

Gender-based violence (GBV) risk mitigation in cash and voucher assistance (CVA) in Colombia

Learning from a joint CVA & GBV workshop

BACKGROUND

In 2022, cash and voucher assistance (CVA) was planned to account for 30% of Latin America's regional refugee and migrant response plan,¹ of which Colombia has the largest response.² At the same time, due to various contextual factors such as COVID-19, armed conflict, continued internal displacement, and an influx of mixed migration,³ Colombia has in recent years also seen a rise of gender-based violence (GBV) such as intimate partner violence, sexual exploitation, human trafficking, or survival sex.

Especially for women, who comprise up to 80% of all CVA recipients in Colombia,⁴ CVA can bring useful opportunities and enhance resilience and financial autonomy. At the same time, it is critical that this modality, like any other, does not fuel tensions in the household or at community level or create new risks for women. Against this background, in early 2022 the Protection sub-group of the Cash Working Group (CWG) in Colombia worked to develop a protection risk analysis of CVA that included some GBV elements. Diverse cash actors, with various mandates and

types of programming, eager to enhance their GBV risk mitigation mainstreaming in CVA programming, then reached out in August 2022 to the Colombia GBV National Coordination Group for support in the development and contextualization of GBV risk mitigation tools for CVA programming.

Building on existing global tools and best practices⁵ as well as the work already done by cash actors and the CWG of Colombia (including previous engagements between the GBV National Coordination Group and the CWG⁶), a workshop took place in October 2022 in Bogotá. The joint workshop was led and co-organized by the GBV National Coordination Group,⁷ the CWG in Colombia, the Prevention of Sexual Exploitation and Abuse (PSEA) Task Force, and the Protection sub-group of the CWG with the support of the global CVA & GBV Specialist from UNFPA's Humanitarian Response Division in Geneva.

1 Regional Cash Working Group for Refugees and Migrations from Venezuela

2 In Colombia, as of October 2021, more than half a million individuals received their first CVA transfer (HRP 2022 pg. 58)

3 Colombia HRP 2022 - page 79

4 Post-Distribution Monitoring, CWG Colombia

5 GBV Risk Mitigation in CVA Toolkit (UNFPA and GBV AoR 2022)

6 In 2020, a workshop was organized on CVA in GBV programming by the GBV Sub Sector and the former national trafficking task force. In the same year, a workshop took place on the linkages between cash and protection which led to the setting up the working group on Cash and Protection.

7 In Colombia, this group is part of the country's humanitarian architecture under the Protection Cluster and coordinates the GBV response for mixed migration flows (Regional Cash Working Group for Refugees and Migrations from Venezuela - GIFMM) as well as the actions undertaken for peacebuilding and development.

THE APPROACH

A total of 26 GBV and CVA technical experts attended the 2-day workshop, coming from 18 different organizations (including UN agencies, I/NGOs and the Colombia Red Cross)⁸ and from various locations within the country in order to attend the in-person workshop, which was conducted in Spanish. The wide representation of actors ensured a strong contextual grounding of the discussions and an extensive outreach to stakeholders working in very different settings. The attendance to the full workshop of an individual from the **CALP Network** (regional) highlighted the uniqueness of such a joint event for Latin America, a first of its kind.

Prior to the workshop, substantive work and thinking had already been devoted to the topic of GBV risk mitigation in CVA at national level from the CWG (specifically from the Protection sub-group of the CWG) and from actors active at field level. This was showcased in the significant level of understanding from participants of CVA, GBV, and their linkages, as nearly half of the participants had already carried out a protection/GBV risk analysis of their CVA programming.

Capitalizing on participants' expertise and the significant commitment of the various coordination bodies, discussions and group work during the workshop focused mainly on the transversality of GBV in CVA programming, specifically examining various best practices and lessons learned and discussing what the current state of affairs in Colombia related to GBV risk analysis in CVA and CVA tools. Based on these lively discussions and participatory activities, an action plan at coordination level was developed outlining key priority actions to ensure that the knowledge gained from the workshop will be disseminated at organizational and field level with a contextual uptake. The workshop ultimately strengthened close coordination between CVA and GBV actors and boosted engagement around the topic of GBV risk mitigation in CVA.



⁸ Other organizations participating included UNFPA, Consorcio CUA, Colombia sin minas, WFP, UNHCR, CALP Network, Plan Internacional Colombia, Action Against Hunger, Fundación Halü, NRC, DRC, Rescue, CARE Colombia, MercyCorps, Servicio Jesuita para los Refugiados, HIAS Colombia, and the Cash Working Group Colombia.

KEY RESULTS AND WAYS FORWARD

1 GBV RISKS IN CVA PROGRAMMING IN COLOMBIA

Humanitarian actors in Colombia work in challenging contexts: the country has large areas where there is still active armed conflict, various communities that are constantly on the move, concerning risks of trafficking and criminality, and some hard-to-reach ethnic groups that cannot always communicate in Spanish.

To help address some of the exacerbated needs and vulnerabilities of affected populations, humanitarian CVA in Colombia is provided through e-money, bank accounts, credit cards, and over-the-counter mechanisms (through remittance agencies). Assistance is also provided to recipients who lack formal IDs. According to the latest targeting questionnaires,⁹ 75% of questionnaire respondents were either female heads of household or were the primary recipient of CVA for a household, indicating that the majority of households eligible for CVA are headed by women. Responses to the targeting questionnaires also confirmed that nearly half of the households supported by CVA assistance have single parents, and close to 30% of the interviewees reported not having felt “safe” or having felt “at risk” in past months.

In addition, available data corroborate the widespread issue of GBV in Colombia, which affects mostly women and children who are inherently more vulnerable due to forced displacement, poverty, ethnic background, and/or patriarchal culture and gender norms that normalize domestic violence in the country. Compounding the problem, women have few opportunities to participate in the public space or make decisions.¹⁰ Globally, we know that GBV is underreported, so official figures are only representative of the small proportion of survivors who actually access GBV services or report incidents.

Providing CVA to vulnerable women offers tremendous opportunity to increase their autonomy, dignity, empowerment, and their financial inclusion. CVA can also help to decrease women’s exposure to violence if it is designed, implemented, and monitored with a GBV and gender lens.

During the joint workshop, participants outlined areas in which CVA could potentially increase women’s risk of exposure to violence and what can be done to ensure that humanitarian actors mitigate those risks. A snapshot of that discussion is below, while the comprehensive Protection Risk Analysis of CVA in Colombia with GBV inputs from this workshop can be found [here](#).

- Women face a substantive risk of being stigmatized due to receiving CVA. Indeed, the fact that the majority of people registered for CVA are women can generate stigmatization which can then create discrimination/xenophobia (in the case of Venezuelan refugees, for instance) by non-recipient populations, leading people to question where the women are getting their money from and for what purpose.
- Women also face higher risks of extortion by organized crime or armed actors. In some contexts, women are identified as “the channelers of the cash” (i.e. those who receive and exchange it), which increases their exposure to risks/violence.
- There are also risks related to the protection of women’s personal data, especially in conflict zones.
- Some of the most at-risk women may be the ones who are the most difficult to register in CVA programs (due to their location/regular movement, lack of access to internet/phone, or the languages spoken), meaning that they are at risk of being denied the opportunity to participate and get the lifesaving assistance they may need.
- Women face higher risks in accessing the distribution points, especially in conflict zones, at the border, or where criminality is widespread.
- While front-line humanitarian staff involved in multi-purpose cash distribution may have been trained on community outreach / social work, they may still lack tools for the identification of GBV risks. As a consequence, potential GBV risks may not be identified and mitigated during the targeting and cash transfer distribution processes.

9 According to the targeting of some PDM carried out from April - June 2022, the results of which were collected by the CWG.

10 Colombia GBV National Coordination Group data and reports are available [here](#) and from [data](#) of the Ministry of Health.

2 TOOLS

Following the mapping of risks and the subsequent discussion of mitigation measures that could be put in place, workshop participants analyzed several existing CVA tools (including their own as well as interagency tools suggested by the CWG) such as Post-Distribution Monitoring (PDM) tools and Complaint and Feedback Mechanism (CFM) tools. Participants agreed that it was necessary to revisit these tools to enhance their GBV/gender mainstreaming components for the Colombian context.

Overall, cash actors in Colombia are already using tools that give a fair space to the identification of GBV risks and gender mainstreaming. However, since the majority of cash recipients are women, more can be done to further improve the way that CVA is designed and implemented so that women are safer when accessing CVA.

To this end, workshop participants analyzed how CFMs may be enhanced to further mitigate GBV risk in CVA. In general, CFMs in Colombia are seen to be functioning well, as they receive several thousands of calls each year. Cash actors offer a variety of CFM formats, including mail, chatbots, in-person orientation or suggestion desks. With this, the majority of CFM operators are trained in basic GBV and have signed a Code of Conduct. Even so, participants suggested ways to improve CFMs and extend their reach, such as by adding “infopalante” (posters with pictograms), publicizing CFMs on Facebook pages for migrants and refugees, hanging posters in boutiques and shops with anti-fraud messages, and implementing other community information mechanisms.

Additionally, workshop participants also analyzed Focus Group Discussion (FGD) and PDM tools, specifically comparing them to ones developed at the global level by UNFPA and the GBV Area of Responsibility that have been piloted in other contexts.¹¹ In addition, a checklist with minimum requirements for any CVA programming was discussed and developed during the workshop.

3 ACTION PLAN

At the end of the workshop, priority actions were identified for the national level and each participant reflected on what they can do at an organizational level to ensure a lasting impact of the discussions held. Coordination bodies at the national level will build upon and follow up on these individual and organizational commitments. The challenge is now to ensure that what has been discussed and agreed upon at the country level is contextualized and used at the various local levels.

At national level, it was agreed that each coordination body present (the CWG, the GBV National Coordination Group, the Protection sub-group of the CWG, and the PSEA Task Force) would each be responsible for key actions and related activities to be implemented in 2023. These actions - identified as priorities - will be integrated into each coordination body’s respective 2023 work plans.

Key activities for Colombia CWG:

- Conduct awareness campaigns with financial service providers (FSPs) on PSEA and gender, while also negotiating with banking unions to put GBV risk mitigation as a prerequisite when being contracted as a provider of humanitarian CVA (such as by signing of Code of Conduct, conducting regular training of agents, etc.) but also to improve customer service to better take into account humanitarian and survivor-centered principles.
- Advocate for the generation of quarterly reports with a gender/GBV-sensitive approach among member organizations.
- Promote inclusion of PSEA and GBV messages in communication with communities (CWC) materials and guidelines.
- Support Protection Risks Analyses which include GBV/gender components in all 9 regions where local CWGs are present.
- Participate in the GBV National Coordination Group monthly meetings regularly, according to needs and/or specific requests.

¹¹ For more information, see the [GBV Risk Mitigation in CVA Toolkit](#) (UNFPA and GBV AoR 2022).

Key activities for Colombia GBV National Coordination Group:

- Prepare guidelines and communication products to raise awareness of GBV risks among frontline personnel with a territorial and gender approach, including the dissemination of the *GBV Pocket Guide* for non-specialists in GBV and channels for adequate referral of cases (service mapping).
- Promote the use of contextualized tools by the CWG in relevant contexts in Colombia in order to share information and tools and provide training.
- Participate regularly in CWG meetings in order to provide technical support on GBV and advocate for GBV risk analyses in CVA programming.

Key activities for the protection sub-group of Colombia CWG

- Identify key practices for cash providers, focal points, and beneficiaries on PSEA and the principles of dignity, respect, and non-discrimination.

- Participate jointly with the GBV National Coordination Group in the preparation of guidelines to raise awareness of GBV risks among frontline personnel.
- Participate in the transfer of knowledge related to GBV risk mitigation in the CWG sub-groups.
- Disseminate tools and the *GBV Pocket Guide* through workshops.
- Develop learning briefs on CVA actors' best practices when mitigating GBV risks in CVA.

Key activities for Colombia's PSEA Task Force

- Provide PSEA technical support to all actors mentioned above.
- Carry out a communication campaign for CVA beneficiaries (posters in shops, WhatsApp videos, Facebook, etc.) that highlights GBV referral pathways and available services.
- Prepare specific guidelines for good practices for the delivery of CVA focused on PSEA.

CONCLUSION

The success of this workshop and the strong commitments made throughout the course of the two days were possible thanks to the tremendous engagement of the leads of Colombia's GBV National Coordination Group, the Colombia CWG and its Protection sub-group, and the Colombia PSEA Task Force. The lively discussions and dynamic participatory activities showcased the forward thinking of humanitarian actors in Colombia as well as the extent to which GBV mainstreaming is taken seriously by cash actors. Considering the scale of CVA distributed to women and the level of expertise of its cash actors, the Colombia humanitarian response toward migrants and victims of the internal armed conflict and disasters has all it takes to be at the forefront of GBV risk mitigation mainstreaming in CVA and to be a model for the region and the world.

This workshop and its results should be seen as a jumping off point for further concrete and tangible changes in the way CVA programming in Colombia is designed and implemented. In 2023, cash actors in Colombia will work to fulfill their commitments and implement GBV mitigation measures in various locations in the country, ensuring longer term sustainability and accountability to women and populations at risk.

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