

“With Money,  
I’m the Queen”

Integrated Cash and Gender-Based  
Violence Programming for IPV  
Survivors in Guayaquil, Ecuador

Evaluation Snapshot



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**“I feel like a queen now. I swear to you, I was minimized when I was with my children’s father. I was beaten, I was abused, I was yelled at, mistreated. But now, as I tell my children, with money, I’m the queen, because with money you can pay your expenses.”**

– Ecuadorian woman, cash group

## BACKGROUND

Migrant and refugee women and girls are vulnerable to a range of risks before, during, and after humanitarian crises. Intimate partner violence (IPV), a type of gender-based violence (GBV), is among the many protection-specific risks they face.

Traditionally, refugees and internally displaced persons have received aid in the form of in-kind assistance, such as food and blankets. Increasingly, cash and voucher assistance (CVA) is being used in humanitarian response to meet the diverse needs of those displaced by crisis and conflict, enhancing recipients’ autonomy over what they use the funds for.

For displaced IPV survivors, their extremely limited financial resources often restrict, or prevent, access to key services, such as medical and legal support. The flexibility of CVA can enable a timely response to meet urgent needs safely. CVA integrated within GBV case management can, for example, help an IPV survivor cover the costs associated with fleeing an abusive relationship, such as legal assistance, temporary shelter and rent, transportation to access services, food, and clothing.

As a result of the conflict in Venezuela, an estimated 800,000 Venezuelan migrants and refugees are in Ecuador (as of May 2022). Eighty percent have significant protection needs. Response services for IPV survivors remain limited and insufficient for Venezuelans and Ecuadorians alike.

With support from the Enhancing Learning and Research for Humanitarian Assistance (Elrha) IPV Award, the Women’s Refugee Commission, CARE, the Ecuadorian Center for the Promotion and Action of Women (CEPAM), the National Union of Domestic Workers and Related Workers (UNTHA), and Mujer y Mujer Foundation partnered in 2020 to strengthen the capacity of GBV service providers to use CVA within case management services in the prevention of and response to IPV for migrant, refugee, and local populations in Guayaquil, Ecuador. Guayaquil is the second largest city in Ecuador, and host to the majority of Venezuelan migrants and refugees in the country.

From August 2021 to January 2022, 113 IPV survivors from host, refugee, and forced migrant communities participated in either GBV case management (non-cash group) or integrated cash and GBV case management (cash group) for three months. Using a quasi-experimental mixed methods research design, WRC and partners generated evidence in support of and provided recommendations for integrated cash and GBV programming to support IPV survivors to recover from violence.

## KEY FINDINGS

- Participants in the cash group reported feeling safer and more secure than those in the non-cash group. The cash transfer was directly linked to increased protection outcomes for IPV survivors by diminishing the financial gap survivors faced in their recovery and reducing financial drivers of further risks of exposure to IPV. Receiving cash prevented them from returning to or engaging with their abusers in moments of economic instability, even when their abusers tried to take advantage of their financial vulnerability.
- One-third of the participants in the cash group invested in a small business, which allowed many of them to generate a sustainable income, to exhibit independent decision-making, and to feel self-reliant and empowered. However, most survivors reported that the cash was not sufficient. Many participants spent the cash transfer on meeting basic needs, obtaining medical care or medicines, or paying off debts, rather than using it for expenditures that would more directly reduce IPV and increase protection.
- Over the program period, refugee and migrant women in the cash group experienced less IPV, higher employment, and more access to services than Ecuadorian women. However, they still faced the risk of violence from non-partner aggressors, such as law enforcement and other authorities, who may place survivors at risk of exposure to sexual exploitation and abuse. Refugees and migrants reported insecurity due to their lack of legal documents.
- Participants in the cash group reported better outcomes for themselves, including more independence, confidence, and resilience in comparison to the non-cash group. They also reported greater behavioral, psychological, and physical improvements for their children. As women became better equipped to leave abusers and meet the needs of their children, their relationships with their children improved. In helping mothers in this program, children also benefited.



CREDIT: © 2018 Heidi Natkin/CARE.  
Survivor of IPV living in Guayaquil, Ecuador  
Consent provided

## TOP RECOMMENDATIONS

- Systematically adopt referrals of IPV survivors to "cash-plus" programming. Cash alone is insufficient, but the delivery of cash in tandem with other activities and services, including legal and psychosocial support and workshops to build peer networks, is key to survivors' recovery, as well as the recovery of their family members.
- For cash assistance integrated within GBV programming to be used for reduction of IPV and increases in protection outcomes, survivors' basic needs must be met; otherwise, the cash transfer will be used for survival needs, and it is less likely that survivors' protection from IPV will be increased. Cash transfer values should be flexible, specific to the needs of each survivor.
- Integrate program components to support children of IPV survivors to increase their safety, well-being, access to services, particularly psychological care, and to decrease violence impacts.
- Ensure that in addition to CVA referrals, referrals to livelihoods programming are activated.
- Assist IPV survivors in implementing survivor-led initiatives to better serve the various needs of participants in the program.
- Provide refugees ways to secure legal documentation, either through direct legal services or a dedicated referral system to another aid organization.
- Leverage local partnerships to meet the variety of survivors' needs by developing a dedicated referral network across organizations. Assessing partners' capacities early on, during development of the program, is essential.
- Build peer-to-peer capacity to support partners to better implement a cash-integrated GBV response case management program, especially for marginalized populations like LGBTQI+ individuals.
- Make it easier and safer for survivors to report abuse. With Ecuador's incidence of femicide at its highest since 2014 (196 deaths in 2021), IPV survivors must be better supported when seeking justice.

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Read the full report [here](#).

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**The Women's Refugee Commission** improves the lives and protects the rights of women, children, and youth displaced by conflict and crisis. To learn more, visit [womensrefugeecommission.org](http://womensrefugeecommission.org).

**CARE** is a leading humanitarian organization fighting global poverty. Our emergency responses focus on the needs of the most vulnerable populations, particularly girls and women. [www.care.org](http://www.care.org).

**CEPAM** was founded in 1983 by a group of feminist women in Ecuador committed to gender equality, women's rights, social justice, equity, and inclusion. [www.cepamgye.org](http://www.cepamgye.org).

**Mujer & Mujer** is an Ecuadorian NGO that promotes women and LGBTQI+ leadership towards developing a more just and equitable society. <https://mujerymujer.org.ec/>.

**UNTHA** fights together with organizations of paid workers in Latin America to guarantee the human and labor rights of all workers in the region. <https://es-la.facebook.com/UNTHAECUADOR/>.

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