



Global research into cash transfers to prevent intimate partner violence

We applaud Merike Blofield and colleagues (January, 2022)¹ for highlighting the potential of cash transfer programmes to reduce intimate partner violence (IPV) in Latin America during the COVID-19 pandemic. On the basis of our research in Latin America and other regions, we argue that the potential of cash transfers to reduce IPV is relevant globally. We also note important nuances to the points made by Blofield and colleagues, some of which are particularly relevant for other regions where the prevalence of IPV is highest.

The authors limit their focus to this region, partly because Latin America's cash transfer programmes are among the most established. However, nascent cash transfer programmes in sub-Saharan Africa and south Asia also provide a unique opportunity to build integrated efforts for IPV prevention from inception. A key pathway through which cash transfers reduce IPV is by reducing poverty, and the impact is particularly strong in low-income countries. Indeed, gender-responsive social protection (including cash transfers) is key to sustainably reducing poverty.

The authors focus on conditional cash transfers, noting that these programmes improve economic autonomy despite burdening women with having to fulfil conditions. We clarify that the evidence does not suggest that improvements in women's outcomes require these conditions. Unconditional cash transfer programmes have led to increased women's economic autonomy without increasing their time burden.² Given that conditions can penalise the most marginalised households, we recommend that cash transfer programmes avoid hard conditions from the outset.

The authors' Viewpoint centres on programmes targeted to women. However, cash transfers targeted to households can also reduce IPV, because cash transfers can alleviate risk factors for IPV (including poverty and associated household conflict) regardless of the transfer recipient.³ Although targeting cash transfers to women might have additional benefits, it is not needed for cash transfers to reduce IPV. Moreover, effective case management that links households receiving cash transfers to other services can additionally reduce and respond to violence,⁴ regardless of which household member is targeted for cash transfer.

Blofield and colleagues¹ call for more evidence from Latin America on cash transfers with complementary components aimed at violence reduction. We agree that more evidence is needed from Latin America, but we advocate for a broader research agenda. Through the Cash Transfer and Intimate Partner Violence Research Collaborative, we are generating mixed-methods evidence from Latin America, sub-Saharan Africa, and south Asia on how the impacts of cash transfer programmes are shaped by design features, complementary programming, and contextual factors, as well as whether impacts are sustained after the programme.⁵ We also call for evidence on cash transfers in crisis settings, which is increasingly crucial to inform programming for IPV prevention among vulnerable women globally.

We declare no competing interests.

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