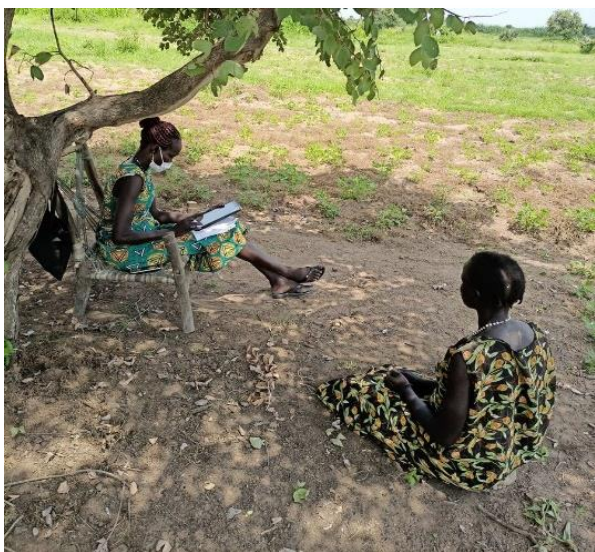


Humanitarian cash transfers and intimate partner violence in South Sudan

A multi-year study in Warrap State, South Sudan, combining qualitative and quantitative methods explored the association between participation in a cash-based programme and experience of intimate partner violence (IPV).

Cash assistance may have little effect on IPV

Cash-based programming, an intervention commonly provided to people affected by humanitarian crisis, has the potential to affect IPV positively or negatively. This study, however, found no evidence that this cash-based project had any significant effect on IPV. That said, the relationship between cash transfers and IPV is complex. Stakeholders should consider local context, gender norms, cash transfer values and modalities, consult local groups, and complementary activities in deciding whether and how to implement cash transfer programmes. Findings on cash and food insecurity are also available in a separate Snapshot (see over).



Enumerator conducting an end line interview for the R2HC – IPV research with Cohort C beneficiaries of BRACE II in Luk-luk payam, Gogrial west county. (WVI South Sudan)

Background

Cash and voucher assistance (CVA) now accounts for about a fifth of global humanitarian assistance, a ten-fold increase in a decade. CVA can be an effective and efficient means for achieving outcomes in multiple sectors and recent reviews of evidence from non-humanitarian settings suggest it can have positive impacts in reducing IPV. Evidence also suggests its potential for negative effects. It is critical to know whether positive effects can be achieved with CVA in humanitarian settings and to understand the risks of negative effects, particularly in South Sudan, where gender based violence and IPV are extraordinarily high. This study focused on the Building Resilience Through Asset Creation and Enhancement II (BRACE-II) project in South Sudan.

How the research was conducted

The study focused on women in households participating in a “cash-for-assets” programme (cash received on condition of participating in agriculture activities and community asset creation). Comparing results from 1,213 recipient women with 582 non-participating women neighbours, changes in IPV, gender relations, and household decision-making were assessed via quantitative surveys, qualitative key informant interviews, in-depth interviews, and focus group discussions.

Key findings

- Quantitative measures provided no evidence that cash transfer participation had statistically significant effects, positive or negative, on IPV. While IPV increased from baseline to endline, it did so across both the control group and the programme participants.
- Qualitative findings were mixed. However, taken together, the analysis of both quantitative and qualitative results suggests IPV rates were not meaningfully affected by the cash transfers, possibly because the amounts were small and not significant enough to disrupt gender dynamics.
- Other factors such as alcohol use, household food insecurity, mental illness/distress, and negative coping strategies were found to be associated with IPV. These may offer more insights into what is driving high rates of IPV in households in South Sudan and what can be done to alleviate it.

Implications for humanitarian practitioners and policymakers

The study shows that, while there was no evidence of cash transfer programme participation either increasing or decreasing risk of IPV, the relationship between CVA and IPV is complex, perhaps particularly so in humanitarian settings like South Sudan.

Practitioners and policy makers should avoid generalizing assumptions either that cash transfers are too risky or carry no significant risk with respect to IPV.

Rather, decision-making around cash transfer programme implementation should first assess the specific contextual and cultural factors associated with IPV risk, and then incorporate risk mitigation into programme design and implementation. This could include cash transfer values, duration, modality (cash vs voucher) as well integration with other programmes like gender protection, gender equity and equality programming, mental health and psychosocial services, and substance use programmes.

Recommendations for future research

Future research exploring the relationship between CVA and IPV is needed. This could include operations research (eg: risk assessment, programme monitoring and evaluation, impact assessment) in humanitarian and low-resource settings; formal longitudinal studies to measure the differential effects of varying sizes of cash transfer values, modalities, and female-targeted vs untargeted vs male-targeted transfers; and research into the relative effectiveness of CVA-only (or mainly) programmes compared with integrated programme designs.

About the study team

The study was a collaboration between Johns Hopkins Bloomberg School of Public Health and World Vision International's global and S. Sudan offices. The investigators from Johns Hopkins were Courtland Robinson, Shannon Doocy, Wietse Tol, Emily Lyles, Allison Jeffery, Kate Mieth, and Charlotte Greenbaum. From World Vision, the team members were Kevin Savage, Morjan Robert Kenyi, Angelina Gon, Gerbrand Alkema, Vanessa Saraiva, and Kenneth Munyengerwi.

Keywords

Humanitarian cash transfers, CVA, intimate partner violence (IPV), food security, gender protection

Articles and further reading

The Elrha project page, with wider findings from the study including on cash and food insecurity, is here <https://www.elrha.org/project/effects-of-cash-transfers-on-intimate-partner-violence-in-humanitarian-settings-a-prospective-cohort-study-in-south-sudan/>



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This research was funded by Elrha's Research for Health in Humanitarian Crises Programme (R2HC), which aims to improve health outcomes for people affected by crises by strengthening the evidence base for public health interventions. The programme is funded by the UK Foreign, Commonwealth and Development Office (FCDO), Wellcome, and the UK National Institute for Health Research (NIHR). Elrha has developed this Research Snapshot in consultation and partnership with University of Victoria's Research Partnerships and Knowledge Mobilization unit, on behalf of Research Impact Canada – Réseau Impact Recherche Canada network.

<http://www.elrha.org/programme/research-for-health-in-humanitarian-crises/>