Assessing and Mitigating Risks of Gender-Based Violence in Cash-based Interventions Through Story: A Focus Group Discussion and Interview Guide

This tool should be used in accordance with Assessing and Mitigating Risks of Gender-based Violence: Guidance for Cash Providers and in alignment with existing guidance and tools on cash, protection, gender, and GBV.
Steps for facilitators

1. Read introduction (Section I)
2. Read GBV messages/obtain consent (Section II)
3. Read appropriate story for group/individual (Section III)
4. Ask questions/facilitate discussion (Section IV)
5. Read closing messages/communicate referral pathways (Section V)

Speak in a language everyone understands and determine if anyone requires sign language interpretation.

Section I. INTRODUCTION

- Hello. I am [insert name] and I will be facilitating. [Insert name] will be taking notes. We represent [insert service provider]. [Insert service provider] is a humanitarian organization working in [insert location] to provide services to communities affected by conflict and crisis.
- Today [insert service provider] is doing research to improve its programming and wants your help to understand how cash programming can be as safe as possible for [insert sub-population].
- We will be talking about violence and risks that [insert sub-population] in [insert location] could face. [Insert service provider] wants to make sure risks for [insert sub-population] are prevented and reduced. For focus group only: This focus discussion group will take 1 hour. For Interview only: This interview will take 30 minutes.
- I will read a fictional story of a [insert sub-population] in a community like yours. Then I will ask you questions about what could happen and the group will discuss. Please remember that the characters in the story are not real members of your community but examples for discussion. You can choose to answer from personal experience, if you like.
- If you feel uncomfortable, please feel free to leave anytime and [insert referral pathways].
- For focus group only: All of you are important in this discussion and all your voices are of equal value here. We encourage everyone to share their views. Do you all agree that everyone is important, and all voices are of equal value here? Continue when everyone agrees. Do all of you agree to keep others’ participation and answers confidential? Continue when everyone agrees.
- We will take notes, but we will not write down names. Your participation and your comments are confidential. It is important that you feel safe and free to talk.
Section II. DISCUSSING GENDER-BASED VIOLENCE & OBTAINING CONSENT

**Tips for the assessment focal point:** Explaining GBV is critical for the consent process. Explaining GBV as a violation of rights can help facilitate discussion in contexts where GBV is sensitive and normalized. In consultation with local staff/data collectors, build consensus on the best translation of GBV, and adjust the messages as needed for context.

**Tips for the facilitator:** Read the appropriate GBV messages for the group or individual being consulted (e.g. read the adult messages in FGDs or interviews with women and men; read the adolescent messages in FGDs or interviews with girls and boys; when sampling LGBTI individuals, use the adult or adolescent messages as appropriate and read the LGBTI-specific messages).

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**ADULTS**

- Gender-based violence (GBV) is violence that happens because of the different roles and behaviors that society expects of women, men, girls, and boys.
- Most violence happens against women and girls, but violence can also happen to men and boys.
- GBV can be physical, sexual, verbal, psychological or economic violence.¹
- Physical violence might include beating—including by a partner—and limited freedom of movement because of what is socially expected of them as a female or male.
- Sexual violence might include sexual assault, rape—including by a partner—groping, and harassment.
- Verbal violence might be sexual harassment, intimidation, and insults because of what’s socially expected of them as a female or male.
- Psychological violence might be threats, humiliation, mocking, and controlling behaviors. It might be making someone feel less important because of their gender.
- Economic violence might be discrimination, like denying a person an education, a job, wage theft, access to credit, access to the marketplace, or forced marriage because of their gender.
- GBV can happen anywhere – at work, at home, in the street, in the market — anywhere!
- GBV can happen between partners or family members, or with neighbors, friends, or strangers.
- Everyone has the right to a life free of violence.
ADOLESCENTS

- Gender-based violence (GBV) is violence that happens because of the different roles and behaviors that society expects of women, men, girls, and boys.
- Girls and boys may be safe or vulnerable in different places, doing different activities, with different people, at different times of day, or because they are girls and boys and do not fit into ideas of what a ‘real boy/man’ or ‘real girl/woman’ are and what is expected of them by their family and community.
- Most violence happens against women and girls, but violence can also happen to men and boys.
- GBV can be physical, sexual, verbal, psychological, or economic violence.
- Physical violence might include beating—including by a partner—and limited freedom of movement because of what’s socially expected.
- Sexual violence might include sexual assault, rape—including by a partner—groping, and harassment.
- Verbal violence might be sexual harassment, intimidation, and insults because of what’s socially expected of them as a female or male.
- Psychological violence might be threats, humiliation, mocking and controlling behaviors. It might be making someone feel less important because of their gender.
- Economic violence might be discrimination, like denying a person an education, a job, wage theft, access to credit, access to the marketplace, or forced marriage because of their gender.
- GBV can happen anywhere – at work, at home, in the street, in school, in the market — anywhere!
- GBV can happen between partners or family members, or with neighbors, friends, or strangers.
- Everyone has the right to a life free of violence.

ADDITIONAL MESSAGES to INCLUDE WHEN CONSULTING LGBTI INDIVIDUALS

- Sexual and gender minorities might experience violence because they do not fit into ideas of what ‘a real’ woman, man, girl, or boy is. [Insert lesbian, gay, bisexual, transgender, intersex] individuals may be safe or unsafe in different places, doing different activities, with different people, or at different times of day, because they are [insert lesbian, gay, bisexual, transgender, intersex].

- We will be talking about violence and risks that [insert sub-population] living in [insert location] could face if people receive cash assistance for the purpose of making the safest program possible.
- You are free to participate or not participate. [Insert service provider] is not giving anything in exchange for your participation. If you decide not to participate, or stop participating at any time, this will not change your eligibility for humanitarian services in the future from [insert service provider] or any other service provider.
- Do you understand the purpose of the discussion? Wait for participant(s) to demonstrate that they understand.
- Do you agree to participate? If participant(s) agree, continue. If any participant in the focus group does not agree, politely invite them to leave and continue the activity with everyone who agrees. For interviewees, if consent is not obtained, do not proceed with the interview.
- Do you have any questions? Answer any questions. If you have any concerns, please feel free to contact me at the end of the conversation.
### Section III: A MENU OF STORIES

<table>
<thead>
<tr>
<th><strong>Tips for the assessment focal point:</strong></th>
<th>Adapt the menu of stories as needed for context (e.g. sampling, names, pronouns, displacement setting and trajectories, etc.). Add or remove stories per sampling.</th>
<th><strong>Tips for the facilitator:</strong></th>
<th>Read only the appropriate story for the sub-population being consulted in the FGD or interview (e.g. if facilitating a FGD with women, use story A; if the FGD is with women with disabilities, use story B, etc.)</th>
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**Story A: Women**

Halima, her husband Abdi, and their three children left [insert X] several months ago, and traveled to [insert Y] via [insert Z]. Abdi used to own a profitable grocery store. Now he lost his store, all his stock, and their family used all of their savings to get to [insert Y]. They rely on handouts from their host family and their new neighbors to survive, but in recent days, the host community is getting frustrated that there are so many [insert refugees or IDPs] in [insert Y]. Abdi has tried to find work but hasn’t had any luck. Every week Abdi gets more frustrated that he can no longer provide for his family. Halima found work helping a wealthy family cleaning and cooking and looking after their children. Halima travels long distances and often comes home late at night. A service provider has selected Halima to be a cash recipient.

**Story B: Women with disabilities**

Dima and her family fled [insert X] and came to [insert Y] 6 months ago. Dima is deaf, and used to work with her husband on their farm. They no longer have land to farm and Dima can’t find work because the farmers here prefer to recruit people without disabilities. Her husband and their oldest daughter now sell goods in the market. Dima works around the house cleaning, cooking, and doing laundry. When she goes to fetch water, she feels nervous that strangers might approach her. A service provider has selected Dima to be a cash recipient.

**Story C: Women caregivers of persons with disabilities**

Raya and her family came from [insert X] to [insert Y] six months ago. Raya has a son with a disability. He is no longer going to school because they can’t afford tuition and even if they could, the school in [insert Y] isn’t able to meet his needs. They live a long way from specialized health services, which has increased their transportation costs. Raya had to take a loan to meet their basic needs and to purchase stock to start trading in the market. Raya pays different people to care for her son while she goes to the market to earn a living and to repay the loan. On the way to the market, and when she is traveling back home, she is often harassed for being [insert IDP or refugee]. A service provider has selected Raya to be a cash recipient.

**Story D: Adolescent girl, unmarried**

Amina is 16 years old. She and her family are from [insert X] and came to [insert Y] 6 months ago. In [insert X], Amina used to go to school. Amina’s parents are working hard selling vegetables in the market. She hopes that soon she can return to school. While her parents are out, Amina takes care of her younger siblings, and cooks and cleans for her family. Both her mother and father praise her for contributing and often tell her she will make her future husband happy. Sometimes a neighbor watches Amina’s siblings and she does house work for a wealthy family in town. A service provider has selected Amina’s family to receive cash assistance.
### Story E: Adolescent girl, married

Aisha is 16 years old. She and her husband’s family are from [insert X] and came to [insert Y] 6 months ago. Since they moved to [insert Y], Aisha’s husband, his father, and his brother haven’t been able to find work. Every evening they come home frustrated. Aisha is pregnant with her first child and helps her mother- and sister-in-law clean, cook and look after her husband’s younger siblings. Her mother-in-law is bossy and is always telling Aisha she must protect her reputation and be careful around strangers – she means the host community, but also other [insert refugees or IDPs]. Mostly, Aisha stays at home but sometimes goes out to fetch water. A service provider has selected Aisha’s family to receive cash assistance.

### Story F: Unaccompanied girl

Noor is 17 years old and traveled from [insert X] to [insert Y] with her younger sister Dina, age 15. They were separated from their mother along the way to [insert Y]. Each day, they beg in the market or do manual labor to afford a bit of food. At night, they stay with host or other [insert refugee or IDP] families who take them in. Sometimes they are all alone and feel afraid being so exposed. One of the families they stayed with suggested that their 25-year-old son marry Dina. One of their neighbors told them he knows a safe route to get to [insert Z], where they believe their mother is now, but it will take more money than they have left. A service provider has selected Noor to be a cash recipient since she has no parents and is the head of household.

### Story G: Men

Mohamed and his wife Zaineb left [insert X] and moved to [insert Y]. Mohamed left behind a profitable farm. His land and tools are lost. He and his family used all their savings along the journey to [insert Y]. Mohamed has struggled to find work in [insert Y]. He has tried to take a loan from the local money lender to rent a plot of land, but so far, he hasn’t been able to access credit. Mohamed does not have the necessary documents, and because he is a [insert refugee or IDP], they don’t trust that he will stay in [insert Y] long enough to pay back the loan. A service provider has selected Mohamed to be a cash recipient.

### Story H: Men with disabilities

Abdullahi, his wife Rahma, and their three children left [insert X] several months ago, and traveled to [insert Y] via [insert Z]. Abdullahi used to own a profitable grocery store. He was injured when their village was attacked and lost his store and all his stock, and their family used all of their savings on his medical bills. They rely on handouts from their host family and their new neighbors to get by, but lately, there has been tension between [insert refugees or IDPs] and the host community. Due to his permanent injury, it is difficult for Abdullahi to leave the house, and he can no longer work to support his family. Rahma found work helping a wealthy family in town cleaning and cooking and looking after their children. Abdullahi’s daughter no longer goes to school, and instead stays at home to manage the household chores and help Abdullahi. A service provider has selected Abdullahi to be a cash recipient.

### Story I: Men caregivers of persons with disabilities

Rami and his family came from [insert X] to [insert Y] six months ago. Rami has a son with a disability. He is no longer going to go to school because they can’t afford tuition, and even if they could, the school in [insert Y] isn’t able to meet his needs. They live a long way from specialized health services, which has increased their transportation costs. Rami had to take a loan to meet their basic needs and to purchase stock to start trading in the market. Rami pays different people to care for his son while he goes to the market to earn a living and to repay the loan. On the way to the market, and when he is traveling back home, he is often harassed for being [insert a refugee or an IDP]. A service provider has selected Rami to be a cash recipient.
### Story J: Adolescent boy
Malik is 16 years old. He and his family are from [insert X] and came to [insert Y] 6 months ago. Earlier this year, Malik was in school and worked on his family’s farm after school, on the weekends, and during holidays. Now Malik can no longer go to school because his family lost their livelihood and they have no source of income. Malik goes with his father every day to look for work. Sometimes Malik works with his father doing construction, and other days they unload boxes when the local trader receives a shipment. Sometimes there is no work at all and they feel frustrated that they have been harassed at the checkpoints without even being able to provide for their basic needs. A service provider has selected Malik’s family to receive cash assistance.

### Story K: Unaccompanied boy
Nader is 17 years old and traveled from [insert X] to [insert Y] with his younger sister Dina, age 15. They were separated from their mother along the way to [insert Y]. Each day, they beg in the market or do manual labor to afford a bit of food. At night, they stay with host or other [insert refugee or IDP] families who take them in. Sometimes they are all alone and feel afraid being so exposed. One of the families they stayed with suggested that their 25-year-old son marry Dina. One of their neighbors told them he knows a safe route to get to [insert Z], where they believe their mother is now, but it will take more money than they have left. A service provider has selected Nader to be a cash recipient since he is the head of household.

### Story L: Individual engaged in sex work
Fatima is a 29-year-old woman from [insert X]. She left [insert X] last year right after her husband died and she now lives in [insert Y]. She has 2 children, ages 2 and 7. She wants her older child to stay in school and needs to afford medicine for her youngest child’s health problems. Fatima sells vegetables in the market, but she doesn’t earn enough to pay for food and medicine, so she has begun selling sex to a couple of men in her neighborhood. She does this a couple of times a week at nighttime so that nobody sees her and she can care for her 2-year-old during the day. A service provider has selected Fatima to be a cash recipient.

### Story M: Gay man
Samir is 26 years old. He came alone from [insert X] to a camp in [insert Y] 6 months ago. He has not had any contact with his family since his parents kicked him out of their home when they found out his sexual orientation (i.e. he is attracted to other men). He is constantly threatened with being beaten up or killed by other young men because they know or suspect he is gay. He lives in fear, and avoids leaving his shelter. Nobody will hire him because they suspect he is gay and do not want to draw attention to themselves, so he has no way of earning money. He is struggling to pay for his basic needs and wants to move to the city. He hopes to have a better life. A service provider has selected Samir to be a cash recipient.

### Story N: Transgender woman
Tamara is 26 years old and traveled from [insert X] to [insert Y] 6 months ago. Recently Tamara came out as transgender (she was assigned male at birth but identifies as a woman and has started to present herself in this way). She regularly experiences bullying and sexual harassment from her landlord and on the bus when she goes to the market. She is struggling to find a job, since she was fired for being transgender. Tamara would like to move in order to get a fresh start, but she doesn’t even have enough money for food. A service provider has selected Tamara to be a cash recipient.
**Story O: Intersex boy**

Hassan is 15 years old and came to [insert X] from [insert Y] with his family 6 months ago. He and his parents know that he was born with ambiguous genitalia (intersex). Hassan was raised and identifies as a boy. His parents cannot afford to send Hassan to school, so he works alongside his father every day to pay for food and rent. While Hassan was helping his father to unload some boxes, he got a hernia. The doctors determined he needed surgery, but when they saw that his anatomy is not clearly male, they insisted that Hassan was a girl and that he needs ‘corrective’ surgery to make him female. Hassan and his parents did not agree to this and the doctors refused to perform the hernia surgery. Hassan’s parents found another doctor who can perform the hernia repair, but they don’t have enough money to pay for the treatment. A service provider has selected Hassan’s family to be a cash recipient.

### Section IV: DISCUSSION QUESTIONS

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<th><strong>Tips for the assessment focal point:</strong></th>
<th><strong>Tips for the facilitator:</strong></th>
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<tr>
<td>These questions are modular and should be used to bridge gaps in assessment methodology and tools. Where there is duplication, remove questions from the guide. During the emergency phase and/or in a rapid-onset emergency, prioritize questions 1D, 1E, 2, 3, 7, 8, 9, 11, 14A, 14B, 15A, 15B, 20, and 22. Consider adapting these questions using Participative Ranking Methodology, and conduct follow-up consultations with a comprehensive list of questions later on, when feasible. During the early recovery phase and/or during a protracted emergency setting, prioritize a comprehensive list of questions. In consultation with local staff/data collectors, adjust the questions, prompts, and phrasing as needed for context, sampling, and to best facilitate discussion about GBV. Consider a skip pattern for adolescents. Consider changing the order of the questions so that the most sensitive questions come first or are last.</td>
<td>Ask participants the questions. Give participants time after each question to respond. Use the prompts as needed to build discussion/debate. Do not push for personal disclosure of GBV by participants. Encourage all FGDs participants to contribute.</td>
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<tr>
<td>Question</td>
<td>Notes -- Write legibly, capturing the words of participants as spoken.</td>
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<tr>
<td><strong>1.</strong></td>
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| a. How would X use the money?  
*Prompts: What things does X need that he/she could buy with the money?* | |
| b. Where would X spend his/her money? | |
| c. Are X's needs different from what other family members would want to use the money for? | |
| d. Would X be able to use the money as he/she wished? If not, why?  
*Prompts: Would other people make decisions for X? Would X be able to keep the money, or would X be expected to give the money to someone else? Who and why?* | |
| e. Would decisions about expenses in X's household change if X receives money from the service provider? If yes, why? If no, why? | |
| **2.** What external factors could prevent X from receiving the money?  
*Prompts: e.g. lack of identification, access to and knowledge of technology, time spent taking care of children, mobility, etc.* | |
| **3.** Would it be best/preferable/safer for the service provider to give the transfer in X's name, or in the name of another person in the household because of household dynamics? If in someone else's name, why? | |
| **4.** Does X have safe access to the market(s)? If no, why not? | |
5. Do you think X would save any of the money? If yes, what modes of savings would he/she use? If no, why not?

6. Does X have places to borrow credit? If yes, from where/whom?
   Prompts: From a bank, a money lender, a family member, etc.

7. What are the good things that would happen to X inside his/her house if he/she received money from a service provider?

8. What are some of the good things that would happen to X outside of his/her house if he/she received money from a service provider?

9. What are the bad things that would happen to X inside his/her house if he/she received money from a service provider?

10. Would the cash cause conflict/tension between X and other people in the household if he/she received money from a service provider? If yes, with whom, and why?
    Prompts: Would specific people try to harm him/her? Are there people in the home who make them unsafe (e.g. spouse, parents, etc.)? Would there be physical violence, sexual violence, verbal violence, psychological violence, economic violence (reference examples in section II)?

11. What are some of the bad things that would happen to X outside of his/her house if he/she received money from a service provider?
    Prompts: What would happen if other people found out X was a beneficiary?
    Would any harm come to them if other people found out? Would there be physical violence, sexual violence, verbal violence, psychological violence, economic violence (reference examples in Section II)?
<table>
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<tr>
<th>Question</th>
<th>Prompts</th>
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<tr>
<td><strong>12. Would there be any conflict/tension between X and other people in the community if X becomes a beneficiary? If yes, with whom, and why?</strong></td>
<td>Who in their community could make them feel unsafe (e.g. neighbors, landlords, fellow refugees/IDPs, host community members, public officials, teachers, etc.)?</td>
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<td><strong>13. Would the cash change how people in the community treated X? How — better or worse — and why?</strong></td>
<td>Prompts: Would cash change how X interacts with family or friends? Other [insert subgroup] in the community? With community leaders? With host community members?</td>
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</table>
| **14.**                                                                 | a. What strategies/approaches could X use to feel safer inside his/her house for his/her personal safety if he/she receives cash from a service provider?  
Prompts: Deciding as a household how the cash should be spent? Spending the cash to meet the needs of all household members? Participating in peer networks? Accessing protection services?  
b. What could the service provider do (or not do) to help eliminate the tensions and reduce the risks for [sub-population] at home?  
Prompts: Conducting trainings on GBV, prevention and response? Asking households who should be targeted as the recipient? Ensuring confidentiality of cash recipients? Counseling households on decision-making? Monitoring recipient's safety? |
| **15.**                                                                 | a. What strategies/approaches could X use to feel safer outside his/her house for his/her personal safety if he/she receives cash from a service provider?  
Prompts: Not sharing beneficiary status? Not sharing the amount of the transfer? Collecting and using the cash at specific times of day/on specific days? Paying debts on time? |
b. What could the service provider do (or not do) to help eliminate the tensions and reduce the risks for [sub-population] in the community?
   Prompts: Conducting trainings on GBV, prevention and response? Asking households who should be targeted as the recipient? Ensuring confidentiality of cash recipients? Counseling households on decision-making? Monitoring recipient's safety?

16.

a. How would receiving money change X's behavior/decisions inside the house?
   Prompts: Behavior/decisions about health? About education? About food consumption? About livelihoods?

b. How would receiving money change X's behavior/decisions outside of the house?
   Prompts: Behavior/decisions about health? About education? About food consumption? About livelihoods?

17.

a. Would receiving money help X to protect him/herself from the risks he/she faces in the house? If yes, how? If not, why?
   Prompts: reference risks participants referenced in response to questions 9 and 10).

b. Would receiving money help X to protect him/herself from the risks he/she faces outside the house? If yes, how? If not, why?
   Prompts: reference risks participants referenced in response to questions 11 and 12).

c. Would this still be the case after the service provider leaves and the transfers are finished? If not, why?
   Prompts: In the short term? In the long term?

d. If cash assistance is no longer available, how would X cope?
   Prompts: In the short term? In the long term?
18. Would X report and feel safe/comfortable reporting an incident of…
   a. Physical violence… If not, why? If yes, where?
   b. Sexual violence… If not, why? If yes, where?
   c. Verbal violence… If not, why? If yes, where?
   d. Psychological violence… If not, why? If yes, where?
   e. Economic violence… If not, why? If yes, where?

Prompts: Reference examples of physical, sexual, verbal, psychological, and economic violence in section II.

19. Who would X speak to if they were experiencing violence at home? In the community?

Prompts: To family, friends, service providers (like INGOs, NGOs, CBOs), support groups, authorities (like police)?

Stop referencing the story for remaining questions.

20. On a scale of 1-3, where 1 is the safest and 3 is the least safe, rank these options to receive a cash transfer:
   [Transfer mechanism A]
   [Transfer mechanism B]
   [Transfer mechanism C]

Why have you ranked these options in this order?

Prompts: Would [insert sub-population] feel safe leaving their home to collect and use the cash? Leaving their neighborhood? Going to the market? Walking down the street? Using public transportation?

21. 
   a. Do you know any groups/organizations in your district/community that are specifically for/support [insert sub-population]? If yes, which ones?

Prompts: (INGOs, NGOs, CBOs)

b. If yes, what services/programs are provided? Prompts: (food assistance, health services, livelihoods support, protection services, etc.)
22. How can a service provider best share information with [insert sub-population] about protection services for GBV?
   Prompts: Information available in different formats/places (brail, social media, door-to-door, office hours at CBO office/community center)?

23. How can a service provider best communicate with [Insert sub-population] about programs and entitlements?
   Prompts: Information available in different formats/places (e.g. brail, social media, door-to-door, office hours at CBO office/community center)?

24. 
   a. Are there individuals/groups within this community who would experience more risk of GBV/violence than others if they received cash?
      Adult prompts: For example, men or women who are separated or windowed? Older persons? Men or women living with disabilities?
      Individuals who are part of a specific livelihood group? LGBTI individuals? Individuals engaged in sex work?
      Adolescent prompts: For example, boys or girls who are unaccompanied?
      Boys or girls who are out of school? Married girls or boys? Married girls or boys with children? LGBTI individuals? Individuals engaged in sex work?
   b. What risks would [insert sub-groups referenced] face because of their situation/gender?
Section V: CLOSING DISCUSSION & REFERRAL PATHWAYS

Tips for assessment focal point: Consult Protection and GBV colleagues to ensure knowledge of referral pathways prior to data collection. There should be sub-population-specific referrals available that have been assessed for competency with and sensitivity to different sub-groups (e.g. persons with disabilities or LGBTI individuals). Train data collectors on GBV referral pathways and how to discretely offer a referral to a respondent in the event that safety risks or exposure to violence is inferred during FGDs or interviews, as well as before or after assessment activities.

Tips for facilitators: Share referral pathways that are specific for the sub-population being consulted in the FGD or interview (e.g. communicate disability-specific referral pathways when speaking with persons with disabilities).

- Thank you for the information you have shared. **Give a summary of notes taken for feedback.**
- Is there anything you would like to correct or add? Is there anything else you would like to mention related to cash and GBV? **Correct or add.**
- Do you have any questions? **Answer any questions.** If you have questions later, please [insert feedback mechanisms].
- You may have felt uncomfortable answering sensitive questions. If you would like to speak with someone today [insert referral pathways]. If you would like to speak to someone another time, please give me your name and phone number before you go and someone will contact you.**viii**
- Good bye.

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This tool was developed by the Women’s Refugee Commission (WRC), the International Rescue Committee (IRC) and Mercy Corps and has been adapted from WRC’s [Cohort Livelihoods and Risk Analysis Guidance and Tools](https://www.womensrefugeecommission.org/issues/livelihoods/research-and-resources/1231-clara-tool), WRC’s [Urban Gender-based Violence Risk Assessment Guidance: Identifying Risk Factors for Urban Refugees](https://www.womensrefugeecommission.org/issues/livelihoods/research-and-resources/1231-clara-tool), and the IRC’s CHAD PRM: Qualitative Research to Understand the Use of Cash Transfers for Women Refugees and IDPs in Humanitarian Settings. This tool has been piloted in partnership with African Development Solutions (Adeso) in Somalia, Mercy Corps in Jordan and Save the Children in Niger. Special thanks to: WRC staff Tenzin Manell, Nadine El-Nabli and Anna Myers; Mercy Corps staff Kevin McNulty and Mohie Wahsh and IRC staff Melanie Megevand and Anna Rita Ronzoni.

With recognition for the definition of GBV outlined in the [Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action](https://www.womensrefugeecommission.org/issues/livelihoods/research-and-resources/1231-clara-tool), GBV has been described here in less technical terms and through five categories of violence—physical, sexual, verbal, psychological and economic violence—for improved understanding among data collectors and community members.

Consider referring to a generic service provider in section III and IV, rather than explicitly naming the service provider, to make respondents feel more comfortable/appease concerns about eligibility for assistance.

See note v.

See note vi.

Adjust options A, B, and C (and add more options as needed) referencing delivery mechanism(s) determined feasible in this context (e.g. cash in envelope, smart card, mobile money, bank transfer, e-voucher, etc.).

Include options for participants to report protection issues on the record as well as off the record.