OCHA POLICY BRIEF

Gendered drivers, risks and impacts of food insecurity in the Sahel and the Horn of Africa

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Credits

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Introduction

It is widely understood that the food insecurity crisis in the Sahel and the Horn of Africa is one of the world's fastest growing and most neglected crises. It lacks sufficient global focus, resources and urgency. As in so many crises, women and girls are disproportionately affected and shoulder the consequences of protracted neglect, with unconscionable impacts on their safety, life chances and agency.

Gaining a holistic view of the gendered drivers, risks and impacts of food insecurity in the Sahel and the Horn of Africa is difficult. This is due to a lack of data and prioritization, and the large geographical and socioeconomic terrain covered by both regions. However, what we do know about this crisis is more than enough to urgently address the needs of women and girls.

An OCHA discussion paper on this topic (which will be published imminently, and from which this policy brief is drawn) found that there is:

- A strong risk of profound regression in gender equality gains made to date in the countries of concern, including on education, sexual and reproductive health, and the economic independence of women and girls (with knock-on effects on broader humanitarian and development outcomes).
- An increasing challenge to reverse what must be recognized as a protracted and growing gender-based violence (GBV) emergency in the Sahel and the Horn of Africa.

The food insecurity crisis in the Sahel and the Horn of Africa is protracted, multidimensional and highly gendered, with spiralling impacts on gender equality and food security outcomes. It is driven by interwoven and overlapping factors, including climate change, political instability, conflict, socioeconomic conditions, migration and displacement and, more recently, COVID-19 and the war in Ukraine. Interlinked with these factors are gendered structural drivers of food insecurity, including deeply entrenched gender inequalities and harmful social norms. Gendered risks and impacts of food insecurity include alarming limitations on access to education, sexual and reproductive health rights, women's agency and participation, and dramatic increases in different existing forms of GBV and the emergence of new ones. Recognition of such gendered dimensions of food insecurity and of the need for a multisectoral approach in the response is key to addressing the crisis, alongside sustained commitment and adequate allocation of resources.

This policy brief draws out key findings from the OCHA discussion paper on this topic, which includes a desk review of studies, assessments and reports, and interviews with local women's organizations on the front lines of the food insecurity crisis in communities across both regions.

Below are the most pressing gendered drivers, risks and impacts of food insecurity (not in order of priority), as well as key gaps in the current humanitarian response to food insecurity, and recommendations to take forward.

Gendered drivers, risks and impacts of food insecurity

Despite women's major role in food production, gender inequalities and harmful social norms are deeply entrenched in wide parts of the Sahel and the Horn of Africa, with myriad impacts on women's time and agency, and on the food system itself. There is broad agreement that women make up approximately 50 per cent of the overall labour force in Africa (African Development Bank, 2017). In the Sahel, women contribute to 40 per cent of agricultural production, 80 per cent of agricultural processing and 70 per cent of agricultural distribution labour regionally (Allen et al., 2018). Despite women's major contributions to food systems, persistent gender inequalities place them among the most vulnerable groups in the food insecurity crisis. Gender inequalities also undermine regional food systems - emerging evidence suggests that the demands placed on women for additional care work during the COVID-19 pandemic further reduced the time they had available for agricultural work. Given women's outsized role in agricultural labour across Africa, a reduction in their ability to farm due to an increase in care responsibilities should be a critical food security concern.

A lack of access to and control over land and other economic resources are key sources of inequity, food insecurity and vulnerability for women and girls. Food insecurity disproportionately affects women and girls due to deeply rooted gender inequalities and norms (Amin, 2015; Ivers & Cullen, 2011). Their increased vulnerabilities to food insecurity stem from pre-existing gender inequalities, such as their relative lack of access to and control over vital assets, such as land, employment and money (UN DESA, 2015). In the Sahel and the Horn of Africa, women depend heavily on natural resources such as land for their labour, including for agricultural production, rearing animals and building homes. However, despite women's centrality in land use, they often do not have equal rights regarding land ownership. While land ownership is a critically important gender equality outcome in and of itself, studies show that as women acquire assets, their household bargaining power can increase, and they play a more active role in household production and consumption decisions, often with positive impacts on food security.

Urgent need for more interventions in sexual and reproductive health rights and services. Food insecurity has important implications for nutrition and health beyond hunger. Poor pregnancy outcomes, such as low birth weights, premature births and gestational diabetes (Borders et al., 2007; Laraia et al., 2010), have long been pressing concerns for humanitarians in the nutrition sector. Research also demonstrates that different forms of GBV, which are shown to increase due to food insecurity (see pg. 5), can have a range of negative implications on nutrition (UNICEF, 2022). In the area of sexual and reproductive health, it is alarming to note that maternal mortality in the Western Sahel is three times the global rate, namely 602 deaths per 100,000 live births (Wilson Center, 2022). Lack of access to food

has serious consequences for sexual and reproductive health, including the increased likelihood and worsening of anaemia, especially among pregnant and lactating women (GBV AOR, 2022). Maternal mortality in the Horn of Africa is also high, accounting for "a quarter of all maternal deaths worldwide" (UNICEF, 2022). Evidence suggests that during drought periods, households tend to prioritize food-related needs over the protection of women's and girls' dignity, reducing their agency when deciding on ways to manage their menstrual hygiene (GBV AOR, 2022).

Limited access to education and mass un-schooling of girls. Girls in the Sahel and the Horn of Africa were already vulnerable to school dropout and a lack of prioritization of their education due to existing and entrenched social gender norms. As food insecurity increases, so do girls' responsibilities at home. Drought and other climate-related drivers force women and girls to search for water and firewood at greater distances, in addition to their other household-related tasks. These chores consume much of the time that could be spent on education, and they significantly increase women's and girls' risks of GBV. COVID-19 and rising food insecurity are causing further mass school closures and girls' removal from schools, particularly in conflict-affected areas. Girl-less classrooms are a credible risk: local women's organizations interviewed for the discussion paper noted that the combination of insecurity, economic concerns and hunger (with children reportedly fainting in school) was driving a "mass un-schooling of girls." Emerging evidence points to the prospect of a lost generation of girls, whose rights and access to education are being sharply curtailed by food insecurity. In addition, unschooling and education can create a negative feedback loop as women's education is found to be the single biggest contributing factor in reducing child malnutrition (IFPRI,

2000). Therefore, the "mass un-schooling of girls" we see threatens cascading impacts on child malnutrition in the regions.

GBV is dramatically increasing in both regions. Academic and practitioner literature find food insecurity to be significantly correlated with different forms of GBV (Bapolisi et al., 2021). Threat multipliers for GBV in the Sahel include drought, temperature increases, and widespread insecurities due to violent extremism and communal conflicts. Service provider accounts indicate that these threat multipliers are increasing levels of intimate partner violence (IPV), sexual violence, sexual harassment, exploitation and abuse, and child marriage (GBV AoR, 2021). Data from across the Horn of Africa region, while not comprehensive, shows clear patterns of increased levels of GBV. Data and analysis on linkages between GBV and food insecurity point to the following core trends:

Spikes in child marriage and harmful i. traditional practices. Child marriage, domestic violence, female genital mutilation and cutting (FGM/C) and imposed polygamy are persisting and increasing in the Sahel and the Horn of Africa due to the current food insecurity crisis. Local women's rights leaders interviewed for the discussion paper described an alarming increase in early and child marriage fuelled by protection concerns and financial considerations during periods of food insecurity, with direct links to the "mass un-schooling" of girls observed in the concerned regions. One woman leader described girls being sold off for marriage and seen as a "source of wealth" in some pastoralist communities in northern Kenya, and Oxfam found that families in South Sudan were marrying off young girls to obtain money as a coping strategy. Child marriage and harmful practices can have

devastating physical, mental, and sexual and reproductive health outcomes for girls and young women.

- ii. All forms of GBV, particularly IPV, have been exacerbated by the lasting impacts of the COVID-19 pandemic, compounded by rising food insecurity. Women's groups interviewed for the discussion paper were quick to point to links between the pandemic, food insecurity and rising levels of IPV. IPV, in turn, causes some women to flee their homes, which increases their vulnerabilities to other forms of GBV. such as sexual violence or transactional sex in exchange for food and other resources. There is evidence that across the Sahel, IPV has increased on average by almost 12 per cent due to COVID-19 (GBV AoR, 2020), a trend increasingly compounded by the food insecurity crisis (UN Women, 2021).
- iii. Girls and young women are particularly vulnerable to sexual assault and harassment. When food insecurity rises, pressure increases on women and girls to find and prepare food for the family. When women and girls travel greater distances for food, water and firewood, they are at risk of attack, sexual assault and harassment from men (Plan International, 2022). Being removed from school leaves girls more vulnerable to child, early and forced marriage, transactional sex, and sexual exploitation and abuse (SEA) by humanitarian workers.
- iv. Conflict-related sexual violence remains a long-standing concern. As conflicts intensify across the Sahel and the Horn of Africa, reports of sexual violence increase. As with IPV, significant barriers exist to reporting incidents of conflict-related sexual violence. Therefore, numbers in both areas may be higher. Conflict-re-

lated sexual violence causes immediate harm and has intergenerational impacts, including children born as a result of rape (GBV AoR, 2020). Research by Saferworld (2022) in Mali highlighted physical and sexual violence, including by national forces, as a central concern, with women particularly vulnerable when carrying out care responsibilities in food insecure households.

- Displaced women and girls are among V. those most at risk of GBV in the Sahel and the Horn of Africa. As either a climate-adaptive strategy or a necessity due to conflict and food insecurity, patterns of migration and displacement are a contributory factor to and a consequence of the current food insecurity crisis. Violence in both regions has disrupted agricultural activity and pastoralist grazing zones, forcing households to relocate. In turn, when women and girls are on the move or forced to walk longer distances to access water due to their displacement, the risks of violence against them increase (UN Women, 2022). For women and girls on the move, physical harassment is a constant risk, along with potential abduction, rape or murder. The risk is devastatingly real: Internally displaced people and refugees accounted for more than two thirds (68 per cent) of GBV survivors seeking specialized assistance in the Sahel in 2021 (OCHA, 2022).
- vi. The economic vulnerability of women and girls has led to an observable increase in other forms of GBV, such as sex trafficking and coercion into transactional sex. It is well documented that hunger and food insecurity can leave women and girls more at risk of sexual exploitation in exchange for food, including engaging in transactional sex (Rohwerder, 2022).

Interviews with women's organizations show that transactional and coerced sex work is increasing in the regions of concern, with women often having few other options than transactional sex as a coping mechanism. Historically, the Sahel has been an important transit zone for transnational crime in Africa, including sex trafficking. Limited reports suggest that food insecurity may be making some migrant and refugee women and girls additionally vulnerable to being recruited alongside pre-existing victims of sex trafficking in the region (Kah, 2019).

- vii. Access to and quality of GBV services are deeply inadequate across the Sahel and the Horn of Africa. GBV services are chronically poor across both regions, and extremely limited and stretched in their ability to cope with an increase in GBV cases due to rising food insecurity. Local women's organizations interviewed for the discussion paper singled out the paucity of clinical care and mental health support for survivors, and the lack of training and capacity-building in GBV services.
- viii. Climate change-related food insecurity increases women's and girls' vulnerability to GBV. Particularly where there is a high dependence on agriculture, such as in the Sahel and the Horn of Africa, climate change can act as a direct driver of food insecurity, with all the above-mentioned gendered impacts. The breakdown and fraying of economic, social and institutional structures during and after disasters are also shown to deepen gender inequalities, exacerbating dispossession, marginalization, discrimination and violence against women and girls (GBV AoR, 2021). Evidence from Ethiopia, South Sudan and Uganda points to links between climate change and

different forms of GBV, including rising temperatures and droughts being associated with higher levels of IPV, sexual violence, child marriage, harmful traditional practices and human trafficking. Among other dynamics, stresses caused by the failure of crops grown for income lead to increased domestic violence against women. Gendered dimensions of climate-induced migration have also been reported, as well as a cyclical link observed between natural resource scarcity induced by climate change, communal violence and conflict, in turn with gendered effects.

Key gaps and recommendations

Lack of meaningful inclusion of local women's organizations

In interviews for the discussion paper, women's organizations and groups spoke time and again of the lack of a "seat at the table" and the lack of funding to meet the needs of the communities they serve. Given their expertise, reach and unrivalled access to vulnerable populations, this is a key failure in the current humanitarian response, including to food insecurity in the Sahel and the Horn of Africa. The absence or limited participation of women and girls in needs assessments and community engagement activities as both assessors and participants reduces humanitarians' capacity to integrate women's and girls' needs (OCHA, 2022). Therefore, more sustained efforts are urgently needed to adequately fund local women's organizations, and to value and integrate them in humanitarian decision-making and coordination at all levels.

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Where do you think are the women? Always we are not on board when the funding is coming. It is a male-dominated country, so sometimes you don't have accessibility to go to the meetings where these discussions come. And the organizations who lead this are Government organizations...still there is a gap for the other meetings, for women-led organizations to go and advocate the issue... A challenge we have advocated for many years [is] for aid localization. This would bring more benefit for the local actors. It is ongoing, there are international organizations who lead. But sometimes, when we really ask ourselves, "localization is still by mouth, not by action."

Key Informant Interview with a local women's organization, October 2022

2 Severe underfunding of GBV prevention, mitigation and response across the Sahel and the Horn of Africa

The GBV AoR analysis (2020) of humanitarian needs and response plans for Burkina Faso, Mali and Niger indicates that 2.3 million women and girls need GBV prevention, risk mitigation and response services. However, just 1.2 per cent of GBV funding requests was met across each country's Humanitarian Response Plan, and less than 1 per cent of current funding to Burkina Faso and Niger has been allocated for GBV. This indicates that "the prevention, risk mitigation and response to GBV in emergencies in West and Central Africa is among the least funded sectoral interventions in the world." The lack of adequate and consistent funding to address the gendered risks of rising food insecurity in the Sahel and the Horn of Africa is having immediate and real-life consequences. Local women's rights organizations note that funding to prevent, mitigate and respond to the various forms of GBV is neither sufficient, direct, consistent nor timely.

3 Lack of access to sexual and reproductive health and GBV services

Sexual and reproductive health services are inadequate, and access to them is limited in the Sahel and the Horn of Africa, with detrimental effects on women's and girls' health, as described above. GBV survivors also face significant challenges in accessing even the most basic services. Common barriers are long distances, transport costs and needing permission in some contexts from male partners or caregivers to access a health centre (where sexual and reproductive health and/or GBV services may be integrated). Access to quality services has always been chronically poor across the Sahel and the Horn of Africa, and signs are that services are extremely limited and stretched in their ability to cope with an increase in GBV due to rising food

insecurity. The GBV AoR (2022) notes that in Burkina Faso, only 12 per cent of affected areas are covered by GBV actors; in Mali, fewer than six GBV actors are supported to offer GBV service coverage to 64 per cent of the country. Also in Mali, the GBV AoR (2020) highlights that 68 per cent of GBV survivors who requested access to justice services could not receive it due to lack of funding.

Considering all of the above, concrete recommendations to humanitarians, donors, GBV practitioners and food security actors include but are not limited to:

For all humanitarians:

- Ensure strong partnerships and collaboration across the humanitarian-peace-development nexus.
- The multidimensional nature of the food insecurity crisis in the Sahel and the Horn of Africa requires a multisectoral approach and response from all stakeholders.
- Promote the systematic and meaningful participation, equal representation and leadership of women and local women civil society – particularly women-led organizations – at all levels, including in humanitarian decision-making and coordination.
- Increase sustained efforts to integrate women's organizations' expertise, reach, access and impact into the overall humanitarian response in the Sahel and the Horn of Africa.
- Ensure adequate, sustainable and direct funding to local women's organizations.
- Promote the prioritization of GBV prevention, mitigation and response in funding allocations and programming.
- Ensure that robust gender analysis informs
 the humanitarian response and all advocacy
 on drought, famine and food insecurity.

For donors:

- Ensure that all funded proposals for food security interventions are, at a minimum, gender responsive and, where possible, gender transformative.
- Ensure all funded proposals are informed by a gender analysis, a protection and GBV risk assessment, sex- and age-disaggregated data (SADD), and an assessment against the Inter-Agency Standing Committee (IASC) Gender with Age Marker.
- Support the role and leadership of women-led organizations in the food security sector and humanitarian response.
- Increase investments in targeted interventions for gender equality and the empowerment of women and girls, and ensure adequate funding to local women-led organizations.
- Along with funding for food security interventions, address the intersecting impacts of the food crisis – such as increased protection risks and displacements – by adequately funding protection and GBV programming as stand-alone programming or as part of multisectoral programming.
- Prioritize funding for GBV-specialized programming from the early onset of food insecurity and famine conditions.
- Make GBV risk analysis and mitigation measures a requirement for funding proposals in all programmatic sectors.
- Include detailed requirements to prevent and respond to SEA by humanitarian workers in funding requests for all food distribution programming.
- Support the development of a framework for understanding and addressing the linkages between food insecurity and GBV.

For GBV practitioners:

 Ensure that the GBV coordination mechanism operating in a humanitarian crisis coordinates with food security actors in order to stay informed of current food insecurity levels and early warnings of an increase in the severity and scale of food insecurity.

- Link early warning information to the evidence of related GBV risk factors in households and communities in order to carry out targeted prevention work before and in the early stages of food insecurity, and to mitigate the GBV risks faced by women and girls.
- Develop participatory strategies for how to address GBV in food insecurity contexts, including on how to address specific GBV risks, and the incidents women and girls face within the household and while searching for food.
- When food insecurity and famine-like conditions are anticipated or present, ensure that survivor-centred GBV services are in place and prepared to respond to the anticipated surge in GBV.
- Ensure that GBV risk assessments and gender assessments recognize linkages between food insecurity and GBV risks, and that the incident types are monitored, including the risk for child marriage, harmful practices, IPV and men's control over women's access to food.

For food security actors:

- Ensure that all projects consistently collect, analyse and use SADD and are informed by robust gender analysis that details how women, men, girls and boys of all diversities are impacted differently by food insecurity and the coping mechanisms they use to respond.
- Regularly consult women and girls and other at-risk groups on which food aid modalities (e.g. cash, in-kind, hybrid) and implementation strategy (e.g. selection of distribution points, composition of basket, etc.) they would find most appropriate and safest for

a given context. Solicit feedback and adjust programmes accordingly.

- Account for the differential food and nutritional needs and barriers faced by pregnant and lactating women and adolescent girls of reproductive age, and tailor the food ration accordingly.
- Build stronger systems for monitoring GBV risks at food distribution sites – including risks linked to SEA by humanitarian workers.
- Incorporate the recommendations from the IASC GBV Guidelines into all components of the programme cycle, and equip food security staff with other GBV tools and resources.

- Learn from existing recommendations developed by women and girls on how to make food distribution processes more equitable and safer, tailored to the specific context and needs.
- Build on good practice in participatory action research and other approaches to engage women and girls in the design of food distribution processes (including travel to and from the distribution site).
- Monitor women's and girls' access to food aid on a regular basis and roll out womenfriendly feedback mechanisms.

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