

**Enhancing Effectiveness of Social Protection by Psycho-Social Support in Uganda
and Ethiopia**



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Summary

This study investigates the effect of social protection and trauma relief on social-economic resilience of highly traumatized communities in Uganda and in Ethiopia.

The research compared the effects of existing trauma programmes and a new intervention developed for this study, specifically designed for low resource settings with high Post Traumatic Stress (PTS). The intervention was called the Self-Help Low-Cost Post-Traumatic Stress programme (SHLCPTS) and was based on Eye Movement Desensitizing and Reprocessing (EMDR) techniques.

The study found that the effect of all the support modalities for the relief of PTS were higher on economic resilience (income, capability and empowerment) than the effect of the social protection programmes. The combined effect on economic resilience of support for trauma relief and social protection support together was the highest.

Statistical analysis indicates the eight groups (which received different programs) do differ significantly on income. This difference can be attributed to counselling, SHLCPTS and receiving both cash transfer/in-kind and counselling.

The conclusion of this research is that supporting trauma relief is cost-beneficial to improve income-resilience. Social protection programmes will result in higher social-economic resilience (SER) if trauma relief is incorporated, among populations with high PTS.

Introduction

This research consists of three phases of which the studies of the first two phases were carried out in Northern Uganda and the third was carried out in Ethiopia. The communities were selected because of their social-economic vulnerability and high Post Traumatic Stress (PTS). In the first phase the effectiveness of existing support programmes (cash transfer/in-kind and counselling) to increase social-economic resilience (SER) was looked at. In this phase 471 women participated. The second phase studied the effectiveness of a new counselling programme, the Self-Help Low-Cost Post-Traumatic Stress programme (SHLCPTS), next to existing support programmes in order to increase SER. The SHLCPTS program consists of three elements: psycho-education (what is PTS and what does it do to a person), self-help exercises (what can a person do when PTS is experienced), and a graduation ceremony (to facilitate reintegration into the community). In this phase 356 women participated. The study for phase three was conducted in Ethiopia in which 103 respondents participated, the outcomes of this study will be discussed briefly in this report.

Approach and results phase one

In the first phase, the following hypothesis were tested:

- Cash transfer/in-kind increases Social and Economic Resilience.
- Counselling increases Social and Economic Resilience.
- Explore whether receiving counselling enhances the effect of cash transfer/in-kind (and vice versa) (an interaction effect between cash transfer/in-kind and counselling).

In this phase it emerged that psycho-social support (counselling) scored higher on SER than social protection (Cash transfer/in-kind increases). Both interventions simultaneously scored the highest. Additionally, both scores had a systematically significant effect on incomes expectations, capability and empowerment.

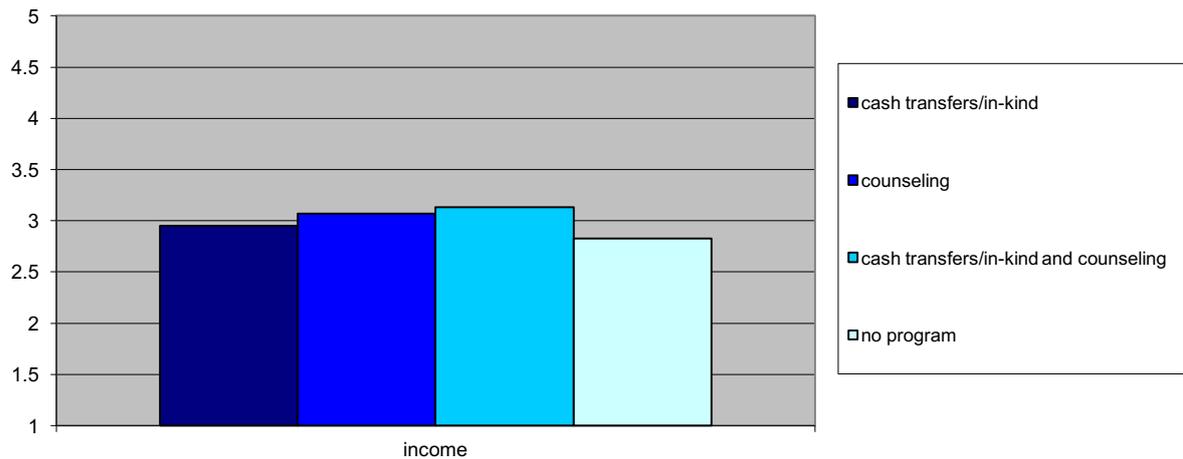


Figure 1: averages of the groups on Capability (phase one, Uganda).

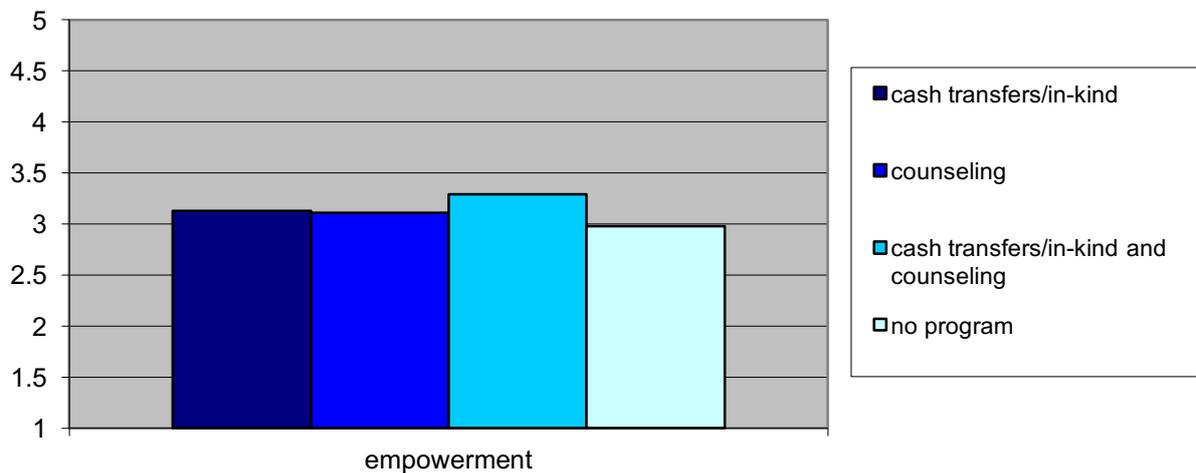


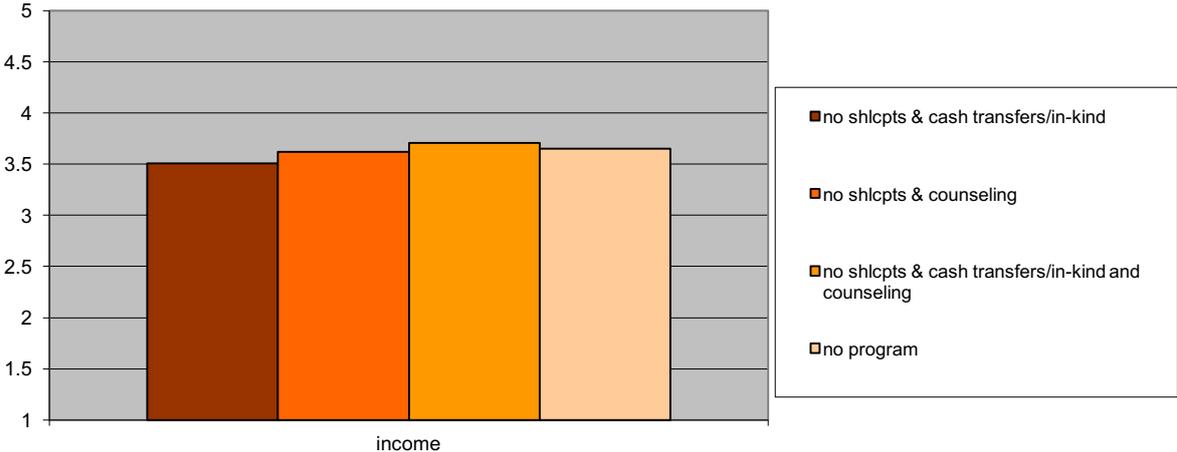
Figure 2: averages of the groups on Empowerment (Phase one, Uganda).

Approach and results phase two and three

In the second phase the SHLCPTS was used, next to existing support programs in order to increase SER. The tested hypotheses were:

- Cash transfer/in-kind increases Social and Economic Resilience.
- Counselling increases Social and Economic Resilience.
- SHLCPTS increases Social and Economic Resilience.
- Explore whether receiving counselling or SHLCPTS enhances the effect of cash transfer/in-kind (and vice versa) - (interaction effects between support programs).

The aim of this phase was to use a less resource-intensive support program for psycho-social support for PTS in order to make the intervention cost-beneficial. The results were significant and showed that those who received both cash transfer/in-kind as well as counselling scored higher on capability. Furthermore, statistical analysis indicated that the eight groups who received different programmes do differ significantly on income. This difference can be attributed to counselling, SHLCPTS and receiving both cash transfer/in-kind and counselling. Those who received counselling have higher expectations about income. Those who received SHLCPTS have lower expectations about income. This might be due to a sampling bias in which the most vulnerable and PTS affected respondents were offered SHLCPTS. Those who received both cash transfers/in-kind and counselling have higher expectations about income. There was also significant difference on empowerment between different groups that received different programmes. Those who received counselling scored higher on empowerment and those who received cash transfers/in-kind but no counselling scored lower on empowerment. The statistical results suggested the SHLCPTS is not effective in increasing SER. However, due to sampling bias, those individuals who are most in need for trauma counseling were allowed to take part in the SHLCPTS program, and those individuals probably perceive a lower SER than those who were not allowed to take part in the SHLCPTS program. This interpretation is supported by the analyses of the qualitative experiences of those who did participate in the program.



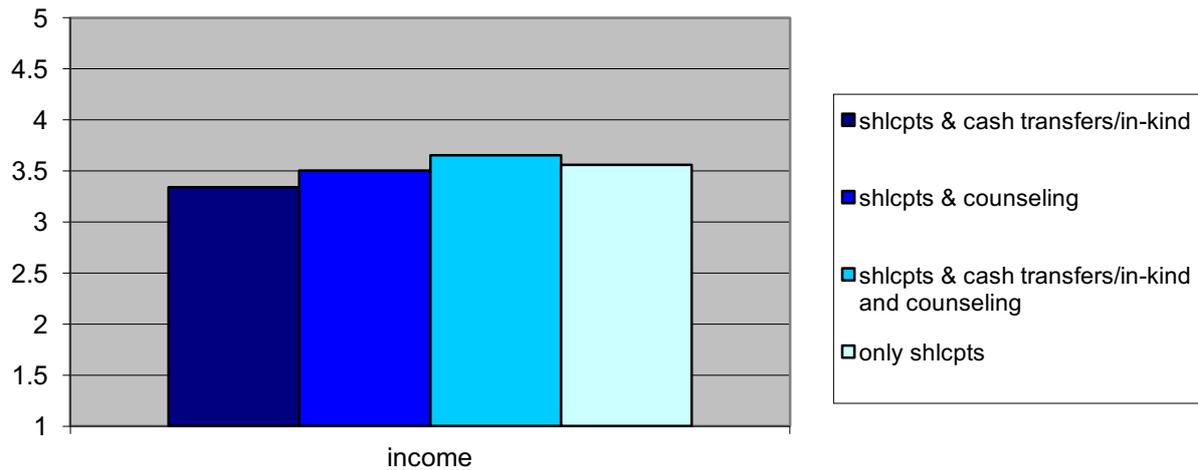


Figure 3: averages of the groups on Income (phase two, Uganda).

To test the effectiveness of the SHLCPTS program in a more controlled situation, a follow up study was conducted. This third study was carried out in a refugee camp in Ethiopia. In this third phase it appeared that SHLCPTS had a high significant impact on SER. It emerged that trauma support is an important addition to support via cash transfer/in-kind and counselling.

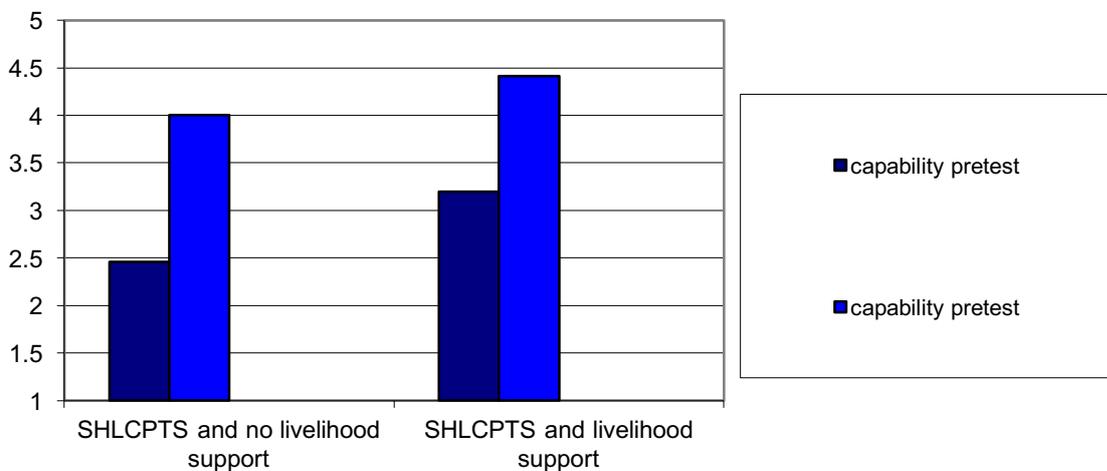


Figure 4: averages of the groups on Capability (phase three, Ethiopia).

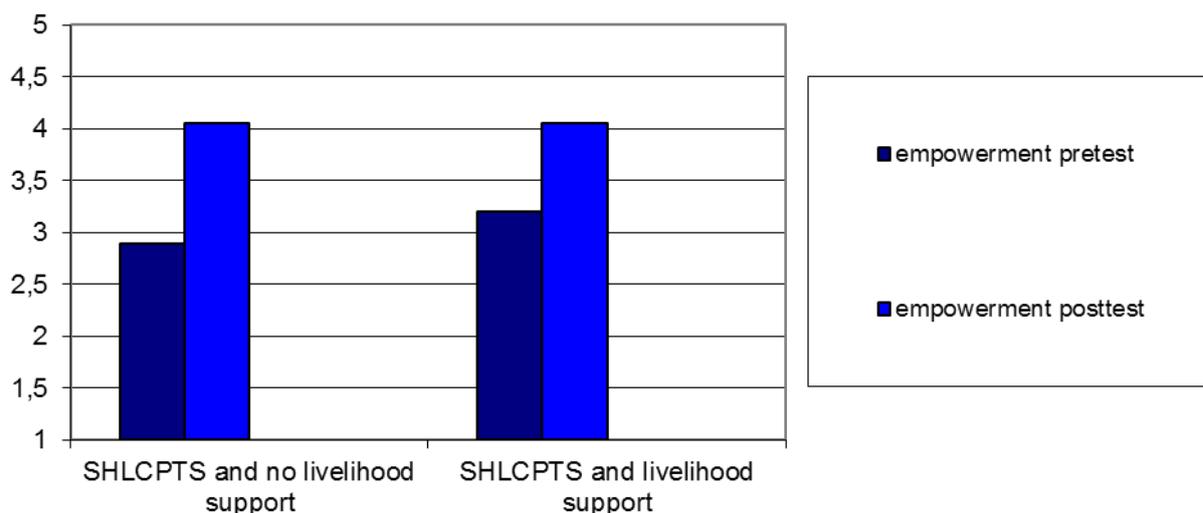


Figure 5: averages of the groups on Empowerment (phase three, Ethiopia).

Implications for policy

These results can strengthen policy on integration and re-integration of returnees and refugees. The results of this research scientifically shows that the addition of PTS relief programmes are a precondition for better effects of social protection and livelihood support.

This leads to the following recommendations:

- Integration of SHLCPTS and other forms of trauma support in social protection and livelihood programmes can strengthen the positive effects on SER;
- More research is necessary for the possibilities to provide such services digitally;
- Strengthening of capacity for professional mental health referrals;
- More emphasis on the positive effects of livelihood programmes is necessary in order to strengthen the positive thoughts regarding integration and reintegration;
- Contribute to avoid the negative influences of PTS on communities with high numbers of severe PTS. This can be achieved by strengthening law and order and minimize criminal organizations (including human traffickers) in order to enhance the feeling of security in the communities.

Conclusions

This study investigates the effects of social protection policies and relief of post-traumatic stress on social economic resilience.

The findings of the studies in the first and second wave and in the two countries showed consistent results of the significant positive effect of trauma relief on SER as a strong

independent variable next to livelihood support. The interviews of the second Uganda study show that those who received the SHLCPTS-program have a very positive opinion about it and perceive a better SER. The Ethiopia study (phase three) indicates that the effect of the SHLCPTS program is large for Capability, Income, and Empowerment.

Traumatized communities need to feel protected and enabled to regain their livelihood as a precondition to dissuade them from taking risky and dangerous routes in search of protection and prospects. The findings point to the conclusion that the reorganization of the provision of both livelihood support and mental health support contributed to a sense of self-efficacy and positively impacted on resilience, specifically on the perceived capability and income security.

Empowerment correlates systematically high with social-economic resilience. This offers an opportunity to organize services in a way that will contribute to refugees feeling both protected and offered prospects to rebuild their livelihoods in the locations where they receive such support. Support for trauma relief critically enhances the positive impact of the livelihood support on SER.

The SHLCPTS program showed very good results on social and economic variables (income, capability and empowerment), and is a low cost but evidently effective program. It has been designed with a view to the possibility of upscaleability in low resource areas and proved as effective as other mental health programs. The ICT based SHLCPTS program performed well in the traumatized community in Northern Uganda and shows the potential of ICT based support to help address PTS while strengthening socio-economic resilience of vulnerable traumatized communities.

Research by: *Reisen, van, M., Stokmans, M., Nakazibwe, P., Kidane, S. (2018)*

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