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Aid and violence reduction

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In partnership with
Abstract: Although the provision of security to all their citizens is a state’s fundamental duty, over 50 countries experienced armed conflict in 2021. The international development community has identified armed conflict as an impediment to development and provides considerable resources to reduce armed conflicts. However, other forms of violence, such as suicide, homicide, and assault, are vastly more prevalent and far more widely distributed across countries than armed conflict. For some time, scholars in the field of public health have been arguing for putting self-directed and interpersonal violence higher on domestic and international policy agendas. When analysing the allocation of aid by purpose, it is obvious that donors and recipients have so far neither recognized self-directed nor interpersonal violence as a major development issue. Almost no aid is targeted at suicide prevention and less than one per cent of total official development assistance is targeted at interpersonal violence.

Key words: aid, violence, conflict, interpersonal violence, self-directed violence

JEL classification: O11, O15, O19

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Development economists have argued for some time that armed conflict is a major impediment to development (World Bank 2011), and aid is being targeted at the reduction of armed conflict. In this paper, we address the question of how much aid is spent to reduce armed conflicts and whether this aid is effective in preventing and reducing armed conflicts. In addition to armed conflict, aid recipients experience high rates of interpersonal violence, causing great human and economic costs (Fearon and Hoeffler 2018). There is little evidence that this is regarded as a major development problem. Despite the small literature, we pull together some evidence of how aid could be used to reduce interpersonal violence. Commonly, violence is understood as violence against another, excluding self-harm as a form of violence. The World Health Organization regards self-harm as a form of violence and has documented the resulting burden. We broaden the debate on violence and development by including self-harm and ask whether there is any evidence that aid could be effective in tackling suicide and self-harm. This paper is structured in the following way. Section 2 provides the definitions of the key terms, aid and violence. We categorize violence into self-directed, interpersonal, and collective violence and present some global statistics. In Section 3 we turn to the question of whether aid can reduce violence and summarize the evidence. While the evidence is mixed, there are promising approaches, although some require more research. Section 4 examines the question of how much aid is spent on the prevention of violence. In the absence of a ready-made data set, we present new insights from the AidData3 database, suggesting that relatively little aid is spent on addressing the issue of interpersonal violence, a type of violence that is highly prevalent in many aid-recipient countries. Almost no aid is spent on suicide prevention and mental health. Conclusions are presented in Section 5, including a reflection of what our findings mean for the principles of ownership and results as set out in the Busan Partnership for Effective Development Co-operation.

2 Definitions and data

Before we discuss the violence-reducing effect of aid, we provide definitions and some descriptive data.

2.1 Aid

The term aid is commonly used, but development agencies refer to official development assistance (ODA), and we use the terms interchangeably. The main objective of ODA is the promotion of economic development and welfare, and military aid and anti-terrorism activities are explicitly excluded from development aid. ODA includes the provision of technical assistance, grants, and ‘soft’ loans, i.e. loans with a below-market rate of interest. In order to qualify as ODA, the concessional or the grant element has to make up a minimum percentage of the flows. Until 2017 this was 25 per cent, but from 2018 onwards, the concessional or grant element had to be larger for low income countries. Another recent change is that ODA is reported as a ‘grant equivalent’, i.e. only the concessional elements of ODA are considered, not the face value of the loan, in order to reflect donor effort. ODA can be categorized into bilateral and multilateral aid. The former refers to aid provided from one government to another.
such as Sweden giving aid to Mozambique. The latter is provided through supranational organizations, such as the European Union or the African Development Bank. Since many country governments contribute to these organizations, this type of ODA is referred to as multilateral aid. Over the past years, total net annual ODA was around US$187 billion, of which 71 per cent was bilateral ODA (averages for the years 2019–22). The top bilateral donors are the USA, followed by Germany, Japan, France, and the United Kingdom— their contributions make up 45 per cent of total ODA. The top multilateral donor is the European Union, followed by The International Development Association (IDA), the part of the World Bank that assists the poorest countries. These two multilateral donors account for 20 per cent of total ODA.2

Aid can be allocated to the recipient government as budget aid or to a particular sector or for a particular purpose, such as social infrastructure, economic infrastructure, production, humanitarian assistance, or debt relief. As Figure 1 shows, about 16 per cent of ODA was allocated for humanitarian assistance. Examples of humanitarian aid include the provision of shelter and emergency food aid. Most of the people who are provided with humanitarian assistance are refugees and internally displaced people, and not victims of natural disasters.

Figure 1: Bilateral net ODA by sector for all developing countries, 2020–21 average

Source: author’s illustration using data from OECD - DAC (2023).

2.2 Violence

The field of public health has long highlighted the importance of violence as a health problem. In 1996, the World Health Organization (WHO) called to make violence a public health priority (WHO 1996), followed up by their influential World Report on Violence and Health (WHO 2002). The WHO defines violence as ‘the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in

2 Averages are based on the years 2020 and 2021. The top five bilateral donors share is 44.7 per cent, and the two top multilateral donors share is 19.6 per cent.
injury, death, psychological harm, maldevelopment or deprivation’. This is a relatively broad definition of violence, including suicide and psychological harm and threats of violence as well as actual violence and acts that result in economic deprivation. Based on this broad definition of violence, the WHO produced a number of reports focusing on specific forms of violence, such as against women (WHO 2021), children (WHO 2020b), female genital mutilation/cutting (FGM/C) (WHO 2019), and suicide (WHO 2018). These reports present prevalence estimates and recommendations as to how to prevent, reduce, and treat violence. However, there are neither globally comparable data on violent threats nor on the consequences of violence such as psychological harm, maldevelopment, or deprivation. We agree that these are important harms but want to compare the prevalence of violence across countries and therefore rely on data on the actual use of physical power.

The WHO distinguishes between self-directed, interpersonal, and collective violence. The full definitions are set out in WHO (2002: 6, 185–9). The category 'self-directed violence' consists of suicide, suicidal behaviour (suicidal thoughts and attempted suicide), and self-abuse (acts of self-mutilation without conscious suicidal intention). 'Interpersonal violence' is defined as 'violence inflicted by an individual or a small group of individuals' in contrast to 'collective violence’ defined as ‘violence inflicted by larger groups such as states, organised political groups, militia groups and terrorist organisations ... committed to advance a particular social agenda’. While these definitions are stated in clear language, it is challenging to provide reliable estimates for these categories of violence. We just list some of the numerous challenges. First, it can be difficult to distinguish between small groups of individuals, such as gangs or other criminal organizations, and organized groups with political aims (Lessing 2017, 2021). Second, WHO data are primarily based on national health statistics (vital registration data), with the addition of criminal justice data. However, many countries do not provide either data source. This is a particular problem for sub-Saharan Africa, where 44 countries provide no national data. For these countries, the data are estimated. Third, suicides are illegal in many jurisdictions, and mental health problems are still stigmatized in many societies. This makes it difficult to distinguish suicides from accidental deaths and thus results in underreporting the number of suicides. On the other hand, weaknesses in the criminal justice system enable the misclassification of homicides as suicides, thus underreporting interpersonal violence and overreporting self-directed violence (on measurement issues, see Sanghavi et al. 2009, Prinsloo et al. 2017, and Osafo et al. 2020).

Since fatality data are generally regarded as more reliable than physical and sexual assault data, we focus on the WHO’s deaths by cause from their global health estimates. This is also suggestive of non-fatal violence since fatal and non-fatal violence are highly correlated. Figure 2 shows that per year more people kill themselves (over 700,000) compared to the sum of the two other forms of violence, collective and interpersonal violence (just under 550,000). The lighter shaded areas of Figure 2 denote male victims and the darker area female victims, indicating that violent deaths are much more prevalent for men. Global prevalence rates for deaths due to self-directed violence is 9.1 per 100,000 population, compared to a rate of 6.2 for interpersonal violence and 0.9 for collective violence.

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3 For the WHO definition, see WHO (1996).
4 For a glossary of violence terms, see Rutherford et al. (2007).
Figure 2: Violent deaths by category and sex

Source: author's illustration using data from WHO (2020a).
The prevalence of violence varies greatly across countries. Comparing the different income groups shows that suicide is more prevalent in high income countries (13 per 100,000) and least prevalent in low income countries (6.1 per 100,000). The other forms of violence are more prevalent in low income countries. The prevalence rate of interpersonal violence is 8.6 per 100,000 in low income countries, while it is only 2.4 in high income countries. Collective violence is a much more pressing problem for low income countries—the prevalence rate is 8.1 per 100,000 compared to 0.1 in high income countries.

Given that the lower-middle income and upper-middle income country groups contain not only a large number of countries but also very populous ones (India, China, Indonesia, Pakistan, Brazil, and Bangladesh), it is not surprising that when we consider countries by World Bank income group, both sets of middle income countries have large absolute numbers of fatalities due to violence (see Figure 3). In total, about 473,000 people die due to violence in upper-middle income countries. Of these, very few die in collective violence (1.7 per cent of total violent deaths) while interpersonal deaths make up 48.8 per cent and suicides 49.5 per cent. For lower-middle income countries, the total number of
violent deaths is slightly lower (435,000), but the percentages of the different forms of violence are similar (2 per cent collective violence, 36.2 per cent interpersonal violence, and 61.8 per cent suicide). The situation is very different for low income countries. This group of countries accounts for the vast majority of collective violence worldwide—about 74.6 per cent of all global collective violence deaths. Considering all violence categories, a total of 152,000 people die violently in low income countries, with similar percentages due to the different forms of violence (35.5 per cent collective violence, 37.7 per cent interpersonal violence, and 26.8 per cent suicide). In high income countries, a total of 190,000 people die violently, there are very few deaths due to collective violence (0.7 per cent), and the overwhelming cause of violent death is suicide (84 per cent).

3 Evidence: does aid reduce violence?

Following the WHO categorization of the different types of violence, we first provide an overview of the evidence for the impact of aid on self-directed violence, then interpersonal violence, and lastly collective violence.

3.1 Aid and self-directed violence

According to the WHO, depression is one of the leading causes of disability, and suicide is the fourth-leading cause of death among 15–29-year-olds. While global public mental health is an important and growing area in medical and epidemiological research, it is difficult to detect the development community’s engagement with this pressing health challenge. We could not identify a body of literature on the topic of aid and self-directed violence; therefore, we focus on the WHO efforts. To address the burden of mental health problems, the WHO works with partners in a number of states with the Member States to improve the mental health of individuals and society at large. Efforts include the promotion of mental well-being and increased availability and access to mental health care. For this purpose, the WHO has developed scalable psychological programmes for use in settings affected by adversity, such as post-conflict societies, refugee camps, and those in the aftermath of natural disasters. The most prominent example is the family of interventions under ‘Problem Management Plus (PM+)’, available for individuals or groups with specialized versions for adolescents. The programmes are short, can be delivered by trained peers, and are based on well-tested cognitive behavioural and problem-solving techniques. They do not target a specific mental disorder but are suited to treat the symptoms arising from anxiety, depression, and post-traumatic stress disorder. Emerging evidence suggests that group PM+ is feasible for the treatment of refugees (Acarturk et al. 2022), effective for treating earthquake-affected communities (Jordans et al. 2021), and in post-conflict settings (Hamdani et al. 2020). Many more PM+ research projects are pre-registered, and the evidence base will broaden over the coming years. It is likely that aid will finance much of this ongoing research effort, and it would therefore be of great interest to development economists whether these aid-financed projects can reduce (self-directed) violence.

3.2 Aid and interpersonal violence

Interpersonal violence, which includes homicide and assault, is highly prevalent in low and middle income countries, and while men make up the majority of the homicide victims, much of the non-fatal violence is directed at women and children (Fearon and Hoeffler 2018). While violence reduction is highlighted as an important policy goal by international agencies (e.g., WHO 2014; UNODC 2014; UNICEF 2017; Geneva Declaration 2015; UNODC 2005), there does not seem to be specific literature

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on the impact of aid on interpersonal violence. We therefore focus on violence reduction interventions that are (or could be) financed through aid with the aim to reduce (a) homicide and assault, (b) violence against women, and (c) violence against children.

**Reducing homicide and assault through law enforcement**

Although it is difficult to demonstrate that the number of police *causally* reduces violence, there are now a number of studies using natural and policy experiments to identify a causal link between an increase in law enforcement officers and crime (Di Tella and Schargrodsky 2004; Klick and Tabarrok 2005; Chalfin and McCrary 2017; Draca et al. 2011). Table 1 compares law enforcement across countries. Low and lower-middle income countries have a much lower average number of armed force personnel, police officers, and judges per 100,000 population. The comparison across the income spectrum shows that in high income countries there are on average 694 armed force personnel per 100,000 population compared to only 523 in low income countries. For police forces, there are 421 police officers for 100,000 population in high income countries while there are only 81 in low income countries. Thus, low income countries maintain relatively large armies in comparison to their police forces. Their armies are only 25 per cent smaller than those in high income countries, but their police forces are 81 percent smaller. Thus, low income countries appear to undersupply security through police in the international comparison. However, upper-middle income and high income countries look very similar with respect to the armed forces and police, although high income countries have a considerably higher number of judges (20 per 100,000) than any other region.

Table 1: Security and justice personnel by income group

<table>
<thead>
<tr>
<th>Income category</th>
<th>Armed forces</th>
<th>Police</th>
<th>Judges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low income</td>
<td>523</td>
<td>81</td>
<td>3</td>
</tr>
<tr>
<td>Lower-middle income</td>
<td>457</td>
<td>225</td>
<td>8</td>
</tr>
<tr>
<td>Upper-middle income</td>
<td>644</td>
<td>424</td>
<td>13</td>
</tr>
<tr>
<td>High income</td>
<td>694</td>
<td>421</td>
<td>20</td>
</tr>
</tbody>
</table>

Note: armed forces, police, and judges per 100,000 population. Income category according to the World Bank classification. Source: author’s compilation based on data from World Development Indicators (WDI) for armed forces (2000–18) and UNODC for police and judges (2003–18).

Given the low prevalence of interpersonal violence and the high number of law enforcement officers, increasing police numbers appears an important instrument in reducing homicide and assault. However, police forces have to be well trained and resourced. In many countries, this is currently not the case. Take the example of India, where there are just 135 police officers per 100,000 population. Officers work long shifts, and the vast majority (about 85 per cent) have received no specific training in criminal investigation or crime fighting skills (Gupte 2015).

Another important aspect in improving policing is to increase trust in the police. In many societies the police are not regarded as the solution but part of the problem. Citizens perceive them as incompetent, corrupt, and brutal. According to representative surveys, almost one-quarter of all African respondents trusted their police ’not at all’, and on average 17.5 per cent in each country said that ’all’ police were corrupt (Afrobarometer 2020). The numbers for Latin America are comparable (Latinobarómetro 2020). Perceptions of incompetence, corruption, and abuse of power prevent victims from coming forward, making it more difficult to apprehend the perpetrators. Impunity is a characteristic of societies with high levels of violence, and conviction rates (for homicides) vary widely across societies (UNODC 2019, booklet 2).

Can trust in the police be improved? Evidence from the Indian state of Rajasthan suggests that police were more likely to register a crime after additional training of three to six days to improve scientific
techniques and soft skills. The intervention also included random checks of police stations. Public satisfaction increased; however, a reduction in crime was not observed. It may be that these interventions have to be implemented at scale and that citizens need more time to experience the improvement in public service (Banerjee et al. 2021).

A number of countries apply a strategy of community policing where the focus is on the police developing relationships with community members in order to collaboratively identify and solve problems (Brogden and Nijhar 2013). Thus, community policing builds trust between the police and the community. There are recent efforts to adapt this strategy to settings outside high income countries. One example is the establishment of a new community police force in Kakuma refugee camp in Kenya. However, the community police officers could not establish a trusting relationship with the refugee population due to the interference of the regular Kenyan police force (Brankamp 2020). A much larger trial of community policing in six low and middle income countries (Brazil, Columbia, Liberia, Uganda, Pakistan, and the Philippines) also failed to increase citizens’ trust. The reasons for this outcome vary across the six different sites, but commitment, adherence to the programme, and lack of resources were identified as obstacles (Blair et al. 2021). Citizens complained that the police were unwilling or unable (due to the legal situation) to police domestic violence. These attempts at implementing community policing suggest that, without other supporting reforms, community policing is unlikely to succeed.

Historically, the police have been repressive in many low income countries. Policing was used to protect the political elite rather than provide security to the public. Police forces also tend to be highly centralized, making it difficult for the population in the periphery to hold police officers accountable (for analyses of policing in Africa, see Francis 2012). This suggests that police reforms can only have a major impact if they are embedded in a set of larger political reforms, aiming to strengthen democratic processes as well as providing a reform of the security services that are linked into reforms of the courts and penal system. The implementation of such major reform programmes is challenging, but there tends to be a window of opportunity in post-conflict societies. In post-conflict Sierra Leone and Liberia, security sector plus justice reforms were implemented. However, the emphasis was on the reform of the armed forces while the police reforms were more modest, still leaving the police under-resourced and unable to provide effective policing to the local populations. Officers often have no fuel and have to use their private vehicles when on duty, and there is a shortage of fingerprint kits, forensic experts, and laboratories, pathologists, and ballistic experts (Bekoe 2012; Kabia 2012).

Violence against women

Evidence from victimization surveys indicates that women are at very high risk of experiencing violence. Former and current intimate partners (boyfriends, husbands) are the main perpetrators. Globally, 26 per cent of ever-partnered women have experienced physical and/or sexual violence from their intimate partner, and six per cent of women over 15 years old report being sexually assaulted by a non-partner during their lifetime (WHO 2020b). While this form of violence occurs in every society, violence against women is more prevalent in low income countries (Devries et al. 2013; Hoeffler 2017; WHO 2021).

There are numerous programmes that empower women economically. Many micro-finance programmes and government cash-transfer programmes target women. Systematic reviews suggest that most women’s economic empowerment programmes are associated with a significant reduction in intimate partner violence (Klugman et al. 2014; Buller et al. 2018; Eggers Del Campo and Steinert 2020).

There are also legal changes that have reduced violence against women and girls, such as making rape within marriage an offense, outlawing FGM/C (Engelsma et al. 2020), and increasing the minimum age at marriage (Garcia-Hombrados 2022). However, these are not changes that can be obtained through aid; de jure and de facto change can only be achieved when the gap between customary practices and
formal law is small and can be bridged (Platteau and Wahhaj 2014; Acemoglu and Jackson 2017; Auriol et al. 2018).

Many men, as well as women, have internalized that violence is a normal part of a woman’s life and that a husband is justified to hit his wife or demand sex (e.g., Cools and Kotsadam 2017). A number of interventions aim to change these attitudes. Examples include the community mobilization intervention SASA!, where activists worked within Ugandan communities to raise awareness of the causes and consequences of violence against women in the home. SASA! successfully promoted the view that violence against a partner is unacceptable, and rates of intimate partner violence decreased (Abramsky et al. 2014, 2016). Messages to challenge traditional attitudes towards women can also be embedded in popular entertainment programmes, referred to as ‘edutainment’ in the development literature. In South Africa, the television series ‘Soul City’ featured an emotionally and physically abusive husband, and the series is believed to have significantly changed South African’s attitude towards domestic violence and is credited with accelerating the implementation of the Domestic Violence Act in South Africa in 1998 (Usdin et al. 2000). However, a randomized controlled experiment (RCT) in Nigeria failed to establish a link between watching an episode of the MTV series ‘Shuga 3’ (which included a story line of intimate partner violence) and changing attitudes (Banerjee et al. 2019). Thus, although edutainment appears to provide a good medium to raise awareness of violence against women, so far the evidence is weak, and it is often unclear how much of the change in attitudes can be attributed to edutainment. Aid organizations sponsoring edutainment may also be faced with accusations of ‘social engineering’ or ‘neo-imperialism’.

Violence against children

Parental violence is the most frequent form of violence against children, mostly taking the form of physical punishment (UNICEF 2014; Pinheiro 2006). Many parents do not regard physical punishment as harmful but as a normal part of raising a child. For example, the African Charter on the Rights and Welfare of the Child (1990) allows for ‘domestic discipline’ as long as it is ‘consistent with the inherent dignity of the child’ (Article 20 (1c)). Notwithstanding different attitudes towards physical discipline, there is overwhelming evidence that it does not only cause immediate pain and suffering, but that it has a number of adverse long-term consequences for the individual due to a disruption of social and psychological learning processes and physiological changes in brain development (see Heilmann et al. 2021; End Corporal Punishment 2021; Sara and Lappin 2017; Webb et al. 2017; Scheidell et al. 2018; Danese and Baldwin 2017; Nemeroff 2004; Straus et al. 2013). Parents who use harsh parenting methods often have unrealistic expectations of children’s developmental capabilities and lack the skills to bring up their children without the use of violence. Parenting programmes have shown to be effective in reducing physical punishment (Sanders et al. 2014; Backhaus et al. 2023) and to be one of the most effective interventions to reduce anti-social behaviour and delinquency (Farrington et al. 2022).

In addition to violence in their home, children experience a lot of violence at school. Although physical punishment is banned in 136 states, it continues to be a widespread practice in settings with and without legal bans (Heekes et al. 2022). There is now some emerging evidence that teacher training courses aiming to reduce harsh disciplining methods in schools are effective (see Nkuba et al. 2018; Kaltenbach et al. 2018; Devries et al. 2017).

3.3 Aid and collective violence

Unlike the sparse literature on aid and interpersonal violence, the literature on the impact of aid on collective violence is very large. However, the evidence of a conflict-reducing and peace-enhancing
effect of aid is mixed. We only briefly summarize the main findings and refer to the in-depth overviews by Findley (2018) and Zürcher (2017). There are many different mechanisms through which aid can impact collective violence, as there can be direct as well as indirect effects of aid on collective violence. Timing is an important consideration, and prevention or conflict initiation, reduction in conflict intensity, ending conflicts, and stabilizing post-conflict situations should be distinguished. Finally, the aid delivery mode may be important, i.e. whether funds are provided to the recipient government or whether they are bypassed and the aid is delivered through non-state actors. We discuss these mechanisms in turn.

Aid can have direct effects on armed conflict by increasing the government’s budget. Assuming that aid is fungible, some of the budget increase can be used to increase military expenditure (Collier and Hoeffler 2006) in order to deter collective violence or to suppress it. Alternatively, aid could be used to ‘buy off’ potential rebel groups by spending it on addressing their grievances (Azam and Mesnard 2003). Fungibility and spending on the opposition would result in less violent conflict, but there is no evidence of a direct effect of development aid on the reduction of collective violence. It has been hypothesized that specific types of aid could be directly conflict-enhancing because rebel groups could misappropriate it to strengthen their military capability. Food aid has been identified as a significant determinant in extending civil wars (Nunn and Qian 2014), but more recently, food aid makes up just over one per cent of total aid (DAC, average 2019–22) and is therefore unlikely to have a large impact on the risk and duration of conflict in general.

Although there is no evidence that aid in general affects collective violence, aid may have an indirect impact via growth and poverty reduction. Low income and growth have been identified as important drivers of armed conflict (Collier and Hoeffler 2004b; Fearon and Laitin 2003; Hegre et al. 2001; Miguel et al. 2004), but the vast literature on aid and growth suggests that there is no evidence of a robust growth-enhancing effect of aid (Rajan and Subramanian 2008). A reason why aid is not growth enhancing is that many aid recipients are fragile states and thus most in need of additional resources but least capable of making good use of them (Bauer 1976). Furthermore, much of development aid is not directly growth enhancing, or at least not in the short run (e.g., aid for education, health, and emergency relief). A notable exception in the aid and growth literature is post-conflict countries. Here, aid can enhance the peace dividend that typically arises at the end of the conflict, i.e. aid increases post-conflict growth (Collier and Hoeffler 2004a).

There are a considerable number of studies analysing whether different modes of aid delivery are not only poverty reducing but can also improve local governance and thus support the peace process. Community-driven development (CDD) programmes aim to do just that and have been implemented in many countries, e.g., Liberia, the DRC, the Philippines, and Afghanistan. The evaluation of CDDs provides a mixed picture, although they can improve inclusion and participation at the local level, and they have little impact on institutional capacity at the state level (Justino 2019; King and Samii 2014). Another popular mode of aid delivery is through cash transfer programmes. Aid is paid directly to poor individuals, either unconditionally or on certain conditions, e.g., their children attending school and health programmes. While some cash transfer programmes have a conflict-reducing effect, others have a destabilizing effect by encouraging predatory behaviour from outside groups (Crost et al. 2016; Blattman et al. 2014; Blattman et al. 2017).

4 How much aid is targeted at violence prevention and reduction?

Moving on from the review of the existing knowledge on aid and violence reduction, we want to find out how much of the total development aid is actually spent on preventing, reducing, and treating violence.  

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8 Seminal contributions in this literature are Burnside and Dollar (2000), Clemens et al. (2012), and Dalgaard et al. (2004).
Unfortunately, there are no ready-made statistics on how much aid is provided for this purpose. In order to answer this question, we sift through the information supplied by the data bank AidData3. We use this data source because it comprehensively covers development aid and provides information on aid projects and activities from over 90 multilateral and bilateral donors. This level of detailed information is not available from the OECD aid database. The advantage of the AidData3 data source is that it is the most comprehensive, but the disadvantage is that the most recent year covered is 2013.

A report by the AidData Lab examines how much aid is spent on each SDG, suggesting that during 2000–13, the highest spending category is aid for SDG 16 at about US$342.5 billion (Sethi et al. 2017). This is conceptually very close to our quest to find out how much aid is targeted at the prevention, reduction, and treatment of violence because SDG 16 aims to ‘Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels’. However, this includes many aid projects aimed at improving institutions. They make up almost 60 per cent of the SDG16 projects (Sethi et al. 2017: 29). This includes not only the building of institutions intended to reduce violence, such as security and legal reforms, but also healthcare and educational reforms. Thus, aid aimed at achieving SDG 16 is not equivalent to reducing violence; it also does not allow us to distinguish between aid targeted at the different categories of violence.

We therefore conduct our own analysis of the AidData3 database to find out how much aid is targeted at violence reduction. AidData3 has over 1.5 million entries, and our data analysis proceeds in three steps:

1. We bundle all of the data entries into 16 large spending categories (Table 2).
2. We examine one of the categories, ‘Government and Social Infrastructure’, in more detail and derive an estimate of aid spent on the reduction of interpersonal violence (Table 3).
3. Building on steps 1 and 2, we construct an estimate of aid spent on the reduction of collective violence (Table 4).

**Step 1: categorizing all aid projects**

Every entry in the database has a project title, a description, and a purpose code. Based on this code, we divide all of the entries in the database into 16 large spending categories, as shown in Table 2. These categories range from big spending categories on infrastructure to small categories, such as food aid. One of the categories that is clearly targeted towards dealing with the consequences of armed conflict is ‘Emergency’ aid, which covers aid for humanitarian assistance after man-made and natural disasters (the former cause is much more prevalent). The five columns of Table 2 show how the shares in aid spending have changed over the past 25 years. Over time, proportionally more aid has been used to address the problems generated by armed conflicts, even though the number of armed conflicts and conflict deaths declined (Pettersson et al. 2019).

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9 For more information on AidData3, see Tierney et al. (2011). Our calculations of aid spending on violence reduction were developed for Hoeffler and Fearon (2023).

10 AidData3 reports three different purpose codes, an AidData code, the five-digit Creditor Reporting System (CRS) code of the Development Assistance Committee (DAC) of the OECD, and a coalesced code. We use the coalesced code since almost all of the data entries have this code. The AidData code is missing for almost 40 per cent of the entries (Tierney et al. 2011).
From this first categorization of aid, it is not obvious which other types of aid are targeted towards violence reduction. The largest categories of aid are ‘Infrastructure’ and ‘Budget & Debt’. These relate to physical infrastructure, budgetary support, and debt relief, which are not violence related.11

Our category ‘Government and Social Infrastructure’ is a combination of projects from sectors ‘Government & Civil Society, general’, ‘Conflict prevention and resolution, peace, and security’, and ‘Other Social Infrastructure & Services’.12 In Table 2, we abbreviate it as ‘Govt. & Social’. This combined category is most likely to contain activities to address violence-related issues. Note that this category has increased considerably over the past 25 years.

Table 2: Development aid by sector (%), 1990–2013

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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Infrastructure</td>
<td>25.36</td>
<td>21.10</td>
<td>16.16</td>
<td>17.42</td>
<td>18.39</td>
</tr>
<tr>
<td>Govt. and social</td>
<td>3.96</td>
<td>7.01</td>
<td>9.65</td>
<td>13.20</td>
<td>13.97</td>
</tr>
<tr>
<td>Budget and debt</td>
<td>19.00</td>
<td>25.62</td>
<td>28.71</td>
<td>17.86</td>
<td>12.38</td>
</tr>
<tr>
<td>Health</td>
<td>3.03</td>
<td>3.45</td>
<td>4.47</td>
<td>7.51</td>
<td>9.04</td>
</tr>
<tr>
<td>Business and trade</td>
<td>9.76</td>
<td>9.40</td>
<td>9.66</td>
<td>7.45</td>
<td>7.55</td>
</tr>
<tr>
<td>Emergency</td>
<td>1.78</td>
<td>3.50</td>
<td>4.50</td>
<td>5.60</td>
<td>6.26</td>
</tr>
<tr>
<td>Education</td>
<td>4.34</td>
<td>3.81</td>
<td>4.69</td>
<td>5.27</td>
<td>5.84</td>
</tr>
<tr>
<td>Multisector</td>
<td>6.30</td>
<td>5.24</td>
<td>5.45</td>
<td>5.80</td>
<td>5.49</td>
</tr>
<tr>
<td>Water and sanitation</td>
<td>4.84</td>
<td>4.18</td>
<td>3.79</td>
<td>4.60</td>
<td>5.04</td>
</tr>
<tr>
<td>Agriculture</td>
<td>8.03</td>
<td>4.47</td>
<td>3.02</td>
<td>3.40</td>
<td>4.44</td>
</tr>
<tr>
<td>NGOs</td>
<td>0.09</td>
<td>0.73</td>
<td>2.60</td>
<td>3.77</td>
<td>4.25</td>
</tr>
<tr>
<td>Environment</td>
<td>1.61</td>
<td>1.70</td>
<td>1.42</td>
<td>2.35</td>
<td>2.80</td>
</tr>
<tr>
<td>Unclassified</td>
<td>0.66</td>
<td>1.09</td>
<td>1.32</td>
<td>2.13</td>
<td>1.98</td>
</tr>
<tr>
<td>Industry</td>
<td>10.28</td>
<td>7.63</td>
<td>3.45</td>
<td>2.83</td>
<td>1.92</td>
</tr>
<tr>
<td>Food</td>
<td>0.87</td>
<td>0.98</td>
<td>1.08</td>
<td>0.76</td>
<td>0.61</td>
</tr>
<tr>
<td>Women</td>
<td>0.07</td>
<td>0.10</td>
<td>0.04</td>
<td>0.04</td>
<td>0.03</td>
</tr>
<tr>
<td>Total aid (billions US$)</td>
<td>727</td>
<td>984</td>
<td>1,173</td>
<td>1,204</td>
<td>969</td>
</tr>
</tbody>
</table>

Note: ‘unclassified’ refers to projects with missing sector information.
Source: author’s calculations based on AidData3.

While we are confident that most of the emergency aid is spent on problems resulting from collective violence, it is not so obvious how much of ‘Government and Social Infrastructure’ aid is targeted at violence-related problems. We therefore take a closer look at this category.

Step 2: examining aid for ‘Government and Social Infrastructure’

Aid in the category ‘Government and Social Infrastructure’ is spent to meet social and welfare needs that may or may not be the result of violence. We therefore examine all of the subcategories of ‘Government and Social Infrastructure’ more closely in Table 3. Out of these sub-categories, only a small number is directly aimed at violence. One obvious subcategory is aid for ‘conflict prevention and resolution, peace, and security’, and we refer to this aid as ‘Conflict/Post-Conflict’. Out of the total aid for ‘Government and Social Infrastructure’, almost eight per cent is spent on problems arising from conflict and post-conflict.

11 This is a rather strong statement. Aid for infrastructure may include some aid for reconstruction after armed conflict. Likewise, governments may use budget support programmes for activities aimed at violence reduction, but we have no further information on which aid project was a post-conflict reconstruction project. Debt relief is also granted to many post-conflict countries.
12 OECD DAC 5 Sectors 151, 152, and 160, respectively.
Another sub-category that is likely to be aimed at violence-related issues is ‘Security System Reform’. However, here it is more difficult to tell which type of violence this aid is targeting. While there are many post-conflict reforms, which we would count as spending on collective violence, it also includes police reform in peaceful countries, in which case it would be spending that we would count as spending on interpersonal violence. Another sub-category that is very likely to contain aid for violence reduction is ‘Legal and Judicial Development’ because it includes support to institutions, systems, and procedures of the justice sector, such as the police, the judicial system, and prisons. Other sub-categories that potentially address interpersonal violence are: ‘Human rights’, ‘Media’, ‘Elections’, and support for ‘Women’s equality organizations’.

So how much aid is targeted at the problem of interpersonal violence? In order to identify the aid spent on the reduction of interpersonal violence, we went through all 275,670 aid projects in the category ‘Government and Social Infrastructure’ for the years 2000–13. We searched the titles and short descriptions for keywords including the relevant stems of ‘violence’, ‘police’, ‘crime’, and a number of other pertinent keywords (in different languages). Table 3, column 1 lists the US dollar amounts spent on all the projects within the sub-categories. Column 4 lists the US dollar amounts spent on projects that were picked up in our keyword search, i.e. we identify these as projects aimed at reducing interpersonal violence. Column 6 provides the proportion of ‘Government and Social Infrastructure’ aid spent on these violence-reducing projects. As a result of this exercise, we find that the total amount of aid spent on problems associated with interpersonal violence during the period 2000–13 was about US$11.7 billion, or around 2.9 per cent of aid for ‘Government and Social Infrastructure’, as reported in the bottom right-hand corner of Table 3. Figure 4 provides an overview of the process of calculating the amount of aid targeted at interpersonal violence.

How does this compare to the amount spent on reducing collective violence? The last step of our data inquiry provides an answer to this question.
Table 3: Aid for the prevention, reduction, and treatment of interpersonal violence in the government and social infrastructure category, 2000–13

<table>
<thead>
<tr>
<th>Sector</th>
<th>Total ($)</th>
<th>Other ($)</th>
<th>Other (%)</th>
<th>Interpersonal ($)</th>
<th>Inter-personal/other</th>
<th>Interpersonal of total in category (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social/welfare services</td>
<td>102,458</td>
<td>101,848</td>
<td>25.72</td>
<td>610</td>
<td>0.60</td>
<td>0.60</td>
</tr>
<tr>
<td>Dev. policy/planning</td>
<td>80,162</td>
<td>77,852</td>
<td>19.66</td>
<td>2,309</td>
<td>2.97</td>
<td>2.88</td>
</tr>
<tr>
<td>Govt. &amp; social</td>
<td>73,605</td>
<td>72,835</td>
<td>18.39</td>
<td>770</td>
<td>1.06</td>
<td>1.05</td>
</tr>
<tr>
<td>Govt. administration</td>
<td>57,777</td>
<td>57,663</td>
<td>14.56</td>
<td>115</td>
<td>0.20</td>
<td>0.20</td>
</tr>
<tr>
<td>Legal &amp; judicial dev.</td>
<td>33,664</td>
<td>26,661</td>
<td>7.84</td>
<td>7,002</td>
<td>26.26</td>
<td>20.80</td>
</tr>
<tr>
<td>Conflict/post-conflict</td>
<td>31,059</td>
<td>31,059</td>
<td>7.84</td>
<td>0</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Housing policy</td>
<td>10,293</td>
<td>10,015</td>
<td>2.53</td>
<td>38</td>
<td>0.38</td>
<td>0.38</td>
</tr>
<tr>
<td>Employment policy</td>
<td>10,293</td>
<td>10,015</td>
<td>2.53</td>
<td>38</td>
<td>0.38</td>
<td>0.38</td>
</tr>
<tr>
<td>Security system reform</td>
<td>8,570</td>
<td>7735</td>
<td>1.95</td>
<td>835</td>
<td>10.80</td>
<td>9.75</td>
</tr>
<tr>
<td>Human rights</td>
<td>15</td>
<td>15</td>
<td>0.00</td>
<td>0</td>
<td>0.07</td>
<td>0.07</td>
</tr>
<tr>
<td>Media</td>
<td>2</td>
<td>2</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Elections</td>
<td>2</td>
<td>2</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Women's equality orgs.</td>
<td>1</td>
<td>1</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Totals</td>
<td>407,660</td>
<td>395,980</td>
<td>100.00</td>
<td>11,680</td>
<td>2.95</td>
<td>2.87</td>
</tr>
</tbody>
</table>

Note: $ are constant US dollars in millions.
Source: author’s calculations based on AidData3.
Step 3: summarizing aid for the reduction of collective violence

We now turn to summarizing the amount of aid spent on the prevention, reduction, and treatment of collective violence. In step 1, we identified ‘Emergency’ aid (US$181 billion) and in step 2 ‘Conflict/Post-Conflict’ aid (US$31 billion) and parts of ‘Security System Reform’ (US$7.7 billion). In Table 4, we list all of the aid that is aimed at the reduction of collective violence, adding up to a total of about US$217 billion, and Figure 5 provides an overview of the process of calculating the amount of aid targeted at collective violence.

Table 4: Aid for the prevention, reduction, and treatment of collective violence, 2000–13

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Activity</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency</td>
<td></td>
<td>180,848</td>
</tr>
<tr>
<td>Conflict/post-conflict</td>
<td>Civilian peace-building, conflict prev. &amp; resol.</td>
<td>14,220</td>
</tr>
<tr>
<td>Conflict/post-conflict</td>
<td>Post-conflict peace-building (UN)</td>
<td>4,739</td>
</tr>
<tr>
<td>Conflict/post-conflict</td>
<td>Reintegration and SALW control</td>
<td>4,412</td>
</tr>
<tr>
<td>Conflict/post-conflict</td>
<td>Land mine clearance</td>
<td>4,865</td>
</tr>
<tr>
<td>Conflict/post-conflict</td>
<td>Child soldiers (prevention and demobilization)</td>
<td>202</td>
</tr>
<tr>
<td>Security sys. reform</td>
<td></td>
<td>7,735</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>217,021</td>
</tr>
</tbody>
</table>

Note: $ are constant US dollars in millions. SALW stands for small arms and light weapons.
Source: author's calculations based on AidData3.

Our calculations show that the approximate US$217 billion of aid spent on collective violence dwarf the US$11.7 billion spent on interpersonal violence. In other words, the international community spends about 19 times more aid on collective than interpersonal violence. This is despite the fact that interpersonal violence is more prevalent and is associated with much higher costs.

Figure 4: Aid for violence reduction: highlighting interpersonal violence
Given these large differences between aid spending on collective and interpersonal violence, we are asking ourselves whether we are calculating these numbers in the correct way. Perhaps there are some computational or conceptual mistakes in our calculations? In order to assess the magnitude of our numbers, we consider whether we are missing important aid projects—those that are not intended to reduce violence directly but are likely to have an indirect effect on violence.

As discussed above, development aid aimed at reducing collective violence is relatively straightforward to identify. It includes aid for emergency situations, conflict resolution and prevention, and security system reform. However, it is much more difficult to trace aid intended to reduce interpersonal violence. We were very careful when we searched the database, but we are likely to have missed projects aimed at reducing violence. Take the sub-category labelled ‘Narcotics Control’. Drugs that can cause serious addiction problems are tightly controlled and referred to as ‘narcotics’. The main aim of these narcotics controls is the improvement of public health, but the illegal trade in narcotics fuels violence, and therefore, a reduction in this trade would also have positive effects on violence reduction. How much aid is spent on narcotics control? Unfortunately, the sub-category of ‘Narcotics Control’ contained no entries. Instead, we searched for keywords such as ‘drugs’, ‘narcotics’, and related keywords and found that about US$23.7 billion are associated with these projects. However, in the absence of further information on these projects, we were unable to decide how much of the narcotics control could reasonably be counted as violence reducing. If we assumed that all of this aid for narcotics control is violence reducing, the proportion of aid in the category ‘Government and Social Infrastructure’ spent on the reduction of interpersonal violence would increase from 2.9 to 8.7 per cent (or to 1.1 per cent of total aid).

To summarize, we suggest that international agencies spend about US$217 billion on the reduction of collective violence—about 6.6 per cent of total development aid. These numbers demonstrate that aid agencies consider armed conflict to be a development concern. However, very little aid is provided with the explicit aim of reducing interpersonal violence. No exact figures exist, and, as we discussed above, it is somewhat a matter of definition of what should be included in violence-reduction aid. We suggest that only about US$11.7 billion, equivalent to 0.3 per cent of total development aid, is spent on the treatment and reduction of interpersonal violence. As discussed in Section 2, interpersonal violence is

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13 Confusingly, the classification ‘narcotics’ also refers to stimulants. These narcotics are either derived from natural products (e.g., cocaine, heroin) or through a synthetic process (e.g., methadone, pethidine). The trade in these drugs is controlled in order to improve the ‘health and welfare of mankind’ (UN Single Convention on Narcotic Drugs 1961).
highly prevalent in low income countries, but given the small allocation of aid targeted at the reduction of interpersonal violence, it appears that the international aid agencies do not perceive interpersonal violence as a pressing challenge to societal development. Unfortunately, we only have detailed AidData3 project data for the period 2000–13. Perhaps the focus has changed since 2013? We can only speculate here. Examining the OECD database by ODA sectoral categories shows that the allocation by main categories is not markedly different, with the exception of budget aid and debt relief (down by about 16 percentage points) and emergency aid (up by about eight percentage points). However, the main category of interest, 'Government and Social Infrastructure', changed only slightly (up by four percentage points). Thus, nothing in these more recent aid statistics points towards a dramatic shift of an increased use of aid for the prevention and treatment of interpersonal violence. In this section, we focused on aid targeted at collective and interpersonal violence. However, we also conducted a similar search exercise for projects aimed at the reduction of suicide and self-harm and more broadly projects to address mental health issues. We only found very few projects for suicide and self-harm (11 projects) and some projects aimed at the improvement of mental health (1,274). Taken together, aid spent on suicide/self-harm and mental health only amount to 0.006 per cent of total aid.

5 Discussion and conclusion

We provide a novel investigation of how much aid is spent on violence reduction. Our analysis suggests that, while 6.6 per cent of total aid is targeted at collective violence, less than one per cent is targeted at interpersonal violence and almost none at self-directed violence. Although our estimations come with some caveats, the big gap between the percentage of aid spent on collective versus interpersonal and self-directed violence suggests that donors have identified collective violence as a major development concern, while interpersonal and self-directed violence does not have the same status. This supports previous advocacy work by Mikton (2008). Based on our findings, the international community should reconsider the allocation of aid, in particular because low and middle income countries have high prevalence rates of interpersonal violence. Furthermore, suicide is an enormous global public health problem. Although well documented by health experts and international organisations, this has so far not been recognized by donors.

We discuss the evidence on whether aid is effective in reducing violence. There is large and active literature on aid and collective violence; however, the evidence on the impact of aid on armed conflict is mixed and depends on a number of different conditions (Zürcher 2017; Findley 2018). In contrast, our review demonstrates that there is hardly any literature on the impact of aid on interpersonal violence. In a sense this is not surprising, given how little aid is spent on the reduction of interpersonal violence. Either donors do not seem to perceive this type of violence as important, or they assume that aid cannot be effectively used to reduce interpersonal violence. Given that there is so little discussion, it is not feasible for us to decide why such a small amount of aid is spent on interpersonal violence prevention. For high income countries, there is large literature on the prevention, reduction, and treatment of interpersonal violence, but there is emerging evidence from low and middle income countries. However, this emerging literature has so far not examined whether aid is effective in reducing interpersonal violence. There is no a priori reason to assume that aid-financed interventions targeted at violence prevention, reduction, and treatment are less efficient than national spending. But so far there is little evidence, and this would make an interesting area of future research.

Another underresearched area is the connection between different forms of violence. Collective violence impacts interpersonal violence (Stojetz and Brück 2023; Saile et al. 2014), and both types of violence increase self-directed violence. More knowledge on these links would help to leverage synergy effects from violence-reduction interventions and potentially help to persuade donors to address the so-far-neglected forms of interpersonal and self-directed violence.
The main contribution of this section is to highlight that donors spend little aid on interpersonal and self-directed violence, despite the overwhelming need. The focus has been very much on what donors do, but what is the role of recipients within the aid-effectiveness principles? Building on a series of agreements in Rome (2003), Paris (2005), and Accra (2008), the Busan Partnership for Effective Development Cooperation was set out in 2011. This partnership was endorsed by 161 country governments as well as heads of multilateral institutions and many other stakeholders. The four main principles are: (1) country ownership, (2) focus on results, (3) inclusive partnerships, and (4) transparency and accountability. Progress towards achieving these principles is monitored and documented in reports by the OECD and the UNDP (OECD/UNDP 2014, 2016, 2019).

We offer a brief reflection on the principles of ownership and results. That security is a key condition for development and is widely accepted (e.g., World Bank 2011), as is the right of legitimate governments to maintain their monopoly on violence. Security threats are a great concern for many governments, and they often request international assistance. However, this falls outside the remit of development aid since aid explicitly excludes military assistance. Thus, the principle of ownership does not cover a large number of security concerns. A notable exception is post-conflict situations where donors provide aid to address specific problems such as security sector reforms, land mine clearance, and the reintegration of ex-combatants. Given that post-conflict countries are at high risk of experiencing conflict recurrence (Walter 2002, 2015) and that aid can stabilize (Collier and Hoeffler 2004a), post-conflict aid appears to be an effective use of resources, reflecting the priorities of post-conflict governments. In contrast, our data analysis shows that aid is not targeted at the security needs arising from violent crime. It is unclear whether this is not a priority for recipient governments or whether donors are reluctant to provide aid to address these types of security concerns. In addition, self-directed violence is an immense problem, but akin to interpersonal violence, it is unclear why this well-documented problem is not addressed. None of the three progress reports (OECD/UNDP 2014, 2016, 2019) make any reference to either interpersonal or self-directed violence.

Monitoring aid effectiveness and measuring progress is impossible if there are no data. Poor countries have poor data (Jerven 2013), making it difficult to measure results. Some donors provide support to collect data and make them publicly available, such as the Demographic and Health Surveys (DHS) financed by USAID or the Young Lives Project co-financed by the UK’s Foreign, Commonwealth, & Development Office (FCDO). Both surveys include questions on violence and thus generate knowledge on the prevalence and covariates of violence at home, at school, and in the community. Another example is the UN initiative entitled ‘Data for Africa’, where standardized victimization surveys provide information on the prevalence rates of different forms of (violent) crime. Reports were published, but to our knowledge, the underlying data were not made available (UNODC 2005). However, when it comes to fatal violence, the evidence base is very poor. Take sub-Saharan Africa, where a staggering 44 countries do not provide any homicide statistics and data must be estimated (UNODC 2019). Given the uncertainties around estimated data, progress is very hard to measure, and donors should strengthen systems of vital registration and crime recording. The collection of data on self-harm should also be supported, but cultural sensitivities around mental health and self-harm may cause conflicts between the principles of ownership and results.

To conclude, our estimates of aid aimed at the prevention, reduction, and treatment of the various forms of violence show that little is spent on the problems of interpersonal and self-directed violence. This is despite high prevalence rates and enormous human suffering. Thus, we call into question why donors as well as recipients do not use more aid to ensure the physical integrity of citizens, which is arguably the fundamental prerequisite for economic development.
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