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Supporting Gender Mainstreaming in Assessment of Key Health and Nutrition Programs: A Case Study from Bangladesh





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About NTEAM

Through NTEAM, Nutrition International shares its expertise globally to support the scale-up of nutrition for the most vulnerable.

NTEAM believes that knowledge, rigorously obtained and generously shared, is key to effective progress for nutrition. We provide timely and coordinated expert technical assistance to support governments, multilateral organizations, development banks and other global nutrition partners overcome gaps in capacity, design and delivery of multi-sectoral national nutrition action plans.

NTEAM encourages broad use of knowledge by translating technical information and research into accessible guidance, tools and capacity strengthening resources. Across all areas in which we work, we provide guidance, oversight and quality assurance—while taking a gender-sensitive approach —to ensure relevant and impactful technical assistance.

About TAN

TAN is a project within Nutrition International's NTEAM funded with UK aid from the UK government.



TABLE OF CONTENTS

1	Introduction		4
2	Aim and Objectives		4
3	Key Results		5
	3.1	Gender analysis included within bottleneck analysis	5
	3.2	Support to address gender barriers	5
	3.3	Long-term gender equality leadership and capacity building	6
4	Success Factors		6
5	5 Challenges		7
6	6 Conclusion		7



1 INTRODUCTION

This case study showcases the importance of having specific gender equality (GE) objectives and deliverables in a technical assistance (TA) mandate. While Nutrition International developed its GE strategy in 2018, virtually no TA included explicit GE objectives in their respective terms of reference (TORs) until 2020. This limited the technical assistance provider's ability to achieve results with respect to gender equality. A wider gender assessmentnoted that it was more impactful to mainstream gender in nutrition to achieve better nutrition outcomes than implementing TA assignments without specific gender equality objectives and deliverables.

2 AIM AND OBJECTIVES

The Gender Test Case is a TA engagement that was implemented in Bangladesh from June 2020 to June 2021 to intentionally plan, achieve and monitor GE results. This TA was initiated by a Nutrition International Gender Advisor, in collaboration with Nutrition International's Asia Regional and Bangladesh Country Offices. It was intended to understand the potential of such an intentional approach and the factors influencing the achievement of GE results at country level. To that end, the TOR was developed to recruit a national gender consultant. All elements of the TOR incorporated a gender focus including the background, purpose, objectives, and tasks. The consultant was selected on the basis of her relevant expertise and proven track record in Bangladesh's national government as well as past experiences in gender equality, the nutrition and food sectors and other interconnected issues. The national gender consultant's expertise and rich experience were instrumental in the outcome of this TA, and she worked under the supervision of the Nutrition International Gender Advisor.

The specific objectives of this TA were as follows:

- **1.** Contribute to mainstreaming gender equality by implementing TAN's Gender Equality guidelines, and proposing and implementing solutions to achieve gender impact as part of the assessment of existing public expenditure of health and nutrition programs
- **2.** Contribute to the gender-sensitive implementation of the Strategy for the Rolling Out of the District Nutrition Planning
- **3.** Contribute to TAN's gathering and dissemination of lessons learned in gender mainstreaming and gender impact through TA in nutrition in cooperation with the TAN team at HQ level



3 KEY RESULTS

3.1 Gender analysis included within bottleneck analysis

One of the key inputs made by the gender consultant was ensuring the bottleneck analysis exercise for improving nutrition outcomes embedded gender analysis within the study. The resulting bottleneck analysis report¹ is a product with the most sustainable impact because it enables the Bangladesh National Nutrition Council (BNNC) to use report findings to advocate for a more gender responsive approach to nutrition within different ministries. Overall, the report makes it impossible to overlook the issue of gender in nutrition.

The gender consultant also suggested possible solutions the BNNC can implement to remove bottlenecks. These findings and recommendations were highlighted in a publication for the 2021 International Women's Day:

".....many of the bottlenecks identified are inherently gendered, such as the non-engagement of male members of the households who are often decision-makers and control resources around food and diet, and the low educational level of mothers and caregivers which has a negative impact on awareness of nutrition. Within the bottleneck analysis report, NTEAM has made recommendations to respond to, and overcome, these challenges to improve coverage. This includes recommendations that:

- **1.** BNNC make mandatory the inclusion of male household members as a target audience in social and behaviour change communication strategies and program design.
- **2.** Expand non-formal and mass education programs to incorporate more mothers and caregivers who have limited educational attainment.
- 3. Revisit existing policies and programs to increase coverage for girls' education."²

3.2 Support to address gender barriers

Beyond the providing GE contributions to the bottleneck analysis and developing the report, the gender consultant provided initial support in developing a strategy to address challenges faced and offered support for two activities in particular:

- Developing a **community-based model** that will assist in the implementation of this strategy to overcome the bottlenecks.
- Contributing to the **Social Safety Net Program Review**, which is providing useful information and help in addressing priorities identified by national stakeholders to reduce malnutrition in general and gender gaps in particular.

¹ Bangladesh National Nutrition Council Assessment of the Key Bottlenecks for the Coverage of Nutrition Sensitive Interventions and the Underlying Causes

² Source: Nutrition International, Bangladesh's own gender equality expertise helping to improve women and girls' nutrition



3.3 Long-term gender equality leadership and capacity building

The Gender Test Case also contributed to strengthening the longer-term capacity of the Bangladesh government to integrate GE into nutrition programming. After significant advocacy efforts by the national gender consultant and the previous TA provider, the BNNC appointed a Gender Focal Point in September 2020. Following this appointment, the national gender consultant has been assisting the Gender Focal Point in identifying gender priorities to be integrated in the BNNC workplan and activities.

Furthermore, the BNNC's Gender Focal Point also provides some long-term advocacy capacity, although rotating staff is always a challenge.

The Human Resource Capacity Development guidelines, which the national gender consultant contributed to developing, is useful in making gender (and capacity gaps in this area) a key competency and a priority of various ministries working in nutrition. GE considerations were added to the Human Resource Training Strategy.

4 SUCCESS FACTORS

The main factors influencing the achievement of GE results in the Gender Test Case were the following:

- **The support provided** by the TAN Gender Advisor, Regional Project Manager and other team members including the lead consultant for this TA enabled the influence of the national gender consultant on key processes. The consultant noted, "People know they can call on me to provide gender leadership and the BNNC Gender Focal Point is increasingly and proactively seeking support from us to support gender mainstreaming. This creates a positive environment for cooperation, as does the participation of representatives from partner organizations (WHO, WFP) in some of those discussions."
- **National ownership** of the gender and nutrition agenda was instrumental within the political economy process. This included the cooperation of national actors with the national gender consultant, their openness to achieving better GE outcomes in nutrition, and their participation in mobilizing national agencies and providing access to data.
- **Type of TA.** The Gender Test Case supported a broader TA that aimed to contribute to nutrition data and evidence generation for informed decision-making. An argument can be made that a TA that seeks to influence the information (data, evidence and gender analysis) used for nutrition programming is more likely to affect a greater number of processes and outputs because the evidence piece chronologically takes place in the early phases of nutrition planning than if the gender TA was designed to support the operationalization and implementation phases.

5 CHALLENGES

Some of the challenges experienced while implementing the Gender Test Case included:

- The challenge of **working within the context of the COVID-19** pandemic affected the national gender consultant's ability to engage with stakeholders, collect data and affect change.
- Accessing data from many entities with various levels of data generation/management capacities complicates the achievement of GE results. This could be mitigated by forming a gender resource group with focal points from different ministries.
- Another challenge relates to the **timing of the Gender Test Case** in that it was added mid-stream to a TA mandate that had started 18 months previously. This limited the ability to ensure gender was mainstreamed during the initial work planning processes and meant the opportunities to influence were limited to specific activities that were already planned.

6 CONCLUSION

The Gender Test Case demonstrates that including intentional and explicit GE objectives and deliverables in TA and investing resources in national level GE expertise yields valuable GE results for stakeholders at the country level, in terms of more inclusive consultation processes, deliverables demonstrating more cross-sectoral linkages, a defined pathway to gender equality outcomes, and more sustainable results.

Naturally, not all TAs can be focused on GE but all can make it an integral part of their approach. Based on the experience in Bangladesh, a separate TA exclusively focused on GE generates better results only when integrated with the TA it is supporting to ensure gender is adequately mainstreamed in the TA processes and outputs. The approach taken by the Gender Test Case enables the TA to have a higher profile, more project support, distinct resources and provides more clout and influence for the national gender consultant.

It is highly recommended to replicate this Gender Test Case in another country, for more gender-responsive nutrition interventions.



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