

# Title Registration for a Systematic Review: The Effectiveness and Efficiency of Cash-based Approaches in Protracted and Sudden Onset Emergencies: A Systematic Review

# **Shannon Doocy and Hannah Tappis**

Subi	nitted to the Co	ordinating Grou	ap of:
	Crime and Jus	stice	
	Education		
	☐ Disability		
	International	Development	
	Nutrition		
	Social Welfare	:	
	Other:		
Plan	s to co-register:		
	No		
	Yes	☐ Cochrane	Other
	Maybe		

Date Submitted: 11 March 2014

Date Revision Submitted: 6 April 2014

**Approval Date:** 

Publication Date: 02 May 2014

Note: Campbell Collaboration Systematic Review Title Registration Template version date: 24 February 2013

#### TITLE OF THE REVIEW

The Effectiveness and Efficiency of Cash-based Approaches in Protracted and Sudden Onset Emergencies: A Systematic Review

#### **BACKGROUND**

Cash-based approaches have been used for development purposes for a number of decades, particularly within social protection interventions in low- and middle-income countries. Over the past decade, cash transfer programs that were used in development contexts have increasingly been applied in humanitarian settings. Cash transfers aim to increase purchasing power and enable emergency-affected populations to meet their minimum needs for food and non-food items or to assist in livelihoods recovery. While commodity distribution is common in most humanitarian responses, it is sometimes inefficient and not always the most appropriate response. Cash-based approaches are able to address immediate needs more rapidly than commodity distribution because of reduced logistical complexity and they can stimulate local economies and markets by creating demand. Furthermore, cash transfers provide support in a way that maintains dignity and choice among emergency-affected populations.

Cash transfers have most commonly been used to address food insecurity and nutrition in emergencies. Humanitarian actors have transitioned from 'food aid' to 'food assistance' which refers to a broader set of approaches than food aid alone, and is inclusive of cash-based approaches. Spending on cash programming in emergencies has steadily increased since the 2004 Indian Ocean tsunami as part of a gradual shift away from in-kind food as the default response towards a broader food assistance approach. Cash transfers have also been used to enable emergency-affected populations to pay rent, rebuild or repair shelters and damaged public infrastructure and to support livelihoods recovery; vouchers have been used as a mechanism to improve access to food, water, hygiene supplies, productive assets and inputs, and other non-food items in a range of settings. There is growing recognition that where markets are functioning, cash transfer mechanisms are an appropriate and effective alternative to support populations affected by emergencies. A wide variety of actors now fund or implement cash-based interventions in humanitarian emergencies, including governments, non-government organizations (NGOs) and civil society groups, and UN agencies including the World Food Program (WFP) and the UN Refugee Agency (UNCHR).

Despite the widespread adoption of cash transfer programs, there are few rigorous evaluations in the peer-reviewed literature on the effectiveness or efficiency of these interventions in sudden onset or protracted emergencies. The vast majority of peer-reviewed evidence is case-studies of specific programs, discussion pieces, or economic analyses of the cost-effectiveness of cash-based approaches over in-kind food assistance. There is growing recognition in grey literature that cash-based approaches are a valuable tool for

humanitarian response in a wide range of contexts, however, the single most important message emerging from donor and implementing agency documentation is that cash-based approaches are highly context and event specific. There is a lack of evidence on which delivery mechanisms are most effective in different emergency contexts and with respect to achievement of different sector-specific objectives. This will review will synthesize the existing evidence on cash-based approaches in emergencies with the aim of informing donor policy and best practices.

#### **OBJECTIVES**

The objective of this review is to synthesize and identify gaps in the existing evidence base related to cash-based approaches in humanitarian emergencies. The review will inform international donors, implementing agencies and governments about cash interventions for populations affected by sudden onset or protracted emergencies. The review aims to serve as a reference for humanitarian decisions makers and to support evidence-based approaches to cash interventions in emergencies. The specific objectives of the review are to:

- Evaluate effectiveness and efficiency of different cash-based approaches on individual/household and sector-specific outcomes as well as cross-cutting objectives such as dignity and resilience.
- Assess the effectiveness and efficiency of different delivery channels to understand the conditions that determine the appropriateness and success of different cash-based approaches in different emergency contexts.

#### **EXISTING REVIEWS**

There is a large and growing body of rigorous evaluations in peer-reviewed literature on conditional and unconditional cash transfers and voucher programs in development settings, including systematic reviews of the impacts of these initiatives on health, education, and social protection outcomes. However, there are few rigorous evaluations in peer-reviewed literature on the effectiveness or efficiency of interventions in sudden onset or protracted emergencies. A preliminary search of peer-reviewed literature published in the last ten years returned no systematic reviews of cash-based approaches in humanitarian settings, and less than fifty country-specific articles related to cash transfers, vouchers or cash-for-work programs in sudden onset or protracted emergency settings. The vast majority of peer-reviewed publications were case-studies of specific programs, discussion pieces, or economic analyses of the cost-effectiveness of cash-based approaches over in-kind food assistance.

At the same time, there is growing recognition among humanitarian stakeholders and in grey literature that cash-based approaches can be appropriate, effective and flexible tools to support populations affected by sudden onset and protracted emergencies in ways that can maintain dignity and promote choice, empowerment and resilience. Several studies indicate

that cash transfers are a valuable tool for humanitarian response in a wide range of contexts, however, the single most important message emerging from donor and implementing agency documentation is that cash-based approaches are highly context and event specific. Recent reviews have identified more than 300 evaluations and research studies related to cash-based approaches in different humanitarian sectors and contexts, nearly all of which emphasize that the appropriateness and effectiveness of cash-based approaches depends entirely on the setting, target population, objectives and scale of the intervention. However, there is little guidance available to help humanitarian stakeholders determine which cash based approaches would be most effective in which contexts and why.

Systematic reviews on cash interventions in the development context exist; however, there are no systematic reviews of cash interventions in emergencies.

## **INTERVENTION**

Types of cash transfer programs that will be included are: 1) unconditional cash transfers, 2) conditional cash transfers, 3) vouchers, and 4) cash for work programs. All of these programs are intended to benefit individuals and/or households affected by emergencies. Cash transfer programs that will be excluded are 1) fee waivers and subsidies where no cash transfer is involved, 2) microfinance interventions, including lending, saving and insurance where repayment is expected or no actual cash transfer occurred, and 3) direct budget support to organizations providing humanitarian assistance where no transfer to affected individuals occurs.

#### **POPULATION**

Populations of interest are those affected by humanitarian emergencies, including rapid onset and protracted emergencies, in low- and middle-income countries. Emergency typologies will include: 1) large scale international humanitarian responses with little or no government capacity; 2) large scale international humanitarian responses with functioning governments that are unable to cope; 3) protracted crises with existing government and national programs; and 4) protracted crises where governments are unable or unwilling to respond and parallel systems are established. Evidence will by synthesized by emergency typology in order to provide recommendations that can inform programming strategies and policy in each of the different contexts.

# **OUTCOMES**

Primary outcomes will focus on the effects of cash interventions and include 1) individual and/or household level economic outcomes such as utilization of cash, household economic indicators and beneficiary perceptions of participation in cash programs and the impact of participation at the household level; and 2) sector-specific indicators measured at

population, household and individual levels such as changes in health service utilization, food security, nutrition status, access to clean water, school enrolment, and so on (many cash interventions are sector-specific).

Secondary outcomes will focus on informing implementation strategies including 1) targeting and inclusion of vulnerable groups 2) delivery mechanisms, including new technologies 3) scaling up and phasing out interventions 4) coordination 5) security and 6) unintended consequences at beneficiary, organizational and broader levels.

Efficiency will be assessed primarily by examining the difference between budgeted costs (staff needs, materials, running costs, and so on) and the actual costs of implementing the program. Additional efficiency measures will include constraints in achieving the project within the planned budget and the efficiency and safety of specific delivery methods. Costefficiency, defined as the proportion of funds that went directly to the beneficiary for cash-based approaches, will be assessed when possible. Cost-effectiveness will be evaluated where possible; however, this will require an added analysis of which intervention was most effective in meeting the needs of the beneficiaries. For comparison of cash transfer and in-kind distributions, we will compare the cost of cash transfers and food aid (including procurement, delivery, registration and administration) as well as the value or the food or cash provided.

#### STUDY DESIGNS

For primary outcomes related to the effects of cash interventions, study designs that allow for attribution will be sought. These include experimental and quasi-experimental designs, if available, as well as observational studies. For secondary outcomes related to implementation, qualitative and mixed methods studies and process evaluations are more appropriate.

Eligible study designs include 1) observational or descriptive studies, 2) controlled trials (randomized and non-randomized), 3) pre-/post- comparison studies, 4) interrupted time series studies, 5) qualitative and mixed methods evaluations, 6) economic evaluations, and 7) multi-attribute decision making analyses.

Study types that will be considered ineligible and excluded include: 1) opinion pieces, 2) commentaries, 3) editorials, 4) debates, 5) conference proceedings, 6) case studies of individual beneficiaries or very small subsets of beneficiaries that are not representative of program beneficiaries as a whole, 7) other reflective non-research based reports, and 8) systematic and non-systematic reviews.

#### **REVIEW AUTHORS**

# Lead review author:

Name:	Shannon Doocy
Title:	Associate Professor
Affiliation:	Johns Hopkins School of Public Health
Address:	615 North Wolfe Street, Suite E8132
City, State, Province or County:	Baltimore, Maryland
Postal Code:	21205
Country:	United States
Phone:	+1-410-502-2628
Email:	sdoocy@jhsph.edu

#### **Co-author:**

Name:	Hannah Tappis
Title:	Associate
Affiliation:	Johns Hopkins School of Public Health
Address:	615 North Wolfe Street, Suite E8132
City, State, Province or County:	Baltimore, Maryland
Postal Code:	21205
Country:	United States

# **ROLES AND RESPONSIBILITIES**

Both Dr. Doocy and Dr. Tappis have content expertise in humanitarian emergencies and methodological expertise, including prior experience conducting systematic reviews. A Johns Hopkins University informationist will provide support on retrieval in addition to student research assistants. Both Dr. Doocy and Dr. Tappis have statistical backgrounds; Dr. Tappis will lead the statistical analysis and if needed, additional support will be provided by the Johns Hopkins School of Public Health Biostatistics Consulting Service.

#### POTENTIAL CONFLICTS OF INTEREST

The authors have no financial interests in this area and have not published any prior reviews on the topic. Dr. Doocy has published three primary research papers on cash interventions in emergencies. This should not be a significant conflict of interest because inclusion of primary research papers in the review will be governed by the protocol.

#### **FUNDING**

This systematic review is commissioned by DFID. The following timetable for deliverables has been submitted to DFID:

	<u>Due Date</u>
Title	15 Feb 2014
Protocol	31 Mar 2014
Draft report	30 Dec 2014
Final report	1 Mar 2015
Evidence brief	30 Mar 2015

#### PRELIMINARY TIMEFRAME

- Date you plan to submit a draft protocol: 15 April 2014
- Date you plan to submit a draft review: 30 December 2014

#### **DECLARATION**

# Authors' responsibilities

By completing this form, you accept responsibility for preparing, maintaining, and updating the review in accordance with Campbell Collaboration policy. The Coordinating Group will provide as much support as possible to assist with the preparation of the review.

A draft protocol must be submitted to the Coordinating Group within one year of title acceptance. If drafts are not submitted before the agreed deadlines, or if we are unable to contact you for an extended period, the Coordinating Group has the right to de-register the title or transfer the title to alternative authors. The Coordinating Group also has the right to de-register or transfer the title if it does not meet the standards of the Coordinating Group and/or the Campbell Collaboration.

You accept responsibility for maintaining the review in light of new evidence, comments and criticisms, and other developments, and updating the review every five years, when substantial new evidence becomes available, or, if requested, transferring responsibility for maintaining the review to others as agreed with the Coordinating Group.

# **Publication in the Campbell Library**

The support of the Coordinating Group in preparing your review is conditional upon your agreement to publish the protocol, finished review and subsequent updates in the Campbell Library. Concurrent publication in other journals is encouraged. However, a Campbell systematic review should be published either before, or at the same time as, its publication in

other journals. Authors should not publish Campbell reviews in journals before they are ready for publication in the Campbell Library. Authors should remember to include a statement mentioning the published Campbell review in any non-Campbell publications of the review.

I understand the commitment required to undertake a Campbell review, and agree to publish in the Campbell Library. Signed on behalf of the authors:

Form completed by: Shannon Doocy Date: 6 April 2014