

Post Distribution Monitoring and  
Outcome Monitoring  
Multi-Purpose Cash Assistance

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## Objective and scope

### Post Distribution Monitoring

Post-Distribution Monitoring (PDM) is a process-focused survey that intends to complement other beneficiary monitoring tools that focuses on short-term results. The PDM evaluates the effectiveness of delivered information, the distribution process, the beneficiary's level of comfort redeeming assistance and potential risks and/or challenges with accessing the assistance.

The PDM tool collects information on basic demographics, beneficiaries' understanding of the selection process, the accessibility and safety of distribution site and cash redemption points, the cash redemption process, decision making and spending of the assistance and beneficiaries' knowledge of the complaints and feedback mechanism. The information from this survey is used to assess and improve the procedures of cash distribution and to report to the program's implementers and donors. It also allows the program to identify and prevent any potential protection risks.

### Outcome Monitoring

Outcome Monitoring (OM) examines the conditions of beneficiary households (HH) at different stages of cash assistance. The OM measures the outcomes of a program and what impact they have changes in resources or behavior. It does not infer a causal link between the outputs of the program and the observed changes as these could be due to several other factors that are not considered. It is usually preceded by a baseline survey that gathers information about beneficiaries at the initial stages of a cash intervention.

The OM gathers demographic information and inquiries about beneficiaries' shelter conditions and their access to the assistance. Moreover, the OM explores the effect of cash assistance on the physical and material well-being of beneficiaries by monitoring expenditures, food security, and negative coping strategies. Beneficiaries' understanding of the complaints and feedback mechanism and overall safety when accessing assistance, is also considered. Tracking these components can inform implementers about the appropriateness of cash assistance, its impact on beneficiaries' wellbeing, and whether the amount granted is sufficient.

### Frequency

The PDM should be conducted after two to four weeks after the first cash payment. This timeframe is intended to be large enough that beneficiaries will have experienced redeeming and spending the assistance, but not too long that they would have trouble recalling the distribution session or redemption process.

The OM should take place every three to four months in order to avoid redundancy in findings, to ensure the best use of resources, and to prevent beneficiary survey fatigue. This timeframe is intended to be large to allow the cash assistance enough time to cause a noticeable effect on the living conditions of beneficiaries.

## Sampling

The sample for the PDM should consist of newly included beneficiaries who have recently received their first cash transfer. For OMs, the sample should be pulled from the agencies overall caseload. Simple random sampling is used and based on the following assumptions:

- Confidence Interval (C.I.): 95%
- Margin of error: 5%
- Design effect at 1%.
- Estimated % of population exhibiting the characteristic of interest: 50%
- Non-response rate (NRR): 30% if household visits; 40% for phone surveys

Using the above assumptions, it is possible to calculate the total sample size needed by entering the above assumptions including the total caseload and excluding the NRR into an online sample size calculator (e.g., <http://www.raosoft.com/samplesize.html>). To factor in the NRR in the needed sample, the sample size needed is divided by the response rate. For example, if the agency has a new caseload of 1000, using the above assumptions in the calculator will result in required sample size of 278. The sample size (278) is divided by the response rate (70%), resulting in the sample to be collected (397).

Since the NRR is factored within the sample, there is no need to replace the households that cannot be reached, in turn, reducing biases.

## Participants

For the PDM, is important that the participant is the same person who attended the distribution session and/or redeemed assistance. In the event that a third party (someone outside the household) redeemed the assistance on the family's behalf, specific questions in the PDM will gather information on this decision-making process.

The OM is best conducted with the head of household or someone who can provide sufficient information the families expenditures, food consumption and other detailed characteristics. The OM should be conducted with a households who has been able to successfully redeem the assistance over the concerned period of time.

## Procedure

The sample used pulled should include the respective phone numbers, districts, the gender of the HoHH, and the HH address.

A one day training is required for all enumerators involved in data collection. The training will cover the following topics:

- Objective of the exercise
- Tips (do's and don'ts) on quantitative data collection
- Informed consent (definition, purpose, text), recruitment script
- Tips for interviewer and note-taker

- Training on data collection software (if relevant)
- Brief overview on the sample
- Questionnaire
- Safe Identification and referral (for Gender Based Violence and Sexual Exploitation and Abuse)<sup>1</sup>

Data collection normally starts one day after the enumerators complete their training. Each team will consist of two enumerators. It is recommended that one male and one female attend, with one interviewing and the other recording notes and responses. As a first step, participants are called to be recruited for participation. The recruitment of participants will be based on a recruitment script that will outline the scope of the assessment, ask whether the participant is willing to participate, and set an appointment accordingly (See Annex A). Ideally, the assessment is conducted through face to face interviews. However, in case of any security concerns or resource constraints, phone interviews are an alternative. For higher quality and efficiency tablets are the recommended data collection tool, using data collection applications such as ODK Collect. In order to keep track of the interviewed participants a data collection sheet can be used to check off completed interviews and to note down the reasons behind incomplete ones. The sheet should be sent to the M&E focal point at the end of each data collection week.

### Informed consent

Informed consent is the process whereby the party undertaking the study gives participants enough information about the purpose and objectives of the study, as well as any potential risks, before gaining their consent to participate. According to the Institution Review Board, obtaining informed consent “is a basic ethical obligation and a legal requirement for researchers”. Before the start of each interview, enumerators are required to read out the informed consent to the participants. Informed consent reminds the participants of the study’s objectives, guarantees its confidentiality, and ensures participants that participation will have no impact on their inclusion or exclusion in the program. It should highlight any benefits accrued, whether direct or indirect. It also emphasizes that participation is voluntary and that participants have the freedom to withdraw at any point. Enumerators should also present their respective organization’s hotline number so that beneficiaries can follow up on any questions or complaints.

After communicating the above points to the participant, the team informs him/her of the approximate duration of the interview and finally asks if they agree to participate.

### Non-response

- If a household has relocated to an area outside the agencies operations scope, the assessment can be conducted over the phone. However, attention will need to be paid for the ability to merge phone data with household visit data.

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<sup>1</sup> Resources are available through the Inter-Sector and Protection Sector for partners who require support in GBV and PSEA training.

- For persons who did not respond or whose phones are closed or out of service, two additional attempts are made over the two following days, at different times (one on each day) before the participant is considered as a non-response. The status of each household is then updated onto the checklist used for tracking which HHs are called (Annex B).
- If the phone number in the sample is wrong, the line is no longer in service, the beneficiary has left the country, or passed away, the case is immediately marked as unreachable and flagged to implementers for follow-up and possible exclusion from assistance, if confirmed.

## Quality control mechanism

The M&E focal point at each agency is responsible for quality control. The agencies are to conduct daily data checks to monitor accuracy and consistency.

If data is collected electronically, the tool should be set up with specific restrictions to prevent incorrect entry (for example, for numerical variables). This will minimize the amount of incorrect data collected and ease the data cleaning process.

Upon the return of enumerators from the household visits, they will check, along with the M&E team leaders, all data entered for accuracy and consistency purposes before submission. Feedback is provided to the enumerators for improvement purposes if necessary. Furthermore, random spot checks are useful to ensure the quality of data collected, as well as the conduct of the enumerators. Based on the spot check, feedback is provided on the spot and a checklist is shared with the team for the overall evaluation (See Annex C).

An optional 10% verification on the sample may be conducted through phone calls after data collection is complete. This entails calling back 10% of visited households for verification of the data collected and the conduct of the enumerators. The phone calls are conducted randomly while ensuring representation from different areas and teams (if more than one team). The status of the quality control calls (also known as phone verifications) can be recorded using the quality control calls tracking template (attached in Annex D).

Following the completion exercise, post-data collection workshops can be held with enumerators to debrief on the tool and overall assessment to inform future iterations.

## Report writing

The below is a recommended structure for reports:

- Cover page
- Table of contents
- Executive summary
- Acronyms
- Introduction

The introduction should include a brief description of the program including its objectives, the amount of cash assistance, the selection process, the number of beneficiaries, and the geographical areas covered. It will also outline the objectives of the PDM.

- Methodology

- Participants → This section will include all the demographic data that was retrieved from the survey, i.e. the gender, education level, age, location, etc.
- Measures → This section offers a brief description of the PDM tools and explains the purpose of each theme explored. It also explains the PDM sampling methodology adopted.
- Procedure → This explains how enumerators were trained, the time taken to complete data collection, the duration of interviews and any issues faced in the field.

- Results

This section simply reports on all the results of the study while displaying the major findings in tables or graphs. It is concise because the interpretation of the results follows in a separate section.

- Discussion/Recommendations

This is where the results are analyzed and the implications for the program are explored. Based on each of the findings, and the program's objectives, the M&E team can produce actionable recommendations and general considerations that the implementers may need to keep in mind.

- Conclusion

- References

- Annexes

## Annex A –Recruitment Script

PDM:

Hello Sir/Miss,

We would like to inform you about the prospective study the [insert Organization] is aiming to conduct in the coming days. In order to understand how the distribution is working, we plan to conduct an assessment among beneficiaries of the program. We will be asking a series of questions related to card distribution process, assistance redemption and safety and security of accessing and using assistance as well as the uses of assistance. To improve our program, we would like to sit with you for approximately 30 minutes to discuss your experience with the distribution session and the withdrawal process.

Would you be willing to participate on [Date]? Can you please share the exact address of your location?

OM: Hello Sir/Miss,

We would like to inform you about the prospective study the [insert Organization] is aiming to conduct in the coming days. To understand how the assistance is impacting beneficiary HHs, we plan to conduct an assessment among beneficiaries of the program. We will be asking a series of questions related to debt, expenditure, food security, coping mechanism and access to needs. To improve our program, we would like to sit with you for approximately 45 minutes to discuss your experience with the distribution session and the withdrawal process.

Would you be willing to participate on [Date]? Can you please share the exact address of your location?

## Annex B – Data Collection Tracking Sheet

Phone Invitation Tracking Sheet					
Date	HH Case Number	Status	Date of Second Attempt	Date of Third Attempt	Comments
02/13/2017	XXC-XXXXXX	Complete			
02/13/2017	XXC-XXXXXX	Unreachable	02/08/2017	02/09/2017	Wrong Phone Number

## Annex C – Spot Check Checklist

Location:
Date:
Name of enumerator #1:
Name of enumerator #2:
Supervisor's name:
Supervisor's title:

### I. Conduct:

Did both interviewers attend the training?	Yes/No
Did the team introduce the organization?	Yes/No
Did the team read the consent form and take the beneficiaries consent before starting the interview?	Yes/No

Please fill in the following table according to the performance of the following tasks:

	Poor	Satisfactory	Good	Excellent
Both team members/casual workers conducting the interview with the beneficiary				
Team members exercise common courtesy upon entering the house; asking permission to enter, removing footwear, sitting at the same level as the respondent				
Team informing the household about the purpose of the visit				
Team talking to beneficiaries in a respectful manner				
Team remains completely neutral in conversation with the participant and shows no judgment (whether positive or negative)				

Team thanking the interviewee for his/her time before leaving the tent or house				
Team adhering to the agreed upon time set for the interview				

Please add comments (if any):

II. Data:

Did the team check the UNHCR registration paper?	Yes/No
Did the team conduct a verification?	Yes/No

Please fill in the following table according to the performance of the following tasks:

	Poor	Satisfactory	Good	Excellent
Team was familiar with the survey before conducting visits/ did not read out questions word for word				
Team asking the questions properly under the "Organization" section				
Team asking the questions properly under the "Understanding of the Program" section				
Team asking the questions properly under the "Information regarding distribution" section				
Team asking the questions properly under the "Distribution" section				
Team asking the questions properly under the "Access to ATM" section				
Team asking the questions properly under the "Withdrawal Process" section				

