

Multi-Purpose Cash Transfers and Health among Vulnerable Syrian Refugees in Jordan and Lebanon

The Johns Hopkins School of Public Health (JHSPH), in partnership with the United Nations High Commissioner for Refugees (UNHCR), Medair (Jordan), and the Lebanese American University have planned a research study to evaluate the effectiveness of multipurpose cash transfers (MPCs) provided by UNHCR to vulnerable Syrian refugee households outside of camps in Jordan and Lebanon in increasing access to health. In the absence of a well-designed research that assesses the effectiveness of MPCs on health in refugee settings, this study will examine the effects of MPCs on health-seeking behavior and health service utilization and provide evidence needed to inform use of cash transfer programs in both the current and future humanitarian responses.

Purpose: There have been many claims to cash transfers, particularly that MPCs which are also described as unrestricted transfers, are more efficient and effective than in-kind assistance, improve local economies, and provide more choice and dignity for affected persons. However, there is little to no evidence as to how MPCs affect health in humanitarian crises. Cash transfers are used on a relatively widespread basis in the Syrian refugee response in Jordan and Lebanon by organizations such as the UNHCR, the World Food Programme (WFP), and various non-governmental organizations (NGOs). However, they remain to be sufficiently and rigorously studied, particularly with respect to health, both in the Syria regional response and other humanitarian settings. There is no single well-designed comparative study that assesses the effectiveness of cash transfers on health service utilization, control of disease, or health outcomes in humanitarian settings. Studying how MPCs affect health-seeking behavior, health service utilization, and expenditures will provide invaluable evidence for the future of humanitarian assistance including cash transfer program design, cost effectiveness, sustainability of services, and household level effects.

Research Questions: This research will assess if MPCs provided by UNHCR to vulnerable Syrian refugee households outside of camps in Jordan and Lebanon are an effective means of increasing access to health by comparing health-seeking behavior, health service utilization and expenditures: 1) among vulnerable households with similar characteristics that do and do not receive MPCs; and 2) among households that transition to/from MPCs, which can be studied in Lebanon only.

Study Design and Methods: Vulnerable Syrian refugee households residing in non-camp settings throughout Jordan and Lebanon will be included in the study. Data collected by UNHCR to determine household vulnerability level and eligibility for MPCs will be used to identify and sample households. Households currently receiving MPCs (intervention group) will be compared to other vulnerable households that are not receiving MPCs due to funding shortages (control group).

The research will include data collection at three time points over a one year period via phone interviews using a structured questionnaire. The primary outcomes of focus will be health seeking behavior, health service utilization, and health expenditures. In addition to the primary research question on the impact of MPCs on health in vulnerable households, which will be assessed by comparing the intervention and control group, secondary research questions will focus on the comparison of female vs. male headed households, high vs. normal health expenditure households, and in Lebanon, a pre/post analysis of households that transition to/from receiving MPCs during the study period. In addition to quantitative data collection, a subset of participants will be purposively selected for focus group discussions at the end of the data collection period. Qualitative data will be used to deepen understanding of refugees' experiences, as well as to contextualize and interpret quantitative findings.

