

NEEP INFORMATION BRIEF NO. 1

Women's Empowerment and Child Nutrition

Exploring connections through programme evaluations

The Nutrition Embedding Evaluation Programme (NEEP) is a four-year project led by PATH and funded by the United Kingdom Department for International Development, concluding in 2017. NEEP was designed to build the evidence base for what works in improving nutrition by conducting credible, robust evaluations of innovative interventions implemented by civil society organisations.

NEEP interventions fall under one or more thematic areas: 1) agriculture (5 grantees); 2) cost-effectiveness analysis (4); 3) early childhood development (5); 4) infant and young child feeding (10); 5) micronutrients (6); 6) water, sanitation and hygiene (5); 7) women's empowerment (8); and 8) e-learning (1). This brief is focused on women's empowerment, and how these approaches can be leveraged to improve child nutrition.

EMPOWERING WOMEN FOR HEALTHY CHILDREN

Prior to issuing the Nutrition Embedding Evaluation Programme (NEEP) call for applications, PATH conducted a gap analysis to identify high-priority areas for investment in evidence building for nutrition. Through this process, PATH found the existing research on women's empowerment as a pathway for improved nutrition in social protection and agriculture programming to be weak.¹ Applicants were encouraged to include these components in their evaluations, and to explore possible links between a mother's level of empowerment and her children's nutritional status.

Because of their traditional role as caregivers and household managers, women are typically the main participants in child nutrition programmes. However, the same social norms and expectations that prize women's importance as mothers can also limit their autonomy to make decisions or take action in their daily lives. Addressing these limitations is key to achieving optimal health outcomes.

Several NEEP grantees chose to challenge traditional gender norms whilst providing women with tools and knowledge designed to help them gain more control over their lives and their children's health. By integrating gender into their nutrition programme designs and evaluations, these civil society organisations were able to amplify their impact whilst also raising awareness of the importance of women and their labour in the communities they serve.



PATH/Evelyn Hockstein.

ZAMBIA CASE STUDY: REALIGNING AGRICULTURE TO IMPROVE NUTRITION

Concern Worldwide in Zambia set out to reduce chronic malnutrition in rural children younger than 2 years through sustainable and scalable agricultural practices and policies. The Realigning Agriculture to Improve Nutrition (RAIN) project enlisted local women's group leaders and community health volunteers to train group members in agriculture and nutrition. Funding from NEEP supported their impact evaluation, which compared two versions of the programme (agriculture only or agriculture-nutrition combined) with a control group to assess any change in the prevalence of child stunting after five years.

Concern Worldwide chose to devote considerable time and resources to the meaningful integration of gender in their project, with the expectation that these efforts would help them to realise their overall goal and objectives. They first conducted a gender needs assessment to identify attitudes and behaviours related to gender in agriculture and nutrition. The results were used to inform health and behaviour change communication messaging. Project activities were adjusted to help overcome gender barriers that negatively impact child nutrition outcomes.

Ultimately, RAIN's intervention groups had a positive impact on many nutrition indicators, including severe hunger, dietary diversity, participants' perception of food security, caregiver health/nutrition knowledge, agricultural production and women's empowerment.

“There was a clear shift over time in women's involvement in decision making in agriculture, away from having men only involved towards having women involved (either solely, or jointly with her spouse). This shift occurred across all study groups for different aspects of decision making . . .”²

Harris, Nguyen, Maluccio, et al., 2016

NEEP GENDER FOCUS

Other NEEP grantees also tested and evaluated innovative gender approaches with their interventions. The Population Council's Adolescent Girls Empowerment Program in Zambia created “Safe Space” girls' groups for vulnerable adolescents in urban and rural areas; during weekly meetings, participants receive mentorship, support and lessons on health (including nutrition), life skills and financial literacy. By intervening during this critical life-stage, the Population Council hopes to improve health outcomes not only for the girls they serve but for their future children as well.

Evidence Action in Kenya augmented their ongoing Dispensers for Safe Water programme—where they provide access to safe water by placing chlorine dispensers near community water sources—by sending their volunteer promoters to deliver nutrition messages directly to households. Promoters spoke to mothers and fathers in the study about optimal child feeding practices, both to educate couples and to encourage men to view themselves as caregivers and engage in child nutrition decisions. Evidence Action then evaluated whether delivering the information to couples together contributed to the impact on children's nutrition outcomes as well as the impact on women's empowerment in household decision-making and familial relationships.

In Bangladesh, Helen Keller International (HKI) and Eminence Associates are exploring the link between child nutrition and women's economic empowerment. HKI's Making Markets Work for Women (M²W²) project helps women establish year-round gardens and small farms to generate crops for their families and to sell in their communities. Through negotiations with local leaders and gender-sensitive behaviour change activities, HKI aims to ensure sustainable access to cultivable village lands for women that will support maternal autonomy and increase income generation opportunities.

Although agricultural interventions may be ideal for improving nutrition outcomes in rural settings, urban migration is becoming more prevalent because of new job opportunities. In certain Bangladeshi cities, the garment-making industry thrives, and a vast majority of its workers are female. Eminence is engaging pregnant women and lactating mothers working in garment factories, their co-workers, family members and upper-level management to create policies that would make their working environment more “mother friendly”. Implementing paid maternity leave, flexible hours and health promotion activities in the workplace is expected to improve exclusive breastfeeding rates and complementary feeding practices. In turn, this has the potential to reduce diarrhoeal illness and other adverse health outcomes common amongst infants in this population, whilst allowing mothers to continue working and generating income to support themselves and their families.

CONCLUSION

From sub-Saharan Africa to Southeast Asia, NEEP grantees are testing novel approaches to reducing childhood malnutrition and disease. Although the final evaluation results are still being analysed, NEEP has successfully begun to fill in the gaps in evidence related to women's empowerment and child nutrition outcomes. PATH will continue to support these programmes, providing technical assistance throughout the evidence dissemination process to ensure maximum uptake and optimal health outcomes for women and children throughout the developing world.

REFERENCES

1. PATH. *The Evidence for Maternal and Child Nutrition Interventions: Gap Analysis*. Washington, DC: PATH; 2014. Available at http://sites.path.org/mchn/files/2014/06/NEEP-gap-analysis_external-dissemination-7-24-141.pdf.
2. Harris J, Nguyen PH, Maluccio J, Rosenberg A, Mai LT, Quabili W, Rawat R. *RAIN Project: Impact Evaluation Report*. Washington, DC: International Food Policy Research Institute; 2016:96. Available at https://doj19z5hov92o.cloudfront.net/sites/default/files/media/resource/rai_n_endline_survey_report_final_version_may_2016.pdf.

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