

Cash assistance within GBV case management

Saving lives and meeting the urgent needs of GBV survivors



Summary of learning

Honduras is facing a multidimensional crisis, exacerbating widespread violence against women and individuals with intersecting vulnerabilities. As part of its efforts to better support those affected by gender-based violence (GBV) in Honduras, UNFPA provides cash assistance to GBV survivors through confidential, one-on-one GBV case management. Between 2023 and 2024, UNFPA disbursed approximately 690 cash transfers to women enrolled in case management in the country. Recipients used this tailored and flexible assistance to meet their immediate needs, move forward in their recovery from past incidents of violence, and prevent imminent risks and reliance on negative coping mechanisms.

Key findings and recommendations:

- UNFPA's integration of cash within GBV case management has played a crucial role in bridging humanitarian gaps in Honduras. In particular, it has helped to mitigate risks for survivors by improving the response to GBV and filling gaps related to safe houses with limited geographic spread and capacity, and which often have protocols that are not well-adapted to handling urgent needs.
- The flexible, tailored nature of cash assistance within GBV case management makes it an invaluable tool to meet GBV needs in a multicultural society with diverse dynamics, normalized violence, and many remote hard-to-reach areas.
- When providing cash assistance within GBV case management, both in local communities and to people on the move, it is crucial to adapt the cash to address the additional complexities that women may face. Such complexities may include the need for urgent lifesaving assistance, limited time to engage in case management, obstacles to accessing services, discrimination, and language barriers.

Background

As one of the poorest and most unequal countries in Latin America and the Caribbean, Honduras is currently grappling with a complex multidimensional crisis. Exacerbated by the COVID-19 pandemic, hurricanes Eta and Iota in 2020, and the effects of climate change, poverty is rampant in the country and contributes to high levels of protection, health, and food security risks. High rates of mixed migration and forced displacement have generated additional complexity and needs, with over 545,000 individuals crossing through Honduras in 2023 according to official reports, representing a 188% increase compared to 2022.¹

These challenges have fueled widespread and systematic gender-based violence (GBV) in the country. Honduras has one of the highest rates of violence against women in the world, with elevated levels of gun violence, domestic violence, femicide, sexual violence, psychological violence, and economic violence, although there is a lower incidence of intimate partner violence compared to the global average.² In 2023, 386 women in the country were victims of femicide.³

This violence has particularly impacted pregnant and lactating women, migrants, afro-descendant communities, LGBTIQ+ individuals, people with disabilities, women and girls from other marginalized communities, and those with intersectional

vulnerabilities. For example, women belonging to indigenous groups (such as the Garifuna, Lenca, Tolupana, Maya-chorti, and Misquito) are highly impacted, often living in overcrowded locations with high levels of sexual violence and exploitation. Women affected by GBV in Honduras face difficulties breaking out of the cycle of violence, as they often experience greater poverty, unemployment, and unpaid care workload and have more limited access to support services than men. These problems are further compounded for women living in areas where there are no safe houses or care services, especially given that national services currently have insufficient capacity to adequately respond to the high rates of GBV in the country.

Integration of cash assistance within GBV case management

As part of its comprehensive GBV response, UNFPA has incorporated cash assistance into GBV case management in Honduras since 2022 based on the agency's growing global [evidence](#) that it helps to save lives, preserve dignity, enhance safety measures against GBV, and promote the recovery and empowerment of survivors. Through this approach, women impacted by GBV receive cash transfers as part of their confidential, one-on-one case management with GBV case workers. The cash transfers, based on individual case action plans, are intended to help women affected by GBV recover from past violence or prevent imminent risks. Recipients can use the cash flexibly to cover the costs of immediate needs such as sexual and reproductive healthcare, legal expenses, temporary shelter, and transportation to services.

To ensure high-quality services and broad geographic coverage for its cash assistance within GBV case management, UNFPA Honduras chose to work with its national implementing partner Asociación Foro Nacional de VIH/Sida (Forosida), which UNFPA has worked with since 2020 as part of its global push for localization. With significant knowledge of the context, Forosida specializes in HIV/AIDS response and also provides GBV and protection services, including case management. To enhance Forosida's quality standards and ensure that it could effectively integrate cash assistance within its ongoing GBV case management, UNFPA provided training and capacity building to the organization, offering remote training, supervision and support as well as in-person peer-to-peer learning activities with other UNFPA country and regional offices.

1 [Instituto Nacional de Migración](#)

2 [OECD Social Institutions and Gender Index](#)

3 [Centro de Derechos de Mujeres](#)

In order to address potential risks to survivors, including when accessing cash assistance, UNFPA implemented various mitigation measures, such as training Forosida staff to carefully consider the context and create secure and confidential

mechanisms for the delivery of cash assistance. UNFPA and Forosida also jointly developed a risk matrix in order to identify possible GBV risks and the best strategies for UNFPA and its implementing partner to help reduce and mitigate them.

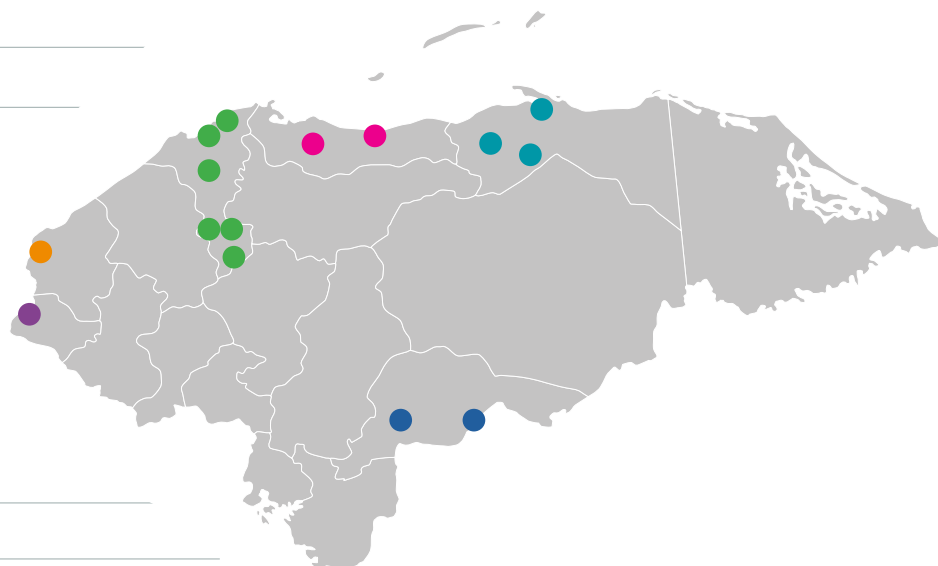
Scope and impacts

In 2023 and 2024 in the framework of a GBV CERF Project, UNFPA worked with Forosida to implement cash assistance within GBV case management in 16 municipalities throughout the country, including at border entry and exit points where UNFPA operates. Using a survivor-centered approach that prioritized respect, security, confidentiality, and non-discrimination, UNFPA was able to provide cash assistance within GBV case management through an estimate of 690 disbursements to women impacted by GBV in Honduras in 2023, approximately 26%

of recipients were women on the move throughout the country. UNFPA targeted women survivors of GBV and women at imminent risk of GBV who attended static and mobile safe spaces in local communities and border areas. UNFPA also provided GBV response services, at times including cash assistance, for women affected by GBV who were referred by other organizations in the area that identified individuals in need of GBV case management services.

Locations of UNFPA's cash in GBV case management interventions in Honduras

Department	Municipalities
● Copán	Copán Ruinas
● Colón	Sonaguera Tocoa Trujillo
● Atlántida	La Ceiba Tela
● Cortés	San Pedro Sula Choloma Villanueva San Manuel Omoa Puerto Cortés
● Ocotepeque	Ocotepeque
● El Paraíso	El Paraíso Danlí Trojes



“Cash is an essential tool in daily life, especially for survivors of GBV who in many cases are totally dependent on their aggressors. By gaining economic independence, survivors not only experience a financial breakthrough, but also a significant improvement in their emotional well-being. This step provides them with the opportunity to forge their own path, freeing them from the dependence they once held on their abusers and ushering in a process of holistic healing.”

- Forosida case worker

In most cases, cash was delivered via e-wallet. Even so, many women impacted by GBV in Honduras lack access to formal banking and do not have mobile devices. In such cases, UNFPA used cash in hand to meet high needs for immediate emergency support. To mitigate risks associated with disbursing cash in hand, deliveries were made in secure, discreet locations like private zones in women and girls safe spaces, with varied distribution times for recurring deliveries to avoid patterns.

The majority of cash transfers were one-off, with an average transfer amount of 55 USD per disbursement but which varied between 8 USD to 200 USD per transfer depending on identified needs. Recipients occasionally received up to three cash transfers based on their individual needs as identified during the GBV case management process. Cash assistance was disbursed in the national Honduran currency, the lempira. To improve the understanding of the GBV survivors on the move through Honduras who received cash within GBV case management at the country's border points, case workers explained the denominations of the lempira and informed the survivors of the value of the transfer in USD. These survivors received single transfers given that they were typically only involved in case management for a shorter period before leaving the country or moving elsewhere within it.

“For women who cannot access public safe houses, cash assistance allows them to cover the cost of pre-identified safe and private accommodation.”

- Forosida case worker

Case management follow up and monitoring showed that the women who received cash assistance were able to make their own decisions about how to spend it. The majority of the women who received cash through the case management process and were still living with their abusers chose not to inform them that they had received cash assistance, helping them to reduce the risk of any retaliation. Recipients used the cash assistance to ensure their safety and to meet the essential needs of themselves and their children.

Forosida's case workers reported that cash was an invaluable tool to meet the immediate needs of GBV survivors and women and girls at further risk of GBV. Underscoring this, other organizations in the area began to refer women and girls in need to UNFPA because its implementing partner was the only organization offering holistic case management that included the possibility of receiving cash assistance depending on the individual's needs. This was possible thanks to the coordination with other humanitarian actors through the national GBV sub-cluster as well as through joint work with local coordination teams.

Case workers emphasized that the flexible nature of the cash intervention, combined with the standardized GBV case management process, enabled them to effectively provide rapid care and support for GBV survivors by giving them the financial means to overcome economic barriers and access needed services. The cash was a vital tool in the recovery process, helping survivors ensure their wellbeing and build a safe and stable environment away from violence by covering the costs of urgent needs such as emergency accommodation, food for themselves and their children (when applicable), legal services, transport to health services, and medicines not available through public health services.

“Without a doubt, this is one of the most effective and truly life-saving responses for GBV survivors. The empowerment generated by the cash assistance has a positive impact, allowing the survivor to free herself from dependency and acquire the ability to make purchases or undertake actions on her own. This process contributes significantly to bringing the person out of the shadow in which she has lived.”

- Forosida case worker

Moving forward

Providing cash assistance within GBV case management in Honduras enabled UNFPA to help women who have been impacted by GBV achieve greater safety and choice. This autonomy was key to helping women make informed decisions about their needs and those of their families, seek health and legal services, and seek safe refuge by providing them with the resources necessary to move to safe environments and rebuild their lives. By offering direct resources, UNFPA was able to tailor the assistance to each individual's needs, providing flexibility to address unique situations and enhancing survivors' ability to recover.

Best practices

- The use of a [response framework](#) to aid caseworkers in the targeting process, selection of delivery mechanisms, and establishment of the transfer value, frequency and urgency of disbursements. This was key to help caseworkers adequately tailor the cash assistance to meet the needs of each recipient,
- and particularly to meet the needs of women on the move taking part in rapid GBV case management in border areas.
- Creating and utilizing a context-specific [GBV risk matrix](#) to identify possible risks and enhance effectiveness and security for both survivors receiving cash and the case workers delivering it. The use of a GBV risk matrix was particularly important in Honduras given the intersecting vulnerabilities many face in the context.
- Peer-to-peer sharing of knowledge, best practices, and tools, especially among regional UNFPA colleagues, which played a significant role in the success of UNFPA's integration of cash in GBV case management in Honduras.
- Sharing information with other humanitarian actors and participating in the national Cash Working Group (CWG) to acquire essential information on service mapping, especially in the identification and selection of financial service providers.

“To be able to listen to the woman's needs is to strengthen her capacity to make wise decisions that save her life. The lives of many women and their children have been saved [because of the cash assistance].”

- Forosida case worker

Next steps

- Future iterations of the intervention in Honduras will include the use of prepaid cards, in addition to cash-in-hand and e-wallet, which can be flexibly programmed with the correct amount of cash assistance for each survivor.
- UNFPA Honduras will continue to improve collaboration and communication with CWGs and to obtain essential assessments (such as updated market analyses) from them. This is a necessary step to more precisely determine a sufficient transfer value and to continuously adapt it in order to ensure greater efficacy and quality of GBV response considering the fluctuating inflation rates.
- When integrating cash assistance within rapid GBV case management that takes place in border areas with people on the move, women's intersectional vulnerabilities linked to mobility require special considerations. While women on the move affected by GBV experience many of the same types of violence as women from

the local population and use cash assistance to meet many of the same needs, they may face additional obstacles. These obstacles may include barriers to accessing necessary services, discrimination that could hinder their recovery and generate more complexity or additional violence, and language barriers. UNFPA will continue to recognize these differences and tailor the cash in GBV case management approach to sufficiently address them.

- In order to strengthen the implementation and sustainability of UNFPA's intervention in Honduras, it is necessary to consider possible exit strategies. This can include coordination with other actors and referring eligible survivors receiving cash within GBV case management to national livelihoods and vocational training programs as part of their case plan.

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

UNFPA Honduras and UNFPA Humanitarian Response Division

hrd-cva@unfpa.org

<https://honduras.unfpa.org/>

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