

ADDRESSING VIOLENCE AGAINST WOMEN THROUGH SOCIAL PROTECTION: A REVIEW OF THE EVIDENCE



SUMMARY

In the wake of the “shadow pandemic” of violence against women and girls during COVID-19, policymakers, practitioners and activists are searching for novel and effective ways to address violence against women (VAW), including in the context of ongoing crises and disasters. Social protection systems provide a wide range of policy tools and mechanisms that have the potential to address VAW. To date, however, this potential is largely unrealized. Policy discussions and practice on social protection and VAW remain siloed and evidence generation dispersed. Based on a phased scoping review of peer-reviewed academic and grey literature,¹ which captured 48 articles focused on both social protection and gender-based violence, this policy brief brings the two fields together, to identify pathways for harnessing social protection to address VAW. In doing so, the brief enables policymakers to move beyond a focus on singular social protection interventions and towards a systems perspective which opens up opportunities for preventing and addressing VAW through a broad range of social protection schemes,² such as multisectoral coordination, accompaniment models and training for social protection providers.

Introduction

The extent of violence against women (VAW)³ in all their diversity is a global phenomenon: globally, 1 in 3 women have been subjected to physical or sexual violence in their lifetime,⁴ and approximately 13 per cent of ever-partnered women aged 15 to 49 have experienced intimate partner violence (IPV) in the past year.⁵ Eliminating violence against women is critical to the realization of human rights and the achievement of the 2030 Agenda for Sustainable Development.⁶

The pervasive and persistent nature of VAW has prompted women’s rights activists and service providers to demand more action to tackle the underlying risks and drivers of violence. Key among these risk factors are the financial stressors and hardships that come with economic insecurity. Economic deprivation and dependence is correlated with experiences of IPV among adolescent girls, pregnant women and older women.⁷ For example, women who experience food insecurity are at a greater risk of experiencing IPV, and housing insecurity is associated with a greater likelihood that women will experience sexual violence.⁸ Once in a violent situation, lack of access to economic resources can also serve as a barrier to women who wish to leave.⁹ Evidence also indicates that job loss and sustained unemployment can be associated with a significant increase in men’s perpetration of IPV.¹⁰

The COVID-19 pandemic brought these links starkly to the fore, with livelihood shocks within households closely connected to the intensification of violence against women.¹¹ The pandemic also made clear that accessible women’s shelters and hotlines

are necessary but insufficient: actions to address economic insecurity within households—including but not specifically limited to women’s economic security—are also urgently needed.

Aimed at preventing poverty and reducing economic hardship across the life course, social protection would seem like a promising avenue for VAW prevention and response. Precisely how social protection might be leveraged for this purpose, however, remains underexplored. As a result, UN Women and the World Health Organization have called for data and evidence to inform decision-making as part of their RESPECT Women: Preventing Violence against Women Framework.¹² Other international organizations, such as UNICEF, the International Food Policy Research Institute and the World Bank, are also directing increased attention to the links between social protection and VAW.¹³

As this brief shows, however, much of the existing research is narrowly focused on a few social protection schemes, especially cash transfers. The bulk of studies also appear to focus on IPV and domestic violence (DV) rather than other types of violence such as harassment in the workplace or public spaces. This narrow focus misses a much broader opportunity for impact—one that involves adopting a social protection systems approach, covering the range of social protection policies, programmes, delivery mechanisms and administrative features that can be harnessed to address VAW. It should be noted that investment in a social protection systems approach should complement, rather than replace, efforts on VAW prevention and response services.

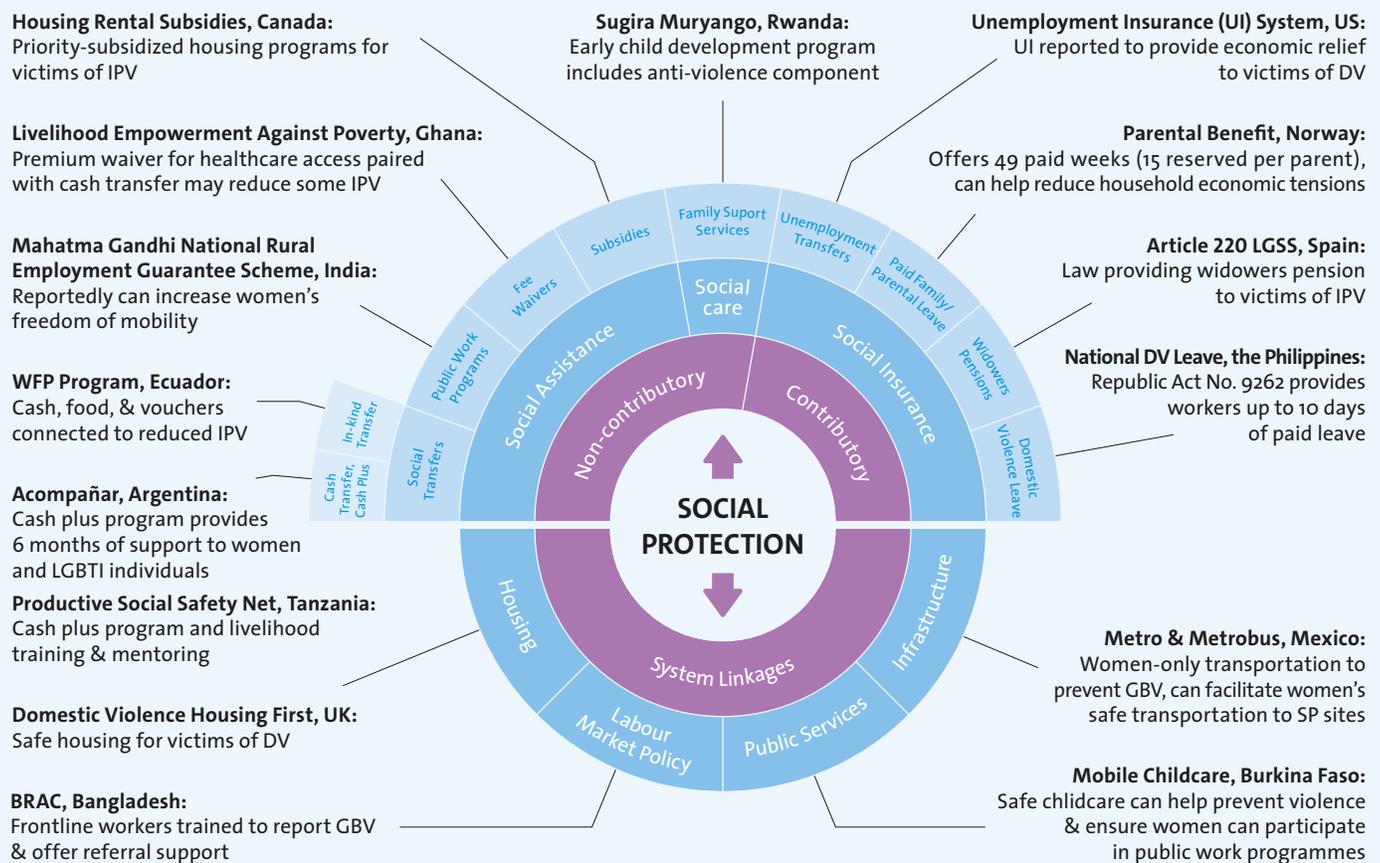
Addressing VAW in and through social protection systems

Social protection can prevent and respond to VAW by addressing economic insecurity, softening economic hardship, easing financial tensions and increasing women’s autonomy. Recognizing that no single social protection policy, programme or service can provide adequate coverage for the full range of risks, vulnerabilities or shocks that an individual may encounter throughout the course of their lives, a social protection systems perspective calls for the combination of different instruments to ensure adequate protection for all.¹⁴ In addition to life course–related risks, such as job loss, maternity, ill health and income

insecurity in old age, social protection systems should provide support to people in the face of exogenous shocks, such as financial, health and humanitarian crises as well as slow- and rapid-onset disasters caused by climate change and environmental degradation.

Social protection systems include a wide variety of schemes, the combination of which varies by country (see Annex B for key definitions). As Figure 1 illustrates, several of these programmes have been found to have positive effects for preventing or responding to VAW, while a comparatively smaller number has purposefully integrated VAW prevention or response into their design.

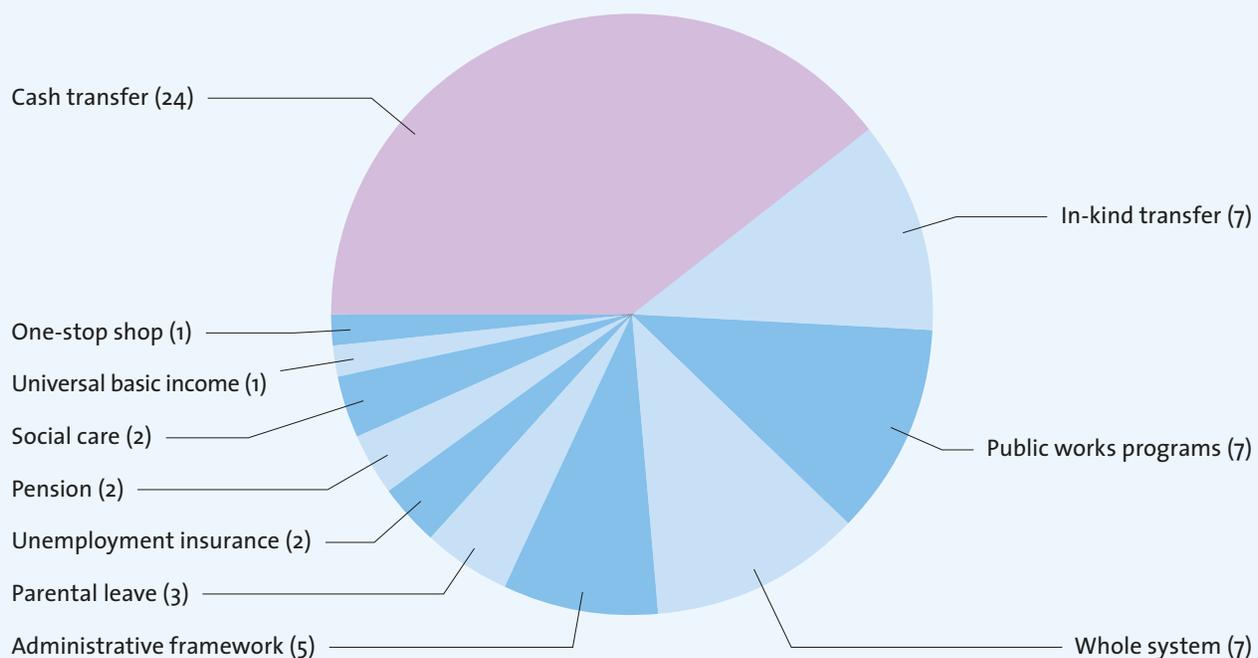
Figure 1:
Overview of social protection schemes related to VAW, and related areas of social policy



At the same time, a scoping review conducted to inform this brief shows that the evidence base on the relationship between these schemes and VAW is patchy and uneven. A literature review identified 48 academic articles and policy publications published between January 2012 and May 2022, covering both social protection and VAW (see Annex A for the methodology). When studies specified the type of VAW, most often they focused on IPV or DV.¹⁵ Across these articles, 10 different social protection schemes including policies, programmes, services or administrative system features, such as information and data management systems, were discussed. The majority of the studies

focus on social assistance, including cash transfers and public works programmes, which may reduce VAW by easing financial tensions and stressors within households (see Figure 2).¹⁶ Income support and housing cost subsidies can enable women to flee violent situations and not feel compelled to return, by decreasing their economic dependency on intimate partners or other family members.¹⁷ Some evidence also suggests that reducing financial hardship for adolescent girls, including through cash or in-kind transfers and income, food and rent subsidies, may lower their likelihood of entering unhealthy partnerships.¹⁸

Figure 2:
Distribution of social protection schemes across included studies



Far fewer studies explore the potential for contributory social protection (social insurance) schemes—such as maternity, paternity and parental leave, unemployment insurance and survivors’ pensions—to address VAW, in particular domestic violence. Given that these schemes also address economic insecurity—with benefits that are often more generous than those allocated through social assistance—this is a significant gap in the evidence base. The existing evidence on social insurance, while sparse, is promising. Studies on parental leave (both maternity and paternity leave) indicate that they may prevent IPV by reducing financial stress, increasing egalitarian parenting practices and promoting bonding between parent

and child.¹⁹ For example, a study conducted in Australia demonstrated that women who received paid maternity leave were 58 per cent less likely to experience IPV in the first year post-partum than those who did not receive maternity leave.²⁰

While the scoping review focused primarily on the potential of social protection schemes *that were not originally designed to address VAW* to do so, it is worth highlighting that there are also social protection programmes specifically aimed at meeting the needs of VAW survivors. One such scheme is paid domestic violence leave, which provides income support to women who have experienced domestic violence and need time away from work in order to leave a violent situation, recover and make

arrangements including accommodation, childcare or access to healthcare and legal services. It has been implemented in a handful of countries around the world, including Australia, Canada, New Zealand and the Philippines, typically as a form of social insurance funded by contributions from employers and employees and subsidized, in some cases, from general revenue.²¹

Evidence from Australia suggests that paid domestic violence leave can create a safe and supportive workplace environment for employees experiencing domestic and family violence, enabling them to take time off work without risk of losing their jobs, and ultimately increasing workplace participation.²² A cost analysis indicates that the economic benefits of expanding domestic violence leave—in terms of reduced turnover and improved productivity—outweigh the relatively modest incremental wage payouts to workers who take such leave.²³ Currently, the evidence base for these schemes is mainly for high-income countries. Going forward, suitable modalities for middle- and low-income contexts should be explored, including

social assistance for broader reach in contexts of widespread labour market informality.

Greater attention also needs to be paid to the administrative features of social protection systems, including mechanisms to determine benefit eligibility and timeliness, procedures and policies around data privacy and security, and coordination with other social policy actors and sectors such as housing and infrastructure. The following section will discuss some of these entry points, alongside evidence supporting particular social protection schemes.

Entry points for social protection to reduce VAW

In addition to reducing economic insecurity, evidence suggests three pathways for social protection systems to address VAW (see Figure 3): by increasing coordination across sectors, providing accompaniment and training front-line implementers.

Figure 3:
Entry points for social protection to address VAW



Synergies between social protection and VAW prevention and response are facilitated by institutional coordination,²⁴ for example, between national social protection strategies and action plans to end violence against women. However, previous UN Women research on national social protection strategies indicates that this pathway is not always used: in a review of 30 strategies from sub-Saharan Africa, nearly two-thirds recognized VAW as a gendered risk or vulnerability, but just under a third included specific measures to address it.²⁵ Less than half of a

global sample of national social protection strategies (24 of 52) included specific policies or measures to prevent or respond to VAW.²⁶ Even fewer national action plans to end violence against women include clear synergies with social protection, although some notable examples exist (see Box 1). Coordinating national strategies on social protection and ending VAW should incorporate specific measures on financing, data, and monitoring and evaluation to ensure these plans are implemented.

BOX 1: COORDINATING NATIONAL SOCIAL PROTECTION STRATEGIES AND ACTION PLANS TO END VAW

Synergies at the highest level of planning can be used to create a clear mandate for coordinating services through programme design and implementation. For example, the goals of Canada’s National Action Plan on VAW/GBV include the elimination of “systemic barriers to gender equality and economic justice, including those that hinder access to and use of social protection and public services by VAW/GBV survivors, putting the needs of the most marginalized at the centre while ensuring access for everyone.” Measures in the plan include a minimum income guarantee for working-age people experiencing violence, improved social security and social assistance mechanisms, and extension of financial support to low-income Canadians affected by COVID-19–related unemployment.

Some regional efforts also link social protection and GBV. For example, Southern Africa’s Regional Strategy and Framework for Action on GBV includes efforts around protection, care support services and capacity development, as well as coordination, networking and partnerships. While an increasing number of countries are producing national social protection strategies and national action plans to end VAW, there remains significant potential to increase synergies between the two, paying attention to intersecting forms of discrimination.

Accompaniment models are another mechanism to leverage social protection to address VAW. Such models use community health workers, social workers, coaches or other programme implementers who work closely with families on health, nutrition, education and child care to introduce ‘complementary’ elements to prevent and respond to VAW, including work with fathers, conflict resolution and access to services.²⁸ For example, an early childhood development programme, *Sugira Murungu* in Rwanda, combined an anti-violence component with cash transfers, nutritional support and public works, and was found to decrease IPV to some degree.²⁹ The effectiveness of accompaniment models depends in part on pre-established relationships and trust to broach sensitive topics. *Acompañar*, a cash transfer programme in Argentina, offers an accompaniment model for lesbian, gay, bisexual, transgender, intersex, queer and other (LGBTIQ+) persons and women fleeing violent situations that includes psychological support services coordinated with provincial and local governments, to increase uptake and accessibility. The programme provides victims and survivors of IPV living in vulnerable environments with six months of cash payments, equivalent to a minimum wage. The Ministry of Women, Gender and Diversity offers training to ensure accompaniment units incorporate a gender perspective in their support and services.

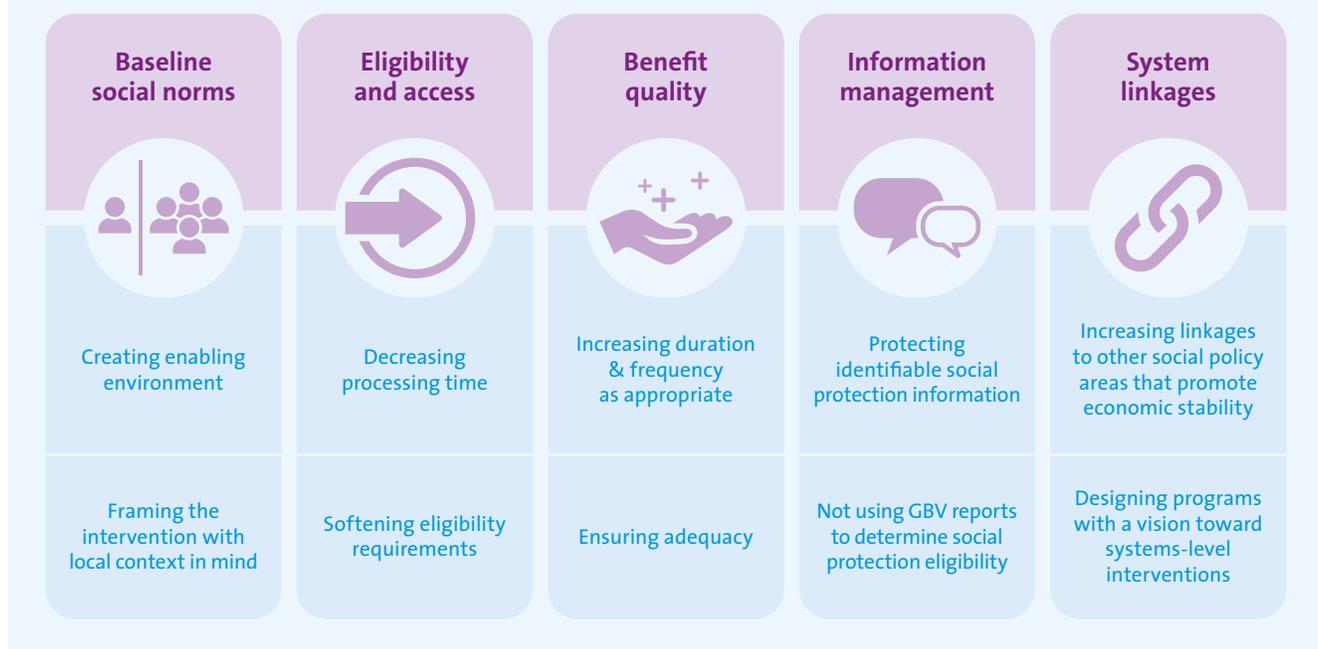
Even where accompaniment does not feature prominently, evidence suggests that training front-line implementers to recognize VAW and facilitate referrals to essential services make it more likely that violence is addressed.³⁰ This includes violence in the household, such as IPV, DV and family violence, as well as sexual exploitation and abuse in workplaces and public spaces that may be experienced in the delivery chain of social protection programmes. For this reason, the RESPECT Women: Preventing Violence against Women Framework calls for specially trained social protection implementers, including healthcare providers, as a first point of contact with women.³¹ Trainings must be culturally sensitive and locally responsive, including to the needs of marginalized women. For example, while Indigenous women in Canada described several domestic violence services as “dangerous” due to fear of discrimination, shelters that were “non-hierarchical and non-judgemental” were considered safe.³² In that particular context, key factors for ensuring uptake of social protection programmes which seek to prevent or respond to domestic violence include training service providers in shelters to increase survivor’s access to Indigenous elders, friends and family and providing space and time for cultural ceremonies.

Working with women’s rights organizations, particularly those that already provide VAW services, should be an integral part of any of these approaches. While evidence highlights the potential for women’s organizations to help reduce economic insecurity and promote women’s economic empowerment,³³ this review did not capture any studies that focused on the relationships between social protection agencies or programmes and women’s rights organizations. This signals a significant gap in the literature that is worthy of attention. The knowledge of women’s rights organizations has much to offer to those working on social protection to end VAW, whether in terms of informing process elements—such as national strategies, accompaniment models or training—or specific design and implementation features, to which this brief now turns.

Key design and implementation features to reduce GBV

Specific design and implementation features—including around baseline social norms, eligibility and access, benefit adequacy, information management and system linkages—affect the extent to which social protection can address VAW (see Figure 4). The evidence base on these features is limited, as it relates primarily to cash transfer research.

Figure 4:
Factors in social protection design and implementation to reduce VAW



Regarding social norms—the rules of conduct considered acceptable by a dominant group or society³⁴—it is important that social protection interventions are tailored to local contexts. Indeed, an intervention that reduces VAW in one context may have a neutral or even detrimental effect in others.³⁵ For example, a public works programme that targets women with employment guarantees and cash-for-work may reduce VAW in one context because it eases financial tensions at home; in another context, the same intervention may transgress social norms around women’s mobility and access to resources in a way that provokes male backlash and cancels out any financial gains.³⁶ For this

reason, decisions about whether to frame a social protection intervention to explicitly address VAW (or gender relations and women’s empowerment more broadly) need to be made based on an assessment of the local context and baseline social norms. In another example, in some contexts a cash transfer programme focused on child development or household food security may be more likely to reduce VAW than one focused on women’s empowerment.³⁷ Qualitative research can be useful in identifying relevant social norms, potential backlash and mitigation strategies, including acceptable framing, labelling and messaging of an intervention.

Emerging evidence on eligibility and access indicates that a woman's likelihood of remaining in a violent partnership may be reduced by delinking her access to social protection benefits from her marital status or the length of time in a partnership.³⁸ For example, analysis of survivors' pensions in Spain showed that softening eligibility requirements and offering more flexibility would help some survivors of IPV recover and build resilience in the wake of their partner's death.³⁹ Specifically, enabling women in unmarried or shorter-term partnerships to access survivors' pensions may benefit women whose cohabitation broke down because of violence. Finally, and in order to enable women to leave violent situations quickly, social protection benefits must be accessible with minimal waiting or processing periods.⁴⁰ Furthermore, waiving requirements for multiple forms of identification, or expanding the types of acceptable documentation, can help ensure that specific groups of women who have experienced VAW, including migrants and refugees, can access social protection.⁴¹ This is an area in which coordination between social protection systems and national action plans to end violence against women would be especially useful.

The quality of the benefit, including duration, frequency, predictability and adequacy of social protection schemes, has important implications for its potential impact on VAW. Several studies noted, for example, that the positive effects of cash transfers, parental leave and public works programmes on VAW may not endure once interventions end, especially if they were short-term.⁴²

Benefit adequacy—such as a sufficiently high transfer amount—has a direct bearing on economic security and, in turn, on the reduction of intra-household tensions and/or women's ability to leave violent situations.⁴³ Benefits must be high enough to reduce economic stress and indexed for inflation so that their value does not erode over time.⁴⁴ Those directed towards women leaving violent situations must be sufficient to allow them to support themselves and any dependents under decent living conditions, including safe housing which may require rent subsidies or access to social housing (see below). A conditional cash transfer programme in the United States for low-income individuals, including victims of domestic violence, was criticized by some recipients as entrapping them in a cycle of poverty because the benefit was not adequate. Limited monetary benefits, significant work requirements and the administrative burden associated with the benefit were reported as having prevented them from building resilience. The low benefit level also increased their dependence on others, including intimate partners, and could exacerbate stress or violence.⁴⁵

Information management in social protection systems can also be improved to reduce the risk of VAW.⁴⁶ For example, women's privacy and security must be prioritized by ensuring that identifiable social protection data are never made public in a way that can be used to track women's locations. Moreover, violence reports made to police or social services should never be used for the purposes of determining eligibility for social protection, because this can expose women to further violence and break down trust in reporting mechanisms.

Finally, strengthening linkages to other services, such as housing, child care and employment support, is critical to harness social protection systems for meeting the needs of VAW survivors. While coordination between social protection and labour market policies is beyond the scope of this brief, it is worth noting that interventions such as employment and minimum wage guarantees, professional education and training are also key avenues for governments to bolster women's economic security and reduce their vulnerability to violence. In terms of housing, the Domestic Violence Housing First (DVHF) model has been implemented in Canada, the United Kingdom and the United States to provide safe housing for domestic violence survivors in coordination with other areas of social policy. Through flexible funding, mobile advocacy and safety planning related to perpetrators' harmful behaviours, the DVHF model provides a holistic set of services that respond to economic abuse. Policies that enable DV advocates to secure safe and affordable housing for survivors also hold potential.⁴⁷ For example, incentives for landlords to rent to DV survivors could offer protection from eviction due to abuser sabotage, both in public housing and the private rental market. The evidence also strongly suggests that interventions must include long-term options to help victims and survivors transition from shelters to more permanent housing.

Recommendations

The potential for social protection systems to prevent and respond to VAW far exceeds their current application. Opportunities exist to explore the use of social protection schemes other than cash transfers, which currently dominate the evidence and policy landscape. This brief has presented a range of entry points and implementation features that can enhance the effectiveness of social protection interventions in preventing and addressing VAW. However, the evidence is still emerging and should be strengthened, especially on harnessing social insurance and social assistance interventions beyond cash transfers. Larger social protection system assessments are also needed to identify opportunities for integrating VAW prevention and response

mechanisms. Evidence on the sustainability of social protection interventions in addressing violence; the relationship between social norms, social protection and VAW; and effective coordination of social protection with other policy areas, such as social care and employment support services, is almost entirely lacking. Finally, more research is needed to guide the

development of effective working relationships between social protection actors and the women's organizations which address VAW in their daily work. Even so, existing evidence yields a number of recommendations for governments, development practitioners and women's rights organizations with which to take action now.

Recommendations for policy frameworks

1. Coordinate national social protection schemes with national action plans to end violence against women, delineating specific actors, responsibilities, programmes, budgets and timelines to achieve concrete goals.
2. Ensure the adequacy of social protection benefits to enable women's economic security and index benefit levels to inflation so that they do not erode over time.

Technical recommendations

3. Design social protection interventions in light of social norms in local contexts to increase uptake and reduce backlash.
4. Ensure that social protection data which could be used to track women's locations are never publicly available and ensure that formal reporting of incidents of violence is administratively and operationally separate from any determination of eligibility for social protection.
5. To increase the impact and reach of the RESPECT Women: Preventing Violence against Women Framework, engage social protection actors and implementers of GBV prevention and response through accompaniment models and training, in order to recognize and refer GBV cases.

Research recommendations

6. Conduct mixed-method, comparative and longitudinal studies that can contribute to the development of conceptual frameworks bridging VAW and social protection, and apply theories of VAW prevention and response to social protection systems.
7. Research the potential of social insurance and other social protection schemes beyond cash transfers in preventing and responding to VAW.
8. Integrate an intersectional lens in research and policy design of social protection schemes for victims and survivors of GBV, to ensure that hard-to-reach groups such as refugees, migrant women, LGBTQ+ individuals and people with disabilities are served.

This policy brief series synthesizes research findings, analysis and policy recommendations on gender equality and women's rights in an accessible format. This brief was produced by Tara Cookson (University of British Columbia School of Public Policy and Global Affairs and Ladysmith), Lorena Fuentes (Ladysmith) and Jennifer Bitterly (Ladysmith) under the supervision of Silke Staab (Research and Data), Seemin Qayum (Economic Empowerment) and Khamsavath Chanthavysouk (Ending Violence Against Women), UN Women.

Endnotes

1. Based on Arksey and O'Malley's (2005) scoping review methodology. To be eligible for inclusion in this review, articles selected were published in English between 2012 and 2022 and had to focus on at least one element of social protection, whether a policy, programme or administrative mechanism, as well as at least one form of GBV (e.g., intimate partner violence, domestic violence and sexual violence).
2. Throughout this brief, social protection schemes refer to policies, programmes or delivery mechanisms, in alignment with usage within the social protection field.
3. According to the 1993 UN Declaration on the Elimination of Violence Against Women, VAW is a type of gender-based violence (GBV) that causes "physical, sexual or psychological harm or suffering" to women in private or public (UN Women 2019). Gender-based violence is defined as "harmful acts directed at an individual based on their gender" (UNHCR 2021).
4. WHO 2018.
5. WHO 2018.
6. United Nations. 2015. Transforming our world: 2030 Agenda for Sustainable Development.
7. Nyato et al. 2019, Deuba et al. 2016, Pathak & Tariq 2019.
8. On food insecurity, see Hatcher et al. 2022 or Ricks et al. 2016; on housing insecurity, see Yakubovich et al. 2020 or Breiding et al. 2017.
9. UN Women 2019.
10. Evidence suggesting causality, however, is mixed: see Morgan & Boxall 2022, Schneider et al. 2016 and Peitzmeier et al. 2022.
11. UN Women 2020b.
12. This WHO and UN Women framework seeks to help policymakers and implementers in planning, implementing and evaluating interventions to prevent and respond to GBV. See WHO & UN Women 2020.
13. Botea et al. 2021, UNICEF (undated), IFPRI 2019a and IFPRI 2019b.
14. SPIAC-B (undated).
15. Search terms included "intimate partner violence" and "domestic violence". The research team did not explicitly search for violence against children, child marriage or female genital mutilation (FGM).
16. Hidrobo 2016, Ranganathan 2022, Peterman 2022, Buller 2016, Barrington 2022 and Lees 2020.
17. Mokoena 2021, Lindauer 2015, Roy 2019, Tankard 2018 and Blofield et al. 2022.
18. Kilburn 2018.
19. D'Inverno & Kearns 2018 and Aitken et al. 2015.
20. Gartland et al. 2011 in D'Inverno & Kearns 2018.
21. McNicol 2021.
22. Fitz-Gibbon et al. 2021.
23. Stanford 2016.
24. UN Women. 2020.
25. Cookson 2021.
26. Cookson et al. (forthcoming).
27. Dale et al. 2021.
28. Jensen et al. 2021 and Heath 2020.
29. Jensen et al. 2021.
30. Hetling et al. 2018 and Yerichuk et al. 2016.
31. UN Women 2020.
32. Yerichuk et al. 2016.
33. Peterman & Roy 2022.
34. UN Women (forthcoming). Social Norms, Gender and Development: A Review of Research and Practice. New York.
35. Roy et al. 2019, Amaral et al. 2015, Sarma 2022, Bobonis et al. 2013, Ghosh & Günther 2019 and Gibbs & Wilson 2017.
36. Jensen et al. 2021, Betancourt et al. 2020, Amaral et al. 2015, Sarma 2022 and Ghosh & Günther 2019.
37. Hidrobo et al. 2016.
38. Sleep 2018.
39. Testal 2018 and Rodriguez & Gomez 2018.
40. Lindauer 2015.
41. Holmes et al. 2020.
42. Buller et al. 2018, Aitken 2015 and Spencer et al. 2022.
43. Martino et al. 2020 and Flanagan et al. 2019.
44. Peterman & Roy 2022.
45. Spencer et al. 2022.
46. Sleep 2018.
47. Sullivan & Olsen 2016.

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Annex A: Methodology

For this brief, a scoping review was undertaken, following the steps laid out by Arksey and O'Malley (2005). The scoping review methodology is increasingly used to map nascent areas of research as well as areas of research that span distinct academic and practitioner fields that might not be in conversation with one another (e.g., Holeman et al. (2016)). This approach to reviewing the literature is useful for identifying key concepts, theories and patterns in the evidence base, as well as gaps. As such, it is useful for informing future research as well as decisions on policy and practice. Scoping reviews are not concerned with evaluating the effectiveness of the interventions under inquiry, which differentiates the goals of a scoping review from other types of reviews such as comprehensive systematic reviews.

The review started with defining a strategy for systematically searching for articles published in English and locatable on Google Scholar and Google Search.ⁱ Researchers searched for articles by examining reference lists and included a handful of articles snowballed from experts in the field. To be eligible for inclusion, publications had to focus on at least one element of social protection (i.e. a policy, programme or administrative mechanism), and at least one form of GBV (e.g. intimate partner violence, domestic violence or sexual violence). The following search terms were used: “social protection”, “social security”, “social insurance”, “maternity leave”, “pension” and “housing policy” with “gender-based violence”, “violence against women”, “domestic violence” and “intimate partner violence”.ⁱⁱ These terms were chosen for their ubiquity in policy-based and peer-reviewed literature. Temporal parameters are necessary in broad searches such as scoping reviews, and the articles chosen were published between January 2012 and May 2022. Articles that did not encompass these criteria were excluded. Figure 5 shows a PRISMA diagram representing the search process.

Upon completion of the search, the data were charted and analysed. Articles that could not be accessed by the University of British Columbia e-library were excluded. The remaining articles were downloaded for full review. These articles were charted according to the key themes identified throughout the review, keeping with Levac et al.'s (2010) recommendation to approach charting iteratively by continuously updating the categories on the data-charting spreadsheet to reflect the emerging findings.

The following fields for data charting and analysis were used:

1. Author, year of publication, type of publication (grey, peer-reviewed)
2. Publication category (empirical research, review of the evidence, technical, conceptual/theoretical)
3. Study location (country, region, global)
4. Methodology
5. Study aims
6. Key arguments
7. Key findings

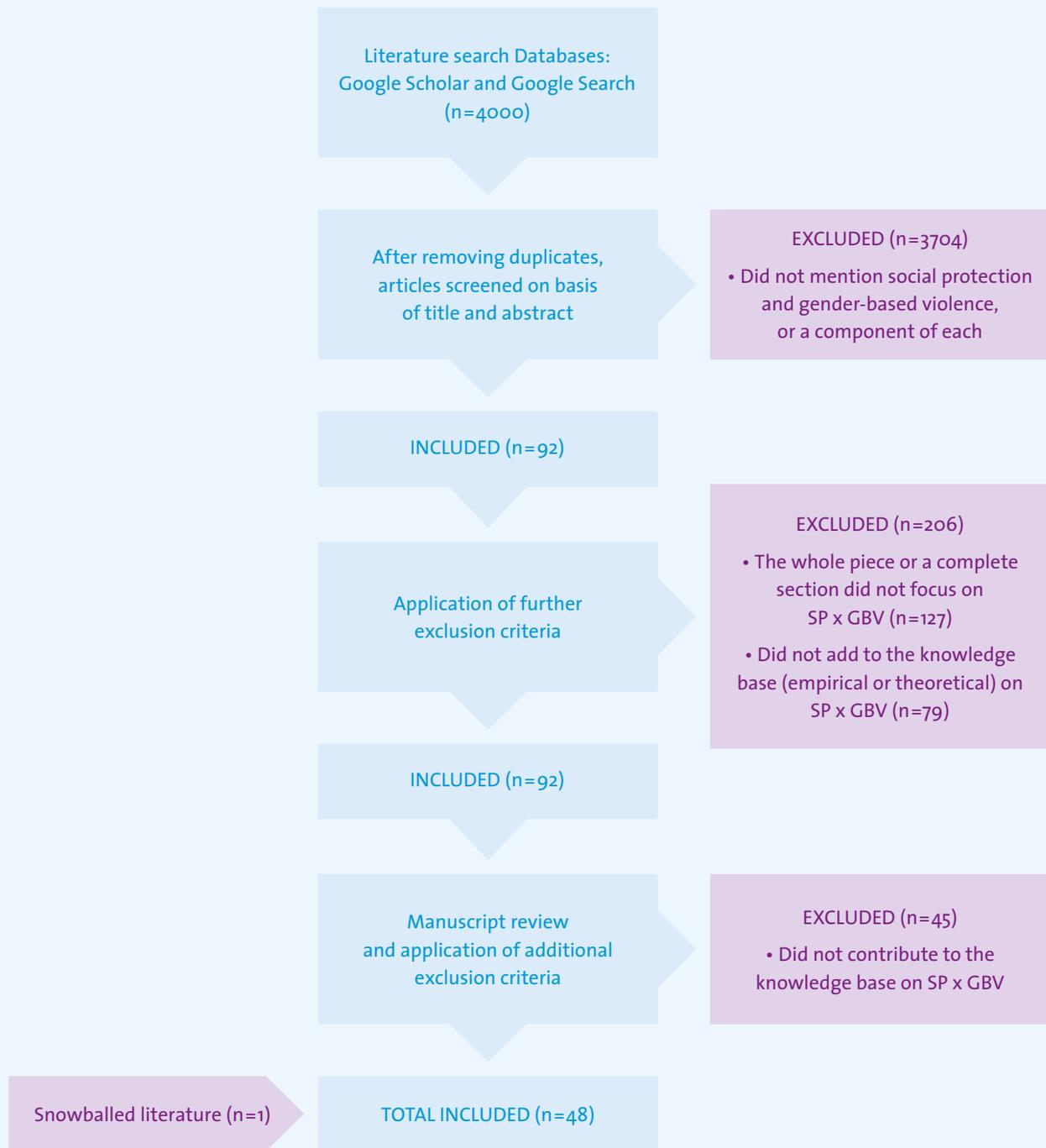
The geographic remit of the included studies is skewed towards countries in sub-Saharan Africa (13), followed by Latin America and the Caribbean (7), the US or Canada (6), Europe and Central Asia (5), South Asia (4), and Australia (3). Ten studies had a multi-region or global scope, and none were located in the Middle East and North Africa.

With the exception of some of the literature on cash transfers, the question about which mechanisms are more suitable for primary prevention as opposed to response is not explicitly explored in the identified literature. Because our evidence review captured SP schemes that were not originally designed to address GBV, the majority of the articles address the relationship between an SP mechanism or tool and reductions/increases/null effects on GBV from the perspective of response to survivors and prevention of revictimization, rather than primary prevention. This signals an important area for further research.

i. Language was a limitation in this scoping review, in that we only used search terms in English. We acknowledge that there may be other academic and grey publications on the nexus between social protection and GBV that were not captured due to the scope of this project.

ii. We did not include search terms to explicitly search for violence against children or certain forms of GBV including child marriage, FGM, sexual harassment, or workplace harassment.

Figure 5:
PRISMA flowchart illustrating the search process



Annex B

Table 1:
Social Protection Definitions

Cash transfers	The provision of assistance in the form of money to recipients (individuals, households or communities) that are usually unrestricted in terms of use but may have attached conditionalities as a modality for receipt of the transfer (e.g. to send children to school).
Cash+	Cash transfers that are complemented with productive inputs, assets and/or technical training, thereby adding to the benefit of cash assistance, to promote beneficiaries' engagement in productive activities while addressing their immediate basic needs.
Conditionality	The attachment of predefined behaviours, qualifications or activities to the receipt of a social protection benefit. These behaviours, qualifications or activities are sometimes referred to as 'conditions', 'conditionalities' or 'co-responsibilities.'
Contributory social protection	Social protection schemes that require beneficiaries and/or employers to contribute to a specific coverage in order to determine entitlement to benefits; most often comprises social insurance schemes.
Disability pension	A payment paid to people with disabilities that prevent them from working and generating their own income.
Fee waivers	A form of subsidies that are either offered equivalent to the cost of services or used to keep the prices of essential goods and services low. They are a common form of social protection and examples include: health insurance exemptions; reduced medical fees; education fee waivers; food subsidies; housing subsidies and allowances; utility and electricity subsidies and allowances; agricultural input subsidies; and transportation benefits.
In-kind transfers	Assistance provided in the form of physical goods or commodities that are usually larger one-off transfers but may also be small and periodic, such as food transfers, often provided in humanitarian settings. They may take an integrated approach when linked with skills training and other activities.
Maternity or paternity leave	A paid leave of absence granted to an employee who has just had a child, in order to spend time with and provide for the infant. Maternity leave is paid absence from work for mothers and paternity leave is paid absence from work for fathers.
Non-contributory social protection	Includes social protection schemes, policies and programmes that are often tax-financed, though they may also rely on external funds through, for example, international organizations and do not require beneficiaries to contribute in order to receive the benefit.
One-stop shop	A one-stop shop is a holistic centre that provides a variety of services including health services, psychosocial support, legal services and police services to survivors of GBV.
Public works programmes	Programmes that provide food or cash to eligible individuals, households or communities, in exchange for work on infrastructure projects for a guaranteed duration and compensation.
Sickness/injury coverage	A payment paid to people who are experiencing an illness or injury. Often provided by the employer, the coverage may have restrictions that the illness or injury must be caused by the workplace conditions or by an accident at work.

Social assistance	Non-contributory schemes within a social protection system that provide benefits to vulnerable groups of the population, especially households living in poverty.
Social care	Social care typically describes care services and other practical assistance for children, young people and adults who require additional support, such as through early childhood development initiatives.
Social insurance	Contributory schemes within a social protection system that guarantee protection through an insurance mechanism, such as risk pooling or prior payments by beneficiaries or employers.
Social pensions	A guaranteed, regular and predictable payment to people for security in situations like old age and unemployment. These are non-contributory in nature and often constitute state pensions.
Social protection	The set of policies and programmes designed to reduce and prevent poverty and vulnerability throughout the life cycle. Social protection includes benefits in case of various life-cycle risks, including maternity, unemployment, employment injury, sickness, old age, infancy and disability. Social protection is often used interchangeably with social security by relevant stakeholders. Based on this definition, labour market policy is a form of social policy that is distinct but overlapping with social protection, and social policy and economic policy can work in tandem to promote socioeconomic progress.
Social protection system	The totality of strategies, schemes, policies and programmes, including both contributory (social insurance) and non-contributory (social assistance) schemes, that seek to protect people throughout their lives as well as build resilience against community-level shocks and crises.
Survivor pension	A payment paid to people who have lost their spouse because of the spouse's work. It often refers to payments to spouses of veterans, though can also include spouses of employees who lost their life while performing their job. It is most often funded by the government or by employers.
Unemployment insurance	A payment paid to people who have recently lost their job, typically through government funds. It often requires that the person did not lose employment through any fault of their own and is for a limited period of time.
Universal basic income	Universal basic income is a financial transfer in which all citizens of a given state receive a regular transfer by the government.