

# Assessment of Earthquake Recovery Cash Transfer Programme for Children under Five Years in Nepal

Research Report  
July 2017



Submitted by:  
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## Acknowledgements

NEPAN is grateful to UNICEF Nepal for entrusting us with the responsibility to undertake the assessment of the Earthquake Recovery Cash Transfer Programme (ERCTP) for children aged under five years in Nepal. The purpose of this study was to provide an independent assessment of Phase 2 of the Emergency Cash Transfer Programme (ECTP) as a means of strengthening disaster recovery, reconstruction and resilience for children under five. On behalf of NEPAN, I would like to thank Shaligram Rijal (retired) and Samita Pokhrel of the Ministry of Federal Affairs and Local Development for their continuous support and valuable inputs, specifically regarding district-level coordination and field monitoring. We would also like to acknowledge the continuous professional support and advice provided by UNICEF Nepal's Nicholas Mathers (Cash Transfer Specialist), Thakur Dhakal (Social Policy Specialist) and Dharini Bhuvanendra (Social Policy Officer). Further, we are grateful to Tomoo Hozumi (UNICEF Nepal's Representative) and Maricar Garde (Chief of Social Policy and Economic Analysis) for their valuable comments and leadership. Lastly, my sincere appreciation goes to NEPAN executive members and secretariat for their support and communication leadership during the study.

NEPAN is appreciative of the time and effort the lead authors, Dr Yogendra Bahadur Gurung, Gopal Prasad Tamang and Haley Sanner, have dedicated to this research, including study team training, methodology/questionnaire design, data analysis and report writing. We would also like to acknowledge the expertise of Khem Raj Bhattarai and Shekhar Devkota in assisting with statistical data entry and analysis.

Many thanks are due to fieldwork supervisors and enumerators. They walked for days to interview families in remote locations to gather the primary data for this report. We are also grateful to the District Focal Persons, without whose help we would not have received regular updates about the cash transfer process, or been able to coordinate with local officials and monitor progress.

Lastly, NEPAN appreciates the enthusiastic cooperation of all the beneficiaries who responded to the survey. Without the genuine and generous support of these individuals, the study would not have been possible. We believe the research undertaken will add to the literature and enhance the understanding of cash transfer implementation, while encouraging greater policy and programming efforts to aid in the expansion of the Child Grant and further strengthening of the social protection system.

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## Contents

Acknowledgements .....	ii
List of Graphs .....	v
List of Figures .....	v
List of Tables .....	v
Executive Summary .....	vii
Abbreviations.....	x
1. Introduction.....	1
2. Emergency Recovery Cash Transfer Programme .....	2
2.1 Background.....	2
2.2 Global and National Context of Cash Transfer Programmes .....	3
2.3 UNICEF’s Cash Response to Earthquake Recovery .....	5
3. Objectives of the Independent Assessment .....	9
3.1 Analytical Framework of Independent Assessment .....	10
4. Research Design and Methodology.....	13
4.1 Selection of Study Districts .....	13
4.2 Sampling Methods .....	13
4.3 Characteristics of Sample .....	15
4.4 Original Survey vs Phone Survey .....	17
4.5 Errors in Sampling .....	17
4.6 Questionnaire Development .....	18
4.7 Enumeration Timing .....	18
4.8 Data Management and Analysis .....	19
4.9 Challenges and Limitations of the Study.....	19
5. Results: Household Context and Coverage .....	21
5.1 Characteristics of Respondents.....	21
5.2 Earthquake Recovery Cash Transfer and Birth Registration Coverage.....	25
5.3 Food Security, Markets and Dietary Habits .....	27
6. Results: Behavioural Change Messaging, Social Impacts and Cash Utilization .....	31
6.1 Behavioural Change Messaging .....	31
6.2 Social Impacts.....	32
6.3 Cash Utilization .....	33
7. Results: Information, Registration and Cash Distribution Process .....	35
7.1 Information Distribution .....	35
7.2 Registration Process .....	35
7.3 Cash Distribution Process .....	36
7.4 Problems and Complaints .....	37

8. Discussion .....	39
8.1 Implications of Non-response .....	39
8.2 ERCTP Achievement of Target Objectives .....	39
8.3 ERTCP Outcome Achievement .....	40
9. Conclusion .....	42
9.1 Design and Implementation Learnings .....	42
9.2 Key Recommendations .....	43
10. References .....	45
11. Annexes .....	47

## List of Graphs

Graph 1: Age Distribution of Sample .....	15
Graph 2: Children 0–4 years by Gender (11 Sample Districts).....	15
Graph 3: Sex Ratio by District.....	16
Graph 4: Household Remittance Workers by Household Income.....	22
Graph 5: Household Remittance Earning Before and After the 2015 Earthquakes .....	23
Graph 6: Household Recovery Status by District .....	24
Graph 7: Birth Registration Coverage.....	25
Graph 8: Birth Registration Coverage by District over Time .....	25
Graph 9: ERCTP Coverage by District .....	26
Graph 10: 'Truer' ERCTP Coverage .....	26
Graph 11: Food Security by District .....	27
Graph 12: Perceived Food Price Increase Relative to Survey Enumeration .....	28
Graph 13: Perceived Food Price Increase over Time by Urban/Rural .....	29
Graph 14: Perceived Food Price Stagnation over Time by Urban/Rural .....	29
Graph 15: Perceived Food Price Increase over Time by District .....	30
Graph 16: Proportion of Census Children Mode of Messaging Reception.....	31
Graph 17: Mode of Messaging by District.....	31
Graph 18: Percentage of Households Reported Decreased Social Tension by Annual Household Income .....	32
Graph 19: Cash Expenditure by ERCT Beneficiaries.....	33
Graph 20: Percentage of Households that expended all of the cash by Annual Household Income .....	33
Graph 21: Likelihood of needing to sell assets/borrow money to meet consumption needs in the next three months without the cash transfer by district .....	34
Graph 22: Benefit of cash transfer to household livelihood.....	34
Graph 23: Distance Travelled from Home to Cash Distribution Site .....	37
Graph 24: Wait Time at Cash Distribution Site.....	37
Graph 25: Reasons for Filed Complaints .....	37
Graph 26: Reasons for Not Filing a Complaint .....	38
Graph 27: Reported Wait Problem and Wait Time by District .....	38
Graph 28: Cash Utilization by Households with Full or Partial Expenditure .....	40
Graph 29: Cash Utilization by Household Income .....	40
Graph 30: Usefulness of Nutrition-Conscious Messaging for Mothers/Primary Caregivers..	41
Graph 31: Likelihood of poorest households' need to distress sale assets etc. in next three months without cash.....	41

## List of Figures

Figure 1: Institutional arrangements for the emergency cash transfer through social assistance phase 2.....	7
Figure 2: Theoretical Conceptual Framework.....	11
Figure 3: Map of Sampled Wards .....	13

## List of Tables

Table 1: Main types of cash transfers used in development and post-emergency contexts.....	4
Table 2: Cash distribution dates in Sample VDCs.....	9
Table 3: Distribution of sample size and eligible beneficiaries by district .....	14
Table 4: Census and Additional Children Breakdown.....	16
Table 5: Distribution of Phone Survey Respondents by District.....	17

Table 6: District-wise Distribution Approaches .....	19
Table 7: Caste/Ethnicity of Households .....	21
Table 8: Household's Highest Education Distribution .....	21
Table 9: Distribution and receipt of government housing compensation .....	23
Table 10: Households' Use of Negative Coping Mechanisms .....	28
Table 11: Remembered Content from Messaging .....	32
Table 12: Decision-Making Power Distribution.....	32
Table 13: Reasons for Registered Children not Receiving Cash.....	36
Table 14: Reasons for Non-Registered Children not Receiving Cash.....	36

## Executive Summary

**Background:** In response to the devastating April and May 2015 earthquakes, the Government of Nepal, in cooperation with UNICEF, implemented the Emergency Cash Transfer Programme (ECTP) as a means of meeting the basic consumption needs of vulnerable groups. The first phase, the Emergency Top-up Cash Transfer Programme (ETCTP), from July to November 2015, was directed towards supporting current beneficiaries of established social assistance programmes for vulnerable groups (Dalit children under five years of age, older people, widows/single women, people with disabilities, and endangered ethnic groups).

The second phase, the Earthquake Recovery Cash Transfer Programme (ERCTP), conducted between June 2016 and April 2017, directed benefits more narrowly to households with children under five years of age, not limited by caste or ethnicity. The ERCTP aimed to lay the foundation for increased capacity at the local and national level for the expansion of the Child Grant programme by developing a registry of children under the age of five and strengthening government social assistance mechanisms. It aimed to support the food security, well-being and civil rights of children by providing an unconditional cash transfer of NRs 4,000 (US\$40) to the parents/guardians of each child under five. Eligibility was determined as all children born on or after 10 December 2010 and was limited to two children per mother/guardian. An independent assessment of the programme using a quantitative survey was conducted between September 2016 and April 2017 to examine the programme's coverage, outcomes and implementation effectiveness from the perspective of beneficiaries.

**Methodology:** For the independent assessment survey, 968 eligible individuals were systematically randomly sampled from the beneficiary lists in 44 clusters (wards) across the 11 most earthquake-affected districts. Clusters (wards) were chosen based on probability proportional to size principles. Within each selected cluster, 22 eligible beneficiaries were identified using a systematic random sampling technique. Eligible beneficiaries were sampled using the digitalized data from the Ministry of Federal Affairs and Local Development (MoFALD/UNICEF 2016) census of all children under five in the 11 districts, as well as the ward-level list of additionally registered children (see explanation below in *Key Findings: Design & Implementation Challenges 1*) obtained from the Village Development Committees (VDCs). To account for delays in cash distribution to additionally registered children, these respondents were re-enumerated via phone between February and April 2017 after their wards had reported that cash distribution had been completed. The socio-demographic distribution in the sample is generally reflective of the wider beneficiary population, although the sample shows a slight bias towards boys for unidentified reasons.

### **Key Findings: Programme Delivery and Outcome**

- 1. The ERCTP achieved very high coverage among the target population.** ERCTP coverage, per the agreed registry, was 84 per cent as of April 2017, with 92 per cent in the sample census population and 51 per cent in the additionally registered children population. This reflects that distribution to additionally registered children was delayed or incomplete in many districts at the time of both the original enumeration and phone enumeration. The district-wise data highlights the different approaches to registration and distribution taken in each district. For example, coverage of additional children is highest in Nuwakot (59%) and Dhading (77%), where distribution to both groups of children was carried out at the same time. All recipients received the correct amount of NRs 4,000.
- 2. OUTCOME 1: The majority of children under age five have a birth registration certificate (BRC), surpassing ERCTP's goal.** BRC coverage surpassed the target goal of 90 per cent, as 94 per cent of the sample reported obtaining the document prior to or during the ERCT programming period. Prior to ERCT programming, MoFALD/UNICEF's 2016 census reported that only 48 per cent of children aged under five years had a BRC, thus the 46 per cent increase in BRC obtainment

speaks to the effectiveness of ERCT programming efforts. Registering a child's birth is a critical step towards increasing children's rights as the document facilitates access to citizenship, education, health services and future employment. This level of coverage is positive progress for complementing and strengthening existing government social protection systems.

- 3. OUTCOME 2: The ERCTP fulfilled its objective by making moderate improvements to the self-perceived living conditions of households with children aged under five, especially for the most vulnerable households.** The majority of households perceived the cash transfer to have improved their livelihood somewhat (69%) or a lot (5%). Households that were only partially recovered (somewhat or not at all) were more likely to report that the cash transfer somewhat improved their livelihoods. The cash transfer had the most significant impact on the living conditions of the poorest households (earning under NRs 30,000 annually) as 13 per cent reported a lot of improvement in their livelihoods.
- 4. OUTCOME 3: The ERCTP achieved its objective of improving self-perceived food security by having a moderate impact on increasing a household's ability to provide improved quantity, quality and variety of food for their children.** Over two-thirds (70%) of the beneficiary households reported that the cash made either a lot (7%) or somewhat (63%) of a difference in their ability to better provide food for their children, as measured by at least two of three common indicators (quantity, quality and variety).
- 5. Beneficiaries have mostly positive perceptions of the ERCTP.** The survey found that 80 per cent of respondents perceived the ERCTP as a good initiative and, further, 80 per cent reported that the programme was beneficial for them. Less than 1 per cent perceived the programme to be negative and not beneficial.
- 6. The ERCTP had moderate impact on decreased social tension within households with children aged under five.** More than a quarter (28%) of respondents said the cash transfer decreased tension within the household and no one reported any negative change in household relationships since receiving the cash transfer. Further, the ERCTP did not negatively affect relations within the community.

### **Key Findings: Design and Implementation Challenges**

- 1. All districts completed distribution to census children within one to six months after receipt of funds. However, due in part to some level of confusion and miscommunication between implementing partners, but also reflecting the local context, different approaches were taken by district- and local-level officials regarding the additional children's funding and distribution, resulting in less timely and less efficient delivery.** During ERCTP registration it was brought to light that a substantial number of children were missed by the original census child registry. To mitigate these shortcomings and increase the potential for near universal coverage of eligible children, VDC and municipality officials could submit a list of additional children by mid-July for inclusion in the budgeted funds. Of the sampled population, 77 per cent were census-registered children and 23 per cent were additional children. Makwanpur and Sindhupalchok did not submit their additional children registry on time and therefore these children were deemed ineligible for the ERCTP by the agreed upon registry. The intention was for census children to receive payment first while fund approvals and transfers for additionally registered children were being processed. Additionally registered children would then have received the first payment at a delayed date, but different approaches were taken by different local officials. In some cases, District Development Committees (DDCs) stalled distribution until UNICEF had sent sufficient funds for both census and additional children. In others, cash was distributed until the original tranche of funding ran out. This further complicated and limited synchronisation of cash distribution with the regular social assistance payments.
- 2. Despite high ERCTP coverage within the census child population, registration failures have resulted in continued delays in cash distribution and low coverage of additionally registered**



**children.** The registration shortcomings coupled with different cash distribution approaches at the local level caused significant delays in distribution for both census and additionally registered children. The independent assessment tried to address the delays in distribution to additionally registered children by re-enumerating these non-recipients after their ward had completed distribution. However, this could not be completed in all sampled clusters as (at the time of writing) distribution is still ongoing to additional children in various locations.

- 3. Most beneficiaries had little difficulty or negative repercussions while receiving cash distribution.** Very few major problems were reported during the distribution process. About three-quarters (73%) of sample beneficiaries collected the cash at their local VDC/municipality office. Three-quarters (76%) of respondents reported that it took half a day or less to collect the money and return home. Further, the majority of beneficiaries did not have any travel expenses (87%) or loss of income (86%). Regarding the distribution itself, 75 per cent of sample beneficiaries reported queuing and waiting. However, a little over half of the sample (63%) waited in line for only two hours or less.
- 4. A small number of children deemed ineligible by the agreed child registry received the ERCTP, highlighting limitations in the cash distribution process.** Sixty (unapproved) additionally registered children from Makwanpur and Sindupalchok were sampled, but excluded from analysis of registration and distribution processes. Although these children were deemed ineligible, some still received the grant at the discretion of the VDC officials (22 per cent in Makwanpur and 9 per cent in Sindhupalchok). Therefore, when including this population in coverage analysis, 81 per cent overall (44 per cent within the additional child population) represents a ‘truer’ ERCTP coverage that accounts for registration failures (failure to identify and register additional children in time). Alternatively, the previously mentioned ERCTP coverage represents the coverage per the agreed registry and reflects success of distribution. BRC coverage trends remain relatively unchanged when including this population, thus representing minimal registration implementation failures in that regard.
- 5. Complaint mechanism awareness and utilization was limited.** Awareness of complaint reporting mechanisms was low (33%), but utilized by 11 per cent of the sample – lower awareness but higher utilization than found in the independent assessment of the ETCTP Phase 1. Most of the filed complaints had to do with issues in the registration process, including missing/rejected registration (65%), lack of BRC (12%) or name misprint (3%). Only about two-thirds of the filed complaints were resolved. About 5 per cent of the sample was deterred from complaining because they did not trust the system or that their complaints would be effective. This may be due to the weak grievance and redress mechanisms at the local level, unequal social relations, and the tendency in Nepali society not to complain.
- 6. Despite being moderately effective, behavioural change messaging had limited reach within the sample.** Less than one-fifth of the sampled primary caregivers reported being advised by officials to spend the cash on the child’s well-being or to meet nutritional needs. Further, only 6 per cent of respondents recalled content from nutrition-conscious SMS messages.

### **Key Policy Recommendations**

- Integrate the use of medium-term cash transfers through social assistance programmes into future humanitarian relief responses.
- Use the child registry and learnings from the ERCTP as a means of expanding the Child Grant to all children under five.
- Resolve the registration problems to improve social protection programme coverage in the future.
- Use identified successful modes of information dissemination at the local level to mobilize community networks to increase awareness of social protection mechanisms and encourage positive behaviour change.
- Promote the availability and effectiveness of complaint-reporting procedures.

## Abbreviations

BRC	Birth Registration Certificate
CBS	Central Bureau of Statistics
CDPS	Central Department of Population Studies
CPIU	Central Project Implementation Unit
DDC	District Development Committee
ECE	Early childhood education
ECTP	Emergency Cash Transfer Programme
ERCTP	Earthquake Recovery Cash Transfer Programme
ETCTP	Emergency Top-up Cash Transfer Programme
FGD	Focus group discussion
GoN	Government of Nepal
ILO	International Labour Organization
KII	Key informant interview
M&E	Monitoring and evaluation
MoFALD	Ministry of Federal Affairs and Local Development
MoF	Ministry of Finance
MoHA	Ministry of Home Affairs
NEPAN	Nepal Participatory Action Network
NLSS	National Living Standards Survey
NRCS	Nepal Red Cross Society
ODI	Overseas Development Institute
NPC	National Planning Commission
NRA	National Reconstruction Authority
NRs	Nepali rupees
PDNA	Post Disaster Needs Assessment
SMS	Short message service
UNICEF	United Nations Children's Fund
VDC/M	Village Development Committee/Municipality
WB	World Bank
WFP	World Food Programme

## 1. Introduction

The purpose of this study is to provide an independent assessment of the *Phase 2: Earthquake Recovery Cash Transfer Programme (ERCTP)* as a means of strengthening disaster recovery, reconstruction and resilience for children under five years of age. The analysis is based on quantitative research conducted from July to early-December 2016. The study surveyed 968 households with children under five years who were determined eligible for this unconditional cash transfer. The assessment study geographically covered the 44 Village Development Committees (VDCs)/clusters in the 11 most earthquake-affected districts. Specifically, this document aims to:

- Present the ERCTP objectives and overall design
- Present study objectives, design and results
- Assess the programme's coverage, outcomes and implementation effectiveness from the perspective of beneficiaries.

Evaluation of this programme will aid government agencies in expanding the Child Grant and inform humanitarian stakeholders in developing more shock-responsive social protection for child protection. This report, coupled with the previous report, *Phase 1: The Monitoring Study of Emergency Top-Up Cash Transfers (ETCTP) for Vulnerable Groups* (Gurung et al., 2015), will add to the available data for a comprehensive programme-specific evaluation focused on UNICEF's short-term relief and recovery cash transfer interventions to identify key linkages to the longer-term strategy.

Section 2 describes briefly the current context of Nepal's earthquake recovery efforts and details UNICEF's efforts through the multi-phase ERCTP. Section 3 specifies the objectives and analytical framework of this independent assessment. Section 4 depicts the methodology, including sampling strategies, sample population demographics and analysis techniques. Sections 5 to 7 present the findings from the survey tools. Section 5 discusses respondents' demographics, household livelihoods, ERCT coverage, birth registration certificate (BRC) coverage, food security and child nutrition. Section 6 describes the findings related to behavioural change messaging, social impacts on the household and cash transfer utilization. Section 7 specifies implementation, efficiency and effectiveness of information, registration, and cash distribution processes. Section 8 discusses the implications of non-response on data interpretation as well as how survey findings compare to target objectives and outcomes set in the monitoring and evaluation (M&E) plan (UNICEF, 2016). Section 9 summarizes the findings as successes, challenges and key recommendations. Lastly, the M&E Framework, Sampled Ward List and Enumerator List are available in the Annexes.

## 2. Emergency Recovery Cash Transfer Programme

### 2.1 Background

The 2015 Nepal earthquakes caused widespread destruction of housing and human settlements. According to the Post Disaster Needs Assessment (PDNA), nearly 500,000 houses were destroyed and more than 250,000 houses were partially damaged. There were more than 8,790 casualties and 22,300 injuries. Approximately 250,000 children aged from 6 to 59 months and 135,000 pregnant and lactating women were affected by the earthquakes in 14 districts: Sindhupalchok, Kathmandu, Kavrepalanchok, Bhaktapur, Lalitpur, Makwanpur, Nuwakot, Dhading, Rasuwa, Gorkha, Dolakha, Ramechhap, Sindhuli and Okhaldhunga (NPC, 2015). Although the situation is clearly improving, progress has been slow and in some cases recovery efforts have been ineffective. Due to the long-standing political unrest in the Terai, which resulted in the 2015 unofficial border blockade and fuel shortages across the country, and the 2017 local elections, many aid projects have stalled.

During Phase 1: ETCTP, it was found that 94 per cent of social allowance beneficiary households experienced damage to their house, with 68 per cent of these houses completely destroyed and 30 per cent partially damaged (Gurung et al., 2015). Almost whole communities were forced to live in temporary housing vulnerable to both the 2015 monsoon and oncoming winter. The inadequacy and insecurity of temporary shelters was one of the key concerns of women and children in terms of water and sanitation, food security, education and safety (Gurung et al., 2015).

According to The Asia Foundation, in September 2016, 71 per cent of people in the 11 most affected districts were still living in temporary shelters (The Asia Foundation, 2016). Some of these families moved back into their own house but subsequently returned to temporary shelters after realizing that their houses were unsafe. Of those households with badly damaged infrastructure, 72 per cent had yet to start rebuilding – mostly due to lack of money (89%). Problems are magnified by the price inflation of construction materials and labour, as well as the harsh climate of monsoon and winter. This will continue to pose problems during the 2017 monsoon. According to the NRA website, over two-thirds of these households are still waiting on government funds for rebuilding.<sup>1</sup>

The deadline to complete distribution of the housing installment was initially set for mid-September then adjusted to early October. Both deadlines were missed. By the end of September, 407,004 families (76%) out of 533,182 eligible families in the 11 worst-affected districts had received the first tranche of their NRs. 50,000 housing grant in their bank accounts to use in building the foundations of their new houses. The number of beneficiaries who have withdrawn the grant money is unclear, but of the 407,004 families, only 11,989 have started rebuilding their houses.<sup>2</sup>

Compared to previous assessments, the coverage of beneficiary cards (cards that denote eligibility for government funds) has modestly increased, though community perceptions reveal low satisfaction with government and potentially unfair exclusion for card holders (The Asia Foundation, 2016). The Asia Foundation's 2016 assessment found that the "share of people whose house has been declared fully damaged does not match with the share of those who have been declared eligible for the Rural Housing and Reconstruction Program grant... 15 per cent of people who say their house has been classified as fully damaged say that they have not been declared eligible for the grant." (The Asia Foundation, 2016) These problems relating to eligibility are more profound in more severely-affected districts (The Asia Foundation, 2016).

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<sup>1</sup> National Reconstruction Agency's website, accessed 17 July 2017: <http://nra.gov.np/news/details/179>. At the time of writing, distribution of the Government's housing reconstruction grant is ongoing. For the most up to date data, please refer to the NRA website.

<sup>2</sup> Ibid.

In addition to household shocks, the earthquakes and ensuing landslides affected farmland and therefore livelihoods. As Nepal is a largely agrarian society (76%), farmers experienced widespread loss of food stocks, potential losses in crop productivity and loss of livestock (NPC, 2015; CBS, 2011b). In the most food-insecure areas, 80 per cent of households reported losing their entire food stocks (NPC, 2015). Further, many income earners were forced to take time off work to secure shelter for their family. Among around 64 per cent of ETCTP survey respondents, household members had taken an average of 188 days off work in the two months after the earthquake – an average loss of 3.6 household members’ work over a two-month period (Gurung et al., 2015). Livelihood recovery is an ongoing process and the majority of households (80–89%) only began to recover their various sources of income in late 2016 (The Asia Foundation, 2016).

The post-earthquake assessment indicated that the earthquake triggered changes in food consumption patterns, with significant implications for the nutritional status of children under five and pregnant/lactating women (NPC, 2015). The negative impact on health has compounding consequences as the nutritional status of children in Nepal is already weak and a major concern. At the time of the last Nepal Demographic and Health Survey in 2011 (NDHS), 41 per cent of under-fives were stunted, 11 per cent were wasted, and 29 per cent were underweight (New Era and ICF International, 2012). Increased food insecurity since the earthquake may translate into malnutrition for children in affected areas (Roelen and Karki Chhetri, 2016).

The extra stress on households having to rebuild their homes, recover livelihoods and provide food has, in many cases, resulted in negative coping strategies, such as borrowing money and the accumulation of debt. As of September 2016, it was found that about one-third of affected households had taken a loan in the previous six months while another two-thirds planned to do so in the following three months. This is a dangerous cycle for households in the recovery phase as a history of frequent borrowing is associated with slower livelihood recovery and decreases in food consumption (The Asia Foundation, 2016). Negative consequences are further compounded by external and internal migration patterns, disruption to the education and health care systems and political instability, which increase the difficulties facing vulnerable populations (Pant, 2016).

Although international aid was quick and prolific during the immediate aftermath of the earthquakes, a subsequent decline “does not reflect diminishing needs” of affected households (The Asia Foundation, 2016). Cash transfers have been the most common form of aid, but these had declined to just 8 per cent government and 2 per cent non-government cash receipts between December 2016 and April 2017. Cash transfer receipt has been shown to be a significant indicator of recovery as recipients of government cash are “15 percentage points more likely to move from temporary shelters to a house” (The Asia Foundation, 2016). Many aid agencies, including The Asia Foundation, have encouraged the use of cash transfers or the direct provision of construction materials over loans as more sustainable and effective strategies for rapid livelihood recovery.

## **2.2 Global and National Context of Cash Transfer Programmes**

Social protection is generally defined as a publicly funded combination of social insurance (e.g. contributory forms such as medical care) and social assistance (e.g. non-contributory social security transfers). A broader understanding refers to social protection as the set of public and private policies and programmes aimed at preventing, reducing and eliminating economic and social vulnerabilities to poverty (Rabi et al., 2015a; ILO, 2015). Social protection can be implemented through a variety of means, including: cash transfers; programming for increased access to education, health, water, sanitation and other social support services; and policies promoting equity and non-discrimination in access to services, employment and livelihood (UNICEF, 2012a).

In recent years, humanitarian aid has increasingly been in the form of unconditional cash transfers rather than traditional food and in-kind distribution. In contrast to food and in-kind aid, cash transfers empower and increase the efficacy of the affected population. They are less paternalistic and hierarchical than traditional aid structures and can be used flexibly to meet diverse needs. Additionally, cash stimulates local economies, generates employment/income, and incentivizes local

production, all of which are necessary for recovery and resilience (GHA, 2012; Devereux, 2012). Yet, as seen in Table 1, cash transfers range in flexibility and size, which in turn limits their suitability in various humanitarian and development contexts. Lump sum and small regular payments may be made in tandem, usually as a major single payment for livelihood recovery followed by small, regular and time-bound payments (Farrington and Slater, 2009). The contexts of cash transfers are likely to be more dynamic than illustrated in Figure 1 as recipients’ preferences are likely to change as contexts evolve. Therefore, the conditions attached to cash transfers and the balance between lump sum and small regular payments will need to be tailored to these differing priorities. For example, in post-emergency situations, there is a general progression of instruments that aligns with the needs of affected populations, ranging from unconditional cash or vouchers for short-term relief to meet basic needs to conditional cash or public works for long-term livelihood recovery, reconstruction and resilience.

Table 1: Main types of cash transfers used in development and post-emergency contexts

Type of Instrument	Type of cash transfer	
	Small, regular transfers	Lump sum transfers
<b>Unconditional cash transfers</b>	Often used for payments to those who cannot engage in productive activity (elderly, children, disabled etc.), or as support to other low-income households and as small, limited-term stipends to prevent forced sale of major assets	Sometimes used to meet basic needs and/or provide livelihood protection and recovery, instead of or in addition to regular payments
<b>Conditional cash transfers</b>	Commonly used to ensure e.g. that health and education services are accessed by children	Lump sum transfers frequently used in programmes with shelter, reintegration and livelihood recovery objectives – completion of one stage of construction of a house may be a condition prior to payment for the next stage
<b>Vouchers</b>	Used in a range of developmental contexts, including access to crop and veterinary inputs, and for food rations	Vouchers often distributed on a one-time basis (unless for food rations), but choice of items and vendor restricted to varying degrees
<b>Public works</b>	Cash (or food) provided in development or relief contexts for time spent in public works	Lump sum cash transfer rarely used

Adapted in part from Farrington and Slater (2009)

Social protection through the implementation of cash transfers has been proven to improve child well-being and protect children from rights infringement (Yates et al., 2010). The Government of Nepal (GoN) launched the Child Grant in 2009 for all children under the age of 5 in five Karnali regions and Dalit children nationwide. The Child Grant focuses specifically on improving nutrition and covers up to two children under the age of five from the same mother at a level of NRs 400<sup>3</sup> per child per month. One report indicates that, in practice, households often receive a much lower transfer than the amount they are entitled to (Adhikari et al., 2014). Of the 551,916 children covered by the Child Grant, only 63 per cent of households received the full transfer and, on average, they received only 82 per cent of the amount they were entitled to. The GoN has institutionalized the social allowance protection system that covers 2,152,861 individuals from the most vulnerable populations (senior

<sup>3</sup> In the Budget Speech 2016/17, the Ministry of Finance doubled the Social Security allowance for that fiscal year.

citizens, widows/single women, people with disabilities and endangered ethnic groups). Current (FY 2016/17) payments range from NRs 600 to 2,000 depending on the region and grant, and are distributed monthly.

### **2.3 UNICEF's Cash Response to Earthquake Recovery**

In response to the disproportional impact of the devastating earthquakes on vulnerable populations, the GoN, in cooperation with UNICEF, implemented an Emergency Cash Transfer Programme (ECTP) in 2015 as a means of meeting the basic consumption needs of vulnerable groups and ultimately to increase household resilience. The cash transfer programme implemented short- to medium-term recovery measures in earthquake-affected districts through existing social assistance mechanisms. Following the original proposal, *The Road to Recovery* (Rabi et al., 2015b), the unconditional cash transfers were provided in two tranches accompanied by complementary behaviour change messaging. The first phase – the Emergency Top-up Cash Transfer Programme (ETCTP) – was directed at supporting current beneficiaries of established social assistance programmes for vulnerable groups (Dalit children under five years of age, older people, widows/single women, people with disabilities and endangered ethnic groups). The second phase – the Earthquake Recovery Cash Transfer Programme (ERCTP) – directed benefits only to households with children under five years of age, not limited by caste or ethnicity, as a means of laying the foundation to increase capacity for the expansion of the Child Grant programme by developing a child registry with near universal coverage. Additionally, by implementing through the Department of Civil Registration, under the Ministry of Federal Affairs and Local Development (MoFALD), the multi-phase ERCTP aimed for long-term strengthening of the GoN's established social assistance mechanisms. The ERCTP contributes to UNICEF's post-earthquake country programme Intermediate Result 5.8, sub-objective 3: *Restoration of households' livelihood and resilience through an integrated approach that balances immediate needs and the long-term development path* (UNICEF, 2016).

#### **2.3.1 Phase 1 Emergency Top-Up Cash Transfer Programme – Vulnerable Populations**

In 2015, UNICEF provided approximately US\$14.07 million to the GoN for the implementation of an emergency top-up cash transfer programme to reduce the impact of the April and May 2015 earthquakes and subsequent aftershocks on Nepal's most vulnerable populations. The objective of the programme was to meet the most immediate household expenditure needs and increase resilience to any negative side effects of post-disaster recovery for the most vulnerable populations, including children, affected by the earthquakes.

An emergency cash benefit of NRs 3,000 (US\$30) was provided to the beneficiaries of existing government social assistance programmes in the 19 most earthquake-affected districts as a top up to the regular payments. The ETCTP reached five categories of beneficiary: (1) senior citizens aged 70 years and above or 60 years and above if Dalit; (2) widows and single women aged 60 years and above; (3) people living with disabilities; (4) Dalit children under five years of age; and (5) highly marginalized indigenous ethnic groups. The ETCTP aimed to meet immediate household expenditure needs and to increase household resilience by reducing the use of negative coping mechanisms and behaviours in an extremely challenging post-earthquake situation. By strategically choosing interventions that complemented existing government social assistance mechanisms, UNICEF utilized vertical expansion (increasing the value, number or duration of payments for an existing programme) to increase local government capacity to manage immediate responses for recovery at the household and community levels. The independent assessment survey verified that the majority (93%) of intended beneficiaries – approximately 434,690 people – received the emergency top-up cash transfer of NRs 3,000 and that the cash was most commonly used to meet basic daily needs such as food and medicine, and provide clothing and other household essentials. Despite limited direct targeting of children, the ETCTP indirectly benefited many other children. All districts completed distributions within one to four months after the receipt of funds. However, delays at different levels of implementation resulted in less timely and less efficient delivery than anticipated. Learnings from the ETCTP have been used to both improve the current social allowance systems and to advise the design and implementation of Phase 2 ERCTP.

### 2.3.2 Phase 2 Earthquake Recovery Cash Transfer Programme – Children

During Phase 2 ERTCP, UNICEF and the GoN utilized *horizontal expansion (adding new beneficiaries to a programme, extending geographical coverage, extraordinary enrolment, modification of entitlements or conditions)* to adaptively respond to the needs of 300,000 children with a total transfer of approximately US\$13.5 million. As per the programme M&E Plan (UNICEF, 2016), the overall objective of the ERCTP is to support the food security, well-being and civil rights of children under-five years of age by providing short-term support to their households in 11 earthquake-affected districts and strengthening local government management information systems. To fulfil this objective, the following components were employed:

- (i) Provision of an unconditional cash transfer of NRs 4,000 (US\$40) to the parents/guardians of each child under five (up to a maximum of two children per mother or guardian)
- (ii) Communication of nutrition-conscious messages to promote expenditures that achieve better nutrition for children under-five
- (iii) Technical and financial assistance to local government to administer and record birth registration.

Aligned with the Post Disaster Needs Assessment (PDNA) 2015, the programme covers 11 districts most affected by the earthquake and, at the time of writing, was estimated to have reached 250,000 direct beneficiaries. The districts sampled were: Gorkha, Makwanpur, Kavrepalanchok, Dhading, Nuwakot, Rasuwa, Sindhupalchok, Sindhuli, Ramechhap, Dolakha and Okhaldhunga. Child eligibility was determined as all children born on or after 10 December 2010 and was limited to two children per mother/guardian.

#### Phase 2 Specific Objectives

As further outlined in the M&E Plan (UNICEF, 2016), the programme has three specific objectives. Given certain data collection limitations, indicator measurement will rely on self-perceived changes in food security and living standards, specifically:

- (i) Children's food security is self-perceived by household as improved along at least two common indicators of quantity, quality, and diversity (target: >60% of households)
- (ii) Living conditions of households with children under five is self-perceived as improved (target: >60% of households)
- (iii) Majority of children under five have a birth registration certificate (target: >90%)

For these changes to occur, it is assumed that the majority of eligible children's households are economically poor and credit constrained (i.e. unable to independently meet basic needs) and have been affected by the earthquake; and that the transfer income is adequate to meet their basic needs and is used towards 'positive' ends in line with programme objectives.

#### Phase 2 Expected Outcomes

To achieve the objectives, three outcomes are anticipated in the M&E Plan. First, that *households are better able to meet the basic daily needs of their children under five*. This assumes that markets are functioning, that households use income to benefit the eligible children (both boys and girls), and that there is no elite capture by the community. This outcome is measured with three main indicators:

- ❖ Majority of recipients allocate majority of transfer income to meet basic needs of targeted children, including food, clothing and medicines (target: >50% of recipients / >50% of transfer)
- ❖ Other use of transfer income is mostly towards meeting collective household needs, including essential household items, shelter maintenance and livelihoods (target: >50% of remaining allocation)



- ❖ Mothers/primary caregivers of children have knowledge of nutrition-conscious messages (target: >50% of grant recipients can recall the message).

The second expected outcome is that *households avoid or reduce reliance on coping strategies that are harmful to children*. This assumes that the transfer income is sufficient to offset the gains from harmful coping strategies and is measured using two indicators:

- ❖ The poorest households reduce distress sale of productive assets and accumulation of debt to meet basic consumption (target: 20 per cent of households)
- ❖ Households with a child attending early childhood education (ECE) are less likely to withdraw them in the short term (target: 20 per cent of households).

Because having a birth registration certificate (BRC) is an administrative requirement for receiving the cash grant, the third expected outcome is that *district-level government has an updated and comprehensive civil registry of children under five years of age*. This assumes that the District Development Committee (DDC) has the capacity to digitize the records in a way that can be integrated with the existing management information system. However, UNICEF also provides some support in this area. Indicators for this outcome are:

- ❖ DDCs have collated paper records from all VDC/Municipal Ward Offices (Target: 11 DDCs)
- ❖ DDCs have digitized birth registration records into the management information system (Target: 11 DDCs).

### Phase 2 Implementation

The main concept behind the operational modality (see Figure 1) was that UNICEF funds would be transferred through the existing national MoFALD structures then dispersed at the district level via the DDCs and VDCs/Ms. The ERCTP would engage community-based associations and use communications technologies (radio/SMS) to strengthen programme information flows, including messages to encourage nutrition-conscious cash expenditure, supporting community mobilization and providing additional local-level accountability. Actual implementation deviated from the original plan due to logistical barriers mentioned below. The implementation steps were designed to address the main lessons learned during Phase 1.

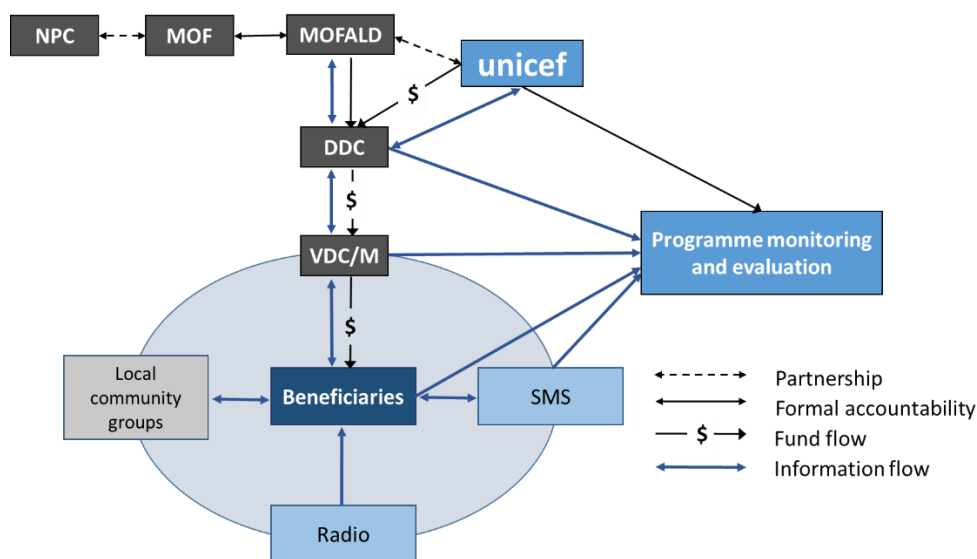


Figure 1: Institutional arrangements for the emergency cash transfer through social assistance phase 2

**Census:** Collecting the census data is critical not only for implementation of the fund transfer and near universal registration but also because it creates a highly reliable source of

secondary data to be used in M&E. To obtain a more comprehensive listing of the under-five population living in the 11 target districts, UNICEF partnered with a research institute, PhD Group, to conduct a census enumeration of children under age five and pregnant women. Census data collection was completed in coordination with the VDCs/Ms and used as the basis for planning, budgeting and supporting near universal registration for the ERCTP. Enumeration was completed between March and April 2016 due to delays in approvals, but after ERCTP registration it was brought to light that a substantial number of children were missed by the original census. Therefore, VDCs/Ms were able to submit a list of additional children by mid-July to be budgeted for in order to limit the exclusion of children. Of the sampled population, 77 per cent were census-registered children and 23 per cent were additional children. Makwanpur and Sindhupalchok did not submit their additional children registry on time. These children were therefore unable to be included in the ERCTP.

**Orientation:** UNICEF hosted an orientation for all district-level officers to ensure higher levels of local support in implementation. District-level orientation sessions were conducted for all VDC secretaries, municipal officials and relevant DDC staff to disseminate key knowledge and programme resources, including implementation guidelines, ERCTP information leaflets and registration cards. Community-based organizations were mobilized for their engagement in recruitment, nutritional messages and local accountability. Orientations were conducted between March and April 2016.

**Fund Transfer:** Districts were first required to settle any outstanding direct cash transfers from Phase 1 of the programme, which was a source of delay in certain districts. Then, after the necessary approvals and directives from the Ministry of Finance (MoF) and MoFALD, funds were transferred directly from UNICEF to each of the 11 DDCs. The DDC transferred and notified the VDC/M of the availability of the funds. The VDC/M then arranged the transfer of the funds to the local level, with distribution in cooperation with the Ward Citizen Forum.

**Information Campaigns:** Distribution of the ERCTP leaflets was planned weekly and implemented by social mobilisers and through local organizations and networks during the week prior to ERCTP registration. The same information was scheduled for broadcast on local FM radio (10 times daily for 7 days) and by SMS to all households that provided a phone number in the census, again during the week prior to registration. Additionally, SMS messaging and radio broadcasts were used to send behavioural-change messages that encouraged nutrition-conscious expenditure of the cash transfer. Information campaigning was expanded into two phases, before and after payment, to include direct SMS messaging in addition to FM radio, leaflets and word of mouth.

**Registration:** Registration for the programme occurred at the VDC/M office and VDC/M officials kept official records of all registered children. The census data was used to verify child eligibility and encourage the participation of all eligible children. For those children who did not already have a BRC, mothers or guardians were requested to obtain one before or when registering for the programme. There was a charge of NRs 50 for birth registrations completed more than three months after the birth and for replacement certificates. Registration varied by district but in a small majority of cases occurred before the cash transfer between February and June 2016. This was UNICEF's initial intention, but 48 per cent of respondents reported registering and receiving the grant simultaneously.

**Payment:** Under normal social assistance procedures, lists of beneficiaries were intended to be publicly displayed at the VDC/M office, and notification of the payment dates made through the VDC social mobilizers, local radio stations and word of mouth. However, public display of the beneficiary list was not found during the monitoring visits. Depending on the local context and the remoteness/accessibility of certain areas, distributions were scheduled at the VDC office or at alternative localities. For beneficiaries who were physically unable to

collect the payment and who did not have a proxy, VDC offices arranged for door-to-door delivery. DDCs were requested to ensure that displaced populations could access the programme either in their current residence or the VDC of origin. Payment of the cash transfer for children under five years was encouraged to occur at the same time as the regular social security payments where possible as a cost-effective measure that strengthened existing systems. Cash transfer recipients (mothers or caregivers) were requested to bring the programme registration card at the time of distribution. Upon payment receipt, the VDC/M registration list and the programme registration were completed and signed accordingly. Due to competing priorities at the local level, VDCs/Ms arranged dates favourable to them, thus delaying both registration and payment processes. The majority of DDCs received UNICEF funds after mid-July 2016, but initial delays in approvals and fund transfers followed, resulting in varied dates of transfer completion at the beneficiary level. Payment for census children occurred between late June and the third week of November 2016, while additionally registered children received payments between January and February 2017 and, at the time of writing, this was still ongoing (see Table 2). Despite the intention for the cash transfer to occur simultaneously with the social allowance payment, it did not necessarily work as such. As the majority of eligible beneficiaries were not already registered for the social allowance payments, registration shortcomings caused delays to cash distribution, thus making it hard for local officials to implement alongside the original Child Grant payments.

Table 2: Cash distribution dates in Sample VDCs

District	Cash distribution dates in Sample VDCs	
	For census (2016) children and distribution in 2016	For additional children
Dhading	18–26 September (4 VDCs), 17 October (1 VDC)	January 2017 (4 VDC/Ms)
Okhaldhunga	29 July (1 VDC) and 22 August (1 VDC)	February 2017 (1 VDC)
Nuwakot	2–29 October (4 VDCs)	January 2017 (4 VDC/Ms)
Ramechhap	20 July (1 VDC), 20–21 August (2 VDCs), 14 October (1 VDC)	February 2017 (3 VDCs)
Kavrepalanchok	2–29 June (3 VDCs), 23 July (1 VDC), 20 September (1 VDC)	February 2017 (4 VDC/Ms)
Sindhupalchok	4–30 September (all 4 VDCs)	Not officially registered
Gorkha	5–30 July (2 VDCs) and 1 September (1 VDC)	N/A
Makwanpur	11–29 September (4 VDCs), 26 October (1 VDC) and 22 November (1 VDC)	Not officially registered
Dolakha	1 October (1 VDC), 5–12 November (2 VDCs)	January 2017 (2 VDCs)
Sindhuli	1–22 July (all 5 VDCs)	N/A
Rasuwa	26 June (1 VDC)	January 2017 (1 VDC)

### 3. Objectives of the Independent Assessment

This independent assessment evaluates the ERTCP's effectiveness in achieving the above objectives by assessing the processes and outcomes from the beneficiary perspective to ultimately continue to further the disaster resilience of households with young children. The primary objectives are as follows:

1. Assess beneficiary households' livelihoods, food security and childcare supports
2. Verify programme coverage, including cash transfer receipt and beneficiary registration
3. Investigate experience and perceptions of programme, including information campaigns, registration, distribution and grievances
4. Use stakeholder feedback to inform necessary improvements to and expansion of government social protection programmes for children.

This study collected data regarding household characteristics, cash utilization, coverage, delivery, and information programming to both draw conclusions regarding short-term impacts on household food security, nutrition and livelihood recovery as well as to determine the effectiveness, efficiency and coordination of implementing partners. To achieve these objectives and draw valid conclusions, the study's evaluation tools were designed based on the following overarching evaluation questions.

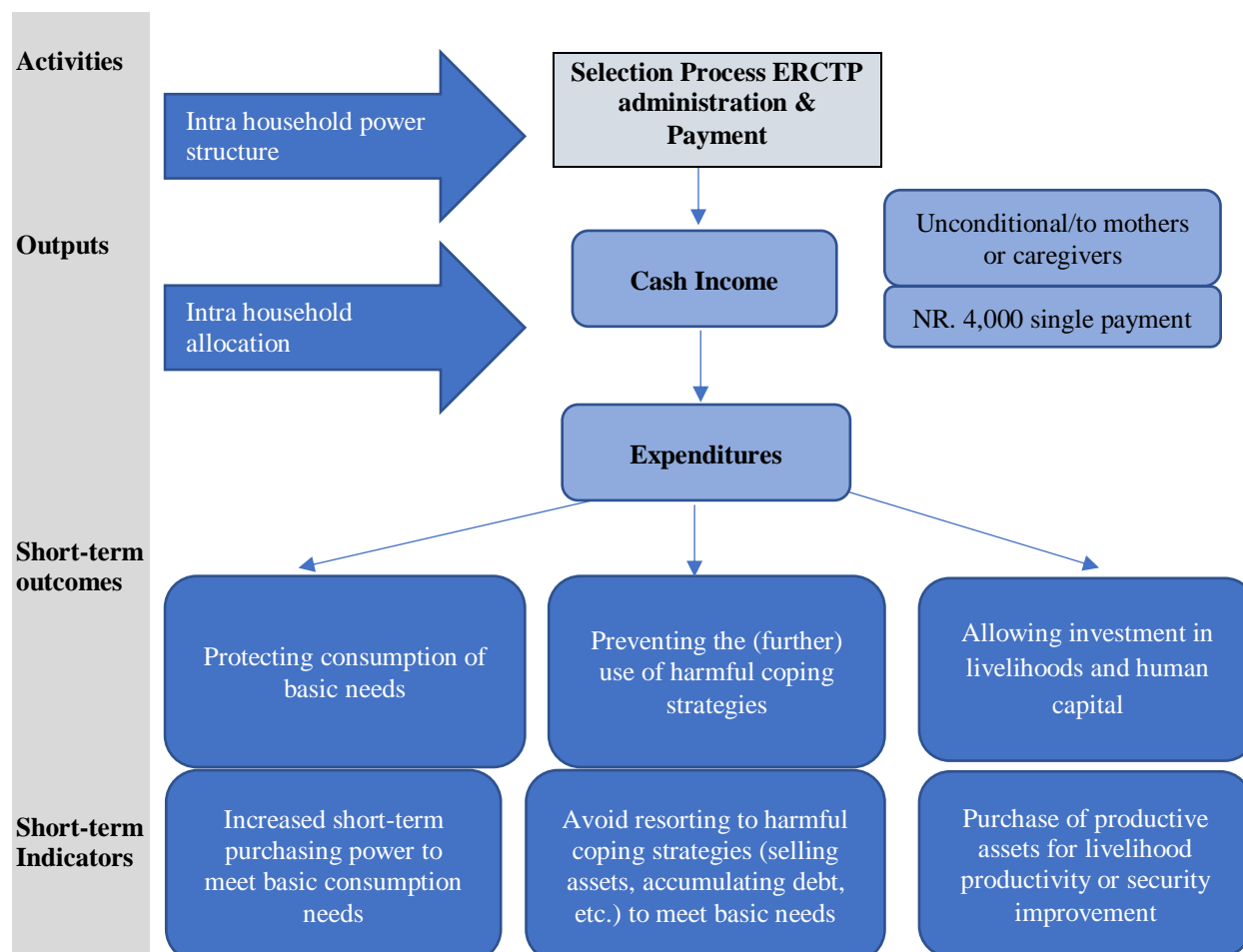
- ❖ How has the ERCTP programme impacted beneficiary households, their livelihoods and food security status? Has the cash been spent for the intended purpose in relation to short/medium-term relief and recovery?
- ❖ How effective are targeting procedures of the ERCTP? Are eligible households with children under age five reached by the cash transfer?
- ❖ What difficulties did beneficiaries encounter in accessing the cash grant? And what were the avenues for complaints mitigation in terms of grievances and communication mechanisms?
- ❖ What was the communication strategy for the ERCTP? How effective were the communication mechanisms? Are they useful, i.e. did households gain additional nutritional information?
- ❖ To what extent was cash preferred and how has it contributed towards improving the speed of response?

### **3.1 Analytical Framework of Independent Assessment**

The analytical framework of this assessment was designed to provide key insights on the indicators outlined in the M&E Framework (see above in Section 2.3.2; Annex 1). Cash transfers support poor and economically vulnerable households, especially those affected by shocks, in three main ways: protecting consumption to meet basic needs ('immediate relief' in the case of disaster); preventing the (further) use of harmful coping strategies; and allowing investment in livelihoods and human capital (UNICEF, 2016). Substantial evidence shows that cash transfers lead to a range of first, second and third order effects on households and children that are largely positive (Gurung et al., 2015). This study verifies these assumptions to an extent but mostly uses these assumptions as a basis for conclusions regarding the impact and effectiveness of the ERCTP, considering the nuances of geographical context and target population. As ambiguity can cloud outcomes and affected populations, this study has theorized the range and channels of measurable effects and intended outcomes on child households, as seen in Figure 2. Further, distribution of cash to mothers may directly increase women's control over resources and decision-making power, adding to increased resilience and benefits for the under-five child population.

## Theory of Change: How does ERCTP increase benefits for households with children under five?

Figure 2: Theoretical Conceptual Framework



Source: Adapted from UNICEF, 2012b; UNICEF, 2016

First, cash increases household income which increases their purchasing power to meet their immediate needs, whether that is food security, shelter, medicine or education, thus integrating a range of potential investments in physical, social and human capital assets that can generate future income and enhance livelihoods. The assumption is that beneficiaries know their household's specific needs best and that money will enable recipients to change their behaviour to adapt to these needs. To guide recipients towards more beneficial purchases, complementary behaviour change messaging is aimed at encouraging cash to be spent on food products that increase the nutrition of young children and lactating mothers. Current deprivation of livelihood essentials may affect the extent to which recipients deviate from their usual purchasing habits. For example, if the household lacks enough food to sufficiently feed members, then additional cash is unlikely to incentivize them to increase the quality of food but will enable them to feed more members.

Second, targeting children under age five strengthens their households to provide enabling environments for child development. When households are better able to meet their basic needs they can avoid resorting to harmful coping strategies such as sale of productive assets, engagement in high-risk employment and accumulation of debt. For children under five specifically, additional income can be used to cover the direct costs of early childhood and pre-primary education (fees, transportation, etc.) and/or prevent family separation by counteracting the forces that lead to child labour and trafficking.

Third, prevailing social norms and intra-household decision-making dynamics will shape who determines cash utilization and beneficiaries (intended or unintended). The GoN has established the mother as the primary recipient of the Child Grant, attempting to directly increase women's control over resources, knowledge and decision-making power within the traditional patriarchal household. Yet, recent evidence suggests that fathers have also collected payments, potentially limiting the intended outcome of women's empowerment (Hagen-Zanker et al., 2015). The underlying assumption is that children will benefit more directly from the cash expenditures if the mother has more control over household spending. It is also critical to consider the potential negative consequences that recipients could face within their household or community. Evidence suggests that tension can be caused within communities (due to real or perceived targeting inequities) and within households (due to power imbalances over control of resources) (Rabi et al., 2015a). This study has therefore included self-reported measures of intra-household and community tension that resulted after the cash transfer.

## 4. Research Design and Methodology

This study is based on a quantitative survey that gathered information relating to the cash transfer process, coverage, utilization and impact. The survey was conducted in 11 districts from July to early December 2016. The questionnaire focused on quantitative data regarding socio-demographics, livelihood status, food security and childcare activities. It also gathered perceptions and experiences of the ERCTP, including the availability of information, registration process, cash distribution and grievances. Documents and publications related to cash transfer were reviewed to supplement the results.

### 4.1 Selection of Study Districts

All 11 most-affected districts were included in the sample.

**Western Hills:** *Gorkha*

**Eastern Hills:** *Okhaldhunga*

**Central Region Terai/Hills:** *Makwanpur, Kavrepalanchok, Dhading, Nuwakot, Rasuwa, Sindhupalchok, Sindhuli, Ramechhap, Dolakha.*

**Target group:** All children born on or after 1 December 2010 residing in the 11 districts – minimum two children per mother or primary caregiver, aligned with the GoN's Child Grant policy.

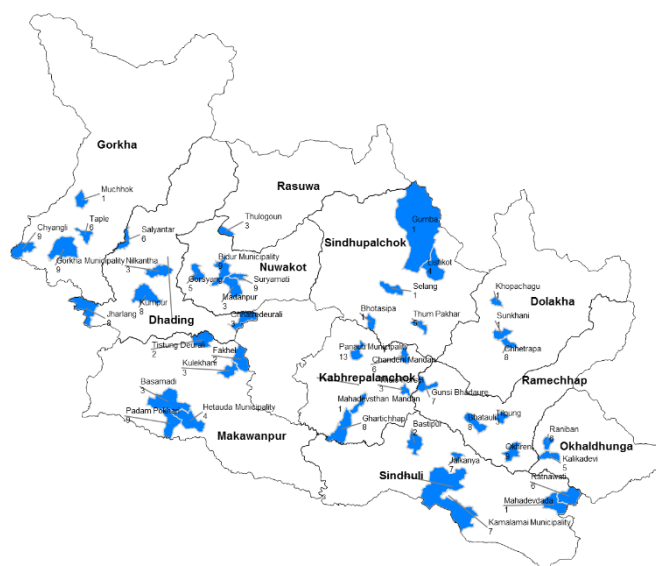


Figure 3: Map of Sampled Wards

### 4.2 Sampling Methods

The sample was selected based on a two-tier random sampling method. First, a systematic random sampling technique was used to identify 44 clusters with 22 eligible beneficiaries per cluster. In this process, the primary sampling unit (PSU) was wards and the secondary sampling unit was eligible beneficiary households of children under five (born on or after 1 December 2010). Clusters were chosen by systematically arranging the 11 districts alphabetically then, within each district, VDCs/Ms were arranged alphabetically, followed by wards in ascending order. As seen in Figure 3, 44 clusters (wards) were chosen based on the probability proportional to size (PPS) principles. Of 44 sampled clusters, 13 (30%) are categorized as urban,<sup>4</sup> with Makwanpur having the highest proportion of urban clusters (67 per cent of sampled population from the district).

Second, within each selected cluster, 22 eligible beneficiaries were identified using the systematic random sampling technique to meet the predetermined sample size of 968. This PSU was determined based on the 20 subject PSUs used in Demographic and Household Survey methodology, plus two additional subjects to increase the sample size to include additionally registered children. Eligible beneficiaries were sampled using the digitalized data from the MoFALD/UNICEF 2016 census of all children under five in the 11 districts, as well as the ward-level list of additionally registered<sup>5</sup> children obtained from the VDC. This ensured that both census registered and additionally registered children were surveyed, as their experiences were expected to vary and thus provide valuable insight into the implementation, coverage and impact of the ERCTP. In cases where sampled clusters were too small

<sup>4</sup> The urban-rural split was determined by the most current VDC/M categorizations of the sample clusters. It should be noted that some sampled clusters were categorized as VDCs during sampling and Ms during analysis (*Bhatauli, Okhreni, Bhotasipa, Nilkantha, Basamadi, Padampokhari, Tistung Deurali*).

<sup>5</sup> UNICEF extended registration of eligible children to increase coverage of the population. DDC and VDC officials were given a final submission date, after which no additional registrations would be accepted. Two districts, Sindhupalchok and Makwanpur, failed to meet this deadline and therefore received no additional funding for additionally registered children.

and did not have 22 eligible households, an adjoining ward was merged and the two were treated as a single cluster. In this way, the assessment study drew a representative sample of 968 respondents from the 11 study districts for the survey, as listed below in Table 3. As the sample population was underage, the respondents were the sampled child's primary caregiver.

Table 3: Distribution of sample size and eligible beneficiaries by district

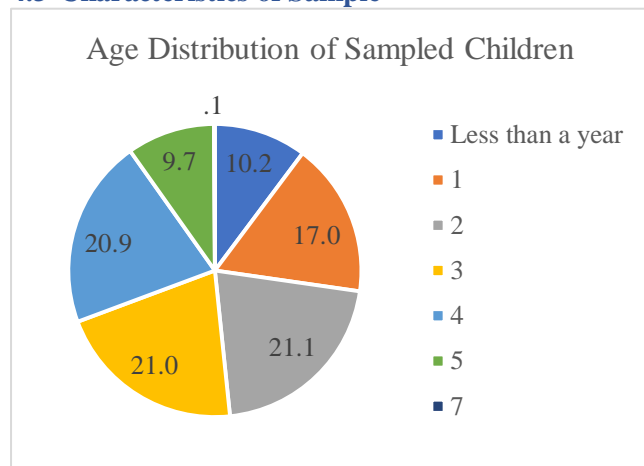
	MoFALD/ UNICEF Census 2016	Percentage of Total Population in 11 Districts (CBS 2011a)	No. of VDCs Sampled	Sampled Children (Weighted by Pop.)	Percentage of Sampled Population	No. of Non- Responses Replaced	Percenta ge of Sample Replaced
Okhaldhunga	16,351	5.6%	2	44	4.5%	3	6.8%
Sindhuli	31,657	10.9%	5	110	11.4%	7	6.4%
Ramechhap	21,486	7.4%	4	88	9.1%	40	45.5%
Dolakha	21,451	7.4%	3	66	6.8%	6	9.1%
Sindhupalchok	32,285	11.1%	5	110	11.4%	27	24.5%
Kavrepalanchok	34,713	11.9%	5	110	11.4%	15	13.6%
Nuwakot	28,220	9.7%	4	88	9.1%	20	22.7%
Rasuwa	4,175	1.4%	1	22	2.3%	0	0.0%
Dhading	36,817	12.7%	5	110	11.4%	32	29.1%
Makwanpur	36,673	12.6%	6	132	13.6%	22	16.7%
Gorkha	27,172	9.3%	4	88	9.1%	9	10.2%
Total	291,000	100.0%	44	968	100.0%	181	18.7%

#### 4.2.1 Phone Survey to Account for Delayed Distribution

During the assessment survey, 251 children (30%) – 83 census and 168 additional, including Makwanpur and Sindhupalchok – were eligible for cash payments but had yet to receive payment due to late registration and the two-tiered payment process. These children were scheduled to receive the cash transfer after the initial period of enumeration. Since this cohort represented a significant portion of the total sampled population, without their responses our data would have been incomplete and not represented true coverage. Given the spread of locations across the 11 districts, it was neither cost-effective nor an efficient use of time to re-enumerate these individuals in the field. NEPAN therefore conducted a follow-up phone survey with mothers and primary caregivers in January and February 2017, having verified that the sampled cluster had completed the second round of cash distribution to the additionally registered children. A total of 214 non-recipients, all from the original enumeration (75 census and 139 additional), had recorded phone numbers, 37 of which were incorrect or inactive. Responses from the phone survey were disaggregated from the initial survey results to verify any key characteristic differences between the populations' responses. The responses were then integrated into the original survey data so that descriptive statistics and cross-tabulation analysis presented the most accurate coverage, distribution and utilization results.



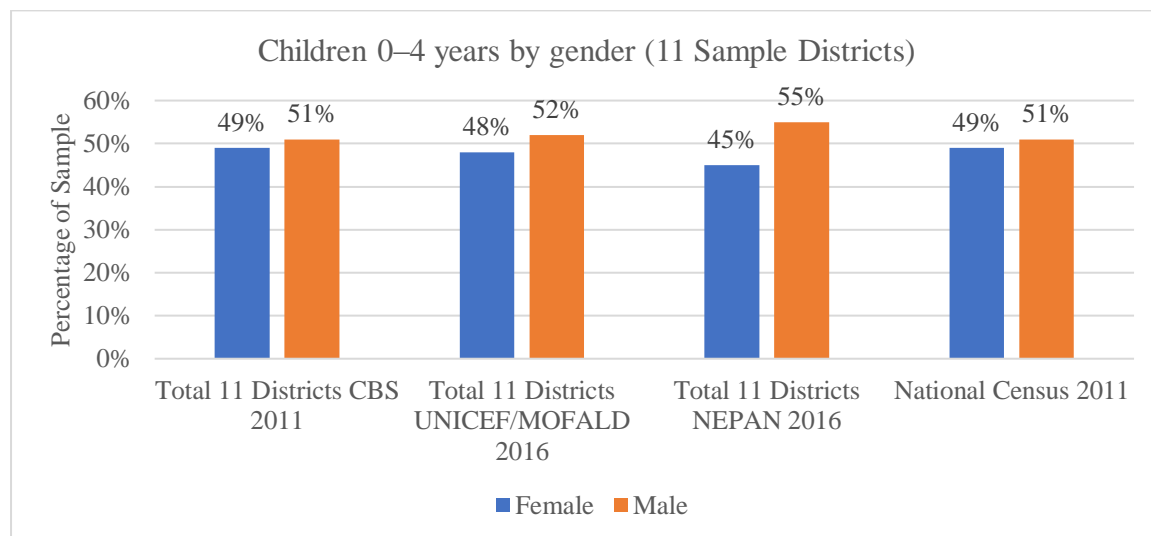
### 4.3 Characteristics of Sample



Graph 1: Age Distribution of Sample

As Graph 1 shows, age distribution is relatively even, with an average age of 2.5 years. As the cut-off date for eligibility was a birthday on or after 1 December 2010, the one child aged 7 was determined not to be eligible.<sup>6</sup> This child was included in the UNICEF sampling list due to an error in collection. This age distribution helps to explain the 67 per cent attendance in early childhood development programmes in the previous year as these services are offered to children aged three to five. This figure mirrors the national gross enrolment rate of 66 per cent from 2009–2010 (GoN, 2009). This attendance rate supports the prioritization of children’s education in

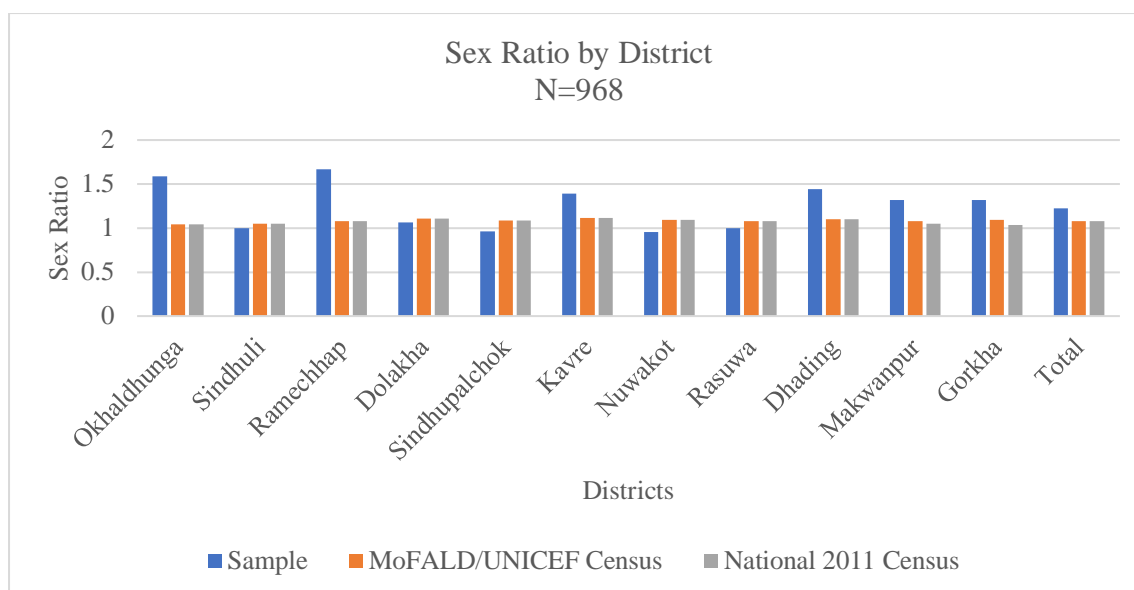
expected household spending for the next three months –16 per cent as top priority and 41 per cent as one of the top three priorities. ECE attendance is proportionally equal if not higher within the female sampled population, except in Rasuwa and Sindhupalchok, and Muslims are the only caste/ethnic group to have a drastically lower enrolment rate (33%), although the sample size from this ethnic group is too small to draw any real conclusions (n=6). Regionally, attendance is proportionally similar, except in Rasuwa (20%) and Dolakha (48%), which could be attributed to the fact that these districts have no urban sampled clusters. Only 3 per cent of the sampled children were reported to have a mental or physical disability.



Graph 2: Children 0–4 years by Gender (11 Sample Districts)

The most notable difference between the sampled child population and both MoFALD/UNICEF’s census and the 2011 National Census populations (aged 0–4) is the sex distribution. As noted in Graphs 2 and 3, the average sex ratio is higher in the sample, 1.22 (55% males), compared to 1.08 (51%/52% males). Further breaking down the sample by district, Ramechhap (1.67), Okhaldhunga (1.59), Dhading (1.44), Kavrepalanchok (1.39), Gorkha (1.32) and Makwanpur (1.32) all have higher proportional representation of males than the other sources. This stronger overall male bias must be taken into consideration when generalizing results.

<sup>6</sup> Nepali calendar birth dates were checked against the corresponding English calendar date for the older sampled children to ensure eligibility.



Graph 3: Sex Ratio by District

#### 4.3.1 Census Children vs. Additional Children

Of the sampled population, 77 per cent (n=744) are census registered children and 23 per cent (n=224) are additionally registered children. As seen in Table 4, census children were slightly under-sampled compared proportionally to UNICEF/MoFALD's total figures for census children (85%) and submitted additionally registered children (15%). This makes sense based on the sampling methodology, which gave some sampling preference to additionally registered children. As noted earlier, Sindhupalchok and Makwanpur submitted their additional register late and therefore the 60 (23 and 37 respectively) sampled additionally registered children should not be included in the analysis of registry, process and distribution. The following demographic statistics do not include these children. When removing these children from the sample population, 82 per cent of the sample were census children and 18 per cent were additionally registered.

Table 4: Census and Additional Children Breakdown

Districts	Sample					UNICEF/MoFALD 2016				
	Census		Additional		Total	Census		Additional		Total
	N	%	N	%	N	N	%	N	%	N
Okhaldhunga	41	93.2%	3	6.8%	44	16,351	89.7%	1884	10.3%	18,235
Sindhuli	88	80.0%	22	20.0%	110	33,145	80.3%	8113	19.7%	41,258
Ramechhap	60	68.2%	28	31.8%	88	22,911	78.0%	6480	22.0%	29,391
Dolakha	57	86.4%	9	13.6%	66	21,317	78.0%	6018	22.0%	27,335
Sindhupalchok	87	79.1%	23	20.9%	110	31,556	100.0%	0	0.0%	31,556
Kavrepalanchok	82	74.5%	28	25.5%	110	34,713	82.2%	7538	17.8%	42,251
Nuwakot	59	67.0%	29	33.0%	88	28,220	72.4%	10771	27.6%	38,991
Rasuwa	14	63.6%	8	36.4%	22	4,175	68.7%	1903	31.3%	6,078
Dhading	97	88.2%	13	11.8%	110	36,684	90.1%	4018	9.9%	40,702
Makwanpur	95	72.0%	37	28.0%	132	41,115	100.0%	0	0.0%	41,115
Gorkha	64	72.7%	24	27.3%	88	27,172	80.0%	6792	20.0%	33,964
Total	744	76.9%	224	23.1%	968	297,359	84.7%	53517	15.3%	350,876

Further, the census and additionally registered sampled populations differed in age distribution as there were proportionally more children aged under one year (14% vs. 9%) and children aged four

(28% vs. 19%) among additionally-registered children when compared to the sampled census population. This could be explained by new births and potential confusion over the age eligibility for the older children. The sampled additionally registered children had proportionally higher representation of Brahmin-Chhetri (36%) when compared to the census children (28%). Lastly, the male bias present in the overall sample extends to the additionally registered sample population (sex ratio of 1.16), but to a lesser degree than the total sample. Note, the above analysis holds true when the Sindhupalchok and Makwanpur additional children are included as well.

#### 4.4 Original Survey vs Phone Survey

Of the 251 eligible ERCT non-recipients sampled in the original enumeration, 63 (25%) from eight districts were re-enumerated by phone. Table 5 (below) shows the percentage of non-recipients who were re-interviewed during the phone survey by district. Phone survey enumeration coverage was very high in Rasuwa (100%), Nuwakot (87%) and Dolakha (75%). At the time of writing, the cash transfer distribution process is still ongoing in the remaining five districts and was therefore not included in the phone survey, which explains the low overall enumeration coverage.

Table 5: Distribution of Phone Survey Respondents by District

Districts	Total No. of Non-Recipients Sampled in the Phone Survey	Percent of Total Sample of Non-recipients (N=251)
Okhaldhunga	2	40%
Sindhuli		
Ramechhap	12	39%
Dolakha	6	75%
Sindhupalchok		
Kavrepalanchok	5	23%
Nuwakot	18	78%
Rasuwa	4	100%
Dhading	6	46%
Makwanpur	10	20%
Gorkha		
<b>Total</b>	<b>63</b>	<b>25%</b>

Respondents from the phone survey were more likely to be male (37%) compared to the field enumeration (30%). Demographically, the phone survey respondent households were more likely to be Brahmin-Chhetri (50% vs. 20%) and urban-dwelling (40% vs. 30%) compared to the total field sample population.

#### 4.5 Errors in Sampling

Replacement methodology, as follows, was determined before enumerators departed for the field to ensure systematic surveying. When a sampled child and his or her primary guardian declined to participate, or was not found after three separate visits to the household, then a new child was chosen based on the ordering of the original sampling list for that ward (the replacement child's position was directly after the originally sampled child). Likewise, if the replacement child declined to participate or was also not found after three attempts, then the second replacement child was the child whose positioning was directly before the original child on the sampling list.

According to the enumerator's original sampling list, 181 children were replaced, with Ramechhap (46%) and Dhading (29%) experiencing the highest rates of replacement (as shown in Table 3 in Section 4.2 above). The main reasons for replacement included:

- i) household had migrated to unspecified location in Kathmandu Valley (46%)
- ii) household lives six months or more in other districts (18%)
- iii) family members/primary caregivers were away during all three enumeration attempts (18%)
- iv) children could not be found during enumeration due to incorrect or missing information (child's name/age, parent's name, address or other identifying information) (12%). This posed a greater problem in urban areas, despite the use of snowballing and door-to-door visits
- v) household lives six months in village and six months in district headquarters or had migrated to India or did not have a birth certificate (6%).

These reasons were cross-checked during monitoring visits as errors in MoFALD/UNICEF's census collection or incorrect data entry of identifying factors and migration were noted frequently. For example, DDC officials from Sindhupalchok and Makwanpur indicated that there might be missing or incorrectly entered data that was overlooked in the centrally managed research collection process. In another example, officials from Hetauda Sub-Metropolitan had 11,609 eligible child beneficiaries on the MoFALD/UNICEF census, yet officials reported that 40 per cent of these children were estimated to be missing or unidentifiable. Identifying the target group was constrained by a lack of complete data in the MoFALD/UNICEF census, despite providing a more up-to-date and inclusive database of children under five when compared to the National Census. As mentioned above, to account for these limitations, UNICEF gave DDC officials a deadline of July 2016 to submit a list of additional eligible beneficiary children. Some officials estimated that around 10 per cent of children reported as 'additional' were counted previously during the census enumeration due to miscommunication between caregivers or fear of exclusion. There were no reconciliation practices or systems to control this problem as UNICEF's main concern was achieving as close to full coverage of data for the total under five child population in these districts as possible.

#### **4.6 Questionnaire Development**

The quantitative survey questionnaire was designed as a collaborative effort between UNICEF and NEPAN, through the involvement of UNICEF's cash transfer specialist, NEPAN's project team and NEPAN's study team leaders, to provide a common understanding of the scope of the study. Following the results framework and theory of change described above, the team provided valuable insights on indicator measurement, cross-cutting theme identification and methodology creation. Enumerators received an intensive three-day training course in September 2016 from the UNICEF and NEPAN team to ensure that they were able to accurately and systematically reproduce the intended survey methodology in the field. Enumerators were introduced to the Nepali translation of the questionnaire and each question discussed thoroughly for a unified understanding of procedure and question intention. The team was then sent into the field to pilot the survey tool within the intended target population in Dhulikhel, Kavrepalanchok (a cluster outside the sample) and the study team monitored this fieldwork for both quality of the tool and the enumerators' skills. The reflection session included interactive discussions where study team members and enumerators could share experiences of in-depth probing and lessons learned in field, and to clarify any problems with the survey tool. Based on the lessons learned from the pilot field test, final adjustments were made to the survey tool. A day-long re-orientation programme was conducted with enumerators on 23 September 2016 so that they could be reminded of the survey tools immediately prior to their scheduled field departure.

#### **4.7 Enumeration Timing**

Given delays in the distribution of the cash transfers in various sampled clusters, enumerators were in the field at various intervals between 24 September and 27 November 2016. Enumeration timing varied due to differences in distribution processes and timing within districts/VDCs/Ms. Cash distribution was scheduled to be completed along with the regular Social Security Allowance to utilize the government mechanisms already in place. UNICEF's intention was that census children

would receive the distribution first followed by additional children once UNICEF could send sufficient funds for these children to the DDC. However, due in part to some level of confusion and miscommunication between implementing partners, but also reflecting local context, different approaches were taken by district and local officials regarding the additional children’s funding and distribution. In some locations UNICEF’s intended methodology was followed while, in others, for convenience cash was distributed to census children and additional children at the same time (see Table 6). In some cases, DDCs stalled distribution until UNICEF sent sufficient funds for census and additional children while, in others, cash was distributed until the original tranche of funding ran out.

Table 6: District-wise Distribution Approaches

District	Distribution Approach
Dhading	Together
Dolakha	Separate
Gorkha	Separate
Kavrepalanchok	Separate
Makwanpur	No official additional
Nuwakot	Together
Okhaldhunga	Separate
Ramechhap	Separate
Rasuwa	Separate
Sindhuli	Separate
Sindhupalchok	No official additional

Again, variations in distribution were cross-checked during monitoring visits. For example, in Thumpakhar VDC, Ward No. 5, a sampled cluster of Sindhupalchok, VDC officials reported delays due to confusion regarding a few children included in their census list from other districts (Rukum and Rolpa). In Hetauda Sub-Metropolitan, officials described their initial confusion regarding whether to distribute based on the census list or wait until data on additional had been entered. The latter was difficult to manage as it doubled their normal workload and distracted from other priorities such as social security allowances, recovery efforts and reconstruction. Further, VDC/M officials stated that procedural compliances complicated distribution to additional children, as the additional funds for these children were not transferred to the VDCs/Ms until the settlement of the previous advance. These delays had obvious impacts on enumeration, including requiring enumerators to visit some sampled clusters more than once because distribution was not complete or had yet to begin during their first visit.

#### 4.8 Data Management and Analysis

All completed household questionnaires and observation checklists were manually edited and coded before being entered in the computer and the data digitized using CS-Pro 6.2 software. Before transferring the data into SPSS software for analysis, consistency and range checks were carried out for all the questions. The method of analysis is descriptive, analytical and inferential. Frequency tables, pie charts and bar diagrams for the variables were generated and analyzed. Moreover, to examine the distributional aspects of the cash transfers (registration process, distribution process, utilization of cash), cross tabulations of the various variables per the sex of the beneficiary, living arrangements and household livelihoods, food security and diet, control over resources, behavioural change messages and the feedback system were assessed.

#### 4.9 Challenges and Limitations of the Study

The overall study is limited to operational monitoring of the system through which UNICEF, MoFALD, and VDCs/Ms distributed and accounted for the cash transfer, as well as the circumstances, outcomes and perceptions of beneficiaries. As the timing of distribution varied by district, and due to registration shortcomings, the field enumeration occurred at different times of year. Many of the additional children have yet to receive the cash transfer as, at the time of writing,

distribution is still ongoing. This is a limitation of the data.

While the household survey is statistically representative at the ward level, it is not statistically representative at the district level or total beneficiary population level. Nonetheless, all efforts have been made to ensure proportional representation across the beneficiary groups and to ensure balanced inclusion of VDCs and districts from the entire intervention area. Section 5 will further prove that the socio-demographic distribution in the sample is generally reflective of the wider beneficiary population. Lastly, the scope of the work is limited to early indicators from the initial stage of programme implementation and is not attributable to long-term outcomes and impacts.

## 5. Results: Household Context and Coverage

This section presents the findings from the survey tool related to respondents' demographics, household livelihood, ERCT coverage, birth registration certificate (BRC) coverage, food security and child nutrition.

### 5.1 Characteristics of Respondents

#### 5.1.1 Demographics

Of all respondent households, 71 per cent resided in rural clusters while only 30 per cent resided in urban clusters. The respondents were primary caregivers of the eligible child – 64 per cent mothers, 19 per cent fathers and 17 per cent other guardians. Respondent households were found to be more vulnerable than the average households residing in the 11 sampled districts when comparing sampled data to the 2011 National Census data. Although the

respondent household general caste distribution mirrored the distribution of the total population, the sampled population has a higher proportion of *Disadvantaged Janajatis*, (53%) compared to Census data (14%), as seen in Table 7. Further, the sampled respondent households are on average larger than the general population, 5.9 versus 4.6, with a higher dependency ratio, 0.90 versus 0.69. The higher dependency ratio most likely reflects the fact that the sample population was focused on households with young children. When comparing the highest reported level of education within the household, the sample population is clearly less educated than the general population with 54 per cent having at or below a primary level education (compared to 24 per cent of general population) as seen in Table 8. Mothers and primary caregivers were more likely to be illiterate or without formal schooling (34%) compared to the highest educated in the household and general population, with no significant difference between male and female primary caregivers. But, given that 70 per cent of respondents were female, it is not surprising that 54 per cent of primary caregivers reported that their own level of education was lower than the highest level of education obtained within the household.

Table 7: Caste/Ethnicity of Households

Caste/Ethnicity of Household (11 Districts)		
	Census	Sample
BrahminChhetri	31.1%	29.8%
Disadvantaged Janajatis	14.0%	52.8%
Advantaged Janajatis (Newar, Gurung, Thakali)	44.8%	8.4%
Dalit	8.8%	8.5%
Muslim	0.2%	0.6%
Others	1.0%	0.0%

Table 8: Household's Highest Education Distribution

Household Education (11 Districts)			
	Highest Education Census	Highest Education Sample	Mother or Primary Caregiver's Education
Illiterate	2.5%	6.6%	22.8%
Literate but no formal schooling	2.7%	4.0%	11.1%
Primary level (grade 1-5)	18.9%	43.7%	21.1%
Some Secondary (grade 6-10)	37.0%	30.4%	23.2%
SLC	15.4%	8.3%	10.3%
IA or 10+2	16.2%	4.6%	8.7%
Bachelor level +	7.2%	1.8%	2.3%
Don't know	0.1%	0.6%	0.5%

#### 5.1.2 Income

The majority of respondent households participated in agriculture as either their primary priority (78%) or secondary priority (14%), which aligns with the National Living Standards Survey measurement that 76 per cent of total households are agrarian (CBS, 2011b). Lifestyle activities remained predominately unchanged by the earthquake, with 75 per cent of households that primarily participated in agriculture before the earthquake continuing to do so. The sample has an average total household income of approximately NRs 75,000, with the median 50 per cent of the sample earning approximately NRs 45,000–80,000. (Note that this only includes cash income, estimated value of own

production, remittances and other cash transfers.) Of the sample population, 4 per cent reported being from the lowest income bracket, earning less than NRs 15,000 in total household income. Following national trends, this population has compounded vulnerability as the sampled households have an average family size of 6.3, which is higher than the wealthier sampled populations (CBS, 2011b). The sample's household income estimation values cannot be directly compared to the available national-level data as the methodology differs. National Living Standards Survey (NLSS) gives the household income but includes a more extensive definition of income sources (value of owner-occupied housing and consumption of home produced goods). But the sample data does reveal income variation between urban and rural that aligns with national level data. Over 50 per cent of the urban households earn NRs 90,000 or more compared to 35 per cent of rural households. The NLSS reported that the average household income of rural communities was 54 per cent of the average household income of urban communities (CBS, 2011b). Overall census children households and additional children households are relatively similar in composition.

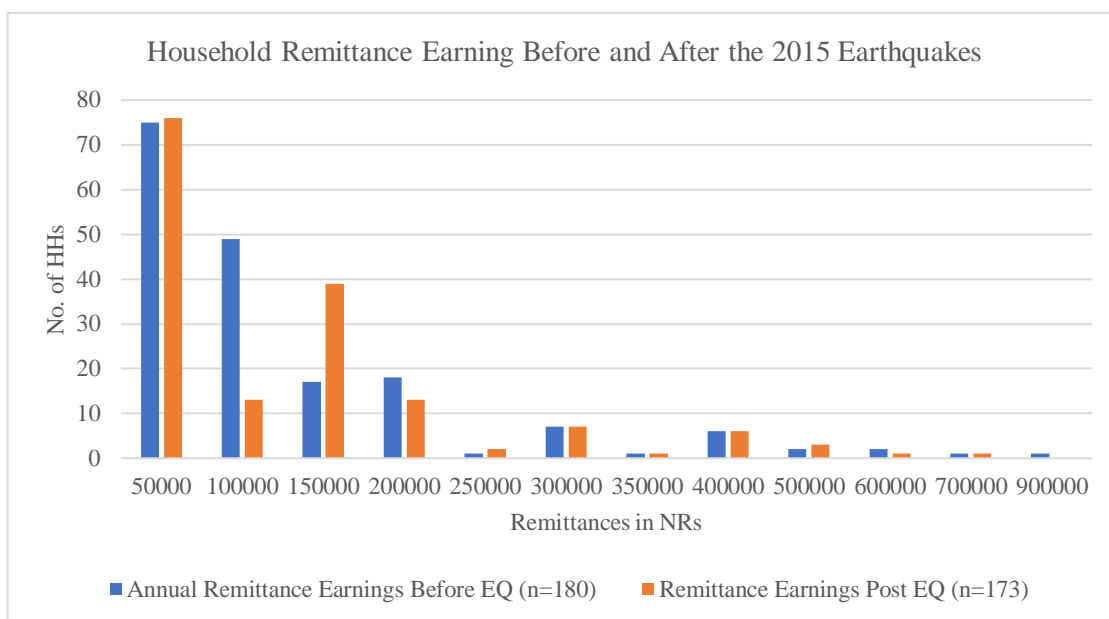


Graph 4: Household Remittance Workers by Household Income

Of sampled households, 25 per cent had an adult member who had sought employment outside of Nepal in the last three years – 50 per cent of whom reported earning NRs 90,000 or more in total household income. This trend held true, since remittances over various time periods (whether in the past three years, the year before the earthquake or since the earthquake) were predominantly received by households in this wealthier income bracket (see Graph 4). Nepal has a highly remittance-dominant economy, with a national average of 56 per cent of households receiving remittances. The sample is therefore significantly more economically vulnerable than the general population (CBS, 2011b).

Despite the overall proportion of households receiving remittance income remaining mostly unchanged, at around 81 per cent, 56 respondent households reported not continuing to earn remittances since the earthquakes, while 50 reported beginning to earn remittances since the earthquakes. There was an overall trend towards receiving less household remittance income when comparing the 12 months prior to the 2015 earthquakes, on average NRs 118,272, to since the earthquake, NRs 114,249 on average (a 4% decrease). As seen in Graph 5, a little over 40 per cent of households received NRs 50,000 or less in either period. This decrease in amount of remittance income aligns with national-level findings on post-earthquake remittance employment. Despite an initial spike in remittance earnings in the first nine months after the earthquake, in the three months to





Graph 5: Household Remittance Earning Before and After the 2015 Earthquakes

April 2016, remittances were reported to have dropped by 5 per cent compared to the same period during the previous year (MoF, 2016; WB, 2016). This is coupled with a decline in the numbers of Nepalese migrating internationally for employment – between 18 per cent (MOF, 2016) and 25 per cent (WB, 2016). This trend is attributed to less demand for workers in oil/commodity host countries (e.g. Gulf Cooperation Council countries and Malaysia) and an increased burden on potential migrants to support household recovery and rebuilding efforts.

### 5.1.3 Livelihood Recovery and Reconstruction

Almost all (99%) of households reported being affected in some way by the April and May 2015 earthquakes and aftershocks. Fortunately, few households experienced loss of life (2%), but of the 99 per cent that reported damage to their house, 69 per cent indicated that their houses had been completely destroyed and 66 per cent are living in temporary housing. This aligns with the findings from ETCTP Phase 1 (2015), where of the 94 per cent who experienced damage to their house, 68 per cent were completely destroyed. Only 47 per cent of those with damaged houses reported receiving any portion of the NRs 300,000 promised by the Government for housing compensation (31 per cent of partially-damaged houses, 55 per cent of completely destroyed houses). The deadline to complete distribution of the housing payment was initially set for mid-September 2015, then adjusted to early October. Both deadlines were missed. By the end of September, more than 406,399 (76%) out of 531,964 eligible families in the 11 districts had received the first tranche of NRs 50,000 to build the foundations of their new houses. However, the number of beneficiaries who have withdrawn the grant money from their bank accounts remains unclear (NRA, 2016). This could help explain why fewer of the sample population reported receiving a portion of the government installment compared to the government reported distribution (76%). As depicted in Table 9, both government distribution and reported reception of government housing compensation varies drastically by district – though similar trends are not evident.

Table 9: Distribution and receipt of government housing compensation

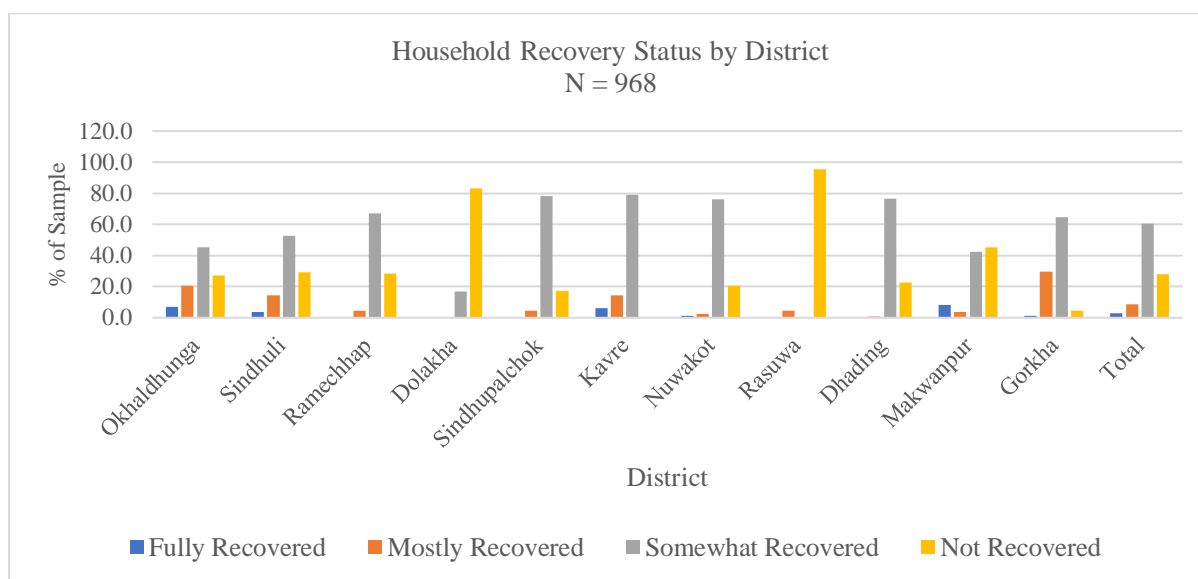
	District	Total eligible beneficiaries	Payments of 1st Installment	% of Total Population Received	% of Sample Population that received in portion of installment (n=968)
1	Sindhupalchok	78,537	72,289	92%	84.4%
2	Ramechhap	43,609	39,759	91%	42%
3	Okhaldhunga	19,818	17,003	86%	25%

4	Gorkha	58,503	48,658	83%	55.7%
5	Dolakha	51,762	42,907	83%	36.4%
6	Kavrepalanchok	67,665	54,560	81%	30.3%
7	Rasuwa	11,236	7,969	71%	95.5%
8	Nuwakot	65,759	46,307	70%	75.9%
9	Sindhuli	34,256	23,197	68%	57.9%
10	Dhading	70,581	39,355	56%	15.5%
11	Makwanpur	30,238	14,395	48%	32.6%
	<b>Total</b>	<b>531,964</b>	<b>406,399</b>	<b>76%</b>	<b>47.3%</b>

Source: NRA, 2016 and [www.nra.gov.np](http://www.nra.gov.np)

Additionally, only 1 per cent of the sampled population was living in a newly constructed house, which aligns with the estimate that in November 2016, only 3 per cent of households had started reconstruction work with the first tranche of government compensation worth Rs 50,000 (US\$500) in the 11 districts (NRA, 2016).

The majority (68%) of aid received by respondent households in the three months prior to the survey was from government and international and national non-governmental organisations for continued livelihood recovery. Livelihood recovery has been slow, as most households (60%) are only somewhat recovered or not recovered (28%). Yet, as seen in Graph 6, household recovery status varies drastically by district. In Rasuwa and Dolakha, 96 per cent and 83 per cent respectively reported being not recovered.

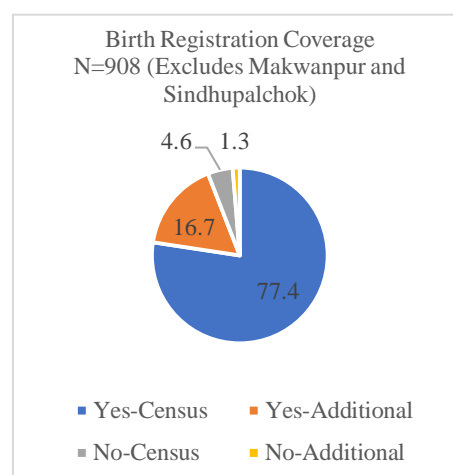


Graph 6: Household Recovery Status by District

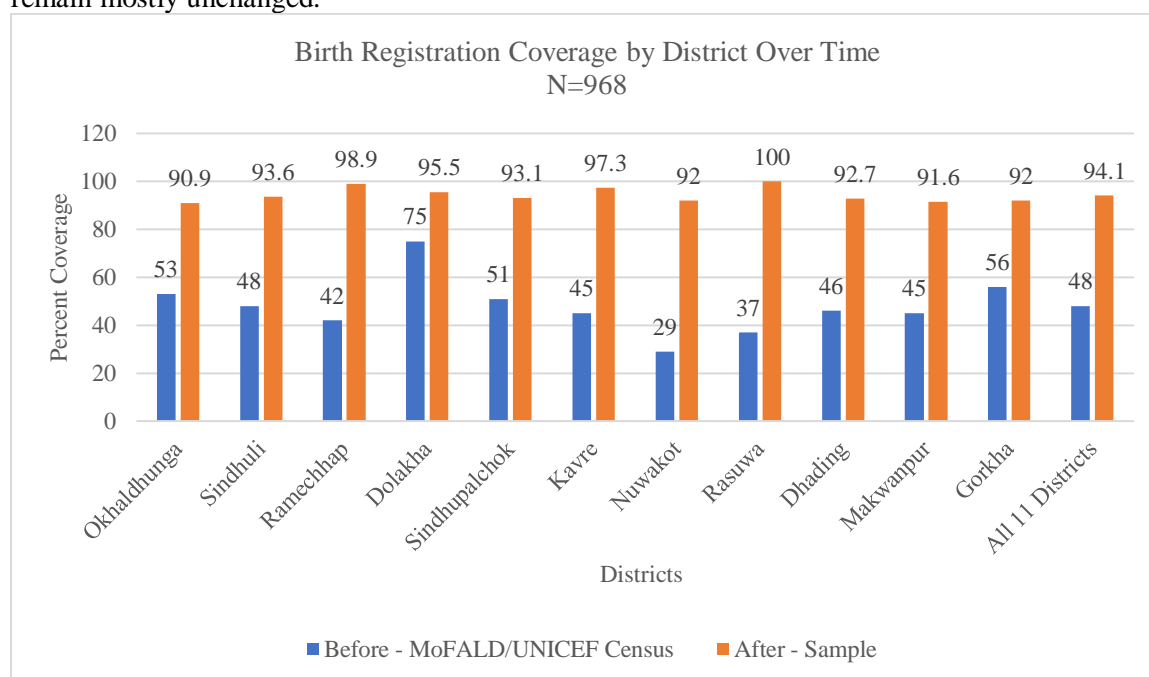
## 5.2 Earthquake Recovery Cash Transfer and Birth Registration Coverage

### 5.2.1 Birth Registration Coverage

Sampled birth registration coverage was 94 per cent, which is higher than MoFALD/UNICEF's census data collected in the sample districts prior to the cash transfer programme (48%) and the previous national data (58%) (CBS, 2011a). The 46 per cent increase in birth registration certificate (BRC) obtainment since the ERCT programming speaks to the effectiveness of UNICEF's efforts. BRC distribution was proportional between sampled males and females, caste/ethnicities, and did not differ between census and additionally registered populations. Although BRC coverage was over 90 per cent for all districts, Rasuwa (100%) and Ramechhap (99%) had the highest coverages as seen in Graph 8. Additionally, Rasuwa (+63%), Nuwakot (+63%), Ramechhap (+57%) and Kavrepalanchok (+52%) clearly had effective BRC programming as all more than doubled their coverage during the ERCT process. Note, when including the additionally registered children from Makwanpur and Sindhupalchok, overall BRC coverage values remain mostly unchanged.



Graph 7: Birth Registration Coverage



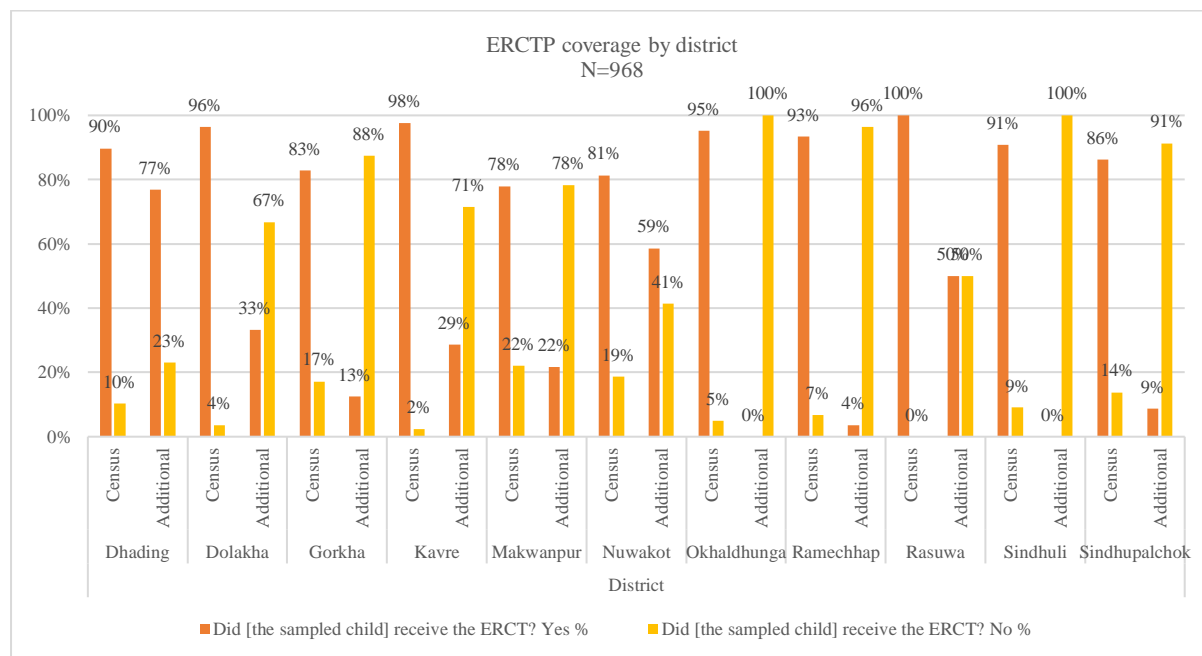
Graph 8: Birth Registration Coverage by District over Time

### 5.2.2 Earthquake Recovery Cash Transfer Coverage

ERCT coverage, according to the agreed register,<sup>7</sup> was 84 per cent as of April 2017, with 92 per cent in the sample census population and 51 per cent in the sample additional children population. Note that this is an increased coverage from initial enumeration, as of November 2016, which was 78 per cent with 89 per cent in the census population and 28 per cent in the additionally registered children population. The majority of additionally registered children were scheduled to receive cash after initial enumeration, therefore this discrepancy is understandable. These numbers reflect that, during initial enumeration, distribution to additional children in most districts had not yet taken place. However, despite these delays, at the time of writing distribution to additional children is continuing. ERCT distribution was proportionally higher for males (76%) than females (71.7%), but similar

<sup>7</sup> Excluding the 60 additionally registered children from Makwanpur and Sindhupalchok.

across caste/ethnicities. Disaggregation by district, in Graph 9, shows that coverage of census children was below average in Gorkha (83%), Makwanpur (78%), Nuwakot (81%) and Sindupalchowk (86%). The district-wise data also highlights the different approaches to registration and distribution taken in each district. For example, coverage of additional children is highest in Nuwakot (59%) and Dhading (77%), where distribution to both groups of children was carried out at the same time.

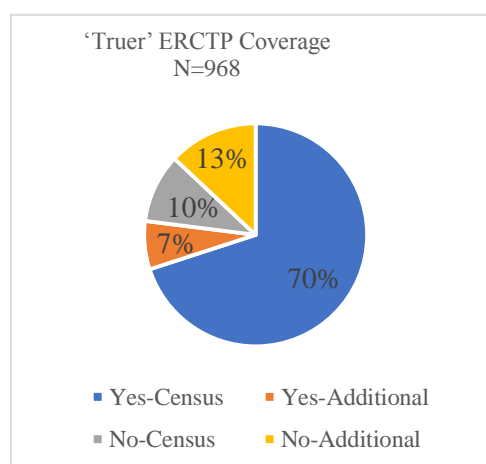


Graph 9: ERCTP Coverage by District

### 5.2.3 Additional Coverage

Of the sampled children with a BRC, 77 per cent received the ERCT. Even though a BRC was required to get the ERCT, 20 respondents reported receiving the cash without being able to present one (3 per cent of ERCT recipients). This occurred in 8 of the 11 districts, with the highest prevalence in Dhading (7 cases). These 20 beneficiaries were from households that are proportionally more vulnerable than the general sample – 85 per cent from disadvantaged Janajati and Dalit families, and 55 per cent from households with less than Grade 5 education.

Further, when including the 60 (unapproved) additionally registered children from Makwanpur and Sindupalchok, ERCT coverage decreases to 80 per cent and 44 per cent in the additional children population, respectively. In Makwanpur, DDC officials indicated that 14,555 additional children fitted the registration eligibility requirements but that, due to delayed submission from government officials, these children were deemed ineligible by UNICEF. Even so, some still received the grant at the discretion of the VDC officials, as seen in Graph 9 (22 per cent in Makwanpur and 9 per cent in Sindhupalchok). The coverage value in Graph 10 therefore represents as ‘truer’ ERCT coverage as it accounts for registration implementation failures (failure to identify and register additional children in time), while the ERCT coverage mentioned in Section 5.2.2



Graph 10: 'Truer' ERCTP Coverage

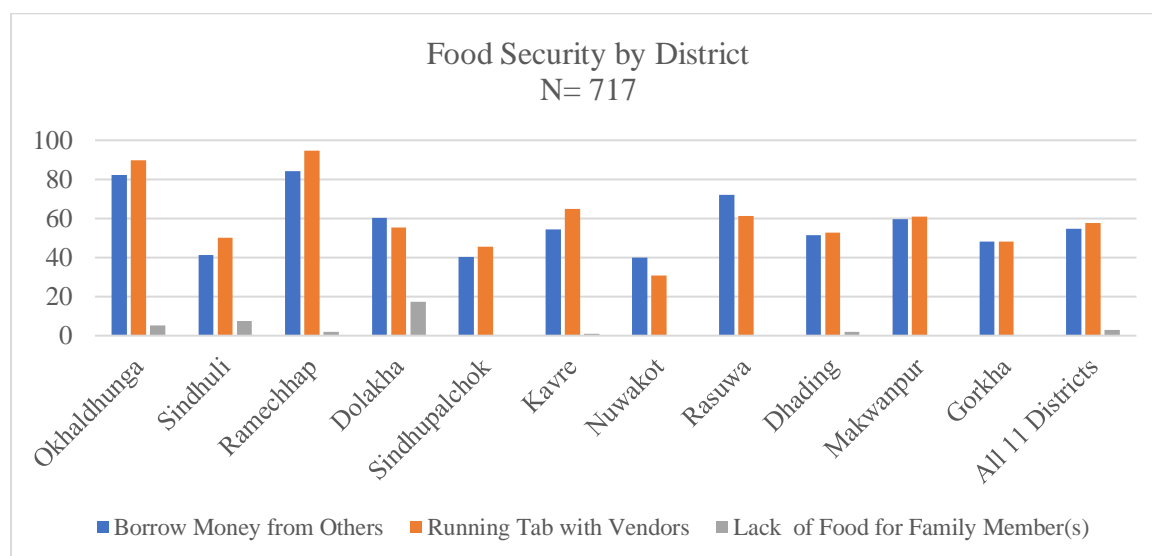
represents the coverage per the agreed register and reflects success of distribution. BRC coverage trends remain relatively unchanged when including this population, thus representing minimal registration implementation failures in that regard.

## 5.3 Food Security, Markets and Dietary Habits

### 5.3.1 Household Food Security and Coping Mechanisms

Expected household expenditure for the forthcoming six months is mostly limited to meeting basic needs, as sampled households expected that food items (81%), medicine (64%), clothing (51%) and children’s education (41%) would be one of their top highest spending priorities.<sup>8</sup> Given the demographic vulnerability of the sampled households, it is understandable to see 57 per cent of households reporting food items to be their first spending priority. Further, food security for the ERCT recipient households was weak in the month prior to the ERCT as 55 per cent had had to borrow money to meet food or other basic needs and 58 per cent had a running credit tab with local traders for food or other basic necessities.

This is similar to other reported findings, such as The Asia Foundation’s report that, as of September 2016, about one-third of affected households had taken a loan in the last six months while another two-thirds planned to do so in the next three months (The Asia Foundation, 2016). Further, there were 141 cases (20 per cent of the ERCT recipient households) of households selling assets to meet food or other basic needs. Livestock was the most prominently sold asset (16 per cent of the 141 cases). Food security was more stable in Sindhuli, Sindhupalchok, Nuwakot, and Gorkha, while households in Ramechhap and Okhaldhunga were the most vulnerable (Graph 11).



Graph 11: Food Security by District

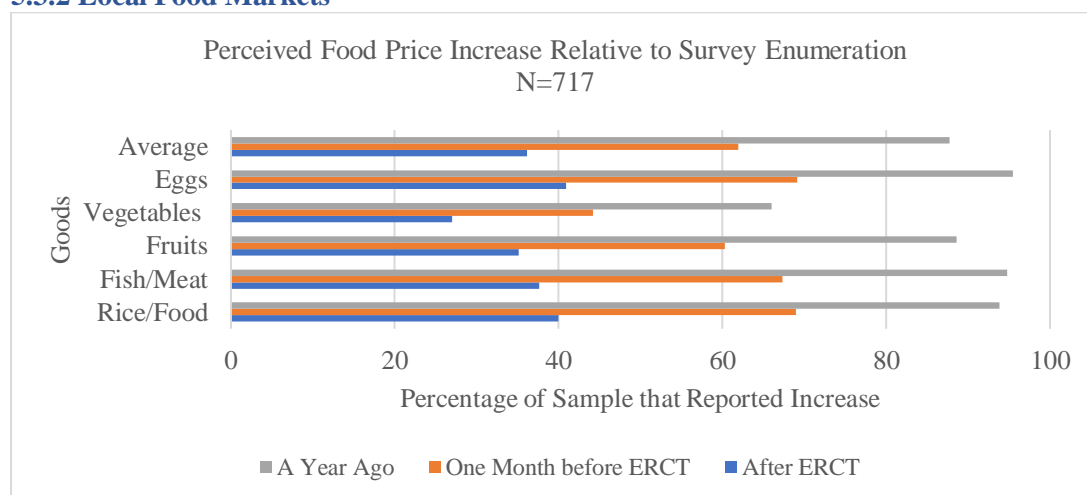
Three per cent of households reported that members did not have enough to eat within a month prior to enumeration, which is lower than the 8 per cent reported nationally (CBS, 2011b). This aligns with findings from other post-earthquake assessments, as household food consumption has been shown to stabilize as of March 2016 (The Asia Foundation, 2016). Frequency of these households needing to employ coping mechanisms for food security reveals a more vulnerable situation that aligns with national trends, as seen in Table 10 below. Few households were forced to employ food security coping mechanisms on an everyday basis, with disadvantaged Janajati households being the only group to report doing so.

<sup>8</sup> Note: this was a multiple-choice question where respondents each gave three answers for spending priorities.

Table 10: Households' Use of Negative Coping Mechanisms

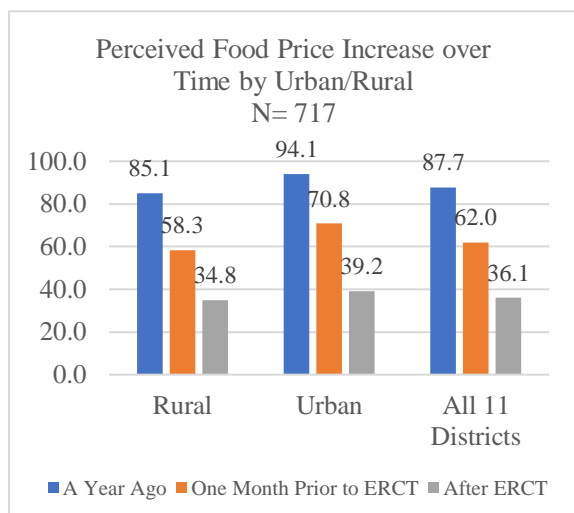
Coping Mechanism	% of Households with Food Shortages in the Past Month that used Coping Mechanism (NLSS, 2011)	% of Sampled Households with Food Shortages in the Past Month that used Coping Mechanism (1–10 times)
Purchase Food on Credit	57.1%	81.8%
Borrow food or money	68.9%	72.7%
Buying less preferred or less expensive foods	50.9%	59.1%
Limit Meal Size	41.5%	45.5%
Skipping Meals	33.4%	27.3%

### 5.3.2 Local Food Markets

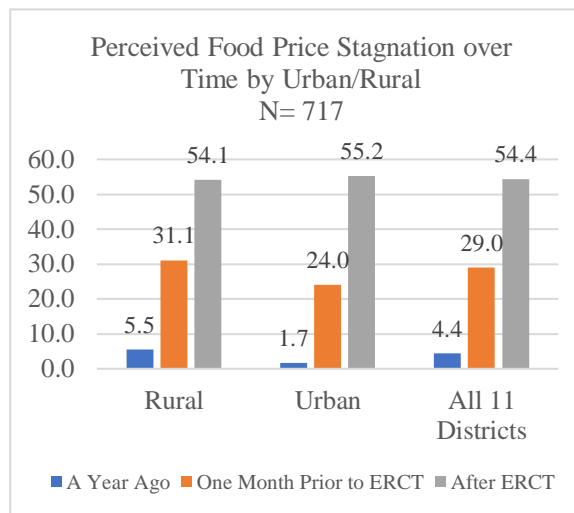


Graph 12: Perceived Food Price Increase Relative to Survey Enumeration

The general perception of food market shifts during the past year (from approximately September to November 2015) was that food prices had increased and then gradually remained stagnant at these increased prices since the ERCT distribution. As seen in Graph 12, there is little variation in this trend across food goods. An overwhelming proportion of the sample reported increased prices of all items in the autumn of 2015 (88 per cent on average), which could correlate with the goods shortage caused by the unofficial blockade of the border with India. Vegetable prices remained the most stable, potentially less affected by the import blockade due to local production patterns. However, border blockages caused fuel prices to soar, making it more expensive to run generators to irrigate land and to use machinery to farm (Na, 2016). General perceptions show that prices had still not fallen following ERCT distribution, as 36 per cent of the sample reported a continued increase in food prices, while 54 per cent reported that prices remain stagnant at the higher prices (Graph 12). Less than 1 per cent of respondents reported a perceived food price decrease over the past year.



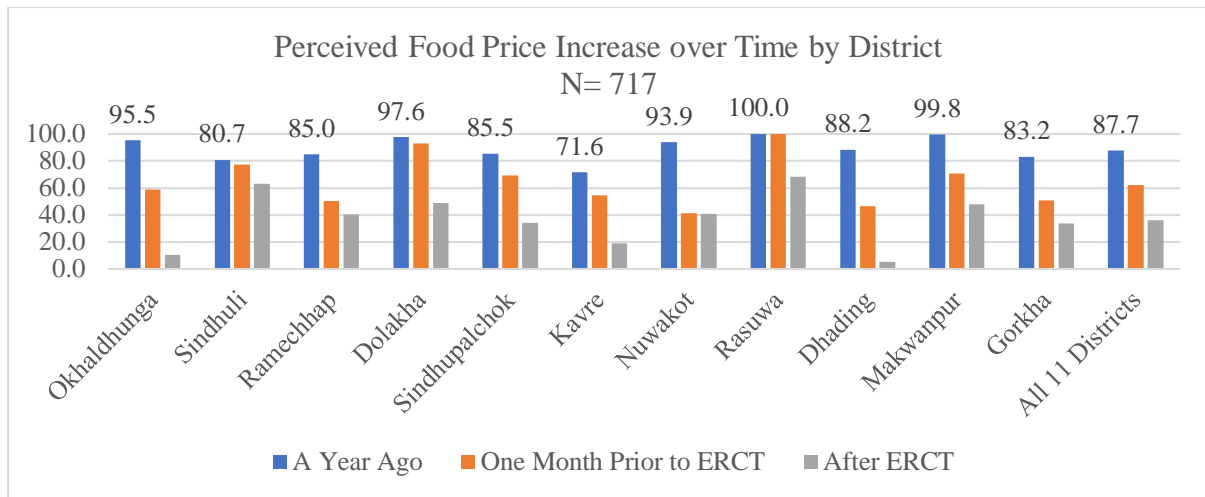
Graph 13: Perceived Food Price Increase over Time by Urban/Rural



Graph 14: Perceived Food Price Stagnation over Time by Urban/Rural

Since the ERCT distribution, urban and rural respondents generally perceived food prices to be stagnant or still increasing to proportionally the same degree, as seen in Graphs 13 and 14. However, urban respondents (94%, 71%) perceived prices to be increasing more than rural respondents (85%, 58%). Again, this could be the disproportionate effects of the import blockade, which had a heavy impact on the local economy (CCF, 2016).

District variation in perceived food markets was evident (Graph 15). Rasuwa's markets were perceived as the most volatile, with unanimous reports of food price increases through the month leading up to ERCT distribution. Dolakha's, Sindhuli's and Sindhupalchok's markets were also perceived to be slower to recover to stable prices. Nuwakot's markets seemed to stagnate the most rapidly, dropping from a 94 per cent to a 41 per cent increase between autumn 2015 and a month prior to ERCT distribution. Since the ERCT distribution, Dhading (5%), Okhaldhunga (11%), Kavrepalanchok (19%), and Gorkha (34%) report the lowest perceptions of food price increases. Overall, these perceptions show that food prices seem to have been vulnerable to political and environmental pressures over the past year. According to the Joint Assessment of Food Security, Livelihood and Early Recovery conducted in partnership with the GoN, OCHA, WFP, FAO, UNDP, Red Cross Society and REACH, "Following the earthquakes, local markets were initially closed or only partially functioning in many areas, which, together with disruptions to road and rail networks and supply chains, resulted in limited available stocks and higher prices." These circumstances combined likely contributed to a reduction in food access in the immediate aftermath of the earthquakes, with 46 per cent of households in the May assessment reporting inadequate food consumption and 19 per cent poor dietary diversity. Higher levels of inadequate food consumption were noted in rural areas, "where a fifth (19.8%) of households were deemed food insecure, relative to only 6.4% cent in urban areas" (CCF, 2016).



Graph 15: Perceived Food Price Increase over Time by District

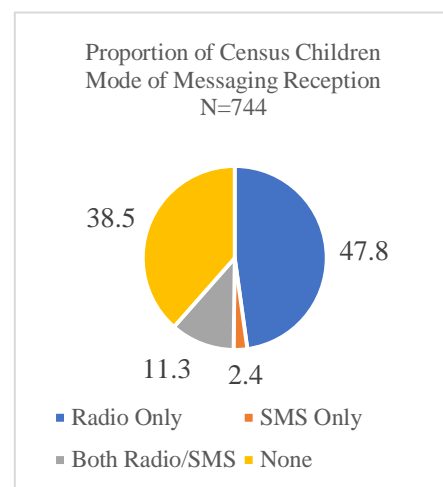


## 6. Results: Behavioural Change Messaging, Social Impacts and Cash Utilization

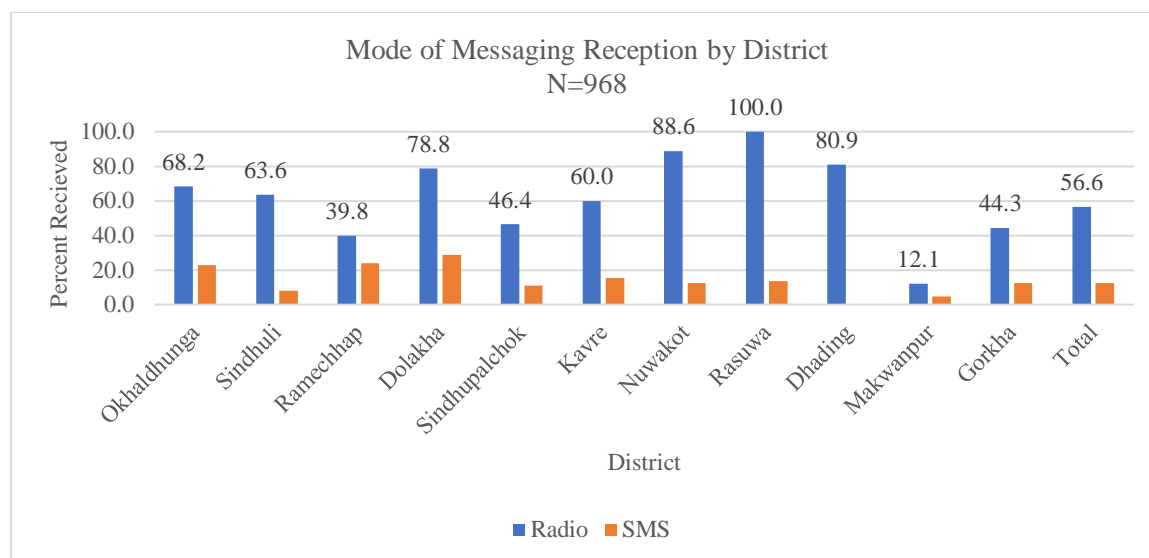
This section presents the findings from the survey related to behavioural change messaging, social impacts on the household and cash transfer utilization.

### 6.1 Behavioural Change Messaging

Local radio programming and SMS messaging were used to broadcast information regarding the ERCT, including eligibility, registration process, amount of cash, and location of more information. Radio had a wider reach as 57 per cent of the sample listened directly or heard indirectly from someone who had listened to programmes (48 per cent of the sample listened directly). SMS messaging, on the other hand, was reported to have reached only 12 per cent of the sample directly or indirectly (9.4 per cent directly). Of census children, very few respondents reported receiving both an SMS and radio broadcast (11%), and even fewer received only an SMS (2%) (Graph 16). In general, the additionally registered population was proportionally less likely to have been informed by either source or to remember certain details of the messaging. District variation was evident, as seen in Graph 17. Local radio broadcasting reach was low in Makwanpur (12%), Ramechhap (40%), Sindhupalchok (46%) and Gorkha (44%), while SMS reach was non-existent in Dhading and very low in Makwanpur (2%).



Graph 16: Proportion of Census Children Mode of Messaging Reception



Graph 17: Mode of Messaging by District

Remembered content varied but the majority of respondents who received radio or SMS messages could recall at least some of the content, with little proportional variation between the two. Eligibility (76%, 71%) and transfer amount (62%, 55%) were the most remembered topics (Table 11). SMS messaging also included behavioural change messaging regarding nutrition habits for young children and lactating mothers and how to spend the cash for the nutritional benefits of these populations. Of those who remembered the nutritional messaging, 91 per cent recalled that the cash should be used to buy food for children, and 24 per cent that the cash should be used to buy food for lactating mothers. Only 6 per cent could not recall the details. An average of 80 per cent of these respondents could recall a variety of different foods listed in the SMS messages, including meat, fish, milk, eggs, vegetables and green/yellow fruits. There was little variation between food products. Further, of SMS

recipients, 95 per cent reported that the SMS included at least some useful information, 64 per cent reporting that all of the information provided was useful.

Table 11: Remembered Content from Messaging

Remembered Content <i>Multiple Response</i>	% of Sample that Received Radio Broadcast (N=548)	% of Sample that Received SMS (N=119)
Who is eligible	76.3%	71.4%
What is needed for registration	37.2%	38.7%
Transfer amount	61.9%	54.6%
Where to get more information	25.2%	21.0%
Nutritional Messaging	--	52.1%
Don't Know	2.0%	6.7%

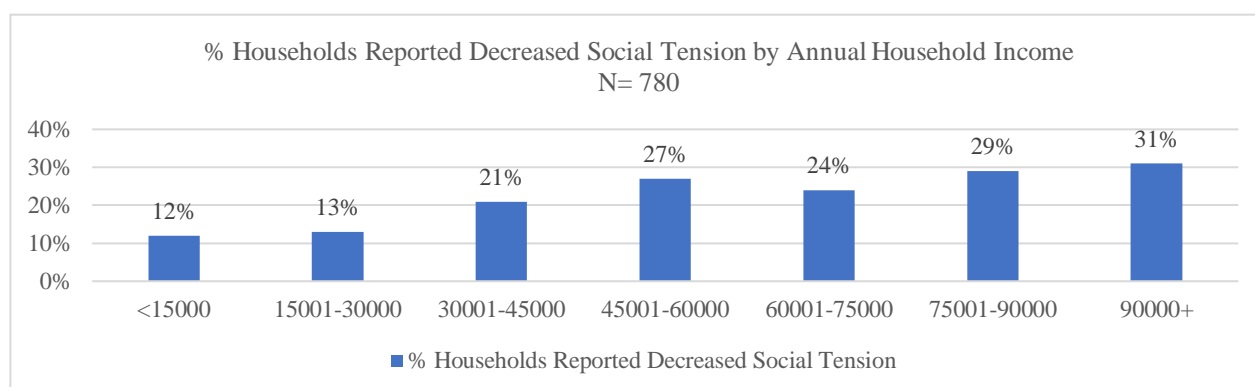
## 6.2 Social Impacts

The majority of ERCT beneficiary households reported that decision-making power over cash utilization was a joint operation, either between parents (61%) or with all household members (11%). Only 5 per cent of households reported that a male figurehead held sole decision-making power (Table 12). Although this implies a more equitable share of power between males and females within the household, the data cannot reveal exactly how equally or jointly these decisions are made. The equity becomes questionable given that 46 per cent of respondents reported that the cash transfer was given to the husband upon receipt and kept by the mother only 35 per cent of the time. Alternatively, males were proportionally more likely to report joint decision making (66%), but women were proportionally more likely to report female-dominated decision making (26%). In Brahmin-Chhetri and Dalit households, males had the most decision-making power (6%) and women had the least (18%), relative to other castes. This has potential implications as past research has found that children are more likely to benefit where cash transfers are paid to mothers or grandmothers (Roelen and Karki Chhetri, 2011).

Table 12: Decision-Making Power Distribution

Responsible Party	% of Sample (N=717)
Joint Responsibility between Mother and Father	61%
Mother or Other Women	23%
Father or Other Man	5%
All household members	1%

No one reported any negative change in household relationships since receiving the cash transfer. In fact, 26 per cent of respondents said the cash transfer decreased tension within the household. Women (29%), Dalits (45%) and urban residents (34%) were more likely to report decreased social tension, as were households in Gorkha (82%) and Nuwakot (61%). As noted in Graph 18, there was a positive



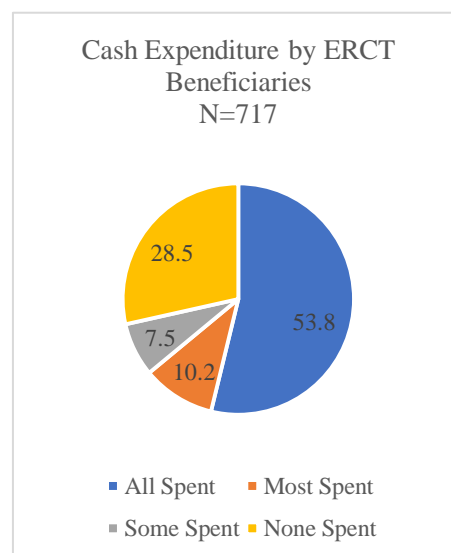
Graph 18: Percentage of Households Reported Decreased Social Tension by Annual Household Income

relationship between household income and the percentage of households reporting decreased social tension. The wealthier the household, the more likely the cash made an impact towards improving intra-household social tension.

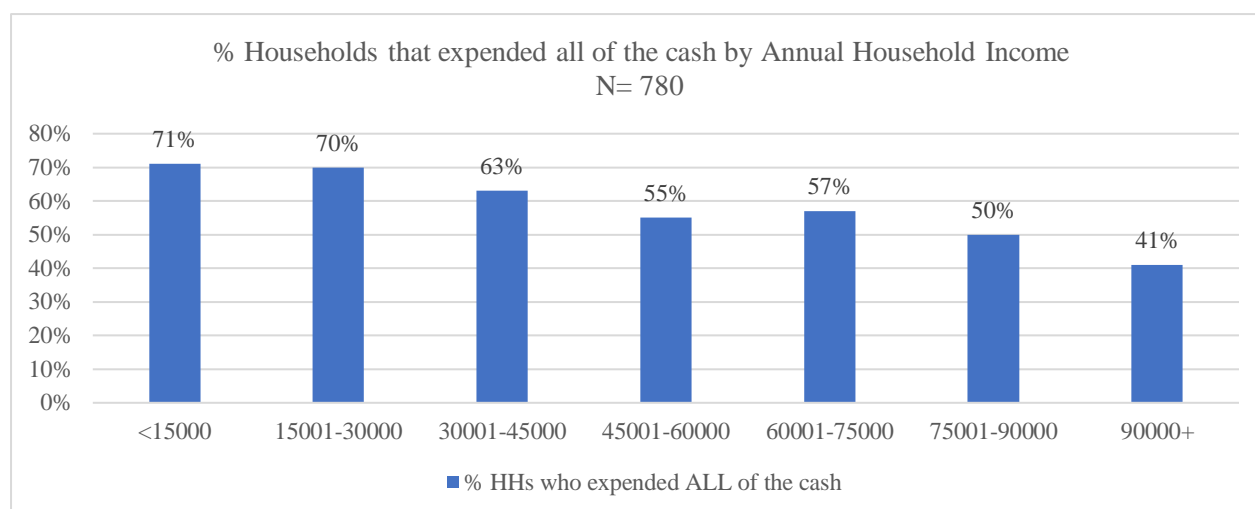
Furthermore, few negative changes between beneficiary households and their community had occurred since receiving the cash. There were no cases of theft or attempted theft, and one case of harassment. Only 3 per cent of respondents mentioned complaints within their community, but all of these complaints seemed focused on the eligibility or implementation processes of the ERCTP and not directed at social interactions with beneficiaries. Complaints included lack of a child’s name on the published list (33%), child’s name not properly published (42%) and not covering all children (25%).

### 6.3 Cash Utilization

ERCT beneficiary households were at various stages of cash expenditure during enumeration (Graph 19). All households reported a clear intention to focus expenditures or future expenditures on the needs of the sample child. Food came first (59%), followed by clothing (48%), medicine (44%) and education (25%). There was no significant difference between male and female children or by sex of respondent. Of those who included the beneficiary child’s education as one of their top three spending priorities, 19 per cent reported that without the cash transfer they might have had to withdraw their child from ECE – 18 per cent not very likely and 2 per cent somewhat likely. Households that had already spent some portion of the cash were most likely to have spent it on food (70%), while those who had not spent any were most likely to save it (53%).



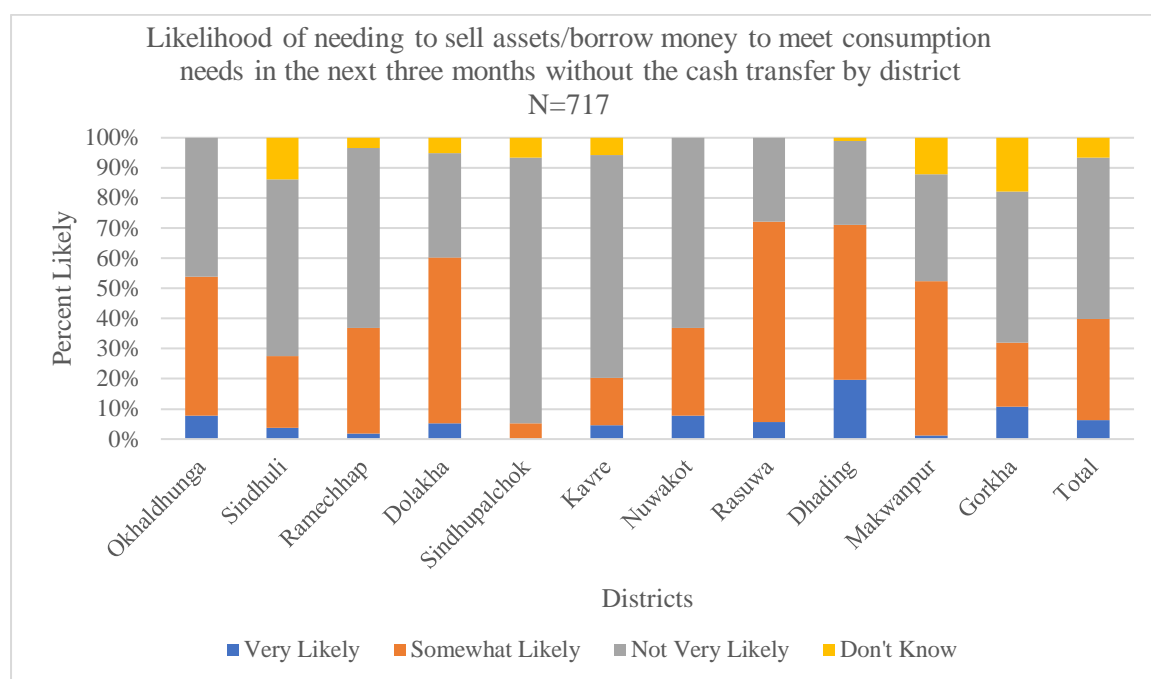
Graph 19: Cash Expenditure by ERCT Beneficiaries



Graph 20: Percentage of Households that expended all of the cash by Annual Household Income

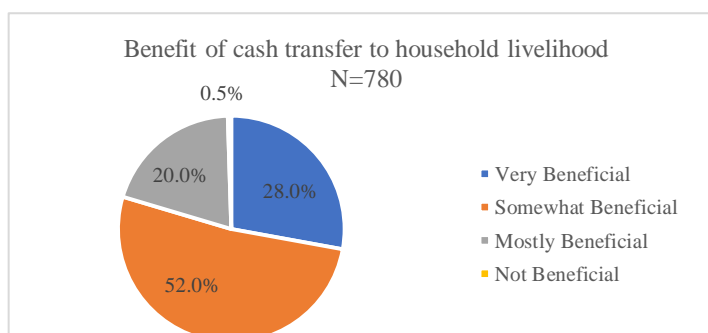
This clear difference in spending habits between meeting immediate and long-term needs is linked to household vulnerability. There was a negative relationship between cash expenditure and both the mother’s education and household annual income (Graph 20). Rural residents were more likely to have spent more of the cash compared to their urban counterparts. The highest proportion of expenditures occurred in Rasuwa (96% all spent), while the lowest occurred in Dhading (67% none spent).

About three-fifths of households reported that the cash transfer had made some difference to the quantity, quality and variety of food they consumed, in addition to improving the entire household's living conditions. On average, only about 7 per cent reported that it had made a lot of difference, but the cash transfer had a proportionally higher impact (78 per cent, both a lot and somewhat) on the living conditions of households earning less than NRs 15,000. Those households in the middle-income bracket were more likely to report that the cash transfer had a lot of impact on their household (17% – NRs 30,001– 45,000; 10% – NRs 45,001–60,000). Had beneficiaries not received the cash transfer, 6 per cent said they would be very likely and 34 per cent somewhat likely to have to sell assets or borrow money in the next three months to meet consumption needs. However, this differed by district, as seen in Graph 21. Rasuwa (72%) and Dhading (71%) were more likely to need to employ these negative coping mechanisms, while Sindhupalchok (5%), Kavrepalanchok (20%) and Gorkha (32%) were least likely to do so.



Graph 21: Likelihood of needing to sell assets/borrow money to meet consumption needs in the next three months without the cash transfer by district

The cash made at least some impact on improving the living conditions of 74 per cent of households (only 5 per cent reporting a lot of impact), with the most impact on households in Dolakha (17% a lot) and household earning lower than NRs 30,000 (12% a lot). Overall, the majority (80%) of households found the cash transfer to be at least minimally beneficial to their household – 22 per cent found it very beneficial (Graph 22). It was most beneficial to households in Nuwakot (52% very beneficial). Further, 80 per cent of households thought that the cash transfer was a good initiative to help their household cope after the earthquakes. Residents in Dhading and Kavrepalanchok were the least satisfied with the impact of the ERCTP. But, even among those respondents who reported that it was not a good initiative for helping their household cope (1%), over half also reported that the cash was beneficial to their household.



Graph 22: Benefit of cash transfer to household livelihood

## 7. Results: Information, Registration and Cash Distribution Process

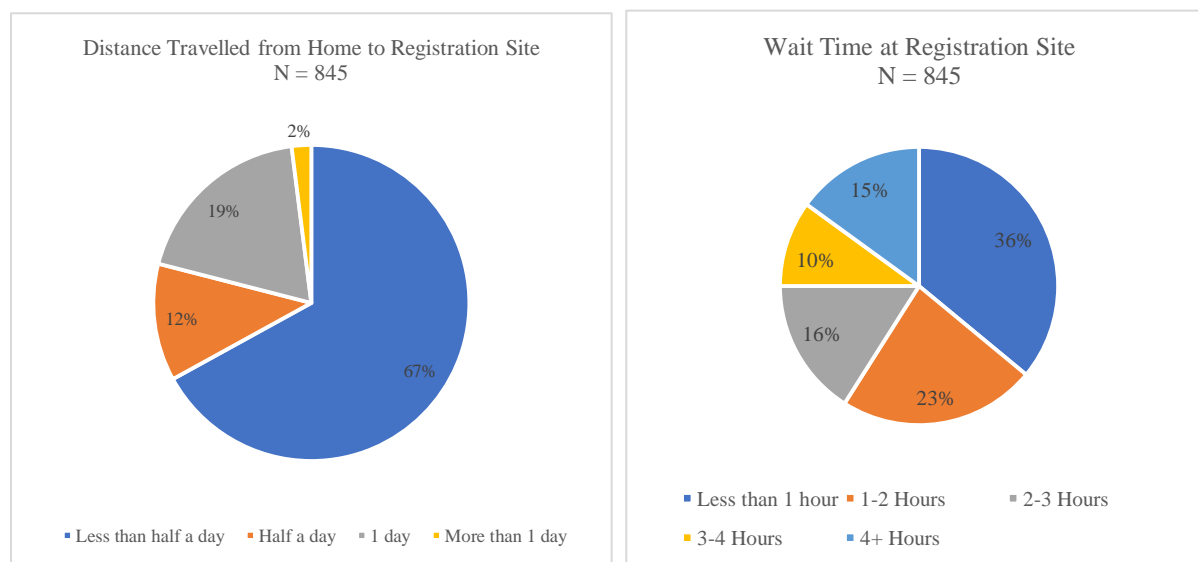
This section presents the findings from the survey related to the implementation, efficiency and effectiveness of information, registration and cash distribution processes.

### 7.1 Information Distribution

Knowledge of the ERCT prior to enumeration was high (99%), but clearly higher within the census population (100%) than the additionally registered population (97%). However, as seen below, details about the registration and cash distribution processes were not as well known. The majority of respondents were first informed via relatives/neighbours (39%), the local VDC office (40%) and radio (16%). Respondents living in urban regions were proportionally more likely to be informed by relatives/neighbours, while rural residents (51%) were proportionally more likely to hear from the VDC office (42%) or radio (16%).

### 7.2 Registration Process

Registration card uptake varied by district but overall coverage was limited as only 40 per cent of respondents reported having one. Dolakha (84%) and Gorkha (81%) clearly had stronger registration procedures, while Sindhupalchok (0%), Ramechhap (4%) and Dhading (9%) had weak uptake of registration cards. Registration occurred mainly at the VDC/M office (71%) or within the village (21%). As expected, rural respondents were more likely to receive their card in their village, while urban respondents were more likely to receive it in the VDC/M office. The majority of respondents (98%) reported that the registration site was within one day's travel or less from their home (Graph 23), and 86 per cent had no travel expenses. Average travel expenses were higher for rural respondents (Nrs 113) compared to urban (NRs 70), which is understandable. About one-fifth of respondents experienced loss of income due to missing work to register their child – NRs 540 on average for urban residents and Nrs 470 for rural residents. More than half of respondents completed the registration within two hours, but wait time exceeded four hours for about 15 per cent of respondents (see Graph 24).



Graph 23: Distance Travelled from Home to Registration Site    Graph 24: Wait Time at Registration Site

Despite the intention to have separate registration and cash distribution processes, 48 per cent of recipients registered and received cash on the same day, although this occurred at a proportionally higher rate in rural areas (52%). Some districts – Rasuwa (89%), Dhading (89%), Ramechhap (86%) and Sindhupalchok (84%) – were better at registering and distributing cash separately. Most recipients (80%) were notified about registration in a timely manner during the week before the registration

date. However, about a quarter were notified only one day before and about one-tenth were notified three weeks to three months before. Overall, the registration process lacked uniformity across districts, which impeded the timeliness and efficiency of cash distribution.

### 7.2.1 Registration Issues for Non ERCT Receipts

Within the sample population that had not yet received ERCT as of November 2016, only about one-third was registered. As seen in Table 13, lack of documents (17%), out of village residence (17%) and name mismatch (16%) were the main reasons for registered children not receiving cash. These children's experiences represent both registration and cash implementation shortcomings. Further, 17 per cent of the sample was neither registered nor received the cash. The majority of these eligible beneficiaries were uninformed about registration (54%) or lacked appropriate documents (28%). These children's experiences represent registration shortcomings only (Table 14).

Table 13: Reasons for Registered Children not Receiving Cash

Reasons for Registered Children not receiving Cash (9% of Total Sample)	N	% of Registered but NOT Received
Uninformed about the cash distribution date	5	5.7%
Didn't have time	6	6.9%
Didn't have registration card	5	5.7%
Requested for other documents	15	17.2%
Funds unavailable	1	1.1%
Out of village during payment	15	17.2%
Name not matched	14	16.1%
No birth registration	7	8.0%
I don't know	19	21.8%
<b>TOTAL</b>	<b>87</b>	<b>100.0</b>

Table 14: Reasons for Non-Registered Children not Receiving Cash

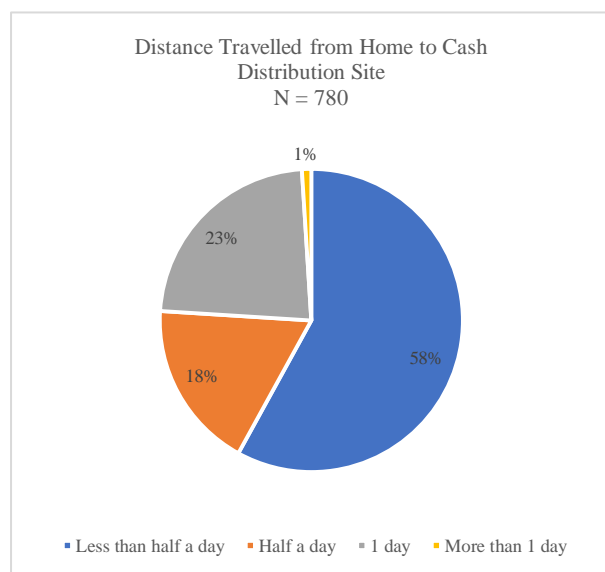
Reasons for Non-Registered Children not receiving Cash (17% of Total Sample)	N	% of NOT Registered and NOT Received
Didn't have the right document	14	8.5
Unable to birth register	31	18.9
Told my child was too old	6	3.7
Uninformed about registration	89	54.3
Didn't have time	4	2.4
Too expensive/too far to travel	1	.6
Don't know right people	4	2.4
Child was not born at that time	3	1.8
I don't know	12	7.3
<b>TOTAL</b>	<b>164</b>	<b>100.0</b>

### 7.3 Cash Distribution Process

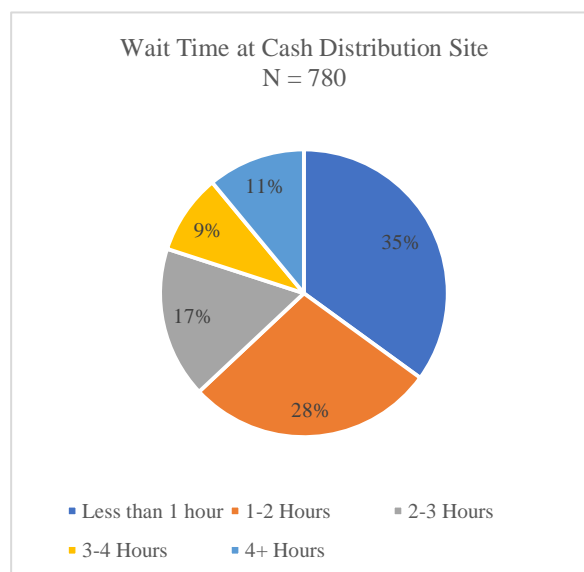
Operationally, the cash transfer programme was intended to be implemented by the Government through social allowance mechanisms. These programmes use two mechanisms for cash distribution, i) hand-to-hand distribution (main), and ii) bank transfer (urban areas). In terms of bank transfers, local government officials mentioned that success was limited as it was burdensome for banks as well as intimidating and inconvenient for rural recipients. Additionally, during monitoring, it was noted that government bank accounts were the source of some delays due to lack of communication with UNICEF regarding fund transfer and the opening of new accounts in some VDCs. As the ERCTP employed horizontal expansion, many of the eligible beneficiaries were not previously in the social allowance system, thus cash distribution did not always happen simultaneously with Child Grant distribution, as previously intended.

As with the registration process, cash distribution mainly occurred at the VDC/M office (73%) or in the respondent's village (20%). About two-thirds of respondents were within less than half a day's travel from the distribution site, and only 1 per cent travelled two days or more (Graph 25). Again, 87 per cent had no travel expenses, but for those who did the average expenditure was NRs 91. About

one-quarter of respondents reported loss of income, more among rural residents (27%) compared to urban residents (15%), with an average of NRs 476 of lost income.



Graph 23: Distance Travelled from Home to Cash Distribution Site



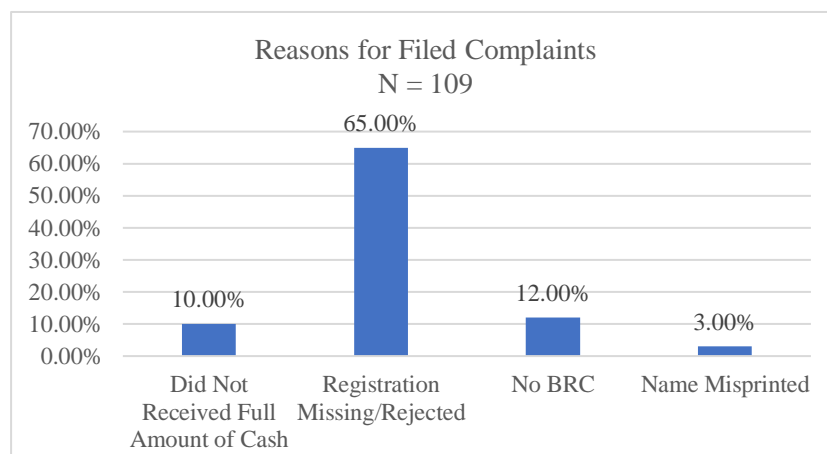
Graph 24: Wait Time at Cash Distribution Site

In contrast to registration, cash distribution notifications were on average timelier as, on average, recipients were notified five days earlier. However, this varied drastically between districts. For example, Sindhupalchok notified recipients on average three days before distribution, while Rasuwa notified on average 16 days before. Queuing and waiting was the most common problem (75%), as about two-fifths (37%) of respondents waited two hours or more to get their cash (Graph 26). Other problems included a few cases of negative attitudes from officials (12%) and bureaucratic hassle (25%). Fortunately, no cases of theft were reported. There were 17 cases of respondents (2%) reporting additional costs ranging from Nrs 20–500 (Nrs 71 on average) to receive their cash. Reasons for these additional costs are unclear.

#### 7.4 Problems and Complaints

Overall, only one-third of respondents reported knowledge of and access to a complaint procedure for the ERCTP, with large variations between districts. Complaint mechanisms were well known in Dhading (86%) and Ramechhap (77%), but far less known in Sindhuli (11%), Dolakha (11%) and Kavrepalanchok (2%).

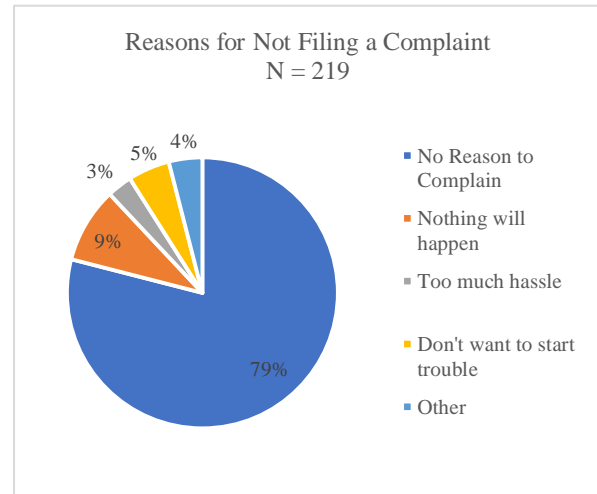
The majority of these respondents (84%) said that the VDC office was the avenue for filing a complaint. This was evidenced as 88 per cent of respondents who submitted complaints did so through their VDC office. However, only one-third of respondents with access to a complaint procedure filed a complaint. The highest proportions of complaints were filed in Makwanpur (77%) and Gorkha (67%). Dalits were more likely



Graph 25: Reasons for Filed Complaints

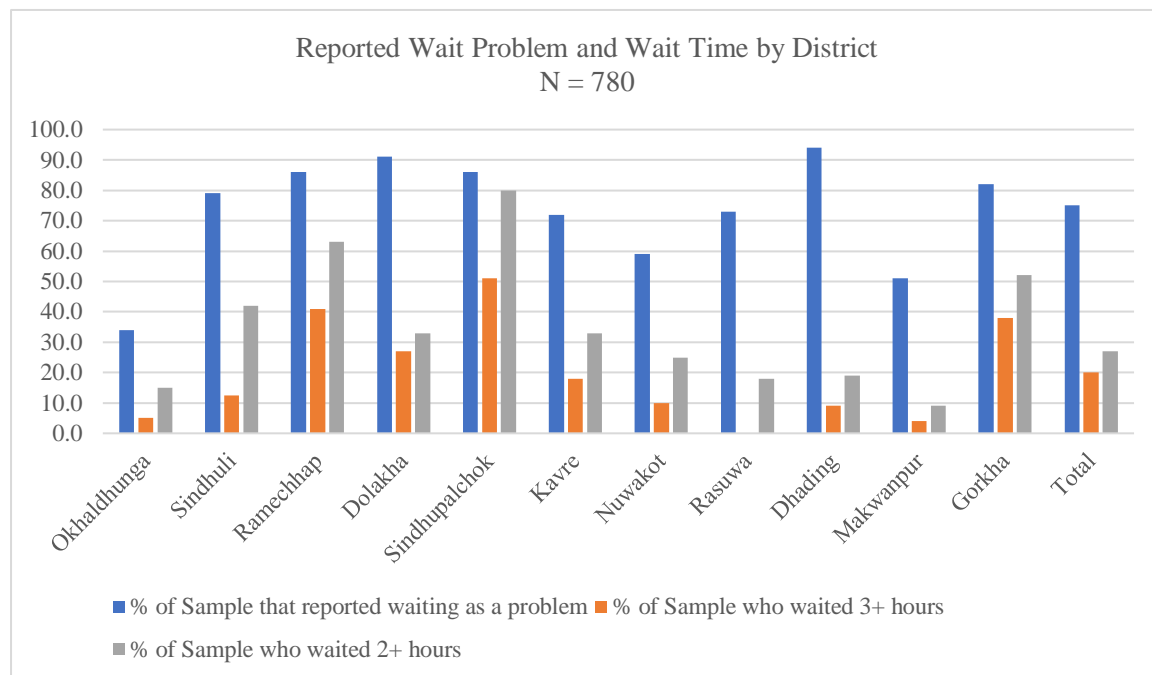
to file a complaint (43%) compared to the general sample population (33%). Most of the filed complaints had to do with issues in the registration process, including missing/rejected registration documents (65%), lack of a BRC (12%), or name misprint (3%) (Graph 27).

About 80 per cent of those who did not file a complaint did so because they had no reason to complain, but the remaining 20 per cent were deterred from complaining for various reasons, many to do with distrust of the system or a belief that they could not understand or influence political affairs (Graph 28). These sentiments were most strongly felt in Sindhuli (83%) and Makwanpur (75%). These sentiments were not completely unfounded, as only about two-thirds of the filed complaints were resolved, especially in Gorkha, Dhading, Kavrepalanchok and Sindhuli, where not a single filed complaint was resolved.



Graph 26: Reasons for Not Filing a Complaint

In terms of cash distribution procedure, 75 per cent of sample beneficiaries reported queuing and waiting. However, only 20 per cent waited in line for three hours or more. As seen in Graph 29, respondents overly reported waiting as a problem as actual wait time did not always align. Sindhupalchok (51%), Ramechhap (41%), Gorkha (38%) and Dolakha (27%) had the longest reported wait times (3+ hours). Yet, despite this, only two complaints were filed about waiting time – one in Ramechhap and one in Dolakha. Other reported problems were bureaucratic hassle (12%) and negativity of officials (3%). Dhading



Graph 27: Reported Wait Problem and Wait Time by District

had the highest reports of both bureaucratic hassle (26%) and negativity of officials (8%). Yet again, however, no complaints were reported on these problems.



## 8. Discussion

This section discusses the implications of non-response for data interpretation as well as how survey findings compare to target objectives and outcomes set in the M&E Plan (UNICEF, 2016).

### 8.1 Implications of Non-response

As mentioned in Section 4, there was a high rate of non-response (181) from the original sample of 968, which could have implications for the results presented in this report. We cannot be sure of the demographic background of these households but, given the systematic random sampling methodology, we assume that their exclusion does not affect the representativeness of the sample. Further, we do not know the ERCTP coverage status of these households. However, based on the inputs received from the field from District Focal Points and monitoring visits, we can infer that they are likely to be either (i) not qualified (e.g. ineligible due to non-residence) or (ii) qualified but missed during enumeration due to temporary absence.

### 8.2 ERCTP Achievement of Target Objectives

Below is a discussion of how survey findings compare to the specific target objectives of self-perceived changes in food security and living standards. Note that all assumptions about household contexts needed for the validity of these objectives and outcome indicators were met.

- A. *Children's food security is self-perceived by household as improved along at least two of three common indicators – quantity, quality and diversity (target: >60% of households)*

**The ERCTP achieved its objective of improving self-perceived food security by having a moderate impact on increasing a household's ability to provide improved quantity, quality and variety of food for their children.** Over two-thirds (70%) of the beneficiary households reported that the cash made either a lot (7%) or somewhat (63%) of a difference in their ability to better provide food for their children, as measured by at least two of three common indicators (quantity, quality and variety).

- B. *Living conditions of households with children under five is self-perceived as improved (target: >60 % of households)*

**The ERCTP fulfilled its objective by making moderate improvements to the self-perceived living conditions of households with children under five, especially for the most vulnerable households.** The majority of households perceived the cash transfer to have improved their livelihood somewhat (69%) or a lot (5%). Households that were only partially recovered (somewhat or not at all) were more likely to report that the cash transfer somewhat improved their livelihoods. The cash transfer had the most significant impact on the living conditions of the poorest households (earning under NRs 30,000 annually), of which 13 per cent reported a lot of improvement in their livelihoods.

- C. *Majority of children under five have a birth registration certificate (target: >90%)*

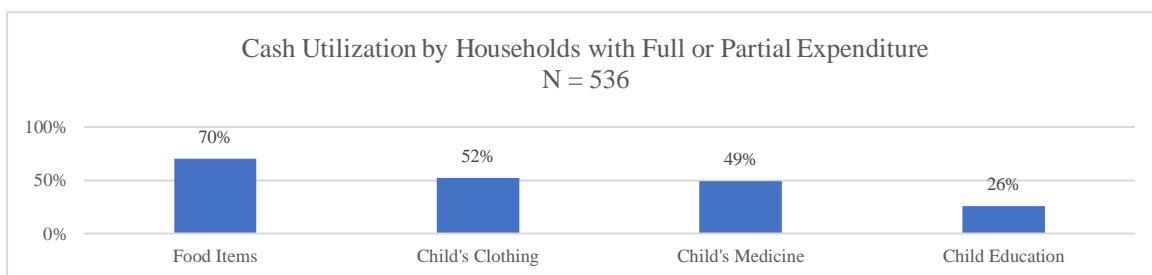
**The majority of children under age five have a birth registration certificate (BRC), surpassing ERCTP's goal.** BRC coverage surpassed the target goal of 90 per cent, with 94 per cent of the sample reporting that they obtained the document prior to or during the ERCT programming period. Prior to ERCT programming, according to MoFALD/UNICEF's 2016, census, only 48 per cent of children under five had a BRC. This 46 per cent increase speaks to the effectiveness of ERCT programming efforts. Birth registration is a critical step towards realizing children's rights because it facilitates the child's citizenship, and establishes rights to education, primary health care, legal employment standards and other entitlements. The fact that it was compulsory for a child to have a BRC to be eligible for a cash transfer has contributed to vital registration as well as government policy and plans.

### 8.3 ERTCP Outcome Achievement

To achieve these objectives, the ERCTP M&E Plan identified two expected medium-term outcomes to be measured by main indicators in the quantitative survey. Below is a discussion of how the survey findings compare to these indicators.

Outcome 1: *households are better able to meet the basic daily needs of their children under-five.*

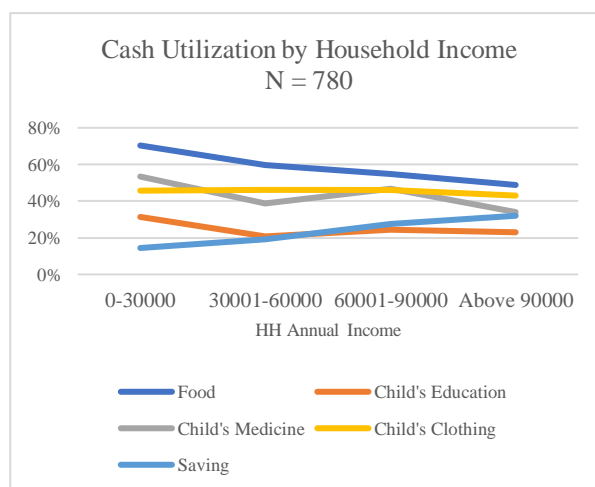
- A. *The majority of recipients allocated the majority of transfer income to meeting the basic needs of targeted children, including food, clothing and medicines (target: >50% of recipients / >50% of transfer) while other use of transfer income was mostly put towards meeting collective household needs, including essential household items, shelter maintenance or livelihoods (target: >50% of remaining allocation)*



Graph 28: Cash Utilization by Households with Full or Partial Expenditure

**The majority of recipients allocated the majority of the cash transfer to meeting the basic needs of children, including food, clothing, medicine and education.** The majority of

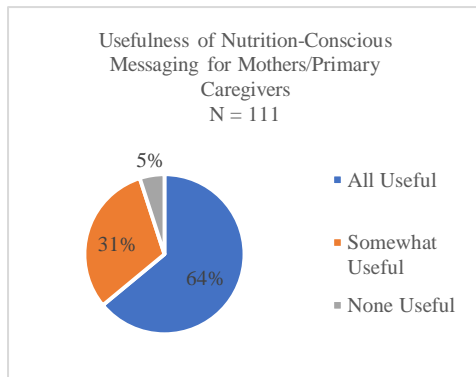
households that had spent any of the cash had targeted it towards the well-being of children (Graph 30). But, households who had yet to spend the cash allocated it to future savings (63%). This clear difference in spending habits between immediate needs and long-term needs is linked to household vulnerability (Graph 31). Households that saved were more likely to be fully recovered, have high annual income and to report that the cash transfer made no difference to their household's living conditions. Households that were only partially recovered and which had lower annual household incomes who reported that the cash transfer made somewhat or a lot of impact on their household's living conditions were more likely to have spent it on meeting the basic needs of their child.



Graph 29: Cash Utilization by Household Income

- B. *Mothers/primary caregivers of children have knowledge of nutrition-conscious messages (target: >50% of grant recipients can recall the message)*

**Mothers/primary caregivers had moderate knowledge of nutrition-conscious messages and found the knowledge useful.** Of the sampled primary caregivers, 17 per cent reported being advised by government officials on how to spend the cash transfer. Of those respondents, the majority (94%) recalled being encouraged to spend it on nutritional food for their children. About one-eighth (12%) of the sampled primary caregivers reported receiving an SMS message from the ERCTP, either directly or indirectly (through a family member or peer). Half of those respondents (52%) who received the SMS remembered the nutrition-conscious messages specifically to buy



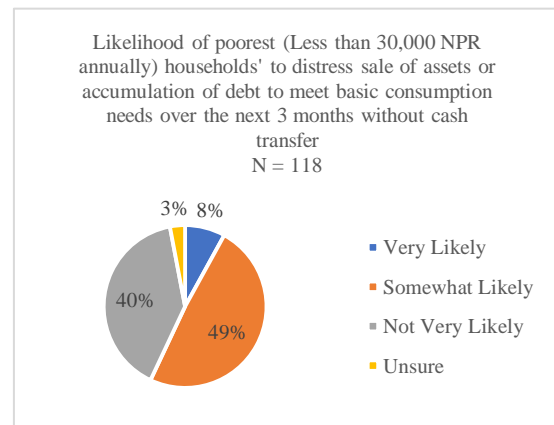
Graph 30: Usefulness of Nutrition-Conscious Messaging for Mothers/Primary Caregivers

food for children (90%) and lactating mothers (24%). The majority (81%) remembered at least one of the healthy food options mentioned in the SMS messages. Nutrition messages were useful to the daily lives of mothers and primary caregivers who received the SMS messages (Graph 32).

Outcome 2: households avoid or reduce reliance on coping strategies that are harmful to children.

A. *The poorest households reduce distress sale of productive assets and accumulation of debt to meet basic consumption (target: 20% of households)*

**The cash transfer had moderate influence on reducing the occurrence of distress sale of productive assets and accumulation of debt to meet basic consumption needs within the poorest households.** Within households earning NRs 30,000 or less annually, almost three-fifths (57%) reported that without the cash transfer they would be very likely or somewhat likely to participate in negative coping strategies to meet basic needs (Graph 33). Reduction in reliance on these coping strategies has short-term and potentially long-term impacts on the ability of the household to create a safe environment conducive to children’s well-being.



Graph 31: Likelihood of poorest households' need to distress sale assets etc. in next three months without cash

B. *Households with a child attending ECE are less likely to withdraw them in the short term (target: 20% of households)*

**The cash transfer had little impact on households’ ability to access early childhood education (ECE) services for their young child.** Of households with a child attending ECE, no households reported that without the cash transfer it would have been very likely that they would have had to withdraw their child from ECE. The majority (56%) reported that even without the cash transfer, it was not very likely that they would be forced to withdraw their child from ECE. Of those who included the beneficiary child’s education as one of their top three spending priorities, 19 per cent reported that without the cash transfer they would have had a small chance (18 per cent not very likely and 2 per cent somewhat likely) of withdrawing the child from ECE. Only 15 households (4%) reported that without the cash transfer it would have been somewhat likely that they would have withdrawn their child from ECE. All 15 of these households were in vulnerable conditions as they reported that their livelihoods were only somewhat recovered or not recovered and the majority had completely destroyed houses.

## 9. Conclusion

This section summarizes the findings, presenting district variation trends, key learnings and policy recommendations based on the data analysis.

### 9.1 Design and Implementation Learnings

**The ERCTP achieved very high coverage among the target population.** ERCTP coverage, per the agreed register, was 84 per cent as of April 2017, with 92 per cent in the sample census population and 51 per cent in the additionally registered children population. This reflects that distribution to additionally registered children was delayed or incomplete in many districts at the time of both original and phone enumeration. The district-wise data highlights the different approaches to registration and distribution taken in each district.

- Coverage of ‘additional’ children is highest in locations where distribution to both groups of children was carried out at the same time.
- DDCs and VDCs were given the authority to use any remaining funds to cover additional children. There was therefore some coverage of ‘additional’ children in districts that had not officially started distribution to additional children, and in the two districts that had not declared any additional children in the agreed registry.
- Some VDCs distributed to additional children once they had established under coverage among the census group during the first distribution.
- Some additional children have been reported as appearing on the census list (although they did not receive two payments).
- It is also possible that coverage of census children may increase if those who were missed out claim their payment during the second round of distribution.

**All districts completed distribution to census children within one to six months after receipt of funds.** However, issues relating to distribution to additional children, as mentioned above, further complicated and limited synchronization of cash distribution with the GoN’s regular social assistance payments.

**Despite high ERCTP coverage within the census child population, registration failures have resulted in continued delays in cash distribution and low coverage of additionally registered children.** The registration shortcomings, coupled with different cash distribution approaches at the local level, caused significant delays in distribution for both census and additionally registered children. The independent assessment tried to address these delays in distribution to additionally registered children by re-enumerating these non-recipients after their ward had completed distribution. However, this could not be completed in all sampled clusters as, at the time of writing, distribution is still ongoing to additional children in various locations.

**Intended protocol to have separate registration and cash distribution was only moderately achieved as about half of recipients registered and received the cash at the same time.** Although registration and cash distribution were intended to be separate processes to increase coverage, this protocol was not always followed at the local level due to ease, timeliness and efficiency for both officials and beneficiaries.

**Most beneficiaries had little difficulty or negative repercussions while receiving cash.** Very few major problems were reported during the distribution process. About three-quarters (73%) of sample beneficiaries collected the cash at their local VDC/M office. Three-quarters (76%) of respondents reported that it took half a day or less to collect the money and return home. Further, the majority of beneficiaries did not have any travel expenses (87%) or loss of income (86%). Regarding the

distribution itself, 75 per cent of sample beneficiaries reported queuing and waiting. However, a little over half of the sample (63%) waited in line for two hours or less.

**A small number of children deemed ineligible by the agreed child register received the ERCTP, highlighting limitations in the cash distribution process.** Sixty (unapproved) additionally registered children from Makwanpur and Sindupalchok were sampled, but excluded from analysis of registration and distribution processes. Although these children were deemed ineligible, some still received the grant at the discretion of the VDC officials (22 per cent in Makwanpur and 9 per cent in Sindupalchok). Therefore, when including this population in coverage analysis, 81 per cent overall (44 per cent within the additional child population) represents a ‘truer’ ERCTP coverage that accounts for registration failures (failure to identify and register additional children in time). Alternatively, the previously mentioned ERCTP coverage represents the coverage per the agreed register and reflects success of distribution. BRC coverage trends remain relatively unchanged when including this population, thus representing minimal registration implementation failures in that regard.

**A small number of children received the ERCTP without registering for a BRC, highlighting slight shortcomings in the cash distribution processes.** Even though a BRC was required to receive the ERCT, 20 respondents reported receiving the cash without the presence of a BRC (3 per cent of ERCTP recipients).

**Complaint mechanism awareness and utilization was limited.** Awareness of complaint reporting mechanisms was low (33%), but utilized by 11 per cent of the sample – lower awareness but higher utilization than found in the independent assessment of the ETCTP Phase 1. Most of the filed complaints had to do with issues in the registration process, including missing/rejected registration (65%), lack of BRC (12%) or name misprint (3%). Only about two-thirds of the filed complaints were resolved. About 5 per cent of the sample was deterred from complaining because they did not trust the system. This may be due to the weak grievance and redress mechanisms at the local level, unequal social relations and the tendency in Nepali society not to complain.

**The independent assessment found a few instances where the child register had incorrect or missing information regarding the beneficiary child, which posed issues in enumeration as well as issues in registration and cash reception.** About 2 per cent (20) of the originally sampled children were replaced during enumeration due to information errors (child’s name/age, parent’s name, address or other identifying information). These errors were also one of the main reasons that registered children did not receive the ERCTP (9 per cent of the total sample).

**Despite being moderately effective, behavioural change messaging had limited reach within the sample.** Less than one-fifth of the sampled primary caregivers reported being advised by officials to spend the cash for the child’s well-being or nutritional needs. Further, only 6 per cent of respondents recalled content from nutrition-conscious SMS messages.

## 9.2 Key Recommendations

- **Integrate the use of medium-term cash transfers through social assistance programmes into future humanitarian relief responses.** While Phase I of the ECTP met important basic needs in the time of emergency, Phase 2 addressed short- and medium-term needs that increased household resilience and decreased negative coping strategies. Even two years on, household budgets are continuing to face increased pressure as beneficiaries wait for housing reconstruction support. Thus, the risk of adopting negative coping strategies and other vulnerabilities is still present and must continue to be addressed.
  
- **Use the child registry and learnings from the ERCTP as a means of expanding the Child Grant to all children under five.** ERCTP has set the foundation for the expansion of the Child Grant through the creation of a near universal child registry in 11 districts. The

independent assessment has proved the beneficial impacts of the cash transfer on the livelihoods of households with children under five to contribute to policy advocacy for expansion. Lessons learned can be used by government and development partners to inform efforts to strengthen the social protection system for children.

- **Resolve the registration problems to improve social protection programme coverage in the future.** Previously, major contributing factors to the exclusion of children in the annual registration process were the lack of BRC documentation and the rigidity of the annual registration process. Although the ERCTP increased BRC coverage significantly, which will contribute to the future inclusion of more children under the GoN's Child Grant, limitations in registration were still present. Further, the ERCTP rolling registration process was limited in its success as heterogeneity in local implementation caused significant delays. Combined registration and cash distribution was successful and could be continued to maximize government human resources and minimize time and cost for beneficiaries. Implementation procedures should include management information systems so that child registry data can be digitalized for ease of registration and distribution for rapid implementation in times of disaster or economic stress.
  
- **Use identified successful modes of information dissemination at the local level to mobilize community networks to increase awareness of social protection mechanisms, promote availability and efficacy of complaint-reporting procedures, and encourage positive behaviour change.** Word of mouth, local officials and radio were the most successful means of information dissemination, while SMS had limited reach.

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## 11. Annexes

### Annex- I: UNICEF Monitoring and Evaluation framework

Intervention logic	Indicators	MOV	Risks and assumptions
<b>Goal:</b> Restoration of households livelihood and resilience through integrated approach that balances immediate needs and long term development path (UNICEF IR5.8, S3)			
<b>Objective</b>			<i>Outcomes to objectives</i>
Support the food-security, well-being and civil rights of more than 250,000 children under 5 years old in 11 earthquake affected districts	<ul style="list-style-type: none"> <li>Children's food-security is self-perceived by household as improved along at least two common indicators of quantity, quality, and diversity (target: &gt;60% of households)</li> <li>Living conditions of households with children under 5 is self-perceived as improved (target: &gt;60 % of households)</li> <li>Majority of children under 5 have a birth registration certificate (target: &gt;90%)</li> </ul>	<p>Ex-post evaluation including FGDs and case studies</p> <p>Household survey</p>	<ul style="list-style-type: none"> <li>Majority of targeted children's households are earthquake affected</li> <li>Households are poor and credit constrained</li> <li>Transfer income is adequate and used towards 'positive' ends in line with programme objectives</li> </ul>
<b>Outcomes</b>			<i>Outputs to outcomes</i>
Households are better able to meet the basic daily needs of children under 5 years of age.	<ul style="list-style-type: none"> <li>Majority of recipients allocate majority of transfer income to basic needs of targeted children, including food, clothing and medicines (target: &gt;50% of recipients / &gt;50% of transfer)</li> <li>Other use of transfer income is mostly towards collective household needs including essential household items, shelter maintenance or livelihoods (target: &lt;50% of remaining allocation)</li> <li>Mothers / primary caregivers of children have knowledge of nutrition-conscious messages (target: 50% of grant recipients can recall the message)</li> </ul>	<p>Household survey</p> <p>Evaluation FGDs and case studies</p>	<ul style="list-style-type: none"> <li>Markets are functioning</li> <li>Households use income to benefit both boys and girls under 5</li> <li>Use of transfer income to livelihood activities contributes towards household income and/or production of nutritious food</li> <li>No elite capture by community</li> </ul>
Households avoid or reduce reliance on coping strategies that are harmful to children	<ul style="list-style-type: none"> <li>Poorest households reduce distress sale of productive assets and accumulation of debt to meet basic consumption (target: 20% of household)</li> <li>Households with a child attending ECE are less likely to withdraw them in the short-term (target: 20% of households)</li> </ul>	<p>Household survey</p> <p>Evaluation FGDs and case studies</p>	<ul style="list-style-type: none"> <li>Transfer income is adequate to offset gains from harmful coping strategies</li> </ul>
District-level government has an updated and comprehensive civil registry of children under 5 years of age	<ul style="list-style-type: none"> <li>DDCs have collated paper records from all VDC / Municipal Ward Offices (Target: 11 DDCs)</li> <li>DDCs have digitised birth registration records into the management information system (Target: 11 DDCs)</li> </ul>	<p>Spot checks</p> <p>Review of government records</p>	<ul style="list-style-type: none"> <li>DDC has capacity to digitise records</li> </ul>

Intervention logic	Indicators	MOV	Risks and assumptions
<b>Outputs</b>			<i>Inputs to outputs</i>
Parents/guardians of eligible children receive cash transfers and nutrition messages of the right amount, on time and with dignity	<ul style="list-style-type: none"> <li>Take-up rate of children under 5 according to census data (target: 85% of children recorded in the census)</li> <li>Timeliness of payments (target: before 4 July 2016)</li> <li>Transfer amount received (target: 95% of recipients receive full amount)</li> <li>Experiences of transfer delivery (target:70% satisfaction)</li> <li>Incidents of intra-household and community tension related to the cash (target: none)</li> <li>Receipt of nutrition-conscious messages (target: 65% of total grant recipients)</li> </ul>	VDC/DDC registration and payment records Household survey Evaluation FGDs and KIIs	<ul style="list-style-type: none"> <li>No increase in local level corruption related to larger sums of cash</li> <li>No security threats to VDC offices / individuals related to larger sums of cash</li> <li>No increase in grant recipient's transport costs to VDCs</li> <li>Grant recipients are not displaced to the extent they are excluded</li> <li>The community accepts the rationale for the targeting approach</li> <li>Grant recipients have not lost (or can replace) ID/documentation</li> <li>Those with low/no literacy have access to radio or other aural information</li> </ul>
Parents/guardians of eligible children are aware of and have access to programme information and grievance and redress mechanism	<ul style="list-style-type: none"> <li>Knowledge of programme objectives and procedures (target: 85% of grant recipients are aware of eligibility criteria and correct payment amount)</li> <li>Incidence of contact with the grievance and redress mechanism (target: 50% of those who have a complaint had contact)</li> <li>Proportion of reported cases successfully resolved (target: 50 %)</li> <li>Knowledge of the grievance and redress mechanism (target: 50% of registered households)</li> </ul>	Household survey Evaluation FGDs and KIIs	<ul style="list-style-type: none"> <li>Social power dynamics do not preclude beneficiaries from complaining</li> <li>Those with low/no literacy have access to radio or other aural information</li> </ul>
Local government offices (VDC/Municipal Ward) verify or provide birth registration certificates to all eligible children	<ul style="list-style-type: none"> <li>All VDC / Municipal Ward Offices have a registry of children (target: 100%)</li> <li>All programme beneficiary children have a birth registration certificate (target: 100%)</li> </ul>	Spot checks Review of government records	<ul style="list-style-type: none"> <li>DDC provides sufficient forms and certificates</li> </ul>
<b>Inputs (programme components)</b>	<b>Activities</b>		<i>Specific input risks</i>
Budget transfer and distribution to beneficiaries	<ul style="list-style-type: none"> <li>All DDCs liquidate first round DCTs</li> <li>DDC requests funds from UNICEF; UNICEF transfers funds to DDCs</li> <li>DDCs transfer funds to VDCs</li> <li>VDCs plan and communicate payment dates through social mobilisers and to third parties</li> <li>VDCs distribute cash centrally, locally and direct to household where required</li> </ul>		<ul style="list-style-type: none"> <li>VDC/DDC reporting formats do not differentiate regular and top-up payments</li> <li>VDCs do not pass programme information to all channels and with sufficient time before payment dates</li> <li>VDC offices (infrastructure and human resources) are not</li> </ul>

	<ul style="list-style-type: none"> <li>- VDC/Ms send completion and remaining balance to the DDC; DDC reports and sends remaining balance to UNICEF.</li> </ul>	sufficiently functional following earthquake
Identification and registration	<ul style="list-style-type: none"> <li>- Census is complete and data is available to all VDCs and Municipalities</li> <li>- Registration cards are available to all VDCs and Municipalities</li> <li>- Registration of all children under 5/children born on or after 1 December 2010 according to census data</li> <li>-</li> </ul>	<ul style="list-style-type: none"> <li>- Exclusion of newly eligible persons</li> <li>- Ineligible beneficiaries on existing lists</li> </ul>
Programme communications	<ul style="list-style-type: none"> <li>- Produce and disseminate radio audio materials to radio stations</li> <li>- Produce and disseminate print materials to DDCs at orientations</li> <li>- Social mobilisers further disseminate programme information leaflets at local level</li> <li>- Agree information/messages: programme policy and procedures, text message system, grievance and redress mechanism, behavioural messages</li> <li>- Orientation of all VDC Secretaries and Municipal Officials</li> </ul>	<ul style="list-style-type: none"> <li>- All parties in the supply chain from UNICEF to local groups take responsibility for onward distribution</li> </ul>
Grievance and redress mechanisms	<ul style="list-style-type: none"> <li>- Information on how to complain through SMS-based monitoring system; programme communications (print and audio)</li> <li>- Existing VDC level grievance and redress mechanism in place</li> </ul>	<ul style="list-style-type: none"> <li>- All parties in the system understand and execute their roles and responsibilities</li> </ul>
Monitoring and evaluation	<ul style="list-style-type: none"> <li>- SMS-based monitoring system active</li> <li>- Round 2 monitoring (survey, Evaluation FGDs, KIIs, direct observation)</li> <li>- Sampling, monitoring tools and training (NEPAN team, UNICEF observers)</li> <li>- Evaluation of Round 1 and 2</li> </ul>	<ul style="list-style-type: none"> <li>- Local officials feel threatened by external monitoring (already communicate by MoFALD, also at orientations)</li> </ul>
Partnerships and coordination	<ul style="list-style-type: none"> <li>- Agreement with radio stations (through UNICEF Comms) (communications, complaints)</li> <li>- Service contracts with Nyaruqa and Focus one for RapidPro</li> <li>- Programme Cooperation Agreement with NEPAN (monitoring)</li> <li>- Agreement with MOFALD (cash delivery)</li> </ul>	<ul style="list-style-type: none"> <li>- PCAs are processed in sufficient time to ensure real time monitoring of distributions can take place</li> <li>- Capacity (administrative, technical) of local organisations to deliver</li> </ul>
Approvals	<ul style="list-style-type: none"> <li>- Signed approvals from MoF, MoFALD and UNICEF</li> </ul>	<ul style="list-style-type: none"> <li>- Cabinet office approval is not withheld / contrary to MOF approval</li> </ul>
Budget	<ul style="list-style-type: none"> <li>- Approvals from UNICEF</li> <li>- Detailed budget in place</li> </ul>	

Annex II: Selected Sample VDCs/Ms

<b>District</b>	<b>VDCs/Ms</b>
<i>Okhaldhunga</i>	Kalikadevi
	Raniban
<i>Sindhuli</i>	Bastipur
	Jalkanya
	Kamalamai Municipality
	Mahadevdada
	Ratnawati
<i>Ramechhap</i>	Bhatauli (Merged into Manthali Municipality)
	Gunsi Bhadaure
	Okhrene (Merged into Manthali Municipality)
	Tilpung
<i>Dolakha</i>	Chhetrapa
	Khopachagu
	Sunkhani
<i>Sindhupalchok</i>	Bhotasipa
	Gumba
	Listikot
	Selang
	Thumpakhar
<i>Kavrepalanchok</i>	Chandeni Mandan
	Ghartichhap
	Mahadevsthan Mandan
	Panauti Municipality
	Thulo Parsel
<i>Nuwakot</i>	Bidur Municipality
	Gorsyang
	Madanpur
	Suryamati
<i>Rasuwa</i>	Thulogaun
<i>Dhading</i>	Chhatredeurali
	Jharlang
	Kumpur
	Nilkantha Municipality
	Salyantar
<i>Makwanpur</i>	Basamadi (Merged into Hetauda Sub-Metropolitan)
	Fakhel
	Hetauda Municipality
	Kulekhani
	PadamPokhari (Merged into Hetauda Sub-Metropolitan)
	Tistung Deurali (Thaha Municipality)
<i>Gorkha</i>	Chyangli (Palungtar Municipality)
	Prithvinarayan Municipality
	Muchchok
	Taple

*Annex III: List of Field Enumerators*

<b>Dates of visits</b>	<b>Name of enumerators</b>	<b>District</b>
22 September 2016	Gorakh Bahadur Bogati	Sindhupalchok
22 September 2016	Basebin Wagle	Sindhupalchok
22 September 2016	Namaste Sayami	Kavreplanchok
22 September 2016	Pravin Kumar Dahal	Kavreplanchok
22 September 2016	Anil Thapa	Kavreplanchok
22 September 2016	Bal Krishna Sharma	Dhading
22 September 2016	Ajaya Thapa	Dhading
22 September 2016	Sunil Sapkota	Dhading
22 September 2016	Januka Neupane	Sindhuli
22 September 2016	Shova Rijal	Sindhuli
22 September 2016	Roslin Karki	Sindhuli
22 September 2016	Sarala Silwal	Ramechhap
22 September 2016	Pratigya Bogati	Ramechhap
22 September 2016	Urmila Khadka	Ramechhap
22 September 2016	Namuna Ulak	Okhaldhunga
22 September 2016	Kuberlal Giri	Okhaldhunga
22 September 2016	Shristi Basnet	Okhaldhunga
22 September 2016	Ramu KC	Gorkha
22 September 2016	Mohan Dhamala	Gorkha
22 September 2016	Bijay Kumar BK	Gorkha
4 November 2016	Gorakh Bogati	Rasuwa
4 November 2016	Basebin Wagle	Rasuwa
4 November 2016	Roslin Karki	Makwanpur
4 November 2016	Shristi Basnet	Makwanpur
4 November 2016	Namaste Sayami	Sindhupalchok
4 November 2016	Ramu KC	Sindhupalchok
4 November 2016	Januka Neupane	Sindhupalchok
4 November 2016	Sarala Silwal	Sindhupalchok
4 November 2016	Bal Krishna Sharma	Nuwakot
4 November 2016	Bijayakumar BK	Nuwakot
27 November 2016	Gorakh Bahadur Bogati	Dhading
27 November 2016	Bal Krishna Sharma	Dhading