CASH ASSISTANCE AND THE PREVENTION, MITIGATION AND RESPONSE TO SEXUAL AND GENDER-BASED VIOLENCE (SGBV)

Findings from research in Lebanon, Ecuador and Morocco
EXECUTIVE SUMMARY

Rationale

The objective of this document is to provide learning and recommendations when using cash assistance to address sexual and gender-based violence (SGBV).\(^1\) It captures research conducted in Lebanon, Ecuador and Morocco between 2017 and 2018.

UNHCR is committed to expanding the evidence base on the use of cash for protection, and has been engaging in the development of tools and field practices since 2015. Since then, UNHCR focused on further exploring the relationship between cash assistance and the prevention, mitigation and response\(^2\) to sexual and gender-based violence (SGBV) in Morocco, Lebanon and Ecuador.

The studies employed a mixed methods research approach including desk reviews, key informant interviews (KIIs), in-depth interviews with recipients of cash, focus group discussions (FGDs), and surveys with recipients of UNHCR cash assistance.

The research in all three countries was centered around the outcomes of Cash Based Interventions (CBIs) on the prevention, mitigation and response to SGBV amongst recipients of assistance.

\(^1\) Sexual and gender-based violence (SGBV) refers to any act that is perpetrated against a person’s will and is based on gender norms and unequal power relationships. It encompasses threats of violence and coercion. It can be physical, emotional, psychological, or sexual in nature, and can take the form of a denial of resources or access to services. It inflicts harm on women, girls, men and boys.

\(^2\) The IASC Guidelines on Integrating GBV Interventions in Humanitarian Action defines prevention generally refers to taking action to stop GBV from first occurring. Mitigation refers to reducing the risk of exposure to GBV. Some sectors, such as health, may undertake activities related to survivor care and assistance. For these sectors, there are recommendations related to specialized response programming. Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action. (IASC, 2015) http://bit.ly/2FcD1kT

In Lebanon, this was articulated in the research question "How does cash assistance mitigate and/or address SGBV risks?".

In Ecuador, the objective was “to learn about the outcome for women participating in the Graduation Approach who receive cash transfers, with respect to preventing and responding to sexual and gender-based violence that they may be experiencing or may have suffered in their lives.”

In Morocco, the purpose was “to understand to what extent cash contributes to SGBV protection outcomes, and the protection interventions necessary to ensure the effectiveness of the SGBV prevention and response”.

Overall, the three research questions sought to contribute to determining the minimum features and specific interventions, including but not limited to case management, community outreach, medical and psychosocial services and livelihoods support to ensure sustainable outcomes connected to CBIs. It also considered how CBIs can contribute to increased protection, reduced exposure to risk of SGBV and strengthened resilience and feelings of empowerment for persons of concern to UNHCR\(^3\) in those locations.

\(^3\) Persons of concern to UNHCR include refugees, asylum-seekers, IDPs protected and/or assisted by UNHCR, stateless persons and returnees (returned refugees and IDPs). UNHCR Statistical Online Population Database: Sources, Methods and Data Considerations. (UNHCR, 2013). http://bit.ly/2ugK0z6
Key Lessons Learned and Recommendations

Across the board, the findings highlight the value of UNHCR cash assistance in providing a sense of safety and dignity, and easing the financial burden on persons of concern. It was found that cash, helps meet immediate needs such as food, housing, and non-food items (NFIs) and reduces the families’ vulnerability.

Cash assistance can be a protective measure

While the three country contexts and the way in which research was conducted are diverse, protection mainstreaming in cash assistance and the contribution of cash assistance as part of specialized SGBV programming have been considered. The following observations and key lessons can be drawn from the findings, which serve to inform programming on protection mainstreaming considerations within CBIs, as well as programme design to contribute to delivering optimal protection outcomes for recipients.

More differential analysis and greater flexibility in designing cash packages is needed

In Lebanon, evidence shows that the cost of living varies from one location to another and is highly impacted by the size of the household. Assistance needs and income generating opportunities vary widely depending on the unique situation and composition of each individual household. In Ecuador, the Graduation Approach (GA), a wider socio-economic support programme is also premised on this notion. The cash assistance is tailored based on family size and the visiting frequency of the social worker is determined by each family’s the progress.

Cash assistance employed to achieve protection outcomes was found to be most effective when provided with services

Research in Morocco and Lebanon found cash assistance to be effective when given in conjunction with services, such as psychosocial support and support in decision-making on how to make best use of the cash. This finding corroborates the results of the model used in Ecuador where CBIs are part of the socio-economic support programme, the Graduation Approach (GA), where CBI recipients
receive tailored support based on their needs. The support of trained social workers was found to be key to the model’s success. Importantly the need to provide services along side cash assistance is resource intensive, both human and financial, and must be considered when designing programming.

**Thorough case management is identified as a main contributor to the success of CBI for the prevention, mitigation and response to SGBV**

Where case management includes a clear individual plan with programme participants and is developed with time-bound, measureable objectives, regular follow-up and support, the protection benefits of the assistance is maximized. Importantly, in Lebanon, an increase in service uptake was noted only when the same organization conducting case management also provided the service.

**Cash assistance and specific interventions can support women’s household decision making and contribute to reducing overall tensions within families**

Managing economic resources was perceived by the participants as facilitating a gradual appropriation of space of power and decision-making by women within the family, which in turn increased their confidence. Regular cash transfers were also found to be a protective measure for SGBV survivors and mitigate potential risks by improving access to credit, enabling regular debt repayment and access to phone credit, which ensured a means of communication for information exchange and help in case of an emergency.

The research conducted in Ecuador confirmed the correlation between women of a household receiving cash and the positive outcomes for the entire family. Participants of the study highlighted that the financial support received was instrumental to overcoming the obstacles faced upon arrival in a new environment. The research also suggests that this measure, coupled with family support and mentoring by social workers, financial literacy training and vocational support can help to reduce violence within the household, in families where intimate partner violence (IPV) was previously occurring. This implies that CBIs can help to fulfill basic needs that may contribute to reducing tensions and IPV.

**Integrated programming⁵ can yield positive results in terms of empowerment⁶**

Research in Lebanon showed a certain level of empowerment was achieved by enabling women to meet at least some of their most pressing needs through cash assistance. Cash recipients reported feeling stronger and independent; feeling equal; being no longer humiliated; feeling empowered, and in charge. Similarly, In Ecuador, specific interventions such as psychological support, mentoring and advice in financial management was essential to ensure the cash transfer becomes not only a short-term alleviation, but also a means by which women can feel empowered, independent and self-confident. However, the success of the approach was also found to be contingent on effectively communicating the purpose of the cash assistance and nurturing trust by the social workers with the recipients. As a result it is highly recommended that the continuity of staff involved in the programme is maintained and that SGBV prevention and protection is reinforced through periodic training.

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⁴ For the purposes of the research in Lebanon, services are intended as all the efforts aimed at strengthening complementarity between relevant SGBV services in the form of health, livelihoods, legal, psychosocial support, as well as well parenting and life skills and protection specific cash assistance programmes.


⁶ Empowerment is not as something that is “done” to people; it is the process by which individuals in the community analyze their situation, enhance their knowledge and resources, strengthen their capacity to claim their rights, and take action to achieve their goals. A Community-based Approach in UNHCR Operations (UNHCR, 2008). https://www.unhcr.org/470ba6712.html
Cash can have a positive influence on resilience through reinforcing social networks and providing a sense of dignity and control over one’s situation

Research participants in Morocco reported that cash supported the maintenance of social and economic networks by enabling the re-imbursement of debts, participation in social gatherings and contact with friends and family through the purchase of phone credit. In Lebanon, cash assistance was also reported to support the relief of stress and anxiety, as well as re-establishing a measure of dignity and control over an individuals’ financial situation. However, an individual’s human and social capital was also highlighted as influencing resilience, with or without cash, as evident in the few research participants who demonstrated a better capacity to cope with their difficulties, making optimal use of the support received (adaptive capacities), and moving from recovery to being independent and caring for themselves (transformative capacities). More in-depth research would be required to provide further insights on resilience in relation to cash assistance and SGBV.

Strengthened communication from the outset on the scope of assistance and services provided can contribute to improved protection outcomes of cash assistance

Participants in Morocco and Lebanon noted the contribution of cash assistance made to meeting basic needs, notably in the areas of accommodation and food. However, research in these countries also found that recipients lacked clarity on the purpose, amount and duration of the CBI and therefore could not take informed decisions to improve their long–term situation, for example to move to a safer neighborhood, or to avoid resorting to potentially harmful coping mechanisms.

The impact of services, which are proven to be effective, are seriously undermined if consistency and clarity around duration and amount are not possible. To enhance the protection outcomes of the assistance, the research strongly recommended clear and transparent communication with recipients about the eligibility criteria and duration of the cash assistance. Importantly, this must also be assured by consistent and reliable CBI financial sources.

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7 Resilience refers to the ability of individuals, households, communities, national institutions and systems to prevent, absorb and recover from shocks, while continuing to function and adapt in a way that supports long-term prospects for sustainable development, peace and security, and the attainment of human rights. Executive Committee of the High Commissioner’s Programme Standing Committee 68th meeting, Resilience and self-reliance from a protection and solutions perspective (UNHCR, 2017).

Further SGBV prevention, mitigation and response considerations in the use of cash assistance can enhance the quality of interventions

Recommendations based on the findings in Lebanon and Morocco include strengthened community mobilization for better identification, referral and protection of SGBV survivors and those at risk; further investment into case management and building the capacity for case management partners to support and/or implement UNHCR protection-related cash assistance programmes, including improved assessments of recipients’ financial, human and social capital as a way to strengthen resilience and empowerment; improved mapping and identification of appropriate exit strategies from the onset and action planning with case management clients to exit cash assistance programmes; and establishing improved monitoring systems for using cash assistance within case management and service provision.

Challenges in Cash and SGBV Programming

Determining the most appropriate timeframe for cash assistance delivery linked to reaching sustainable outcomes

In operational contexts where resources are constrained, addressing the concerns around sufficient duration and amount of assistance remain high priorities and must be recognized as challenges. Cash assistance provided for a longer duration, provides more scope for the recipients’ planning and investment in human capital, asset accumulation and livelihood strategies. Additionally, once cash assistance is no longer provided, risk factors such as engaging in risky activities or borrowing money with high interest rates from usurers or criminal networks can re-emerge and increase the vulnerability to SGBV. The high reliance on cash assistance and limited opportunities for gainful employment found to varying degrees in each case study, point to a need for further reflection on the criteria for discontinuation of assistance and the development of realistic exit strategies.

Ensuring consistent and multiple forms of communications with recipients

Unfamiliarity with the dimensions (objective, frequency, duration) of cash assistance can have negative consequences for persons of concern. These include hindered planning for the future, ill-informed decision making and the continued use of potentially harmful coping mechanisms during the period of assistance to mitigate the risk of an abrupt discontinuation. Multiple types of cash assistance by multiple actors in a single context, short term funding cycles and rapidly changing operational environments all present challenges for clear communication.

Ensuring consistency in the delivery and the quality of case management

The relationship between cash and services is associated with many uncertainties and necessitates more investigation. While SGBV survivors ranked financial assistance as a high priority, it is agreed upon that other services, such as medical, psychosocial support, shelter, resettlement, and individualized case management support, are needed to cover the non-monetary dimensions of vulnerability. More analysis is needed on the quality, accessibility and functioning of services, including the extent of referral, actual use of services by survivors, and the quality of the services provided.

Strengthening the understanding of the diverse programme objectives of the respective cash modalities by all stakeholders is required

The research highlighted differences in the level of knowledge and understanding of the cash assistance programmes between UNHCR, partner agencies and recipients. The reasons for this are varied and include differing ideas between organizations on the purpose of cash assistance, how cash should be used, and its role and complementarity with support services. The result however is that recipients can be poorly informed, at times nurturing false expectations about cash assistance, for example in relation to its duration and graduation rules, and confusion about eligibility and selection criteria.
LEBANON

Context

Despite the generosity of the people and the government of Lebanon, the situation of the 948,800 Syrians were registered with UNHCR\(^8\) is becoming more challenging over time. Syrian refugees face bureaucratic and financial barriers in securing work permits and for those few that are successful, employment is limited to three sectors: agriculture, construction and cleaning services. This restricted access to legal employment means that refugees are often unable to meet their basic needs, leading to a situation where savings have been exhausted, assets sold, and potentially harmful coping mechanisms, including child marriage, being increasingly adopted in response to growing stress. For many, humanitarian assistance through CBI is a critical means of survival.\(^9\)

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\(^8\) As of the end of 2018. [http://reporting.unhcr.org/node/2520](http://reporting.unhcr.org/node/2520)

Research conducted in Lebanon, covering four field locations: Tripoli (North), Saida (South), Zahle (Bekaa), and Mount Lebanon, explored the direct and indirect influences on SGBV of the following three cash components:

1. **Protection Cash Assistance Programme (PCAP)** – research focused on the outcomes of providing PCAP as a way to mitigate the consequences of an SGBV incident, risk or ongoing exposure, where cash assistance is provided as part of case management and response services (e.g., psychosocial or medical);

2. **Multi-purpose Cash Assistance Programme (MCAP)** – research focused on the outcomes for mitigating the contributing factors (limited resources, stress, inability to provide for families) to intimate partner violence and potentially harmful coping mechanisms – i.e. child marriage;

3. **Emergency Cash Assistance (ECA)** research focused on the outcomes for risk mitigation capacity of survivors facing immediate danger.

Among them, PCAP and ECA are specifically meant to address a protection incident or vulnerabilities, while MCAP aims to provide a safety net to the most socio-economically vulnerable.

In order to explore the outcomes of different types of cash assistance, and to ascertain how they complement one another, respondents were selected among recipients of all three cash components.

The research design consisted of a literature review, individual interviews with 43 SGBV survivors among PCAP and ECA recipients, and 9 focus group discussions (FGD) with MCAP recipients, and a series of key informant interviews (KIIs) with UNHCR staff both at HQ and country-level, SGBV and case management actors.

### Findings

Findings from this research indicate that all three cash components can be effective risk mitigation and prevention tools.

UNHCR cash assistance was found to be critical in helping refugees meet their basic expenditures, at least partly and temporarily, with some participants mentioning it as their sole source of income. Examples include:

**ECA and PCAP**
- Found that SGBV survivors could move away from their abuser(s) and pay rent for themselves and their children.
- Found that women were able to receive health care they could otherwise not afford or cope financially during the recovery of a family member.
- Found that women were enabled to search for another job or house to escape abuses by their employer or house owner.

**MCAP**
- Found to mitigate or prevent the risk of potentially harmful coping mechanisms such as humiliating jobs, exploitative working conditions and withdrawing children from school to engage them in child labour.
- Found to allow for planning and investment in human capital, asset accumulation and livelihood strategies given the duration of MCAP assistance of minimum one year.

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10 PCAP is meant to address the needs arising from a protection incident or situation that could not be addressed with a one-time cash injection. For example, persons of concern needing assistance to bridge a period of extreme hardship following a protection incident, a period of transitioning from an incident to safety, or assistance for persons of concern with a particularly vulnerable profile.

11 MCAP is targeted to refugee households living in extreme poverty to enable them to meet their basic needs.

12 ECA is a one-off assistance intended to address an urgent need arising from exposure to a protection incident.

13 Mostly boys as girls are less likely to experience child labour.
Evidence shows that by enabling recipients to meet at least part of their most urgent needs, cash contributes to a certain level of empowerment.

Recipients reported feeling strong and independent; feeling equal; being no longer humiliated; feeling empowered, and in charge.

The research found that the majority of refugees spent most of their assistance on rent, followed by food, and medicines. Of the assistance to families, the research found that the transfer value and duration of CBI were often not sufficient to meet households’ and individuals’ full range of needs, for example due to expenditure such as rents which in some locations are prohibitively high.

The experience in Lebanon suggests that services are more likely to be accessed and used when provided by the same organization in charge of SGBV case management.

This was attributed to the extra efforts, and possibly costs, that moving around implies as well as the risk posed by mobility to those not having legal status in the country. Considering the competing expenditures refugees have to cover, access to services, measured by the costs of transport, was consistently not prioritized as compared to rent, food and medicines. Therefore having accessible services increased uptake and led to enhanced outcomes for those who could access both cash and services.
Conclusions

The research highlights the value of UNHCR cash assistance in providing a sense of safety and dignity, and easing the financial burden of refugees in Lebanon.

Evidence suggests that all three cash components can act as effective risk mitigation and prevention tools. While ECA and PCAP can usefully prevent individuals from falling back into or persisting in abusive situations; the effect of MCAP is mostly on mitigating or preventing altogether the risk of potentially harmful coping mechanisms such as withdrawing children from school to work, humiliating jobs, exploitative working conditions and employers.

The frequency and duration of the cash transfer programme plays a role, as in the case of MCAP in providing more scope for some planning and investment in human capital, asset accumulation and the development of livelihood strategies. At the same time, ECA is particularly appreciated by staff and recipients for being a flexible and agile tool to address a situation of immediate risk or need.

Although the evidence confirms that cash contributes to a certain level of empowerment, resilience appears to be more contingent on the individual human and social capital and endowments, with or without cash, as evident in the few research participants who demonstrated a better capacity to cope with their difficulties, make optimal use of the support received (adaptive capacities), and move from recovery to being independent and care for themselves (transformative capacities). This area would benefit from further and more targeted research.

On the other hand, cash does not appear to influence the underlying factors that make individuals vulnerable to SGBV, such as unequal gender dynamics or social norm, nor to alleviate the suffering and trauma that derive from it. There is no evidence of cash facilitating access to and use of existing support services, where these services do not exist. This is indicated by the costs of transport being consistently not prioritized as compared to other expenditures such as rent, food and medicines.

The influence of cash on overcoming barriers such as fear of retaliation by the abuser, lack of documentation, and lack of trust in both service providers and the effectiveness of the service offered, appears also limited, probably because these outcomes are also dependent on a number of other factors, including the quality of the services provided.

The duration and transfer amount of cash assistance, even when multiple cash components are considered in combination, is for the most part not sufficient to cover for the multiple and ever increasing needs of refugees in a context of protracted displacement, increasing vulnerability and limited economic opportunities. While understanding that none of the cash components alone are intended to cover for all needs of persons of concern, there is a need for a more significant differential analysis and greater flexibility in designing cash packages. The evidence shows, for instance, that costs of living vary greatly from one location to another and depend on the household’s size. The situation of each refugee family also differs in regards to access to assistance and income-generating opportunities.

More analysis is needed on the quality, accessibility and functioning of services in Lebanon and the extent to which cash has been factored in to actually complement case management. Another aspect that necessitates further analysis is the service quality and frequency of use of services by survivors.

A good understanding by recipients of the different cash programmes was found to be lacking; including aspects of duration, targeting and accountability mechanisms. This not just in relation to MCAP, which is based on a desk formula,14 but also to PCAP and ECA whose purpose and functioning should be fully understood for recipients to be able to plan their actions accordingly, including an exit strategy. This speaks to the need to strengthen understanding and communication systems around the different forms of cash assistance, and to better reflect on formulating realistic exit strategy, also based on the programmes’ objectives and budget.

14 The desk formula refers to the targeting methodology that categorizes households on the basis of their socio-economic vulnerability.
Finally, more in-depth research is needed on the outcome of cash assistance as per the different socio-demographics of persons of concern, especially survivors and profiles of those at-risk of SGBV. This applies to exploring the added-value of receiving several cash modalities and other services in complementarity as well with a focus on specific types of SGBV including child marriage.

Limitations

The approach adopted saw a combination of a purposive sampling technique for MCAP recipients’ groups to allow for the inclusion of female headed households; families of girls at risks of child marriage; and severely vulnerable households; and a randomly selected sub-sample of SGBV survivors among ECA and PCAP recipients. Time constraints allowed for a limited number of interviews, hence caution should be exercised with respect to generalizing the findings.

Additionally, limited focus could be given to the sustainability and the magnitude of effects of cash assistance on the population surveyed. Another aspect that would require further investigation is the different levels of awareness and knowledge amongst recipients of the various types of cash assistance provided by UNHCR and partners.

15 “Severely vulnerable households” refers to households living in extreme poverty facing difficulties meeting their basic needs.
Context

At the end of 2018, Ecuador was hosting 374,879 persons of concern, of which 51,614 were refugees. This number has increased by 158% over the course of 2018 due to the Venezuela crisis. While Colombians continue to arrive as a result of armed conflict, Venezuelans became the largest nationality of asylum seekers in 2018.¹⁶

Research in Ecuador explored the relationship between CBIs and SGBV as part of the wider socio-economic support programme, the Graduation Approach (GA).¹⁷ A key aspect of the GA is linking participants to services and social support structures. The approach seeks to strengthen family livelihoods and, at the same time, articulate the management of individual cases with specific protection needs, as is the case of survivors, or those at risk of, sexual and gender-based violence.

The elements of the GA includes CBIs to cover basic needs and settling-in requirements in the host community, in connection to mentoring and family support from social workers, counseling on banking and saving, vocational and technical training, connecting families with local and national services according to their needs, and advice and support on entrepreneurial activities. The model seeks to improve the refugee population’s self-sufficiency, resilience, and integration into the host country with the ultimate goal of families reaching a level of autonomy that allows them to break the humanitarian assistance dependency cycle.

The research was carried out in six cities of Ecuador with a high presence of refugees; Esmeraldas, Ibarra, Lago Agrio, Quito, Santo Domingo de los Tsáchilas and Tulcán.

The objective of the research was to see what influence, if any, CBI as a key element of the GA, had on preventing and mitigating the risks of SGBV.

All research participants were female refugees, the majority of which were survivors of one or several types of SGBV, both in the country of origin and in the host country. In some instances, the violence was related to the armed conflict (in the case of Colombian refugees, in others violence was perpetrated by partners, family members or other close individuals.

The research employed mixed methods including a survey administered to 288 refugee women, 20 in-depth semi-structured interviews, 3 focus group discussions carried out with partner staff, with social workers, GA promoters and local leaders and 4 key informant interviews.

¹⁶ http://reporting.unhcr.org/node/2543?y=2019#year
¹⁷ For more information on UNHCR’s use of the GA, please see http://www.unhcr.org/graduation-approach-56e9752a4.html
Findings

Cash transfers were found to have a protective influence insofar as it was combined with the different elements of the GA.

These elements include psychosocial support, training in aspects supporting economic independence, women’s rights, and strengthening of self-esteem, and support from social workers. Women persons of concern interviewed report that in the situation of displacement, tensions around poverty and financial uncertainty is a trigger for violence in the household and that in that context, a cash balance has functioned as a factor of protection and deterrence of violence.

The research also suggests that the fact that families are able to rely on a cash support when first arriving in a country, to cover expenses like food, housing and non-food items, coupled with complying with the steps required for completing the GA, provides a sense of calm in the family dynamics, in turn acting as a deterrence to violence. The study also suggests that this security also mitigates exposure to potential sexual or labour exploitation.

The support by social workers was found to be key to the GA and the success of the cash interventions.

The close monitoring and support to families by a team of social workers, integral to the graduation approach, which includes frequent house visits to identify and map risk factors and the protection environment, both within the family and the community, permits a very detailed analysis of the context in which the individual lives, including the social areas she frequents, the services she uses (transport, health, education, food, safety etc.), as well as the dynamics between her and family members, which in turns allows for humanitarian workers to identify and offer support and services potentially mitigating incidents of SGBV.

Besides early identification, social workers also motivate families to follow the required steps of the GA and have ownership over their own progress. Supporting women throughout the model by offering psychological support, mentoring and advice in use of the money is important to ensure the cash transfer becomes not only a short term alleviation, but also a means by which women can start to feel empowered.

The research confirms that when women receive a cash intervention, independence and empowerment to exercise decision-making in the household are facilitated.

Concretely, 1) women increasingly administer and decide over the use of money, and establish priorities for its use based on the family’s need, 2) it increases space to discuss the use of the money and negotiate in favor of the wellbeing of the family, with their partner 3) women actively participate in the process of the GA and 4) it creates space for women to exercise autonomy and decision-making specifically on the experience of SGBV.

Given the context of displacement, where persons of concern often lack documentation and face difficulties in opening bank accounts, in Ecuador the most effective solution to ensure women have this security was shown to be providing cash in hand, personal checks, or with special ‘pick up points’ in banks. 60.9% of women participating in the GA thereby developed and followed an individualized savings strategy, following training and financial counselling received as part of the model.

CBIs should be accompanied by capacity development on gender equality. The research stressed the importance of capacitating both the women and the men of the household at the same time, to ensure they receive the same messages, and use the opportunity to reinforce messages of the use of the cash intervention for the wellbeing of the household.
Conclusions

Cash transfers were found to be effective in preventing and mitigating SGBV insofar as they are received in conjunction with other elements of the GA, including psychosocial support, support and regular visits by social workers, training and capacity building in areas such as human rights, self-confidence, and financial independence.

Having an interdisciplinary team accompany the recipients is key to the success of the GA on SGBV prevention and response. It allows for early SGBV identification, the design of individualized plans for solutions to the survivor or person at risk, and perceived safety for the recipients. The continuous training of social workers and staff promoting the GA is necessary to ensure a protection sensitive approach and timely identification, referral and response to SGBV.

Cash transfers play a fundamental role for women and their families, especially in the phase of arrival to and integration in the host country, helping to relieve tensions due to poverty and displacement and subsequent potential violence.

Receiving CBI, helps meet immediate needs such as food, housing, and NFIs, and reduces the families’ vulnerability. Women participating in the research testified to the cash preventing exposure to risk of SGBV and potentially harmful coping mechanisms.

A positive correlation was found between women receiving cash and women’s empowerment, in particular their independence and self-confidence. Managing economic resources brings space and increased decision-making authority within the household.

When women received CBIs the impact on the whole family was found to be positive – women invested more in family well-being and Intimate Partner Violence was also reportedly reduced.

Limitations

The study identified the positive aspects of the CBI within the framework of the GA on the prevention and response to sexual and gender-based violence. Research participants were still actively engaged in the programme during the research, which limited the potential to explore the sustainability and consistency of these outcomes once persons of concern have graduated from the programme. This is closely related to the effective development of sustainable livelihoods, which if not achieved, poses a risk for tensions and potentially violence within the household.
MOROCCO

Context

Morocco is both a country of origin and a country of departure for migrants and refugees, as well as a transit country from Sub-Saharan Africa or the Middle East to Europe. In 2018, nearly 7800 people from 44 countries registered with UNHCR, including more than 5,900 refugees and 1,800 asylum-seekers. The refugee population increased by 23% from 2017.18

18 http://reporting.unhcr.org/node/10331

Findings from research in Lebanon, Ecuador and Morocco
UNHCR provides three types of cash assistance in Morocco: a multipurpose cash grant for persons with specific intended to cover subsistence costs, an economic integration grant to support the launch of an income generating activity (IGA) and an education grant to increase attendance, where the lack of financial means presents a barrier.

The objective of the research carried out in Morocco was to 1) better understand the multifaceted factors that influence persons of concerns vulnerabilities and risks of exposure to SGBV; 2) map the patterns of potentially harmful coping mechanisms that different groups adopt; 3) examine the protection outcomes for survivors of SGBV receiving cash assistance, and 4) document lessons learned.

The research focused on six locations – Rabat, Casablanca, Fez, Meknes, Marrakesh and Oujda, surveying 150 recipients with SGBV experiences or specific needs closely related to SGBV (73% women, 22% men and 5% unspecified). In addition, in-depth interviews were conducted with 28 SGBV survivors.
Findings

CBI contributes to the resilience of SGBV survivors and those at heightened risk by reinforcing immediate social and economic networks.

The findings suggest that the regularity of the cash transfer allows recipients to build or recover trust by reimbursing debt. This enables individuals to borrow money on credit in emergencies. It also provides a means of communication which contributes to their protection by regularly purchasing mobile phone credit. Information on available assistances becomes more accessible, help can be sought in emergencies, and contact with families and friends can be maintained. This network building and communication means can contribute to short term protective measures against SGBV.

The current mechanisms of grant distribution by bank transfer is a satisfactory distribution mechanism.

The research finds that using a financial service provider to provide recipients with CBI lightens the logistical burden on UNHCR and partners, minimizes corruption risks, and reduces security risks. The majority of recipients (84%) who either currently receive cash assistance, or have received it before, found this delivery mechanism safe and adequate. It is flexible and convenient for recipients, as they can choose where and when to withdraw cash and avoid queues.

CBI was found to contribute to covering basic needs, however the quantity of assistance was too low to have a sustainable protective impact.

Survey results showed that cash recipients spend most of the grant covering their basic or recovering needs, including accommodation (41%), food (24%), reimbursing debts (9%), essential household items (8%), and education (7%). While the financial support to participants was only equivalent to 31% of the minimum wage in Morocco (2,570.86 MAD/month in 2017), which was not enough to make a difference in participants’ real or perceived safety environment and their exposure to SGBV. The vast majority of participants live in neighbourhoods and accommodation they themselves consider unsafe, due to lack of basic safety measures such as a lockable door, or the need to share accommodation with strangers, which they deemed increased their risk of exposure to SGBV.

CBI needs to be provided in tandem with a range of services to effectively access response services and address risks to SGBV.

While SGBV survivors ranked financial assistance as the number one priority, other services – such as medical, psychosocial, shelter, resettlement, and individualized case management support – were identified as essential to cover the non-monetary dimensions of vulnerability.

73% of survey respondents reported resorting to harmful coping mechanisms, including survival sex, begging, child marriage, and dropping out of school, even during the period of receiving CBIs. The majority of respondents answered that they would continue this behaviour due to the value of the grant not being enough to cover basic needs.

Conclusions

Where the main contributing factor exposing persons of concern to SGBV is lack of financial means, the research concludes that cash grants can reduce exposure to risk and mitigate the impact of SGBV. However, SGBV survivors and those at-risk find that the cash assistance alone is not enough to provide necessary protection, but needs to be provided in conjunction with other services and interventions, especially case management, medical, psychosocial and shelter services, in order to be effective. This necessarily implies comprehensive programming that is resource intensive. For any long-term outcome on reduction of violence and behaviour change, gender equality programming has to be carried out in parallel. In addition, where the positive effect of cash in conjunction with specific interventions is identified, continuous monitoring...
is required to mitigate any potential negative repercussions or further exposure to risk.

While preventive effects were found in the reduction of exposure to potentially harmful coping mechanisms, it must be highlighted that cash assistance to cover basic needs must be a temporary measure. Effectively communicating the frequency and duration of the assistance is critical to ensure that recipients can adequately plan for the discontinuation of assistance.

The exit strategy of UNHCR Morocco is to cover the chronic income-expenditure gap of refugees by complementing the cash transfer with long-term livelihood and local integration supports. However, viable options were found to be limited due to constraints in partner capacity and resource availability, which means that concrete solutions remain elusive for the most.

**Limitations**

The research was limited to the six biggest cities, and no experiences from rural settings were collected or analyzed. Persons of concern are dispersed across 50 locations, the six cities covered by the research host 55% of the entire refugee population in Morocco.

The operation has observed an increasingly xenophobic attitude in the general public towards refugees and asylum seekers in recent years. The perceived stigma and associated SGBV risks are higher amongst persons of concern from SSA than those from MENA. As a result, a high number of SGBV survivors have been identified from Sub-Saharan Africa, compared with significantly fewer survivors identified from MENA.
FOR ADDITIONAL INFORMATION


CONTACT

For more information or questions, please contact UNHCR Sexual and Gender Based Violence Unit at hqsgbv@unhcr.org and the Global Cash Operations at hqcash@unhcr.org