Gender-responsive “cash plus” programming: lessons from practice in LMICs

Rapid Review of Selected Case Studies from Tanzania, Nepal, Turkey, Nigeria and Ethiopia
Preface / Acknowledgements

This paper on gender-responsive cash plus programming was prepared by lead authors Rebecca Holmes, Hannah Marsden and Lara Quarterman, in collaboration with Ruth Graham Goulder (UNICEF) and Roopa Hinton (FCDO), as part of a wider UK-aid funded project on gender-responsive social protection with UNICEF and the World Bank.

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We are grateful to all our key informants for their insights and valuable contributions to this paper (see Annex 3 for list of interviewees). Thanks also go to Laura Brouwer and Nathalie Pellen at OPM for project management and support.

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Foreword

Experiences of poverty, vulnerability and shocks – whether related to lifecycle shocks or ‘covariate’ shocks such as natural disasters – are highly gendered experiences. To reach their full potential, social protection systems must therefore take gender inequities and experiences into account and provide support that is responsive to needs - and ideally seek ways to disrupt, challenge and shift different aspects of gender inequality. Yet we know that social protection measures are often gender-blind.¹

Cash transfers, one of the most used social protection instruments, are well-evidenced investments that can contribute significantly to many important outcomes for gender equality.² Moreover, specific entitlements – for example relating to maternity and parental paid leave; universal child benefits, and gender-responsive pensions are all critical forms of support in a social protection system that responds to the needs of women, caregivers, children and society at large. In addition, building social protection systems that include gender-responsive or transformative policies, strategies, financing, institutional capacity, priorities, activities and linkages to services are also critical to respond adequately to poverty, vulnerability and shocks.

Evidence on the impact of social protection, particularly cash transfers is clear, including their role in removing financial barriers to accessing services, and supporting families to manage risks and respond to shocks. At the same time, maximizing and sustaining impacts over time, and addressing the multiple drivers of gender inequality, require a broader approach. In this context, “Cash plus” is a key element of social protection systems: most commonly the linking of social assistance, specifically cash transfers, with information, services, training, social networks or social norms activities, and other support related to different needs. “Cash plus” is often used as a shorthand by which to refer to this diverse range of programmes. Drawing on the available evidence, advocacy from women, girls and civil society organisations, and practical experience, it is our view that these programmes are critical components that need to be developed as part of building effective social protection systems.

Whilst programmes to date have not always commonly been designed to enable researchers to rigorously compare the gender impacts of different types of “plus” activities linked to social assistance, emerging evidence suggests that these approaches may contribute significantly to responding to gendered needs, tackling gender inequality and shifting social norms more comprehensively and holistically. However, we are still learning what may be most effective in terms of design and implementation and the combination of forms of support to contribute to specific outcomes, which will also vary by context.

¹ Only 23% of over 1700 social protection measures during the COVID19 pandemic were gender-sensitive – see UN Women-UNDP COVID19 Gender Tracker (2021).
In addition, “cash plus” programmes are often small-scale pilots with limited investment or plans for national scale-up – sometimes without a long-term objective of bringing systems together, but rather, a short-term “package” of interventions. Moreover, as with other aspects of social protection, “cash plus” programmes may be designed or implemented in gender-blind or discriminatory ways. It is critical that we not only introduce programmes that address gender inequality by design and implementation, but plan for and work towards scaling these up to become integrated parts of national systems – as well as building the evidence base on what works, how and why. Only then can we address needs at the scale that is needed, and ensure that investments in this aspect of social protection systems deliver on the high potential for positive impacts across a range of different outcomes for people.

This paper aims to bring together some of the live learning and insights that are emerging from thought provoking “cash plus” practice – particularly 6 case studies where programmes or systems attempt to respond to some of the specific gendered risks, needs and opportunities facing girls and women, and tackle gender inequality more broadly. We hope that it may provide useful lessons for practitioners as we seek to make social protection systems and programmes more gender-responsive or transformative - including the analytical framework used, and the programmatic details, alongside M&E findings from the case studies.

UNICEF and the FCDO are proud to be collaborating on a partnership on gender-responsive social protection, which aims to support this much-needed change across the sector. This includes rapid reviews of operational and programmatic practice, policy briefs, technical assistance, and rigorous new research under the Gender-Responsive Age-Sensitive Social Protection programme led by UNICEF-Innocenti. This paper was produced as part of this partnership. You can find more resources at https://www.unicef-irc.org/research/gender-responsive-and-age-sensitive-social-protection/ and https://www.unicef.org/social-policy

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&

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This paper provides a rapid review of selected “cash plus” programmes specifically from a gender equality and empowerment perspective. It examines case studies from Ethiopia, Nepal, Nigeria, Tanzania and Turkey, and highlights a range of objectives, design and implementation features of cash plus programmes to support gender equality and women and girls’ empowerment.

The case studies show that whilst evidence is emerging on the outcomes of cash plus interventions on women and girls, a better understanding of the design features and operational mechanisms by which cash plus programming can support gender-responsive and gender-transformative outcomes is needed.

The available evidence from the case studies indicates several positive contributions of cash plus programmes across a range of outcomes that can improve the lives of women and girls. These include poverty reduction, maternal health, child health and nutrition, supporting girls’ and boys’ access to education and protection services, and promoting positive changes in attitudes and practices on gender equality, such as reducing women and girls’ reliance on transactional/exploitative sex, increasing economic independence and autonomy of women and girls, and changing attitudes of boys towards discriminatory gender norms. It is important to note, however, that whilst cash plus programmes are starting to demonstrate that they can contribute to progress in these areas, the achievements are variable and multiple factors affect their effectiveness and impact.

In addition, there is insufficient evidence currently available from the case studies to draw conclusions on which types or combinations of “plus” interventions work best for promoting different gender equality and women and girls’ empowerment outcomes. Programme objectives and approaches vary by context, and programme evaluations have not always been designed to compare the impacts of different cash plus interventions on gender outcomes. However, the case studies do illustrate a number of important considerations to take into account from a gender perspective. We summarise these considerations around three key areas: intention; quality; and sustainability.

**Intention:** The selected case studies highlight the importance of articulating and understanding the intention of the cash and the cash plus interventions in relation to gender equality. This has two aspects. First, a cash plus intervention may have an explicit objective to reduce gender inequality or to specifically promote better outcomes for women and girls. An example of this is the Ujana Salama programme in Tanzania, which has a clearly articulated theory of change and specific activities and committed resources throughout programme design and implementation to achieve this. Second, even if a programme does not have an explicit objective to promote gender equality or transform gender relations, it still needs to intentionally consider gender across its design and implementation. Importantly, there are key aspects of the core cash transfer which can potentially undermine or support broader gender equality objectives.

**Quality:** The case studies also highlight the importance of the quality of cash plus interventions to achieve positive outcomes for women and girls. Again, there are two aspects to consider here. The first is the quality or adequacy of the design of the cash plus interventions – is the intervention designed to achieve the objective? Has the programme been informed by a gender analysis of the drivers of poverty and inequality? For example, drawing on the Ujana Salama intervention again in Tanzania, the Social Behaviour Change Communication (SBCC) interventions are complemented with longer-term mentoring support, in recognition of the low levels of confidence women have in translating skills into practice. The second aspect is the quality and capability of its implementation. The case studies demonstrate that outcomes are highly influenced by organisational capacity, staff technical skills, availability of financial and other resources, timeliness of implementation, and linkages with the wider policy and services ecosystem. The complexity of these aspects are highlighted in Nigeria and Ethiopia’s cash plus programmes aiming to improve women and children’s health and nutrition.
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**Sustainability:** Finally, the case studies also highlight the importance of sustainability of cash plus interventions. This is often discussed in the form of scaleability and is relevant for gender responsive and gender transformative approaches which take time to realise. To achieve long-term and sustained change around harmful and discriminatory gender norms, for example, cash plus interventions must be designed to have lasting impact and be measured against this impact beyond the scope of a project. Evidence demonstrates that shifting gender norms and power relations takes time, and thinking about the contribution of cash plus interventions to make incremental changes in poverty, equality and empowerment in the longer-term is necessary – this should be reflected in programme design as well as monitoring and evaluation.

Importantly, across all three spheres, it is also important to consider the context in which the cash plus programme is operating. The gender-related achievements of cash plus interventions may be supported or undermined by the gender-responsiveness of the core cash transfer, as well as the gender-responsiveness of the legal, policy and social environment in which the cash plus programme operates.

**Operational implications:**
**Designing and implementing cash plus interventions to promote equality and empowerment**

Across the review of the case studies and lessons learnt, we draw out suggestions for how to operationalise a gender-responsive and transformative cash plus approach. Importantly, these relate to technical design and implementation features of the cash plus interventions, the core cash transfer programme, and its operating environment. These operational implications include:

- **Choice of plus interventions:** from our review of these case studies, the following all show promising progress in shifting discriminatory norms and supporting more transformative outcomes for women and girls:
  - Social behaviour change communication (SBCC)
  - Tailored economic skills training or economic empowerment modules, or small grants
  - Coaching/mentoring in economic, health, social skills, for example
  - Case management relating to relating to child and gender-based violence
  - Social norms components to promote positive gender relations, attitudes and behaviours
  - Support for parenting and care practices.

- The content of the SBCC and focus of the training, the inclusion of men and boys, and the technical skills as well as the interpersonal skills of the implementers, are important factors influencing the success of the programme.

- **Embedding effective, safe referrals and investment in available services** to respond to recipients’ needs. Linking recipients to appropriate specialised services of good quality is necessary, but currently less is known (and monitored) about recipients’ experience of these services or their effects on their health and wellbeing.

- **The inclusion of men and boys** is usually important to promote gender-transformative changes, though there may be context-specific exceptions. Men and boys’ acceptance and buy-in of the cash plus programme is often essential to its success and ensuring that there is no backlash against women and girls as a result of the programme. Moreover, including men and boys as participants of the programme interventions can help to support changes in attitudes, behaviours and practices on gender equality.
Implementation capacity and coordination:

- The skills, experiences and capacity of implementing actors are critical factors influencing the success of gender-responsive and gender-transformative outcomes. Additional training of the implementers may be required to tailor the intervention to meet recipients’ specific needs, ensure they do not reinforce harmful gender norms, support gender-responsive/transformative outcomes and achieve the programme’s intended outcomes. The interpersonal skills of the implementers are just as important as the technical skills to support confidence and self-esteem of the recipients to take advantage of the programme’s activities. This is seen as especially important for women and girls. Community-based coaches / trainers / mentors are most effective when they can relate to women and girls participating in the programme. It is also important to consider the gender balance of the local and community implementers, and to ensure that programmes offer them appropriate remuneration and opportunities whilst not exacerbating women’s unpaid work.

- Promoting cross-sectoral buy-in and coordination to the cash plus programme is challenging but a critical component to its success across outcomes. For some programmes, this is an explicit objective within the programme.

- Protocols on data collection, management, and use is particularly important, especially when referrals to specialised services, including protection and GBV services, are being made.

- Scale up and sustainability of the programme should be explored from the outset. Sustainability plans, programme adaptation, and leveraging existing capacities and programmes are all important factors to scale up a cash plus programme.

Monitoring, evaluation and learning:

- Monitoring and evaluation processes and tools are essential to the collection and analysis of programme-related data. Indicators should be selected that will help measure the outputs, outcomes and impacts of a cash plus programme in a safe and ethical manner. Regular monitoring should include reviewing any unintended consequences of the programme, both desirable and undesirable. Using sex-disaggregated data and a range of gender-specific indicators across age and disability can facilitate a comprehensive understanding of gender-related outcomes for women and girls, men and boys, and help identify opportunities to promote an enhanced gender-transformative approach.

Core cash transfer design and implementation:

- The core components of the cash transfer also need to be gender-responsive (not just the “plus” components). The comprehensive integration of gender throughout programme components can ensure that the core programme and its system support gender-equitable outcomes and do not undermine them.

Broader social protection and policy environment

- Engagement with the broader social protection and gender policy environment is also necessary to support gender-responsive cash plus components. This entails awareness and engagement with the political economy factors in the national legal and policy environment which may constrain a gender-responsive or transformative approach.
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<td>BCC</td>
<td>Behaviour Change Communication</td>
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<tr>
<td>CCTE</td>
<td>Conditional Cash Transfer for Education</td>
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<tr>
<td>CDGP</td>
<td>Child Development Grant Programme</td>
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<tr>
<td>GBV</td>
<td>Gender-based violence</td>
</tr>
<tr>
<td>IN-SCT</td>
<td>Integrated Basic Social Services and Social Cash Transfer</td>
</tr>
<tr>
<td>IYCF</td>
<td>Infant and young child feeding</td>
</tr>
<tr>
<td>OPM</td>
<td>Oxford Policy Management</td>
</tr>
<tr>
<td>PSNP</td>
<td>Productive Safety Net Programme (Ethiopia)</td>
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<tr>
<td>PSSN</td>
<td>Productive Safety Net Programme (Tanzania)</td>
</tr>
<tr>
<td>SBCC</td>
<td>Social Behaviour Change Communication</td>
</tr>
<tr>
<td>SRH</td>
<td>Sexual and reproductive health</td>
</tr>
<tr>
<td>TACAIDS</td>
<td>Tanzania Commission for AIDS</td>
</tr>
<tr>
<td>TASAF</td>
<td>Tanzania Social Action Fund</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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1. Introduction

Background

Cash transfer programmes have become a well-established poverty reduction tool. A strong global evidence base has demonstrated the positive impacts of cash transfers on reducing poverty and smoothing consumption, as well as demonstrating positive effects on other multi-dimensional poverty outcomes and gender equality - such as improved access to health, girls' enrolment in school, reductions in intimate partner violence and increases in women's savings and investments (Buller et al, 2019; Bastagli et al., 2016). At the same time, in the last few years, there has also been increasing awareness that cash transfers alone cannot alleviate poverty, with attention turning to the use of “cash plus” approaches which integrate or link additional interventions with cash transfers, contribute to building a systems approach, and help to maximise the impacts of income support and address a wider range of multiple risks and inequalities.

The evidence base on cash plus approaches is still emerging, and there are multiple variations and types of cash plus programming being implemented across different contexts. A burgeoning evidence base indicates that there are positive trends of progress, in some of the most difficult areas to address for the poorest and most marginalised individuals and populations – notably where deep-rooted and structural social norms, practices and behaviours drive and reinforce existing discrimination, exclusion and poverty. Some recent cash plus interventions, for example, have been shown to have important positive effects on delaying sexual debut and pregnancy, reducing exploitative transactional sex, improving health and nutritional outcomes and supporting a positive change in gender-related attitudes (Peterman et al., 2021; Chzhen et al., 2020; Cluver et al., 2019; Roelen et al., 2017; Bastagli et al., 2016). As such, there is an increasing interest in the role of cash plus programmes in supporting positive changes in gender and age-sensitive, responsive or even transformative outcomes for women and girls.

However, the lack of systematic or routine gender analysis to inform cash plus design, implementation and evaluation remains a significant challenge, as well as a missed opportunity, in many contexts. Whilst there are often some “obvious” entry points for gender-responsive programming – including when cash transfer programmes primarily target women and/or girls, or programmes which focus on maternal health and nutrition – there is an urgent need to strengthen the approach to mainstreaming gender across all dimensions of cash plus programming, in order to achieve gender-responsive and transformative outcomes for women and girls, and men and boys, across the life course.

It is within this context that this paper was produced in collaboration with UNICEF and the FCDO as part of a UK-aid funded programme, ‘Gender-Responsive Social Protection.’ It aims to address a demand for global learning and operational guidance on integrating gender into cash plus programming by social protection practitioners in low and middle income countries. For UNICEF, this is a core part of the social protection agenda, alongside inclusion and gender as a fundamental principle: cash plus is one of ten priority ‘action areas’ alongside the expansion of cash transfers, and a rapidly expanding area with over 50 country offices working on linking cash to information, services and other activities to enhance outcomes.

This paper draws on a selection of country case studies and a small number of key informant interviews to:

i. review recent evidence on the effects of cash plus programmes on gender equality and women and girls’ empowerment, to inform policy and programming decisions on the use of cash plus interventions to promote gender-responsive and transformative outcomes; and
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The review is intended to be of direct relevance to policy, programme and operational staff, particularly those designing and implementing cash transfer programmes with a ‘plus’ component. The selected case studies include cash plus programmes in the following interconnected sectoral areas:

- Health and nutrition
- Education
- Protection from violence, exploitation, and abuse
- Economic empowerment

**Methodology and case study selection**

This paper is based on a rapid review of evidence from the selected case studies and is not intended to be an exhaustive review of cash plus programming but rather, the paper extracts relevant evidence and operational learning from case study examples (see Box 1 below).

The paper is also informed by eight key informant interviews from organisations working in this area (UNICEF, BRAC, Institute of Development Studies, Humanity and Inclusion and Accelerate Hub –see Annex 1), and a rapid review of selected literature focusing on cash plus programmes and gender equality, protection, and empowerment along the four thematic/sectoral areas related to the case studies identified above.

The case studies were selected to meet the following criteria:

i) variation in objectives relating to gender equality and covering at least one of the four thematic areas of interest for this study (health and nutrition, education, protection from violence, exploitation, and abuse, and economic empowerment);

ii) relevant geographical focus of East and Southern Africa (due to a particular concentration in demand from UNICEF country offices in this region) and additional case studies from Nigeria, Nepal and Turkey to facilitate learning from across countries and regions; and

iii) diversity in design and implementation approaches, for example different types of “plus” components and different implementation arrangements through national government programmes or parallel systems.

**Structure of the paper**

The structure of the paper is as follows: Section 1, just covered, provides the introduction; Section 2 provides an overview of the analytical framework which guides the analysis in the rest of this paper. Section 3 provides details of the case studies examined for this review, including programme objectives, approaches and outcomes. Section 4 draws out the key lessons from the case studies and key informant interviews, and highlights the operational implications in the design and implementation of programmes to support gender-responsive and transformative cash plus approaches. Section 5 reflects on the lessons learnt and summarises the operational considerations in the design and implementation of cash plus programming to promote gender equality and women and girl’s empowerment.
Box 1: Overview of case studies

**Tanzania: Ujana Salama (‘Safe Youth’) livelihods enhancements package for adolescents**

In Tanzania, Ujana Salama, the ‘Safe Youth’ livelihoods enhancement package is linked to the Government’s Productive Social Safety Net Programme (PSSN). It is implemented by the Tanzania Social Action Fund (TASAF), in collaboration with the Tanzania Commission for AIDS (TACAIDS) and with technical assistance of the United Nations Children’s Fund (UNICEF). The aim of the project is to support adolescent girls and boys 14 to 19 years from PSSN households to transition safely into a productive and healthy adulthood. The programme includes adolescent livelihood and sexual and reproductive health (SRH)-HIV life skills training, mentoring and coaching on livelihoods (and referrals), a small grant to strengthen economic empowerment, and linkages to existing SRH and HIV services for adolescents. Guiding principles of the plus initiative included that it promoted government ownership and is embedded in the government’s national cash transfer and livelihood programme linkages to government services, and established a gender and age Theory of Change. Endline evaluation shows increases in adolescent-friendly service provision at health facilities, and positive impacts on areas including SRH and HIV knowledge, gender-equitable attitudes, and livelihoods, and a reduction in sexual violence and physical violence perpetration.

**Tanzania: The Dreams project supporting out of school adolescent girls and young women**

The Dreams project in northwest Tanzania, funded by the Bill and Melinda Gates Foundation and implemented by an NGO in 2017-2018 by the Sauti project (a USAID initiative working to improve health through a sustained reduction in HIV infections), was targeted towards adolescent girls and young women (aged 15-23 years) who are out of school. The aim of the programme was to reduce the risk of contracting HIV and supporting young women to develop businesses. The project provided behaviour change and communication (BCC) curriculum, a cash transfer and a financial education programme, mentoring and participation in savings groups. Following involvement in the project, adolescent girls and women were more able to meet their basic needs, were less likely to engage in exploitative transactional sex, were less reliant on male partners, and some were able to start businesses. Overall, this reduced their exposure to HIV.

**Nepal: Cash Plus Pilot on Maternal Mental Health, Nutrition and Protection**

In Nepal, Save the Children implemented a complementary pilot to the government’s cash-based Child Grant, aimed at improving parenting skills and maximising outcomes for children in receipt of the grant. The parenting intervention included sessions on how to improve day to day parenting skills; how to make the most out of the cash transfer payment through better family budgeting; and nutrition awareness. Central to the approach is the psychosocial preventive early intervention programme that aims to promote a safe, loving, nonviolent, and developing environment for children by supporting the improvement in parenting/caregiver skills. Initial reports indicate that the programme is improving knowledge and caring practices (including co-parenting practices) and increasing solidarity and social networks among women.
Turkey: Conditional cash transfer and child protection

The Conditional Cash Transfer for Education (CCTE) in Turkey aimed to encourage enrolment and improve school attendance of children since 2003. It was extended to Syrian and other refugee families in mid-2017. The CCTE for refugees is implemented through a close partnership between the Ministry of Family, Labour and Social Services, the Ministry of National Education, the Turkish Red Crescent and UNICEF. The CCTE for refugees includes a component to ensure the continued school enrolment and attendance of the most vulnerable refugee children as well as their referral to child protection services when needed. It aims to mitigate risks such as involvement in child labour, child marriage, physical and emotional violence and family separation. This component is implemented by outreach teams consisting of social workers and translators. The evaluation found that incorporating a child protection component can increase programme effectiveness by helping families to overcome non-financial barriers to children’s schooling. Between May 2017 and March 2020 the child protection programme met with and assisted 75,390 children in 15 provinces.

Nigeria: The Child Development Grant Programme

The Child Development Grant Programme (CDGP) in Nigeria, implemented over 6 years by Save the Children and Action against Hunger, aimed to improve child nutrition and maternal health through cash transfers, counselling and social and behaviour change communication (SBCC). It was targeted at pregnant women during pregnancy and the first two years of their child's life. Positive impacts were found on reducing the prevalence of stunting among children and women's and men's knowledge, beliefs and practices around healthy infant and young child feeding (IYCF).

Ethiopia: Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer

UNICEF supported the Government of Ethiopia to pilot the Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer (IN-SCT), which aimed to integrate nutrition and cash transfer programming and complement the existing Productive Safety Net Programme 4 (PSNP4) with a comprehensive package of ‘plus’ components including participation in nutrition sensitive activities, supplementary feeding, psychosocial support and coordinating linkages to services. The impact evaluation found almost no measurable impact on child nutrition outcomes but some improvements in child welfare outcomes, such as school attendance and a slight reduction in child labour.
2. Analytical Framework

2.1 Gender-responsive and age-sensitive social protection framework

For this paper we draw on UNICEF Innocenti’s (2020) “Gender responsive and age-sensitive” social protection conceptual framework as a foundation for guiding our analysis. The premise of the framework is understanding that poverty, risks and vulnerability are gendered, and that these change over the life course and accumulate over time (UNICEF Innocenti, 2020; Holmes and Jones, 2013). The gendered patterns of poverty and vulnerability lead to unequal outcomes for women and girls relative to men and boys, which undermine their economic opportunities, health, safety and well-being in the short- and long-term.

Social protection is well-established as a poverty reduction tool in many contexts. However, whilst social protection policies and programmes have the potential to address gendered experiences of poverty, risks and vulnerabilities, this potential is not always realised. In order to integrate such risks and vulnerabilities, gendered considerations must be explicitly made in the design and implementation of social protection to ensure that women and men have equal access to benefits, to meet gender-specific needs of women and girls, and to enhance the empowerment of women and girls across multiple domains. Figure 1 illustrates the various gender-responsive outcomes that can be achieved through social protection. They include, but are not restricted to, greater economic security and empowerment, improved health, enhanced education, improved psychosocial well-being, greater protection, and enhanced voice and agency (UNICEF Innocenti, 2020:14).

Figure 1: Gender equality outcome areas
Source: UNICEF Innocenti (2020:14)

<table>
<thead>
<tr>
<th>ECONOMIC SECURITY AND EMPOWERMENT</th>
<th>IMPROVED HEALTH</th>
<th>ENHANCED EDUCATION</th>
<th>IMPROVED PSYCHOSOCIAL WELLBEING</th>
<th>INCREASED PROTECTION</th>
<th>ENHANCED VOICE AND AGENCY</th>
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<tr>
<td>- Decent work</td>
<td>- Access to health and social services</td>
<td>- Improved literacy</td>
<td>- Mental health</td>
<td>- Freedom from violence</td>
<td>- Positive gender attitudes</td>
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<tr>
<td>- Income security and resilience</td>
<td>- Physical health and nutrition</td>
<td>- Increased school attendance and achievement</td>
<td>- Life satisfaction</td>
<td>- Delayed marriage</td>
<td>- Decision-making capacity</td>
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<tr>
<td>- Reduced and redistributed care and domestic work burdens</td>
<td>- Reproductive and sexual health</td>
<td>- Improved self-esteem</td>
<td>- Increased expectations and aspirations</td>
<td>- Reduced risk of FGM</td>
<td>- Autonomy</td>
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<tr>
<td>- Financial autonomy</td>
<td>- Reduced HIV/AIDS risk</td>
<td>- Improved capabilities and skills</td>
<td>- Reduced stress and enhanced resilience</td>
<td>- Greater mobility</td>
<td>- Self-efficacy</td>
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<td>- Savings</td>
<td>- Delayed sexual debut and pregnancy</td>
<td>- Enhanced cognitive abilities</td>
<td>- Enhanced psychosocial wellbeing</td>
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<td>- Political and community participation</td>
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<td>- Access to credit</td>
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<td>- Access to markets</td>
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GENDER EQUALITY OUTCOMES
The opportunities to integrate gender into the design and implementation of social protection policies and programmes are highlighted in the UNICEF Innocenti framework that uses a ‘gender integration continuum’ that identifies the extent to which social protection programmes and systems are designed and delivered to explicitly address gender equality and promote gender transformative outcomes (see Box 2).

**Box 2: Gender integration continuum in social protection programming**

A ‘gender integration continuum’ describes the extent to which gender is integrated into policy or programmes – in this case social protection - ranging from gender discriminatory to gender transformative. At one end of the scale, gender-discriminatory programmes may actively exclude women or do not consider their gendered needs.

In the middle of the scale are gender-responsive programmes. Gender equality objectives may not be the primary objective of a programme but it would recognise – and address – gender inequalities which may affect women’s programme participation or influence outcomes of the programme on women and men. Gender-responsive programmes are fair and equitable in both programme processes and outcomes.

For example, women and men participate in programme processes and are represented in programme governance structures to inform planning, design, implementation and monitoring and evaluation (M&E). Programmes are informed by a gender analysis and respond to the challenges that women may face – for example, if lack of time due to (unpaid) care and domestic responsibilities is identified as a barrier to women participating in a programme, an objective would be to ensure that quality childcare services are available.

Or, if the programme objective is to reduce food insecurity for members of the household, a cash transfer is designed to ensure that women and men, and girls and boys, have equitable outcomes – this means paying attention to intra-household relations and individual access to and control over the cash transfer to ensure equitable results (FAO 2018).

At the furthest end of the scale is gender-transformative, where programmes aim to transform unequal gender relations and address the structural and root causes of discrimination through the social protection intervention (UNICEF Innocenti, 2020). This means pro-actively promoting change in programme processes, access and outcomes through deliberate and explicit design and implementation choices, which enable empowerment and transformative outcomes.

For example, if the programme objective is to increase women’s decision-making and bargaining power in the household as a strategy for poverty reduction, social protection programmes can provide women with access to financial services, offer women leadership opportunities in programme governance, support local collectives by purchasing food for school meals from them, and work with men and boys alongside women and girls to address discriminatory social norms and practices. Transformative processes and outcomes can be better achieved through partnering with aligned local organisations representing diverse groups, linking programme beneficiaries to additional interventions that tackle discrimination and promote empowerment and transformation (e.g. “cash plus” interventions such as GBV or adolescent safe space programming), and investing in staff skills and capacity on gender and inclusion.

*Source: UNICEF Innocenti (2020)*
2.2 Cash plus approaches

In recent years, the use of ‘cash plus’ programming has emerged as a particularly promising approach to promote gender-responsive and transformative outcomes. Cash plus programming recognises that although there is significant evidence of the impact of cash transfers, cash alone cannot be expected to tackle the multi-dimensional nature of poverty and vulnerability and its drivers, including gender inequality. ‘Cash plus’ therefore combines cash with one or more types of complementary support, as a first step to linking overall systems, and evidence is emerging on the positive impacts of cash plus approaches on well-being outcomes (see, for example, Chzhen et al., 2020; Cluver et al., 2019; Roelen et al., 2017; Bastagli et al., 2016).

Cash plus may be achieved by linking cash transfer programme recipients to one or more externally provided interventions, or by providing cash and one or more interventions within a cash transfer programme (or combinations of these) (see Table 1 and Box 2).

<table>
<thead>
<tr>
<th>Table 1: Illustrative examples of common types of cash plus programme components</th>
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<tbody>
<tr>
<td><strong>Cash + services</strong> (e.g. provision of information, automatic enrolment, preferential access, case management)</td>
</tr>
<tr>
<td>E.g.</td>
</tr>
<tr>
<td>• Social services</td>
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<tr>
<td>• Health insurance (fee waivers)</td>
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<tr>
<td>• Childcare</td>
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<tr>
<td>• GBV, child protection services</td>
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<td>• Psychosocial support</td>
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<td>• Justice services</td>
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<tr>
<td><strong>Cash + in-kind transfers</strong></td>
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<tr>
<td>E.g.</td>
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<tr>
<td>• Agricultural inputs</td>
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<tr>
<td>• Asset transfers</td>
</tr>
<tr>
<td>• Food supplements</td>
</tr>
<tr>
<td><strong>Cash + SBCC, labelling</strong></td>
</tr>
<tr>
<td>E.g.</td>
</tr>
<tr>
<td>• Nutrition</td>
</tr>
<tr>
<td>• Parenting and childcare</td>
</tr>
<tr>
<td>• Healthcare</td>
</tr>
<tr>
<td>• Schooling</td>
</tr>
<tr>
<td>• GBV, protection</td>
</tr>
<tr>
<td><strong>Cash + personal support or networks</strong></td>
</tr>
<tr>
<td>E.g.</td>
</tr>
<tr>
<td>• Coaching</td>
</tr>
<tr>
<td>• Mentoring</td>
</tr>
<tr>
<td>• Peer-to-peer support</td>
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<tr>
<td>• Savings groups</td>
</tr>
<tr>
<td><strong>Cash + skills training</strong></td>
</tr>
<tr>
<td>E.g.</td>
</tr>
<tr>
<td>• Agriculture, income generating</td>
</tr>
<tr>
<td>• Financial literacy</td>
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</tbody>
</table>

The key advantages of a cash plus approach are that providing recipients with cash and complementary programmes can enhance the effectiveness of the cash transfer, create efficiencies in the delivery of programmes, and address multiple needs (UNICEF, 2019). For example, by increasing and maximising the connections and outcomes across multiple sectors, cash plus interventions can address the non-financial barriers to accessing information, skills and services as well as address multiple vulnerabilities which individuals and households face, through an integrated and more sustainable approach. Moreover, coordinating across sectors can strengthen social protection and sectoral systems and service provision through a more efficient use of financial, human and administrative resources. Moreover, they can also support the overall linkages of systems, going beyond just specific programme linkages, but working towards common objectives across sectors.

However, the level of integration across external sectors, and the complexity of combining multiple integral interventions within cash plus programmes, have important implications for the levels of capacity, cost and time required to design and implement these programmes. Cash plus models which provide “lighter touch” linkages to external interventions – such as providing information on available services – still require investment in training but relatively lower investment in time, resources and staff skills than cash plus models which offer case management and referrals, demanding higher levels of administrative integration as well as staff time, skills and resources.
“Lighter touch” interventions may well have less of an impact than more substantive components, but more analysis is needed on the effectiveness and value for money on these different types of interventions from a gender equality perspective. Likewise, for cash plus programmes which implement the complementary activities internally within the cash programme, programmes which implement fewer complementary interventions and simpler types of interventions (e.g. inputs, messaging, awareness and information sharing) require lower levels of resources than multiple and complex interventions. However, evidence is still growing on the effectiveness of different types of interventions, and how they may be effectively combined to produce optimum outcomes on gender equality and women and girls’ well-being (see, for example, the work of The Accelerate Hub on outcomes for children and adolescents).

2.3 Applying the gender-responsive age-sensitive social protection framework to analysing cash plus programmes

Taking the gender-responsive and age-sensitive social protection framework approach together with the focus on cash plus as the social protection instrument of interest, we developed a series of questions to apply to the case studies to understand how gender-responsive or gender-transformative cash plus programmes are, looking across the key policy, design and implementation stages of a programme cycle (see Figure 2). These questions include:

The “cash plus” intervention: (outer circle in Figure 2)

1. What is the evidence of the outcomes/impacts of cash plus interventions on women and girls across the life course?

2. Are gendered risks and structural inequalities identified and addressed in cash plus programme design? And, have opportunities for a gender transformative approach been considered?

3. Is the implementation of cash plus programmes gender-responsive? E.g. does it recognise and remove women’s and girls’ barriers to access and respond to gendered needs? Is there a gender balance in implementing staff, are male and female implementing staff treated equitably?

4. Does the cash plus programme include gender-sensitive monitoring, evaluation and learning processes?

The “core” cash transfer: (middle circle in Figure 2)

5. To what extent is the “core” cash transfer gender-responsive? Does this influence cash plus programming?

The operating environment: (core circle in Figure 2)

6. To what extent does the legal, policy and social operating environment influence cash plus design and implementation choices from a gender perspective, and does this influence outcomes on gender equality?
Figure 2: Key considerations for assessing gender in cash plus programmes
(including intersections with core cash transfer and operating environment)
3. Gender-responsive cash plus programmes: Case studies

A detailed review of six case studies and several key informant interviews (KII) were conducted to uncover in-depth insights on gender-responsive cash plus programming (see Table 2 for an overview of the case studies and Annex 1 for more details). The case studies cover a variety of objectives, approaches and institutional arrangements across the four themes of specific interest to this review (with some overlaps across the themes). It is not possible to draw formal comparisons across the programmes, however, they each offer interesting experiences and lessons in approaches to cash plus and promoting gender equality and transformation and may be relevant for other practitioners outside their specific contexts.

This section provides an insight into what types of “plus” programmes are being combined with cash transfers from the selected case study programmes, and discusses the extent to which they are gender-responsive or gender-transformative in their approach and outcomes.

3.1 Overview of case studies

Ujana Salama (“Safe Youth”) livelihoods enhancement package to the Productive Social Safety Net Programme (PSSN) in Tanzania

Rationale: The Ujana Salama youth livelihoods enhancement package is an intervention implemented within the existing Government of Tanzania’s Productive Social Safety Net (PSSN) programme (which incorporates a cash transfer, livelihoods and a public works programme). Underpinning the design of the package was a recognition that adolescents represent Tanzania’s future development. However, for adolescent boys and girls, transitioning to adulthood often means facing social, health and economic risks. This includes limited economic opportunities, potential risk of early marriage and pregnancy, sexually transmitted infections (STIs) including HIV, violence, abuse and exploitation.

Evidence on the effects of the PSSN has shown improved school enrolment and health outcomes - the “Cash Plus” Ujana Salama enhancement was developed out of recognition that cash transfers alone cannot significantly alter non-financial and structural barriers to improve adolescents’ well-being. The complementary package of adolescent-focused interventions was therefore envisaged to boost the effects of the PSSN and offer an adolescent and youth tailored intervention as part of the programme, strengthening human and social capital across several areas and promoting healthy livelihoods that increase resilience, well-being and empowerment.

Programme design and implementation: The programme was implemented from 2017 to 2020 by the Tanzania Social Action Fund (TASAF), in collaboration with the Tanzania Commission for AIDS (TACAIDS) and with technical assistance from UNICEF. The programme supported 2,500 adolescent boys and girls (aged 14 to 19) from PSSN households in Mufindi District (Iringa Region) and Rungwe District (Mbeya Region) to transition safely into adulthood. Cash was provided to the adolescents’ families through PSSN, the national cash transfer programme.

The theory of change outlines the main programmatic areas and intended intermediate and mid to long term outcomes (see Figure 1). Alongside aiming to enhance livelihood skills and aspirations, these included several gender-specific intended outcomes including delayed sexual debut, marriage and pregnancy, while there are likely to be gendered impacts across a number of the others too. The programme design also sought to reduce levels of sexual exploitative behaviours, and violence, and increase ability to make informed decisions and seek out services related to SRH, HIV and GBV. The programme was targeted at both boys and girls in households receiving the PSSN transfer.
The guiding principles of the intervention included that it promoted government ownership, linkages to government services, and that it incorporated age and gender sensitive interventions (see Box 3).
Box 3: Tanzania programme components

Programme components:

1. **Adolescent livelihood and SRH-HIV life skills training:**
   This programme includes concurrent training sessions on (1) livelihood and economic empowerment, and (2) sexual reproductive health and HIV prevention and treatment education for adolescents. A bundle of “high impact” behaviour change communication approaches are implemented, including through peer support groups, to strengthen knowledge and skills among adolescent girls and boys related to HIV prevention and treatment, sexual and reproductive health, violence prevention, and promoting gender equity.

   Training included sessions and discussions included livelihoods focused training and sessions aimed at challenging gender roles and stereotypes including ones on gender roles in the household and gender-based violence. The curriculum included:

   **Livelihoods**
   - Dreams and goals
   - Entrepreneurship skills
   - Business plans and record keeping
   - Savings

   **HIV & SRH**
   - Coping with puberty
   - Relationships
   - HIV knowledge, prevention, and protection
   - Sexual risk taking and protection
   - Pregnancy and family planning
   - Violence and gender-based violence
   - Addressing negative gender attitudes and norms
   - Alcohol and drugs
   - Healthy living and nutrition

2. **Mentoring and coaching (on livelihood options and life concerns) and productive grants to be used for schooling, vocational, or business plans:**
   In parallel with and following the training sessions, the programme connects adolescent participants with a community-based mentor to coach them on livelihood options and life concerns. This includes referral to education, vocational training, savings groups, or a productive grant. Peer support groups were intended to strengthen knowledge and skills on HIV prevention and treatment, SRH, violence prevention, and promotion of gender equity. Mentors were members of the community that provide adolescents coaching on livelihood options and develop a relationship with adolescents could discuss their concerns. Productive grants were provided in one or two disbursements upon receipt of education or business plans prepared by participating adolescent and were worth the equivalent of 80 USD.

3. **Linkages to existing SRH and HIV services for adolescents:**
   The programme provides referrals for young women and men to health services, through trained mentors and youth peer educators.
Monitoring and evaluation: A longitudinal, mixed methods RCT impact evaluation has been carried out. Surveys were conducted with health facilities, communities, caregivers and adolescents (UNICEF Innocenti, 2020-2023). The evaluation was designed by splitting 130 clusters (villages) into two to compare the intervention whereby cash plus villages receive the PSSN cash transfer combined with Ujana Salama, and the control – villages receiving the PSSN cash only.

Baseline data was collected from health facilities, communities, caregivers, and adolescents in 2017 and again in 2018 (round 2) and 2019 (round 3) and a fourth round of data is expected to be collected in 2021.

Outcomes: Findings from the third round of data collection, which was conducted 26–28 months after baseline, one year after the in-person training, and one to two months after the asset transfers, found promising results. The evaluation shows increases in adolescent-friendly service provision at health facilities, and positive impacts on areas including SRH and HIV knowledge, gender-equitable attitudes, and livelihoods, and a reduction in sexual violence and physical violence perpetration, and increased age at sexual debut amongst girls (further detail on specific outcomes are listed in Box 4) (UNICEF Innocenti, 2020-2023).

Programme design and implementation: The project was implemented in 2017-2018 by the Sauti project, a USAID initiative working to improve health through a sustained reduction in HIV infections and implemented through an NGO (not linked to the government cash transfer programme). It was informed by vulnerability criteria developed by the Sauti project which included looking at ‘risky behaviour’. The project provided 12,144 adolescent girls and young women who were out of school with cash transfers of 70,000 Tanzanian Shillings (approximately 31 USD) every three months for 18 months with the condition that they attend at least ten hours of a behaviour change and communication (BCC) curriculum. The BCC curriculum included:

- financial education in small groups
- mentoring, and
- participation in savings and loans programme.

Monitoring and evaluation: The programme was evaluated through a small scale qualitative assessment using 60 in-depth interviews (IDIs) and 20 narrative timeline interviews with participants of the PEPFAR DREAMS Sauti/WORTH+ cash transfer programme between June 2017 and July 2018. These were undertaken at baseline and then throughout the project (Pettifor et al., 2019).

Outcomes: The evaluation found that adolescent girls and young women were better able to meet their basic needs, were less likely to engage in exploitative sex (transactional sex), were less...
reliant on male partners, and some were able to start their own businesses. Overall, this resulted in a reduced exposure to HIV.

Many unmarried young women reported that the cash transfer had reduced their need to be forced to resort to depend on exploitative relationships with male partners to cover their basic needs, which in turn reduced their dependence on male sex partners who previously provided these goods through sexual relationships. Notably, this experience was more pronounced among the poorest participants.

The Dreams Project also increased girls’ and young women’s choice about intimate partners as a result of the financial education and business development aspect of the intervention, which empowered them to refuse sexual partners, a finding that was particularly relevant for unmarried girls and women.

The reasons for the success of the programme were reported to include the following (Pettifor et al. 2019):

- The combination of a cash transfer with a mentorship programme/financial education and savings groups was identified as key to the programme’s implementation, leading the evaluators to suggest that future programmes could benefit from including and strengthening mentoring programmes alongside cash transfers.
- Clear communication around the goal of the project is reported to have been important to the success of the programme. The aims of the programme are said to have been clearly communicated and understood by the participants.

### Box 4: Selected gender-related impacts of Ujana Salama

Key findings from Round 3 of the RCT showed the following impacts from the Ujana Salama programme:

**Schooling**
- Unintended decrease in secondary school attendance driven by dropout from secondary school among the subsample of girls. Most dropouts happened before receiving the productive grants which indicates that youth may have chosen to leave school during the training or shortly after, in anticipation of the grants or earnings from business. Contextual factors such as lack of job opportunities for educated youth, may also be a reason.

**HIV, SRH and linkages to services**
- Delayed sexual debut among girls by approximately four months
- The programme increased visits to health facilities among boys
- Health facilities became more adolescent-friendly over time, compared to both Rounds 1 and 2.
- Positive impacts on visits to health facilities, quality of care, and knowledge of where to receive services

**Violence reduction**
- Reduction in experiences of sexual violence in the previous 12 months by 3.7 percentage points
- Reduction in the perpetration of physical violence by 3.3 percentage points (47.8 per cent reduction in violence perpetration), driven by men/boys
- There were no impacts on emotional or physical violence experiences, nor on violence reporting (help-seeking) indicators.

**Gender equity, mental health and attitudes**
- The intervention increased gender-equitable attitudes, particularly towards domestic chores and daily life, but has not resulted in a change of youth engagement in household chores in practice
Conducting gendered poverty and vulnerability analysis informs programme design and implementation, helping to understand the constraints that girls and women face in specific contexts and allowing programmes to be more transformative in design.

Providing girls and young women with mentors to support financial education and savings, alongside cash transfers, provided them with valuable support and reassurance, resulting in increased agency and self-esteem and enhanced aspirations for the future.

- Another factor was a positive unintended effect of additional financial support and advice from family members relating to the business and financial components of the programme. This was particularly the case among AGYW from financially better-off households.
- The economic empowerment aspect of the intervention created a sense of agency, self-reliance, and pride in the recipients as it reduced their dependency on others. This was more often the case for adolescent girls and young women who came from homes that were more financially stable whereas those who were very poor reported that the cash was spent on meeting basic needs or emergencies instead of investing in starting a business.

The ‘plus’ components of the pilot were designed to improve parenting skills and maximise outcomes for children, whose parents/carers receive the Child Grant.

**Programme design and implementation:** 368 parents from Dolakha, Kavre, and Mohottari districts participated in the pilot that was delivered by Save the Children. It included 14 weekly sessions on parenting skills, family budgeting, and nutrition that were intended to augment the benefits of the child grant provided by the Government of Nepal (see Box 5). Central to the cash plus pilot was the parenting skills component that included a psychosocial intervention based on the work of International Child Development Programme (ICDP) that promotes a safe, loving, nonviolent environment for children by supporting the improvement in parenting/carer skills.

The sessions were delivered to parents in group sessions, led by trained facilitators. The sessions were not instructive, but rather were based on facilitation techniques used by trained staff that could draw on the caregivers’ own knowledge and resources. They aimed to foster conversation and dialogue around certain themes and included homework and feedback to the group. They were designed to be empowering, and build on caregiver’s own resources and knowledge.

**Pilot cash plus complement to Government of Nepal Child Grant**

**Programme rationale:** This 2018 pilot included adding “plus” components to the Government of Nepal’s cash-based Child Grant, which is an existing intervention aimed at improving child nutrition, with technical support provided by UNICEF. The child grant is a monthly transfer of 400 Nepali Rupees to families with children under five and is provided to families in districts with the lowest human development indicators.

Providing a complementary ‘plus’ programming on parenting, building on parents’ existing resources and knowledge can strengthen caregivers’ autonomy and confidence in parenting topics. Targeting these towards male and female caregivers allows men and women to both receive this information and can promote the involvement of men, support more egalitarian roles in parenting responsibilities and improve well-being outcomes for children and adolescents.

### Box 5: Parenting topics covered in Nepal’s cash plus programme

<table>
<thead>
<tr>
<th>Session</th>
<th>Topic</th>
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<tbody>
<tr>
<td>Session 1</td>
<td>Introduction to the Parenting Programme</td>
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<tr>
<td>Session 2</td>
<td>Enhancing Knowledge on Access to Social Protection Programmes, including the Child Grant</td>
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<td>Session 3</td>
<td>Enhance Positive Qualities in Children</td>
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<td>Session 4</td>
<td>Empathize with Your Child</td>
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<td>Session 5</td>
<td>Show Love and Follow the Initiative of the Child</td>
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<td>Session 6</td>
<td>Close Communication and Praise</td>
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<td>Session 7</td>
<td>Meaningful and Enriching Ways of Talking with Your Child</td>
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<td>Session 8</td>
<td>Set Limits to the Child’s Behaviour in a Positive Way, Offer Step By Step Support to Accomplish a Task</td>
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<td>Session 9</td>
<td>Family Budgeting</td>
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<tr>
<td>Session 10</td>
<td>The Importance of Breastfeeding</td>
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<td>Session 11</td>
<td>Complementary Feeding and Essential Hygiene</td>
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<tr>
<td>Session 12</td>
<td>Budgeting for Children’s Nutritional Needs and Growth Monitoring</td>
</tr>
<tr>
<td>Session 13</td>
<td>Conclusion, Celebration and Way Forward</td>
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### Monitoring and evaluation:

Data from a baseline and endline questionnaire were collected before and after the parenting programme from 93 caregivers from the intervention group. The same questionnaires were undertaken with a control group of 92 caregivers. The intervention group received the government cash transfer plus the parenting sessions, and the control group only received the cash transfer⁴.

### Outcomes:

Lessons from the pilot from the small scale programme and evaluation found more positive feelings of parents towards children, higher engagement of parents with children, reduction in violence against and neglect of children in the home, and improved mental health of mothers when measured against the control group who received cash alone (Save the Children, 2019). In particular, the following findings indicated:

- Caregivers reported more warmth and positive feelings towards their children after the intervention, compared to the control group.
- There was a reduction in violence/neglect/or being incapable of taking care of the child by the parents in the intervention group, comparing before to after the intervention, and compared with the control group.
- Those who took part in the parenting sessions increased the number of activities they undertook with their children.
- There was a decrease in maternal mental health concerns after the intervention.

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⁴ It was advised that future studies could include a larger sample, a matched control group, and a longer follow up period.
Promising results were found in relation to reduced violence and neglect towards children, improved care giving and a decrease in maternal health concerns after the intervention. Further areas to explore include adapting future “plus” activities to respond to maternal mental health issues, challenge gender-based violence towards women and girls and challenge unequal distributions of care work between men and women.

**IDEAS BOX:**

Promoting gender-responsive and gender-transformative design

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**Conditional Cash Transfer for Education (CCTE) for Syrians and Other Refugees in Turkey**

**Programme rationale:** Since 2003, the Conditional Cash Transfer for Education (CCTE) has been used to encourage enrolment and improve school attendance of Turkish children. In 2017, it was extended to Syrian and other refugee families to encourage the enrolment and attendance of the most vulnerable refugee children through cash distributed to families conditional on their children attending school. A child protection-focused “plus” component was included in the design of the CCTE for refugees, consisting of an outreach and referrals system. This addition recognises that protection risks are linked to economic vulnerabilities and absences from school. It aims to mitigate the risks of rights violations that are highly gendered, such as child labour, child marriage, physical and emotional violence, and family separation.

**Programme design and implementation:** The programme is implemented by the Turkish Ministry of Family, Labour and Social Services, the Ministry of National Education, the Turkish Red Crescent, and UNICEF.

The cash transfer component of the CCTE for Refugees programme applies the same rules and regulations as applied for Turkish families under the national CCTE programme. Between May 2017 and March 2020, 75,390 children were reached in the 15 provinces with the highest number of refugees in Turkey. Participating families receive cash support every two months on the condition that the child attends school at least 80% of the time, with amounts of cash linked to the age and gender of the children with older children and girls receiving more and the majority of the families also registered within the Emergency Social Safety Net (ESSN) programme that also provides monthly cash transfers.

The CCTE child protection component aims to ensure the continued school enrolment and attendance of the most vulnerable refugee children, as well as their referral to child protection services, when needed. This component is implemented by outreach teams consisting of social workers and translators.

Outreach teams visit families whose children are not meeting, or are at risk of not meeting, the attendance condition of the CCTE programme. Families are assessed and their needs are identified in a ‘personalized and systematic manner’. It also hopes to address involvement in child labour, child marriage, physical and emotional violence and family separation.

**Monitoring and evaluation:** An 8-month (Oct 2019-July 2020), mixed-methods programme evaluation of the CCTE was carried out. This aimed to assess its relevance, efficiency, effectiveness, coherence and coordination, and sustainability. The methodology included a desk review, secondary quantitative data analysis and primary qualitative data collection in the form of interviews and focus groups.

The inclusion of qualitative methods led to some important conclusions on the inclusion of the plus (child protection) component. Most parents interviewed for the evaluation also received transfers under the Emergency Social Safety Net which made it difficult to disentangle the effects of the cash provided under the CCTE from the ESSN transfer.

**Outcomes:** The evaluation of the CCTE for refugees shows that the combination of cash and child protection components achieved positive results and were successfully implemented in a complex environment (although challenges remained – see below) (Ring et al., 2020). The qualitative evaluation found that child protection visits were important in
preventing and responding to the risks that children face as well as encouraging parents to send their children to school regularly, and encouraging school enrolment at age six. Child protection visits were also able to identify and overcome barriers to school enrolment that included language barriers, overcrowding, and disabilities that prevented families from registering their children for school. The evaluation pointed to evidence that there is a correlation between child protection visits and increased school attendance. Learning from the child protection component indicated that in some contexts refugee boys were just as vulnerable as girls to dropping out of school, especially because of higher risks of child labour – whilst other gendered risks impacted on girls disproportionately (such as child marriage and GBV).

The learning from this programme shows that when designing gender-responsive programme components, it is important to adequately assess the gendered needs and vulnerabilities of boys and girls in a particular context and adapt the design accordingly so that it doesn’t disadvantage one or the other and responds to the spectrum of risks and issues experienced.

The evaluation also found that the involvement of outreach teams of social workers and translators was effective in facilitating access for refugee families to available services to address health, psychosocial, and economic needs. However, the child protection component was unable to meet the demand for their services due to limited available capacity and given the complexity of the humanitarian context in which it was operating.

**The Child Development Grant Programme (CDGP) / First 1,000 days in Nigeria**

**Programme rationale:** Implemented between 2013 and 2019 by Save the Children and Action against Hunger and funded by DFID, the CDGP aimed to improve child nutrition and maternal health through cash transfers and Social Behaviour Change Communication (SBCC). The aim of the intervention was to improve food security and promote the adoption of practices and behaviours to support better maternal and child health. The premise behind the programme was that combining nutrition interventions with cash transfers can have a greater impact towards reducing malnutrition for the programme’s Theory of Change.

Indirectly, the cash transfer, as an independent source of income, was also expected to impact men’s and women’s time use, their ability to make longer-term investments, and their ability to cope with seasonal risks and stresses. In turn, these effects were expected to increase food security and improve the quantity and quality of food consumed. The counselling and SBCC focused on knowledge, attitude and perceptions, and time use, and ran alongside the cash transfer. The SBCC was intended to improve women’s and men’s knowledge and attitudes about healthy practices to promote child development and maternal health. Two models were tested: a ‘low intensity’ SBCC intervention that included posters, radio messages, text messaging, health tasks, and food demonstrations, and a ‘high intensity’ SBCC intervention that included support groups and one-to-one counselling for
women receiving the cash transfer as well as all components of the ‘low intensity’ SBCC.

The implementation of the programme faced several challenges. Cash transfers were intended to reach pregnant women early in their pregnancy until their child reached the age of two. However, there were difficulties in maintaining accurate records of the birth dates of all children in a context where few births are formally recorded (and caregivers do not know exact birth dates) and it was also difficult for the programme to reliably enrol beneficiaries early in their pregnancy. This resulted in delays in pregnant women receiving payments which were on average between 6-8 months. Another challenge was in the implementation of the SBCC. Although the programme aimed to test “high” versus “low” intensity SBCC, in practice there was little difference in implementation between the two because of challenges delivering the “high” level SBCC. This was due to difficulties in staffing the Community Volunteer positions to deliver the SBCC activities which produced delays in implementing the SBCC component, and the wide range of SBCC activities to be delivered by an extensive network of volunteers across the CDGP communities.  

The CDGP considered gender across the “core” cash transfer design and the “plus” activities. Women were identified as the main recipients of the cash transfer and their control over the income was actively promoted. Both women and men were targeted to receive the SBCC which focused on changing knowledge, attitude and perceptions to improve maternal and child health and nutrition. Positive outcomes were found in women’s decision-making power, and in men and women’s knowledge, beliefs and practices around children’s health and nutrition.

Social and behavioural change communication can be tailored differently to reach men and women in both its content and the channel of communication. Differences were found between men and women with regards to the exposure to different types of SBCC communication type. For women, the channels most frequently reported were posters, followed by food demonstrations. For their husbands, the channels most frequently reported exposure to were radio and posters.

Monitoring and evaluation: An impact evaluation of the CDGP based on a household survey (baseline, midline and endline), a process evaluation of the programme and a longitudinal qualitative study was conducted.

Outcomes: The evaluation found the following:
- there was little difference in the effects of the ‘low intensity’ and ‘high intensity’ SBCC. A key reason for this was because of the challenges faced in implementation, with little difference between the two versions of SBCC eventually provided.
- CDGP reduced the prevalence of stunting among children
- CDGP increased women’s and men’s knowledge, beliefs and practices around infant and young children feeding (IYCF) practices, including improvements in breastfeeding practices in relation to young children and improved dietary diversity for older children
- little evidence of any effect of the programme on women’s nutritional status, as measured by height, weight, body mass index, and mid–upper arm circumference
- increases in the use of antenatal care services in CDGP communities
- women retained control over the cash transfer and were able to determine how it was spent and both men and women who were interviewed during the evaluation accepted that women were the primary beneficiaries of the CDGP cash transfers and that they were entitled to choose how the money was spent.

The programme had an impact on the proportion of women engaged in any work activities (92% CDGP compared to 81% non-CDGP). CDGP women recipients also had more livestock and savings, and borrowed less


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IDEAS BOX: Promoting gender-responsive and gender-transformative design  

Social and behavioural change communication can be tailored differently to reach men and women in both its content and the channel of communication. Differences were found between men and women with regards to the exposure to different types of SBCC communication type. For women, the channels most frequently reported were posters, followed by food demonstrations. For their husbands, the channels most frequently reported exposure to were radio and posters.

Monitoring and evaluation: An impact evaluation of the CDGP based on a household survey (baseline, midline and endline), a process evaluation of the programme and a longitudinal qualitative study was conducted.

Outcomes: The evaluation found the following:
- there was little difference in the effects of the ‘low intensity’ and ‘high intensity’ SBCC. A key reason for this was because of the challenges faced in implementation, with little difference between the two versions of SBCC eventually provided.
- CDGP reduced the prevalence of stunting among children
- CDGP increased women’s and men’s knowledge, beliefs and practices around infant and young children feeding (IYCF) practices, including improvements in breastfeeding practices in relation to young children and improved dietary diversity for older children
- little evidence of any effect of the programme on women’s nutritional status, as measured by height, weight, body mass index, and mid–upper arm circumference
- increases in the use of antenatal care services in CDGP communities
- women retained control over the cash transfer and were able to determine how it was spent and both men and women who were interviewed during the evaluation accepted that women were the primary beneficiaries of the CDGP cash transfers and that they were entitled to choose how the money was spent.

The programme had an impact on the proportion of women engaged in any work activities (92% CDGP compared to 81% non-CDGP). CDGP women recipients also had more livestock and savings, and borrowed less

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5 Image from https://www.nicepng.com/ourpic/u2y3a9rf5t4o0i114_gender-inequalities-empowering-women-and-providing-gender-equality/
Social and behavioural change communication can be tailored differently to reach men and women in both its content and the channel of communication. Differences were found between men and women with regards to the exposure to different types of SBCC communication type. For women, the channels most frequently reported were posters, followed by food demonstrations. For their husbands, the channels most frequently reported exposure to were radio and posters.

**Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer (IN-SCT) in Ethiopia**

**Programme rationale:** The IN-SCT pilot was developed by UNICEF in recognition that malnutrition continues to be a serious issue in Ethiopia. The pilot aimed to integrate nutrition, health and cash transfer programming and complement the Productive Safety Net Programme (PSNP4) with a comprehensive package of ‘plus’ components.

**Programme design and implementation:** In 2015, UNICEF supported the Ministry of Labor and Social Affairs (MoLSA) of the Government of Ethiopia to pilot this programme, aiming to integrate nutrition and cash transfer programming and complement the existing Productive Safety Net Programme 4 (PSNP4), in two regions of the country – Oromia and the Southern Nations, Nationalities, and Peoples’ (SNNP) Region.

Participants in the ‘cash plus’ pilot were PSNP recipients, a national public works programme that includes support for pregnant women. The “plus” components are shown in Box 6. The PSNP has evolved since its inception, with increasing gender-sensitive and responsive features in its core public works programme. For example, the programme enables women who are pregnant/breastfeeding to receive temporary unconditional and direct support thereby excusing them from labour requirements of PWP, it lowers the workload for women, and names women as recipients of the cash even in male-headed households. However, the introduction of a new electronic payment system changed control of PSNP cash transfers away from women in some instances, as the ATM cards are given to the household head, usually a man.

**Monitoring and evaluation:** A mixed method evaluation was carried out to assess the IN-SCT pilot project’s performance between 2016 and 2018. The research aimed to comprehensively assess the impacts on child-specific nutrition and health related outcomes, explore effectiveness in targeting and social outcomes, and the impacts on nutrition-related co-responsibilities. Data was also disaggregated by sex where possible.

Given the complexities of the underlying determinants of malnutrition, promoting improvements to women’s health as well as children must form a more central part of cash plus programmes. A broader set of indicators is also needed to measure and draw conclusions about the final impacts of such programmes and feed back in programme design and implementation. Lessons from this case study suggest there could be impacts across a wide range of indicators relevant for women’s and girls’ wellbeing and gender equality, such as women’s empowerment, decision-making and agency.
The evaluation included a baseline and endline surveys. Importantly, and unlike other designs of programmes of this kind, the sample design enabled comparison of characteristics and outcomes between beneficiaries of the IN-SCT pilot (an enhancement of PSNP4), beneficiaries of PSNP4 only and non-beneficiary households. Qualitative data was also collected through key informant interviews and focus group discussions. The evaluation looked at both process and impact.

**Box 6: IN-SCT components including ‘cash plus’**

The IN-SCT programme included the following components:

- developing and testing the integration of access to basic social services and delivery of social cash transfers
- building the institutional capacity of the Ministry of Labour and Social Affairs to support individuals receiving permanent direct support
- assisting the transition of pregnant and lactating women and malnourished children’s caregivers from employment in public works to temporary direct support (unconditional transfers with no requirement for public works).
- developing, establishing and testing a management information system
- supporting nutrition behaviour change communication (BCC) sessions for beneficiaries engaged in public works
- promoting beneficiary attendance of co-responsibilities (e.g. children enrol and attend school and use health services such as antenatal and postnatal care, growth monitoring) and BCC
- strengthening multisectoral coordination between social workers, health extension workers, schools, child protection services and other service providers
- employing social workers operating at the kebele (municipality) level to support IN-SCT objectives

**Source:** UNICEF (2020b)

**Outcomes:** The impact evaluation (UNICEF, IPFRI & MOLSA (2020) found some improvements comparing PSNP4 households and IN-SCT households – for example, IN-SCT increased the household dietary diversity score (HDDS) by 1 food group out of the 12 considered for the sample overall, improved the share of women consuming a minimally acceptable diet and reduced the food gap by roughly 1 month compared to the PSNP4 alone (UNICEF, IPFRI & MOLSA, 2020: 16). The evaluation also found that women learned nutrition messages and improved some practices, such as breastfeeding (Ibid.). However, in comparison to children in other PSNP4 woredas but not in the programme, the evaluation found no measurable impact on child nutrition outcomes, or household food and non-food consumption. Qualitative methods found slight improvements in awareness of the negative effects of early marriage and a reduction in child labour. However, the evaluation notes that any changes in behaviours are modest and the role of IN-SCT in this change is likely to have been small. Notably, in comparison to those only receiving PSNP4, participation in IN-SCT significantly increased the number of pregnant women receiving antenatal care, but not necessarily the number of antenatal care visits.

The evaluation found that the social workers involved in the delivery of the intervention faced numerous obstacles to the fulfilment of their role in the effective implementation of the ‘cash plus’ elements of the pilot, notably the burdensome reporting requirements of the newly introduced social protection information management system, insufficient social workers to meet the demands, and lack of logistical support to travel to the communities.
Despite these mixed effects, qualitative data suggests that although the relative and absolute impacts of the IN-SCT project are mixed, the changes brought about by the pilot were positively received. For example, improved behaviours relating to hygiene and sanitation were reported by BCC session participants in IN-SCT areas and stakeholders in federal and regional levels highlighted the project’s success in raising awareness of available services.

The design and implementation of the core cash transfer or public works programme can undermine or support outcomes for women and men through the “plus” intervention. The programme offers a number of gender-sensitive core components, including the provision of direct support for pregnant and lactating women. Women reported benefiting from being the main recipients of the cash transfers, increasing their decision-making power and a sense of ownership. However, a new electronic payment system changed control of PSNP cash transfers away from women, since the ATM cards are given to the household head – usually a man. Some women appealed and had it changed to their name.

**Table 2: Overview of case studies cash plus components**

<table>
<thead>
<tr>
<th>Country case study</th>
<th>Tanzania: Ujana Salama</th>
<th>Tanzania: The Dreams project</th>
<th>Nepal: Cash plus pilot to Child Grant</th>
<th>Turkey: Conditional Cash Transfer for Education (CCTE) for refugees</th>
<th>Nigeria: Child Development Grant Programme (CDGP)</th>
<th>Ethiopia: Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer (IN-SCT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recipients of national cash transfer programme?</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Government infrastructure / staff for implementation?</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>In-kind transfers</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Knowledge transfer, BCC, labelling</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Skills training</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Individual support / family case management</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Referrals / linkages to services</td>
<td>✓ (health, psycho-social, economic services)</td>
<td>✓ (child protection)</td>
<td>✓ (antenatal care)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer networks / groups</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
4. Lessons learned in gender-responsive design and implementation

Across the case studies and KIIs, a number of lessons and practices emerged around designing cash plus programmes that address gender inequality, reduce risks to violence, exploitation, and abuse, and promote empowerment and transformative outcomes. Whilst evaluations are increasingly assessing the impacts and effectiveness of programmes, the methodologies employed to do this vary substantially (e.g. comparisons between the plus and non-plus components, or comparing those receiving the cash plus intervention against those not receiving any intervention). Programme evaluations have not been designed to assess what types and combinations of “plus” interventions may be most effective (for example, which sector interventions may be most effective and which modality to use to achieve those (e.g. through BCC, referrals, combinations of approaches).

As such, there is no one-size-fits-all approach, and no one approach or combination of “plus” activities that could be deemed more preferable or effective than others, given the diverse range of objectives and contexts that the cash plus case studies discussed here operate in. However, there are a number of insights that we can draw out to indicate what can be considered effective (or ineffective) in these design and implementation approaches from a gender perspective. Returning back to our guiding analytical questions presented in Section 2, we draw on the case studies and key informant interviews to answer key questions around:

- cash plus (design, implementation, monitoring and evaluation)
- the “core” cash transfer
- the policy and operating environment

4.1 Designing gender-responsive cash plus programmes: Are gendered risks and structural inequalities identified and addressed in cash plus programme design?

4.1.1 Gender equality and transformative objectives

The review of the case study cash plus programmes showed that these programmes often identify and respond to individual needs as well as consider how challenges faced by individuals are influenced by broader household and community dynamics and social norms. Several of the cash plus programmes reviewed for this study consider how the challenges faced by individuals are influenced by gender and age, and how social norms regarding gender at the household and community levels affect the targeted population. This approach understands that needs are multidimensional and should be met with integrated and multiple responses at individual, household and community levels, beyond simply transferring income.

The Tanzania Ujana Salama case study illustrates the importance of setting clear objectives in the programme to achieve gender-transformative changes, identifying the key programming activities needed to achieve these objectives. The Ujana Salama programme theory of change, for example, outlines the main programmatic areas and intended mid- to long-term outcomes. Alongside other outcomes, gender-specific outcomes were included, such as delayed sexual debut, marriage and pregnancy as well as reduction in sexual exploitative behaviours and violence, and increased care seeking behaviour related to SRH, HIV and GBV.

A clear rationale and theory of change can also identify and mitigate gender-specific risks and prevent unintended negative effects of the programme, for example, exacerbating
risks of violence, exploitation, and abuse of women and girls or creating additional time burdens on women. For example, the decision to include boys in the Tanzania Ujana Salama programme was partly to mitigate against the potential risk of backlash against girls participating in the programme.

Several of the case studies highlight the logic that should underpin cash plus programming: conducting a gender analysis that goes beyond disaggregating poverty data and looks at the drivers of poverty and vulnerability (including the role of social norms), articulating programme objectives for gender-transformative change and clearly communicating these objectives with programme beneficiaries, and developing a Theory of Change or strategy to identify how programme design and implementation choices will achieve these objectives.

There are no universal rules from the case studies as to what combinations of “plus” interventions work best for promoting different gender equality or transformative outcomes, partly because there is insufficient evidence that attributes and compares particular “plus” components to outcomes, and because it depends on the ultimate objectives of the programme. The review of the case studies highlight the following insights.

**Box 7: Operational implications for designing gender-related objectives**

**Conduct a comprehensive gender analysis:** Conducting a gender analysis that looks at gender dimensions of poverty and vulnerability is critical to identifying the specific needs of women and girls (and men and boys) and using that information to inform the cash and cash plus programme design and implementation. Conducting a gender analysis for the cash plus programme should build on the analysis that informed the core cash programme, but there may be more areas to examine and assess for cash plus. This should involve, for example, looking more broadly at multi-dimensional poverty and vulnerability beyond income poverty (for example, sexual and reproductive health, education, protection, nutrition, livelihoods) and interrogating the intersections between economic and social risks and vulnerabilities too. In addition, a gender analysis to inform cash plus programming may also look into more detail at the drivers of poverty, vulnerability and inequality – including for example, socio-cultural norms and behaviours, institutional practices, social capital and networks – identifying how these can be addressed through cash plus programming to achieve improved outcomes on women and girls’ wellbeing and empowerment.

Such analyses should be participatory and informed by members of the targeted community, particularly women and girls, and local stakeholders, and employ a multi-disciplinary cash plus team, to ensure a gender lens is applied throughout the programme cycle.

**Set clear gender-related objectives:** A gender analysis provides the rationale for setting objectives which explicitly aim to promote gender equality and girls’ and women’s empowerment, whilst shifting gender norms that can be harmful to men and boys as well. Even in programmes that do not have gender transformation as an ultimate objective, the programme should include clear gender-related considerations throughout the pathways to the final objective.

**Develop a Theory of Change:** Articulating a theory of change is particularly important when the goal of a ‘plus’ component is to shift attitudes, behaviours, and practices that perpetuate harmful and discriminatory social norms around gender roles for women, men, girls, and boys. A clear rationale and theory of change also enable measurement of these changes through intermediate pathways and milestones. Monitoring and evaluation frameworks and baseline data collection should reflect these anticipated pathways, and measure changes in attitudes, behaviours, and practices that are expected to change as a result of the intervention.
4.1.2 Quality and type of “plus” components

Linking cash interventions with Social Behaviour Change Communication interventions (SBCC) has been one of the main “plus” components used to address structural inequalities such as discriminatory attitudes, behaviours and practices that underpin gender inequality. Evaluations indicate that these components have contributed to promoting positive attitudes and behaviour change related to gender roles (e.g. Tanzania), co-parenting practices (Nepal), and improving women’s health and children’s health and nutrition (Nigeria) (see section 3 above).

The delivery of these components varies by programme. In Tanzania, clear communication around the goal of the project was important to the success of the Dreams programme because they were well understood and accepted by the participants. In particular, the communication on the intended use of the cash transfer in combination with the plus components, helped increase women’s independence and reduce transactional sex.

In the Tanzania Ujana Salama programme, the curriculum created opportunities for adolescents to discuss and question gender roles in the home and community. This included sessions for discussions challenging gender roles and stereotypes, including around gender roles in the household and GBV.

In Nepal, the information provided through SBCC was important to the programme’s success. For example, central to the parenting intervention was a psychosocial preventive early intervention programme (developed by International Child Development Programme (ICDPI)), which aims to promote a safe, loving, and nonviolent environment to foster children’s development through improved parenting/caregiver skills. The programme highlights the importance of training facilitators’ skills and approach to be empowering, for instance being non-instructive and explicitly building on caregivers’ own resources and knowledge. A broader literature on parenting practices and interventions also demonstrates the positive impacts of parenting on children and adolescent well-being, including reducing violence-related risks that girls face (see for example, Ward et al., 2020; Shenderovich et al., 2020; Gardner and Cluver, 2020; Cluver et al., 2020; Puffer et al., 2017).

In Nigeria, differences found in men and women’s exposure to different types of SBCC communication shows that the ways in which SBCC is delivered is also important – given that as noted above, women reported that the channels most frequently utilised were posters, followed by food demonstrations and for their husbands, the channels most frequently reported exposed to were radio and posters.

The combination of cash with individual mentoring / coaching / skills training was key to some programmes’ success. In the Dreams project in Tanzania, for example, the combination of a cash transfer to adolescent girls and young women, together with a mentorship programme/financial education and savings groups was found to have been critical to the programme’s success, indicating that future programmes could benefit from including and strengthening mentoring programmes alongside cash transfers. Matching girls and young women with mentors provided them with valuable support and increased agency and self-esteem and enhanced aspirations for the future.

Ensuring institutional safeguards throughout the cash and the plus programmes was highlighted as an important gap in many of the case study programmes, despite some having a “plus” programme focusing on protection outcomes. Organisations involved in cash plus programming, regardless of the nature of the ‘plus’ component, have a duty of care to ensure that participants in the intervention are not negatively affected and do not suffer from their receipt of cash. Linkages with protection actors can alleviate these challenges, but it is a particular issue when existing protection systems are insufficient. For example, in Tanzania referrals are made to specialised service providers when protection concerns are identified, but no information is shared on the effectiveness of these referrals or if the protection concern was addressed.

Staff training and capacity on protection issues, including the risks faced by women and girls to violence, exploitation, and abuse, is essential in cash plus programming. Without this awareness and understanding, including on when referrals to specialist support provided by protection-focused agencies is necessary, risks may not be adequately identified and mitigated.
4.1.3 Targeting and eligibility choices

The eligibility criteria for cash plus programmes depend on the programme objectives, and does not always include the main recipients of the cash transfer programme. For example, in the Tanzania Dreams project, adolescents and young women received the cash transfer, whereas in the Ujana Salama programme, parents receive the cash transfer and youth receive the “plus” components.

In the case study programmes reviewed here, the inclusion of men and boys has been an important factor in several of the cash plus interventions which aim to shift attitudes around gender inequality, discriminatory norms and practices. For example, in Tanzania, the Ujana Salama project included boys not only to reduce any potentially negative risks of backlash against girls, including violence, but also because of the focus on changing social norms on gender roles and the opportunity to bring boys and girls together during the training sessions (KII).

One KII also noted that holding family development sessions which requires the participation of men is critical to ensure that fulfilling programme-related conditions does not become the sole responsibility of women and is considered a family responsibility.

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Box 8: Operational implications for choosing “plus” interventions to support gender equality and empowerment

The combination of plus components will depend on the programme objectives, but consider the following to enhance attention to gender equality and empowerment:

**SBCC**
- use channels that are known to reach women (and men);
- cover topics which shift gender relations or are tailored to the gendered objectives of the programme
- deliver SBCC in an inclusive, respectful and empowering way;
- build rapport with men and boys

**Skills training / mentoring:**
- specialised and tailored support can help to build women and girls’ confidence, self-esteem and to be able to take advantage of the programme’s activities (e.g. economic independence)

**Strengthening the supply side:**
- Adapt and tailor services where necessary to respond to recipient’s needs (e.g. gender-responsive and inclusive service provision, for example through training staff on specialised support such as adolescent health, protection)
- Support collective action and coordination of actors to help strengthen the supply side of services
4.2 Implementing gender-responsive cash plus programmes: Are there gendered barriers to accessing cash plus programmes and are implementing modalities gender equitable?

This section looks at the lessons around implementing cash plus programmes, focusing on the actors involved in implementation, coordination issues in cash plus programmes, challenges around service delivery of the “plus” components, as well as implications for sustainability and programme scale up.

Many of the case studies highlighted challenges in implementing cash plus programmes, ranging from the availability and quality of referral services, capacity of staff to implement gender-sensitive programme features (skills and time), complex operating environments, and coordination challenges across multiple sectors. Some programmes included explicit objectives to overcome some of these challenges.

4.2.1 Staff skills, capacity and experience on gender equality to deliver “plus” activities

The case studies highlight a range of actors involved in delivering cash plus components, including sub-national government staff across different sectors (e.g. extension workers, health workers, social workers), development partners, NGOs and civil society organisations, and community volunteers. The quality and capacity of implementing staff delivering personalised referrals, case management and/or mentorship roles, is absolutely critical to the success of cash plus programmes (Roelen et al., 2017).

A number of the programmes reviewed here work with NGOs who have skills, experience and existing networks on gender and KIIIs suggest that this helped with quality delivery.

Box 9: Operational implications for including men and boys in cash plus interventions

There are several considerations for including men and boys in cash plus interventions:

- Ensure that the content of the “plus” objectives is appropriate for men and boys, and women and girls - e.g. ensuring a range of specific topics in BCC such as economic activities, decision making in households, violence against women and girls;
- Consider how men and boys also benefit from the income-related impact of the intervention. Where women are targeted as the main recipients, ensure that programme objectives are clearly articulated to men and the community to reduce the risk of backlash and increase the acceptability of women’s control over the transfer;
- Invest time and resources in the social workers / trainers / mentors building up a good relationship and rapport with participants. Particular attention may be needed to encourage men and boys to participate in coaching components, thus building rapport with men and boys is critical for enabling a positive response from them to the sessions.
of plus components. NGOs may implement the programme or be brought in to provide specific roles within the implementation, for example, providing services when they are not available. Even when programmes use government structures and staff, NGOs have been contracted to provide training to trainers on specific issues (e.g. in the case in the Tanzania Ujana Salama programme for example - see below).

Several KIIs noted that there was a preference to implement the programme as close to the local communities as possible – for example, hiring local / community coaches, trainers and mentors. A key factor in the selection of social workers / mentors is that they should have experience relating to the target group – partly to avoid lengthy skills training but also because they tend to have a vested interest in the recipient’s success from the programme (KII). However, this also may result in difficulties in the recruitment to find social workers from the local communities with relevant experience, but who do not face the same vulnerabilities and risks as the people they are trying to support (see Box 10).

In Tanzania, the Ujana Salama programme works through government structures from the national to the local level (through TASAF) and a key consideration for the selection of mentors was to select which government cadre and facilitators to work with for training. A key consideration for the implementation of the “plus package” was that they needed relevant experience on the issues of adolescent health and livelihoods. UNICEF negotiated with TASAF that local health workers, agricultural extension workers and teachers should be engaged in the programme to act as mentors to the people in the local communities and it was important that mentors come from the same community (KII).

**Box 10: Approaches to recruiting case workers and mentors**

In Uganda, a cash transfer project worked with two civil society organisations who have specialist experience working with girls out of school, but they didn’t have the existing networks for mentors. The Kampala Capital City Authority (KCCA) put out a call, and KCCA and UNICEF interviewed, selected and onboarded the mentors. The criteria included university education and experience enabling them to relate to the girls – this was seen as especially important so that they understand and appreciate the realities of the girls’ lives. On a practical level, the programme faced some challenges in terms of matching mentors to girls – they first selected the mentors and then the girls, but they weren’t always located in the same part of the city or speaking the same language (KII).

In an emerging cash plus programme in Bangladesh, qualifications of the social workers were to have social work degrees and to have had experience with case management before in the area of child protection. The implementing partner Terre des Hommes (TDH) is an NGO focused on child protection and already had a network of social workers. Many of the social workers are early to mid-level professionals with previous work experience in the area of child protection (KII).

In the Tanzania Ujana Salama programme, mentors are selected through a committee after local nomination – the TASAF system has local structures at village level which include a coordination committee at community level. These existing structures have reportedly been beneficial (Tanzania KII).

The technical skills and the interpersonal skills of mentors / coaches are also important. Key informant interviews emphasised that the technical skills of the trainers / mentors / coaches are obviously important, but also that the soft skills of the implementing staff are also vital to build trust and also to engage both women and men in programmes. Given that lack of confidence and self-esteem of women and girls in households is often identified as a barrier to programme participation or effectiveness, trainers / coaches / mentors need to be able boost their self-esteem and morale, to be able to take advantage of the programme’s activities (e.g. to generate return from the livelihoods assets, or to translate information into changes in practice). In Nepal, for example, the parenting programme is led by trained facilitators and
implemented with groups of parents and are intended to be non-instructive, empowering, and to build on caregivers’ own resources and knowledge.

In many programmes, significant investment is needed in terms of time and resources to build the relevant skills of the implementers. This is often the case with programmes implemented by government staff who do have technical skills in their areas of expertise, but may not have the skills required to tailor the training/mentoring/BCC to the needs of the specific target group and to meet the programme’s explicit gender objectives, and/or are not embedded in the communities the programme is working with. An example of this comes from the Tanzanian Ujana Salama as whilst the implementing body TASAF (who delivers the PSSN) have their own trainers on livelihoods, these are mainly located at national or district level. Instead of using this cadre of trainers, the choice was made to hire trainers who are closest to the communities and therefore have invested in training these trainers. For the Ministry of Health staff, an NGO was brought in to provide capacity strengthening and developing specific skills in the area of sexual and reproductive health to build the capacity of the government. The training was provided to the government cadre for 12 months and provided a backstop to the trainers. This was seen as a good decision, recognising that capacity building is not done in one training, rather seeing this as a “hands on” approach (KII).

It is also important that the implementing staff are aware of the details of the programme design and gender-related objectives to ensure that these are effectively communicated to the recipients. For example, in the Ethiopian IN-SCT programme, there was ambiguity in some of the programme components relating to gender – particularly the move to temporary direct support (TDS) from public works programmes for parents / carers with malnourished children. The evaluation found that implementation is also influenced by gendered social norms: respondents mostly referred to women, mothers and female caregivers as being allowed to take time out from public works to care for their malnourished child, whilst some men did show some awareness of their entitlement but this doesn’t appear to have been widespread. One social worker reported that it is not necessarily clear that the provision holds for both men and women. Amongst a number of recommendations for strengthening the project, the evaluation suggested to boost the recruitment, training and support of social (and health extension) workers, and increase the communications materials.

In addition to skills, the available capacity of implementing staff is an important factor for the success of the programme. The importance of considering workloads has also been noted in other reviews (Roelen et al., 2017) and was also highlighted in both the Turkey and Ethiopia case studies. In Turkey, for example, recognising that whilst there was significant success in reaching 75,390 children, overall the scale of the problems and the complexities of the operating environment are real challenges to meeting need and realising the potential impacts of the programme. The qualitative evaluation of the Turkish programme found that although the child protection team operated efficiently, it could have improved with additional resources given the large caseload and limited number of staff. The growing child protection caseload exceeded the existing capacity and resources of the child protection team and the team could only provide household visits to “a fraction” of the children who should have been visited.

Another issue is the balance between capacity building efforts and overburdening those involved in programme implementation. When offering opportunities to improve skills and leadership of local community implementers, it is important they are compensated for their time and their involvement in the programme does not exacerbate time inequalities, especially for women. The programmes showed a range of experiences in the gender balance of the mentors / trainers / coaches (in Ethiopia they were all male, in other countries they are mixed), but a number of the case studies highlighted the dedication and commitment of community implementers to the programme, and that they are not hired as full-time or salaried staff. In Tanzania, for example, mentors receive an allowance for their participation in longer trainings and their travel time is compensated, but they are not formally employed for their work as mentors. For many, this is seen as a professional opportunity to be more recognised by the local government and community. In a cash plus programme in Uganda, for example, all the mentors receive a stipend with lead mentors receiving higher stipends

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6 Note that alongside increasing the period of intervention, more intensive interventions, improving the diet and nutrition of children and of pregnant and nursing breastfeeding women themselves, and refining the management information system.

7 With referrals?
and some government benefits (social security), but overall it is a volunteer workforce who receive partial compensation for time, communications and travel costs, which raises questions on the sustainability and accountability of a volunteer-led delivery model.

4.2.2 Co-ordination across sectors and integration of gender institutions and experts

Coordination challenges in social protection in general, and cash plus programmes specifically, are well recognised. As such, we highlight two particular challenges here which are directly relevant to gender-responsive cash plus programmes: i) cross-sectoral buy-in of gender-responsive cash plus programmes that link economic and social programmes; and ii) practical implications relating to access to data and data protection in the case of referrals.

Cross-sectoral buy-in: Cash plus programmes are often trying to link sectors and actors which are not typically aligned or coordinated with each other and often involve multiple sectors and actors working together. This can be challenging, especially where ministries have specific mandates with little experience of linking economic / livelihoods sectors with health, GBV and other social sectors.

Mainstreaming gender as a cross-cutting theme can also be challenging. As such, inter-ministerial collaboration and coordination across different actors at national and sub-national levels need to be an explicit part of the cash plus approach. Early collaborative and open dialogues with the key actors are important processes to reach shared buy-in over the vision for the work, and invested in over time as political and technical staff often have high turnover. It is important to communicate the rationale and effects of an integrated approach, and an opportunity to highlight the economic, social, and health impacts of the approach. This might include providing training materials at national and local levels, identifying funding sources and available resources to improve coordination and alignment of various actors both government and non-governmental.

For instance, the Ethiopia IN-SCT programme built the institutional capacity of the Ministry of Labour and Social Affairs to provide individual support and strengthen multisectoral links between social workers, health extension workers, schools, child protection services and others by

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**Box 11: Operational implications for strengthening implementation capacity and skills**

- Work with actors who have specialised skills, networks and experiences (organisations or individuals) on gender and working with the target group
- Work with actors who have specialised skills (organisations or individuals) on protection in the delivery of the programme, who can facilitate referrals for those in need of specialised support and assistance
- Provide skills training to implementers to tailor the intervention to the specific needs of the population group. Ensure that implementers are trained on the gender aspects of the programme and they are clear on the programme’s gender-related objectives in design and implementation
- Factor in that soft skills are just as important as technical skills for the mentors / trainers / coaches – this is important to build rapport and trust with the recipients, to build recipients’ confidence and self-esteem, and to work with men and boys
- Provide training for those involved in the delivery of cash to receive disclosures of violence, exploitation, and abuse and to make appropriate referrals and/or provide information as appropriate
- Put in place technical resources and training systems which can be re-used in the context of high staff turnover
- Consider the gender balance of the implementing team, and their workload
- Provide adequate remuneration (pay, skills and opportunities) for local community implementers who are not directly employed by the programme. Do not exacerbate the unpaid work burden of local level / community actors, especially for women
employing social workers operating at the kebele (municipality) level to support IN-SCT objectives. The evaluation found that the IN-SCT pilot project improved collaboration between social workers, local development agents, health extension workers and school officials and that this increased beneficiaries’ fulfilment of their co-responsibilities.

Access to data and data protection: The issue of access to data through integrated systems and data protection for cash plus programmes is also important (Barca et al., 2021). For example, the coordination of systems was highlighted as a key challenge in the Nigeria programme, where it was difficult to successfully enrol newly pregnant women, which affected when they received their payments; in the first cohort women did not typically start to receive the payments until late into their pregnancy (around 8 months). Whilst some improvements in the registration were made, there were still delays with pregnant women receiving the payments around 6 months pregnant on average (as well as difficulty ensuring transfers stopped at the agreed time, with some women receiving them for longer than expected and some for less time). These difficulties were linked to challenges in maintaining accurate records of the birth dates of all children in a context where few births are formally recorded (and caregivers do not know exact birth dates).

Access to data and data protection issues are also particularly important for referrals to specialised protection agencies and where there are opportunities in a social protection intervention to share protection-related information, including about the availability of services and support. Where referrals are made to specialist services, information and data sharing protocol should be in place to avoid risks of personal information being disclosed to members of the community, backlash due to stigma or social norms that blame those that experience violence.

Box 12: Operational implications for strengthening institutional coordination

- Establish early open dialogues with key actors to communicate and advocate the rationale and intended impacts of an integrated approach
- Assess how funding sources and resources can improve coordination and alignment of actors to promote gender equality (including outside of the government)
- Prioritise key partnerships with Ministries and gender-focused actors
- Ensure data protection and data sharing protocols are in place

4.2.3 Sustainability and scale

Scaling up cash plus pilots using government systems and through government ownership is a desirable objective of many (but not all) of the cash plus programmes. Working through pre-existing national systems can facilitate the effectiveness and sustainability of a programme (World Bank, 2021). However, there are challenges to scaling up multi-sectoral cash plus approaches, especially those based around intensive support to recipients. A number of mechanisms identified through the case studies and additional KIs suggested ways to support scalable approaches:

- Developing a long-term plan at the beginning of the pilot to plan for scaling up from the start (e.g. including financial plans, capacity, milestones etc)
- Recognising the trade-off that exists between scaling up cash plus interventions through national systems and government ownership and the complexity of the programme design. Programmes need to be “simple enough” to ensure consistency in quality, and be financially viable for the government to implement it within their capacity at scale – this will likely require programme adaptation. For example, implementing “lighter versions” of cash plus transfers in the first instance if handing a pilot over to government, recognising that government capacity may not always be able to provide all the “plus” components of a small scale project at a national scale, and that it is critical that those which are implemented remain good quality (for example, also see World Bank, 2021)
• Building on and adapting existing capacities and leveraging the use of existing programmes to link cash plus interventions to local government capacities are critical to the ability to scale up.
• Consideration of whether the programme can scale up the “plus” component within the broader policy and operational environment. For example, being linked to the national cash transfer programme and knowing how to work with it was noted as important in the Tanzanian Ujana Salama programme.

Box 13: Operational implications for scaling up

• Establish a long-term plan at the beginning of the pilot to plan for scaling up from the start (e.g. financial planning, capacity, milestones etc)
• Programmes may need to be adapted to be “simple enough” to operate at scale whilst ensuring consistency in quality and to be financially viable for the government to implement it within their capacity at scale
• Build on – and adapt – existing capacities and leveraging existing programmes. For example, “Piloting for scale” (BRAC’s approach to graduation programming globally), includes assessing the context to identify if resources and capacity already exist available, such as existing case workers or NGO programmes, which are already in place and might only need some additional capacity. For example, providing additional training to a health worker so that they are not expected to become livelihoods experts but are able to point households to other resources and services available.
• Leveraging existing programmes – looking at livelihood assets programmes by government that already exist, and leveraging linkages to those.
• Sustain advocacy work to mainstream the idea of top-up / cash plus as a regular feature of the national social protection system, and make this part of the long-term vision of the programme.

4.3 Monitoring and evaluation

4.3.1 Monitoring

Across the case studies, most programmes collect monitoring indicators disaggregated by sex. Most programmes noted that the monitoring indicators are purposefully kept simple to enable regular reporting (especially important for providing government regular updates), to ensure quality of data and not to take up too much time of the recipients. Programme monitoring is done by different implementing staff, depending on the programme – for example, through the mentors, trainers, case managers. Increasingly, monitoring is digitised. Monitoring is often done monthly and indicators tend to focus on outputs such as number of recipients of cash, number of participants in trainings, topics covered in trainings, and how many referrals were made to specialised services.

A few programmes also reported the need to go beyond a set of simple indicators to monitor a wider range of outcomes, including control over income, time use, and unintended risks such as GBV, including SEA. These may not be included in static monitoring surveys, but in the multi-country CLARISSA project in Bangladesh, for example, they are aiming to get at unintended effects through more in-depth quarterly “sense making sessions” with case managers and programme staff reflecting on the effects of the programme (KII).

4.3.2 Evaluation

The majority of the programmes included in this review conducted independent impact evaluations, collecting baseline and endline indicators disaggregated by sex, as well as using
gender inequality relevant indicators (e.g. questions around time use, changes in attitudes, behaviours and practices), which is part of why they were included, as is not common place. Most used mixed methods approaches, combining quantitative and qualitative methodologies in evaluations, which are important to understand the reasons behind why changes did, or did not occur, and to identify unintended effects of the intervention. For example, the Tanzania Dreams project incorporated timeline interviews to provide valuable learning and insights into what adolescent girls and women felt helped them and what could improve the programme.

A number of programmes also included process evaluations. These help to ensure that the impacts of cash plus interventions are fully understood and help to understand the quality of the intervention across different components. For example, this was done in the evaluation of the pilot in Ethiopia, which found that the cash plus intervention might have suffered from overburdened social workers tasked with its implementation and a lack of staff availability for full implementation. Similarly, in the evaluation of the CDGP in Nigeria, the evaluation looked at the quality of the SBCC component, finding that there was little difference between what was actually received even though the intention was to have ‘low intensity’ and ‘high intensity’ SBCC packages that would allow for a comparison.

Moreover, evaluations of ‘cash plus’ components of programming should also consider or build from evaluations of the core cash distribution element. This was done in the evaluation of Ujana Salama in Tanzania, where it was found that the cash distributions were reliable over the duration of the intervention, and also in Ethiopia’s IN-SCT which looked at the gender-responsive features of the direct cash transfer and public works programme. In other evaluations, however, this aspect of the core cash transfer was not interrogated in line with the cash plus component so it is unclear how the quality of the cash intervention could have affected the implementation of the ‘cash plus’ elements. Where cash payments may be late, reduced in frequency or amount, or come at irregular times, this can have an effect on the ‘cash plus’ component. Evaluating only a single element of a programme may not provide the full picture of its effectiveness.

In addition, the above mentioned evaluation in Tanzania cast a wide net on the potential outcomes that could have occurred as a result of the programme, for example, effects on mental health (see Box 14). The advantage of this evaluation approach is that it can capture and identify unintended impacts or other information useful for making amendments to future programme phases or designing other programmes. As such, even where gender-related outcomes are not an explicit feature of the programme’s objectives, it is still worth collecting data, safely and ethically, on gender-related outcomes, including for example, time use and access and control of resources for future revisions of the programme (see for example, FAO (2018) Technical Guide 3; IOD Parc, 2019 DFID ethical guidance for research, evaluation and monitoring activities; UNICEF (2015) UNICEF procedure for ethical standards in research, evaluation, data collection and analysis).

**Box 14: Research questions in Tanzania’s Ujana Salama project**

<table>
<thead>
<tr>
<th>Research question: How and to what extent can a ‘Plus’ component combining livelihoods, HIV and sexual and reproductive health education, support and services integrated into government structures within a conditional cash transfer programme positively impact on adolescent well-being and the transition to adulthood?</th>
</tr>
</thead>
<tbody>
<tr>
<td>The impact evaluation explored outcomes related to livelihoods; aspirations; schooling; attitudes; violence; partnerships; SRH and care seeking; and HIV knowledge, testing and treatment.</td>
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<tr>
<td>A shorter, 24-item version of the Gender-Equitable Men (GEM) Scale was implemented to assess changes in gender-equitable attitudes that may be attributed to the intervention (see Impacts of a Cash Plus Intervention on Gender Attitudes Among Tanzanian Adolescents).</td>
</tr>
</tbody>
</table>
4.4 Core components of cash transfers need to be gender-responsive

In addition to the “plus” interventions, the case studies also indicate that it is important to consider the core design and implementation features of the cash transfer intervention and the extent to which this is gender-sensitive and/or gender-responsive, as this can support or undermine the intended gender outcomes of the “plus” components (see, for example, Esser et al., 2019).

In Turkey, for example, the CCTE provides a higher cash transfer value to girls to address the gender gaps in grades 9 – 12. However, the evaluation also highlighted the need to consider the heightened risks that boys’ also face in specific areas. In Ethiopia’s IN-SCT, the PSNP4 moved pregnant and breastfeeding women to temporary direct support (TDS) from the public works programme to receive cash transfers to enable women to rest and attend health appointments. However, at the same time, challenges within the cash transfer system itself were highlighted as problematic – this included the introduction of the electronic payment system which effectively took control of PSNP cash transfers away from women, since the ATM cards are given to the male household head. Some women appealed this and cards were issued in their name.

Other key considerations also include avoiding exacerbating women’s time constraints through long or complex administrative processes or programme requirements for enrolment and registration; the provision of accessible feedback and complaints mechanisms; and reducing the risks of violence, abuse or exploitation.

Box 15: Operational implications for gender-responsive M&E

**Monitoring:**
- Complement simple sex disaggregated regular monitoring indicators, with additional learning events or other reporting mechanisms. For example, monitoring frameworks should include monitoring the risks of violence, exploitation and abuse of recipients of cash in safe and ethical manners (including not asking such questions in mixed gender groups and asking questions generally rather than about individuals’ experiences) - and monitoring other unintended effects of the intervention and using this information to make changes to the intervention or build other ‘plus’ elements to attempt to counteract the unintended effects.

**Evaluation:**
- Use a wide range of indicators on gender equality outcomes (even if not part of the programme objectives) because these results can be used to identify and further the programme design and implementation in the future.
- If baseline data is to be collected on experiences of violence, it should be done following ethical and safety protocols and be done in partnership with individuals/agencies with specialised skills.
- Solicit the feedback of women and girls and use this information to make amendments to the implementation and improve their safety and wellbeing.
4.5 Gender-responsive operating environment

A number of KIIIs noted the importance of the context in which the cash plus is operating. Social norms, the legal and policy environment all influence the extent to which cash plus interventions can integrate gender equality or transformative objectives, as well as mediating the outcomes of programmes.

As such, building consensus and engaging with the broader socio-cultural and policy context, including the existing legal and policy frameworks on social protection is important for developing a gender-responsive and transformative cash plus approach. This includes being aware of the policy environment and policy opportunities (or constraints) with regards to promoting gender equality and empowerment and also sharing results and advocating for the “plus” components. For example, in the Tanzanian Ujana Salama programme, there was a consensus building workshop with government and donors at the beginning of the design process. It was important for stakeholders to agree on design issues from the outset of the national programme and not just the “plus” activities. This was achieved through UNICEF co-chairing technical working groups and one-on-one meetings regularly with development partners to ensure stakeholders saw value in these interventions (KII).

And in Ethiopia (IN-SCT), for example, alongside the PSNP and IN-SCT pilot, the various national stakeholders have been raising awareness about gender equality through campaigns on women’s rights. An additional question for cash plus programmes, therefore, is how can the potential of cash plus programmes like this be leveraged to complement and align with national level campaigns on gender equality.

Indeed, understanding the gendered political economy of the operating context is vital for supporting a gender-transformative agenda through cash plus programmes. Holmes et al., (2019:33) identify a number of features that can help integrate gender into social protection policies and programmes which can also be applied to cash plus programming:

- pro-poor and inclusive national government institutions and influential political elites advocating for gender-responsive social protection. Informal decision-making arenas and sub-national institutions also often provide opportunities for change;
• coalitions of actors – from government, donors and development partners to civil society locally and nationally – to advocate for gender-responsive social protection, sustained over time, and ready to take advantage of any opening up of policy spaces; and

• coalitions of actors with technical skills and capacities to frame social protection in national and local debates as a way to address the risks and vulnerabilities facing women and girls, and to promote a more transformative and rights-based agenda.

**Box 17: Operational implications for supporting a gender-responsive operating environment**

Existing policy and institutional environment: Identify what recent or ongoing gender-transformative policies can support or be linked into with the cash plus programme across different sectors (health, education, GBV, economic, justice).

Conduct a stakeholder analysis to identify allies at local and national levels

Map existing initiatives and actors across sectors (development partners, local actors), and understand existing capacity and coordination structures to enhance gender-responsive approaches.

Listen and respond to the demands of organisations representing women’s rights and marginalised groups, and invest in support for gender-focused CSOs to become more established voices in social protection dialogues, supporting the skills and resources needed to engage in national discussions on social protection.

Engage more strategically with political economists, political actors and governance actors (at national and sub-national levels) to promote politically savvy negotiations about gender-responsive social protection design and implementation.
5. Conclusions and considerations for operational practice

This paper provides a rapid review of selected “cash plus” programmes from a gender equality and empowerment perspective. Examining case studies from Tanzania, Nepal, Turkey, Nigeria and Ethiopia, the paper shows that whilst emerging evidence indicates positive outcomes of cash plus interventions on women and girls, these impacts are not guaranteed, and evidence on how and which ways cash plus programming can best support gender-responsive and gender-transformative outcomes remains limited. It is therefore critical to apply the lessons we have from programmatic learning and rigorous evaluations.

The cash plus programmes reviewed here represent a diverse range of programme objectives, including child protection, women’s economic empowerment, and women’s and children’s health and nutrition outcomes. Across the programmes, these are achieved through different approaches in design – including referrals, mentoring, social behaviour change communication (SBCC), knowledge and skills training, as well as through various delivery modalities, such as implementation by the government, UN, NGOs or a combination of these actors. As such, this review is not a comparative analysis of cash plus interventions, rather, the paper draws out key operational lessons around how the design and implementation of cash plus interventions may be able to support and promote gender equality objectives.

The available evidence from the case studies indicates many positive contributions of cash plus programmes across a range of outcomes that can improve the lives of women and girls. These include maternal health, child health and nutrition, supporting girls’ and boys’ access to education and protection services, and promoting positive changes in attitudes and practices on gender equality (e.g. reducing women and girls’ reliance on transactional/exploitative sex, increasing economic independence and autonomy of women and girls, changing attitudes of boys towards discriminatory gender norms). It is important to note, however, that whilst cash plus programmes are starting to demonstrate that they can contribute to progress in these areas, the achievements are often small, are variable and multiple factors affect their effectiveness and impact.

There is currently insufficient evidence to draw conclusions on which types or combinations of “plus” interventions work best for promoting gender equality and women and girls’ empowerment from this rapid review. Programme objectives and approaches vary by context, and programme evaluations have not been designed to compare the impacts of different cash plus interventions on gender outcomes. However, the case studies do illustrate a number of important considerations to take into account from a gender perspective. We summarise these considerations around three key areas (intention; quality; and sustainability) before presenting a future research agenda and key operational implications (the latter summarised in Table 3).

The selected case studies highlight the importance of articulating and understanding the intention of the cash and the cash plus programme in relation to gender equality. This has two aspects. First, a cash plus intervention may have an explicit objective to reduce gender inequality or to specifically promote better outcomes for women and girls. An example of this is Tanzania’s programme Ujana Salama which has a clearly articulated theory of change and specific activities and committed resources throughout programme design and implementation to achieve this. Ujana Salama also considered intentionally gender dimensions across its design and implementation. Importantly, there are key aspects of the core cash transfer which can potentially undermine or support broader gender equality objectives. For example, promoting women’s financial inclusion by transferring cash transfers in to bank accounts, ensuring programme’s requirements do not exacerbate women’s time and care responsibilities etc.

The case studies also highlight the importance of the quality of cash plus interventions to achieve positive outcomes for women and girls. Again, there are two aspects to consider
here. The first is the quality of the design of the cash plus interventions – is the intervention designed and capable of achieving the objective? Has the programme been informed by a gender analysis of the drivers of poverty and inequality? For example, in the Ujana Salama project in Tanzania, the SBCC interventions are complemented with longer-term mentoring support for economic empowerment, in recognition of the low levels of skills and confidence young women have in translating livelihood skills into practice. The second aspect is the quality of its implementation and the case studies demonstrate that outcomes are highly influenced by organisational capacity, staff technical skills, availability of financial and other resources, timeliness of implementation, and linkage with the wider ecosystem. The complexity of these aspects are highlighted in Nigeria and Ethiopia’s cash plus programmes aiming to improve women and children’s health and nutrition.

Finally, case studies also highlight the importance of sustainability of cash plus interventions. This is often discussed in the form of scaleability and is relevant for gender responsive and gender transformative approaches. To achieve long-term and sustained change around harmful and discriminatory gender norms, for example, cash plus interventions must be designed to have lasting impact and be measured against this impact beyond the scope of a project. Evidence demonstrates that shifting gender norms and power relations takes time, and thinking about the contribution of cash plus interventions to make incremental changes in equality and empowerment in the longer-term is necessary – this should be reflected in programme design as well as monitoring and evaluation.

Importantly, across all three spheres, it is also important to consider the context in which the cash plus programme is operating. The gender-related achievements of cash plus interventions may be supported or undermined by the gender-responsiveness of the core cash transfer, as well as the gender-responsiveness of the legal, policy and social environment in which the cash plus programme operates.

The findings from this review also highlight the need for a future research and learning agenda on gender and cash plus interventions. This would include strengthening the emerging evidence base on the outcomes of cash plus interventions from a gender perspective. This implies looking across a range of gender-related outcomes across age, disability and other relevant levels of disaggregation to understand outcomes on women and girls, men and boys, as well as differential outcomes within these groups. In programmes that do not intentionally have gender-equality-related objectives, there will need to be a balance in programme monitoring and evaluation between choosing appropriate indicators that the programme can realistically demonstrate progress against and capturing unintended effects to demonstrate the potential of the programme to support gender-related outcomes. Whilst the exact indicators will need to be context specific, they could usefully be clustered around the following outcome areas (UNICEF Office of Research, 2020):

- Economic security and empowerment
- Health
- Education
- Psychosocial well-being
- Protection
- Voice and agency

Another area of research will be to strengthen the evidence base on identifying the pathways by which these outcomes occur. This will include investigating how the different types of “plus” interventions and the various combinations of “plus” interventions lead to gender equality and transformative outcomes for women and girls. This also needs to be complemented by further investigation of how the implementation of programmes affect outcomes.

Finally, a learning agenda to share emerging evidence and to facilitate learning from good practices is also needed. This has the potential to bring together different actors working on social protection and on gender, across various sectors, and across various target groups (for example, those working on adolescents). This investment in evidence and exchange of learning will be critical as the social protection sector seeks to build up more holistic, gender-responsive or transformative systems in the long-term.
### Table 3: Summary of operational recommendations

<table>
<thead>
<tr>
<th>Policy and programme cycle</th>
<th>Operational considerations for integrating a gender-responsive (and transformative) approach to cash plus to enhance outcomes for women and girls</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gendered context analysis</strong>: Conduct a gender context analysis at individual, household, community level to inform programme design. Include a focus on identifying structural challenges faced by women and girls (and men and boys) and identify drivers of change.</td>
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<tr>
<td>• Draw on existing data and analysis from different sectors and actors, protection, health, nutrition, education, economic empowerment – what are the gender outcomes and drivers of these outcomes across different sectors?</td>
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<tr>
<td>• Use qualitative data collection to identify gender-specific issues such as time use, risk of violence, voice and agency, reproductive health needs</td>
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<tr>
<td>• Promote a participatory approach – include actors with relevant and specialised skills (organisations or individuals) on gender and age, engage with local actors, draw on the inter-disciplinary cash plus team and recipients to inform programme design and delivery</td>
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<tr>
<td><strong>Develop a clear Theory of Change</strong> to identify the potential pathways of programme design and implementation on intended outcomes, and to identify possible unintended negative effects which may need mitigating (e.g. exacerbation of violence, women and girls’ time use etc).</td>
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<tr>
<td><strong>Key resources</strong></td>
<td></td>
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<tr>
<td>• UNICEF Office of Research – Innocenti (2020) Gender responsive age-sensitive social protection: A conceptual framework</td>
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<tr>
<td><strong>Combinations of “plus” components</strong>: The combination of plus components will depend on the programme objectives, but consider the following:</td>
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<tr>
<td><strong>SBCC</strong></td>
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<tr>
<td>• use channels that are known to reach women (and men);</td>
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<tr>
<td>• cover topics which shift gender relations or are tailored to the objective of the programme</td>
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<tr>
<td>• deliver SBCC in an inclusive, respectful and empowering way;</td>
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<tr>
<td>• build rapport with men and boys</td>
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<tr>
<td><strong>Skills training / mentoring</strong>:</td>
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<tr>
<td>• specialised and tailored support to build women and girls’ confidence, self-esteem and to be able to take advantage of the programme’s activities (e.g. economic independence)</td>
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<tr>
<td><strong>Strengthening the supply side</strong>:</td>
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<tr>
<td>• Adapt and tailor services where necessary to respond to recipients needs (e.g. gender-responsive and inclusive service provision)</td>
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<tr>
<td>• Support collective action and coordination of actors to help strengthen the supply side of services</td>
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<tr>
<td><strong>Include men and boys</strong>:</td>
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<tr>
<td>• ensure that the content of the “plus” components are appropriate for men and boys (e.g. the BCC topics),</td>
<td></td>
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<tr>
<td>• ensure that men can also benefit from the intervention</td>
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<tr>
<td>• ensure that the relationship with the trainer / mentor supports men and boys to respond positively to the programme.</td>
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</tr>
</tbody>
</table>
### Policy and programme cycle

#### “Plus” Design considerations

**Consider institutional safeguards and protection across the programme (not just in the “plus”)**

**Key resources:**

- Friedman  (2019) *Cash & Voucher Assistance and Gender based violence Compendium*
- IRC et al. (2018) *Toolkit for Optimizing Cash-based interventions for Protection from Gender-based Violence: Mainstreaming GBV Considerations in CBIs and Utilizing Cash in GBV Response*

#### “Plus” implementation considerations

**Implementation capacity:**

- Work with actors who have specialised skills, networks and experiences (organisations or individuals) on gender and working with the target group
- Work with actors who have specialised skills (organisations or individuals) on protection in the delivery of the programme, who can facilitate referrals for those in need of specialised support and assistance
- Provide skills training to implementers to tailor the intervention to the specific needs of the population group. Ensure that implementers are trained on the gender aspects of the programme and they are clear on the programme’s gender-related objectives in design and implementation
- Factor in that soft skills are just as important as technical skills for the mentors / trainers / coaches – this is important to build rapport and trust with the recipients, to build recipients’ confidence and self-esteem, and to work with men and boys
- Provide training for those involved in delivery of cash to receive disclosures of violence, exploitation, and abuse and to make appropriate referrals and/or provide information as appropriate
- Put in place technical resources and training systems which can be re-used in the context of high staff turnover
- Consider the gender balance of the implementing team, and their workload
- Provide adequate remuneration (pay, skills and opportunities) for local community implementers who are not directly employed by the programme. Do not exacerbate the unpaid work burden of local level / community actors, especially for women

**Coordination:**

- Establish early open dialogues with key actors to communicate and advocate the rationale and intended impacts of an integrated approach
- Assess how funding sources and resources can improve coordination and alignment of actors (including outside of the government)
- Prioritising key partnerships with Ministries and actors
- Ensure data protection protocols are in place
<table>
<thead>
<tr>
<th>Policy and programme cycle</th>
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</thead>
</table>
| "Plus" implementation considerations | **Operating at scale:**
- Establish a long-term sustainability plan at the beginning of the pilot to plan for scaling up from the start
- Programmes may need to be adapted to be “simple enough” to operate at scale whilst ensuring consistency in quality and to be financially viable for the government to implement it within their capacity at scale
- Build on – and adapt - existing capacities and leveraging existing programmes
- Sustain advocacy work to mainstream the idea of top-up / cash plus as a regular feature of the national programme, and make this part of the long-term vision of the programme

**Key resources:**
- Holmes et al. (2020) Strengthening gender equality and social inclusion (GESI) during the implementation of social protection responses to Covid-19

| Monitoring and evaluation | **Monitoring:**
- Complement simple sex disaggregated regular monitoring indicators, with additional learning events or other reporting mechanisms. For example, monitoring frameworks should include monitoring the risks of violence, exploitation and abuse of recipients of cash in safe and ethical manners (including not asking such questions in mixed sex groups and asking questions generally rather than about individuals’ experiences) and monitoring other unintended effects of the intervention and use this information to make changes to the intervention or build other ‘plus’ elements to attempt to counteract the unintended effects

**Evaluation:**
- Use a wide range of indicators on gender (even if not part of the programme objectives) because these results can be used to identify and further the programme design and implementation in the future
- If baseline data is to be collected on experiences of violence, it should be done following ethical and safety protocols and be done in partnership with individuals /agencies with specialised skills
- Solicit the feedback of women and girls and use this information to make amendments to the implementation and improve their safety and wellbeing

**Key Resources:**
- IOD Parc, 2019 DFID ethical guidance for research, evaluation and monitoring activities
<table>
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<th>Operational considerations for integrating a gender-responsive (and transformative) approach to cash plus to enhance outcomes for women and girls</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Core cash transfer</strong></td>
<td><strong>Analysis of the existing cash programme:</strong> Conduct a gender analysis of the existing cash programme, across the system and programme cycle, to identify challenges and opportunities for integrating gender. Consider:</td>
</tr>
<tr>
<td></td>
<td>• Does the programme support gender-focused objectives?</td>
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<tr>
<td></td>
<td>• Has a gender analysis informed programme design?</td>
</tr>
<tr>
<td></td>
<td>• Are there unintended effects on women and girls (positive or negative), e.g.</td>
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<tr>
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<td>→ On women and girls’ time (administrative processes, collection of benefits/services)?</td>
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<td></td>
<td>→ Control over income and resources?</td>
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<td></td>
<td>→ Violence, abuse or exploitation?</td>
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<td></td>
<td>• Are the delivery systems gender-sensitive? E.g.</td>
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<td></td>
<td>→ Do men and women have equal access to payment mechanisms (digital etc, bank accounts)</td>
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<td></td>
<td>→ Are grievance and feedback mechanisms accessible to all? Are they capable of receiving and responding to reports of violence, exploitation, and abuse, including of SEA</td>
</tr>
<tr>
<td></td>
<td><strong>Key resources:</strong></td>
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<tr>
<td></td>
<td>• Camilletti, E. (2020) Social Protection and Its Effects on Gender Equality: A Literature Review</td>
</tr>
<tr>
<td></td>
<td>• Bastagli, F. et al. (2016) Cash transfers: what does the evidence say? A rigorous review of programme impact and of the role of design and implementation features</td>
</tr>
<tr>
<td><strong>Operating context</strong></td>
<td><strong>Analysis of the existing policy and institutional environment:</strong> Identify what recent or ongoing gender-transformative policies can support or be linked into with the cash plus programme across different sectors (health, education, GBV, economic, justice).</td>
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<td>Conduct a stakeholder analysis to identify allies at local and national levels</td>
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<td>Map existing initiatives and actors across sectors (development partners, local actors), and understanding of existing capacity and coordination structures</td>
</tr>
<tr>
<td></td>
<td><strong>Key resources:</strong></td>
</tr>
<tr>
<td></td>
<td>• Camilletti et al. (2021) Mainstreaming gender into social protection strategies and programmes</td>
</tr>
<tr>
<td></td>
<td>• Holmes et al., (2019) The politics of gender-responsive social protection</td>
</tr>
</tbody>
</table>
References / Bibliography


Conditional Cash Transfer for Education (CCTE) Programme for Syrians and Other Refugees - October 2020 – Factsheet.


OPM (2019) Child Development Grant Programme endline evaluation: Key findings. Available at: https://www.opml.co.uk/files/Publications/endline-summary-report.pdf?noredirect=1


Available at: https://resourcecentre.savethechildren.net/library/parenting-programme-child-grant-facilitator-guide


Annex 1:
Gender-responsive cash plus programming
Terms of reference

Cash transfer programmes are now reasonably well-established as a key social protection tool for combating chronic poverty and smoothing consumption, and as the evidence base grows, they are increasingly seen as a tool for tackling a range of challenges and risks facing people in multi-dimensional poverty. UNICEF has been at the cutting edge of piloting and supporting governments to embed ‘cash plus’ approaches that attempt to have more significant and sustained impacts on a broader range of outcomes, from delaying sexual debut and pregnancy, to reducing transactional sex, to reducing intimate partner violence. There is an increasingly interest in the role it can play in reducing abuse and violence against adolescents, and other gender equality pertinent and age-sensitive outcomes.

As UNICEF increasingly is given opportunities to support governments with testing and scaling up effective cash plus models, we recognise an urgent gender gap in analysis, design and implementation in many contexts. This is a critical component on global efforts to ensure better integration of gender into social protection systems and is particularly strategic for UNICEF as one of the ‘go-to’ agencies for national governments. However, there are a number of challenges and gaps that we need to address. Globally, our experience is that the gender lens is forgotten or inadequately mainstreamed in cash plus programming at both the design and implementation phase as it is with other social protection interventions - indeed cash plus sometimes assumed to be gender-responsive simply for moving beyond cash. It would be very timely to shine a spotlight on different programmatic approaches that respond deliberately to girls’ and women’s needs and can be a source of learning for practitioners in different contexts.

In addition, evidence on cash plus models delivered by governments and at scale is limited and not well-known, though existing evidence does indicate that cash transfer programming can only do so much alone, and that ‘plus’ components will likely augment outcomes for girls and women if effectively delivered. For example, gaps discovered in the first phase of Tanzania’s Productive Social Safety cash transfer programme indicated that although household incomes and productive activity increased, risks and challenges for adolescents, especially exposure to HIV, were unaffected. This evidence led to the development of the cash plus approach that is currently part of an ongoing evaluation. However, pockets of evolving good gender integration practice are not always as easily accessible to practitioners.

In addition, as we begin to enter the second phase of the COVID19 outbreak in Eastern Africa, governments and the international community alike are working hard to adapt and protect social protection systems for responding in the short and long-term, providing an additional challenge and opportunity to us all in ensuring that social protection responses are gender-responsive and that girls and women are not forgotten.

We therefore propose a four-part project that will provide much-needed technical support to COs considering and actively working on cash plus programming within UNICEF. This would address a global demand for global guidance and learning on integrating gender into social protection programming, demonstrated by country office requests for support from a number of different regions, with a particular concentration of demand in the East and Southern Africa. It would also respond to two direct country-specific requests for dedicated specialist support, in Burundi and Angola, with the objective in mind of strategically adapting existing programming and newly designed work to drive better results for girls and women. Finally, it would deliver a short learning component from this country-specific work that can support
efforts to more effectively integrate gender into existing and new cash plus programming throughout UNICEF’s work.

This multi-pronged approach will support our work to shift practice by kickstarting more substantive support to country offices across UNICEF’s portfolio with tools that demonstrate global best practice; live UNICEF practice during COVID19; and learning about the approach and impact of the gender reviews/dedicated TA for future projects. It will also be drawn on for relevant work funded through the SDG Fund, where gender reviews/assessments are also being planned in some contexts.

The specific outputs are outlined in more detail below. In summary, the deliverables would be:

1. A rapid global review of best practice and learning on gender and cash plus programming in low- and middle-income context, with a focus on contexts similar to ESA with a shock-responsive lens, summarised in a short report/guide (indicative timeframe: 10-12 days of consultant time)

2. A rapid gender review of Burundi’s social protection programming, with a focus on behaviour change communication, the M&E framework and key recommendations to take forwards (indicative timeframe: 15 days). Linked to this review, an in-depth review of cash plus modules from a gender lens with a set of specific recommendations for improving these to better address the needs of girls and women (indicative timeframe: 27 days)

3. A rapid gender review of Angola’s social protection programming and girls’ and women’s needs (indicative timeframe: 15 days). Linked to this, a review and recommendations for the design of new ‘plus’ components that can be rolled out in a rapidly evolving context (indicative timeframe: 27 days)

4. A ‘return, review and learn’ deliverable six months after deliverables 1-3 are complete, to review what was implemented as a result of dedicated support in Burundi and Angola, synthesise lessons into a short lessons-learnt document, and share these in a regional/global webinar (4 days of consultant time)

1. Rapid global review of gender-responsive cash plus programming

For deliverable 1, the proposal is that the rapid global review will focus on best practice and learning. The intention for this review is for it to be of direct operational relevance to practitioners, particularly those designing and implementing cash transfer programmes with a ‘plus’ component, including UNICEF Country Offices in Burundi and Angola and beyond. It will be light touch and draw out concrete examples of cash plus programming: this can be on a continuum, for example including gender-sensitive or gender-discriminatory practices (whether in design or implementation) as well as gender-responsive and gender-transformational case studies that we intend to emulate. The expectation is therefore not that it would be an exhaustive review of cash plus programming but rather extract reasonably detailed case studies from which we can learn.

We would particularly welcome examples where cash plus pilots have been effectively scaled up through a national government programme (or through a parallel system at scale), and a shock-responsive as well as gender lens to be applied throughout. We note that experience from the region may be most applicable, including Kenya, Tanzania, Zambia, Ethiopia and South Africa, but welcome examples from relevant contexts in other regions for this output, such as India.
### Annex 2:
**Case study programme details**

#### Nigeria: The Child Development Grant Programme (CDGP) / 2013-2019

<table>
<thead>
<tr>
<th>Country / Programme</th>
<th>Objectives / rationale</th>
<th>Target group</th>
<th>Programme components</th>
<th>Institutional arrangements</th>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nigeria: The CDGP</td>
<td>Improve child and maternal health</td>
<td>Implemented in rural areas in Northern Nigeria (five Local Government Authorities: Anka and Tsafe in Zamfara, and Buji, Gagarawa, and Kiri Kasama in Jigawa). Target areas were largely Muslim areas where households are typically large and organised around the household head (male), living with one or more of his wives and their children. Poverty and deprivation and food insecurity was considered high in these areas.</td>
<td>• Unconditional cash transfers (Nigerian Naira (NGN) 3,500 per month (around $20) delivered to over 90,000 pregnant women to increase income and increase women’s control over income. • Transfers were scheduled to begin during pregnancy and last until the child turned two years old (targeting the first 1,000 days of the child’s life). • Counselling and social and behaviour change communication (SBCC) to the communities, focused on education and advice about nutrition and health</td>
<td>Implemented by Save the Children in Zamfara and Action Against Hunger in Jigawa. Funded by UK Department for International Development-funded programme (2013–2019).</td>
<td>Baseline and endline impact evaluation.</td>
<td>Child Development Grant Programme endline evaluation: Key findings. Available here. Tasker, M et al (2019). “Reducing malnutrition through nutrition-sensitive social protection schemes.” Save the Children. Available here</td>
</tr>
</tbody>
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9 A similar approach has also been piloted in Myanmar.
<table>
<thead>
<tr>
<th>Country / Programme</th>
<th>Tanzania: The Dreams project / 2017-2018</th>
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<tr>
<td><strong>Objectives / rationale</strong></td>
<td>Reduce risk of adolescent girls and young women (AGYW) contracting HIV</td>
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<tr>
<td><strong>Target group</strong></td>
<td>Implemented in rural Northwest Tanzania, targeted to out-of-school adolescent girls and young women (AGYW) (aged 15-23 years)</td>
</tr>
</tbody>
</table>
| **Programme components** | - Cash transfers of TZS 70,000 (approximately USD 31) were provided to AGYW every three months for 18 months.  
- Those who attended at least 10 hours of a behaviour change and communication (BCC) curriculum were then eligible to participate in the cash transfer.  
- These girls could participate in a small group financial literacy (which included mentors) and individual savings and loan programme called WORTH+. |
| **Institutional arrangements** | Implemented by the Sauti project (a USAID initiative working to improve health through a sustained reduction in HIV infections). Funded by the Bill and Melinda Gates Foundation. |
| **Evidence** | Qualitative: in-depth interviews and narrative timeline interviews at baseline and throughout the project.  
- Reduced involvement in transactional sex (reported a modest effect)  
- Increased financial capacity to meet basic needs, especially for unmarried girls which reduced their dependence on male sex partners who previously provided these goods  
- Increased choice over partners where the financial education/business development aspect of the programme empowered participants (especially unmarried girls) to refuse some sexual partners. Social support from family and programme mentors strengthened young women's ability to start businesses, produce an income and therefore be less dependent on male partners.  
- Increased agency and self-esteem, specifically through the cash and entrepreneurial training reducing girls' dependency on anyone else  
- Increased ability to start successful businesses, produce income and be less economically dependent on partners, particularly for AGYW who came from more financially stable homes |
<table>
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<tr>
<th>Country / Programme</th>
<th>Tanzania: ‘Ujana Salama’ youth livelihoods enhancement package. Linked to Tanzania’s national Productive Social Safety Net Programme (PSSN)</th>
</tr>
</thead>
</table>
| **Objectives / rationale** | Adolescents from poor households transition safely into a productive and healthy adulthood.  
Cash plus enhancement was developed out of recognition that cash transfers alone cannot significantly alter non-financial and structural barriers to improve adolescents’ well-being. The package complements the PSSN, strengthening capital and promoting healthy livelihoods that increase resilience, well-being and empowerment. |
| **Target group** | 2,500 adolescent girls and boys aged 14–19 years from PSSN households in In Mufindi District (Iringa Region); Rungwe District (Mbeya Region) |
| **Programme components** |  
- Adolescent livelihood and SRH-HIV life skills training, as well as high impact behaviour change communication (BCC) approaches, (peer support groups, to strengthen knowledge and skills among adolescent girls and boys related to HIV prevention and treatment, sexual and reproductive health, violence prevention, and promoting gender equity).  
- Mentoring and coaching: Community-based mentor who mentors and coaches adolescents on livelihood options and life concerns (referral to education, vocational training, savings groups, or a productive grant).  
- Linkages to existing SRH and HIV services for adolescents  
  The Cash Plus Programme is implemented within the Government of the United Republic of Tanzania’s Productive Social Safety Net (PSSN) by the Tanzania Social Action Fund (TASAF), in collaboration with the Tanzania Commission for AIDS (TACAIDS) and with technical assistance of the United Nations Children’s Fund (UNICEF). |
| **Institutional arrangements** | Midline impact evaluation  
- Increase in gender-equitable attitudes amongst males, particularly in the domains of violence and domestic chores.  
- Increased HIV knowledge: impact was larger among females  
- Increased reproductive health knowledge: around reproductive health, modern contraceptive methods and where to access contraception or condoms (particularly amongst females)  
- Schooling, economic participation and time use: The programme had no effect on school dropout; however, it did increase youth participation in economic activities  
  Ministerial information available here  
  Theory of change available here  
  CASH PLUS An Adolescent Livelihood, Health and Well-being Intervention as part of Tanzania’s Productive Social Safety Net Programme. Briefing. Available here  
### Ethiopia: Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer (IN-SCT) (pilot)
Linked to the national Productive Safety Net Programme (PSSNP)

<table>
<thead>
<tr>
<th>Country / Programme</th>
<th>Objectives / rationale</th>
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<th>Programme components</th>
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</table>
| Improve nutrition.  | The pilot took place in two regions of Ethiopia: Oromia and the Southern Nations, Nationalities, and Peoples’ (SNNP) Region. | The pilot took place in two regions of Ethiopia: Oromia and the Southern Nations, Nationalities, and Peoples’ (SNNP) Region. | • integration of basic social services and social cash transfers  
• nutrition behaviour change communication (BCC) sessions for beneficiaries engaged in public works  
• promoting beneficiary compliance with coresponsibilities in areas such as antenatal and postnatal care, growth monitoring and BCC  
• strengthening multisectoral links between social workers, health extension workers, schools, child protection services and other service providers  
• employing social workers operating at the kebele (municipality) level to support IN-SCT objectives  
• building the institutional capacity of the Ministry of Labour and Social Affairs to support individuals receiving permanent direct support  
• assisting the transition of pregnant and lactating women and malnourished children’s caregivers from employment in public works to temporary direct support (unconditional transfers with no requirement for public works) | UNICEF in collaboration with the Ministry of Labor and Social Affairs (MoLSA). | Mixed method impact evaluation.  
• no impact of the programme on household food and non-food consumption, no measurable impact on nutrition outcomes or breastfeeding behaviour, suggesting weak effects on poverty reduction when comparing the groups monitored  
• Slight improvements in child welfare outcomes – no impact on enrolment, small increase in attendance, positive effect on child labour, awareness on early marriage awareness slightly improved, but that any changes in practice are modest and the role of IN-SCT in this change is likely to have been small.  
• in comparison with PSNP4 only, participation in IN-SCT significantly increased the share of pregnant women receiving antenatal care, though not the number of antenatal care visits.  
• Qualitative data suggested that although the relative and absolute impacts of the IN-SCT project are mixed, the changes brought about by the pilot were positively received. For example, improved behaviours relating to hygiene and sanitation were reported by BCC session participants in IN-SCT areas and stakeholders in federal and regional levels highlighted the project’s success in raising awareness of the importance of using the services available | UNICEF, MOLSA and IFPRI (2020): Impact Evaluation of Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer Pilot Program (IN-SCT) in Oromia and SNNP Regions, Ethiopia: End-line Impact Evaluation Report. Available [here](#).  
### Nepal: Parenting pilot linked to the national Child Grant

<table>
<thead>
<tr>
<th>Objectives / rationale</th>
<th>Target group</th>
<th>Programme components</th>
<th>Institutional arrangements</th>
<th>Evidence</th>
<th>References</th>
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</table>
| Improve parenting skills and maximising outcomes for children in receipt of the grant. | Child Grant is targeted at children below five years and aims to improve nutritional outcomes. 368 parents from Dolakha, Kavre and Mahottari districts participated in the pilot parenting intervention | • The Child Grant is a monthly cash transfer scheme of NPR 400 per child  
• The parenting intervention included 14 weekly sessions with groups of parents focusing on: how to improve day to day parenting skills; how to make the most out of the cash transfer payment through better family budgeting; and nutrition awareness  
• Central to the parenting intervention is a psychosocial preventive early intervention programme (developed by International Child Development Programme (ICDPI) which aims to promote a safe, loving, nonviolent, and developing environment for children by supporting the improvement in parenting/caregiver skills | Save the Children implemented a complementary pilot to the government’s cash-based Child Grant | • Caregivers reported more warmth and positive feelings towards their children after the intervention, compared to the control group.  
• There was a significant reduction in violence/neglect/or being incapable of taking care of the child by the parents in the intervention group, comparing before to after the intervention, and compared with the control group.  
• Those who took part in the parenting sessions increased the number of activities they undertook with their children.  
• There was a decrease in maternal mental health concerns after the intervention.  
• The child protection visits also helped to identify challenges that families faced to enrolment including language barriers, overcrowding, disability).  
• They also helped to facilitate access to services to address health, psychosocial and economic needs families were facing.  
• Evaluators highlighted that the correlation between child protection visits and increased school attendance is especially promising.  
• However, the child protection component was unable to meet the growing demand for their services | Adhikari, T et al (2014). The contribution of Nepal’s Child Grant to social inclusion in the Karnali region Country Briefing. Available here  
Save the Children (2019). ASSESSMENT OF A PARENTING PILOT INTERVENTION LINKED TO THE CHILD GRANT IN NEPAL. Prepared by Dr. Ane-Marthe Solheim Skar with inputs from Dr. Disa Sjoblom, August 2019. Save the Children Research Brief. Available here  
<table>
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<tr>
<th>Country / Programme</th>
<th>Turkey: Conditional Cash Transfer for Education (CCTE) for Syrians and Other Refugees in Turkey / 2018</th>
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<tr>
<td><strong>Objectives / rationale</strong></td>
<td>The CCTE programme together with the child protection component aims to 'mitigate child protection risks and violations' (such as involvement in child labour, child marriage, physical and emotional violence and family separation), which are closely intertwined with economic vulnerabilities and contribute to non-attendance at school.</td>
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<tr>
<td><strong>Target group</strong></td>
<td>Families receive cash support every two months on the condition that the child attends school regularly (at least 80% attendance).</td>
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| **Programme components** | • The child protection component focused on 15 provinces with the highest number of refugees.  
  • It met with and assisted 75,390 children between May 2017 and March 2020 in the 15 provinces.  
  • CCTE for refugees includes child protection component to promote continued school enrolment and attendance of the most vulnerable refugee children, as well as their referral to child protection services when needed. |
| **Institutional arrangements** | This component is implemented by outreach teams consisting of social workers and translators.  
  • Cash and child protection components achieved positive results, achieving successful implementation in a complex environment. |
| **Evidence** | National CCTE implemented by the Ministry of Family, Labour and Social Services. The CCTE for refugees was implemented through a close partnership between the Ministry of Family, Labour and Social Services, the Ministry of National Education, the Turkish Red Crescent and UNICEF, and receives funding from the European Union, as well as the Governments of Norway and the United States of America. |
| **References** | • Cash and child protection components achieved positive results, achieving successful implementation in a complex environment.  
  • The evaluation found it to be a successful programme across factors of relevance, effectiveness and efficiency.  
  • Qualitative evaluation findings do suggest that the child protection visits were important in preventing and responding to the risks that children face, encouraging children to attend school regularly and encouraging school enrolment at the correct age (age 6).  
  • The child protection visits also helped to identify challenges that families faced to enrolment including language barriers, overcrowding, disability.  
  • They also helped to facilitate access to services to address health, psychosocial and economic needs families were facing.  
  • Evaluators highlighted that the correlation between child protection visits and increased school attendance is especially promising.  
  • However, the child protection component was unable to meet the growing demand for their services.  
  Conditional Cash Transfer for Education (CCTE) Programme for Syrians and Other Refugees - October 2020 – Factsheet.  
  American Institutes for Research. 1-125. |
Annex 3:
Key Informant Interviews

- Chief of HIV and AIDS, UNICEF Tanzania
- Acting Chief of Social Policy, UNICEF Uganda
- Chief of Social Policy, UNICEF Turkey
- Social Protection advisor, UNICEF Kenya
- Humanity and Inclusion
  - Social Development and Social Work Specialist
  - Global Cash and Market Recovery Specialist
- BRAC Associate, Ultra Poor Graduation Initiative, BRAC
- Senior Technical Advisor, BRAC USA
- Senior Technical Advisor, BRAC USA
- The Accelerate Hub
  https://www.acceleratehub.org/
Endnotes

i References Tanzania (youth livelihoods enhancement programme)
- Ministerial information at: https://transfer.cpc.unc.edu/countries-2/tanzania-2/

ii References: Tanzania (Dreams Project)

iii References: Nepal

iv References – Turkey

v References: Nigeria
- Child Development Grant Programme endline evaluation: Key findings. Available at: https://www.opml.co.uk/files/Publications/endline-summmary-report.pdf?noredirect=1

vi References: Ethiopia
Gender-Responsive "Cash Plus" Programming: Lessons from Practice in LMICs
Rapid Review of Selected Case Studies from Tanzania, Nepal, Turkey, Nigeria and Ethiopia