

## Frequently Asked Questions (FAQs)

### Social Protection, Gender Equality and Humanitarian Cash under COVID-19 Context



**June 2020**

*(This document is prepared for Cash and Voucher Assistance (CVA) Program technical staff who are particularly working at Country Offices, and who still have limited experience on integrating a gender aware humanitarian cash approach within the Social Protection Programming. The document aims to provide basic concept and practice on gender aware Social Protection Programming and its linkage with the humanitarian cash in the form of FAQ particular under COVID-19 context. Please contact Aftab Alam ([Aftab.Alam@plan-international.org](mailto:Aftab.Alam@plan-international.org)) for further information and assistance).*

## FAQ

1. What is gender aware Social Protection (SP)?.....	3
2. What are the instruments of gender aware SP? .....	3
3. What are the typologies of gender aware SP in terms of maturity? .....	4
4. What is shock responsive, gender aware social protection programming? .....	4
5. Why is shock responsive gender aware SP important in a shock (or crisis) situation?.....	4
6. Why is gender aware cash transfer an important SP tool? .....	5
7. What are the different approaches to make gender aware SP programming shock responsive?.....	5
8. Give me few examples on how gender aware cash transfer is one of the key modalities through the above approaches.....	6
9. What are building blocks in Social Protection Programming? .....	8
10. What are the effects of COVID-19 on the general population and especially girls? .....	9
11. What are the impacts of COVID-19 on gender? .....	9
12. What are the lessons learnt from a previous response like Covid-19?.....	10
17. How can I ensure gender mainstreaming under the given scope?.....	15

## 1. What is gender aware Social Protection (SP)?

Social protection in general consists of policies and programs designed to reduce poverty and vulnerability by promoting efficient and inclusive labour markets, diminishing people's exposure to risks, and enhancing their capacity to manage economic and social risks, such as unemployment, exclusion, sickness, disability and old age. At Plan International, we additionally make sure that this approach is gender aware by considering whether and how social protection influences girls and boys, women and men as well as specific vulnerable groups differently, by ensuring that our work contributes to gender equality and inclusion (and not to further discrimination and exclusion) and by addressing power relations and other barriers that might influence the access to social protection.

## 2. What are the instruments of gender aware SP?

Broadly, different instruments of SP are categorized as follows:

Social insurance <sup>1</sup>	Social assistance <sup>2</sup>		Labour market program (or intervention) <sup>3</sup>
<ul style="list-style-type: none"> <li>• Unemployment benefits</li> <li>• Sickness/injury leave and pay</li> <li>• Pension (old age, survivors, disability)</li> <li>• Severance payments (if contributory)</li> <li>• Health insurance</li> <li>• Maternal leave</li> <li>• Child/family benefits</li> </ul>	<p><b>Cash transfers</b></p> <ul style="list-style-type: none"> <li>• Poverty targeted cash transfers</li> <li>• Old age and disability pension/grants</li> <li>• Family and child allowance</li> <li>• Housing/utilities allowance</li> </ul> <p><b>In-kind transfers</b></p> <ul style="list-style-type: none"> <li>• School feeding</li> <li>• Food vouchers</li> <li>• Nutrition programs</li> <li>• Fee waivers (health, education)</li> </ul>	<p><b>Social care services</b></p> <ul style="list-style-type: none"> <li>• Day care service</li> <li>• Basic and specialized special care</li> <li>• Domestic violence survivors care</li> <li>• Homeless shelter</li> </ul>	<ul style="list-style-type: none"> <li>• Wage subsidies</li> <li>• Tax and interest exemption</li> <li>• Labour intermediation</li> <li>• Training</li> <li>• Unemployment benefits</li> <li>• Reduced working hour</li> <li>• Informal social protection</li> </ul>

<sup>1</sup> **Social Insurance (Contributory schemes)**-Social insurance consists of programmes providing protection against life-course contingencies such as maternity and old age, or work-related contingencies such as unemployment or sickness. Normally, social insurance is financed from contributions by workers and their employers.

<sup>2</sup> **Social Assistance**-Social assistance provides support for those in poverty. Normally, social insurance is financed from contributions by workers and their employers, whereas social assistance is tax-financed.

<sup>3</sup> **Labour Market Programs**-Labor market programs are comprised of both passive and active labor market programs. Passive labor market programs include contributory unemployment insurance and non- contributory unemployment assistance. Active labor market programs (ALMPs) - or labor activation programs - are designed to promote opportunity through connecting men and women to more productive employment.

### 3. What are the typologies of gender aware SP in terms of maturity?

SN	Category of maturity	Description
1	Non-existent	No state interest in developing long-term social protection, and only ad-hoc foreign aid / humanitarian interventions
2	Internationally led	No clear progress in state policy, but emerging foreign aid interventions shaping up towards a system with some elements of harmonisation or coordination
3	State-led interest	Some state interest to expand social protection (to the most vulnerable), with some elements shaping up, eg. scaled-up aid-supported interventions or an outline of what could become a national flagship programme
4	State-led commitment	Commitment to expand social protection with a gender perspective (as articulated in eg. national strategy), with some flagship initiatives for the poor (co-)funded by the state
5	State-led expanding	Clear state policies / laws and a growing set of gender aware social protection schemes
6	State-led mature	Well established gender transformative system with high coverage of population and needs, at the same time addressing patriarchal systems and dominance.

### 4. What is shock responsive, gender aware social protection programming?

Social protection policies and programmes are shock responsive and gender aware when they are designed to address the typical risks faced by different groups of individuals (girls, boys, women, men, vulnerable groups like people with disabilities) and types of households (e.g. male of female headed) along their lifecycle (in another word- 'risk informed' and gender aware social protection programming). When shocks are recurrent, protracted or severe, they destabilize household economies, making a return to normal life very challenging. Please watch a short video at [https://youtu.be/dHI38bb\\_cjs](https://youtu.be/dHI38bb_cjs). Shock responsive and gender aware social protection programming is particularly important from the DRM programming perspective.

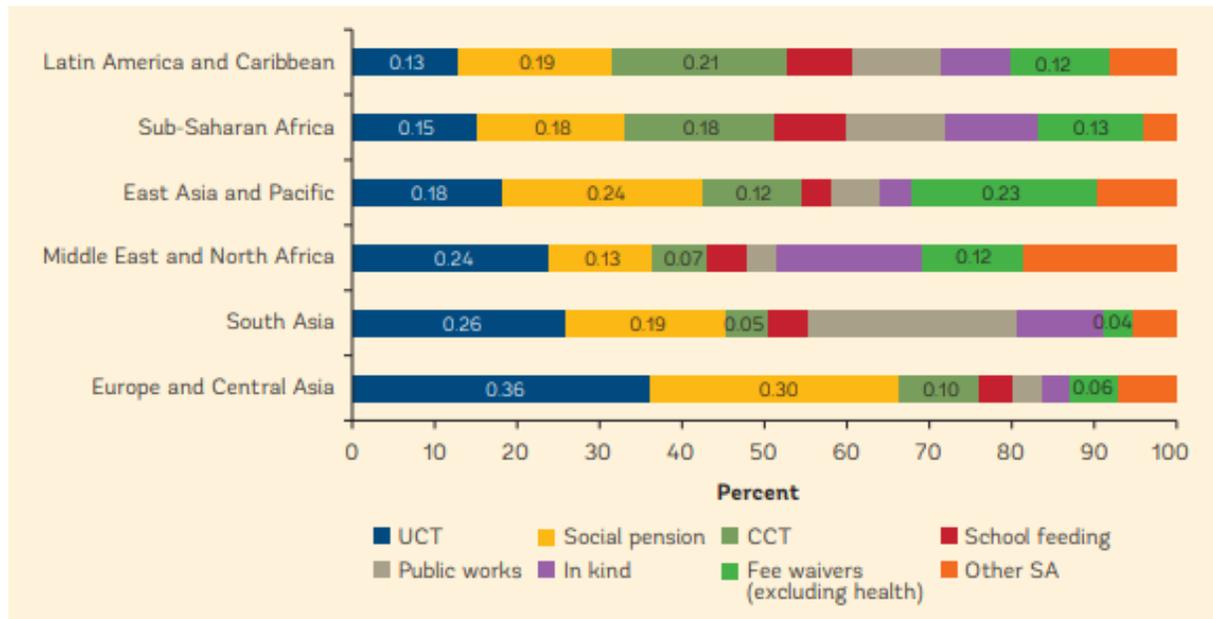
### 5. Why is shock responsive gender aware SP important in a shock (or crisis) situation?

- The number, severity, complexity and duration of humanitarian crises has been on the rise over the past 30 years and has overstressed traditional humanitarian systems;
- Most shocks are broadly predictable, recurrent and/or protracted, with routine caseloads and 'humanitarian' caseloads blurred in practice in many contexts.
- Policy makers increasingly view safety nets (particularly social transfers in the form of cash) as one of the core instruments for reducing poverty and managing risk but need to address underlying power imbalance in these safety nets at the same time.
- Short-term humanitarian strategies, funding cycles and programmes are neither intended nor able to address long-term crises
- Providing assistance during crises through these gender aware social protection system allows national governments to take responsibility for meeting the differentiated needs of all their citizens thus providing a medium term exit strategy for humanitarian aid while also ensuring that progress on gender equality and inclusion are at a minimum not reversed.
- There is increasing evidence of the cost-effectiveness of early action via existing systems rather than ad-hoc, ex post responses;

## 6. Why is gender aware cash transfer an important SP tool?

- Among the different instruments of gender aware social protection, cash transfer is the most widely used form of support because of its relative advantages of flexibility, choice and dignity.

## 7. What are the different approaches to make gender aware SP programming shock responsive?



Source: ASPIRE database.

Note: This figure shows estimates based on a sample of 112 countries with program-level data disaggregation available, as presented in appendix D. For comparability, health fee waivers are dropped from total spending and from the fee waivers category, which comprises educational fee waivers and utility fee waivers only. ASPIRE = Atlas of Social Protection: Indicators of Resilience and Equity; CCT = conditional cash transfer; SA = social assistance; UCT = unconditional cash transfer.

There are a number of approaches that could be applied-either individually or jointly to make the social protection programming a shock responsive and gender aware (or shock-informed).

This is shown below:

Name of option	Description
<b>Vertical expansion</b>	Increasing the benefit value or duration of an existing programme. May include: <ul style="list-style-type: none"> <li>• Adjustment of transfer amounts</li> <li>• Introduction of extraordinary payments or transfers</li> </ul>
<b>Horizontal expansion</b>	Adding new beneficiaries to an existing programme. May include: <ul style="list-style-type: none"> <li>• Extension of the geographical coverage of an existing programme</li> <li>• Extraordinary enrolment campaign</li> <li>• Modifications of entitlement rules</li> <li>• Relaxation of requirements / conditionality to facilitate participation</li> <li>• Introducing a gender analysis to understand the impact of SP will have on beneficiaries and the risks associated with it from a gender perspective</li> </ul>

<b>Piggybacking</b>	Using a gender aware social protection intervention’s administrative framework, but running the shock-response programme separately. May include the introduction of a new policy.
<b>Shadow alignment</b>	Developing a parallel humanitarian system that aligns as best as possible with a current or possible future social protection programme
<b>Refocusing</b>	In case of a budget cut, adjusting the social protection system to refocus assistance on groups most vulnerable to the shock and ensure that it does not contribute to increase discrimination and exclusion.

**8. Give me few examples on how gender aware cash transfer is one of the key modalities through the above approaches.**

**Horizontal approach- examples**

The Hunger Safety Net Programme (HSNP) in Kenya has been operating since 2007, to provide regular cash transfers to reduce poverty, hunger and vulnerability among pastoralists in the Arid and Semi-Arid Lands of Kenya's four northern counties. Funded initially by DFID and AusAid, in its first phase from 2007-12 it provided exclusively long term support to 69,000 households with chronic needs.

Under Phase 2, which began in 2013, the HSNP is housed at the Government of Kenya's National Drought Management Authority, and is increasingly financed from the government budget. In this phase the HSNP has increased its caseload of regular beneficiaries to 100,000 households. It has introduced a shock-responsive component that expands horizontally to an additional temporary caseload in the early stages of a food crisis as part of the national drought management response. In India to respond to the migrant crisis (thousands of migrants from different states started returning to their place of origin due to lack of social protection support during lockdown/restricted conditions) due to Covid-19, government of India can expand the horizontal approach to these migrants.

**Vertical approach- examples**

- In Ecuador, the *Bono de Desarrollo Humano* conditional cash transfer (CCT) has an emergency grant that can be activated to provide beneficiaries with additional financial support at times of crisis. Following the 2012 floods, 40,000 beneficiaries received an additional USD \$90.
- In Chile, a lump sum was paid to beneficiaries of the Chile *Solidario* programme affected by the 2010 earthquake.
- In Argentina, the government gave additional benefits to child grant and social pension recipients in response to the flooding of 2015.
- In Nepal, the UNICEF provided a top-up cash grant of NRs. 3,000 to existing beneficiaries of the government social assistance programmes, reaching approximately 434,000 people in 19 districts during the Earthquake response in 2015.

### **Piggy backing- example**

Following the 2016 earthquake, the government of Ecuador provided beneficiaries of social assistance programmes with additional temporary benefits, through the same payment system. These programmes also expanded coverage horizontally, reaching new beneficiaries. In addition, WFP piggybacked on the existing administrative systems which reported increased the coverage and cost-efficiency of their response (Beazley, forthcoming). Such approaches have been implemented by a number of humanitarian agencies in other regions.

### **Shadow aligning – example**

In 2013 the political turmoil and severe drought led to a major food and nutrition crisis in the north of Mali. After initially responding in an ad-hoc way, as the extent of humanitarian needs unfolded and the political context became more stable, NGOs funded by ECHO came together to align some aspects of their emergency cash transfer responses in the north, under a programme known as the CCFS, in 2014, and again in 2016 (known as the CCTS). These aimed to provide direct support to the poorest households as well as laying foundations for greater resilience building. In 2016 the CCTS was aligned in its value and frequency with the transfer provided by the national cash transfer project in the south, Jigisèmèjiri

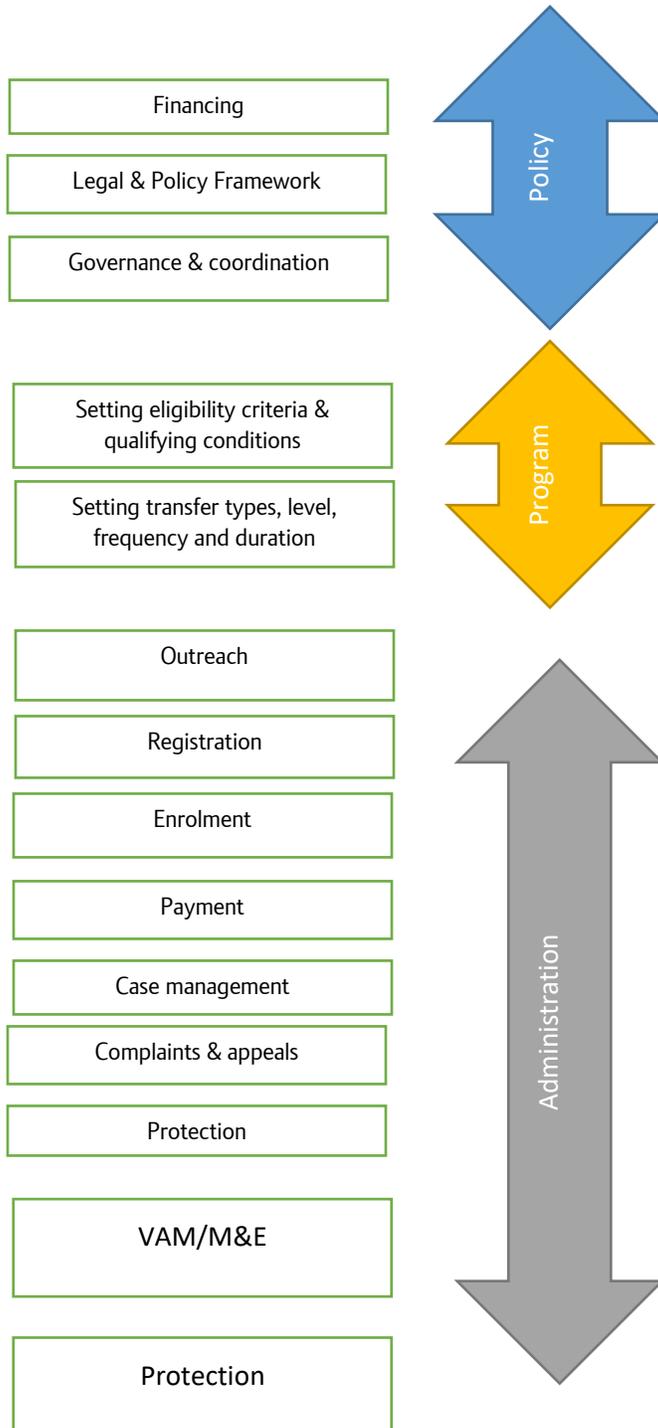
### **Refocusing- examples**

In Haiti, following Hurricane Matthew, the national school feeding programme reallocated its food stock to provide food aid to hurricane affected populations.

In Mali, during the 2013-14 crisis, there was an influx of displaced children into an area where WFP was running a school feeding programme. In the absence of extra funding, WFP made an effort to accommodate extra demand through a refocusing of resources via reduced rations.

## 9. What are building blocks in Social Protection Programming?

Like other programming, Social Protection Programming could also be divided into the three broad categories viz-policy, program and administration. Please see below:



## 10. What are the effects of COVID-19 on the general population and especially girls?

- The COVID-19, apart from being a pandemic, has led to a global economic crisis, with severe and potentially lasting impacts on economic activity, employment, and trade.
- Beyond the tragic loss of human life, the crisis is likely to increase poverty and inequality affecting even more those who are already the most vulnerable and excluded.
- The table below shows the different impact of COVID-19 on different groups of people and sectors:

Effect of COVID-19	Socioeconomic impact	Who are affected?
Illness/death Risk of contagion (especially high for women as health workers and who carry the main burden of care work) Social distancing Lock down, restricted movement Increase in domestic and gender-based violence Increase in unpaid care work for women and girls contribute to time poverty.	Income loss/reduction Job loss/insecurity Food insecurity/threat of famine/ loss of livelihoods Negative coping strategies Reverse on gains and progress regarding gender equality and inclusion Reduction in access to and quality of basic services and interruption to crucial SRHR services and information	Different groups (age, disability, ethnicity, girls and boys, adolescents and youth, pregnant and lactating women) migrants and other vulnerable groups etc) Employment sector Employment type (formal, informal; self-employed vs wagers) Rural and urban population

## 11. What are the impacts of COVID-19 on gender?

While the immediate impacts of COVID-19 are already apparent, some have yet to surface, and many of them will have different impact on different forms of gender. Health systems, schools, and entire economy will continue to present gender-differential consequences for months and years to come as a result of this ongoing crisis. The past experiences particularly from Ebola and Zika virus crisis and the current trend has suggested the following gender implications of the crisis:

- **Health**-the expectations that women and girls are responsible for doing domestic chores and nursing sick family members can expose women and girls to greater health risks. Though men, the elderly, and persons with compromised immune systems may be at greatest risk of fatality from COVID-19, the greater caregiving role that women and girls are expected to perform may expose them to other consequences. Women comprise more than 75 percent of the health care workforce in many countries, which increases the likelihood that they will be exposed to infectious diseases. Also, women have to deal with an increased burden of work, stress, competing responsibilities (work and child care at the same time), higher risks of GBV and household tensions due to quarantine etc. All this is causing psychosocial stress / mental health issues. A lack of the resources and the technology can minimize an access to sexual and reproductive health (SRH) services, such as clean and safe deliveries, contraceptives, and pre- and post-natal health care. Adolescent girls, who have unique SRH needs, may be particularly affected. Outbreaks could also result in disruptions to mental health and psychosocial support services (MHPSS), putting the individuals participating in them at risk. MHPSS caseloads are likely to increase during COVID-19 outbreaks, as frontline health workers,

women and girls with caregiving burdens, and community members fearful of becoming infected or infecting others may all experience stress and trauma relating to the outbreak.

- **Food Security and Nutrition-** the risk of heightened food insecurity is particularly grave for women and girls because social norms in some contexts/culture dictate that they eat last and least. When food becomes scarce, women and girls—who are already more likely to be under-nourished than men and boys could face additional health complications quickly including increased susceptibility to COVID-19 infection.
- **Protection-** The outbreak could surge IPV (Intimate Partner Violence) incidents if movement restrictions or quarantine measures are put in place. There has already been a number of reports in the international media that the lockdown situation has increased the rate of IPV or GBV. Also, at the time when many women and girls need GBV and IPV services more than ever, evidence suggests that those services are likely to decrease as resources are diverted to dealing with the health crisis.
- **Economic Empowerment and Wellbeing-**coupled with potential loss of income due to the mortality of other household income earners, the economic impact of COVID-19 outbreaks on women and girls could be long-term and widespread. Female migrant workers, particularly those engaged in care and domestic work, are also likely to experience grave economic consequences
- **Education-** It is likely that schools in COVID-19 affected countries would close for an indefinite period to mitigate the spread of the outbreak, impeding access to education for children around the world, but especially in areas that cannot shift to remote-learning systems. Girls whose mothers are infected could be forced to take over their caregiving responsibilities. Temporary school closures can have acutely negative effects for displaced or refugee children for whom school can provide a safe space for interaction with peers, psychosocial support, and even a reliable source of food. When schools are closed, children’s mental health issues might be exacerbated due to the lack of peer support and alternatives for mitigation of risks.
- **Water, Sanitation, and Hygiene-** women and girls often find that their access to hygiene and sanitary materials is reduced due to decreased household income or increased household competition for scarce hygiene resources, impeding their ability to conduct household-level disease prevention efforts or to attend to their own hygienic needs. Women and girls who are reliant on humanitarian agencies for their MHM supplies—including menstrual hygiene goods, soap, and water treatment tabs—may find those services interrupted. Finally, as the prevalence of GBV increases during emergencies and resources become scarcer, women and girls will become more vulnerable when travelling to collect water for household use or to use latrines.

## 12. What are the lessons learnt from a previous response like Covid-19?

- The absence of universal health protection exposes and stigmatises groups at risk, reduces their willingness and ability to seek treatment and increases the overall risk of contagion.
- Gender norms highly influence the way the pandemic impact girls/ women, boys/ men and person with other gender identities.
- Traditional role expectations and the division of labour (with women being over represented in the health sector etc) bring higher risks for girls and women.

- Due to high level of employment in the informal sector, in addition to the absence of sickness benefits or paid sick leave, demands the people going to work during sickness thus putting their health at risk.
- In crisis the risk for gender-based violence, increase in female genital mutilation, early, child and forced marriage and increase of harmful traditional practices.
- The absence of unemployment protection measures, including partial unemployment or partial income compensation, reduces the ability of companies to preserve jobs while coping with the financial impact of the crisis.
- The underfinanced and often privatized health systems are not able to address the exorbitant rise in cases caused by pandemics.
- Previous epidemics, such as SARS, MERS and Ebola, highlight the need to combine effective health interventions with social protection measures, in any adequate government policy response.
- The 1997 Asian financial crisis and more recently the financial and economic crisis of 2008 demonstrated the key role of social protection in stabilizing household incomes and aggregate demand, and contributing to recovery.

### 13. Give me some examples on how gender aware social protection activities are used in COVID-19 response?

As of May 8, 2020, a total of [171 countries](#) have planned, introduced or adapted 801 social protection measures in response to COVID-19. The governments are mainly providing the support through social insurance, social protection and labor based interventions. Below are few examples:

- **Argentina-** additional cash transfer for social assistance beneficiaries- special lump sum benefit of up to 3,000 pesos (\$47), or for an amount equivalent to the monthly non-contributory benefit will be provided for more than 9 million beneficiaries.
- **Bolivia-** new cash program to compensate missing school feeding meals- the government introduced the *Bono Familia* program, which seeks to contribute to feeding children of low-income families who will not have school breakfast during this time of quarantine. An amount of 500 Bolivianos (US\$ 72.6) will be paid for each child in elementary school. The benefit were to be delivered in April (TBC).
- **Brazil-** transfer to all informal workers who do not receive cash transfers-the government has decided to distribute vouchers of R \$200 to all workers who don't have a formal job and don't receive resources from the two flagship cash transfer programs in Brazil – *Bolsa Familia* and BPC. The benefit will be distributed through *Cadastro Unico*, the national registry.
- **Canada-** sick leave benefits -the usual one-week waiting period will be waived for people who are in quarantine or have been directed to self-isolate and are claiming for Employment Insurance sickness benefits (estimated cost of \$5M). Also, eligible workers with no or limited paid-leave benefits through their employers can apply for up to 15 weeks of employment insurance if they cannot work for medical reasons such as cancer, a broken leg, or in this case, being quarantined in a public-health threat. The current Employment Insurance payment is 55 percent of earnings up to a maximum of \$573 a week.

- **China-** temporary waiver or reduction of employers' social insurance contributions -between February and June 2020, all enterprises enrolled in China's Social Security Schemes are exempted from making employer contributions to pension, unemployment, and work-related injury insurance schemes. For instance, this is the case of the Hubei province.
- **El Salvador-** utility subsidies-the government has granted a waiver for utility bill payments for COVID-19 positive people for three months. Utilities include electricity, water, telephone, and internet. The government has also ordered private companies to ensure quarantine of particular worker categories, including those older than 60 years of age, pregnant women or those with preexisting conditions. These workers would receive a paid sick leave for 30 days (paid sick leave).
- **Denmark-** wage subsidy covering 75% of wages (\$3400) per worker/month-the Danish government would cover 75% of employees' salaries if firms committed not to lay off workers. This program will last for three months, or until 9 June 2020. The subsidy will cover a maximum of 23,000 Danish krone/month (\$3,418).
- **Hong Kong-** one-off cash injection to all 7M adult residents -Hong Kong decided to give HK\$10,000 (\$1,280) cash handouts for all permanent residents over the age of 18.
- **India-** home delivery of school feeding meals (Kerala) –the Kerala state government will deliver food ingredients for mid-day meals to over 300,000 children studying in 33,115 *anganwadis* (rural child care center) closed due to the COVID-19 pandemic. At the moment, they are delivering such food items necessary for ten days.- Home delivery of school feeding meals (Kerala)
- **Ireland-** supplementary benefits to the newly-unemployed -COVID-19 Pandemic Unemployment Payment: this program aims to compensate people who lost their job due to COVID-induced economic contraction. A benefit of €203 per week will be paid. This new payment quickly delivers income support to the unemployed (be they self-employed or employees) for six weeks (supplementary benefits to the newly-unemployed)
- **Italy-** suspension of conditionalities in flagship cash transfer scheme- the decree suspends all conditionalities related to the Guaranteed Minimum Income program, or Reddito di Cittadinanza (RdC or Citizens' Income), for two months. Also, it is providing wage subsidies for 80% of the wage for nine weeks to discourage layoffs during the crisis, employees of companies. The government has also suspended all firing procedures begun after 23 February (labor market interventions)
- **Japan-** free school feeding meals (Osaka)- Osaka plans to offer free lunches for all students at city government-run elementary and junior high schools from April to help ease the financial strain on households caused by the spread of the coronavirus.
- **Netherlands** - special unemployment payment and reduced work time -employers can apply for a permit for a reduction in working time (*werktijdverkorting*) at the Ministry of Social Affairs and Employment, i.e., employees will temporarily work on a reduced schedule. Employees can receive a temporary unemployment benefit for hours not worked, while they remain fully employed.
- **Poland-** childcare allowance - parents have an additional 14 days of childcare allowance for childcare up to the age of 8 if the nursery, children's club, kindergarten, or school the child attends is closed due to the coronavirus.

- **Romania-** cash transfers suspend conditionalities (and online benefit process activated)- all social assistance benefits can now be claimed electronically (e-mail, online applications). School attendance conditions have been relaxed.
- **Taiwan-** vouchers for supermarkets and shops – the Government of Taiwan provided NT\$2 billion (\$66.1M) of coupons to be used at night markets, shops, and restaurant

#### 14. How can we integrate our gender aware cash programming to COVID-19 response under the social protection framework?

It is important to state that all countries have different social protection systems (some are more mature than others), so at first we have to understand which programmes are in place in each country, and how these work, in order to identify the gaps and opportunities for Plan to build on this. Plan International-in collaboration with the government wherever and whenever possible should try to:

- Ensure that everyone irrespective of their gender, age, ethnic groups can effectively access health care.
- Support job and income security for those affected by the crisis., with a special focus on female-headed households and teenage mothers
- Contribute to preventing poverty, unemployment
- Bolster economic and social stability and peace for all.

#### 15. Tell me the approach to integrate gender aware cash transfer with the gender aware SP under C-19 situation?

The Country Offices<sup>4</sup> should:

- Identify the existing gender aware SP programs and follow one or more approaches of shock responsive and gender aware social protection programming (vertical, horizontal, piggybacking, shadow aligning or refocusing) depending on the context, needs and the resources available.
- If not done already, conduct a gender analysis of the social protection systems to especially identify a) main beneficiaries, b) risks, c) barriers (like e.g. power relations in households, gender norms around spending money) for specific groups, d) impact on different groups.
- Engage in continuous and consistent advocacy with the government at all levels-for policy, programs and administration (see the building block) and thereby activate all the possible social protection programs.
- When no formal social protection program exist, identify scope of working with informal social protection (eg, [Zakat](#) –one of five Islamic pillars, community burial system, savings and credit activities).
- Ensure that all the work you do is aligned with the six elements of our gender transformative approach (reaching the level of gender aware) and takes a Do no Harm approach.

The Global Hub<sup>5</sup> should:

---

<sup>4</sup> Plan International program offices

<sup>5</sup> Plan International HQ

- Technically support the COs in relation to gender aware CVA and SP programming and its integration
- Develop technical resources including guidance note on how to conduct gender aware CVA and SP programming.
- Contribute to the capacity building of CO colleagues in collaboration with peer agencies.

The National Offices<sup>6</sup> should

- Advocate with the donors for allocating more resources and priorities on gender aware cash and SPs
- Advocate with the donors to invest on the capacity building of the community of practice as CVA and SP integration is still relatively a new discourse for the practitioners.
- Support the COs through funding support.

## 16. How can we mainstream the humanitarian cash into the building blocks of the Social Protection Programming?

The following table will give an idea on how we can link the humanitarian cash with the social protection programs-at different levels viz policy, program and administration, and at preparedness as well as response & recovery phase. However, please note that under the given situation, focus on response and recovery would be the priority action.

Policy	
Preparedness	Response & Recovery
Influencing for gender aware SP and DRM policy and legislations	Transferring funds to the govt to expand existing social transfers, benefitting especially the most vulnerable groups of children and youth
Coordination with social protection coordination forum/group on methodology for targeting & transfer values, ensuring a gender perspective in the approach etc.	Coordination between CWG and social protection coordination mechanism etc.
Programmes	
Preparedness	Response & Recovery
Identification of most appropriate programme for humanitarian cash Conducting a rapid gender analysis around SP and CVA	Aligning with the design –beneficiary selection & coverage, value & frequency of transfer etc to ensure the most vulnerable groups of children and youth benefit
Influencing a gender aware design of social transfers based on previous humanitarian cash experience	Filling gaps in need, complementing existing programmes with additional services etc, with a special focus on the impact of girls and women
Administration	
Preparedness	Response & Recovery
Evidence sharing from HCT experience to strengthen SP payment mechanism	Leveraging registries, payment mechanism, communication, local govt./authority staff for delivering cash or support in implementation
Contributing to development of registries (waiting list)	Third party/Independent monitoring of scale up by government, enhancing accountability.



<sup>6</sup> Plan International fundraising offices

## 17. How can I ensure gender mainstreaming under the given scope?

Below are tips that would help you to guide the gender mainstreaming process in CVA and SP programming:

- Coordinate with your Gender Adviser/Gender Specialist/Gender Coordinator from the beginning of any response.
- Participate in the Rapid Gender Assessment and MHM Assessments exercise. Analyze carefully the risks, needs, power dynamics, gender norms and possible impact on girls and women to be able to design of your CVA/ SP programming accordingly.
- Engage in the gender responsive needs assessment process. Make sure, the needs assessment is conducted with women, girls, boys and men in different age groups, with active participation & leadership of women and girls and identify their specific needs.
- Coordinate with the M&E team to develop and then finalize a SADDD collection tool and gender responsive indicators/ objectives.
- Collect sex, age, disability disaggregated data (SADDD) of the proposed beneficiaries.
- Design project/programme to meet the specific needs while also mitigating the specific risks of women, men, girls and boys as identified through Rapid Gender Analysis, MHM Analysis and needs analysis. Make adequate budget allocations to support those designs.
- Get your proposals reviewed by the Gender Adviser/Gender Specialist or Gender Coordinator.
- Set beneficiary selection criteria using the vulnerabilities of the at-risk groups identified in needs and gender assessment. Do not define head of household as a criterion for selection. In most cases, this automatically means the male head of the household. For those facing specific challenges, plan for targeted action to reduce barriers to access (for example lactating girls and women, girls and women taking care of sick or old relatives). For the transformative approach, assess the risks and benefits of targeting female household members in distributions in order to shift traditional patterns around the control of assets and finances (consider feedback from women provided during gender assessment).
- Use needs and vulnerabilities of different groups to identify the basket of relief/ inputs to be distributed (e.g. sanitary products as part of relief kits or educational kits or seeds and inputs for crops grown by women etc.).
- Design the transfer values taking into account the capacities and needs of different groups (suitable for children, women, people with disabilities; contents of the nutrition kits to take into account the needs of pregnant and lactating women and girls, adolescent girls and boys etc.).
- Engage men and boys to foster/promote understanding of the links between gender inequalities involve men and boys in activities promoting equality in access, distribution and consumption of food.
- Build the capacity of staff on gender. Integrate gender considerations into all training designs and facilitate with awareness and intention to equalize gender hierarchies.
- Ensure gender parity in staffing and leadership, including field staff and among implementing partners. Promote female leadership especially young women in staffing.
- Promote partnership with women's rights organizations, women pressure groups, women cooperatives. Strengthen engagement with existing women leaders and women's network.
- Ensure equal wage for equal work (between male and female) in cash for work. Establish breast feeding corners and drinking water facilities in the cash and voucher distribution sites. Ensure soft conditionalities for pregnant and lactating mothers.
- Ensure that monitoring and evaluation mechanisms are gender and inclusion-responsive. Regularly monitor the impact of cash and voucher support in household dynamics, community conflicts, gender-based violence and other protection concerns, and report and refer to the appropriate forum (e.g.



protection mechanisms). Ensure these aspects are also duly incorporated into PDM tool and project/program evaluations.

- Set up multiple channels for feedback/ complaints. Consult women and girls as well as men and boys in designing channels appropriate for them. Ensure consultations include people with disabilities and people from marginalized or minority groups and provide them with a safe space to express their views. Ensure that information about the complaint mechanism is accessible to groups with low literacy.
- Make reporting incorporating gender equality objectives. Ensure people benefitted (together with the SADD) are reported.
- Coordinate and collaborate with external stakeholders and network which are working on gender equality throughout the project/program cycle. This includes SGBV Sub Cluster at national level.

### **Acknowledgement**

Many texts in this document has been derived from the documents developed by Oxford Policy Management Limited, ODI, World Bank and the [www.socialprotection.org](http://www.socialprotection.org) and its webinar, which we duly acknowledge it.

=====