (that provide lifesaving goods and services to crisis/disaster-affected people) should work through local markets (i.e. by providing cash grants or vouchers, or through local procurement) and/or otherwise support local markets. Emergency market analysis should ideally be conducted as part of a broad needs and context assessment, before a modality (or modalities) of assistance has been decided. It can be carried out before or after crises occur, and before or during program implementation. EMMA, PCMA, RAM and the 48-Hour Tool are some well-known examples of approaches to emergency market analysis.

In early recovery and development contexts, market analysis can be conducted to identify sectors with high potential for growth, to inform the development of business strategies for individual enterprises, to identify skills gaps and other challenges that act as barriers to good employment, and for other information purposes. Of course, market analysis is also conducted in the developed world, for many of the same reasons. Before starting any market analysis, it is very important that the team is clear about what they hope to learn.

7. When should we do market assessment?

Market assessments are an essential component of a situation analysis, and should be used to inform responses across sectors and delivery modalities. They are also a critical element of contingency planning and preparedness. As a result, you may be undertaking a market assessment in the following situations:

- Pre-crisis, to feed into contingency planning and/or to inform the design of market strengthening interventions so that markets became more resilient to future shocks.
- Immediately after the crisis, using a light touch approach (e.g. RAM, 48H toolkit) to help determine which modality will work best to deliver your response
- In the aftermath of a crisis, to inform market support interventions, in case local markets are not able to supply the goods and services needed for people to cover their basic needs.
- During the recovery stage, to inform livelihoods or market strengthening interventions so that people increase their income, the supply of basic goods becomes more stable, and market systems are better able to serve the poor.

Remember though that a market assessment is not a standalone exercise and data from other types of assessment (e.g. need assessment, risk assessment) will always be necessary to design a response.

Beyond the initial assessment you may want to continue monitoring markets, particularly during the response implementation, as markets can change quickly.

8. What do we get out of doing a market assessment?

In crisis settings, depending on the set objectives, market analysis will then serve to inform one or more programme decisions related to:

- The most appropriate delivery modality for emergency response;
- The relevance of supporting the local market after a crisis to promote recovery and/or be in a position to use the local market to deliver the response;
- The relevance of supporting the local market prior to a crisis to strengthen market actors and market access so that it can better withstand shocks; and
- Indicators to integrate into monitoring and Early Warning Systems (EWS) to pre-empt upcoming crises.
- In practice, a lot of market analysis undertaken in the aftermath of a crisis are used to inform the selection of the most appropriate modality to deliver a response. While this is a step in the right direction, practitioners should also consider looking at market support interventions on a more regular basis.

9. What is the best way to do a feasibility study including market analysis under the given circumstances?

Feasibility study on cash and vouchers could also be undertaken remotely using telephonic means/WFP's VAM or through mobilizing local partner.

10. Who could be the target group of the support?

- Household (HH) directly affected by COVID-19 (mandatory)
- Marginalized, vulnerable and excluded group. Families who have under 5 aged children and those children have been attending ECED (expand) classes could be prioritized.
- HH whose income has been severely impacted by COVID-19 related closures/lockdown (e.g. daily labourers) in economic term
- HH headed by single women
- HH with lactating mothers and pregnant women
- HH with Persons with Disability (PwD)

11. Which form of support would be the most appropriate?

This depends on the local context. However, as a thumb rule, multipurpose cash grants could be preferred to other forms. Cash is more feasible under the given circumstances compared to vouchers because of higher administrative requirements associated with the vouchers (e.g. quotation or tender, voucher printing, distribution, verification by the staff and submission of the vouchers by the traders to the office for a payment).

12. What are the potential CVA activities we could consider at this stage? Short term and long term?

Please see the Plan International COVID-19 and CVA Guidance Note (available [here](#)).

- Short Term: Multi-purpose Cash grants, Unconditional cash Grants, Conditional Cash Grants to achieve certain objectives/goals of the projects.
- Long term: Cash for Work, Conditional Cash Transfer, Cash for livelihood, Multi-purpose Cash Grants.
- In the above the transfer values to be aligned as per the MEB and existing social protection programmes or its equivalent in the interest of beneficiaries.

13. How can we distribute the cash or vouchers when the movement is restricted?

Some of the possible options are:

- Mobile money transfer
- Electronic wallet
- ATM cards
- Remittance agents
- Local traders
- Local cooperatives or microfinance companies

14. What should be the transfer values?

Transfer value should be calculated in close coordination with National Cash Working Group (CWG) and the clusters. The value should be equating to the recommended MEB by CWG, lead agency (ex.WFP) and existing social protection programmes or its equivalent in the interest of beneficiaries. Also consider the local market price under the given circumstances, which might have inflated significantly compared to the normal time.

15. Can cash Kill (transfer the COVID-19 virus)?

It is possible that contaminated banknotes present a public health risk for transmission of infectious diseases by acting as potential vectors, fomites and reservoirs for a wide range of bacteria and viruses, including Ebola Virus Disease (EVD) and the new Corona virus (Covid-19). The extent to which banknotes may or may not play a direct role in 'the chain of transmission' is only part of the story. No less relevant is the belief among affected populations that they do. And this belief can have adverse secondary consequences when it comes to implementation of outbreak control measures. For example- Disinfection of all banknotes in Hubei province by China's central bank, the People's Bank of China, as part of its Covid-19 outbreak response strategy demonstrates that physical currency plays a more important role in the control of outbreaks of communicable diseases than previously recognised by international health actors.

International and national health authorities could take more robust measures to address the potential threat to public health posed by banknotes in ongoing outbreaks and should work with the cash industry – specifically, members of the International Currency Association – to ensure that the disinfection and eventual replacement of banknotes with disease-resistant alternatives becomes an integrated part of any control strategy for diseases of epidemic potential.

16. If no mobile money transfer is available, what could be the next best option?

Try to find some easy and doable solutions, which demands less movement of the staff, and also minimizes a large gathering. Try to see if local microfinance company or remittance agents can distribute the cash. Sometimes, local businessperson can also distribute the same. While doing so, make sure to follow staggered approach-meaning provide different time slot for different beneficiaries.

17. How the protection risks to the beneficiaries are ensured?

- Avoid mass gathering
- Follow staggered approach
- Provision hand washing facilities at distribution sites
- Use telephone or virtual means as far as possible
- Provide information on hygiene and sanitation in relation to COVID-19
- Conduct PDM through telephone or virtual means

18. How the protection risks to the staff are ensured?

- Limit movements
- Use telephone or virtual means as far as possible
- Mobilize local partners
- Use protective gears (mask)-remember the principle of 'safety first'
- Wash the hands or use sanitizers frequently
- Maintain social distancing
- Take adequate rest, sleep at least 8 hours, eat nutritious food
- Report to the Line Manager if you are physically or psychologically not in a healthy state

19. We want to use CVA modality for COVID-19 response. My CO does not have any technical capacity? How can we quickly build this?

There are two options:

- Pursue CaLP self-directed CVA online course, available [here](#)
- Contact with GH CVA Team for the remote support. The GH CVA team could organize training and mentoring support using virtual means.

20. What is the role of Cash Working Group and Clusters in the Country/global level?

Cash Working Group is a coordination platform that helps to avoid possible duplication of response, organizes technical discussions as well as offers technical inputs, harmonizes practices such as definition of MEB (Minimum Expenditure Basket) or transfer values, carries out advocacy with the government and clusters on behalf of the participating agencies and manages knowledge base including funding information. Similarly, in some countries when Cash Working Group does not exist, the cluster can also provide its sectoral guidance. Thus, it is very important to actively take part in their meetings. Similarly at the Global level, the Global Cash and Market Working group (Plan International co-chairs) also provides global guidance on CVA in coordination with global peer agencies and platforms.

21. Is there any possibility of linking the current CVA into shock responsive programming?

There is a growing advocacy in the humanitarian sector that emergency response and recovery works should be linked with the social protection programming in order to provide lasting effects (shock responsive social protection programming). This could be done in a number of approaches viz vertical, horizontal, piggy backing, shadow aligning or refocusing. However, please note this approach demands a greater degree of coordination. Thus, please check your local situations and take a decision.

22. How to ensure organizational compliance particularly for the cash distributions at this challenging stage?

First, identify all the necessary steps and processes of cash distributions and then consult with the Operation and Finance team. Local Operation and Finance teams are in the best position to provide a solution.

23. Who can provide us technical guidance on CVA?

The GH CVA Team is primarily responsible to provide technical guidance to the COs. It can also coordinate with the Plan International's Fundraising / National Offices (NOs) and Country Offices (COs) who have the technical capacity to further support the COs. Please contact Aftab Alam, Global Lead at Aftab.Alam@plan-international.org for any technical request.

24. Is there any guidance note available on CVA and COVID-19?

The Global Hub (GH) CVA Team has prepared a guidance note on the CVA and COVID-19, which is available [here](#). Please note that this is a living document, which will be updated at quick intervals. In addition, CaLP has also compiled a number of resources that have been developed by different agencies, which are available [here](#).

25. Is there any CVA tool available that could guide us? If yes, where can I find it?

The GH CVA Team has developed a number of tools that could be used to design and implement CVA activities. These are available on the cash page of the Plan International's Intranet [Planet](#). You could also request for the same from Binod Koirala (binod.koirala@plan-international.org).

26. Can Country Office get physical deployment support during lockdown period?

This depends on case by case basis. The GH highest Leadership has imposed a restrictions on all non-critical travels for all Plan International staff until April 30, 2020. Also, the lockdown situation in the countries of origin of the CVA professionals and non-availability of the flights could limit this scope.

27. Can Country Office get virtual deployment support on CVA? How does it work?

Yes. In addition by email, the GH CVA could technically guide the CO team through Skype for Business or Microsoft Team. Please contact Aftab Alam (Aftab.Alam@plan-international.org) or Binod Koirala (binod.koirala@plan-international.org). However, the virtual deployments are also subject to the cost recovery in accordance with the Global Hub cost recovery guidance.

¹ <https://www.aidessentials.org/2020/03/02/can-cash-kill/>