

A SILENT EMERGENCY Survivors of Sexual Violence in the Democratic Republic of Congo e

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Social and Economic Reintegration through Cash Transfers

Refusing to ignore people in crisis

Sexual violence continues to affect the lives of countless women and girls, as well as men and boys, on a daily basis in the Democratic Republic of Congo (DRC). In the year 2012, there were 15,654 reported cases of sexual violence.¹ In DRC, as in other contexts where sexual violence is widespread, many choose not to report incidents out of fear of rejection by their family or communities and the stigma attached to being a 'victim', indicating that the true figure could be much higher.

The DRC armed forces, backed by the UN Stabilization Mission in the DRC (MONUSCO), continue to be engaged in military operations against several armed groups in the country. In the eastern provinces, notably North and South Kivu, the fragmentation of armed groups and fighting amongst them persists. Violence combined with enduring ethnic tensions leads to casualties, displacement, destruction of livelihoods and property, and other abuses including sexual violence. Thus, conflict-related rape and sexual abuse is a systematic and devastating feature of life in the DRC.

Why does the British Red Cross distribute cash?

Cash is a versatile and flexible tool that can provide a life-line for people in crisis. Giving 'unconditional' cash means that beneficiaries are given the choice of what to do with their money. Often, this is the most effective way of ensuring that people can meet their basic needs. The overwhelming evidence suggests that beneficiaries make smart decisions with the cash they are given, often with significant, unintended benefits in the areas of education, health, nutrition, savings, production and the local economy.² However, cash is not a solution to every problem. In some cases complementary programmes need to be established, as enabling meaningful access to services is more complex – this is particularly true for sectors such as health and providing comprehensive support to survivors of sexual violence

The role of social safety nets

Providing cash to vulnerable survivors of sexual violence can act as a safety net which keeps their families above a minimum level of economic and social security in times of crisis and builds their resilience to future shocks that arise from conflict or other situations of violence. Cash transfers also enable people to pursue a sustainable way to secure their livelihoods, for instance by taking up an Income Generating Activity. Social safety net programmes usually provide cash in a predictable and sustained way, which allows for more forward planning and smart choices.

^{1.}UNFPA – Towards Ending Sexual Violence in the Democratic Republic of the Congo (2013) Whilst the majority of rapes are reported by women, it is likely that sexual violence perpetrated against men is under-reported due to taboos and stigma. There are few services available in DRC which support male survivors of sexual violence.

^{2.} ODI - Cash Transfers: What does the evidence say? (2016)

The following briefing note will outline BRC and ICRC's approach to supporting the socio-economic reintegration of survivors of sexual violence through the provision of cash transfers. Our study finds that the pilot project was successful in allowing survivors to regain a standard of living equal to, or better than, their situation before the violence occurred. Beneficiaries were also able to increase their ownership of durable assets, meaning that they are now in a better position to support themselves and their families in the long term. Participants also reported positive effects on their children's school

attendance, their children's health, as well as an increase in self-confidence and community acceptance. The study explores vital considerations such as ensuring confidentiality and anonymity of beneficiaries, and makes best-practice recommendations on project discretion in line with the 'Do no Harm' principle. Policy-makers, donors and practitioners are encouraged to scale-up the use of cash-transfers in humanitarian programming; acknowledging that it can play a vital role in socio-economic reintegration, and act as a social safety net for vulnerable households.

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Data Collection Methodology

The pilot project lasted 16 months in total with a 3 month inception phase, an 11 month implementation phase and a 2 month closing phase. During the project four Post Distribution Monitoring (PDM) sessions were organised 6 weeks following each transfer. Around 75 out of 100 participants were sampled for individual PDM surveys, and Focus Group Discussions were organised for the 25 others, as part of the PDMs.

A final evaluation was conducted over three weeks in May 2016 and the pilot project tested for replicability, scalability, efficiency and effectiveness. It also assessed the components that made the socio-economic reintegration of survivors of sexual violence successful. Best practice and learnings have been extracted from the evaluation, especially regarding beneficiary confidentiality and the combination of cash transfers with training modules.

The socio-economic and protection outcomes for beneficiaries were captured using both quantitative and gualitative data, by looking for example at the significance for household income, integration into the community, the use of cash, investment and growth in productive assets and increased social inclusion. Sources included key project documents, beneficiary surveys, key informant interviews, Focus Group Discussions (FGDs) and feedback meetings. FGDs took up to two hours with 8-16 beneficiaries.

Our work on Sexual Violence in the Democratic Republic of Congo

The International Committee of the Red Cross (ICRC) has worked in the country since 1960, having opened a permanent delegation in Zaire, now the DRC, in 1978. Alongside the Red Cross Society of the Democratic Republic of Congo, ICRC responds to the impact of continued and protracted conflict on communities through providing or facilitating access to healthcare services, visiting places of detention, helping to restore contact between separated family members and promoting knowledge of and respect for

international humanitarian law and international human rights law.

Since 2005, the ICRC has supported survivors of sexual violence by providing medical and psycho-social support as part of a broader emergency health care approach that benefits the general population and victims of all types of violence. The psycho-social support has been provided through 30 counselling and health structures. The structures were first set up by Civil Society Organisations in the 1990s and currently a majority of the counselling houses ("maisons d'écoute") are run by the Congolese Red Cross with technical support from the ICRC.



These counselling houses provide a safe and confidential space for survivors of sexual violence to receive appropriate psychosocial support, as well as primary health care, to help them overcome the trauma of the abuse they have suffered.

In 2015 ICRC, with the support of the British Red Cross, began testing an integrated approach to promote beneficiary socioeconomic integration by extending financial assistance through the provision of four unconditional cash payments to those identified as the most vulnerable from amongst survivors accessing services at the counselling houses. 100 beneficiaries were assisted over an 11 month period and received a total of \$500 in four instalments (\$150 in June, \$100 in August, \$100 in October and \$150 in December). Women were also asked whether they still lived with their husbands and priority was given to those who had been abandoned as an indication of vulnerability.

Participants of the pilot project also received brief sensitization sessions through two local microfinance institutions (MFIs) about good practices on project discretion, money management, Income Generating Activities and more.



How did the distributions work?

Focal points in the community were tasked with assembling the beneficiaries in the various regions for the Post Distribution Monitoring (PDM) sessions, where they would also receive their next voucher detailing the value of the voucher and how to exchange it for cash. An agreement was reached with a Microfinance Institution (MFI) and their local branches were used as distribution points. Beneficiary ID cards were distributed to each beneficiary and they were expected to bring them to the MFIs when exchanging their vouchers. Upon verification of

their ID, staff of the local MFIs would distribute the cash. which the beneficiaries could either take with them, or save in an account with the MFL MEIs were selected as the best transfer modality due to their permanent presence in the project areas. This gave beneficiaries more flexibility to decide when to withdraw money, thereby mitigating security concerns. It also meant that ICRC staff did not need to visit beneficiaries and go from door-to-door, which may have raised suspicions. The limited number of stakeholders involved also allowed the ICRC to have better oversight and to prevent fraud.



Implementation – How local and international actors complement each other

An international ICRC delegate led the British Red Cross cash transfer project for 16 months with the support of a national project coordinator who spoke the local language and who had worked with the ICRC since 1995. An additional three focal points from associated NGOs, but whom did not work in the counselling houses, were identified. These focal points gave the project a permanent presence in the field, limiting the need to cover long distances to project locations. The fact that they were community members also meant that any interaction they had with beneficiaries was not viewed with suspicion, and they could develop trust with the communities and beneficiaries. Post Distribution Monitoring (PDM) sessions could be organised by these focal points in advance, without undue attention being drawn to the meetings. ICRC was therefore able to meet beneficiaries. conduct PDMs and distribute vouchers in confidence, ensuring that connection with the project did not contribute to further

stigmatisation of the individuals.

The international nature of the ICRC means that they are not embedded in the communities and able to maintain a high level of project discretion, necessary due to the sensitive nature of the issue. Strict selection criteria and data protection mechanisms were put in place to ensure anonymity of the beneficiaries. ICRC verification mechanisms at every stage of the cash transaction process ensured that risks associated with corruption and fraud were mitigated.

SUMMARY OF FINDINGS

As an international actor, and therefore distinctly separate from the affected community, the ICRC plays a significant role in ensuring neutrality which can otherwise be challenging for local actors. The final evaluation of the pilot project indicates that the use of cash-based assistance (CBA) was successful in promoting the socio-economic reintegration of the survivors of sexual violence. Beneficiaries managed to regain a standard of living equal to, or better than, before the event. It is also clear that the project enabled the beneficiaries to lead lives as full members of their communities and, be more resilient in the future

 Effects on socio-economic integration and community acceptance of beneficiaries

Beneficiaries reported a strong increase in self-confidence in relation to their families and communities. The cash transfers have enabled them to make dignified, self-determined choices which have led to a range of positive social outcomes. The only occasional negative perception was related to potential jealous family members, neighbours and friends. Be that as it may, due to the safety measures in place to ensure project discretion, 88.5% of beneficiaries stated that their communities did not know about their involvement in the project and only 3.3% reported that their community was unhappy about them receiving the money.

Facts & Figures

- > Beneficiaries were asked what their most important accomplishments were as a result of the project and 34% reported social accomplishments rather than material, such as better schooling for children, social integration, self-confidence and family life.
- 100% of beneficiaries reported that they had re-integrated into their communities and families.
- Despite no clear definition, and based on anecdotal evidence, 92% reported that their children's health was now 'much better' with 8% reporting that it was 'better'.

- More robust measurements, and evidence, were collected using the Household Diet Diversity Score (HDDS), which is a standardized measure to determine the number of different food groups consumed within a household. Before the project began only 23% of beneficiary households were above the HDDS threshold; by the end 98% of households had a sufficiently diverse diet.
- The average household size rose slightly over the course of the project from an average of 6.57 in the beginning to 7.02 by the end. This is primarily due to the "adoption" of family members' children, meaning that the positive effects of the cash transfers are reaching more people over time.

Relationships to partners and Rural, Semi-Rural and Peri-Urban Variances

40% of married women who were abandoned had their husbands return to them by the end of the project. Generally, the return of husbands was viewed as a positive result by the beneficiaries, as family unity is valued highly in DRC. Nevertheless. not all women chose to accept returning husbands, having found value in their newly gained independence. It is also unclear if the husbands' return was more associated to the regained economic status of their wives, versus an actual de-stigmatisation of their SGBV experience.

The most noticeable difference between the various environments was women's attitudes towards the husbands that had left them. In rural areas they were more likely to be welcomed back, whereas husbands were mostly rejected in peri-urban zones. Beneficiaries in semi-rural zones indicated that they would tolerate their husband but kept at a distance. There were no cases of women setting up a home with a new partner. The main reasons cited were that they appreciated their independence and found it difficult to trust men generally. Secondly, many were not sure whether a new partner would get along with their children.

2. Economic impact on beneficiaries

Distributing the cash in four instalments was deemed successful as it allowed beneficiaries to progressively get used to "large" amounts of money and return to a pre-event standard of living within the first two transfers. They used the money to pay off debts, buy land for a house, re-acquire basic household goods, send children to school and cover health expenses. The last two transfers allowed them to invest in Income Generating Activities (IGAs) and use their MFI accounts for savings.

Facts & Figures

- > 21% keep money in the Microfinance Institution (MFI) with savings averaging \$52.
 Only 5% withdrew money in the last month.
- Income generating activities (IGAs) include a mixture of the following: agriculture (97%), petty trading (79%) and livestock in the form of goats (43%).
- At the end of the project approximately half of the beneficiaries owned agricultural land where they employ labourers to work on their fields. Around harvest time agricultural fields are a prime location for both sexual and economic violence, meaning that the beneficiaries are now more protected as they are not physically present.



Asset ownership increased significantly across the timeframe of the project - by the end, 77% of beneficiaries owned land compared to 30% at the beginning. Of the ones who now own land, 36% bought land to build a house on and 67% bought agricultural fields. This development contributes to the sustainability of the project's impact and the increased resilience of beneficiaries.

The ICRC supported simple sensitisation about good money management practice, but all beneficiaries stated that they would have appreciated more support in the form of training on money and IGA management. Many would have liked to be part of Village Savings and Loans Associations (VSLAs) which have been set up across the country, but waiting lists for these initiatives are very long and therefore membership was not possible for most beneficiaries. ICRC plans on providing more training to beneficiaries but it is recognised that there are drawbacks in doing so supporting professional training

during the project would have required external expertise from an NGO or training programme, which would decrease the levels of confidentiality. Instead, the women used the PDMs to exchange pragmatic tips with each other about how they used their money and ways of generating income.

The evaluation found that older beneficiaries and beneficiaries under 18 years were at a higher risk of economic difficulties due to either illness/ lower levels of strength and energy, or due to inexperience. Therefore, subsequent phases of the programme will need to incorporate adequate supportive strategies – e.g., training or mentoring in developing basic business plans, small business management, financial management, etc.

3. Lessons learnt from the Pilot Project

There is the potential for tension as a result of the distribution of cash to a certain section of the community and not others. The project helped beneficiaries to understand this reality and factor it in when engaging those who are not aware of the beneficiaries need, or not supportive in some way.

- The ICRC implemented > several strategies to protect beneficiary confidentiality; information partitioning, project discretion and anonymity kept beneficiaries safe under the 'Do No Harm' principle. An additional benefit was the focus on non-urban contexts as the geographical spread ensured that beneficiaries did not know each other beforehand. In future projects, ICRC is planning to put in place contingency plans in case confidentiality is breached; this is particularly important when considering urban interventions.
- > 85 of the 100 beneficiaries were formerly assisted by the counselling houses for victims of violence, including sexual violence; 15 were chosen from within

the communities as the most vulnerable heads of households. The inclusion of non-survivors of sexual violence beneficiaries was intended to test whether their participation would generate any benefits in terms of discretion or acceptance. However, as none of the beneficiaries knew each other prior to the project, these additional beneficiaries did not fulfil any function in protecting the identities of the survivors of sexual violence and provided no added value.

The vouchers were valid for the duration of the project and gave beneficiaries the flexibility to choose when to cash them in. This proved useful in certain weeks where local unrest would make travel harder and a robbery or assault more likely. Women made smart decisions about when to travel and avoided any security incidents over the duration of the project.

- The choice to use vouchers and the MFIs as distribution points was effective. Previous research conducted by Mercy Corps in the region indicates that implementing mobile cash transfers took a lot of time before the first instalment and raised issues with beneficiaries who had difficulties with entering PIN codes or completing transactions independently.³ The vouchers were relatively easy to implement and the cooperation with the MFIs meant that there was flexibility around saving and depositing money, when to exchange the voucher for cash and it added an additional layer of separation between the ICRC and beneficiaries, conducive to discretion.
- More could have been done to link beneficiaries with each other and with local organisations and groups.
- In the future there should be more research into the longterm sustainability of cash interventions, particularly if the payments are not regular.

Future work on socioeconomic integration

BRC and ICRC will continue to pilot socio-economic reintegration models across various programmes and geographic contexts. Key to these models will be:

- The increased use of cash transfers to boost socioeconomic reintegration;
- Focusing on chronic emergencies, and/or fragile/ complex settings, within and beyond the Africa region;
- A protection strategy that ensures confidentiality and safe, ethical ways of distributing cash;

- Linking short-term interventions, such as microcredits, and long-term programmes which ensure sustainability;
- > Where possible, increased links with existing social programmes, local government, Village Savings and Loan Associations etc. to achieve a more comprehensive social safety net for vulnerable people. Increased collaboration with external actors should nevertheless take into account beneficiary confidentiality.
- Partnership working across the Red Cross and Red Crescent Movement – such as between BRC and ICRC – and with other stakeholders.

3. Mercy Corps - CHEAPER, FASTER, BETTER? A case study of new technologies in cash transfers from the Democratic Republic of Congo (2015)

RECOMMENDATIONS ... for Practitioners

- Supporting survivors of > sexual violence with cash transfers to achieve social and economic reintegration can be an effective tool given the right circumstances. It can be particularly effective in protracted crises, when reoccurring shocks are likely to affect vulnerable households repeatedly. However, the need for, and benefits of, such interventions are contextspecific and implementation of similar programs should be based on a comprehensive context and needs analysis.
- To achieve project discretion, contact with beneficiaries should be kept to a minimum, especially if the implementing organisation is highly visible. International actors are often more equipped to provide the distance and discretion required for handling sensitive information, whilst local actors can blend into communities and are able to facilitate activities.

However, measures need to be taken to ensure discretion of the project.

- Practitioners should remain aware that alternative or complementary interventions may be required to facilitate access to public services, such as health and WASH. For instance, this intervention would have benefitted from increased training and coaching in health, hygiene and nutrition.
- The 'Do no Harm' principle should guide any humanitarian intervention on supporting survivors of sexual violence; choosing the right modality includes assessing the risk for the safety of the beneficiary.

RECOMMENDATIONS ... for Policymakers

Cash transfer programming has shown to be an effective tool across various areas of humanitarian interventions, often with unintended positive consequences. The High Level Panel on Humanitarian Cash recommends that we ask: 'Why not Cash?'

Policy-makers > should recognize the complementarity of local and international actors. Local actors are often the first responders to a crisis; they have a unique insight into the local context and community dynamics, and are often able to access highly insecure areas. International actors are more distinct from the communities they are serving, which can be an advantage in order to protect beneficiary anonymity and discretion. Policy-makers should consider complementarity, strengthen local capacity where possible, and look for synergies to build on.

> Where possible, more should be done to link humanitarian cash transfer programmes with existing social safety net measures taken by national governments or other NGOs, where government-led programmes do not yet exist.

RECOMMENDATIONS ... for Donors

- Cash transfers currently only make up an estimated 6% of all humanitarian interventions. Donors should encourage more cash transfer programming and recognize it as a tool that gives beneficiaries the choice and dignity to make independent decisions about their own needs.
- Donors should also recognize the complementarity of local and international actors; partnering with those who have the capacity to deliver in appropriate contexts. Strengthening the capacity of local and national actors is essential for a healthy humanitarian ecosystem, and a commitment made through the Grand Bargain at the 2016 World Humanitarian Summit.

The ICRC's mission statement

The ICRC is an impartial, neutral and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of armed conflict and other situations of violence and to provide them with assistance.

The ICRC also endeavours to prevent suffering by promoting and strengthening humanitarian law and universal humanitarian principles.

Established in 1863, the ICRC is at the origin of the Geneva Conventions and the International Red Cross and Red Crescent Movement. It directs and coordinates the international activities conducted by the Movement in armed conflicts and other situations of violence.

The British Red Cross

The British Red Cross is one of 190 National Red Cross and Red Crescent Societies. National Societies are volunteerbased organisations and part of the world's largest independent humanitarian network, the International Red Cross and Red Crescent Movement, which is committed to the Fundamental Principles of humanity, impartiality, neutrality, independence, voluntary service, unity and universality.



Red Cross National Societies are volunteer-based organisations and part of the world's largest independent humanitarian network: the International Red Cross and Red Crescent Movement. The Movement is committed to seven Fundamental Principles: humanity, impartiality, neutrality, independence, voluntary service, unity and universality.

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