



Impacts of vouchers for households affected by displacement in the Democratic Republic of Congo

In the Democratic Republic of Congo at the end of 2018, more than 3 million of the country's total population of approximately 80 million were displaced. This was a consequence of 20 years of armed conflict. Humanitarian actors have been responding to the needs of internally displaced persons through several programmes, including the Rapid Response to Movements of Population (RRMP).

The RRMP, created in 2004, is jointly managed by UNICEF and the United Nations Office for the Coordination of Humanitarian Affairs. RRMP assistance includes vouchers for essential household items (EHI) to recently displaced people and vulnerable members of their host communities.

A 3ie-supported impact evaluation combined a randomised controlled trial with qualitative research to measure the impacts of EHI vouchers on adult mental health, child health, social cohesion and resilience.

Highlights

- Vouchers usable at local fairs selling EHI improved well-being amongst programme participants at an estimated cost of US\$136.76 per household.
- The research found that after six weeks, the vouchers led to a large improvement in adults' mental health but had no effect on children's physical health.
- Vouchers also seemed to improve village interactions and important measures of resilience, such as assets and dietary diversity.

Evaluating vouchers that made essential household items affordable

Under the RRMP, multiple international NGOs in the area stand ready to mobilise a response to the needs of vulnerable households affected by population movement, whether they are fleeing armed conflict, hosting displaced families or returning to their home communities after displacement. The programme addresses areas such as EHI; health and nutrition; child protection and education; and water, sanitation and hygiene. The overall objective is to improve health and well-being.

Evaluating such emergency aid is challenging. Using mobile research teams, working in close coordination with implementing partners, the 3ie-supported evaluation focused on the effects of RRMP's EHI component in 25 villages across the North Kivu province. The programme provided vouchers to vulnerable households so they could buy EHI at RRMP-organised fairs. These items improved people's short-term capacity to undertake key daily activities, including: sleeping and clothing themselves; fetching,

storing and using water; maintaining personal and household hygiene; and preparing and storing food. Voucher size varied from US\$55 to US\$90 per household, depending on household size.

In target communities, the programme provided assistance to the most vulnerable households. For the evaluation, households just below the RRMP vulnerability threshold were randomly assigned to a voucher group or a control group.



Main findings

After six weeks, the vouchers increased coping and consumption at an estimated total cost of US\$136.76 per participant household. The largest effect was an improvement in adults' mental health. There also seemed to be moderate improvements in social interaction and resilience. However, there was no effect on children's physical health.

The mental health improvement consisted of increased life satisfaction and reduced anxiety. EHI vouchers also increased investment in assets and dietary diversity. A large majority of the households bought clothes at the fair. Other popular items were cloth, pots and pans, soap, mattresses, blankets, luggage, and buckets and basins.

Qualitative evidence from focus group discussions corroborated the positive findings of the EHI vouchers' effect on collaboration and cohesion. There were many reports of sharing EHI. In addition, some households reported having sold EHI to meet more urgent needs, such as food and medicine, both of which were major concerns for vulnerable households that were not always addressed by other humanitarian actors. However, group discussions also showed that the household targeting and selection process was poorly understood.

Implications

Policy and programming

The evaluation suggests that humanitarian assistance in the form of vouchers for EHI or non-food items improves mental health in the short term. The benefits of EHI vouchers may persist and improve other domains beyond the five- to six-week evaluation period, suggesting a need to continue the programme. Decision makers must also support additional research to innovate and improve the programme, especially in relation to child health outcomes.

Research

The findings suggest a need for longer-term research on linkages between EHI, health and well-being. Future research should investigate whether such effects persist over the longer term.

Resilience, social interaction and mental health are rarely explored in relation to humanitarian and social protection interventions. Studies of other voucher programmes could look for impacts on these outcomes, and those working in humanitarian settings could draw from the evaluation's unique design.

In 2019, 132 million people were estimated to need humanitarian assistance, and the United Nations has requested US\$25 billion to meet that need. A sustained commitment to research is necessary to ensure this assistance is as effective as possible.





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About this brief

This brief is based on an impact evaluation report by John Quattrochi, Ghislain Bisimwa, Tyler Thompson, Peter Van der

Windt and Maarten Voors, *The effects of vouchers for essential household items on child health, mental health, resilience, and*

social cohesion among internally displaced persons in the Democratic Republic of Congo, published in 2019.



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