



KEY CONSIDERATIONS FOR USING CASH & VOUCHER ASSISTANCE TO ACHIEVE CHILD PROTECTION OUTCOMES

Background

This note is intended to provide general guidance for humanitarian agencies responding to the Ukraine crisis on how to implement Cash and Voucher Assistance (CVA) to achieve child protection outcomes. It can be used to inform programme planning and Standard Operating Procedures.

Please note that this is a living document and will be updated as information arises and the context evolves.

The following key areas of focus are proposed as ways CVA can achieve child protection outcomes:

1. [Mitigate economic vulnerability linked to child protection risks within affected population](#)
2. [Adjust delivery modalities and delivery mechanisms to ensure that marginalized groups are reached](#)
3. [Use beneficiary registration to identify and refer particularly vulnerable children and families who may require additional support and protection](#)
4. [Enable unaccompanied and separated children to access economic support as appropriate and necessary](#)
5. [Facilitate access to Protection top ups to meet specific protection needs](#)
6. [Monitor CVA for child protection outcomes and adjust approaches as necessary](#)
7. [Use CVA as part of child protection system strengthening](#)

For all colleagues reviewing, please feel free to contribute to the document. You can include any additional population groups, risks, or comments to the live document, accessible [here](#)

→ [LINK TO GPC C4PTF WEBSITE](#)

Role of the C4PTF in Ukraine

- ➔ Provide technical guidance on the design of CVA & Protection assessments and activities and analysis of findings, including through the dissemination of tools and key resources
- ➔ Offer a space for collaboration and discussion to address key CVA and Protection challenges that emerge, ensuring sharing of best practices and lessons learnt.
- ➔ Adapt global guidance and tools



1. Mitigate economic vulnerability to child protection risks within the general population

This is achieved through multi-purpose cash assistance (MPCA) targeted at specific groups within the Ukrainian population. Targeting criteria should take into account contextualized risks and vulnerabilities of displaced or conflict-affected children. For example, it may be that children/families who have lived under siege or families at risk of separation are prioritized. Targeting should ensure that the most vulnerable girls and boys, and caregivers have access to economic support.

As a general rule, CVA should be provided to the parent, caregiver or legal guardian of the child rather than directly to child themselves. Where a child is in an alternative care arrangement, they must receive child protection case management including regular monitoring and follow up and that CVA is given to the caregivers where needed and in line with what is being offered to others. For guidance on unaccompanied children, please see guidance in Section 4 below.

The transfer value of the MPCA is standardized and based upon an analysis of the minimum expenditure basket. It is critical that the transfer value takes into account expenditures common to populations on the move or newly arrived in a location, such as transport and accommodation, as well as other subsistence costs. In many places, transport, accommodation and other services are being offered for free, however this may not be the case in all places, and these provisions may change over time. Ongoing monitoring is needed and the CVA transfer value should be adjusted accordingly.

The transfer value and frequency of CVA broadly falls into two categories:

a) CVA for Ukrainian IDPs and Refugees:

This is a series of transfers delivered on a monthly basis for a minimum duration of 3 months (but currently one-off in Ukraine) to support and bridge the gap until displaced populations can access the social welfare system. It should be supplemented by assistance to access the social welfare system and/or to identify employment opportunities including registration of professional skills/ certification.

- **Ukraine:** the value of the cash transfer has been set to 75 USD per person per month. In addition, the shelter cluster recommends a top up of 130 USD per family per month to cover the additional costs of shelter.
- **Poland:** the value of the cash transfer has been set to 165 USD per person per month plus 145 USD for each additional HH member.
- **Romania:** the value of the cash transfer has been set to 120 USD (568 RON) per person per month with a top of an additional amount of 40 USD (185 RON) per child under two years.
- **Moldova:** 120 USD per person per month.

b) CVA for Ukrainians on the move:

Targeted at those who are fleeing Ukraine and transiting through bordering countries to reach other EU countries. This is a larger, one-off transfer aimed to cover the costs of traveling for a total of one month. Currently, a variety of delivery mechanisms are being utilized, including bank transfers, prepaid cards, vouchers, mobile money or over the counter transfers (ex: Western Union).

In order to avoid CVA-associated protection risks, [CP](#) and [GBV](#) risk assessments should be conducted to identify any associated risks as well as risk mitigation mechanisms. Monitoring should include any associated risks identified, proposed mitigation measures and the efficacy of the risk mitigation mechanisms put in place, in order to ensure delivery modalities and mechanisms are as safe and secure as possible.

Whilst CVA should be unconditional, provision of CVA should be supplemented with messaging on prevention of family separation, SGBV, exploitation and trafficking, including how to travel safely and how to access help en route and in different countries. In addition to this, CVA teams should have the capacity to identify and refer Protection cases.

2. Adjust delivery modalities and delivery mechanisms to ensure that marginalized groups are reached

Delivery modalities (the form of assistance – e.g. cash transfer, vouchers, in-kind, service delivery, or a combination (modalities) and delivery mechanisms (Means of delivering a cash or voucher transfer (e.g. smart card, mobile money transfer, cash in hand, cheque, ATM card, etc.) may need to be adjusted to reach marginalized groups who may lack documentation, access to bank accounts, mobile phones or financial literacy skills. It is critical that CVA programmes continually consult marginalized populations to assess barriers to access as well as opportunities to enhance inclusion and take proactive steps to ensure their access to CVA. Child Protection and MEAL staff should conduct joint consultations to better understand protection issues arising and how to provide effective support.

In this context, marginalised groups are likely to include:

- Third country nationals residing in Ukraine
- Roma populations who may be undocumented and lack Ukrainian citizenship
- Unaccompanied and separated children
- Elderly populations
- People living with disabilities
- Individuals with diverse SOGIESC (sexual orientations, gender identities, gender expressions and sex characteristics).

3. Use beneficiary registration to identify and refer particularly vulnerable children and families who may require additional support and protection

Registration for CVA is an opportunity to screen populations and identify additional needs and protection concerns.

Any unaccompanied child, child headed household or any child traveling with an adult who is unrelated and unknown to them is at high risk and should be referred to child protection and before they leave the site.

If registering families have individuals who meet the following criteria, follow-up questions should be asked and consent sought to refer the family for further support:

- Children below the age of 18 who do not usually live with the household. This includes children traveling with relatives (aunts, uncles, grandparents etc) or with unrelated adults who are known to them (refer to child protection);
- Unaccompanied children traveling with or without unrelated adults (refer to child protection);
- Child headed households (refer to child protection);
- Single caregivers who are elderly (above 60) and/or have a disability that impacts their ability to provide adequate care whilst on the move (refer to child protection and health);
- Families traveling with a child who has a medical condition or disability that is challenging to manage whilst on the move (refer to child protection and health).



4. Enable unaccompanied and separated children to access economic support as necessary

In general, unaccompanied and separated children should not be the direct recipients of CVA, however, they should also not be excluded from assistance because of their care status. When UASC are identified, they should be registered and referred to the child protection authorities and/or actors (according to the referral pathway). If traveling with a relative and identified in a neighbouring country, the relative may be appointed as a legal guardian should this be assessed and in the best interest of the child (and depending on the laws/policies in each country). The legal guardian can then access CVA on behalf of the household. Otherwise, the child may be referred into the national child protection system where they are appointed a legal guardian and receive care, protection and support to access basic services.

Agencies should consider exceptional direct provision of CVA to unaccompanied children when conducting cash feasibility, financial service provider assessments and risk assessments in order to identify adapted delivery mechanisms (ex: junior bank accounts or restricted supermarket gift cards) and better understand the legal framework. To avoid exclusion of unaccompanied children from assistance this should be proactive from the beginning of the response.

So far, findings include:

- **Poland:** Children are considered persons below the age of 18 years in Poland in line with the CRC. Children who have attained the age of 13 years are considered to have limited capacity to perform acts in the law, however, they are allowed to sign a bank opening account contract with the support and approval of their parents/ legal guardians. The bank will ask the legal guardian to approve the contract and to agree to supervise the child's bank account. Some banks also prefer to open the bank account for children directly with the legal guardian. The parent/ legal guardian shall also provide the following information/ documents: Child's PESEL identification number, as well as Birth certificate or a passport or an identity card or a school ID card.
- **Romania:** Unaccompanied children who are in the care of the local authority (DGASPC) may receive cash and voucher assistance, but the head of the children's centre where they are accommodated has to sign for it on the child's behalf. If there are many children in the same centre (eg. when all children from an institution in Ukraine have been moved together into a children's centre), each child must have their best interests assessed with an individual care plan made. Additionally, each institution should be individually assessed to ensure that the care arrangements meet minimum standards, and longer-term, family-based care arrangements are prioritised. It is important that CVA does not act as an incentive for children to either remain in or join institutional care. There is no provision made in law for transferring cash and voucher assistance to unaccompanied children who do not have a legal guardian. This means that if a child has refused to be referred into local authority care, there are no legal restrictions preventing an NGO or UN agency from providing that child with cash or voucher assistance. It should be stressed, however, that all actors have a duty to refer the child to the DGASPC - with or without his / her consent.

5. Facilitate access to Protection top ups to meet specific protection needs

Protection top ups involve one-off payments aimed at meeting the costs of interventions specific to the needs of individuals, families or groups ([see two pager guidance](#)). Protection-related costs may include access to services, documentation, transportation or emergency shelter. The need is identified by child protection staff working directly with children and families, assessing risks and vulnerabilities and defining an overall response plan. In doing so, child protection staff should define the costs associated with responding and make a referral for CVA to CVA colleagues. CVA colleagues should review proposed transfer amounts and support as appropriate, activating and facilitating the CVA delivery. Note that confidentiality must be maintained during this process, and information only shared on a need-to-know basis. For example, the CVA team does not need to know case details, but rather the amount.

Protection top ups may be provided to individuals directly (to children in limited circumstances as set out above), families or groups. Examples follow:

- Cash assistance may be provided to individuals to facilitate transport of caregivers to be reunified with children, to access documentation and legal support, or to provide assistive devices for children or caregivers with mobility or sensory-related disabilities.
- Cash assistance may be provided to families, to enable them to access transport to continue their journey, or to access emergency shelter.
- Cash assistance may be provided to groups, to enable caregivers and legal guardians relocating with children from institutional care to access basic supplies and onward transportation.

6. Monitor CVA for child protection outcomes and adjust approaches as necessary

The impact of CVA on child protection outcomes should be monitored throughout interventions, and relevant adjustments to approaches and implementation made in order to mitigate risks, ensure inclusion and maximize outcomes. Below is a list of example indicators:

Care

- # of children newly placed in foster care, kinship care or adoptive care who are receiving support in the form of cash and/or vouchers (reference period is last 12 months).
- # of children in the agency's operational areas removed from residential care and reintegrated into a family placement receiving CVA support.
- % of separated children who are receiving direct or indirect (i.e. their caregiver is receiving CVA) CVA who are accessing support services (case management, counseling, medical, legal, etc.).
- % of unaccompanied children who are receiving direct or indirect (i.e. their caregiver is receiving CVA) CVA who are accessing support services (case management, counseling, medical, legal, etc.).

Sexual violence

- % of identified child survivors who required medical assistance and report being able to access it due to CVA.
- % of identified child survivors who required shelter and report being able to access it due to CVA.
- % of identified child survivors who required mental health and psychosocial support and report being able to access it due to CVA.

Family separation and unaccompanied children

- # and % of registered child-headed households or unaccompanied children receiving CVA.
- # and % of surveyed caregivers who report that unnecessary separation was successfully averted due to receipt of CVA.
- % of UASC cash recipients who report their protection improved due to CVA.
- % of UASC cash recipients who report safely receiving CVA

Mental health

- % of children and their caregivers who report improvement in their mental health and psychosocial well-being due to CVA.
- % of children identified as needing specialized mental health services who are able to access it due to CVA.



7. Use CVA as part of child protection system strengthening

Under the Temporary Protection Directive, Ukrainian nationals arriving in EU countries should be registered and supported to access social welfare and employment opportunities under the same conditions as nationals of the country. As detailed above, CVA should be used to provide a financial bridge for families to meet basic needs until families can access benefits or employment. In some circumstances, this may require adding monthly payments should families be unable to access social welfare for any reason, whilst working to address these barriers. Particular attention should be given to ensuring a sustainable exit strategy for CVA provided to marginalised groups to avoid leaving them without economic support and to ensure a do no harm approach that does not create future unintended protection risks.

CVA may also play a part in strengthening child protection systems. There is a need to ensure that the existing social service workforce is enabled to continue their work, even when displaced across borders. There is also a need to supplement existing capacity with additional social workers and para-social workers, operating within relevant child protection legal frameworks. In these circumstances, and with the approval of the relevant authorities, cash could be used to provide stipends to para-social workers who are recruited and trained to extend the social work force or to Ukrainian social workers who are displaced until they can be absorbed into and funded by the national social workforce. Here again it is critical to ensure a sustainable exit strategy.

Ukraine and neighboring countries have formal foster care systems. Existing capacity for foster care is likely to be exceeded by the numbers of unaccompanied children and those relocated from institutional care who may require family-based care arrangements. In these circumstances, CVA could contribute towards enabling current foster carers to meet additional costs of caring for children from Ukraine, and towards expanding foster care capacity by recruiting and training new foster carers.



USEFUL RESOURCES & GUIDANCE

→ [CASH FOR PROTECTION WEBSITE](#)

Global protection cluster website

→ [C4PTF MONTHLY FACTSHEETS](#)

Monthly factsheets created by the Cash 4 Protection Task Force for the Ukraine regional response.

→ [C4P INDICATORS - C4PTF](#)

Cash for Protection recommended indicators elaborated by the C4PTF for the Ukraine Response

→ [PROTECTION RISK ANALYSIS](#)

C4PTF mapping of the different protection risks faced by refugees and IDPs in Ukraine, while traveling and in hosting countries

→ [PROTECTION AND MEB DESIGN](#)

How to consider protection aspects when designing a MEB? - key considerations

→ [CALP MPC OUTCOME GUIDANCE](#)

This document presents a core set of indicators that can serve as a short menu from which donors and implementers can choose

→ [REVIEW OF MPC INDICATORS](#)

Summary report of feedback from the testing phase of the MPC outcome indicators

→ [GBV MONITORING TOOLKIT - UNFPA](#)

GBV-CVA Toolkit (GBV AoR / UNFPA) to support identifying and mitigating potential GBV risk in Cash programming. Includes a PDM tool.

→ [GBV MONITORING TOOLKIT - WRC](#)

Instructs cash practitioners to adapt CBI monitoring systems to reflect protection risks that are identified during the assessment phase.

→ [StC CP & CVA MEAL TOOLKIT](#)

It aims to assess, address and monitor Direct and indirect impact on CP concern, and CP benefits associated with the introduction of CVA.

→ [MPCA MEAL TOOLKIT](#)

The multi-agency Toolkit includes tools and KoBo survey templates for monitoring and evaluating MPC programs.

→ [CALP GLOSSARY \(PDF\)](#)

The CaLP Glossary has been designed to facilitate a common understanding and harmonised use of terms and definitions around CVA and MPCA.

→ [CVA & CHILD PROTECTION](#)

An overview of Save the Children's CVA and CP programming, as well as the emerging evidence on how CVA can contribute to CP outcomes.