Women’s Empowerment Programming and Intimate Partner Violence in Democratic Republic of the Congo

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Sector(s): Gender, Labor Markets

Location: South Kivu, Democratic Republic of the Congo (Kamanyola, Nyangezi, Mumosho, Ciheraoni-Luciga)

Sample: 657 women, (full sample was 2,000 women, 1,000 of whom were randomly assigned to the program; only women who were cohabitating or married were asked IPV questions, resulting in observations for 657 women)

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Approximately one in three women worldwide have experienced intimate partner physical or sexual violence. Researchers are evaluating the impact of cash transfers and training on women's empowerment and intimate partner violence (IPV) in South Kivu, Democratic Republic of the Congo.

Policy issue

Approximately one in three women worldwide have experienced physical or sexual violence inflicted by an intimate partner, and nearly forty percent of murdered women are killed by a male intimate partner. Worldwide, women also face disparities in access to the labor market. In 2019, the proportion of working age women who were either working or actively seeking work was 51.6 percent, relative to 94.6 percent among working age men.

Policymakers are implementing a wide range of programs meant to economically empower women, such as cash transfers and vocational training. Yet, theories of intimate partner violence posit that economic changes can have large and varied impacts on the incidence of IPV. Intimate partners may use violence to control women's resources, including by expropriating women's wages after they join the workforce, or to assert their status. Some intimate partners seem more likely to be violent as a result of increased stress or scarcity, while other intimate partners may value violence for its own sake. Economic empowerment programs may worsen dynamics that contribute to IPV. For example, economic empowerment programs may result in large and unexpected changes in household income, which may influence the prevalence of IPV. If a household has more income, then men may be less likely to experience scarcity and act violently. Conversely, other evidence suggests that if a woman has a higher income, men may act more violently to assert control over household resources.

By increasing women's economic resources, some women's empowerment programs may have unintended effects on IPV prevalence. Does providing monthly cash transfers and training increase women's empowerment and/or impact the incidence of IPV? Furthermore, how can policymakers design interventions that reduce the risk of IPV?

Context of the evaluation
In the Democratic Republic of the Congo, 68 percent of women have experienced IPV. Approximately 60 percent of women in the DRC live below the poverty line, compared to approximately 50 percent of men, despite the fact the proportion of working age women and men who participated in the labor force in 2019 was relatively similar, at approximately 61 percent and approximately 66 percent, respectively.

In this evaluation, researchers drew a sample of women between 15 and 55 years old from four communities in South Kivu, DRC. Forty-five percent of women in the sample reported being insulted by an intimate partner in the twelve months prior to being surveyed. Twenty-four percent had been forced to have sex, and nineteen percent had been prevented by an intimate partner from visiting others. Ten percent had been beaten, and fifteen percent reported a partner having attempted to take their income. Just 41 percent of the sample had not experienced any of the events of IPV listed above.

**Details of the intervention**

Researchers conducted a randomized evaluation to test the impact of providing cash transfers and training on women's empowerment and their experience of intimate partner violence. Researchers randomly selected 1,000 women from a full sample of 2,000 women to participate in a women's empowerment program; 657 women selected to receive the program were married or co-habitating, and their responses inform this IPV work. Women selected to participate in the empowerment program received US$10 per month for twelve months and between forty and seventy hours of training focused on numeracy, vocational skills, and building connections with other women.

In addition to collecting data on IPV, the research team tracked common factors associated with IPV, including how often the participants' partners went out to drink alcohol with friends, spousal age gaps, spousal education gaps, women's contribution toward household income, and household food budget share (as an informal, imperfect measure for poverty). The research team also collected data on the following adverse events: illness, death, unemployment, business or asset loss, price increase, separation, and displacement.

**Results and policy lessons**

*Research ongoing; results forthcoming.*