



A BRIEF REPORT

Covid-19 Cash Plus Intervention:

Promoting positive nutrition behaviors including public health safety messages with the families receiving cash Support and the community.



Introduction

In response to people impacted by 2nd wave of COVID 19 pandemic and flood after the monsoon season and as preparedness for 3rd wave of COVID pandemic, LIFE Nepal in the partnership with UNICEF Nepal implemented *Risk Communication and Community Engagement (RCCE), Nutrition, Water & Sanitation Hygiene (WASH), Child Protection Programme in Madhesh Province, Nepal*. The overall goal was to promote and sustain public health safety measures by preventing the loss of life to COVID-19 through supporting responses in risk communication and psychosocial support, addressing urgent humanitarian needs of children, adolescents, PwD (People with Disability), and families arising from the secondary impacts of renewed lockdown measures leading to malnutrition, protection issues, and disruption of learning. However, LIFE Nepal learned that direct payments of cash or cash transfers can help the poorest families meet their basic needs and generate a wide range of benefits, such as increased household productive capacity, improved children's school attendance, and better adolescent mental health. In addition, integrating cash transfers with other components can generate additional benefits for individuals as well as their households. Hence, LIFE Nepal with the technical and financial assistance from UNICEF Nepal implemented *"COVID-19 cash plus (combination of cash transfers and complementary programs) intervention—promoting positive nutrition behaviors including public health safety messages with the families receiving cash support and the community"* from 20th October to 31st December 2021.

Funding Agency

UNICEF Nepal

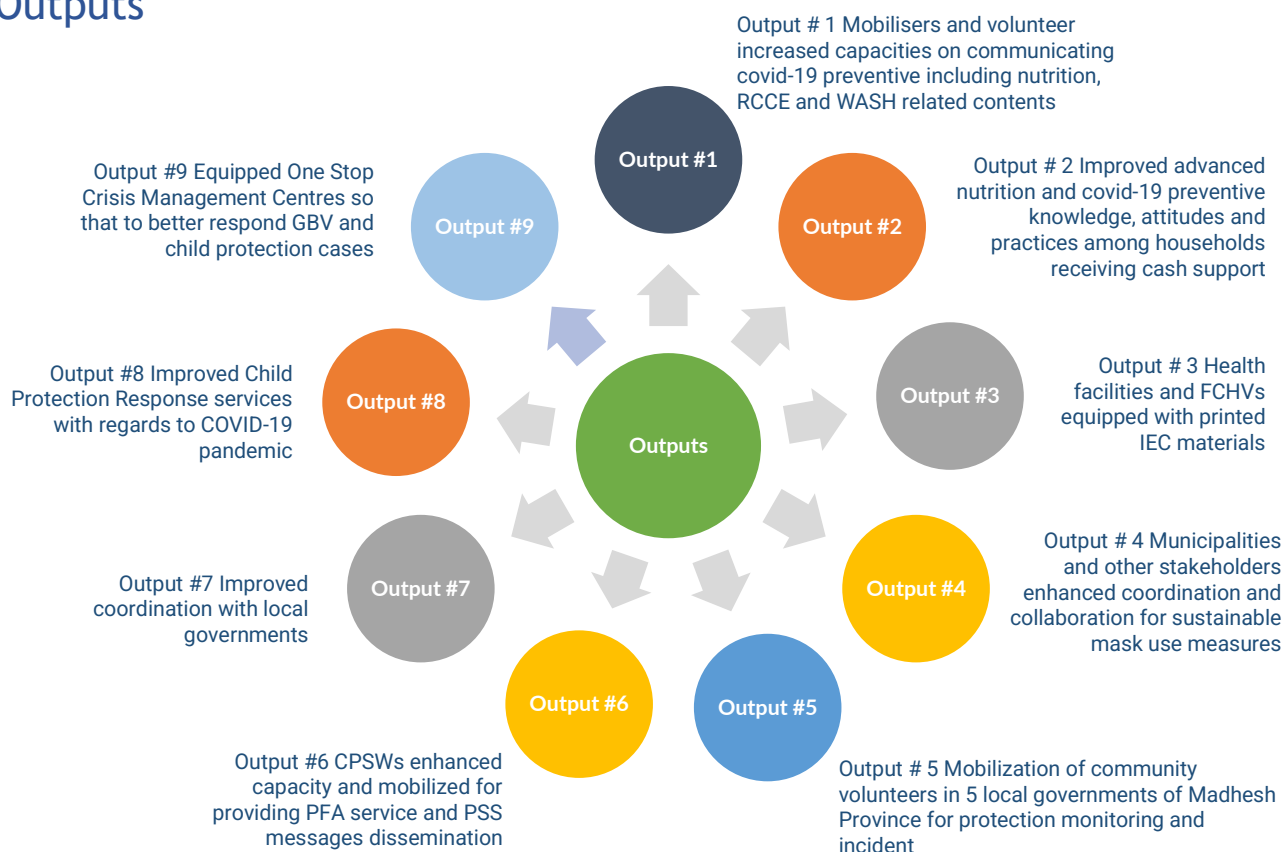
Locations

Rajbiraj municipality & Rajgadh rural municipality of Saptari district, Aurahi rural municipality and Janakpur sub-metropolitan city of Dhanusha district, Durga Bhagwati rural municipalities of Rautahat district in Madhesh Pradesh

Project Period

20th October to 31st December 2021

Outputs



Strategic Interventions

Capacity building of community Stakeholders and volunteers

- Orientation and planning workshop
- Mobilization of volunteers for the household visit
- Orientation to Palika level stakeholders
- Orientation to health facility in-charge
- Training to female community health volunteers

Advancing nutrition and covid-19 preventive knowledge, attitudes and practices among households receiving cash support

- FCHV mobilization
- Nutrition and preventive behaviours counselling through telephone
- Tuk-Tuk Mobilization
- Radio Programme
- Wall painting

Printing and dissemination of IEC material

- Flip chart
- Swastha Aama Samuha Register
- Flex Print

Establish coordination and collaboration among municipalities and other stakeholders for sustainable mask use

- *Capacity building of Staff and volunteers on promotion of PHSM*
- *Refresher training of volunteers and staff on promotion of PHSM*

Mobilization of community volunteers for protection monitoring and incident

- *Interview with Key Informants*
- *Protection incident reporting*

Psychosocial first aid (PFA) and psychosocial support (PSS)

- *Selection and capacity building training to CPSWs*
- *Mobilization of CPSWs and Counselor: PFA service, PSS messages*
- *Psychosocial first aid (PFA)*
- *Cases referred to the counsellor by CPSWs*

Establish functional coordination with local government

- *Palika coordination / review meeting*

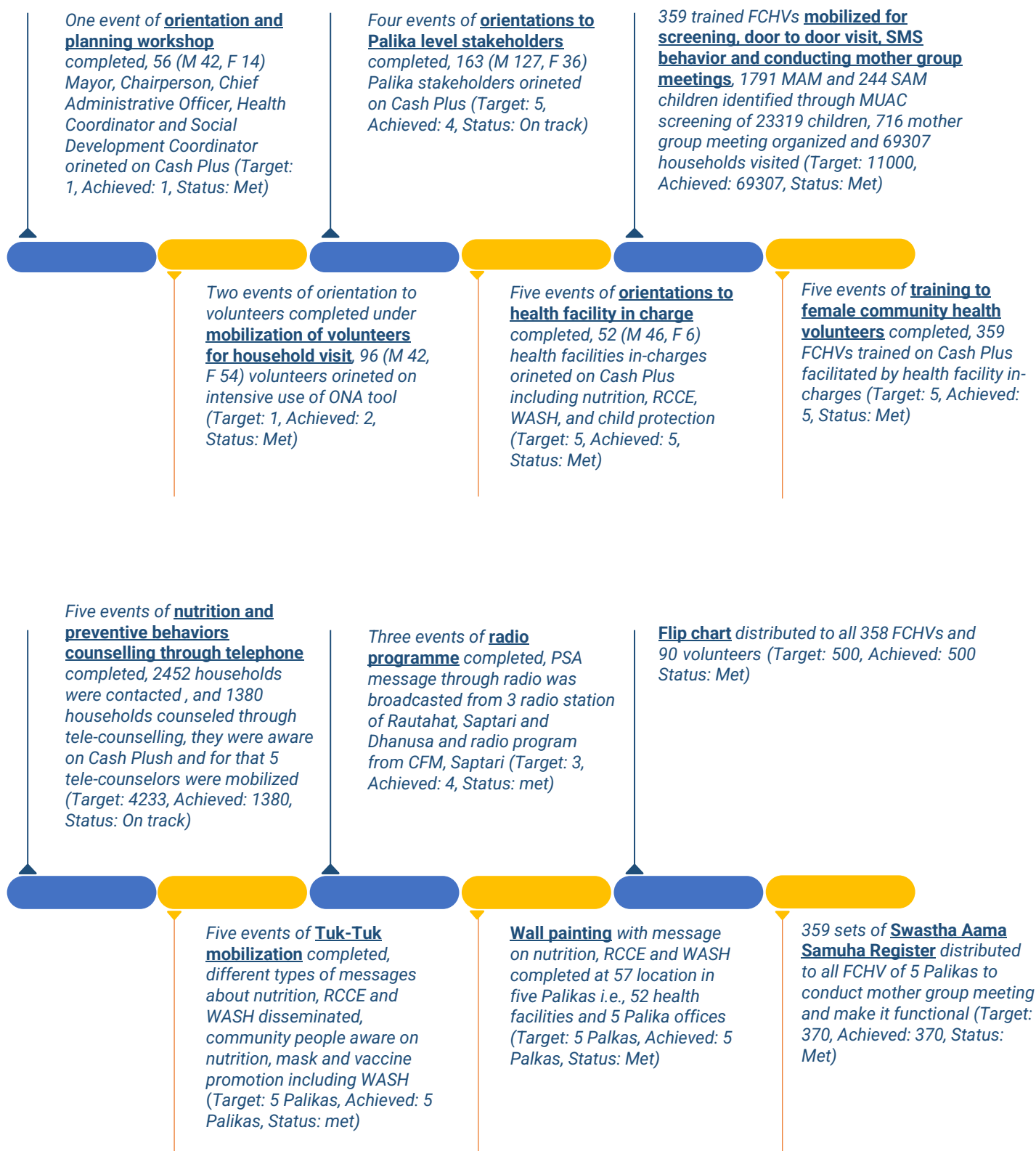
Ensure Child Protection Response Services in regards with COVID-19 pandemic

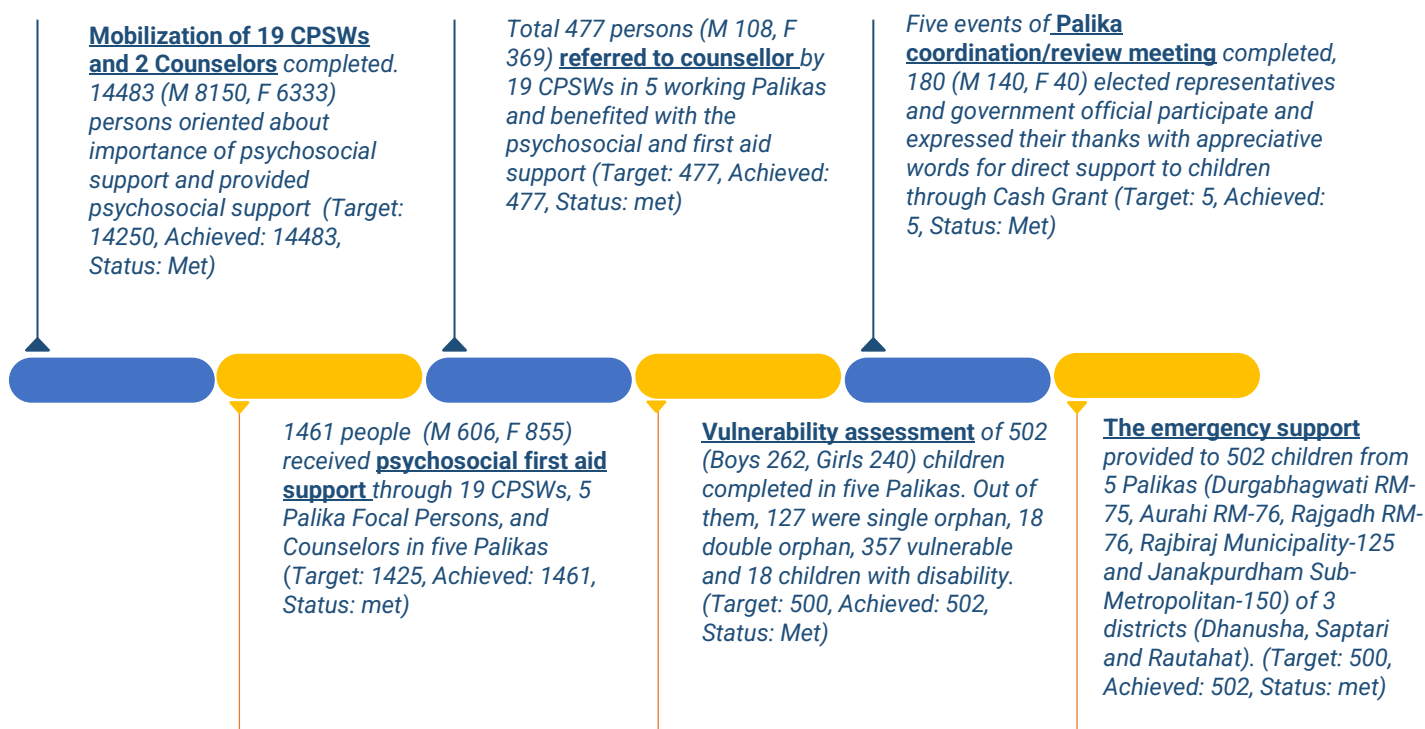
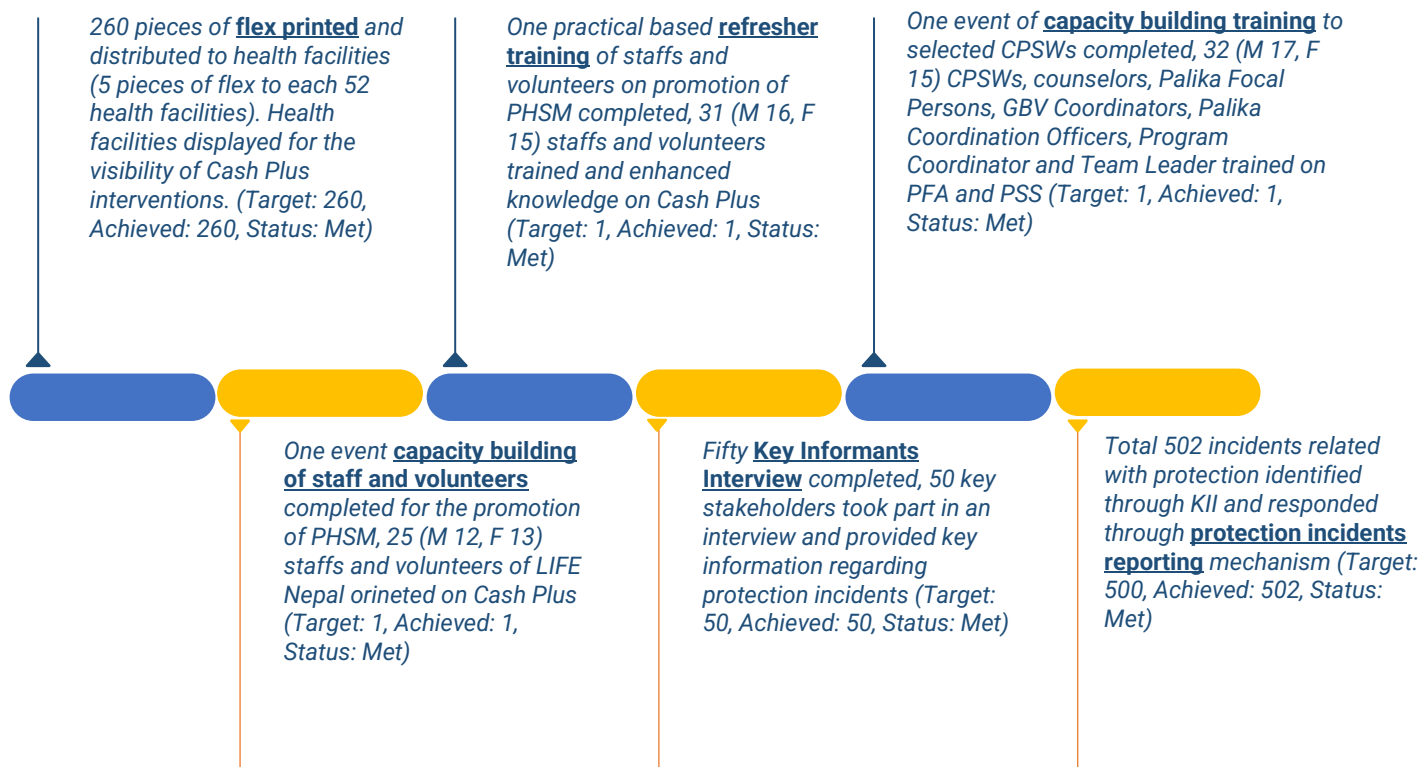
- *Vulnerability assessment*
- *Emergency support to children/families*
- *Reintegration support to children/families*

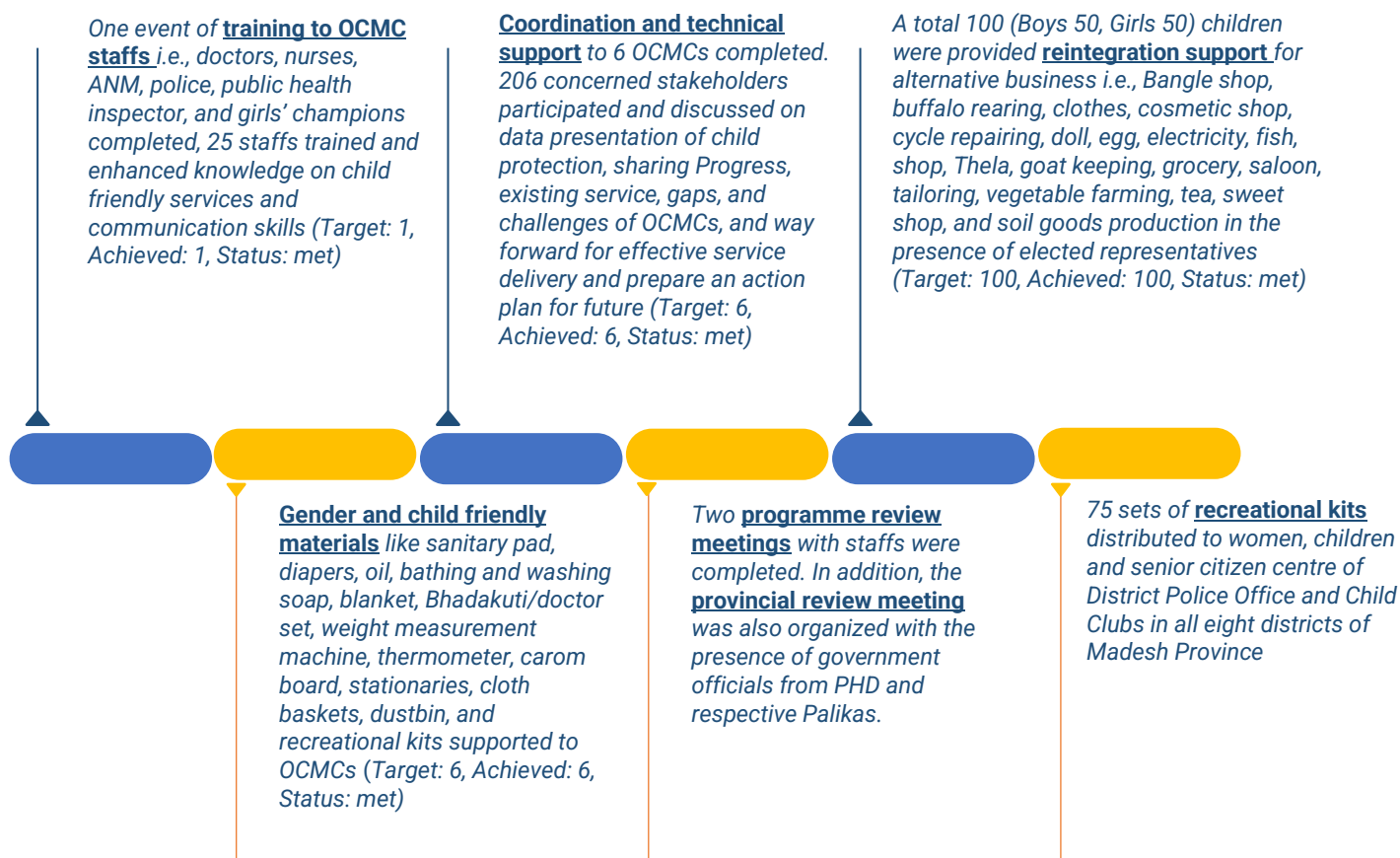
Equip One Stop Crisis Management Centres for better responding GBV and child protection cases

- *Training to OCMC staffs on child friendly services and communication skills*
- *Provision of gender friendly and child friendly materials to OCMCs*
- *Coordination & technical support*

Milestones Accomplished







People Reached



312 Girls



290 Boys



9435 Male



8211 Female



359 FCHVs



14483 Households



549 Stakeholders

IEC/BCC Materials Used



3 Radio Programs



57 Wall Paintings



500 Flipchart



359 Register



260 Flex Banners

Good Practices and Learning

- Through the MUAC screening of 23319 children by 359 trained FCHVs, 1791 MAM and 244 SAM cases were identified. In addition, FCHVs organized 716 events of mother group meetings. Also, they did door to door home visits of 50545 households in 15 days. NCV has mobilized all 359 FCHVs for home visits more than 5 days and they reached 18762 additional households, however, the total target was 11000 hrs. Hence, **local level volunteer mobilization is the key approach to reach and access high numbers of households and children in the community in a short period of time.**



is crucial.

- Tuk-Tuk was mobilized in all targeted five Palikas for 10 days. Different types of messages about nutrition, RCCE, and WASH were disseminated in the community. It was helpful in creating awareness among community people about nutrition, mask, and vaccine promotion including the WASH component. In this way, **for the mass awareness-raising and communication Tuk-Tuk mobilization with a megaphone announcement approach**
- Capacity building training for staff and volunteers was conducted. The training was completely practical-based (MTOT model) that helped staff and volunteers of LIFE Nepal to

enhance their knowledge on Cash Plus intervention easily. Hence, the **practical-based training approach** is an important tool for capacity building.



- Elected representatives and a government official participated in province-level orientation and review meetings. In addition, 502 vulnerable children were provided emergency support and 100 families with reintegration support to start alternative businesses of livelihood improvement in the presence of elected representatives and authorized government officials. Finally, elected representatives and government officials owned the program by expressing their thanks and appreciated the works of direct support to children and families. Hence, the **engagement of elected representatives and authorized government officials in the program implementation and monitoring** is the best way to make them accountable and responsive to the program.



- Gender and child-friendly materials like a sanitary pad, diapers, oil, bathing, and washing soap, blanket, Bhadakuti/doctor set, weight measurement machine, thermometer, carom board, stationaries, cloth baskets, dustbin, and recreational kits distributed to six OCMCs of Madesh to ensure effective gender/child-friendly service delivery from OCMCs. Through this, survivors had an opportunity of playing/use materials that contributed to overcoming the

stress and recreating themselves. Hence, equipping OCMCs with gender and child-friendly materials is essential for reducing stress and recreating protection for survivors.

Challenges Faced

- All the targeted people were not reached through tele-counseling due to telephone unreachable or not properly connected in poor networks, not responding, or received by people, and mobile switched off.

Photos





Case Studies

1. Sangeeta has started the tailoring shop

Sangeeta Mandal, a resident of Aurahi Rural Municipality-5, has started a tailoring shop. She is a single woman with 3 children (2 daughters and 1 son). Her husband died when she was 21 years old. After the death of her husband, she suffered from the economic crisis. She was not even able to send her children to school, resulting in depression and leading to psychosocial problems. However, through the Cash Plus program, which was funded by the UNICEF, LIFE Nepal identified her needs and supported her with Rs.

20,000 to purchase the sewing machine. After receiving the support, Sangeeta started her own tailoring business. Life Nepal also provided her with psychosocial support through the community psychosocial workers and counselors. These days, she has become more confident and mentally strong. Through her business, she earns 8,000 rupees per month and is able to send her children to school.

2. Paramshila has started the tea shop

Paramshila Devi Sahani, Aurahi Rural Municipality-6 resident, 35, has opened a tea shop. She is a single mother with 5 children (3 daughters and 2 sons). Her husband was missed in India when he worked there. She has no land. She was facing economic problems in her family. She was not able to send her children to school. She was also suffering from psychosocial problems. The Cash Plus program, which was funded by the UNICEF, LIFE Nepal identified her needs and supported her with Rs. 20,000. After the support, she is very happy and has started her own tea shop in the local market. She was also provided with psychosocial support through the community psychosocial worker and counselor. Nowadays, she is earning more than Rs. 10,000/- on a monthly basis.



3. Shivakaliya Kumari Mahato has opened the Panipuri Shop

Shivakaliya Kumari Mahato, GBV survivor whose husband left her with two children and was staying at the maternal home after being tortured and ignored by the husband and his family, is now operating her Panipuri stall with IGA support from Life Nepal. Her first day's income from the stall was 600 rupees, up to now, she has earned 800 rupees as her highest income. She wants to improve the business by adding local food items to the stall. She has a habit of saving money in a piggy bank. At the very least, she saves 20 rupees a day.



4. Demonstration of cooking food by FCHVs helped in enhancing knowledge of mother in preventing her child from malnutrition

Satyam Das is a 9-month-old youngest child in the family. Her mother Sunita Das is just 22 years old and is a permanent resident of Aurahi Rural Municipality Ward -5. She represents the dalit and poor families in the community. She is a housewife and usually spends her whole day performing household chores. Her husband is a daily wage worker. They do not have a single piece of land except a mud-made house/hut. Her husband's all income goes for feeding the family members. During mother group meetings FCHVs has counseled about the importance of 4 food groups and how to prepare a healthy and nutritious diet. She was motivated a lot and she feel herself to be energized now she is preparing food for the child as per



the communication in the meeting by FCHVs. She was not that conscious but after getting knowledge she tried to manage varieties of foodstuff during cooking though there is an economic crisis in the family.

According to the mother, Sunita had started complementary feeding after the completion of six months except for milk. Now, she is too conscious of her child and providing a nutritious diet during the meal. Sunita learned how to prepare food well and how to prepare healthy

nutritious food for children from the demonstration by FCHVs. She also became familiar that we should not promote junk food since it creates harm to the body and is not healthier. The demonstration helped in enhancing the knowledge of the mother and preventing her child from the worst scenario of malnutrition.

5. Volunteer mobilization in the community has played an effective role in Mask and Vaccine promotion.



Daropati Devi Sada mother from a marginalized community in Rajbiraj Municipality Ward No.-12. Her husband Ajay Sada works on a construction site and she herself is a housewife. Her husband usually spends his whole day earning for living. They have to low income and is illiterate. They never use a mask and he was not vaccinated (Covid Vaccine). They have not much idea about vaccines and there was the low practice of mask use in the community.

As LIFE Nepal volunteer counseled, the family were motivated and now whenever they go outside in a crowd, they use mask, and the husband of Daropati Devi Sada is vaccinated now. Volunteers were even mobilized in the community and school for mask and vaccine

promotion. Now most of the people in the community and students in the school use mask and most of them are vaccinated by following protocol.

6. Cash Plus Intervention program ensured nutrient essential for child and prevented malnutrition.

Usha Paswan is a caring mother and a loving wife. She is affiliated to a poverty-stricken family, living in the Durgabhagwati Rural Municipality ward no 2 of Rautahat district. Her cute baby boy – Aditya Kumar Dusad, aged 2 months has been a beautiful godsend for the family.

One day, Pinky overheard her neighbours talking about a cash distribution from palika under cash plus intervention program and she went to palika for verification whether she was in criteria or not. As per her communication in social development section she came to know about her name was addressed in the list. On the distribution date FCHV has communicated her about the distribution of Cash from the palika and she received cash including different nutrition, WASH and RCCE Message.



She says” This program has been a revelation to me in terms of understanding the nutritional, water and sanitation including mask use message. She also said that I was not well aware about this content. This program has been a great support to me and my child. Now I will utilize money to manage healthy nutritional diet to my child. I would like to Thank whole team for the great support.”