

4th November 2020 Cash Hub Webinar Summary Points

Topic: CVA and Monitoring

| Speaker | Summary Takeaways |
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| <p>David Dalgado, Cash Hub, British Red Cross</p> | <p>Setting the scene for CVA and Monitoring</p> <ul style="list-style-type: none"> - Monitoring is important in all humanitarian responses, including those that utilise cash. We can monitor the process, so that we can improve how we deliver aid, and monitor what difference the cash has made, so that we can improve what we provide. Monitoring helps to understand whether the intentions and objectives of the programme are likely to be achieved, and subsequently what changes might need to be made to our programmes. - Cash (like in-kind) can impact markets, which will then have impact on both recipients and the wider community. In light of this we must monitor markets to ensure commodities and services are available to people at the right quality, quantity and price. In this way we can support the purchasing power those in need, enabling them to access what they need. - As with all programmes we will also want to monitor processes related to the programme: do recipients and non-recipients understand the selection process for the programme; how long did they wait for distributions, did they feel safe; did they know how to give feedback or report problems? - Monitoring must be built into any programme at the planning phase, when a logical framework is being established and we are considering indicators to measure the achievement of objectives. The aim is to understand the impact of what we are doing; coordinating with others wherever possible to avoid duplication of efforts and to ensure efficient use of time. Cash working groups normally support this stage of the planning process. - Within a CVA programme there will be different monitoring processes, and often a specific M&E plan will be developed, which will assign key tasks to different teams and set dates in the programme when the monitoring will be undertaken. - Both qualitative and quantitative data should be gathered in a CVA programme. A range of methods can be employed, from observations to household interviews to focus group discussions. It is good practice to develop a baseline and revisit this at a mid-point in the programme and at the end. |
| <p>Meircan Han and Alperen Açıkol Turkish Red Crescent (TRC)</p> | <p>Kizilaykart, Cash Based Assistance Programme</p> <p>Context</p> <ul style="list-style-type: none"> - Turkey hosts more than 4 million people under temporary and international protection, which includes individuals from 70 different nationalities. The Government of Turkey aims to support these individuals in continuing to live their lives in a safe and dignified way. This includes providing them with access to health, education and social assistance. - The Government of Turkey has integrated the refugee population into their own social protection system, and TRC is providing an auxiliary support role in case of emergencies. |

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| | <ul style="list-style-type: none">- The Kizilaykart which is a platform run by Turkish Red Crescent supports basic needs, education and livelihoods. This platform, built on an pre-existing social safety net programme for Turkish citizens and now expanded, enables vulnerable people to be added to integrated existing governmental and non-governmental social protection structure made up of different stakeholders. It also allows the integration of different stakeholders systems into one database which makes the response for data protection more reliable and efficient and supports programmes to deliver in a timely manner.- A joint mechanism has been established to implement several humanitarian programmes at the same time. These programmes are implemented with different stakeholders, different sectors, and different programme designs (including conditionality and transfer amount).- The Emergency Social Safety Net (ESSN) programme and Conditional Cash Transfer for Education (CCTE) programme are two of flagship cash programmes which fall under the Kizilaykart platform. With humanitarian social protection programmes it is important that they are built on existing, robust systems to ensure that they 'do no harm' and that they promote good social cohesion. <p>Monitoring and Evaluation</p> <ul style="list-style-type: none">- Due to COVID19 the TRC have needed to adapt their monitoring activities whilst ensuring the high standard of data collection is still maintained. This has meant that the COVID-19 safety risk management of the programme teams and beneficiaries (and COVID19 restrictions) strongly influence monitoring activities.- Their M&E mixed-method approach is delivered by two teams which work closely together, combining large-scale country wide quantitative data with locally collected programme data. <p>Field Teams responsibilities (focused on process monitoring and beneficiary monitoring) responsibilities include:</p> <ul style="list-style-type: none">- On-site and card distribution monitoring, stakeholder monitoring and the monitoring of the implementation of the programme.- Intensive tracking for verification of PDM participants, developed in collaboration with the World Bank. This particularly focuses on beneficiaries who do not respond to the normal PDM surveys.- Focus group discussions, the primary qualitative data collection tool used by the TRC field teams.- Data collection for impact evaluation and ad-hoc studies, designed specifically for the ESSN.- Household visits <p>Analysis Teams responsibilities (focused on impact evaluation and outcome monitoring):</p> <ul style="list-style-type: none">- Pre-Assistance Baseline and Post Distribution Monitoring, which includes pre-activity and post-activity surveys with beneficiaries. This helps to consider impact of the intervention.- Inter-sectoral Vulnerability Survey, this a survey designed in collaboration with IFRC which aims to measure the vulnerability of the refugee population in Turkey through an inter-sectoral approach. Normally multi-sector, but this time we went for an inter-sector approach. |
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| | <ul style="list-style-type: none"> - Ad-hoc studies/ in-house studies which include: COVID-19 Rapid Assessment; Livelihoods Transition of the ESSN; Debt, Savings, Gender and Cash Transfer surveys (looking at different variables to improve quality of indicators). <p>Impact of COVID19 on M&E activities</p> <ul style="list-style-type: none"> - The quantitative data collection was not greatly impacted by COVID19 restrictions, the TRC was already using large scale, remote phone surveys for monitoring, so this was not so impacted. - The qualitative data collection was impacted and so the TRC launched remote focus group discussions to collect this data. - For the remote FGDs the households were contacted in advance by teams and we informed them about the study. Then the teams dropped off the devices as needed (phones or tablets as appropriate) needed to participate in these remote discussion groups. - The advantages of this method of data collection include: maintains the do no harm principle, a COVID-19 safe method of data collection adapted to the “new normal”, innovative method, more inclusive, more diverse, and more comfortable for those involved. Inclusive and more diverse because normally we would call people to the same location but which has the potential to be a barrier for the elderly and those with disabilities. But with the remote FGDs these groups were better able to participate, it was also easier to have people of different provinces join the discussions. - The challenges and limitations include: this is a resource intense method for TRC teams, connection problems, delivering and collecting devices, since remote and people are not in one location it feels closer to an in-depth interview but not a normal focus group discussion, limited interaction between participants like normal FGDs, and it would not be suitable for every context as a strong mobile phone coverage with internet connection is required. So not feasible to do in all locations. |
| <p>Mulambwa Mwanang’ono, DM Manager, Zambia Red Cross</p> | <p>Emergency appeal response, CVA drought intervention in response to drought of 2018-2019</p> <ul style="list-style-type: none"> - At a national level the ZRC worked with the government, using a vulnerability assessment undertaken at the national level, to identify districts which were most severely affected by the drought. The Cash and Voucher Assistance (CVA) was designed as a drought response, with a focus on food security. - The ZRC then engaged with district level stakeholders to identify vulnerable local communities for response targeting, resulting in the identification of 4,000 households. However, over a million people were facing food insecurity related to the drought. - The ZRC undertook a feasibility study in preparation for the CVA, planning the response with information from this study as well as information from local stakeholders and government committees. Was CVA feasible in these areas. - Communities collaborated with the ZRC in the creation of the five-point selection criteria for the programme. The transfer amount was shared with communities prior to any cash distributions. Beneficiaries received an average of \$30 per month via mobile money cash transfers |

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| | <p>for 4 months, which has now been extended by another 4 months (covering Feb 2020- Jan 2021). This programme has been funded by the IFRC Emergency Appeal and the Netherlands Red Cross bilaterally.</p> <p>Price Monitoring of Markets</p> <ul style="list-style-type: none">- The ZRC undertook weekly price monitoring of markets throughout the programme, to assess whether the cash transfers were having an effect on key commodities within local markets.- They found that in the lean period there was a gradual rise in market prices, which was made worse by the outbreak of COVID19. There was a shortage of key commodities due to COVID19 and as a result prices increased, in some cases a price rise of 10-20%.- This rise in prices was compounded by the effect COVID19 had on household income generation, because of the restrictions on movement many households were unable to access their livelihoods.- The rise in commodity prices and the drop in household income had a severe effect on communities. The ZRC continued to distribute cash through the programme, completing post-distribution monitoring 10 days after each cash distribution. <p>Post Distribution Monitoring – beneficiaries and non beneficiaries</p> <ul style="list-style-type: none">- 10% of the 4,000 beneficiaries were sampled in the post-distribution monitoring. We used focus group discussions, key informant interviews and household surveys. Selected through random sampling. A further sample of non-beneficiaries from the community were contacted for key informant interviews.- We wanted to monitor process (whether the beneficiary was receiving the full transfer value as agreed) <p>Monitoring the effectiveness of the Financial Service Provider (FSP)</p> <ul style="list-style-type: none">- The ZRC also monitored the effectiveness of the FSP (the telecom company, which had involved buying and registering sim cards for 4000 beneficiaries) and the delivery of the cash transfers, including the performance of ZRC volunteers, staff and FSP staff on the ground. <p>Monitoring - General</p> <ul style="list-style-type: none">- For beneficiaries without phones we also bought handsets for volunteers to assist these beneficiaries access money using their sim cards.- Data was primarily collected from beneficiaries and then supported with monitoring data from non-beneficiaries from the community, in order to triangulate data between sources. Non-beneficiaries were particularly important because they had nothing to lose or gain since they were not part of the programme so it was useful to use their data to triangulate information.- As well as process monitoring we also wanted to find out what impact this programme was having on beneficiary lives, especially what they were doing with the funds.- COVID19 restrictions meant that ZRC could only meet with groups of less than 50, this resulted in several visits to the same communities thereby increasing the programme costs and time needed for both ZRC and beneficiaries during the distribution process. In response the ZRC changed the cash distribution schedule, giving a cash distribution of two months at one time in order to reduce the number of distributions and trips needed. |
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| | <ul style="list-style-type: none"> - The ZRC relied on local agents and volunteers to help support cash distributions. The aim of this was to decrease the movement of people coming from outside the communities, looking to prevent any spread of COVID19. <p>Lesson Learnt</p> <ul style="list-style-type: none"> - Modify operational plans to respond to COVID19, ensuring that communities are protected from potential spread of the virus. We also used the interactions with the community to spread COVID-19 public health messaging. - Ensure community engagement from the start, this will increase community buy-in, supported beneficiary selection, and flexibility when plans needed to be changed in response to COVID19. - There is a need for synergy and coordination. In the case of this programme the need for livelihoods support was high with many households identified as vulnerable however the ZRC did not have the resources to support all communities, in light of this there was a need for government and inter-agency cooperation, working together to address the needs of a large vulnerable population (that ZRC could not respond to alone). - Where possible use existing community structure to deliver programme, for instance the ZRC used community response and feedback mechanisms. The communities helped the ZRC understand how they exchanged messages within their local context, this was then built into the programme. - Clear communication and transparency with communities is essential, particularly with NS reputational management. - Post distribution monitoring enabled the ZRC to respond to the needs of the community and the changing situation with COVID19. The lessons learnt for the first phase have now been incorporated into the second phase of the programme. |
| <p>Michael Belaro, Regional Coordinator Cash Assistance, Asia-Pacific, IFRC</p> <p>David Dalgado, Cash Hub Team, British Red Cross</p> | <p>Grand Bargain – MPC Outcome Indicators, purpose and potential use in RCRC?</p> <p>What do we already have and already do?</p> <ul style="list-style-type: none"> - Many NS are already undertaking post-distribution monitoring (PDM) similar to the CPT Survey Template found in the Cash and Emergency Toolkit (M5_2_3_3). - The information collected in this survey and other PDM surveys allow the following data and information to be collected: verification of eligibility; respondents understanding of the selection criteria; whether the distribution process was appropriate; basic information on beneficiary cash expenditure; availability of market commodities; and whether respondents understand the feedback and complaints system. <p>Grand Bargain Multipurpose Cash Outcome Indicators</p> <ul style="list-style-type: none"> - This document was created in 2019 and is currently in its pilot testing phase. This document provides a core minimum group of indicators, some of which are cross-cutting and some of which are sectorial. - The document recognises that outcomes cannot be attributed to multipurpose cash alone. |

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| | <ul style="list-style-type: none"> - One example would be an education outcome, ‘percentage of households with school-age children with at least 1 school-age child who had to miss school because of costs associated with schooling (due to the recall period).’ <p>GB Outcome indicators, how can we use them?</p> <ul style="list-style-type: none"> - Where the respondent indicated that cash is being spent to meet a sectoral need then it may be worthwhile considering sectoral indicators. It is important to get help from sectorial specialists when formulating questions related to indicators for a specific context. - The scale of the information in your PDM needs to reflect whether significant corrective action can be taken and whether the CVA amount transfer was small in relation to the household expenditure. - It is important to get expert sectoral advice from members of your NS or from the IFRC in formulating sectoral PDM questions from the GB document. It is important that we are sensitive and clear in the questions we ask beneficiaries especially around protection issues such as negative coping mechanisms. <p>GB Outcome Indicators – what more is needed?</p> <ul style="list-style-type: none"> - PDM can only be pushed so far. If significant unmet needs are highlighted an updated needs assessment may be required. - The GB outcome indicator document misses some of the transformative elements of CVA, including the dignity and empowerment outcomes for beneficiaries. - It is important to allow respondents to share how CVA has impacted them by using open questions. We recommend allowing the beneficiary to explain ‘what the most important impact of the CVA has been for them’. - In a follow up email to this webinar interim guidance, created by the BRC Cash Hub and IFRC Asia-Pacific, will be shared. This document gives guidance on how to apply the GB outcome indicators and gives information on other helpful outcome indicators. |
| <p>Jo Burton, Global Cash and Markets Lead, ICRC</p> | <p>Improving expenditure monitoring of CVA</p> <ul style="list-style-type: none"> - Most agencies collect expenditure data as part of post distribution monitoring but it is often not nuanced enough to give useful information. An example is that say you undertake a survey and your find that 20% is spent on health care, it does not really tell you very much. Did they spend it on simply buying paracetamol, or did they spend on managing chronic disease management, or pay for invasive surgery or preventative care such as immunisations. - In ICRC we asked 10 of our country teams to collect more nuanced data, which highlighted the huge variations in expenditure across countries. Commonalities were that people spent on health, shelter, transportation, and communications as well as legal and administrative fees, as well as on the expected food and non-food items. So we found that more nuanced expenditure patterns could inform our programming well beyond what multi-purpose cash (MPCG) is normally intended for. - For example, in Nigeria where MPCG was given for basic needs, there was significant expenditure on immunisations for young children. Actually, in Nigeria immunisations for children under 5 should be free. So, the more nuanced expenditure data told us a lot about priorities |

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| | <p>but also about the functioning of the health care system, and potential problems. This data was passed to our health teams in order to be able to analyse the situation and discuss with the ministry of public health to try to better understand and resolve this issue.</p> <ul style="list-style-type: none"> - In order to collect more nuanced expenditure data, this requires breaking down expenditure categories. For example in health you might break down into: Preventative care (e.g. immunisations, etc.), Emergency care (e.g. surgeries etc.) Chronic disease management (e.g. chronic pain management, cancer, diabetes, HIV/Aids etc.), pregnancy management, psycho-social services, medicines for short term conditions etc. - For Shelter you could consider: rent, house repairs, utilities, solid waste removal. - The idea is to break down the expenditure data to something more useful to inform your programme with support from your sectoral colleagues. - This is <u>not</u> about asking more questions, but it is about recording the data in a more nuanced way. So when you ask about expenditure and a recipient says “I bought medicine to manage diabetes”, you don’t just tick a box on the form to say “health”, you tick a box to say “chronic disease management”. Since they didn’t just say health they told you some more useful details. Then share with your sector colleagues. - So a call to action: Collect more nuanced data on expenditure. Because it tells us about people’s priorities and it tells us about the functioning of society and systems which can lead to better programming and can improve our analysis and understanding of the functioning of societies and systems. |
| <p>Emma Delo, CVA Technical Team Manager, British Red Cross</p> | <p>Improving how we measure the contribution of multi-purpose cash to well-being</p> <ul style="list-style-type: none"> - Grand Bargain Outcome Indicators still very organised around sectors, and we know recipients and people don’t think in sectorial boxes. - So these are some of the words that people tell us that cash has made to their lives: Security, Safety, Choices, Well-Being, Empowered, Respect Dignity. But often we are not collecting this data for our cash operations. We also hear that people use the funds for things that are not traditionally associated with MPCG for basic needs, like saving for the future and tough times ahead. Or things that don’t appear for basic needs but they may improve the recipients standing in the community. So how can we better capture some of this information to ultimately improve our programming. - How can we claim that cash can promote dignity and choice and other aspects related to well-being when this is not what we are measuring. So together ICRC and British Red Cross decided to look more at well-being. - There is significant literature related to well-being in the development and social practice sectors. More limited literature from the humanitarian sector. - So to start to measure Well-Being we looked took from literature review and tried to adapt it to our work in the Red Cross Red Crescent |

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| | <p>movement, looking at Relationships, Dignity & Self-Esteem, Life Satisfaction, Health (including mental health), Aspirations, Community Integration. These are common areas on how to measure well being.</p> <ul style="list-style-type: none">- <i>Relationships</i>: we asked people to rank on a 1 to 10 scale their self-perception of their satisfaction with key relationships (spouse, family, community) before and after the assistance.- <i>Life satisfaction</i>: uses a self-anchoring striving scale where people were asked to imagine two extremes of the worst and the best scenario and then evaluation their own place between that at that specific moment in time. So people are deciding in their own context on the unit of measure and the two scenarios specific to them.. a ladder with steps numbered from zero at the bottom to ten at the top – the top represents the best possible life or you and the bottom represented the worst possible life. People are asked which step of the ladder they you feel their household stands at this time and on which step their HH might stand at 5 years from now. Responses were then classified into groups of thriving, surviving and suffering to be compared before and after the assistance.- <i>Aspirations</i>: Have we contributed to people achieving their own goals and aspirations? So people were asked to share their top 3 goals both for now and in the future and asked how far these had achieved these objectives.- <i>Dignity & Self-Esteem</i>: This was not tested in DRC as it has limitations. The indicator would look at negative coping mechanisms (generic and contextual list drawn up from the community) and whether they had been used in the last 6 months working on the assumption that these would have had a negative effective on their dignity and self-esteem and level of exposure to risk.- <i>Health</i>: Could use either a psychological indicator related to a depressing, anxiety and stress score or a functioning scale but only to be used if your have health experts in your team and if people are already reviewing psychosocial support.- <i>Community Integration</i>: Indicator is still being developed and not tested in DRC so far.- Initial findings from the testing: people often prioritised longer term investments (e.g. setting up a business, buying a piece of land) and whilst their basic needs were met their adjusted these basic needs sometimes.. MPC had a positive impact on peoples reported relationships and life satisfaction.- We would like to embed these indicators into baselines in future, and we would like to further field test these indicators that are being developed. Please contact Jo Burton or Emma Delo (via. helpdesk@cash-hub.org) if your National Society or programme is interested in exploring the use of them in 2021. |
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Prepared by Cara Wilson and David Dalgado based on what was said in the Webinar and the takeaways may not reflect the top takeaways of the speaker as they see them.