

CONSULTATION PROCESS WITH LOCAL ACTORS

TO DEVELOP CALP'S LEARNING AND TRAINING STRATEGY

MIDDLE EAST AND NORTH AFRICA (MENA), WEST AND CENTRAL AFRICA (WCAF)
AND EAST AND SOUTHERN AFRICA (ESAF) REGIONS



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BY: ACTION AGAINST HUNGER UK'S MONITORING, EVALUATION AND LEARNING SERVICES
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SUMMARY TABLE

INTERVENTION TITLE	Development of the CALP Network learning and training strategy: Consultation process with local actors
LOCATION	Global. 3 regions under examination: Middle East and North Africa (MENA), West and Central Africa (WCAF) and East and Southern Africa (ESAF)
DONOR & CONTRIBUTION/S	German Federal Foreign Office (GFFO)
LEADING PARTNER (S)	CALP Network
EVALUATORS	Action Against Hunger UK's Monitoring, Evaluation, Accountability and Learning Services
TYPE OF EXERCISE	Consultative study
EXERCISE TIMEFRAME	October 2022 – February 2023

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ACRONYMS

AAH	Action Against Hunger
CCD	Collaborative Cash Delivery Network
CVA	Cash and Voucher Assistance
CWG	Cash Working Group
ESAF	East and Southern Africa
FGD	Focus Group Discussion
GFFO	German Federal Foreign Office
KII	Key Informant Interview
INGO	International Non-Governmental Organisation
MEAL	Monitoring, Evaluation, Accountability and Learning
MENA	Middle East and North Africa
MPCA	Multi-Purpose Cash Assistance
NGO	Non-Governmental Organisation
UK	United Kingdom
UNHCR	United Nations High Commissioner for Refugees
WASH	Water, Sanitation and Hygiene
WCAF	West and Central Africa
WFP	World Food Programme

EXECUTIVE SUMMARY

INTRODUCTION AND SCOPE

The CALP Network, a network of over 90 organisations, works collectively to improving the quality and scale of humanitarian cash and voucher assistance (CVA). To aid the delivery of effective, efficient and impactful CVA, CALP provides a variety of learning and training materials. Learning opportunities and guidance products are accessed through online content delivered in various ways, in-person and online workshops, and CALP-certified facilitators. These resources are designed to target diverse CVA actors, adapt to varied levels of experience and apply to different agency and sectoral protocols while also suiting the CVA practitioner's needs and responsibilities.

This consultancy engaged local actors with the aim to understanding the learning needs of these stakeholders in accessing, participating and engaging in CVA learning and training opportunities. Guided by questions of training accessibility, quality and preferences, this study reflects on how CALP can adapt future learning and development strategies to meet the learning needs of local non-governmental organisations (NGOs). The consultancy captures the perspectives of local actors in three regions including Middle East and North Africa (MENA), West and Central Africa (WCAF), and East and Southern Africa (ESAF).

METHODOLOGY

Using a mixed method approach, the consultancy was developed around utilisation, participation and triangulation. This approach prioritised gathering information suited to the needs of CALP to inform their learning strategy, while actively engaging local actors through inclusive and participatory data collection techniques. Data collection included a desk review of key documents, focus group discussions (FGDs), key informant interviews (KIIs), and an online survey. The use of multiple data sources and techniques allowed for corroboration and triangulation of findings. The survey, KIIs and FGDs were conducted in French, Arabic and English according to regional preference.

THROUGH PRIMARY DATA COLLECTION



Data was then analysed using an analytical framework based on thematic analysis and triangulation across data sources.

While the consultation identified over 225 local actors to participate in the study based on a purposeful sampling method, the team faced difficulty engaging local actors due to connectivity, minimal interest in participation and unfamiliarity with the CALP Network. This resulted in a lower representation of stakeholders in the study as intended, especially in MENA. As such, the data presented in the study is not representative of all actors or local organisations in these regions.

EXECUTIVE SUMMARY

FINDINGS



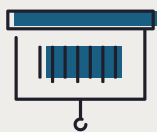
STUDY DIMENSIONS

CALP offers varied approaches to learning as outlined in the CALP Capacity Building Strategy. The CALP Cash Learning Hub provides access to numerous learning opportunities with topics ranging from CVA fundamentals to core CVA skills for operational staff, to specialised courses, and training modules for donors. Where there is demand and funding, CALP offers in-person courses with facilitation by CALP representatives or CALP-certified trainers. CALP regional offices continue additional capacity building through technical, coordination and policy activities.

CALP AND
THE NETWORK'S
OFFERINGS,
THE RESEARCH TEAM
ENGAGED LOCAL
ACTORS FROM

19
COUNTRIES

With this understanding of CALP and the network's offerings, the research team engaged local actors from 19 countries including Burkina Faso, Niger, Mali, Cameroon, the Democratic Republic of the Congo (DRC), Central African Republic (CAR), Nigeria, Chad, South Sudan, Somalia, Uganda, Zimbabwe, Malawi, Burundi, Sudan, Jordan, Lebanon, Syria, Iraq, Yemen, and Occupied Palestinian Territories (including West Bank and Gaza). This report provides findings compiled across all three regions of MENA, WCAF and ESAF. Regional reports are also available in separate documents.



TRAINING NEEDS

Through interviews and the survey, local actors shared varied training needs based on their existing knowledge of CVA and level of engagement in the assistance modality. Individuals with little familiarity with CVA requested topics on CVA fundamentals, a topic widely covered by CALP's current offerings. Whereas, local actors more experienced in CVA requested more specific topics such as market analysis, CVA and digitalisation, and monitoring and evaluation for CVA. Through the survey, social protection and cash assistance, followed by multi-purpose cash assistance were the most requested training topic in all three regions.

PARTICIPANTS
HIGHLIGHTED THE
USE OF CALP'S
FREE RESOURCES
THROUGH THE
CALP CASH HUB,
AND SHARING
KNOWLEDGE
PEER-TO-PEER
THROUGH THEIR
ORGANISATIONAL
NETWORK.

In addition to focal topics for training, key informants highlighted the need for more frequent training opportunities to engage all personnel involved in CVA implementation. Actors reflected on the value of increasing availability of learning opportunities for support staff from logistics and finance.

Training needs were sometimes identified by internal assessments within the organisations, but more often selected externally based on donor and project-based requirements. National NGOs connected to an international network such as the International Federation of the Red Cross, reported systematic processes to assessing their training needs based on their retention and training rates. However, many actors across all three regions evaluated training needs based on donor requirements or project-based skill needs. In a few instances, training needs were identified collectively through cluster or cash working group (CWG) membership.

Without many financial resources to support external training opportunities, local actors often relied on capacity building to be allocated within the project budgets by their partners. Otherwise, participants highlighted the use of CALP's free resources through the CALP Cash Hub, and sharing knowledge peer-to-peer through their organisational network. If expertise was not readily accessible through these avenues, local actors would request additional support from their international partners.

EXECUTIVE SUMMARY



71%
OF LOCAL
ACTORS
ATTENDED
AN IN-PERSON
TRAINING

TRAINING PARTICIPATION

Only 38% of local actors in all three regions participated in a CALP training in the last two years. However, almost half of participants from WCAF (48%) had attended a CALP training. Across MENA, WCAF and ESAF, barriers to participation included funding issues (54%) and not knowing about the CALP training opportunity (59%). These findings showcased a gap in the visibility of CALP, especially of CALP's free training offerings.

Of those who did attend a CALP training, 71% of local actors indicated they attended an in-person training. Stakeholders from WCAF were more likely to report attendance in -person (81%) compared to only 64% of ESAF survey participants and 50% of MENA survey participants.

CALP was highly recognised as the primary provider for CVA learning materials by experienced CVA actors, while local actors with less experience with the modality were not familiar with CALP. Outside of the CALP Network, Disaster Ready, Dev Learn, BioForce, PHAP and Afrique-competences were identified as alternative training providers. Local actors also reported international partners including World Food Programme (WFP), World Vision International (WVI), Care International, Save the Children International, among others, had provided project-specific training opportunities on CVA.

Local actors praised how CALP trainings incorporated practical exercises which enabled engagement and shared learning between diverse professionals. Participants highlighted that these peer-to-peer experiences allowed them to reflect on their own experiences, "build a community of practice" and further create space for partnership building.

Additionally, participants valued the expertise and facilitation of CALP certified instructors. These facilitators were characterised as experienced and able to structure sessions in an engaging way. However, actors from ESAF and MENA highlighted the need for improvements regarding the translation of CALP training materials into the appropriate languages. Although in MENA local actors noted improvements in Arabic resources, they thought quality could still be advanced. In ESAF, one actor suggested shorter guidance documents would allow for easy translation into local dialects.

For future training participation, local actors sought for opportunities which were in-person, included practical elements, and allowed for peer-to-peer learning. Additionally, participants suggested that receiving certificates upon completion would allow them to provide evidence of the time dedicated to the training and knowledge gained as a result.



ACCESS TO TRAINING

Lack of financial resources remained the top barrier to accessing CVA learning opportunities, as indicated by 67% of the survey respondents. Without the reliable and unrestricted funding, local organisations' approach to professional development remained limited, and resulted in their reliance for free opportunities, self-funding or capacity building budget lines established by their partners.

Technology including connectivity and access to proper tools was also reported by 27% of the local actors. Technology was a more significant issue in ESAF with 43% survey respondents from the region selecting this issue as compared to less than 18% of respondents in WCAF and MENA. Local

EXECUTIVE SUMMARY

TO STRENGTHEN THE ACCESSIBILITY OF CVA LEARNING MATERIALS, LOCAL NGOS ADVISED THAT CALP PROACTIVELY WORK WITH CWGS AND CLUSTERS TO INCREASE THEIR VISIBILITY AND THE MARKETING OF THEIR TRAINING OPPORTUNITIES.

actors cited other challenges including lack of previous knowledge (17%), lack of time to dedicate (12%) and dislike of online training (11%).

During key informant interviews, local actors elevated the topic of localisation in reference to these issues. These individuals highlighted that their capacity building, access to knowledge and information is often restricted to the project implementation of CVA. In-person training opportunities often remain out of reach to local actors due to their location and cost.

In response to these challenges, participants recognised the need for structural changes to increase the accessibility of training opportunities and the sustainable approach to strengthening capacity in CVA. Local actors highlighted their desire to institutionalise professional development processes in their organisations and continue to actively engage with CWGs and clusters to exchange experience and knowledge. Others promoted strategies to engage government officials and the humanitarian sector more broadly about the best use of CVA. Incorporating local actors in CVA and ensuring their membership to coordination groups, access to information and opportunities to lead in CVA was also emphasised.

To strengthen the accessibility of CVA learning materials, local NGOs advised that CALP proactively work with CWGs and clusters to increase their visibility and the marketing of their training opportunities. CALP could also implement train-the-trainer models to expand the network of in-country CALP-certified staff. Furthermore, CALP could explore additional marketing ideas such as designing materials that local organisations, international NGOs and CWGs could easily share.



QUALITY OF TRAINING

CALP trainings were perceived as helpful for improving knowledge on CVA concepts and increased the overall appreciation of CVA as a modality. Local actors highlighted their appreciation for understanding the basics and subsequently seeing how the theory learned during the training exercises was evident in their job experience. Other individuals reported that CALP trainings informed their ability to complete assessments associated with CVA implementation including market analysis. Overall, the CALP trainings provided quality contextual knowledge and skills related to implementation of CVA.

Across all three regions, local actors suggested factors such as training modality, time conflicts and the actors' job responsibilities may affect the preferences of CVA training. Over half of the local actors (52%) preferred training options with an in-person element. Whereas, fully remote self-directed training was the least desirable option with only 10% of participants indicating preference for this option. Participants in MENA were the least likely to select an offline delivery model, with 0% selecting a fully remote session. Individuals also suggested some local actors may not be comfortable with technology online, and that other job responsibilities were more likely to interfere or distract learners from actively engaging in online sessions.

>52%

OF LOCAL
ACTORS

PREFERRED
TRAINING OPTIONS
WITH AN IN-PERSON
ELEMENT

EXECUTIVE SUMMARY

CONCLUSIONS

The CALP Network and their learning opportunities continue to be a valuable resource for local actors implementing CVA. Through this study, local actors from MENA, WCAF and ESAF highlighted their need for a range of training topics from fundamentals to more advanced or specialised content. Overall, in-person training and the use of sessions to network or form communities of practice was preferred. Local actors highlighted a significant gap in CALP's current strategy in that CALP's visibility remains low to the majority of local organisations. Increasing the frequency of facilitated workshops or hybrid training models could mitigate the financial inaccessibility of longer, participatory sessions. CALP could also coordinate with clusters and CWGs as a suitable way to assess demand, while increasing availability for training sessions for local actors.

Overall, this research contributes to wider trends and conversations about the need to address structural and sectoral approaches to locally-led responses to CVA. Local actors highlighted challenges in unrestricted funding, and the inability to account for personal development within their organisational structure. CALP's ability to create inclusive and accessible spaces to information sharing, peer-to-peer learning and the coordination of communities of practices could positively impact the capacity and overall inclusivity of local actors to the CVA space.

RECOMMENDATIONS

- 01 Expand visibility and marketing of CALP training workshops and learning opportunities, so local organisations are aware of available offerings and the role of the CALP Network.
- 02 Increase the frequency and availability of different time slots for the in-person training, so the participants can choose the time that is convenient to them.
- 03 Focus on in-person training or hybrid workshop models that include practical exercises, and which allows for exchange and networking with other CVA professionals.
- 04 Develop a pool of national CVA experts, who can be the focal points for CALP per country, and deliver training workshops on CVA at local and national levels in the assigned countries.
- 05 CALP should consider how their relationship with INGOs and UN member organisations can assist in the visibility and accessibility of resources, while also providing a direct avenue to engaging with local actors.
- 06 CALP should continue to conduct research on the needs and interests of local actors regarding CVA learning opportunities as the sector continues its commitment to locally-led responses to CVA.

1 INTRODUCTION

As a global network of over 90 organisations, the CALP Network works to collectively align its approaches and actions to optimise the quality and scale of humanitarian cash and voucher assistance (CVA). CALP members represent diverse stakeholders engaged in CVA including local and international non-governmental organisations, United Nations agencies, technical and research experts, donors, innovators, academics, and individual practitioners. Collaboratively, CALP catalyses the power and knowledge within the network to strengthen both the individual and institutional capacities.

To support the delivery of impactful, effective and high quality CVA, CALP supports the development and delivery of a variety of learning and training activities. These learning offers are informed by the learning and evidence produced by the CALP Network and the sector more broadly. Learning modalities include online facilitated workshops, face-to-face trainings, self-driven online content, working with CALP-certified trainers, and providing learning products via the CALP Network Library, CALP's Cash Learning Hub and Capacity Building page. The materials are designed to target different stakeholders, account for different levels of understanding and experience, adapt to specific agency policy and protocol while being appropriate for practitioner's focus and roles in CVA.



ORGANISATIONS

2 PURPOSE AND SCOPE OF THE CONSULTATION EXERCISE

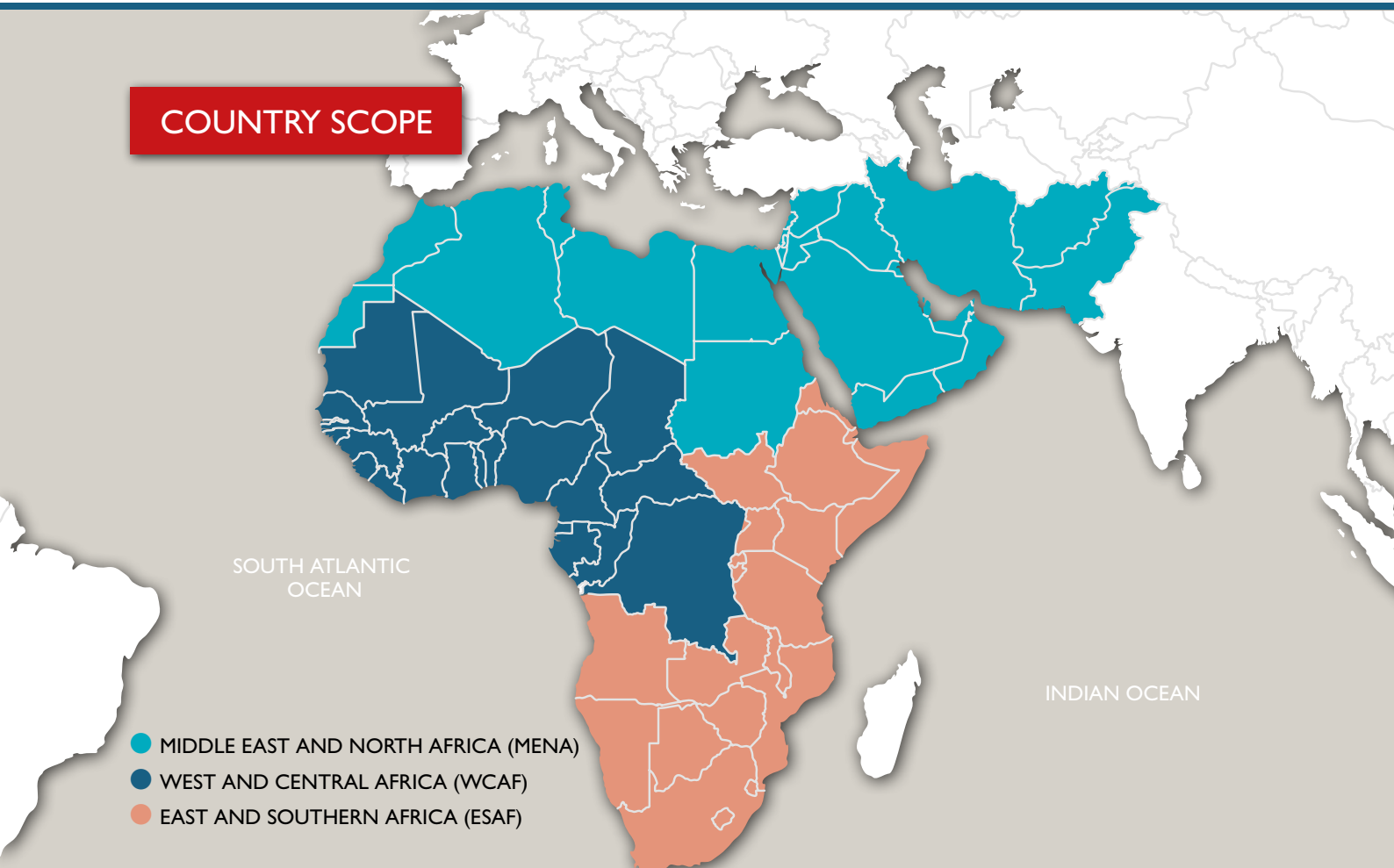
2.1 CONSULTATION PURPOSE AND OBJECTIVES

This consultancy aimed to understand the learning needs of local actors of the Middle East and North Africa (MENA), West and Central Africa (WCAF), and East and Southern Africa (ESAF) regions in accessing and engaging in CVA learning and training activities through different modalities.

By engaging the network on questions of training accessibility, quality and preferences, the outcomes of this consultancy will inform CALP how they can aid relevant learning needs through the development of the new CALP learning and development strategy. Dissemination of the findings will also further support efforts of local engagement for CALP's regional offices.

2.2 SCOPE OF THE CONSULTATION

The consultation covered three regions including Middle East and North Africa (MENA), West and Central Africa (WCAF), and East and Southern Africa (ESAF).



3 METHODOLOGY

3.1 APPROACH

The consultancy was centred around utilisation, participation and triangulation. The research approach is outlined in detail below:

- **UTILISATION-FOCUSED:** the study targeted the information needs of CALP to inform the development of the training and learning strategy;
- **PARTICIPATION AND SHARING:** local actors engaging with CALP members participated during the data collection through three techniques: focus group discussions (FGDs), key informant interviews (KIIs) and an online survey. Participation extracted perceptions from those actors ultimately serving target populations with CVA. This approach was designed to increase ownership and the probability that findings and recommendations could be used to inform the training and learning strategy in a relevant manner;
- **TRIANGULATION:** multiple data sources and collection techniques were used to corroborate findings.

Using this approach, the following research questions were investigated (see Table 1).

TABLE 1 RESEARCH QUESTION MATRIX		
AREAS OF STUDY	SUB AREAS OF STUDY	QUESTIONS
What's the need? Access to training and other learning opportunities / covering their needs	Training need	How do the organisations and individuals identify and accommodate for training needs? What are the existing training needs? What processes and guidance are in place to support access to training within the organisation?
	Training participation	What barriers are they facing to access training? What are the potential solutions to these barriers? Are they collaborating with others in order to address their training needs? Are they receiving support from other actors or groups?
	Resources to access training	Does their organisation/employer have the resources to contribute to their professional development? How do they find out about capacity building resources? What would be the best way of strengthening their capacity to deliver CVA? How can this be done sustainably?
Quality of the training Preferences and learning areas	Applied learning	To what extent have they applied the learning from previous trainings they have done? How has this strengthened organisational knowledge?
	Learning preferences	What are their learning preferences, both as an individual and an organisation? What training combinations (both regarding modalities and content) can CALP offer to meet these learning preferences? Are there any factors that would affect the preferences and needs of particular groups?
	Technical learning areas	In which area of expertise would they like their staff/themselves to be trained?

3.2 DATA COLLECTION TECHNIQUES

Data was collected via a desk review of all key documents, focus group discussions (where possible), key informant interviews, and an online survey. The research team used a reiterative process to assess the progress of these techniques in collecting necessary data for the study. Amendments were made where necessary. Each of these techniques is discussed below.

3.2.1 SECONDARY DATA COLLECTION

The study team conducted a systematic review of relevant literature and CALP relevant documents. The objective of the desk review was to gain a substantial understanding of the CALP Network, the fundamental principles underpinning the strategy, training tools and platforms used to reach learners and local actors involved in CVA related activities. Data gaps which emerged from the desk review informed the revision of the research study and consequently the design of data collection tools, with the final agreement of the contracting team.

3.2.2 PRIMARY DATA COLLECTION

Primary data was collected using focus group discussions (FGDs), key informant interviews (KIIs) and an online survey. Participants from primary data collection represented 19 countries across the Middle East and North Africa (MENA), West and Central Africa (WCAF) and East and Southern Africa (ESAF) regions. A full list of organisations and countries represented is available in Annex 2.

The study team initially proposed to conduct one FGD with local actors (between 6–8 participants in each group) in each identified country (list can be found in Annex 2). The AAH UK team suggested to use selecting variables to identify which local actors were invited to FGDs, including years of experience working on cash or voucher activities, and resources dedicated (i.e. number of staffs on implementing CVA).

To assist in identifying the appropriate contacts for the study, each CALP regional office identified the list of relevant local actors in each country, indicating those that are most likely to participate in the FGDs. With the lists provided, the research team contacted all available individuals inviting them to participate in a focus group discussion.

FGDs were initially scheduled with local actors who indicated their availability and interest in participating in the study. However, attendance to these scheduled workshops remained limited.

To efficiently use resources and address limited attendance, the research team contacted local actors individually for 30–45-minute key informant interviews in lieu of FGDs.

A standard semi-structured guide (available in Annex 1) was used to facilitate the discussion in both FGDs and KIIs. FGDs and key informant interviews were conducted using the main spoken languages in the countries object of data collection (i.e. French, English and Arabic). JAMBOARD, a digital shared canvas application, was used during FGDs and KIIs to visually share the question being discussed and to enable all participants to add their contributions both verbally and in a written manner. Responses were captured on the JAMBOARD and reiterated to the participants to ensure their perspectives were accurately documented.

A total of 33 participants were interviewed through either a key informant interview or focus group discussion. See Table 2 below.



TABLE 2 PRIMARY DATA COLLECTION				
	MENA	WCAF	ESAF	TOTAL
Participants through KIIs and FGDs	11	12	10	33
Survey participation	13	44	32	89

SURVEY

In an attempt to capture information from local actors unable to participate in either focus group discussions or key informant interviews, a short online survey was shared to these participants using Microsoft Forms and Google Forms. The survey was shared in three different languages (English, French and Arabic) to ensure the questionnaire was accessible.

The survey was shared with 225 local actors and was completed by 89 individuals: 32 local actors in the ESAF region, 44 local actors in WCAF and 13 actors in MENA.

3.3 ANALYSIS

An analytical framework was developed to generate thematic analysis and triangulation across data sources using Microsoft Excel.

Data was coded to streamline concepts and identify elements of interest from the FGDs and KIIs. The thematic framework followed the structure of FGDs, KIIs and the online survey tools, while reflecting the research study questions.

Cross comparison between data source was used to corroborate findings and ensure a rigorous level of response to the study questions. This triangulation approach was used to check consistency of findings.



4 | LIMITATIONS

A purposeful sampling method was used to identify and conduct FGDs and KIs with relevant local actors across MENA, ESAF, and WCAF. However, the study team faced challenges in engaging with local actors in different regions, resulting in limited participation of local actors in primary data collection from several countries. Reasons for this included connectivity, limited interest in participation and unfamiliarity with the CALP Network. To mitigate this issue, the research team adapted their methodology to include key informant interviews with individuals in absence of high attendance of FGDs. Additionally, an online survey was shared with local actors to gather additional information. However, not all local actors participated and several countries did not have any representation. As a result, the data presented in this study is not representative of all local actors or local organisations in these regions.

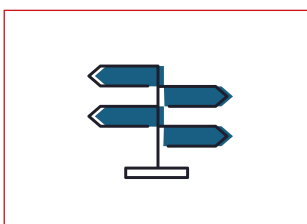
5 | DATA QUALITY MANAGEMENT

Processes and deliverables were reviewed and validated by the CALP team in each phase of the consultancy. The study team completed regular catch up meetings, approximately every two weeks, to inform CALP about progress and challenges during delivery. In addition, the AAH UK team organised a working space to facilitate interaction, sharing of documents and simultaneous revision of documents and deliverables.

Action Against Hunger UK followed their internal Evaluation Policy to reinforce the quality and accountability throughout the delivery, in line with international evaluation norms and standards. This policy outlined the key principles followed by Action Against Hunger UK, namely: impartiality and independence; credibility; usefulness; transparency and participation; and gender equality.

6 FINDINGS

6.1 STUDY DIMENSIONS



The CALP Capacity Building Strategy outlines the ways in which the network can support both individual and institutional capacity. This strategy is delivered through the development of appropriate materials that account for different levels of understanding, varied focus areas and roles, and preferences of diverse stakeholders and organisations. Through the Kaya Connect Platform and in-person facilitation, CALP offers varied approaches to learning which can account for different contextual customisation.

The CALP Cash Learning Hub is hosted by the Kaya Connect platform and is accessible to all interested participants by signing up to the e-course website. Through this platform, CALP offers a variety of learning opportunities including self-directed e-learning courses, a facilitators space, and training videos via Youtube. Online learning covers six categories including introduction courses, core CVA skills for programme staff, core CVA skills for operational staff, specialised courses, practicing your skills and CVA training for donors. Learning pathways help participants identify relevant courses to further develop their CVA knowledge. The Facilitators Space is a location for anyone delivering CVA training to access training materials and discuss, provide feedback and exchange advice on the content.

Where there is demand and funding, CALP also delivers physical courses within regions. As requirements laid out by CALP representatives, these trainings will be conducted by CALP certified trainers. These facilitators are required to lead a participatory style training, must be familiar with the countries and relevant language, and must maintain training credentials for specific courses. CALP's training partners deliver CALP-accredited courses as another way to access learning, these partners include Bioforce, Key Aid Consulting, and RedR UK.

Through its regional offices, CALP continues to support capacity building through technical, coordination and policy activities. These offices help coordinate and chair communities of practice, such as technical cash working groups, and help facilitate engagement between CVA actors.

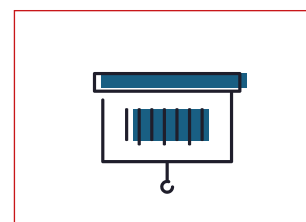
With this understanding of CALP, the research team interviewed and surveyed local actors from 19 different countries in ESAF, MENA and WCAF regions. These countries include Burkina Faso, Niger, Mali, Cameroon, DRC, CAR, Nigeria, Chad, South Sudan, Somalia, Uganda, Zimbabwe, Malawi, Burundi, Sudan, Jordan, Lebanon, Syria, Iraq, Yemen, and Occupied Palestinian Territories (including West Bank and Gaza). The findings below showcase the local actors' perspectives from all three regions. Regional reports are also available in separate documents.

6.2 TRAINING NEEDS

6.2.1 WHAT ARE THE MAIN NEEDS FOR TRAINING AND LEARNING ON CVA?

Training needs and learning on CVA varied based on the current implementation level of CVA by local actors. Through both interviews and the survey, local actors with low engagement with CALP or who identified their organisations as new to CVA referenced a need for the training on CVA fundamentals, a topic CALP covers in their online training offerings. Local actors more highly engaged in CVA requested topics such as market analysis, CVA and digitalisation, CVA and gender, CVA and social protection, CVA and monitoring and evaluation, CVA and security, layering CVA with other programme delivery, choosing CVA modalities (conditional, unconditional, cash, voucher) and how support transition after a CVA programme is complete.

Across all three regions, local actors identified social protection and cash assistance as the most requested training topic, followed by multi-purpose cash assistance. This was evident from both the key informant interviews and online survey findings. During key informant interviews, many local actors highlighted the role CVA plays in supplementing the initiatives in other sectors. Over 50% of local actors across the regions expressed the demand for workshops on evaluating and monitoring cash assistance, and market assessments as indicated through the online survey.



In addition to specific topics, local actors in interviews emphasised the need for more frequent, in-person training opportunities for all personnel involved in CVA implementation. One actor stated, "I have attended two face-to-face trainings. But they are infrequent. There is a need for certified trainings more regularly."

During key informant interviews, many participants reported the need to train all program staff, regardless of their position in CVA, so they understood how their particular roles related to the CVA programme more broadly. One actor stated, "It would be better to have trainings for the support departments like the logistics and finance. If they can have specific trainings for them, it can be good. Just to know when to be involved, which topic is related to my position and what." This was further reflected in the request for training topics on financial service providers and CVA, logistical requirements for CVA and security considerations prior to implementation.

6.2.2 HOW ARE TRAINING NEEDS IDENTIFIED?

Local actors identified training needs through two different processes: through internal assessments within their organisation, and externally through donor and project-based requirements. Key informants highlighted how internal processes can be systematic or more ad-hoc approaches based on available resources and their relationship with international networks. Whereas, many local actors relied on project-based training that was financially supported by donors.

Local actors with access to an international network such as Red Cross National Societies, Mercy Corps and SOS Children's Villages reported more systematic processes to training needs. While these local organisations act as individual national agencies, their connection to a broader organisational network enabled access to training guidance and more established systems in place for professional development. Local actors from these agencies indicated they had processes to track staff retention, staff certification rates, and funding support to complete assessments if necessary to further identify needs.

Other local actors assessed learning demand on a needs-basis during the project planning and implementation. One actor stated, "We take a step forward, realise there is a gap [in knowledge], and then we come back and start a training. Sometimes you anticipate the next thing you need will be a market analysis. And, you start going through the internet and go through the training." In Sudan, local actors shared that they determine needs based on existing experience in the context area, but "if context is not familiar, [they] refer to local authorities or UNDSS to advise." As a result, one actor stated, "we don't often participate in such trainings, because we don't have specific guidelines" for training needs.

Cluster membership also provides avenue for identifying training needs. One actor stated, "We pick training needs from the National Food Security Cluster. We participate in the cluster. Other partners, other agencies can raise some issues that we may feel as an organisation that we need to know more about. Based on this we pick our training needs." In MENA, one organisation noted they identify their training needs "through coordination and consultations with the Cash Working Group".

In many cases, training is identified based on donor requirements or project-based skill needs. One actor shared, "Trainings are planned in the project. In this case, the national society has to look forward at the staff who will be involved, that can use those skills. Then we identify who will get the training." Other actors shared that if capacity building is not accounted for in the project budget, training demand is often not assessed nor financially accessible.

6.2.3 HOW DO LOCAL ACTORS ACCOMMODATE FOR TRAINING NEEDS? WHAT PROCESSES AND GUIDELINES ARE FOLLOWED TO FACILITATE CVA TRAINING AND CAPACITY BUILDING?

Across all three regions, local actors familiar with the CALP Network mentioned the use of CALP's online resources in the form of free training and guidance documents, as a means to accommodate their training needs. One actor stated, "CALP platform is what we are using so far in terms of training and content. I like the way the training and content is coming from. There is a lot of material, we have managed to salvage through the CALP Network: reference materials, case studies. There are plenty of living examples of where CVA is taking place and information on some of the challenges. This is our reference point." Professionals without preceding knowledge of CALP relied on resources provided by partners or searching the internet on a needs basis.

Cash working groups and sector clusters also assist local actors in reaching their training needs. In several instances, the clusters and cash working groups worked together to identify relevant training including those provided by CALP. The opportunity was then shared with the cluster/CWG members. However, the reliability and frequency of this avenue for accommodating training needs varied by region and country. In countries in MENA, local actors indicated CWGs had limited membership of local organisations and these networks provided information rather than organising direct training. In contrast in ESAF, several local actors reported they attended professional development trainings hosted by the country's cash working group and/or sector cluster like the National Food Security Cluster.

Without many financial resources to support external training attendance, local actors often rely on learning from other experienced staff members within the organisation or by gaining knowledge through on the job experience. Local actors reported "learning by doing" or through "self-learning process" to build their capacity in CVA. In these instances, staff would resort to expertise from the most senior individual on the project.

If expertise is not readily accessible within the organisation or cluster, local actors request support from their donors and international partners. One informant from Zimbabwe shared, they accommodate learning through partners, "Working with partners through the Start Ready Project. We are working with experienced players from WFP and asking them what we need to do. And they indicate what we're supposed to: 'these are the steps and stages you are supposed to take'. So we proceed and learn through that way." In MENA and WCAF, participants highlighted a similar role of their partners in providing technical expertise and guidance.

6.3 TRAINING PARTICIPATION

6.3.1 HOW MANY CALP TRAININGS HAVE YOU ATTENDED? WHAT ARE OTHER MAJOR TRAINING PROVIDERS?

Indicated through the online survey, only 38% of local actors across all three regions had participated in a CALP training in the last two years. Participants from WCAF (48%) were more likely to have attended a CALP training, whereas only 34% of local actors in ESAF and only 15% of informants in MENA had indicated attending a CVA training with CALP. See Figure 1.

Over half of participants (54%) on the online survey identified funding issues as a reason they have not attended a CALP training. Funding issues were higher in WCAF (70%) but lower in ESAF (48%) and MENA (30%). See Figure 2. Participants associated these costs as necessary for traveling for in-person workshops (a preferred modality discussed more below) and the fees required for longer, certified courses. Others noted that online facilitated workshops often still have a fee if provided by an external CALP certified provider.

Finally, as reflected in the limited participation of local actors in CALP trainings, local actors highlighted the lack of knowledge about trainings and CALP as a key barrier. 59% of participants identified this as a reason for not attending a

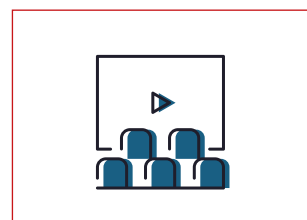


FIGURE 1

RESPONSES TO “HAVE YOU PARTICIPATED IN A CALP TRAINING IN THE PAST 2 YEARS?, RESULTS SHOWN BY PERCENTAGE OF LOCAL ACTORS IN EACH REGION WHO COMPLETED THE ONLINE SURVEY

- Across all 3 regions
- MENA
- WCAF
- ESAF

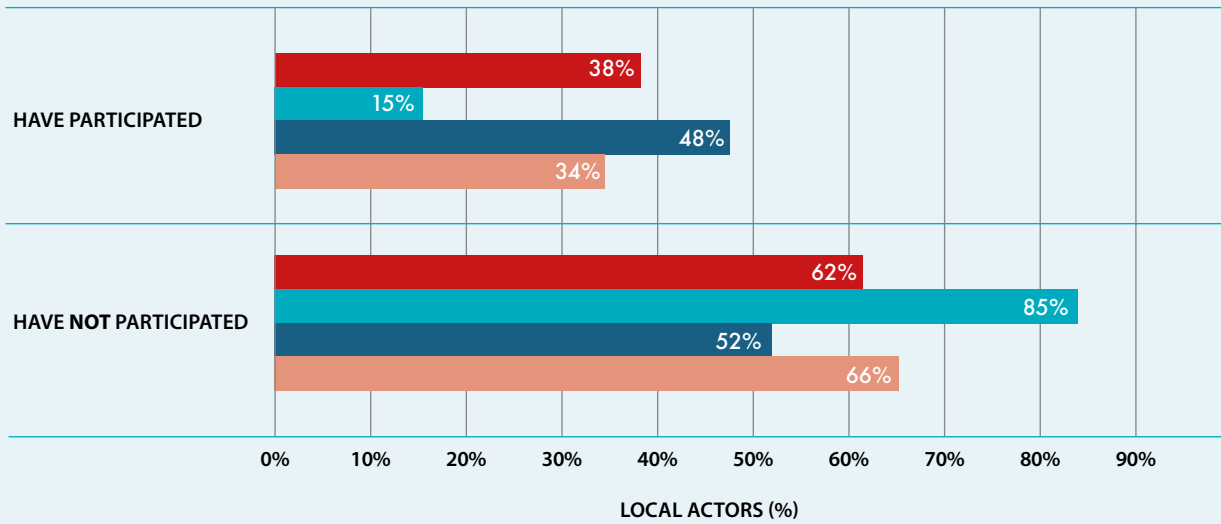
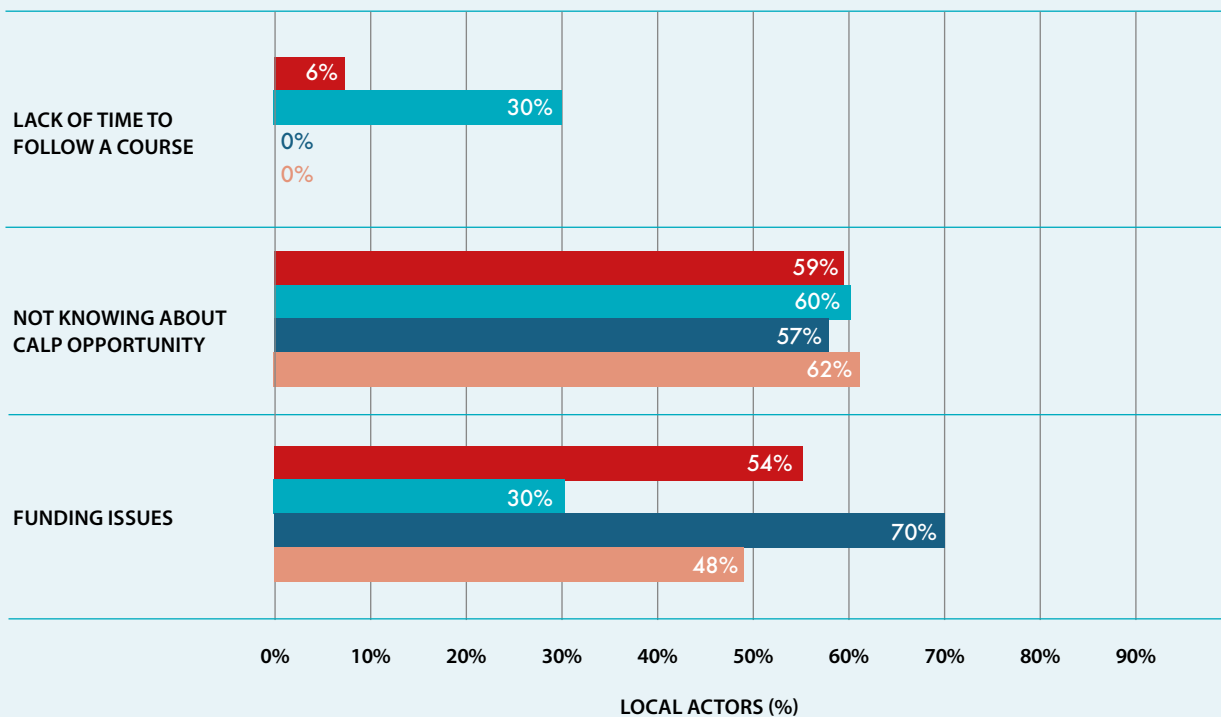


FIGURE 2

REASONS FOR NOT PARTICIPATING OR COMPLETING A CALP TRAINING, AS IDENTIFIED BY PERCENTAGE OF LOCAL ACTORS PER REGION

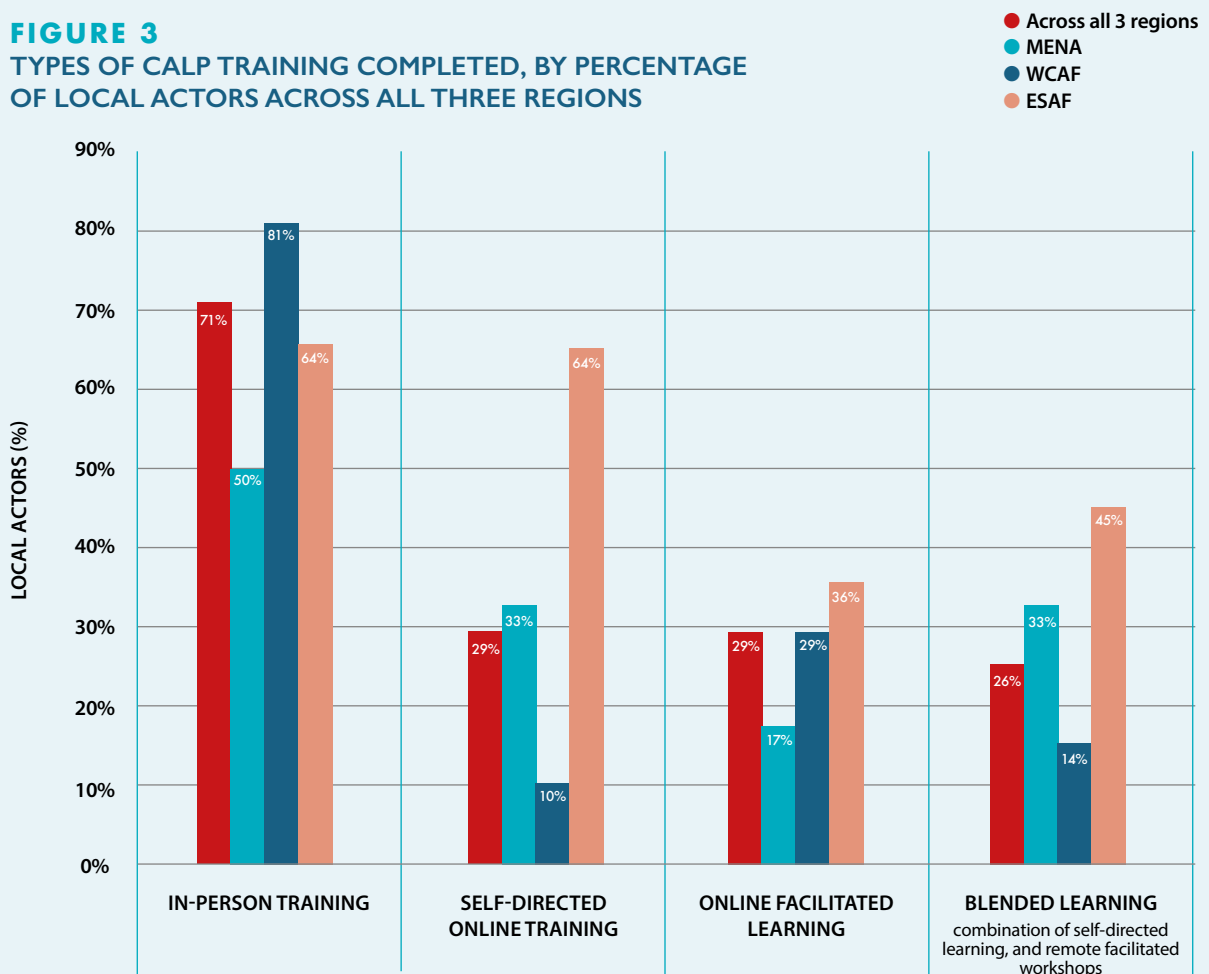
- Across all 3 regions
- MENA
- WCAF
- ESAF



CALP training. One person stated, "I did not realise there is CALP for CVA because I never heard of it. So, we need partners or people to mobilise us. Like have an assessment or webinar about the kind of training we would like to run, and provide us with the list of training plans for the next year. Then we can make a training that meets our needs best." Another individual stated that while they are familiar with CALP, they don't always know when there is a local opportunity for a training. They suggested more promotion and marketing of the CALP Network and regular communication about what workshops are available. This finding would also explain why many local actors suggested funding issues were a primary barrier to CVA learning, while the majority of CALP resources remain freely available via the Cash Learning Hub. In contrast, local actors from local organisations connected to international networks like the International Federation of Red Cross (IFRC) or SOS Children's Villages were more likely to indicate high engagement with CALP resources, or knowledge about CALP offerings.

Of those that did complete a CALP training, the most commonly attended training modalities was in-person (71%). Across the three regions, 29% of local actors on the survey also indicated attending self-directed online learning or a fully remote facilitated training. However, in WCAF a greater proportion of local actors (81%) had attended in-person trainings. Whereas, only 64% of individuals in ESAF and 50% of participants in MENA had attended in-person workshops. Blended learning and self-directed online learning were more common in ESAF and MENA, than WCAF. See Figure 3.

FIGURE 3
TYPES OF CALP TRAINING COMPLETED, BY PERCENTAGE
OF LOCAL ACTORS ACROSS ALL THREE REGIONS



While CALP was identified as the primary provider for CVA resources and guidance by veteran CVA actors, local actors new to CVA had not heard of CALP. Many interviewees expressed that CALP was new to them and their organisation. Several of these local actors suggested participating in the consultation in hopes of learning more about what CALP provided and to become more connected with available CVA resources. Local actors from local organisations connected to international networks like the International Federation of Red Cross (IFRC) or SOS Children's Villages were more likely to indicate high engagement with CALP resources, or knowledge about CALP offerings.

Besides CALP, a few other training institutions were mentioned. Disaster Ready was used to access free online resources related to CVA. DevLearn provided an extensive online training on CVA to local actors in Syria. In WCAF, Bioforce, PHAP and Afrique-competences were mentioned. Otherwise, CALP repeatedly was the only facilitator mentioned across key informant interviews.

Across all three regions, local actors identified they had received project specific training related to cash and voucher assistance from international non-governmental organisations. These organisations included World Food Programme (WFP), International Organisation for Migration (IOM), World Vision International (WVI), CARE International, Catholic Relief Fund, Save the Children International, and Oxfam. One actor highlighted that while trainings were provided by these organisations, the context was usually specialised to project implementation rather than a comprehensive syllabus on CVA. In some cases, these training providers referred to CALP resources and guidance for additional CVA content.

6.3.2 WHAT ARE THE STRENGTHS AND WEAKNESSES OF CALP TRAININGS?

The most significant strength of CALP trainings was how practical exercises within the workshops enabled engagement between different stakeholders and shared learning within similar CVA contexts. One informant shared:

"It promoted group engagement and getting beyond ideas even the facilitators had. It was wonderful that people were made to participate and suggest ideas, and best ways of handling certain situations. So you know what is on paper and what is actually on the ground. Sometimes there's a difference, so hearing from different partners, working together and sharing field experience ... that really makes the whole training complete."

Local actors saw the value in peer-to-peer experiences, and learning from others. A few indicated they continued networking following the training after meeting other CVA professionals, and these connections helped "build a community of practice" around CVA. Participants that attended shorter one-day trainings valued the theory components but also emphasised a longer training would have allowed for more practical elements and created space for partnership building. One actor also suggested field visits could further extend the value of training by combining practical work with real life contexts.

Several local actors also praised the expertise and facilitation of CALP certified instructors. Instructors were seen as "very experienced" and able to provide different examples to the training. Another actor valued the facilitators' collaboration with local partners to help guide the facilitation and adapt the training to the regional context. Additionally, the structure of the trainings was described as organised and that the structure of online sessions "encourages you to concentrate before you go to the next lesson. You will always learn something new, like a new perspective, based on the way it is structured. It is the added value to understanding the details of CVA and giving you the confidence to implement."

Local actors in ESAF and MENA suggested translation and appropriate language of CALP training can be improved. As a French speaking nation, local actors from Burundi are often lumped together with countries in Central Africa. However, they perceived East Africa as receiving more CALP training with better facilitators. They expressed a preference for access to these workshops even if conducted in English. In Syria, local actors reflected that the Arabic translation on some resources was not accurately portrayed. While, they perceived an increase in quantity and quality of Arabic CVA resources, they remarked these could still be improved.

6.3.3 WHAT ARE THE MAIN CHARACTERISTICS CONSIDERED WHEN FINDING A TRAINING/CAPACITY BUILDING SESSION?

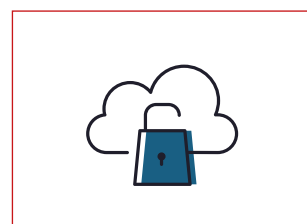
Most significantly, the opportunity to learn from peers and the inclusion of practical elements were the top characteristics of preferred training and capacity building sessions. One actor discussed their participation in a non-CVA training that was conducted online over 7 weeks. Although online, the format of the course allowed for interaction between practitioners, and practical exercises, "We had peer-to-peer reviews, where you would review another person's work, anonymously. You were paired with another participant and you would share. So for me I thought that was a really creative way of learning. The training that was very, very practical. Although it was online, but it was practical and you could do every stage of the process." Another actor shared, "The most interesting training is when you take the outcome of the training objectives and you apply in the field or in your job."

Similarly, many local actors expressed preference for in-person trainings. One actor shared, "A lot of people want experiential workshops, where they can come together with other regions, locations and share our experiences... what has worked and not. To network and to share." Individuals also perceived that physical trainings were more likely to keep all participants engaged, actively participating and able to consider different contextual factors that need to be considered in the training.

Additionally, local actors highlighted the preference for trainings that provided them with a certificate upon completion. Certification could provide local actors with evidence of their skill and knowledge gained from attending professional development workshops. Additionally, this validation attracted local actors to CALP opportunities as a clear outcome of dedicating time to learning.

6.4 ACCESS TO TRAINING

6.4.1 WHAT ARE THE MAIN ISSUES/CHALLENGES/BARRIERS TO ACCESSING CVA TRAINING? WHAT ARE THE POTENTIAL SOLUTIONS TO THESE BARRIERS?



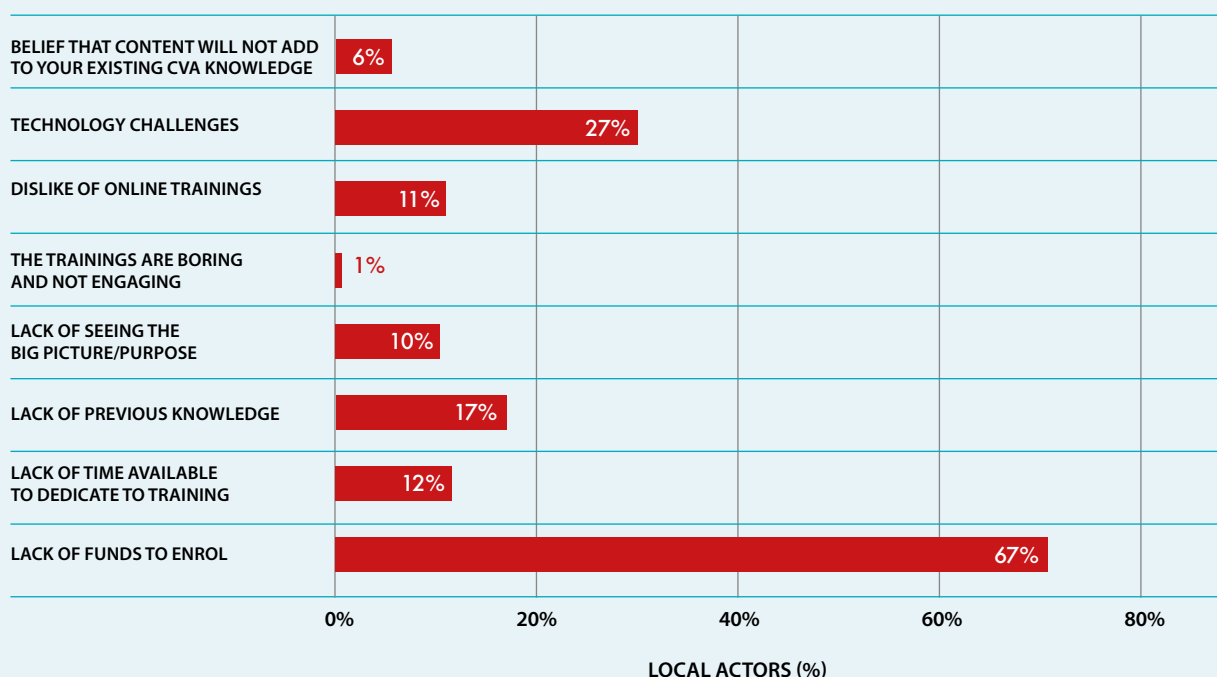
Lack of funds to enrol was identified as a top barrier to accessing CVA training as indicated by 67% of respondents (see Figure 4). Especially for physical trainings, local actors discussed the number of costs associated with a training: "If you're looking at, for instance, if you want to travel, that will be a cost. Hotel stays is another cost. And there is usually some fee [to participate]." These physical trainings are often most accessible to international organisations that have the funding to travel. A solution suggested was "start in country. Of course, it would be a small expense, but more effective and more inclusive." Another suggestion was to "include one or two, or even more of us. Then he or she can train other people when he comes back to the country."

Following lack of funds, 27% of these participants also highlighted technology as an issue. This was a significantly higher challenge in ESAF where 43% cited this factor, compared to only 18% in WCAF and 15% in MENA. During key informant interviews, participants mentioned connectivity and power outages being the main technology issue especially for staff located in more remote locations.

Other problems identified were lack of previous knowledge (17%), lack of time available to dedicate to training (12%) and dislike of online training (11%). Some individuals feared they did not have enough pre-requisite knowledge to attend CVA training. Other local actors shared that it was difficult to prioritise professional development when other job responsibilities appeared more pressing. This was more often associated with remote training where the individual was not physically excused from other tasks to attend a physical training. Dislike of online training is further discussed in subsequent sessions and when identifying barriers to remote learning.

Lack of seeing the big picture/purpose (i.e. not understanding how the training aligns with their role, or organisational development in CVA) was identified by 10% of local actors across all three regions but

FIGURE 4
BARRIERS TO ACCESSING CVA TRAINING OPPORTUNITIES,
BY PERCENTAGE OF LOCAL ACTORS IN MENA, ESAF AND WCAF



slightly higher in ESAF (16%) and MENA (15%). During key informant interviews, local actors highlighted the role management can play in gatekeeping training opportunities. As gatekeepers to these opportunities, local actors suggested individuals in management and administration should have the opportunity to learn more about CALP's offerings and participate in trainings themselves. One actor in ESAF stated, "So I think also you find that the lack of understanding of the role which CVA can play, being very critical. People fail to attend the training when they don't appreciate [the value]. I think it is quite important, if opportunities arise particularly for leadership, people should be taken through CVA training systems as an alternative development approach so that they can use other humanitarian responses beyond what we are used to in local organisations."

In several conversations, local actors raised the topic of localisation in reference to these barriers and the need to make training more accessible, and inclusive to local actors. In Malawi, one organisation suggested most field staff do not have an opportunity for in-depth training external to project implementation. Another participant stated, there is an issue of "leaving out the real people who are delivering. You need to include field staff." Others referenced that many of the certified courses are outside of Africa, which are more accessible to international organisations. An informant from Somalia stated, "Another challenge is there is no certified trainers in our country. The closest are in Kenya which still requires funds and bureaucratic issues to get visas."

6.4.2 DO LOCAL ACTORS HAVE THE (FINANCIAL) RESOURCES TO CONTRIBUTE TO PROFESSIONAL DEVELOPMENT OF STAFF?

Overall, financial resources for professional development to staff remains limited within local organisations. Others mentioned funds for professional development was only available if provided by partners through project budget lines. When asked how their local organisation funds professional development, several local actors highlighted that professionals must pay for these opportunities individually. One stakeholder stated, "Staff may seek training for their own personal development, they may ask for time out and go to attend classes. If it is funded in the project budget, it can be for capacity building. But otherwise we don't provide for professional development. Maybe once in a while, we will have budget for training, but this is very rare."

A few actors highlighted some international or regional level trainings provide scholarships to those in need of financial assistance to attend. However, these spots remain highly competitive, require the submission of lengthy applications and rely on knowledge about these existing opportunities.

6.4.3 WHAT WOULD BE THE BEST WAY OF STRENGTHENING CAPACITY TO DELIVER CASH ASSISTANCE? HOW CAN THIS BE DONE SUSTAINABLY?

Many local actors suggested strengthening capacity to deliver cash assistance relied on increasing local actors' access to more training. One participant stated, "Training our staff is the easiest route to strengthen our capacity." However, these participants recognised that in order for this method of capacity building to be done sustainably, other components needed to be considering including creating institutional processes for professional development, engaging other stakeholders in the promotion of CVA, and increasing the localisation of CVA.

Local actors recognised their need to institutionalise processes for professional development plans in their organisations and more actively use free resources. These guidelines included creating systems to increase accessibility of learning via train-the-trainer models, peer-learning, and intentional use of CALP resources. Other examples included requiring every new staff to attend a CALP training via CALP regardless of their position or title. One individual stated, "We are looking at trainer of trainers, so start supporting other organisational members to do training as one way of doing it and we can actually because we don't necessarily need to do a standalone training. We can train as we go. Take advantage of platforms within the organisation like monthly meetings and share snippets about CVA and what we need to do. And we can make referrals about CALP Network and train people." Another stated, "But we don't use [the resources] in a deliberate way. But I think it is something we need to take on board. We need to encourage our young staff to be updated on these issues. These are resources that are quite handy for all of us."

Cash working groups and clusters were highlighted as central actors in sustainable approach to CVA. One participant stated, "We are a global village. We don't need to reinvent the wheel. Other people have this material, have the links." While another showcased the need to use cash clusters and other partners to exchange information and share experiences on a regular basis: "We also see other capacity building opportunities for trainings by other partners. We forward our staff members to participate." However, this was noted as only applicable where local actors are highly engaged in these communities of practice. In Iraq for instance, the transition of the National Protection Cluster may limit this as an avenue to promoting capacity building. Additionally, in Yemen, one local organisation stated they were the only local agency actively participating in their CWG.

Strategies to engage government officials, and the sector more broadly on the best use of CVA was also valued by local actors as a sustainable way to strengthening CVA. A local actor shared the desire to implement CVA into the organisation's strategic plans but feared "the lack of knowledge [of CVA] by management might affect its uptake." Another participant stated, "To make us be successful to implement we need to make sure all those structures really appreciate and organise trainings for all stakeholders. Not just implementors but government structures. And when we do this, make curriculum general. We need to get their buy in and therefore need to know what cash is." This would help create a unified and united approach to CVA.

Localisation efforts and incorporating local actors in CVA was also highlighted as a key component of strengthening capacity of CVA. One actor shared, "You'll see there has been dominance of international organisations in cash voucher systems. So, they're trying to bring in local actors." This actor continued by explanation these international players assisted their local organisation by introducing them to the CALP Network and the available opportunities. Another participant stated, "We need to make sure this information trickles down to national and local organisations for membership, and share these updates and developments to the membership, and a mailing list with local organisations."

6.4.4 WHAT STEPS CAN CALP TAKE TO BROADEN AND STRENGTHEN ACCESSIBILITY TO CVA LEARNING MATERIALS?

Working with national cash working groups and clusters was seen as integral to the visibility of CALP. Many participants reflected on their knowledge about CALP stemming from recommendations of their international partners and/or local CWGs and cluster leadership. As a result, many actors suggested CALP needs to continue to build relationships with these collective bodies and actively engage with each country's network to promote CALP resources on a local level. One participant shared, "CALP as a network has really spread quite a lot. One thing is the cluster lead in getting this information. They can spread it within the meeting levels." While another individual shared, "to increase visibility, organise some [promotion] webinars and send to as many local, national and international partners to participate. And just create awareness and dialogue with partners in the cash working groups. And liaise with other networks, and local umbrella networks."

Local actors also highlighted the potential for a train-the-trainer model to strengthen the accessibility of CVA materials to local organisations. CALP provides access to all of its facilitator training materials through its Facilitator's Space on Kaya Connect and encourages organisations to use these materials. However, participants did not know about this space and suggested a more formal train-the-trainer process guided by CALP. One participant stated, "There is a need for trainers from different organisations. Other organisations can recognise who are the pre-qualified trainers for CVA. This way the training materials and content is passed on to different organisations and actors in uniform. It helped me move a little bit step ahead and have qualified country trainers. And then they can recommend other partners to use them. And then these other partners can get an opportunity to be trained by CALP. This will help have a uniform understanding of CVA in the country." With more in-country trainings, one actor suggests that organisations can have a "unified methodology with actual placement (practical application following the training) where everyone can be encouraging and emphasising for the people working in the context of [that country]. We could have a countrywide applied approach."

Other actors gave more specific marketing ideas such designing materials that local organisations, INGOs and CWGs could easily share. These ideas included publishing a yearly calendar with available trainings, newsletters, social media posts, a checklist of required trainings as a CVA expert, display information about CALP for local NGO offices, or providing logos on t-shirts and fabrics associated with project delivery. Through the Cash Learning Hub, CALP mentions the use of training calendars, newsletters and other social media platforms as a means to communicate their offering. However, based on the feedback from participants, their responses indicate the need for a few offline promotional materials and direct engagement with local actors to connect them to existing training information.

6.5 QUALITY OF TRAINING

6.5.1 TO WHAT EXTENT, LEARNINGS FROM CVA TRAINING ARE APPLIED AND USED FOR THE DEVELOPMENT AND IMPLEMENTATION OF ACTIVITIES.



Of those who participated in CALP trainings reported that their learnings assisted in the development of CVA concepts and further appreciate the value of CVA as a modality. One actor whose organisation is new to CVA shared, "It helped with understanding of what (CVA) is, and the basics around it. We are better prepared to implement CVA in the future." Another professional from ESAF explained:

"Before the training I didn't appreciate the mechanism [of CVA] and how it works. But then with exposure to the training, my thinking changed in a significant way. I am actually appreciating it more because I am doing the practice. Before doing the market analysis, you naturally think the prices are going to shoot up. But now after giving to people and doing payouts, you notice you can actually build onto the market. So, the value is there to participate. Some of these things you won't appreciate them until you learn the theory and the conceptualisation."

Others highlighted the CALP trainings had informed their ability to complete necessary assessments like market analysis, improving the quality of their implementation. One local actor explained how after the 6-week training she was confident to complete market and needs assessment, and recognise how frequently to repeat the exercises. This information has helped the organisation recognise when CVA is the best modality to implement and how to coordinate with partners. Similarly, another actor highlighted "we used the information to improve the delivery of our programs and enhance the quality."

6.5.2 ARE THERE ANY FACTORS THAT WOULD AFFECT THE PREFERENCES AND NEEDS OF PARTICULAR GROUPS?

Across all three regions, over half of local actors (52%) preferred training options which included an in-person element. This was reflected across regions with high rates of preference for in-person training. Actors in WCAF (52%) and ESAF (47%) also expressed preference for a hybrid option which included in-person theoretical practice (see Figure 5). One local actor said, "In some cases with all the limitations we have these days, online training can be quite handy but I think we all feel that physical trainings offer you more interaction and opportunity to get a better understanding of what is happening in the community." Others pointed to the ability to create more field-based or practical exercises within an in-person modality.

Fully remote self-directed training was the least preferred modalities of local actors with only 10% of individuals selecting this option across the three regions. Significantly, 0% of participants in MENA and only 5% of participants in WCAF selected this option. However, 22% of local actors in ESAF considered this modality. Instead, individuals preferred a fully remote option that was actively facilitated. This preference enables the networking and social interaction that many local actors value in a training opportunity.

Local actors highlighted the key challenges to remote training included technical issues (55%), conflicts with time and other responsibilities (49%), and difficulty engaging with material without a physical instructor present (39%) (see Figure 6). One actor stated, "There are people who are not able to [use technology] or they still have challenges or difficulties doing that. Depending on whom you're targeting for these trainings, you have to take that into consideration that possibly one size may not fit all. Some of the groups may be comfortable with the technology online and what but some may need assistance." Technology issues were lower in MENA (31%) but difficulty engaging with online lessons without an active facilitator was higher in this region with 71% of participants selecting this option.

FIGURE 5
PREFERENCES FOR TRAINING MODALITIES,
BY PERCENTAGE OF LOCAL ACTOR PER REGION

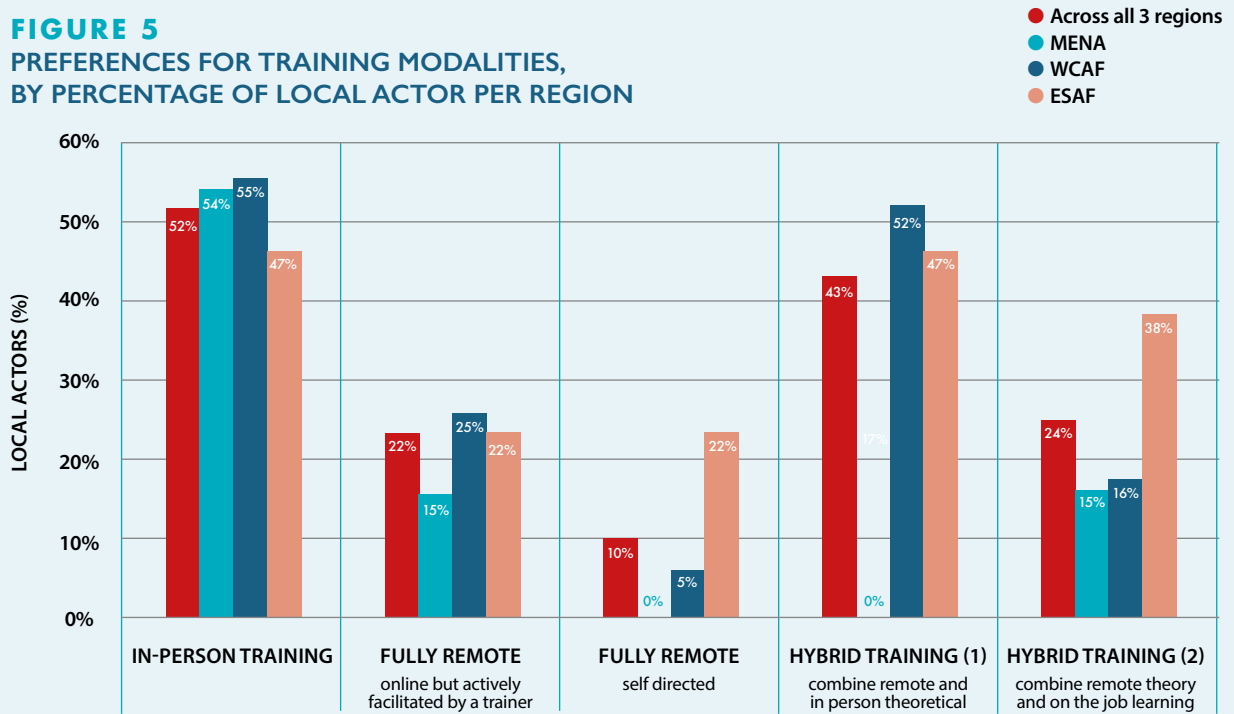
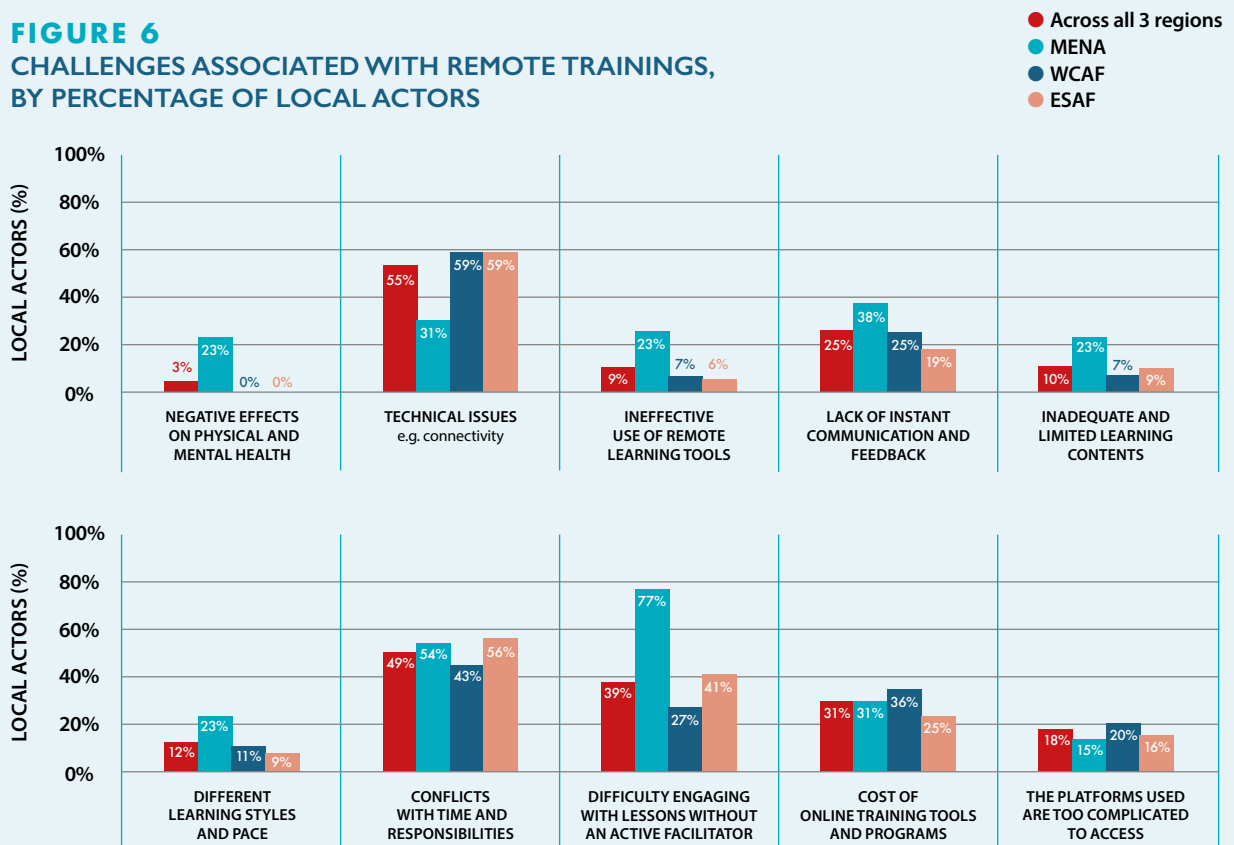


FIGURE 6
CHALLENGES ASSOCIATED WITH REMOTE TRAININGS,
BY PERCENTAGE OF LOCAL ACTORS



7 CONCLUSIONS AND RECOMMENDATIONS

7.1 CONCLUSIONS

CALP remains a valuable source of capacity building opportunities and support for CVA actors. Overall the findings from the key informant interviews provided support and context to the responses provided by local actors within the survey. While local actors across all three regions highlighted the continued need for CVA fundamentals and more topic-specific CVA training, CALP already has created many resources covering these topical areas. Many of these trainings are free via the CALP Cash Learning Hub, while more advanced training opportunities are available through CALP-certified trainers.

Overall participation in CALP trainings remained low, with a higher majority of WCAF actors attending trainings compared to ESAF and MENA. Participants cited barriers such as financial resources and lack of familiarity with existing CALP resources. These findings highlighted a significant gap in CALP's visibility to local actors. Local actors new to CVA as a modality, and/or those without membership to an international network were the least knowledgeable about CALP's resources. These local organisations were heavily reliant on the guidance of partner and donor expertise on CVA. Limited visibility of the extent of CALP's resources was further highlighted in the finding that many participants perceived funding to be the primary reason for not engaging with CALP.

The preference for in-person and actively facilitated workshops showcases an opportunity for CALP to expand the frequency and regional location of these opportunities. However, with limited resources and guidance processes dedicated to capacity building, the fees associated with more participatory style training may continue to be a barrier for many local actors. A hybrid training model may be a modality to mitigate these financial challenges, especially in ESAF and WCAF where close to half of participants expressed interest in training with a combination of remote and in-person facilitation. Engagement with clusters and CWGs may also be a suitable way to assess demand and accessibility for an increase of in-country training sessions. However, as noted in the MENA region, CWGs and cluster coordination groups may not exist in certain countries. In these instances, CALP should identify and engage in collective groups organised by local actors themselves.

Considering the results of this study, CALP can play a significant role in the capacity building and development of CVA knowledge for local actors. With increased visibility, and more direct engagement with local actors, CALP can expand its reach while meeting the needs of these local organisations.

Future research could also contribute to learning for CALP and promoting the visibility of CALP through local networks. Forthcoming approaches could gather more perspectives from actors already actively engaged in CVA, as many actors in this research were relatively new to the implementation of CVA. Additionally, subsequent studies should ensure to capture a greater number of local actors in MENA as the survey participation for this study was much lower in this region compared to ESAF and WCAF. With more representation, successive studies could provide more generalisable findings.

However, this research does contribute to wider trends and conversations about locally-led response and localisation to CVA. In this study, local actors highlighted systematic and structural challenges to capacity building opportunities including limited unrestricted and long-term financing, and lack of organisational learning strategies for professional development. Several other researchers have also reported that local actors' limited access to funding, overhead administrative costs, and the systematic dynamics of international partnership continues to create barriers for the localisation of CVA (Kreidler and Taylor, 2022; de Geoffroy and Grunewald, 2017; Arab Renaissance for Democracy and Development (ARDD), 2020). CALP should also reflect on how learning opportunities can formally and informally support sectoral change and create more inclusive spaces for local actors to contribute to decision-making and leadership within CVA.

7.2 RECOMMENDATIONS

- 01 Expand visibility and marketing of CALP training workshops and learning opportunities, so local organisations are aware of available offerings and the role of CALP Network. This could include sharing information directly to local actors and/or cluster and CWG leads to communicate planned trainings and their estimated dates.
- 02 Increase the frequency and availability of different time slots for the in-person training, so the participants can choose the time that is convenient to them.
- 03 Focus on in-person training or hybrid workshop models that include practical exercises, and which allows for exchange and networking with other CVA professionals.
- 04 Develop a pool of national CVA experts, who can be the focal points for CALP per country, and deliver training workshops on CVA at local and national levels in the assigned countries.
- 05 CALP should consider how their relationship with INGOs and UN member organisations can assist in the visibility and accessibility of resources, while also providing a direct avenue to engaging with local actors.
- 06 CALP should conduct future research on the needs and interests of local actors regarding CVA learning opportunities. The research should account for the length of time scheduling meetings can take, challenges associated with remote data collection from both the perspective of a researcher and participant, and the fact many local actors may face difficulties dedicating time to attend meetings when their budgets are tied to implementation deliverables. An effective strategy would also actively engage with cash working groups and collective spaces led by local actors to identify, organise and facilitate spaces for these stakeholders to voice their opinions. For example, CWGs could assist in organising a focus group during one of their regularly scheduled meetings.

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ANNEX I

DATA COLLECTION TOOLS

FOCUS GROUP DISCUSSION – CALP – LEARNING FROM LOCAL ACTORS

INTRODUCTION

Hi everyone.

Thank you very much for your availability for this call. My name is..... and I am (position, organisation, program) and with me are "x" + (position), "y" (if applicable, position), etc. We are going to have this focus group discussion today as part of a consultancy for the CALP Network. The CALP Network, a global network of over 90 organisations, works to improve the quality and scale of humanitarian CVA through guidance, learning activities, trainings and working groups.

This focus group is part of a consultation process with local actors involved on CVA in different countries across three regions globally. In this context, CALP aims to understand how to improve accessibility and quality of training provided with the objective to develop a training and learning strategy.

The focus group is led by the AAH UK MEAL team, which guarantees the neutrality and objectivity of the information provided. The discussion will last approximately 1 hour and 15 minutes (unless otherwise agreed).

The data collected during the discussion is strictly confidential and will be consolidated into a written report. In cases where quotes or personal reflections are used, the data of the person interviewed will be modified to protect their identity.

Do you agree to participate in the group? And can we record the interview?
(Thanks to the participants for agreeing to participate in the group activity and for their time).
Do you have any questions before we start?

For data collection team: During this exercise it is extremely important:

- Obtain informed consent (either written or recorded) from the participants.
- Take note of the comments and reactions of the group.
- Record the call or meeting to be able to listen to it and analyse it later.
- Do not generate expectations of the call (that is, make it clear that participation does not imply additional assistance).

INTERVIEW DETAILS			
Date		
Place		
Starting time		
Ending time		
Person taking the interview		
NAME OF INTERVIEWEE	SEX	NAME OF THE ORGANISATION REPRESENTING	AUTHORISATION

QUESTIONS

TRAINING NEEDS

- 1 What are the main needs for training and learning on CVA in your organisation? Can you please list and describe them? (JAMBOARD – post it)
- 2 How do you identify and accommodate to cash assistance training needs in your organisation? (JAMBOARD – post it)

TRAINING PARTICIPATION

- 3 What processes and guidelines do you have in place to facilitate CVA training in your organisation? Probe: Annual seminar, yearly dedicated budget for training? (JAMBOARD – post it)
- 4 Have you completed any CALP training in the past 2 years? What were the strengths and weaknesses of this training? (Probe: Added value, any barriers?) (JAMBOARD – post it)
- 5 Have you benefited from cash assistance training from other suppliers/organisations? If so, can you name them?
- 6 Thinking to the last training (any theme) you attended, can you describe what you liked the most, and why you enjoyed it?
- 7 What are the main issues/challenges/barriers to accessing CVA training? What are the potential solutions to these barriers? (JAMBOARD – post it)

RESOURCES TO ACCESS TRAINING

- 8 Does your organisation have the (financial) resources to contribute to professional development of staff? Probe: If not, do the staff pay for their own personal development? (JAMBOARD – post it)
- 9 What would be the best way of strengthening capacity to deliver cash assistance? How can this be done sustainably? How do you find resources to ensure personal development in your organisation? Probe: Any long-term strategy (e.g. long-term agreements) the organisation is adopting to secure funding break out rooms (JAMBOARD – post it)
- 10 What steps can CALP take to broaden and strengthen accessibility to CVA learning materials? How can CALP strengthen its marketing and visibility? Probe: Free bonus training, discount for another course, special offer for consulting break out rooms (JAMBOARD – post it)

QUALITY OF TRAINING

- 11 To what extent, have you applied the learning from previous CVA trainings you have done? (Probe break out rooms (JAMBOARD – post it)
 - 12 Are there any factors that would affect the preferences and needs of particular groups? Probe: Length of the training, content not tailored enough?
 - 13 Is there anything else you would like to add, about cash assistance and voucher trainings that you think CALP should consider in developing their next learning strategy?
-

ONLINE SURVEY

CALP- LEARNING FROM LOCAL ACTORS

The online survey will be designed on Survey monkey or Kobo tool box and it will include the following questions:

1 In which COUNTRY is your organisation based?

2 What is the name of your organisation?

3 Have you completed a CALP training in the past 2 years?

- a. Yes
 - b. No
-

4 If you have completed a training, can you select which training option you used?

(Select all that apply)

- a. In person training
 - b. Online facilitated learning (such as e-learning or training videos)
 - c. Self-directed online training
 - d. Blended learning (combination of self-directed learning, and remote facilitated workshops)
-

5 If you haven't completed a training, can you select the reasons why you didn't participate/complete a CALP training *(select all that apply)*

- a. Funding issues
 - b. Not interesting
 - c. Not knowing about CALP opportunity
 - d. Lack of time to follow a course
 - e. Other
-

6 What are the main issues/challenges/barriers to accessing CVA/cash assistance training?

(Select all that apply)

- a. Lack of funds to enrol
 - b. Lack of time available and focus (e.g. Limited time to dedicate to training)
 - c. Lack of seeing the big picture/purpose (i.e. the training, as outlined, doesn't align with your role and respond to your idea of organisational development)
 - d. The trainings are boring and not engaging
 - e. Dislike online trainings (e.g. not having an instructor physically present)
 - f. Technology challenges (e.g. poor internet and not being familiar with the tools used)
 - g. Belief that the content will not add to your existing knowledge of cash assistance
 - h. Other
-

7 What are your learning preferences for CVA/cash assistance trainings?

- a. In-person training
 - b. Fully remote training (online but actively facilitated by a trainer)
 - c. Fully remote training (self-directed learning)
 - d. Hybrid training (1) – combine remote and in-person theoretical training
 - e. Hybrid training (2) – combine remote theory and on-the-job learning
 - f. Other
-

8 When looking at remote learning, can you please rate the main remote CVA/cash assistance training challenges?

- a. The platforms used are too complicated to access
 - b. Cost of online training tools and programs
 - c. It is difficult to engage with lessons when there is no supervisor or instructor to physically facilitate employee training and monitoring learning progress in real time
 - d. Conflicts with time and responsibilities
 - e. Different learning styles and pace
 - f. Inadequate and limited learning contents
 - g. Lack of instant communication and feedback
 - h. Ineffective use of remote learning tools
 - i. Technical issues (e.g. connectivity)
 - j. Negative effects on physical and mental health
 - k. Other
-

9 Which areas of expertise would you like future training opportunities to focus on?

- a. Social protection and cash assistance
 - b. Market assessment
 - c. Monitoring cash assistance
 - d. Evaluating cash assistance
 - e. Nutrition and cash assistance
 - f. Education and cash assistance
 - g. Food security and cash assistance
 - h. Camp coordination and cash assistance
 - i. MPCA (multi-purpose cash assistance)
 - j. UFA (unconditional food assistance)
 - k. Other
-

10 Is there anything else you think we should consider in regards to improving the accessibility and quality of cash and voucher assistance training in your region? *[text]*

ANNEX 2

LIST OF COUNTRY REPRESENTATION

REGION	COUNTRY	NUMBER OF CONTACTS	NUMBER OF PARTICIPANTS IN KIIS/FGDS	NUMBER OF PARTICIPANTS IN SURVEY	LANGUAGE OF DATA TOOLS
WCAF	BURKINA FASO	10	1	5	FRENCH
WCAF	CAR	6	0	6	FRENCH
WCAF	CAMEROON	33	2	3	FRENCH
WCAF	CHAD	2	1	1	FRENCH
WCAF	DRC	3	0	2	FRENCH
WCAF	MALI	6	2	7	FRENCH
WCAF	MAURITANIA	1	0	0	FRENCH
WCAF	NIGER	25	2	14	FRENCH
WCAF	NIGERIA	6	4	6	ENGLISH
ESAF	BURUNDI	2	1	1	ENGLISH
ESAF	ETHIOPIA	0	-	-	ENGLISH
ESAF	KENYA	0	-	-	ENGLISH
ESAF	MADAGASCAR	0	-	-	FRENCH
ESAF	MALAWI	2	1	1	ENGLISH
ESAF	SOMALIA	15	1	5	ENGLISH
ESAF	SOUTH SUDAN	9	2	4	ENGLISH
ESAF	SUDAN	7	1	5	ENGLISH
ESAF	UGANDA	16	2	4	ENGLISH
ESAF	ZIMBABWE	17	2	12	ENGLISH
MENA	IRAQ	18	2	5	ARABIC
MENA	JORDAN	6	1	0	ARABIC
MENA	LEBANON	13	0	2	ARABIC
MENA	OCCUPIED PALESTINIAN TERRITORIES	16	2	2	ARABIC
MENA	SYRIA	13	2	2	ARABIC
MENA	TURKEY	1	0	0	ENGLISH
MENA	YEMEN	2	1	2	ARABIC

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