

WOMEN'S ECONOMIC EMPOWERMENT AND INTIMATE PARTNER VIOLENCE: UNTANGLING THE INTERSECTIONS

This brief considers how women's economic empowerment (WEE) interventions influence intimate partner violence (IPV) among heterosexual women who are cohabiting or living with their male partners. It focuses exclusively on the range of WEE strategies listed in Figure 2 and does not address how WEE affects other types of violence, such as non-partner sexual violence and sexual harassment.



BACKGROUND

Interventions to increase women's economic empowerment (WEE) aim to improve their access to economic resources, as well as their capacity and power to make decisions over the use of those resources. Strategies range from cash and asset transfers to microcredit and savings groups to advocacy for property and inheritance rights to livelihood training and agricultural programmes. Such interventions have mixed results on women's risk of IPV.¹ By improving women's financial autonomy and bargaining power and reducing conflict due to household economic stress, they can reduce a woman's overall risk for IPV.² Access to economic resources may also enhance a woman's ability to leave a violent relationship, even if temporarily.³ Yet such interventions can also increase levels of violence if a woman's partner feels undermined in his role as the primary 'economic provider' or if the couple disagrees on how the money should be used.⁴

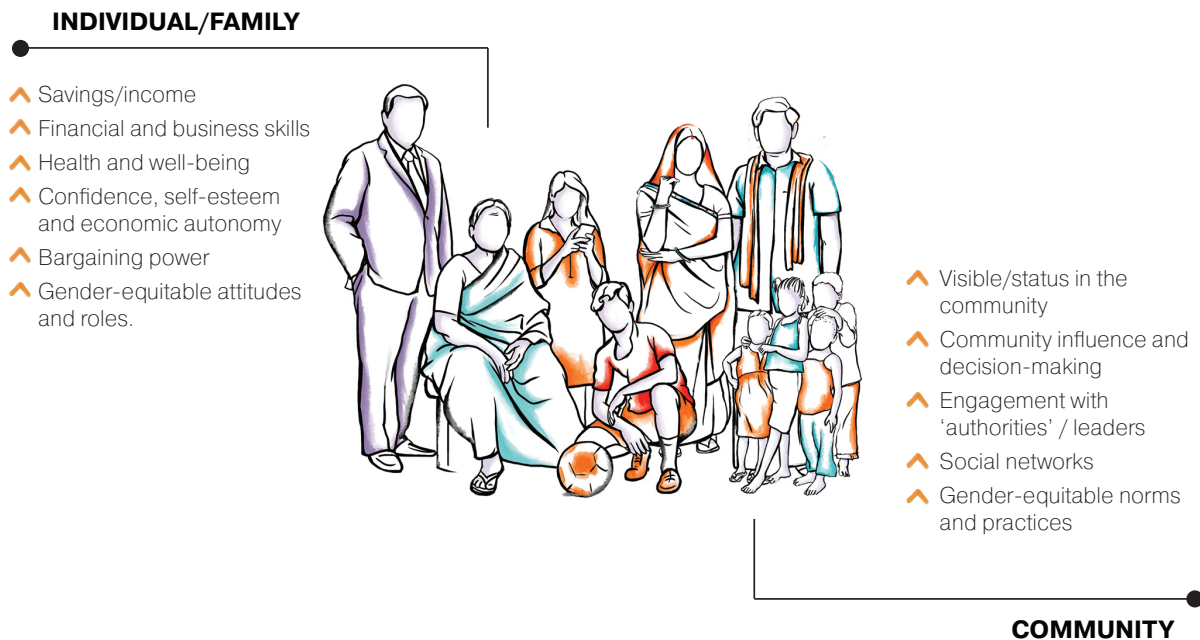
'Being both a breadwinner and economically dependent results in different but challenging barriers to achieving safety and freedom from violence.'

—Spotlight Initiative and United Nations
Development Programme, 2023⁵

BENEFITS OF WOMEN'S ECONOMIC EMPOWERMENT INTERVENTIONS

Many potential benefits — at the individual, family, and community levels — accrue to women who are involved in WEE interventions (see Figure 1).

Figure 1: Potential benefits for women involved in WEE interventions, according to recent research



However, whether these potential benefits translate to reduced IPV risk depends on multiple factors, including the nature of the economic intervention itself.

The term 'women's economic empowerment' (or WEE) encompasses a range of economic strategies that differ widely in terms of both their ability to enhance women's economic position and their potential to affect women's risk of experiencing violence. Thus, when evaluating WEE and IPV risk, it is important to consider the risk by programme type (e.g., cash transfers versus microfinance) rather than trying to generalise across widely divergent programmes. Indeed, WEE interventions differ along multiple dimensions that influence how they affect women's risk of IPV, including:

- ▶ How certain is it that the intervention will translate to a true economic benefit (e.g., direct provision of cash versus receiving job readiness training)?
- ▶ What difference does the programme make to a woman's economic standing? (Does it support her additional independence or enhance her value to other household members?)
- ▶ What cost does participation imply for the woman or her household (e.g., distance to a job, time away from 'household duties')?
- ▶ How patriarchal are the background norms and beliefs in the setting?
- ▶ Who does the intervention target (e.g., is cash given to the woman, her partner, or the household)?

- ▶ How is the intervention framed (e.g., is it described explicitly as something to empower women, or is it framed in a less ‘threatening’ manner, such as improving family well-being or child health)?
- ▶ How marginalised is the woman? (Very impoverished women or those facing multiple forms of disadvantage often need a more intensive intervention to achieve economic benefits).

Let us look at a number of these in turn.

1 THE ECONOMIC INTERVENTION’S EFFECTIVENESS MATTERS

The effect of WEE programming on IPV depends in part on whether the intervention itself increases a woman’s access to and control over money. If a WEE strategy does not work to increase income, it is unlikely to affect the risk of IPV. In a recent systematic review of the impact of microfinance and ‘microfinance plus’ programmes on IPV, for example, 40% (n=11) of the 27 studies included either did not measure the programme’s economic impact (n=9) or demonstrated no programme impact on economic well-being (n=2).⁶ Thus, findings that WEE did not affect IPV risk may simply reflect a lack of economic impact.

2 SPOUSAL REACTIONS TO ECONOMIC STRENGTHENING MATTER

For women who are married or cohabitating with a partner, **their spouse’s reaction to their economic gain can strongly influence whether economic strengthening serves as a risk or protective factor for IPV.** Male partners may appreciate the added income that women bring to the family (or come to appreciate the benefits over time) in terms of reducing economic pressure and helping to meet household expenses. Alternatively, male partners may disapprove of or feel threatened by their spouse’s access to income, which can lead to backlash, including physical, sexual, or emotional violence and controlling behaviours.⁷ Qualitative research has identified various reasons that some men react negatively to WEE, including feeling shame and loss of identity around being ‘replaced’ as the family’s primary economic provider; fear that working will expose women to the romantic interests of other men; objections to increased mobility that women may gain; and concern that work will distract women from their domestic and caregiving responsibilities.⁸

Additional factors can influence how male partners react to WEE. Increasing women’s income is more likely to lead to backlash in households with more pronounced gender inequality or in contexts that sanction men’s use of IPV.⁹ Some evidence suggests that men are less likely to feel threatened if women are engaged in work that does not defy social norms or if the woman’s relative contribution to the household is less than her partner’s.¹⁰ For instance, one study in Mexico found that in households where women received small cash transfers, domestic violence fell by 37%.¹¹ However, large cash transfers increased aggressive behaviours among a subset of husbands who had more traditional views of gender roles. The larger transfers represented a greater increase in the wife’s share of the household’s total income, which some men found unacceptable, especially older and less educated men.¹² Other research has found a greater risk of backlash among male partners with lower educational attainment levels.¹³ They may be more likely to feel threatened by women’s earnings, stemming from a sense of powerlessness, insecurity, or feeling unable to meet socially prescribed roles.¹⁴

3 PREVAILING NORMS MATTER

The influence of WEE interventions on women's risk of IPV depends in part on the extent to **which the intervention violates prevalent norms around whether, when, and how women work and on prevailing attitudes towards the use of IPV.**

For instance, one study found that on average, employed women across 30 countries in sub-Saharan Africa face a greater risk of IPV in communities with relatively higher levels of acceptance of wife-beating.¹⁵ Additionally, in settings where women do not commonly work outside of the home, their entry into the workforce may initially increase spousal tensions and women's risk of IPV. For instance, one study assessed the distribution of survey-level prevalence of women working across Demographic and Health Surveys and found that a woman's risk of IPV due to paid work was greater in countries where women's overall labour force participation was lower.¹⁶

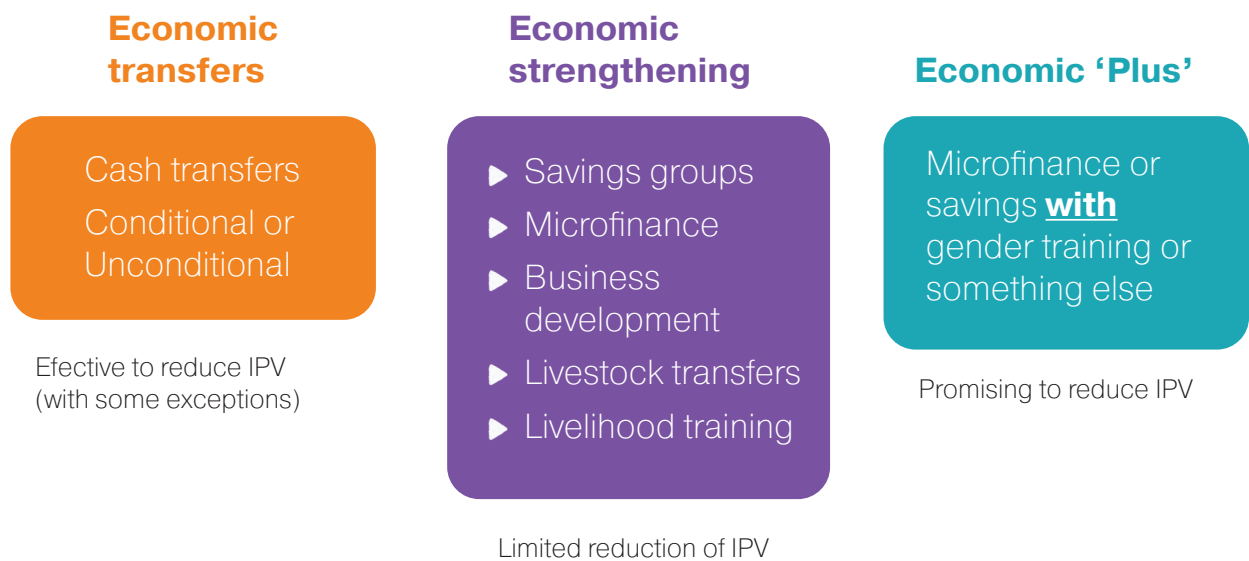
However, as it becomes increasingly common for women to enter the formal labour force and norms shift, the impact can reverse and women's employment (especially in the formal sector) can become protective against IPV.¹⁷ A longitudinal study among women in Bangladesh, for example, demonstrates such a shift.¹⁸ Researchers followed women in the same six villages in Bangladesh over 12 years, routinely investigating shifts in their status, risk of IPV, and engagement in the economy. Early in the study, against a backdrop of highly patriarchal norms, women who worked for cash were at heightened risk of experiencing IPV. As more and more women became economically active, attitudes towards women working liberalised and economic empowerment went from being a risk factor for IPV to a protective factor.

Social norms help explain why a WEE intervention that reduces IPV in one context may exacerbate or not affect IPV in another. For example, in some settings, a social protection programme offering women 'cash for work' may reduce IPV by easing household financial tensions; elsewhere, a similar intervention could exacerbate risk because it encourages women to violate norms that restrict female mobility and/or provokes backlash from men because women appear to be usurping men's roles as breadwinners.¹⁹ One study demonstrated that women who rank high on a new measure known as the Vanguard WEE index experience a higher risk of spousal backlash in the form of IPV than those whose economic empowerment level is at or below that which is normative for women within their geographic community.²⁰ The Vanguard WEE scale measures the degree to which a woman's level of empowerment on eight economic indicators is higher than that of her peers and thus out of step with local norms. This study also found that 'vanguard behaviour' may be more strongly associated with past-year physical IPV among poorer women, suggesting that non-normative behaviour may be less risky for women in wealthier homes.

4 THE TYPE OF WEE MATTERS

Increasing evidence suggests that the type of WEE intervention itself influences the likelihood of reducing IPV (see Figure 2). We now explore the evidence of impacts of different types of WEE interventions on IPV in turn.

Figure 2: How different types of WEE interventions influence IPV risk, according to recent research



ECONOMIC TRANSFERS

There is strong evidence that on average, cash transfers can reduce IPV at scale and across settings. This has been confirmed by more than 20 rigorous evaluations, with supporting evidence from qualitative studies.²¹ Evidence has also demonstrated the longer-term benefits of economic transfers. For instance, a randomised controlled trial of a programme that provided women in rural Bangladesh with cash or food transfers, alongside group-based nutritional education, led to sustained reductions in IPV four years after the programme ended.²² In comparison to cash transfers, less is known about how other types of social protection programmes affect IPV, including public works and social insurance;²³ it is important to further assess the impact of these economic strategies.

A key pathway through which cash transfers reduce IPV is by reducing household poverty.²⁴ Increased access to cash, particularly in extremely poor households, can ease conflict between spouses by reducing arguments over the use of scarce resources and daily spending decisions.²⁵ Cash transfers can improve living conditions and reduce stress on households.²⁶ The predictability and regularity of cash transfers are important for sustaining the effect, as stress-induced conflict can resume if payments are delayed or suspended.²⁷ Cash transfer programmes that give too little, are implemented poorly, or have unpredictable delivery, are unlikely to have such beneficial outcomes.²⁸

Another pathway through which economic transfers reduce IPV is by empowering women. Even if empowerment is not an explicit programme objective, targeting women with cash transfers may shift household dynamics by increasing women's bargaining power around the use of resources and other decisions.²⁹ Improving women's access to their own cash reduces their need to ask for money from their spouse, which can generate conflict, particularly if household resources are scarce.³⁰ Greater financial independence can boost women's self-esteem and status as contributing members of the household and/or in their wider

communities, which may reduce their willingness to tolerate IPV. Access to sufficient cash can enhance women's ability to leave violent situations.³¹ Cash transfers can indirectly influence IPV by increasing women's access to education, healthcare, and social services; fostering social inclusion; and reducing vulnerabilities.³²

Despite this strong evidence on IPV, cash transfers targeting women can occasionally prompt male backlash, including violence, by men attempting to reassert authority and control.³³ Some research has found that women with limited education (with husbands who have even lower levels of education) may be more vulnerable to backlash when receiving cash.³⁴ For instance, evidence from Latin America demonstrated that the average IPV prevalence among women declined after cash transfers were delivered, yet the prevalence of some forms of violence increased among less educated women.³⁵ By reducing poverty and associated household conflict, cash transfers to households can alleviate IPV risk factors regardless of who receives the transfer.³⁶ However, directing cash transfers to men risks further strengthening men's control over household resources. Linking households receiving cash transfers to other services can mitigate the risk of backlash and IPV, regardless of which household member is the recipient.³⁷

Cash Transfer Caveats: Complementary Activities

Complementary activities (e.g., trainings to encourage gender-equitable decision-making) can leverage cash transfers' impact and sustainability to reduce IPV and mitigate potential adverse effects, especially for vulnerable women.³⁸ For instance, in northern Nigeria, while cash transfers alone caused a rise in sexual IPV, the transfers contributed to an overall reduction in IPV when they were combined with a whole-of-village livelihoods programme.³⁹ A likely explanation is that husbands and other community members benefited from improved income as a result of the livelihoods component, making the transfers to women appear less threatening to their partners.⁴⁰ There is increasing guidance around how to empower women at all stages of cash transfer design and delivery to help keep women safe.⁴¹

Cash Transfer Caveats: Conditionality

While research has demonstrated that both conditional and unconditional cash transfers can reduce the risk of IPV, evidence increasingly suggests that unconditional cash transfers offer the greatest potential to improve women's economic achievements and agency.⁴² Conditional cash transfers can restrict households' and individual women's choices regarding the use of benefits, giving women less autonomy over spending and choosing priorities.⁴³ Conditionalities of cash transfers may also reinforce traditional gender roles or lead to excess time burden on women.⁴⁴ For example, if women are responsible for attending regular trainings or ensuring children attend health care visits, this may reduce their time to engage in paid or unpaid work (particularly if meetings are far away or at inconvenient times) or reinforce their role as the primary caregivers of children.⁴⁵

ECONOMIC STRENGTHENING INTERVENTIONS

Economic strengthening interventions include savings groups, microfinance, business development, livestock transfers, and livelihoods trainings. **In comparison to cash transfers, there is limited evidence that these types of WEE interventions on their own can significantly reduce IPV, at least in the short to medium term,**⁴⁶ or in the absence of specific conditions and realities.⁴⁷ Indeed, stand-alone economic strengthening interventions can increase the risk of IPV.⁴⁸ Microfinance loans carry risks for women depending on the size of loan, the rigidity and frequency of repayment plans, and women's ability to repay the loan or make decisions about how the loan is used. For instance, a qualitative study in Bangladesh found that the challenge of making weekly payments increased a woman's risk of violence if they needed to ask their husbands for money to support repayment.⁴⁹ Other research has documented the challenges for women to invest a micro-finance loan in a business to generate income if they face demands to meet basic household needs, which can lead to further indebtedness and conflict in the home.⁵⁰

Compared to cash transfers, economic strengthening interventions (e.g., developing a business plan or accessing a microfinance loan) are less guaranteed to shift women's economic realities and can take more time to have an effect. Even when economic strengthening interventions are well-designed (e.g., based on local livelihood opportunities or a market analysis of livelihood options), their economic impacts are largely influenced by the wider economy (e.g., if there is too much competition for a particular business). Studies have found microfinance self-help groups to have tenuous effects on women's income and food security,⁵¹ likely due to challenges in turning credit into long-term profit generation.⁵² Increasingly, economic strengthening interventions are being paired with gender-transformative interventions⁵³ to reduce women's risk of IPV, promote gender equity, and address unintended harms.⁵⁴

ECONOMIC STRENGTHENING PROGRAMME EXAMPLE: ROJIROTI IN INDIA

An evaluation of the Rojiroti microfinance approach in rural India found that women receiving microfinance through self-help groups who had increased access to assets (e.g., poultry, bicycles, and mobile phones) experienced reduced domestic violence relative to a control group within the first 18 months.⁵⁵ The evaluation's authors emphasize the important conditions that made this possible, including that the loans were small with flexible repayments and that emergency loans were offered to protect against income shocks. To ensure repayment, women were required to provide a detailed accounting of household finances, which may have encouraged greater gender equality in household decision-making. Additionally, the self-help groups provided women with an opportunity to talk about how to deal with intra-familial conflicts and increased their knowledge on income generation and savings. The authors also emphasized that households in the study context typically have diverse livelihood sources within a high-potential agricultural environment, which makes it viable to borrow and repay loans. The loans were also offered to very poor, marginalised community members whose only realistic alternative was from an unaffordable village moneylender, which may have prompted greater appreciation among husbands of the loans.

ECONOMIC 'PLUS' INTERVENTIONS

There is increasing evidence that combining WEE and gender-transformative programming (economic 'plus') is more likely to reduce IPV than either intervention alone.⁵⁶

The rationale for combining these components is that targeting multiple aspects of structural disadvantages faced by women can achieve greater effects.⁵⁷ The gender-transformative aspect of these programmes can also address inequitable gender roles and norms underlying violence⁵⁸ and strengthen women's voice and agency.⁵⁹ The gender-transformative 'plus' component can be delivered through a variety of platforms, including couples and/or parenting programmes; participatory gender trainings; or trainings on child health, nutrition, financial planning, or life skills. Economic 'plus' interventions have demonstrated positive impacts on IPV as well as various risk factors for IPV, including gender-inequitable attitudes and decision-making; attitudes supporting IPV; poor mental health; couple communication; and women's income, savings, and knowledge of sexual and reproductive health.⁶⁰

Research has shown that the group-based dynamics of many 'plus' component interventions can build or reinforce women's social capital, boost their self-esteem, and enhance their ability to communicate and negotiate with their spouse.⁶¹

Hosting discussion groups in conjunction with microfinance efforts can increase women's decision-making agency over household purchases.⁶² Notably, the ordering of the two components may be important. For instance, an assessment of programmes evaluated under the What Works to Prevent Violence against Women and Girls programme found that in all studies, the gender-transformative component was implemented first and the economic empowerment component second. This ordering may have enabled women to maximise the benefits of the intervention, although further research is needed.⁶³

Some studies have found that economic 'plus' interventions did not affect or even increased women's risk of IPV.⁶⁴ This is likely a result of interventions' variations in quality, intensity, and frequency; whether they involved only women, only men, or both; and contextual gender and cultural dynamics. More research is needed to understand how the design and implementation of different economic 'plus' components affect IPV incidence.



ECONOMIC 'PLUS' PROGRAMME EXAMPLE: MAISHA IN TANZANIA

Maisha ('life' in Kiswahili) is a social empowerment programme designed to reduce women's experiences of IPV and increase gender equality in relationships. The programme encourages reflection and debate on gender norms, builds relationship and economic skills, and empowers women to safely challenge violence and improve their relationships and individual well-being. The programme consists of a 10-session participatory training curriculum led by two trained female facilitators and delivered to participants of established microfinance loan groups. It is coordinated by BRAC Tanzania, a microfinance nongovernmental organisation. Each group consists of roughly 20 women.

A cluster randomised controlled trial assigned women in microfinance loan groups to either the 10-session Maisha intervention or a control group. The trial showed that over two years,

Maisha reduced reported past-year physical IPV among participating women by a third.⁶⁵ The programme also reduced attitudes tolerating violence and beliefs that partner violence is a private matter. Secondary analysis indicated stronger effects for reducing past-year physical IPV among women under age 35, women who were more financially independent, and women without a prior history of IPV.⁶⁶ A parallel randomised controlled trial found that when delivered to women in newly formed groups not receiving microfinance, Maisha had no impact on past-year physical IPV.⁶⁷ The authors note it is plausible that greater poverty and/or lack of financial autonomy prevented women in the group without the microfinance from using their Maisha training to enact changes at the relationship level. Visit the [Maisha programme page](#) on our Knowledge Hub to learn more.



WEE is a key strategy under the United Nations framework to reduce violence against women (RESPECT):

- ▶ The RESPECT Framework includes women's economic and social empowerment under the [Empowerment of women](#) strategy.
- ▶ The RESPECT Framework includes economic strengthening under the Poverty reduced strategy.

PROGRAMMING IMPLICATIONS

WEE interventions can be an important strategy to prevent IPV, including at scale. Yet to optimise their impact, **it is necessary to consider how the context, design, and implementation of these interventions influence IPV.** Our [Prevention Triad brief](#) is a useful tool for considering how these multiple elements combine to determine the impact of different programme strategies. The evidence also suggests actions that should be taken to maximize the positive impacts of WEE programmes and keep women safe. These include:

- ▶ **Mitigate potential backlash.** Consider how the intervention is framed and delivered. For instance, it can be less risky to engage women and their spouses rather than women alone, especially in highly patriarchal settings.⁶⁸ It is important to ensure women are aware of and have strategies to mitigate potential risks, such as skills to manage conflict over resources. Where possible, the intervention should be designed to accommodate women's other responsibilities, as any perceived 'neglect' of these responsibilities can make women more vulnerable to IPV.⁶⁹ In settings where women's economic participation is non-normative, it is especially important to monitor and address any resulting backlash.⁷⁰
- ▶ **Understand the context.** Consider whether the WEE intervention goes against norms around gender roles and earning income. Formative and qualitative research can be useful in identifying social norms, potential backlash, and mitigation strategies, including acceptable framings of an intervention.⁷¹
- ▶ **Ensure the quality, appropriateness, sufficient duration, and intensity of the intervention.** This will increase the likelihood of achieving meaningful changes in women's economic situations. WEE interventions require a variety of complex programme decisions and should be implemented by or in partnership with organisations that have expertise and experience with these strategies.

- ▶ **Monitor if women experience any increased risk of IPV in response to the programme.** Ensure a clear referral pathway to services for survivors of IPV. Research suggests that women can experience increased spousal control and monitoring as a form of backlash to their involvement in WEE. This highlights the importance of measuring emotional IPV and controlling behaviours in addition to physical and sexual IPV when monitoring any increased risk of IPV in the context of WEE interventions.⁷²
- ▶ **Address the barriers to women engaging in WEE interventions.** These can include caregiving responsibilities or transport costs. Waiving requirements for multiple forms of identification or expanding the acceptable forms of documentation can also help ensure WEE interventions are accessible to anyone at risk of IPV, including migrants or refugees.⁷³ There have been increasing calls to drop conditionalities of cash transfer programmes to ensure they are accessible to the most marginalised women and do not overburden them with compliance requirements.⁷⁴
- ▶ **Apply an intersectional approach.** Research has found the characteristics of female participants (e.g., socioeconomic status, living with disabilities, being a refugee and/or forcibly displaced, urban or rural residence, age, and education

status) and households (e.g., number of children and household wealth) influence WEE interventions' effect on IPV. Monitoring, evaluation, and research should disaggregate data across multiple dimensions to better understand the diverse impacts of WEE interventions on IPV.

- ▶ **In certain contexts or populations, meaningfully engage men in the WEE intervention.** Men who experience work- and unemployment-related stress are more likely to use violence against their partners.⁷⁵ Where economic marginalisation contributes to poor men's use of violence and control over women, strengthening men's economic position may equip them to reduce their use of IPV.⁷⁶ Engaging men in livelihood interventions can also reduce the risk of male backlash.⁷⁷
- ▶ **Strive for an enabling environment.** Strategies to engage the wider community, including men and families, may be needed to promote social norms that encourage women's economic engagement. It is important to address community-level barriers affecting women's abilities and opportunities to participate in economic life, as many of these barriers are rooted in norms and beliefs about women's rights, roles, and ambitions.⁷⁸

'The enabling environment that confirms the right to work, to property, to safety, to voice, to sexuality and to freedom is not created by sewing machines or micro-credit alone.'

—**Sholkamy, 2010**⁷⁹

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The **Prevention Strategies Series** highlights a range of diverse – and sometimes underutilised – approaches that can prevent violence in the home. We focus on information useful to violence prevention practitioners and researchers, as well as those working in other fields who are considering addressing violence prevention in their programming.

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