The “Gender-power” of Safety nets

SSN Core Course: November 4, 2019
Learning objectives

1. Identify opportunities to increase positive gender impacts through SSNs
2. Find practical operational solutions to avoid gender-related risks
3. Practice applying a gender lens to different stages of the delivery chain
Among most effective interventions for empowering women and reducing GBV

- Consumption
- Early marriage/pregnancy
- Girls’ schooling, employment
- Agency
- Violence (+/-)
- Norms (+/-)

130+ countries, over 700 million ➔ Empower at scale
Programs reduce intimate partner violence…

22 studies

From 11%-66% reductions in IPV outcomes
Multiple channels

- Economic security: Wellbeing reduces stress and conflict
- Empowerment and resources: Increased control over resources
- Bargaining: Increased power to bargain/leave (threat to power structures)
- Social capital: Development of social networks
- Social norms: Change as women gain independence
- Program exposure: Interactions with providers
  - Mobility
  - (e.g. GBV)
All programs have gender impacts

Even if:

- No gender objective
- Male recipients
- No focus on empowerment/GBV

Men and women experience poverty/vulnerability differently and have different control over resources, work, tasks. Impacts depend on intra-household relations and social norms. Baseline not neutral!
Safety Net Delivery Chain

1. Assess Potential Demand
2. Enroll
3. Provide
4. Recurring Cycle
5. Monitor & Manage

OUTREACH
IDENTIFICATION & ENROLLMENT
Transfer of cash or kind
Participation in income-generation (livelihoods or public works)
Behavior change promotion activities
Increase use of basic services
Case management
Grievance & compliance mechanisms
Feedback to design (M&E)
### Group Exercise: Applying a gender and GBV lens

#### Assess and Enroll

<table>
<thead>
<tr>
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<th>Design/implementation choices</th>
<th>Opportunities and risks</th>
<th>Operational solutions</th>
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<tr>
<td>1. Outreach</td>
<td>Who to target ?</td>
<td>Build community support for women’s inclusion and prevent backlash</td>
<td>Include ‘norm enforcers’ (husbands, in-laws, elders...)</td>
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<td>2. Identification and enrollment</td>
<td>Beneficiary selection process ?</td>
<td>Ensure inclusion of women</td>
<td>Avoid exclusionary ID requirement</td>
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**Group Exercise:**
- **Apply a gender and GBV lens**

1. **Outreach**
   - Who to target?
   - Build community support for women’s inclusion and prevent backlash
   - Include ‘norm enforcers’ (husbands, in-laws, elders...)

2. **Identification and enrollment**
   - Beneficiary selection process?
   - Ensure inclusion of women
   - Avoid exclusionary ID requirement
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<tr>
<td>3. Cash or in-kind transfer</td>
<td>Female or male recipient?</td>
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<tr>
<td>4. Participation in income-generation (public works/livelihoods)</td>
<td>Which type of public works/livelihoods activities?</td>
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<tr>
<td>5. Behavior change promotion activities</td>
<td>Address gender &amp; GBV directly?</td>
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<tr>
<td>6. Increase use of basic services</td>
<td>Verification requirements?</td>
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<tr>
<td>7. Case management</td>
<td>Who provides?</td>
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<tr>
<td>8. Grievance &amp; Compliance mechanisms</td>
<td>What channels?</td>
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<tr>
<td>9. Feedback to design (M&amp;E)</td>
<td>Who participates?</td>
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</table>
Group Work

1. Read about the program you have been asked to roll out

2. Identify **actions** at selected stages of the delivery chain *to maximize the positive impact of the program on women, and mitigate any harmful consequences*

3. Summarize the actions in the table provided

Be ready to report back in 15 minutes!
## Assess and Enroll Beneficiaries

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<tr>
<td>1. Outreach</td>
<td>- Who to target?</td>
<td>- Ensure women participate</td>
<td>- Differentiated outreach</td>
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<tr>
<td></td>
<td>- How to reach them?</td>
<td>- Build community support</td>
<td>- Find women’s ‘spaces’</td>
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<td></td>
<td>- What to communicate?</td>
<td>- Avoid backlash</td>
<td>- Involve both norm ‘enforcers’ and ‘change’ agents</td>
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<tr>
<td>2. Identification and Enrollment</td>
<td>- Which HHs?</td>
<td>- Avoid exclusion</td>
<td>- Safety measures*</td>
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<tr>
<td></td>
<td>- How to identify?</td>
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<td></td>
<td>- How to enroll?</td>
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<td></td>
<td>- Ensure inclusion</td>
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<td>- Don’t reinforce traditional roles</td>
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<td>- Avoid extortion</td>
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*Safety measures relate to both a program activity or service itself, and to the risks associated with getting there/back. Key elements include: location, time of day, means of transportation, etc.
## Provide - Economic Resources

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</table>
| 3. Cash or in-kind transfer | - Who is recipient?  
- What is modality?  
- What size / periodicity of transfer? | - Increase women’s control over resources (female beneficiaries)  
- Risk of backlash or confiscation by family members  
- Violence, harassment & exploitation risks travelling to and at payment points | - Training to improve budget planning  
- Small transfers often vs. large less-often  
- Travel during day in groups or with ‘protectors’, reduce wait time  
- Direct distribution v. transfer v. mobile  
- Avoid public disclosure of date/location |
| 4. Participation in income-generation | - What public works?  
- What livelihoods activities?  
- Which family member participates? | - Build community assets that matter for women  
- Transfer assets & skills  
- Build self-esteem & efficacy  
- Risks of workplace safety and exploitation  
- Increased work burden | - Include services in public works  
- Gender conforming work (or not)  
- Flexible work times/duration/days  
- Mixed or separate groups  
- Provisions for pregnancy, lactation & childcare  
- Code of conduct, monitoring, sanctions  
- Safe transportation & location of work  
- Separate sanitation for women |
Provide – Human and Social Capital Development

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<td>5. Behavior change</td>
<td>- Topics?</td>
<td>- Encourage behavior change</td>
<td>- Individual vs. group BCC activities</td>
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<tr>
<td>promotion activities</td>
<td>- Format?</td>
<td>- Address negative norms</td>
<td>- Women vs mixed groups</td>
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<td></td>
<td>- Delivery?</td>
<td>- Create social capital</td>
<td>- Groups vs individual</td>
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<td></td>
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<td>- Risk of backlash</td>
<td>- Focus on gender/GBV (or not)</td>
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<td>- Risk of increased time poverty</td>
<td>- Involving norm enforcers (men/mother-in-law, elders)</td>
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<td>6. Increase use of</td>
<td>- Which services?</td>
<td>- Increase human capital</td>
<td>- Safety measures</td>
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<td>basic services</td>
<td>- Verification?</td>
<td>- Safety risks associated with external service providers</td>
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<td>- non-compliance consequences?</td>
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<td>7. Case management</td>
<td>- Who provides?</td>
<td>- Holistic approach for complex issues</td>
<td>- Assess safety of service to decide if adequate, and monitor</td>
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<td>- What services?</td>
<td>- Tailored household strategy</td>
<td>- SEA prevention plan implementation, monitoring, GRM</td>
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<td>- Build agency for problem solving</td>
<td>- Safe access/infrastructure</td>
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<td>- Trained personnel for GBV</td>
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<td>- Establish clear referral protocols, (incl. GBV)</td>
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<td>- Comprehensive inventory of services</td>
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<td>- Survivor-centered approach (safety, agency, rights)</td>
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- Safety risks associated with external service providers
- Increase human capital
- Holistic approach for complex issues
- Tailored household strategy
- Build agency for problem solving
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- Risk of backlash
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- Individual vs. group BCC activities
- Women vs mixed groups
- Groups vs individual
- Focus on gender/GBV (or not)
- Involving norm enforcers (men/mother-in-law, elders)
- Safety measures
- Assess safety of service to decide if adequate, and monitor
- SEA prevention plan implementation, monitoring, GRM
- Safe access/infrastructure
- Trained personnel for GBV
- Establish clear referral protocols, (incl. GBV)
- Comprehensive inventory of services
- Survivor-centered approach (safety, agency, rights)
Monitor & Manage

8. Grievance & compliance mechanisms

- Reporting process?
- Processing
- Referral?
- Redress?

9. Feedback to design (M&E)

- Process evaluation?
- Impact evaluation?

- Prevent/redress discrimination or harm (GBV)
- Risks of backlash
- Risk that ‘nothing changes’

- Identify achievements
- Identify problems or unexpected risks
- Improve design and implementation

- Multiple channels (safe and anonymous)
- Specialized gender & GBV training for GRM staff
- Prioritize safety and harm reduction over ‘mediated’ resolution (esp. GBV)
- Establish protocols for in-house response and referral for some issues (GBV)

- Use the “gender-lens” in evaluations
- Include women in process evaluations (safely)

Training & institutional capacity
6 lessons

1. Great potential to close gender gaps and reduce GBV
2. Gender impacts even if not explicit objective/design, b/c of gendered context
3. With limited tweaks, you can boost positive gender impacts and reduce risks
4. No ready-made solutions, context is essential
5. Frontline service providers are key to impacts (heroes or foes)
6. Unlike most grievances, GBV calls for referral to specialized survivor-centered services
Annex on GBV
What is a survivor-centered approach?

• All programs prioritize rights, needs, and wishes of the survivor.

• Survivor has a right to:
  • be treated with dignity and respect (not exposed to victim-blaming attitudes)
  • choose the course of action (not be forced to follow a path)
  • privacy and confidentiality (not exposure)
  • non-discrimination
  • receive comprehensive information to make her own decision

• A supportive environment promotes recovery and reinforces capacity to make decisions about possible interventions
<table>
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<th>Why Does Violence Against Women and Girls Matter?</th>
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<td><strong>Violence against Women and Girls...</strong></td>
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<td>- is a profound symbol of gender inequality and social injustice</td>
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<td>- hinders social and economic development</td>
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<tr>
<td>- reinforces other forms of discrimination including based on disability, age, race, sexuality, HIV status, class and caste</td>
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<tr>
<td>- prevents girls and women’s equal participation at every personal, social and political level</td>
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<tr>
<td>- is extremely costly – for families, communities and nations</td>
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Gender-based violence (GBV) is an umbrella term for any harmful act that is perpetrated against a person’s will and that is based on socially ascribed (i.e. gender) differences between males and females. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in private (IASC 2015). Women and girls are disproportionately affected by GBV across the globe.

Understanding why the term GBV has been used historically to refer to violence against women and girls...

“Violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women” (UN Declaration on the Elimination of Violence Against Women 1993).
Women and girls in World Bank financed project areas are experiencing gender based violence. World Bank financed operations can contribute to the mitigation, prevention and response of violence faced by women and girls.
Why Are We Here?

Why Do We Need To Care About This?

• GBV is prevalent
• If GBV is not addressed, our projects could do more harm than good
• Improving well being of women, families, households and communities
• Lessons Learnt from the Uganda and DRC Inspection Panels
  • What happened
  • What we did wrong
## Consequences Beyond Survivors

| Effects on children of women who experience abuse | Higher rates of infant mortality  
• Behavior problems  
• Anxiety, depression, attempted suicide  
• Poor school performance  
• Physical injury or health complaints  
• Experiencing or perpetrating violence as adults |
| Effects on families | Inability to work  
• Lost wages and productivity  
• Housing instability |
| Social and economic effects | Costs of services incurred by victims and families (health, social, justice)  
• 42% higher health care expenditures in US  
• Lost workplace productivity and costs to employers  
• 3.7% of GDP in Peru  
• Perpetuation of violence |
An Integrated Approach to Ending Violence Against Women

Access to Justice

Support Services for Survivors

Violence Prevention

Strengthening the enabling environment for addressing violence against women
What Works Response

Holistic/Multi-Sectoral Response Services

- Health Services
- Psychosocial Counselling
- Legal Services - Security
- Police Services
- Livelihood Support
- Safe house - Shelter

Essential Services Package for Women and Girls Subject to Violence *Core Elements and Quality Guidelines*
Guiding Principles in Working with Survivors and Witnesses of GBV

1. Ensure **access to service** – health, psychosocial, legal/security, safehouse/shelter, livelihood
2. Ensure a **survivor centered approach** – give the power back to the survivor – listen, present options of support, ensure informed decision making
3. Ensure **Safety** – facilitate the survivor feeling safe at all times
4. Ensure **Confidentiality** – (for the survivor and her family) Not disclosing any information at any time to any party without the informed consent of the person concerned.
5. Actions are to be guided by respect
6. **Non-discrimination** - Survivors of violence should receive equal and fair treatment regardless of their age, race, religion, nationality, ethnicity, sexual orientation or any other characteristics
<table>
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<tr>
<th>Essential services and actions</th>
<th>Health</th>
<th>Justice and Policing</th>
<th>Social services</th>
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**Coordination and governance of coordination**

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<th>National level: Essential actions</th>
<th>Local level: Essential actions</th>
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**Essential Services Package for Women and Girls Subject to Violence Core Elements and Quality Guidelines**
What Do Quality Services Look Like?
First Line Support

First line support provides practical care and responds to a woman’s emotional, physical, safety and support needs, without intruding on her privacy. Often, first line support is the most important care that can be provided. (WHO Guidelines and Clinical Handbook)

1. Immediate emotional/psychological health needs
   - Non-judgmental, and supportive listening
   - Validating experience
   - Offering information and access to resources

2. Immediate physical health needs
   - Medical attention to physical injuries
   - Availability of emergency contraception
   - Post-exposure prophylaxis for STIs and HIV

3. Ongoing safety needs
   - Assist safety of survivor and children
   - Referral to shelter/safe house if available

4. Ongoing support and mental health needs
   - Assess for depression and PTSD
   - Explore options to strengthen social support

Always confidential and Survivor-centered
Resources

- "Violence against women and girls"
- "Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action"
- "Community-Based Approaches to Intimate Partner Violence"
- "Researching Violence Against Women"