GUIDANCE ON ESTABLISHING

# REMOTE MONITORING AND MANAGEMENT OF GBV PROGRAMMING IN THE CONTEXT OF THE COVID-19 PANDEMIC

WOMEN'S REFUGEE COMMISSION

WAR child CANADA

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## Purpose

This guidance brief aims to provide support to national, local and civil society organizations on the frontlines of gender-based violence (GBV) prevention and response on how to set up remote monitoring and management of their interventions.

## Introduction

As COVID-19 pandemic reaches new corners of the globe, its impact is compounded on already overstretched humanitarian operations in crisis-affected communities. In some settings, humanitarian assistance is being blocked as borders close and entire communities are quarantined, leaving populations without access to basic services, including water, food, healthcare and sanitation. Elsewhere, humanitarian operations are significantly reduced or completely halted as a result of government responses to contain and control the spread of the virus, including distancing measures, restrictions of movement, and in many cases, lockdowns.[1]

As humanitarian operations, including GBV support services, are reduced or halted, women and girls who are already at risk of GBV may be in even more dire situations. Emerging evidence suggests that incidents of GBV have increased since the outbreak of COVID-19.[2]

Remote monitoring and management of GBV programming is even more critical in the context of COVID-19. As humanitarian organizations and service providers adopt new models of working in these challenging contexts, this guidance brief provides an overview of what remote monitoring and management looks like in GBV prevention and response, along with key methods and tools; strategies and best practices in establishing a remote management structure; and options for mobile data collection for monitoring and evaluation (M&E) of GBV interventions.

## What is remote monitoring and management?

Remote management is the temporary or partial delegation of responsibility and decision-making to national staff, national organizations, or communities themselves, with financial oversight retained remotely, often by head/field office staff. Remote monitoring is the use of methods to review project progress data from locations separate from project sites. Combining these efforts, remote monitoring and management enables organizations to proactively monitor project activities, troubleshoot implementation

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1. Based on key informant interviews with key partner civil society organizations [from Afghanistan: AWEASO, CRSDO, GCPI, SSLRO, SVPO, TACT; from South Sudan: UNYDA] by the Women's Refugee Commission and War Child Canada, April 2020

2. Impact of COVID-19 Pandemic on Violence against Women and Girls, VAWG Helpdesk Research Report.

challenges, and inform or share decision-making with communities, without physically being present in the project sites.

Remote management places the responsibility for project management and monitoring in the hands of individuals and organizations that are most familiar with and accepted by communities to continue monitoring project activities while ensuring the safety of staff and participants.

Rather than being a "last resort" or temporary measure, remote monitoring and management is increasingly being used due to security issues, disease outbreaks such as COVID-19 and other challenges in accessing communities in conflict- or crisis-affected contexts. In the current COVID-19 context, even local organizations that are embedded in the communities they serve may not be expected to resume standard operations in the foreseeable future. Humanitarian actors, including local and national organizations, therefore, should consider adopting remote monitoring and management strategies as a permanent measure, not only for security or disease outbreak reasons, but as a broader aim to build local capacities among partner staff and community members as well as to strengthen accountability to communities themselves.

### Benefits and challenges of remote monitoring and management

There are many benefits to collecting and managing monitoring data remotely:

- Project staff and participants' safety may be increased as a result of not physically meeting to collect information, especially if the information they share is sensitive
- Geographic reach may be larger, particularly in restricted security contexts
- Costs and time taken to collect data may be reduced
- Fewer time delays between sampling and results
- Some data collection methods could encourage more participation and/or honesty in responses (if submitted anonymously)

Nonetheless, the lack of face-to-face communication can pose challenges as well. These may include:

- Upfront time investment, training and costs in rolling out remote monitoring and management
- Data security may be a concern as information is transmitted between the data collection point to technology platforms to the users
- Data accuracy may be compromised if remote monitoring systems are flawed in any way, or if project participants do not trust devices
- Cost of data collection devices

### Methods for remote monitoring and management

Methods to collect monitoring data remotely may include, but are not limited to:

- Key informant interviews
- Individual interviews
- Surveys and polls
- Feedback and complaints mechanisms
- Remote observations (or sensing) using GPS data, for example

### Tools for remote monitoring and management

Monitoring information can be collected applying some of the above methods through the use of technologies. Technologies can contribute to an increase in the quality of remote monitoring and management. Tools may include, but are not limited to:

- Cellular and smart phones with appropriate apps
- Internet conference technologies (such as Skype, GoToMeeting, Zoom, WebEx, etc.)
- Survey tools (such as Survey Monkey, Google Forms, Typeform, etc.)

See section on Mobile Data Collection on page 7 for more detailed options available.

**NOTE:** Technology allows organizations and partners to coordinate and maintain connection across distances, but its use may also come with added risks in these contexts, for example, high-visibility tech equipment could be subject to theft or GPS locations may pose threats if used against the populations. When warranted, use only low-visibility devices (e.g., low-cost smartphones) to reduce risk.

### Integrating community-based approaches in remote monitoring and management

Using existing community structures, such as community health workers and various committees, is an effective way to remotely monitor projects that do not include GBV case management. ***Organizations should never have community members manage cases of GBV or collect information from survivors directly unless properly trained and accredited (e.g., social workers, health workers living within the community)***. In cases where staff cannot reach or are not allowed to visit specific project sites (women's shelters for survivors, etc.) embedded staff from the community working at or managing the centers can provide monitoring data and a link for establishing remote management protocols. For project activities that are community based and do not directly target survivors, such as improvements to WASH or education infrastructure for GBV prevention, existing WASH committees or parent-teacher committees can help monitor the quality of implementation and project progress when staff are unable to regularly visit sites.

Involving women, girls, men and boys affected by GBV in the M&E of projects is not only good practice, it leads to more effective humanitarian response. Participation and part-

nership with the affected population is also ingrained in the **Accountability to Affected Population** commitments to use power responsibly by taking account of, giving account to, and being held to account by communities, and particularly by survivors of GBV. Finally, engaging affected populations also opens up the possibility for M&E to lead to authentic community ownership of progress on interventions and solutions to increase protection for those affected by GBV.

**Best practices for establishing community focal points:**

- Conduct a community scan of existing community groups and focal points. There are often groups and individuals already collaborating with various organizations, so it is best to map out what structures already exist and leverage those, rather than creating parallel systems in a community.
- Develop Memorandums of Understanding (MOU) and job or task descriptions for the role of the focal points, including clear boundaries of their roles if they participate in providing direct services.
- Have multiple contacts per location to ensure you can triangulate information easily.
- Provide training to community focal points in protection from sexual exploitation and abuse (PSEA), legal rights and basic legal frameworks, ethical approaches, concepts of M&E, and other topics relevant to the GBV programming to create awareness within the communities on their roles and responsibilities and in responding to protection concerns. If it is not possible to provide in-person training due to COVID-19, remote discussion on the topics can be done with key takeaways communicated to the focal points.
- Ensure that the community focal points' MOUs, training and collaboration with staff includes confidentiality and safety standards related to engaging with community members.
- Consider the focal points' gender, age and, if possible, disability, language, religion, ethnicity, and other social markers. It is best to have a diverse set of focal points to ensure equal opportunity for different voices to be heard. If a group is selected as a focal point, encourage the group composition to reflect the community as closely as possible, recognizing the need to protect individuals from being stigmatized if part of a minority group.
- Discuss the types of activities you will support the community with so that the community monitoring focal points know what type of information is of interest and feasible to monitor.

- Ensure that the community monitoring focal points participate in community mobilization and awareness activities so that they are visible in the community in their roles.

- When carrying out physical site visits is appropriate, conduct both scheduled and unannounced visits to communities. Scheduled visits can be useful when community mobilization is needed; however, unannounced visits can help staff gain a natural understanding of project progress and reduce the possibility for false reporting and presentation.

**Example of community focal point responsibilities:**

- Manage complaints and feedback on project activities
- Collect information on activities (numbers, quality)
- Collect new assessment data from communities on their needs
- Provide input on project design and locations to ensure effectiveness
- Identify programming gaps and capacities for improvement

**Key principles of remote monitoring management**

The safety and security of GBV survivors and survivor data is of the highest concern in monitoring GBV interventions. Data security risks can exist in mobile data collection, just as in paper-based data collection. Organizations should establish a data protection plan for their mobile data collection devices. In addition, the following are key principles in remote management and monitoring of GBV programming:

- Invest in training to enable staff and community focal points to fulfill their remote monitoring and management responsibilities, including in how to use technologies and how to gather and report on the data ethically.

- Develop a clear framework detailing monitoring, reporting, and communications modalities and frequencies for the project – regular communications are essential for remote monitoring and management and should be added to the project M&E plan.

- Integrate qualitative methods in data collection. This will provide space for GBV survivors to tell their own stories, and will provide space for program staff to describe the project implementation process (successes and areas for improvement).

- Maintain the safety and confidentiality of survivors – photos and video should NOT be used for monitoring of GBV interventions unless it is for non-personal project activities such as infrastructure construction monitoring.

- Share findings from remote monitoring activities with the communities, while carefully mitigating any risks that sharing these findings may pose among survivors. All information must be handled in a way that is driven by the affected populations.

| Case examples of remotely collected data within GBV prevention and response interventions: |
| --- |
| A pilot organization working with War Child Canada conducts regular interviews by phone with women's center managers to collect information from locations inaccessible to some project staff and to maintain privacy of the center locations. |
| Utilize Community-based Protection Mechanisms (CBPMs)[3] to identify and report incidents to police or through other safe means for survivors. CBPMs are groups of community members trained on topics such as trafficking, child abuse, PSEA and legal rights in a community. CBPMs coordinate over the phone with the project team through bi-weekly coordination meetings, sharing the protection issues in the community. They also identify and refer GBV and child abuse survivors' cases to the project team and other service providers to provide free/pro bono legal aid and psychosocial services if the case is not settled within the community through alternative dispute resolution. CBPMs are supportive mechanisms for the remote implementation of activities and are a very strong link between the project team and the community. CBPMs carry out active surveillance of child protection and GBV issues and address them at the community level as well as in cooperation with larger organizational networks. They are active mediators and play a key role in the resolution of non-criminal cases using the informal justice system at the community level and provide reports to the project staff. Meanwhile, they coordinate with police to receive their support for investigating any criminal cases. |
| Community Mobilizers conduct assessments over the phone with CBPMs in order to obtain the most urgent needs related to COVID-19, including community members' awareness and understanding of the disease, the effects it has had on their livelihoods and what organizations can do to help them in the short term. |

3. CBPMs are trained community groups who conduct outreach awareness raising and identifying protection violations while working with their local authorities where necessary. The end result are community-led initiatives to create a supportive environment and more security in the communities for marginalized populations.

## Mobile data collection for project monitoring & evaluation

Mobile data collection (MDC) is the use of tablets, smartphones, or other devices to collect monitoring data that might otherwise be collected via paper-based data collection tools or face-to-face dialogue. In restricted and remote environments, it is not always possible to use MDC for various reasons (capacity, culture and acceptance, resources) and therefore it is best to consider whether using MDC is sustainable over the course of a project or portfolio of projects before investing in the equipment and human resources. However, in exceptional circumstances when other options are not possible using MDC discreetly and relying on community focal points can be effective to capture data.

Some of the advantages of MDC are: improved data quality (reduced human error and quality control); safe storage on cloud-based platforms; improved data safeguarding; real-time data analysis; capacity-building for field-based staff; expanded remote monitoring capabilities.

All relevant platforms are online-offline capable, meaning one can download the survey form on a phone while on Wi-Fi, capture a vast number of finished surveys on the phone in remote and offline locations, and subsequently upload all of the data when back on Wi-Fi. No constant network is required. Android smartphones (v4.0+) are the industry standard as most open-source platforms require Android devices for compatibility reasons.

There are a multitude of both open-source and commercial options for MDC platforms. The following list includes some established options that are free or low cost:

**KoBo Humanitarian Toolbox** – Created by the Harvard Humanitarian Initiative and supported and hosted on Amazon Web Services by UN OCHA, this is free to use for all humanitarian organizations. Widely used as a community standard and fully integrated with Open Data Kit (ODK) and XLSFORM survey coding (the method for coding surveys in Excel). The app can be found on Google Play.

- Main support site for any questions you may have <http://help.kobotoolbox.org>
- XLSFORM Coding Support <http://xlsform.org>
- A strong community based around Open Data Kit and XLSFORM <https://forum.opendatakit.org/>

**Open Data Kit Aggregate (ODK)** – The original open source platform for MDC. It requires installation to a cloud-based service such as Amazon Web Service or Google Cloud. More difficult to use than KoBo and less supported with updates currently. The application can also be found on Google Play and resembles KoBo.[4]

4. Note that accessing the Google Play store requires setting up a Google Account with an email address; it is recommended to make a non-specific email address (e.g. Gmail address) that is just used for this purpose.

**Ona** – A commercial solution with a monthly service fee from US$0 to US$200 per month. The MDC service falls under a larger umbrella of services available through Ona, some of which might be relevant and useful for GBV prevention and response programming, such as Facebook Messenger and SMS integration, OpenSRP for Frontline Healthcare workers and Canopy for a larger data management platform. It has similar types of applications and features to KoBo or ODK, but if you are looking for other M&E services to complement the MDC, Ona may be an option.

**Commcare** – A multi-purpose case management MDC platform, it has been used for mHealth, SGBV, distributions, agriculture, livelihoods and a large number of other case management purposes. It has a cost to use through Dimagi and therefore should only be used if your purposes for MDC go beyond one-way data collection that open-source platforms can provide.

**WhatsApp/Signal** – Free encrypted messaging apps that can be used on your phone to communicate with others. The account is connected directly to a national phone number but costs nothing outside of data costs to use. This is often more cost effective and sustainable than toll-free lines for organizations to set up. See the resource section for more guidance and support on the selection and use of these messaging apps for remote monitoring initiatives.

### Data safeguarding for mobile data collection

As with paper-based collection of monitoring data, MDC requires specific security measures to be put in place to avoid sensitive information from being leaked, misused or misrepresented.

When setting up smartphones for collection of monitoring data, ensure the following are completed:

1. Use "Surelock" or other applications to prevent data collectors from downloading apps and using the devices for personal use, which can lead to viruses and other damage to the device.
2. When connected to the online platform, ensure a username/password is required for uploading any completed surveys to the platform from the phone.
3. Turn on the feature to remove data once uploaded in the MDC application to prevent sensitive information remaining on the phones.

4. Develop a set of logistical guidelines for the management, transport, storage and maintenance of smartphone devices (locked at night, transported in NGO vehicles only, signed in-out each day by staff, etc.)

5. Develop routine maintenance plans and updating to be done by a designated M&E, IT or administrative staff, as most apps applications and devices require regular updates.

6. Establish a set of rules on password protection and management of the online platform account (ensure one person is in charge of the administrator account).

7. When phone apps such as WhatsApp are used as community feedback mechanisms or 2-way channels for receiving sensitive information from focal points in the field they should be password protected. Google Play has dozens of app locks available to use and some phone manufacturers provide their own app lock options to use.

8. Devices being used for communicating with survivors or gathering other sensitive information on WhatsApp and similar applications should not be personal devices of project staff. You should take every step possible to have separate mobile phones and numbers used for work purposes. Practitioners should review the case management guidance below in the resource section for further safeguarding measures recommended by the GBV AoR.

**Further resources:**

**Case Management, GBVIMS/GBVIMS+ and the COVID-19 pandemic**

**GBV Case Management and the COVID-19 Pandemic**

**International Rescue Committee. Mobile and Remote GBV Service Delivery.**

**Tearfund. Monitoring and accountability practices for remotely managed projects implemented in volatile operating environments. 2012.**

**UNICEF. Inter-Agency Guide to the Evaluation of Psychosocial Programming in Emergencies. 2011.**

**UNFPA. Minimum Standards for Prevention and Response to Gender-Based Violence in Emergencies.**

**Inter-Agency Standing Committee. Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery. 2015.**

**Humanitarian Futures for Messaging Apps**

**Handbook on Data Protection in Humanitarian Action**

**Feedback Mechanisms in the Former Yugoslav Republic of Macedonia: Designing and Implementing a Feedback Mechanism to Adapt Humanitarian Programming to the Needs of Communities**

**Not Just Hotlines and Mobile Phones: Gender-based violence service provision during COVID-19**

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