

# GENDER SENSITIVE RESILIENCE CAPACITY INDEX-

Women's Leadership, Empowerment, Access, and Protection (LEAP)- Iraq 2020-2021

#### Authors:

Iris Sawalha, Monitoring and Reporting Specialist, UN Women Regional Office of Arab States Ekram El Huni, Programme Coordinator, UN Women Regional Office of Arab States Stefania di Guiseppe, Resilience Analyst, FAO Rome





During the past number of years, the concept of resilience has become increasingly important within international development and humanitarian organisations and a critical concept bridging the humanitarian and development nexus.

The 2016 World Humanitarian Summit<sup>1</sup> reached a consensus on the need to better bridge humanitarian assistance with development cooperation. However, the agreement left open the question of how this can best be done in practice. Different actors have been invested in understanding how individuals and households cope with shocks and stressors to streamline the Resilience into programming and measurements. Various attempts have been proposed to define and measure Resilience quantitatively and qualitatively. Despite progress made by many actors on the theoretical, conceptual, and academic sides, programmatically and practically, measuring, monitoring, and evaluating resilience interventions is still challenging.

In 2008, the Food and Agriculture Organization (FAO) proposed an econometric approach for measuring household resilience. Since then, it has been at the forefront of developing, testing, and rolling out the Resilience Index Measurement and Analysis (RIMA)<sup>2</sup> in many countries. In 2019, the UN Women Regional Office for the Arab States approached FAO to conceptualise a gender-sensitive resilience capacity index based on FAO's econometrics, approaches, and experiences.

In the Arab States region, UN Women began its resilience monitoring efforts in 2019 and the first Gender-Sensitive Resilience Capacity Index Report for Iraq was published in June 2020. During 2020, UN Women extended its resilience monitoring framework to cover regional resilience-focused programmes (Women's Leadership, Empowerment, Access, and Protection (LEAP) — Egypt, Iraq, Jordan and Regional Component and Gender-responsive Management and Response to the COVID-19 Pandemic in the Arab States Region: From Emergency Response to Recovery and Resilience) in Egypt, Iraq, Lebanon, Palestine, and Yemen. This is the first of six reports that UN Women intends to publish and is a result of data collection efforts under the regional 2020-2021 LEAP programme in Iraq.

With thanks to the Government of Japan, who generously funded the regional LEAP and COVID-19 programmes as well as the resilience monitoring efforts, UN Women in Iraq was able to roll-out the gender-sensitive resilience capacity index in Anbar and Kirkuk through its implementing partners, the Women Leadership Institute (WLI) and the Baghdad Women Association (BWA).

This report will present findings on resilience from the lens of 115 host community and internally displaced (IDP) women who have participated in the cash for work (CFW) interventions and received entrepreneurship/grant support to start their businesses. The aim of this report is to present evidence on the impact of UN Women's interventions and provide in-depth analysis around resilience and factors critical for strengthening resilience. This will allow UN Women to expand its evidence based on resilience and help better design programmes, ensuring that they are mainly based on needs and vulnerabilities of the population of concern.

The methodology used in the second phase of GS-RCI measurement in Iraq took into account methodological recommendations for the refinement of the index presented the <u>independent evaluation</u> of UN Women's 'Strengthening the Resilience of Syrian Women and Girls and Host

\_

<sup>&</sup>lt;sup>1</sup> "Humanitarian and development actors need to work collaboratively across silos and mandates to implement plans with a clear and measurable collective outcome that reduces the vulnerability of internally displaced persons over the long term" (UN Doc. A/70/709, 2016: 23 f.).

<sup>&</sup>lt;sup>2</sup> http://www.fao.org/resilience/background/tools/rima/en/





Communities' ("Madad") programme. The conceptual framework, which allows for understanding how women deal with shocks, stressors and adverse situations and address their immediate needs and long term, has also been strengthened. In this second phase of implementing the resilience monitoring efforts, the indicators under each of the pillars and the data collection tools have been revised. This enabled UN Women and FAO to better refine the conceptual framework, which is the backbone of the gender-sensitive resilience capacity index (GS-RCI).

#### What is Gender-Sensitive Resilience Capacity Index (GS-RCI)?

The GS-RCI is a quantitative approach to measuring resilience of women, based on FAO's econometrics, approaches and experiences. Through a constructed index, stakeholders are allowed to better understand how women deal or cope with shocks and stressors.

The GS-RCI is constructed using a multidimensional approach. Specifically, four critical pillars are used (women's access to basic services, adaptive capacity, access to assets and social safety nets) against a specific outcome (in this case indicators proxying livelihood and women empowerment). The weighting of each pillar is response-dependent (in other words, it depends on how important women consider these determinants to be). In addition, each pillar is a composite index on its own and is developed based on a set of direct and proxy indicators. Each component contributes to the GS-RCI and is identified by value; though there are no predetermined thresholds. An increase in the GS-RCI value over time implies improved resilience. Since the calculation of the GS-RCI is based on the pillars and the weightings allocated to each of the pillars, the GS-RCI's structure and results are dynamic in nature.

#### How is Gender-Sensitive Resilience Capacity Index measured?

Changes in beneficiaries' resilience overtime, measured through the GS-RCI and as a result of project interventions, requires substantial investment in collecting and analysing data at different points in time. For longer-term projects<sup>3</sup>, three surveys are undertaken; one survey at the start of the project, which allows us to set a baseline, and followed by two surveys (a midline survey carried out 3-6 months after the start and an endline taking place 6-9 months after the end of the programme). As the implementation duration of the LEAP programme was 9 months, UN Women and its partners carried out two surveys (a baseline and an endline).

## Methodology

As part of the programmatic monitoring, UN Women's implementing partner recruited4 enumerators in Anbar and Kirkuk governorates. The programme's total target was 120 women and while no sampling methodology was used, the implementing partners were able to survey 115 beneficiaries at the time of the endline survey (five beneficiaries returned to their place of origin at the time of the endline survey).

The data collection was conducted using an extensive quantitative survey that was undertaken at the start of the programme (in November 2020) and at the end of the programme (February and March 2021). Data collection was closely supported by UN Women's Regional Monitoring and Reporting Specialist<sup>4</sup>.

#### Gender-Sensitive Resilience Capacity Index Pillars

representative sample of all the group's different profiles.

The conceptual framework for measuring the GS-RCI is built on the strategic approach adopted by FAO, which addresses the underlying causes that contribute to vulnerability, and seeks to understand

<sup>&</sup>lt;sup>3</sup> Projects with a duration of over one year.

<sup>&</sup>lt;sup>4</sup> The programme targeting was needs-based although the surveyed beneficiaries may not considered a fully





and address long-term trends that affect people's exposure to risks and increase/decrease capacity to absorb or resist shocks. The core resilience components, namely pillars, are:

- Access to Basic Services (ABS)
- Assets (AST)
- Social Cohesion and Interconnectedness (SCI)
- Adaptive Capacity (AC)

Access to Basic Services (ABS) refers to beneficiaries' ability to access services such as education, employment, health services, adequate shelter, political participation and decision-making, access to documentation (relevant to refugees and IDPs), and how critical is the access.

Assets and income generation comprise both productive and non-productive assets. Based on the assumption that higher income can lead to higher savings and ownership of assets, this has been used as a starting point in dealing with shocks and stressors. The ability of women to generate income will enable them to become more independent. Furthermore, the ability of women to spend on non-essential goods or to sell productive assets can be considered a proxy for wealth.

Adaptive capacity mainly considers the ability of women to adapt to changing environments. This pillar is primarily determined by complex inter-relationships and gendered dynamics related to decision making and the ability to influence decision making. There are other factors such as demographic structures affecting adaptive capacities such as the dependency ratio (eg. how many adults are in a given household, the individual that is the household head, etc) and the level of education of individuals within the household.

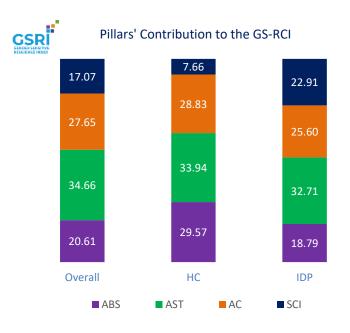
Social Cohesion and Interconnectedness. There is growing evidence that social infrastructure is one of the resilience drivers, mainly if social dimensions are considered. Social structures and relationships within the communities can reflect some of the underlying socio-economic disparities and affect some individuals/groups' resilience as opposed to others. The social infrastructure can also indicate individuals' ability to access (cash or in-kind), ask for support when shocks and stressors happen, and the higher the social network, the easier the access to informal assistance. Also, developing resilience capacities relies on protective factors within the households and the community. The feeling of safety and security within one's community lay the foundation that is at the core for strengthening Resilience and provides opportunities that promote well-being and Resilience. Access to transfers in many contexts make up a large part of poor households' annual income, and remittances generate additional income for individuals and households. Similarly, sharing of resources with neighbours/groups can be a proxy indicator of social cohesion and support networks that enable community-based social safety net measures to be put in place.

The resilience monitoring is data driven, or in other words is response-dependant. Therefore, the analysis and structure of the GS-RCI structure is dynamic and may be different for each of the project targeted groups.





#### The GS-RCI structure



This graph represents the contribution of pillars to the GS-RCI structure at the endline. It was noted that the asset pillar in the overall GCS-RCI has the strongest correlation among the four pillars, followed closely by adaptive capacity and access to basic services. The relevance of assets is almost homogeneously important to both host communities and IDPs. The assets component is determined by variables related to employment status and the ability of women to generate income and spend on non-essential good/services as well as ownership of assets (including productive assets). Adaptive capacity is mainly driven by individual's ability to apply

flexibility in addressing challenges and balancing power among household members. Some of these characteristics can either promote (education or acquired skills) or inhibit resilience (having a particular disability, lack of household support or tensions within households resulting from employment). Overall adaptive capacity held the second highest weight among the four pillars, with similar weights between groups.

Access to basic services is the third critical determinant of resilience, mainly because host community women have identified access to basic services as important to strengthen resilience in the short run. The data collected under this pillar revealed that 82% of surveyed women reported challenges accessing protection services. This was followed by 79% of surveyed women reporting challenges accessing employment services and 37% of surveyed women reporting challenges in accessing education services.

Lastly, the social cohesion and interconnectedness pillar is mainly driven by indicators related to the feeling of safety and security within their communities, intercommunity relationships, and social networks of individuals. The above results indicate that the pillar for IDPs has three times the weight than for host communities, highlighting that the feeling of safety and security was found to be of higher importance for IDPs compared to host community women.



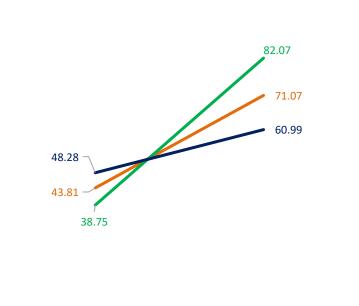


GS-RCI progress, by community of Origin

# **Project Results- GS-RCI Progress**

# **GS-RCI** progress by Community of Origin

GS-RCI differences among host community and IDP women were noted. Host community women were the least resilient and IDP women the most resilient at the time of the baseline survey. However, at the end of the project, a 27% increase in resilience has been noted for both host community and IDP women. The increase was 3.5 times higher for host community than IDP women. Data analysis suggests that host community women reported less challenges accessing basic services than IDP women, as well as having stronger social infrastructure, adaptive and capacities. Furthermore, the majority of the IDP women were married and had children, which directly influenced their spending on non-essential good and limited their abilities to save any of the income generated. Progress in index scores are further analysed in the following sections by marital status, by household head status, presence and number of children and type of assistance.



# **GS-RCI Progress by Marital Status**

When the GS-RCI results are compared with the marital status<sup>5</sup>, married women were found to be less resilient at the start of the project than divorced women. 90% of married women were unable to meet their basic food needs at the start of the programme, reported having a higher reliance on remittances and sharing resources with their neighbours to meet their basic needs as opposed to divorced women. At the end of the project, married women showed a higher increase in resilience (40.6% increase) than divorced women (7.61% increase). This can be explained by the fact that married women reported having a lower dependency ratio<sup>6</sup> and higher abilities to

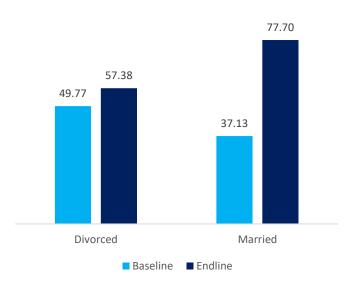


Overall -

Baseline

HC

Endline



<sup>&</sup>lt;sup>5</sup> The total number of widowed and single female respondents is low in respect to the total population and not statistically significant. Therefore, the interpretation of results may not fully be fully accurate and conclusions cannot be drawn.

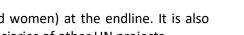
<sup>&</sup>lt;sup>6</sup> Age dependency ratio is the ratio of dependents--people younger than 15 or older than 64--to the working-age population--those ages 15-64. Data are shown as the proportion of dependents per 100 working-age population. https://databank.worldbank.org/metadataglossary/gender-statistics/series/SP.POP.DPND

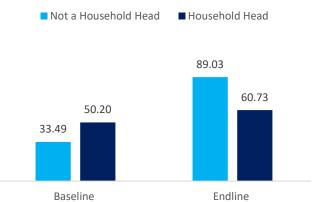




spend on non-essential goods (almost twice as much as divorced women) at the endline. It is also worth noting that households of married women were also beneficiaries of other UN projects.







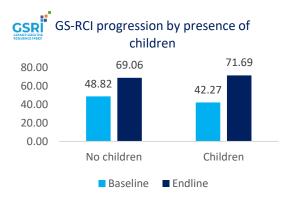
At the start of the programme, female-headed households were found to be less resilient than women who were not heading households. Female headed households reported higher challenges in accessing basic services and having a higher dependency ratio (almost twice as much as women heading households). Female households also reported lower participation in groups for socialisation and de-stressing<sup>7</sup> and lower sharing of resources with neighbours. At the end of

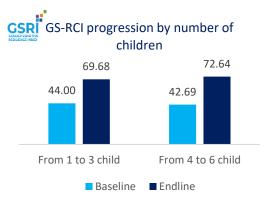
GS-RCI Progress by Household Head Status

the programme, women who were not heading households, showed 5 times more resilience than women who were heading households. This increase for women who were not heading households can be attributed to an increase in ownership of assets, an increase in social networks and engagement in community groups (village committees, women self-help groups, religious group, etc) and an increase in the number of household members with a source of income through employment/selfemployment at the time of the endline survey.

# **GS-RCI Progress by Presence and Number of Children**

When the GS-RCI results are compared among women with the number of children in their household, women with children at the baseline were found to be less resilient than women without children. The latter reported a higher dependency ratio that was twice as much as women who do not have children. Less than half of the women who have children reported having the ability to save any income generated by them or their households. Furthermore, women who had children reported less asset ownership (sewing machines, means of transportation, etc) than those who did not have children. However, at the endline, women who had children showed a higher increase in resilience than those who did not have children. Women who had children reported an increase in their abilities to access employment opportunities and save generated income more than women who do not have children. When the results for women who had children were compared with the number of children, there were no significant differences in results between women with 1 to 3 children and women with 4 to 6 children.



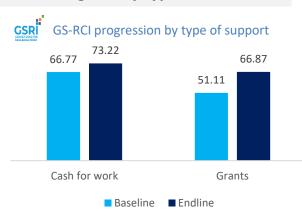


<sup>&</sup>lt;sup>7</sup> The social relationships with the community can indicate an individual's ability to access (cash or in-kind), request for support when shocks and stressors occur. The higher the social network, the easier the access to informal assistance.





# **GS-RCI Progress by type of assistance**



When the GS-RCI results were compared with the type of assistance received (temporary CFW opportunities versus entrepreneurship support), it was noted that both types of assistance resulted in an increase in resilience. However, the resilience for women who received entrepreneurship and grants support showed 2.5 more progress in terms of strengthening their resilience than those who participated in the cash for work opportunities.

# **Project Results- Resilience Outcomes:**

Evidence collected over the years by UN Women acknowledges the linkages between its livelihood programmes and gender equality, dignity, and empowerment. The measurement component of the index showcases the contribution of the four pillars (access to basic services, assets, adaptive capacity and social cohesion and interconnectedness) to four outcomes: (i) improved livelihoods, (ii) women empowerment and decision making (iii) reduced tolerance to GBV, (iv) improvement in wellbeing. The four outcomes are based on a set of direct and indirect indicators, which can be used to measure changes in livelihoods, tolerance to GBV, wellbeing and decision-making.

The correlation between the four identified outcomes were examined against the GS-RCI pillars at baseline and endline to determine whether the GS-RCI and its determinants were linked and whether the GS-RCI had an impact on the four identified outcomes. The results showed that all outcomes are directly linked, however, at varying degrees of correlation. The highest correlation was noted for the wellbeing and the women's empowerment and decision-making indicators, followed by the reduced tolerance to GBV and improved livelihoods indicators.

#### **Outcome 1- Improved Livelihoods**

**Indicator**: Livelihood based coping strategies.

**Definition**: Livelihoods is defined as "the capabilities, assets and activities required for a means of living". The livelihood coping strategies is an indicator that measures the extent of livelihood coping mechanisms households need to utilise as a response to a financial shock. This indicator provides a robust understanding of the strategies typically employed by households in difficult situations, and the relative severity of the strategies employed when compared to each other.

Livelihood-based coping strategies<sup>8</sup> are longer term household measures deployed to cope with a lack of food, or money to buy food. These strategies are categorised according to severity. There are three categories: stress, crisis, and emergency. The deployment of these strategies indicates people's ability to deal with shocks. Stress coping strategies reflect a reduced ability to deal with future shocks and include spending savings, buying food on credit, etc. Crisis coping strategies reduce future productivity

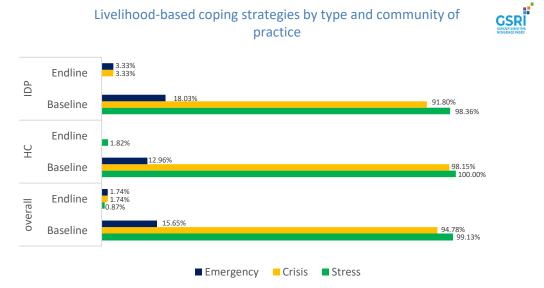
<sup>8</sup> https://documents.wfp.org/stellent/groups/public/documents/manual\_guide\_proced/wfp271449.pdf





and includes selling productive assets and being unable to attend to health needs. Emergency strategies are more difficult to reverse and are more dramatic in nature. They include sending household members to engage in illegal, exploitative, or degrading jobs, removing children from school and sending them to work, etc.

Data analysis suggests the deployment of a range of livelihood-based coping strategies by both IDPs and Host community women at the start of the programme. Both groups showed similar results with stress type livelihood strategies being deployed more frequently, followed by crisis coping strategies and emergency coping strategies, respectively. Data collected reveals that 87.5% of all beneficiaries did not have enough food to eat in the past 7 days. IDPs were deploying emergency-type livelihood strategies slightly more than host community women. At the end of the project, a significant reduction in the deployment of all three types of livelihood-based coping strategies has been noted. A total of 13.9% reduction has been noted in the deployment of emergency strategies, 93% reduction in the deployment of crisis strategies and a 100% reduction in the deployment of stress type crisis strategies.



**Outcome 2- Women's Empowerment and Decision-making** 

**Indicator**: Increase in women's decision making and abilities to influence decisions within their households

**Definition**: The women's empowerment and decision-making indicator measures gendered dynamics within their households and women's autonomy in relation to social, economic, and reproductive outcomes.

Discrimination in household decision-making is often rooted in patriarchal attitudes that favour men over women. There is growing evidence that indicates household decisions are often made through a bargaining process that is more likely to favour men in particular in areas that include control over income, assets, food consumption, freedom of movement, and education of children. By changing discriminatory attitudes in their households, women can advance the rights of girls in the future and for generations to come. Women's empowerment within households will increase the likelihood that children, in particular girls, will not conform to 'traditional' or "societal' perceptions in relation to the roles of men and women. Therefore, monitoring decision-making dynamics within the household is critical to understanding whether there have been any changes to beneficiaries' bargaining power and in which areas.





This indicator measure's women participation in decisions within their households (either themselves or jointly with others). There are three categories against which decision-making indicators were organised: social, economic, and reproductive. For each of these categories, a set of statements or proxy indicators have been included that help measure women's participation in the decision-making process in relation to spending, food consumption, freedom of movement, how many children to have and the education of children. Each statement is given a score (1 if a woman makes the decision herself or she reports the ability to influence a decision taken jointly to a large extent). The higher the overall score, the greater the indication of gender equity in decision-making.

No major change has been noted in the aggregate value of the decision-making indicator between baseline and endline. However, the detailed review of this indicator shows that significant progress has been achieved. While the indicator methodology considers both women who are able to make decisions for themselves and influence decisions to a large extent, a significant increase has been noted in the number of women who are able to take decisions themselves and a reduction in the number of women who can influence decisions to a large extent at the time of the endline survey. This finding suggests a shift in decision making powers within their households and in particular around economic decisions within their households. The average increase in the number of women who are now able to take decisions themselves corresponded to 39%. For further details, please refer to the table below.

Decision-making statement	Number of women who responded "Myself"			Number of women who can influence to "large extent"		
	baseline	endline		Baseline	Endline	
Whether you can/will work outside the home	31	54	1	76	46	<b>\</b>
How to spend money made from income generating activity where the man in mainly contributing	27	64	1	69	20	<b>\</b>
How to spend money made from income generating activity where women is mainly contributing	34	95	1	66	8	<b>\</b>
Whether household should take on a small loan, from what source and how much	23	46	<b>↑</b>	72	46	<b>\</b>
What food to buy and consume	40	95	<b>↑</b>	66	9	$\downarrow$
What household goods to buy and consume	40	97	1	68	6	$\downarrow$
The sale of household assets	21	45	<b>↑</b>	70	42	$\downarrow$
The education of children	34	52	<b>↑</b>	66	55	$\downarrow$
How many children to have	3	4	<b>↑</b>	80	77	$\downarrow$
Housework and care of elderly in the household	48	116	1	62	1	<b>\</b>





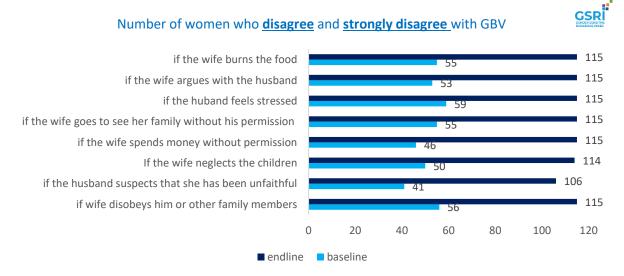
#### **Outcome 3- Reduced Tolerance to GBV**

**Indicator**: Women's acceptance of GBV

**Definition**: Acceptance of GBV as a private issue and often prevents others from intervening or prohibits women from reporting. The risk of GBV is high, when and where violence is normalised. This indicator helps to measure levels of tolerance and acceptance to domestic violence and tracks changes as a result of women's economic empowerment.

UN Women's entry point for targeting vulnerable women is the protection centers. The target beneficiaries are those women who are at risk or surviving GBV. Protection support and promotion of gender equality is part of UN Women's regular programmes and is a first step to change behaviour. Monitoring acceptance levels to GBV is also of paramount importance to understand whether there have been changes in perceptions by women in relation to violence. This indicator measures women tolerance to GBV. It consists of statements reflecting several scenarios in which women would accept a violent behaviour against her by her husband. Each statement is based on a Likert scale of 1-5 representing the extent to which they agree or disagree in the given scenarios.

Progress in this regard has been noted with an average 48% of women demonstrating an acceptance of GBV at the start of the project. Almost all project beneficiaries have reported their disagreement with GBV by the end of the project.



# **Outcome 4- Wellbeing**

**Indicator**: Improvement in women's wellbeing

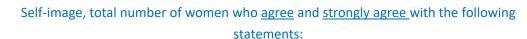
**Definition**: This aggregate indicator is a self-rated indicator. It helps to monitor changes in women's wellbeing in the following domains: confidence, motivation, inclusion, respect, and abilities. This indicator also captures their perceptions of gender equality.

This index is comprised of two indicators: the first indicator is a reflection of self-image and the second indicator captures the beneficiaries' perceptions of gender equality. Both indicators consist of statements reflecting the five domains of wellbeing and gender equality perceptions. Each domain contains of statement(s) based on a Likert scale of with 1-5 points representing the extent to which they agree or disagree with these statements.

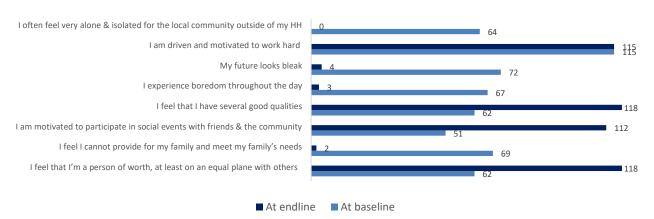




Overall, there has been significant progress in this indicator between the baseline and endline. For the self-image indicator, data analysis indicates that there is an average of 50% increase in the number of women reporting an improvement in their self-image. For further details, please refer to graph below. Kindly note that in order to reduce/prevent social desirability bias, the technique used in the survey questionnaires included reversed statements, as can be found in the below graph, to capture different opinions and allow free expression of any opinion.



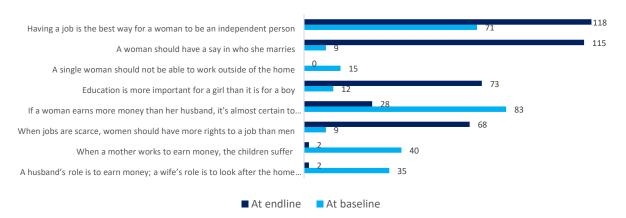




Similarly, a 63.5% increase has been noted in the number of women who have positive perceptions on gender equality. For further details, please refer to graph below. Kindly note that in order to reduce/prevent social desirability bias, the technique used in the survey questionnaires included reversed statements, as can be found in the below graph, to capture different opinions and allow free expression of any opinion.

# Perceptions of Gender Equality, total number of women who <u>agree</u> and <u>strongly</u> <u>agree</u> with the following statements:









## **Conclusions and Recommendations:**

**Conclusion 1**: There are disparities in the GS-RCI between groups (host community and IDP women) and between different demographic profiles (female headed households, women with or without children, married women, and divorced women). The data collected confirms that resilience is not the same for all women and factors determining their resilience are also different.

<u>Recommendation</u>: The need for individual profiling of women's needs to ensure that programmes are uniquely framed to efficiently and effectively identify, recognise, and respond to their specific needs.

**Conclusion 2**: Women's resilience has been found to be highly influenced by assets and adaptive capacity. The assets pillar continues to play a key role in strengthening resilience. It is mainly influenced by the ability to generate income and the ownership of productive assets. Adaptive capacity is highly correlated to factors promoting resilience such as education, acquired skills, and intra-household support of beneficiaries' employment.

<u>Recommendation</u>: As evidenced by the results and previous resilience reports (<u>Turkey</u> and <u>Iraq</u>), programmes aimed at strengthening the resilience of women must promote opportunities for their economic empowerment. More assets for women and their households translates directly to strengthened resilience in the short-run.

**Conclusion 3**: Social cohesion and interconnectedness has more relevance to IDPs than host community women. IDPs have identified their feeling of safety and security as well as peaceful or tolerant intercommunity relationships with host communities as two important factors to strengthening their resilience.

<u>Recommendation</u>: Resilience programmes should be based on an understanding of the social structures within targeted communities between host communities and IDPs in order to build stronger foundations for integration and peaceful co-existence. It also remains important to monitor social tensions and inclusion dynamics for such programmes.

**Conclusion 4**: Entrepreneurship/grants support to women start-ups strengthened resilience significantly more than CFW within the same timeframe.

<u>Recommendation</u>: Interventions should progressively transition from CFW and focus on enhancing women's access to credit and expanding microfinancing services, which can be tailored to the needs, skills and past experiences of women facilitating their longer-term integration within labour markets.

**Conclusion 5**: Livelihood support had a multi-dimensional impact on women as it improved their livelihoods, strengthened their decision-making, improved wellbeing and resulted in reduced tolerance levels to GBV. The key determinants of the GS-RCI are directly linked to the outcomes.

<u>Recommendation</u>: Programmes should continue focusing on providing integrated livelihoods and protection programmes. Livelihood interventions have a great potential to reduce protection risks by restoring economic independence, dignity, and self-reliance. While CFW interventions can offer great flexibility, they only temporarily reduce risks. Therefore, livelihood programmes should focus on providing women with opportunities that allow them to maintain independence for longer periods of time.



