

Post Distribution Monitoring (PDM) Tool for CVA

What to keep in mind in regards to GBV risk and mitigation measures

This tip sheet aims to provide concrete recommendations to stakeholders implementing cash transfers, or third-party monitoring personnel, to ensure that gender-based violence (GBV) risk mitigation is mainstreamed throughout the monitoring of CVA programming.

For more comprehensive resources on CVA PDMs, please check the [Cash Learning Partnership Monitoring Guidance for CTP in Emergencies](#) or [CaLP Programme Quality Toolbox](#).

PDM is an important step in any CVA programming and has a key role in gathering valuable feedback on possible risks

associated with CVA, informing necessary program adaptations, as well as highlighting potential benefits and positive outcomes. The information gathered through PDM can be critical to adjust programming and therefore mitigate and prevent risks, including GBV risks.

This tip sheet focuses on typical PDM tools, which are quantitative household surveys with cash or voucher recipients shortly (1-2 weeks) after the receipt of their transfers. These surveys are very often performed by MEAL staff or third party enumerators and consist of a set of questions that are closed (yes/no or multiple choice) and addressed to the main recipient of the household.

Key considerations when designing the PDM

- Standard PDM are designed for the principal beneficiary (the head of household), and in many contexts these are male. Questions around risks are still relevant, however, it is important to add and contextualise a set of questions for female beneficiaries, especially if the CVA programming targets female head of household or other groups at risk. Therefore, make sure to add specific questions to measure safety, access, and accountability specifically toward women and group at risk (see suggested list of questions on page 2)
- Contextualize questions and wording: bear in mind how some women might interpret questions and the “space” they have to highlight any issues related to access or safety
- Pilot the PDM with a few recipients first (including female) and adjust wording/questions as necessary

Key considerations when administering the PDM

- Obtain consent before beginning any monitoring - make sure you explain why you are asking those questions and what you'll do with what you collect (improve your programming). Plan to get back to the communities with results to close the feedback loop.
- Frontliners / enumerators as well as anyone involved in PDM (and CVA in general) must be trained on PSEA¹ and have signed a Code Of Conduct²
- PDM questions should be asked by people who were not involved with the cash/voucher distribution/ implementation
- Aim for at least 50% of staff administering the PDM are female. Whenever possible, female staff should be the only ones to interview female beneficiaries.

Key considerations when analyzing data from the PDM

- Data collected should be disaggregated by gender, age and disability as much as possible. Interpretation of data looking at the difference in expenditure, access and safety considering the gender of the head of the household can provide useful information for programme adaptation.
- Results should be triangulated with data received via complaints and feedback mechanisms³ in addition to qualitative information received through one-on-one interviews with a sample of women, Focus Group Discussions (FGDs) especially with women, children or other groups at risk, and interviews with other key stakeholders such as community leaders and women's groups.

When clicking on the word icon you will find a list of potential questions to copy/paste in your own PDM questionnaire. Based on the context and the needs, add some or all of the questions and adapt wording accordingly

<https://bit.ly/3IZMiXJ>



-
- 1 PSEA - Protection of Sexual Exploitation and Abuse. Refer to the PSEA task force active in your country for training, referral pathways, etc. Or check [here](#) under "resources".
 - 2 A template of Code of Conduct can be found in this Toolkit.
 - 3 See "Women-centered CFM tool" in this toolkit for more details on complaints and feedback mechanisms.

FOR MORE INFORMATION PLEASE CONTACT HO-CVA@UNFPA.ORG

