

EMPOWERING WOMEN, ENDING VIOLENCE

*Cash assistance within
GBV case management
in Cameroon*



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EXECUTIVE SUMMARY

Ongoing instability in Cameroon's Northwest, Southwest, and Far North regions, coupled with growing exposure to climate change events, is having a devastating impact on communities and especially on women and girls. Gender-based violence (GBV) has been exacerbated due to the crisis, with 95% of affected communities interviewed during the 2023 [Voices from Cameroon](#) assessment reporting incidents of violence. This includes intimate partner violence (IPV), physical assault, sexual violence, forced and child marriage, and emotional abuse. The breakdown of social order and displacement caused by armed violence and natural disasters have heightened vulnerabilities for women and girls. Disrupted access to essential services, including healthcare and psychological support, further reduces healing opportunities. This escalation in GBV has severe consequences on the well-being of women and girls, their families, and their communities.

Addressing GBV in crisis-affected regions requires a comprehensive approach that prioritizes safety, dignity, and access to multi-sectoral services for survivors. Strengthening referral pathway, legal frameworks, improving data collection, and raising awareness within communities are crucial steps

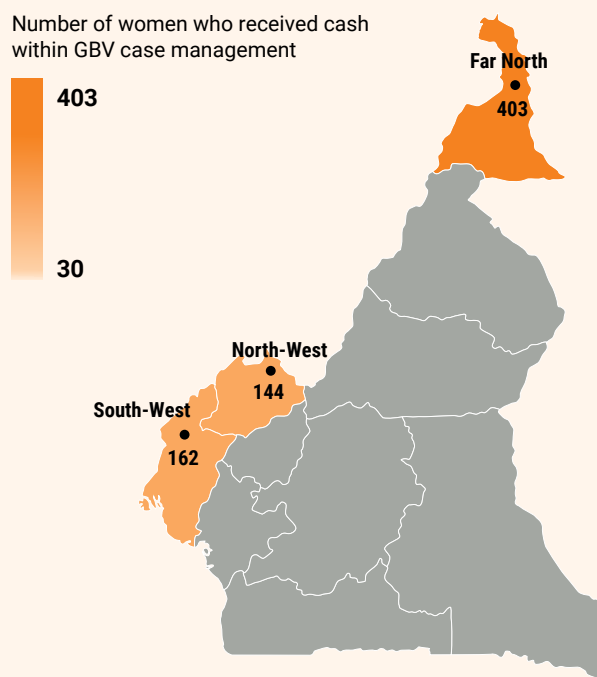
towards building a more secure and enabling environment.

In this context, UNFPA Cameroon started integrating cash assistance within GBV case management in humanitarian contexts in 2022 to help survivors meet their specific needs and support their healing process. Cash assistance offers survivors the financial resources to make critical decisions about their safety, well-being and livelihoods. This can include fleeing abuse, securing housing, or accessing healthcare. This approach was initially piloted within GBV case management using funds from the European Civil Protection and Humanitarian Aid Operations (ECHO) in the Northwest, Southwest, Littoral, and West regions of Cameroon. Practical experience and lessons learned informed the program's expansion, which was made possible through subsequent funding from the Central Emergency Response Fund (CERF) and the Bureau for Humanitarian Assistance (BHA) of USAID.

From 2022 to 2024, 709 women received cash assistance in crisis-affected regions, with 403 recipients in the Far North region and 306 in the Northwest and Southwest regions. Monitoring of these cash assistance interventions contributed to

improved safety and resilience of women survivors of GBV who received it as part of their GBV case management plan, with more than 80% of surveyed recipients reporting that the cash had a positive impact on themselves and their households. Cash assistance provided to GBV survivors within case management addressed essential needs, improved access to specialized GBV or sexual and reproductive health (SRH) services, and contributed to a heightened sense of safety and empowerment among survivors. Approximately 19% of survivors expressed ongoing vulnerability concerns following the receipt of the cash assistance. These remaining needs highlight the importance of addressing long-term safety and the well-being of recipients in the context of limited available funding. Even so, the integration of cash assistance into GBV case management programs in Cameroon has proved to be a valuable tool in supporting survivors of GBV, providing them with the resources to meet their specific needs, rebuild their lives, and increase their resilience.

Geographical coverage of the cash in GBV case management intervention in crisis-affected areas in Cameroon



BACKGROUND AND OBJECTIVES

The Far North crisis that erupted in 2011 and the Northwest and Southwest crisis that started in 2017 in Cameroon have displaced millions of people and disrupted access to essential social services, including SRH care. In these regions, GBV, a widespread human rights violation in Cameroon, disproportionately affects women and girls. Gender inequality and discrimination are deeply rooted in systemic patriarchy and social exclusion, which perpetuate and exacerbate GBV. These challenges have been intensified by armed violence, insecurity, and natural disasters. According to the [Humanitarian Needs Overview Cameroon 2024](#), 928,000 people require GBV prevention and response services across the crisis-affected areas of Cameroon.

IPV, sexual violence and denial of resources and opportunities are the most reported manifestations of GBV. Data from the GBV Information Management System (GBVIMS) from 2023, shows that two out of every three GBV cases reported in specialized service provision points are due to IPV. Around one-third of IPV survivors reported denial of resources, while approximately reported 20%

physical violence, 20% sexual violence, and 4% forced marriage. The 2023 qualitative [Voices from Cameroon](#) assessment conducted by the UNFPA-led Gender-Based Violence Area of Responsibility (GBV AoR), paints an even starker picture. Specifically, 100% of the focus group discussions reported sexual violence as a major concern for women and girls, while more than 90% highlighted IPV. Moreover, women and girls participants reported experiencing a range of psychological and emotional effects, including trauma, depression, suicidal thoughts, low self-esteem, frustration, stigma, and loss of hope. Constant fear pervades their lives, impacting daily activities. Violence also contributes to health issues like physical injuries, hypertension, sexually transmitted infections, unwanted pregnancies, unsafe abortions, and even death. Many women and girls are forced to make drastic changes due to the fear of violence. They alter their clothing, avoid specific areas, and restrict activities, ultimately leading to decreased participation in community life.

In response to this complex crisis, UNFPA Cameroon has been working in crisis-affected

regions to address the critical needs of women and girls and conduct GBV response programs. Cash and voucher assistance (CVA) has been implemented in Cameroon since 2021 in line with the UNFPA Guidelines for Cash and Voucher Assistance to provide critical support to vulnerable populations affected by the conflict. UNFPA Cameroon has increasingly adopted the integration of cash assistance as an additional tool within humanitarian GBV case management, particularly

through programs implemented in the ongoing crises in the Northwest, Southwest, and Far North regions. This cash assistance has been used as an additional assistance modality to help survivors overcome economic barriers and therefore meet their specific needs and access essential services. The approach aimed to mitigate further GBV risks for survivors, enhance the overall GBV response by addressing economic barriers, and facilitate the recovery and empowerment of survivors.

METHODS

The approach

To implement cash assistance within GBV case management, UNFPA Cameroon employed a combined approach to ensure partners were well-equipped to use cash as a tool within survivor's GBV case action plans. First, UNFPA assessed the abilities of implementing partners, which were mostly local organizations.¹ Second, UNFPA Cameroon used [UNFPA's corporate guidance on cash assistance within GBV case management](#) and trained partners working in the Far North, Northwest, and Southwest regions on this approach. Third, the country office actively participated in and interacted with the national Cash Working Group (CWG), contributing to the development of relevant documentation such as WFP's [Protection Risks Analysis in the Far North Region of Cameroon](#). Fourth, the country office helped its implementing partners to apply UNFPA Cameroon's SOP on Cash Assistance within GBV Case Management.

In addition, in order to design and set up cash assistance within UNFPA Cameroon's existing GBV programs, the country office also worked to:

- **Gather essential information from assessments:** UNFPA Cameroon identified specific needs and constraints faced by women and girls in the context related to GBV prevention and response within case management. The country office also evaluated the feasibility and effectiveness of using cash with partners within the target areas to address GBV-related needs, and selected efficient and safe delivery mechanisms to ensure that assistance could

reach the targeted individuals in a timely manner that took into account socio-economic factors, community-based approaches, and other measures of vulnerability.

- **Implement monitoring and evaluation:** The country office tracked the impact of cash assistance on survivors' case actions plans for GBV prevention and response, including monitoring client satisfaction and the effectiveness of delivery mechanisms.
- **Establish robust partnerships:** UNFPA Cameroon collaborated with government agencies and NGOs to deliver assistance efficiently and effectively, ensuring that it met the specific needs of GBV survivors.

This approach, aligned with UNFPA's global approach, ensured that the cash assistance was integrated into one-to-one case management and provided only when appropriate, following a thorough case assessment. As such, women and girls enrolled in GBV case management received cash assistance as part of their individual case action plan. This survivor-centered approach offered immediate emergency and life-saving aid, as well as medium to long-term support for recovery and healing and economic independence. This ensured that the cash assistance reached survivors such as women who lost access to economic resources or assets due to IPV, women denied legitimate access to economic resources related to labor exploitation, and women and girl survivors of sexual exploitation from a family member.

¹ These local organizations included two women-led organizations – Association de lutte contre les violences faites aux femmes, Extrême Nord Cameroun (ALVF EN) and Action locale pour un développement participatif et autogéré (ALDEPA) – as well as the Martin Luther King Jr. Memorial Foundation (LUKMEF) and the Community Initiative for Sustainable Development (COMINSUD).

Key tenets of using cash assistance in GBV case management

1. Prioritize survivor-centered design:

- **Case action plans:** Conduct in-depth one-to-one evaluation as part of the GBV case management process to assess specific needs and relevance of cash assistance for survivors based on their case plan, given the context, their specific vulnerabilities and possible risks.
- **Choice and control:** Empower survivors by giving them choice and control over how they utilize the cash assistance. Avoid restrictions on spending unless absolutely necessary for safety reasons.
- **Cash safety plans:** Put in place a safety plan as part of survivors case plan for cash recipients to mitigate possible GBV risks.e.g. considering alternative delivery mechanisms, ensuring confidentiality, providing information on hotlines or safe spaces.

2. Strengthen monitoring and accountability:

- **Develop robust MEAL frameworks:** Track program effectiveness by monitoring indicators such as program reach, client satisfaction, the use of cash and complementary services, and the impacts on survivor well-being and economic security, ensure accountability and use lessons learned for next interventions.
- **Fraud prevention mechanisms:** Implement robust fraud prevention mechanisms throughout the distribution process, which could involve recipient verification, partnering with reputable financial institutions, and establishing clear reporting channels for misuse.
- **Survivor feedback loops:** Establish feedback mechanisms for survivors to share their experiences with the program. This allows for continuous improvement and ensures the program remains survivor-centered and accountable by women's engagement.

3. Build capacity and collaborative partnerships:

- **Train FSP staff and partners:** Train financial service providers (FSP) staff and partners on survivor-centered principles, and GBV risk mitigation strategies including prevention and protection from sexual exploitation and abuse.
- **Collaborate with local organizations:** Collaborate with local women's shelters and financial institutions to leverage their expertise, ensure program accessibility
- **Sustainability planning:** Develop a long-term sustainability plan by building the capacity of local partners to manage cash assistance beyond the initial intervention period.

Transfer amount, frequency, delivery mechanism, and conditionality

The distribution of cash assistance to GBV survivors was based on each individual's case action plan, preferences and security needs. This flexible approach allowed for a variety of payment methods. The delivery mechanisms were chosen according to the preferences of the women and girls as well as their security needs. This included mobile cash payments, bank transfers, and cash in hand through intermediary case managers and financial service providers (FSPs). The cash assistance received by GBV survivors was unconditional and unrestricted, meaning that each survivor could spend the money however she wished. All recipients received a single transfer of

cash assistance as part of their case action plan. The transfer amount was calculated based on the cost of goods and services in the local contexts of the intervention, the objectives of the program, and the needs of survivors. This ranged from 50.000 XAF to 80.000 XAF (approximately 80 USD to 130 USD). For example, to address the immediate need to travel to a health facility and receive medical treatment, survivors of GBV received 50.000 XAF. In other cases, depending on the individual's vulnerability and their GBV case management action plan, a survivor might receive 50.000 XAF or 80.000 XAF to support their recovery in the medium term.

RESULTS

As part of the DG-ECHO (2021-2022), CERF (2022-2023), and BHA (2023-2024) interventions, three post-intervention surveys were conducted within a three-month timeframe. The surveys were conducted by case managers and administered to 60% of those receiving cash within GBV case management. The survey included a set of questions designed to measure the efficacy of cash assistance in addressing specific GBV-related needs and improving women's well-being. Overall, 81% respondents were satisfied with the assistance received, while 19% expressed ongoing vulnerability concerns following the receipt of the cash assistance.

Monitoring showed that UNFPA's cash in GBV case management approach in Cameroon enabled a number of positive outcomes:

- **Accessibility:** Each survivor could receive cash assistance through the best possible channel based on her unique circumstance. For example, if a recipient did not have access to digital services or if there was a risk that her partner could access digital resources, she could opt for a different delivery mechanism.

- **Efficiency and security:** Mobile money transfers, which were used by 100 of the 709 survivors, were faster and more secure than physical cash payments by a bank or case manager, which can be prone to theft or loss.
- **Choice and dignity:** Offering recipients the choice of delivery method took into consideration their preferences, mitigated possible risks, and aligned with the survivor-centered approach.



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MOVING FORWARD

Monitoring of UNFPA Cameroon's use of cash transfers to prevent and respond to GBV in humanitarian contexts in Cameroon has highlighted lessons learned and good practices for improving their use in GBV case management in future iterations of the intervention. UNFPA Cameroon and its partners will continue to apply their integrated approach, including:

- Conducting a continual analysis of GBV risks and vulnerabilities in the context of intervention, rather than ad-hoc before implementing cash assistance, in order to more comprehensively understand GBV vulnerabilities through the entire humanitarian cash cycle. It is paramount to identify potential risks and implement appropriate mitigation measures to ensure that the cash assistance does not create additional risk for the recipients.
- Taking into account the specific power dynamics in the context, considering the complex interplay of factors such as gender roles, social and cultural norms, economic dependency, and social hierarchies.
- Designing flexible cash assistance within GBV case management, tailored to each survivor's environment, needs, resources, and preferences in accordance with their case action plan. Experience has highlighted the importance of customizing the transfer amount and delivery method to fit individual needs.
- Ensuring women at risk and survivors actively participate in designing, implementing, and monitoring the assistance to best address their needs and support their healing process.

UNFPA extends its gratitude to the following generous donors that made possible its cash and voucher assistance programs to empower women and girls in Cameroon.



UNFPA Cameroon with the support of the
UNFPA Humanitarian Response Division

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November 2024

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Delivering a world where
every pregnancy is wanted,
every childbirth is safe and
every young person's
potential is fulfilled