Food security exists when all people, at all times, have physical and economic access to sufficient safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life. Household food security means applying this concept to individuals within the household. Activities aimed at improving national-level food security may be quite different from those directed towards improving household food security. Both national and household food security have gender implications.

Food security is multidimensional and multi-sectoral and involves many issues from food production, distribution and marketing, preparation, processing and storage to population and health, education, employment and income, nutrition, trade, services and infrastructure. It consists of four main dimensions: availability, access, utilization and stability/vulnerability. Women, girls, boys and men each have a special role in ensuring food security.

Acute food insecurity in emergency situations differs from chronic food insecurity. Most emergencies happen in situations of chronic food insecurity. For this reason, it is important to recognize the kind of emergency, for example sudden natural emergencies, chronic emergencies, complex emergencies and slow-onset emergencies, as responses may differ significantly. Chronic and transitory food insecurity, which is associated with the inability of households to maintain their consumption levels in the face of fluctuations, may have differential effects on women, girls, boys and men, both at the community and household levels.

What are the gender implications of food security?
Women and men have different and complementary roles and responsibilities in securing nutritional well-being for all members of the household and the community. Age is another important element to be considered. Women often play a greater role in ensuring nutrition, food safety and quality, and are also often responsible for processing and preparing food for their households. Women tend to spend a considerable part of their cash income on household food requirements. After a crisis, livelihood strategies of women and men may change and you should assess the new division of tasks to ensure food security and nutritional well-being for the household to design effective rehabilitation programmes. It is important for you to establish how many women and men can be helped and for how long support is needed. You should also teach women, girls, boys and men about the nutritional value of foods and how to cook them so as to support them in the new context, when they need to take up new roles.

Recognizing women’s and men’s distinct roles in family nutrition is key to improving food security at the household level. Underlying causes of malnutrition that must be addressed include work load, dietary intake and diversity, health and disease and maternal and child care.

This chapter looks at the three aspects: food security, food distribution and nutrition. We’ve also developed specific sub-chapters on each aspect, which detail information and actions you should take when planning and implementing gender-sensitive emergency and rehabilitation programmes and projects.

Overall food security issues, due to their multi-faceted aspects, have a number of key players involved, principal among them FAO and WFP. In the ongoing humanitarian reform, nutrition is a cluster led by UNICEF. Food distribution remains an important component of the food sector and is led by WFP.
In the aftermath of disasters, affected communities will need help to restart agricultural activities as soon as possible, in order to meet household food security needs adequately and restore resilience. Since emergencies tend to exacerbate existing vulnerabilities, the respective roles and responsibilities of women and men and their constraints, needs and capacities need to be analysed and understood in order to ensure that effective assistance is provided. Ultimately, the objective is to assist in a quicker and more sustainable recovery, especially for the most disadvantaged and vulnerable groups.

Household food security does not necessarily mean the same as food self-sufficiency, which refers to sufficient domestic production to meet the needs of the population. It refers both to the availability and stability of food, and the purchasing power of the household where food is not produced. Food security also depends on food adequacy and acceptability to consumers, as well as the availability of clean water and firewood. The collection of water and firewood is often the task of women and girls, and may be compromised in emergency settings, affecting ability to transform rations and food into an adequate diet. Food processing, conservation and storage are also important considerations when planning food security interventions.

Food security is an issue for individuals within households, for households as a whole, for nations and for the international community. At the household level, individual members may be malnourished while others have sufficient food. In some societies, women and/or children are the victims of food discrimination. You should assess women’s and men’s access to food and the difference in calorie intake according to gender within the affected population. At the national level, there may be sufficient food supplies, but food-insecure households or areas may exist due to production/supply shortages, low income levels and general lack of access to those supplies. Internationally, food production levels are more than sufficient to feed all people, but food is not equally available or accessible. Improving food security means ensuring households have the means to produce sufficient food of acceptable quality for their own consumption — or earn enough regular income to purchase it and access the market, while ensuring all members of the household have sufficient access.

Whether in terms of labour input, decision-making, access to or control of production resources, gender issues should be mainstreamed in food security, looking at the four dimensions mentioned earlier: availability, access, utilization and stability. Gender aspects are relevant to most of these issues since women and men are generally affected differently by the emergency and displacement and have different access to and control over finances and resources. Women are active in cash and subsistence agricultural sectors and their work in producing food for household and community consumption is often not valued. Many failures in food security programmes and policies are due to the assumption that large groups of people are homogeneous, rather than being composed of socio-economic groups with different needs and interests. Goals and objectives cannot be achieved without a clear understanding of the target group. Knowing who does what work and carries out what roles in providing for household food security is essential in policy planning. If women are responsible for a particular aspect of food policy they need to be specifically targeted, rather than assuming that they will automatically be reached — the same is true for men. Women and men should not be treated as all the same and a specific socio-
Food security assessment in the West Bank and Gaza Strip

In 2003, FAO and WFP undertook a comprehensive food security and nutrition assessment across all districts of the West Bank and Gaza Strip. A key objective was to understand the factors and conditions affecting livelihoods and food security and nutritional vulnerability of women, girls, boys and men. In addition to reviewing secondary data, the mission conducted a primary data collection and analysis exercise in urban, camp and remote rural locations. This involved extensive field visits, focus group discussions, pairwise comparison ranking, household observations, and interviews using a gender focus.

What do we need to know to plan and implement gender-responsive food security programmes in emergencies?

What are the demographic factors?
- Number of landless poor (disaggregated by sex).
- Number of herdless pastoralists (by sex).
- Number of poorest in caste groups (by sex).
- Most marginalized communities (composition and size).
- Number of temporary and long-term or permanent migrants.
- Disaggregated data by age, wealth and marriage status.

What are the social factors and how have they changed since the crisis?
- What are the different types of households after the crisis (e.g. female- or child-headed households)?
- What is the composition of households needing special assistance (e.g. unaccompanied children, widows without families, disabled and women, girls, boys and men affected by HIV/AIDS)?
- Has there been recognition of the roles of women and men in caring for their extended families and dependents?
- Are the specific needs of women, children, men and disabled recognized?
- Is the local knowledge of women and men recognized and used in planning food security interventions?
- What is the local level of organization of women, youth, men and disabled in the rural communities? Can informal networks or formal associations be supported and how?
- Is there any community support to women and men for food production, transport and delivery?
- What are the community and household power structures in relation to the use of food, land and other productive resources?
- How acceptable to the population are the proposed commodities, according to gender-disaggregated needs?
- Who controls resources (production tools, food, etc.) at both the community and household level?
- Who in the household is responsible for food safety and the hygiene considerations for ensuring food and nutrition security?
- Who in the household is responsible for processing, conservation and storage of food?

What are the economic factors and how have they changed since the crisis?
- What is the level of poverty of women, girls, boys and men?
- Do women and men have equal access to the local market?
- What is the process for local food procurement for women and men?
- Do both women and men have access to cash and food-for-work opportunities, credit and agricultural inputs?
- Is cash available for women and men to meet non-food needs?
- Do both women and men have access to food aid services and programmes?
- What are their levels of self-sufficiency in particular crops?
- Are there adequate and stable food supplies and access (quantity, quality and nutritional aspects) for women and men?
What are the political factors and how have they changed as a result of the crisis?
• Is any group being discriminated against?
• Are national and/or customary practices and laws limiting women’s access to land and other productive assets?
• Do both women and men have access to agricultural services?
• Do national legislation and laws ensure equal rights (e.g. to land) to women and men?
• What are the consultation procedures in policy formulation and implementation processes?
• Do mechanisms exist for involving women and most vulnerable groups in decision- and policy-making?
• Do subsidies on products exist and what are their effects on production of food crops and incomes of poor women and men?

What are the institutional and security factors and how have they changed since the crisis?
• Have institutional arrangements and mechanisms been developed to ensure that the views and concerns of women and vulnerable groups at village, regional and national levels are brought to the attention of policymakers?
• What are the information dissemination and communication channels, and are special measures taken to ensure the access by women and most vulnerable groups?
• Is the presence of weapons and land mines creating any mobility problems for women and men to reach the local market to purchase food or their agricultural fields?
• Do women, girls, boys or men face problems with physical security in accessing food security assistance?

Gender-sensitive needs assessment
• Assess the priority needs and constraints of women and men to increase household food security in the short and long term.
• Gather the perceptions of the target population to provide a basis for decision-makers in the design, targeting and implementation of policies, strategies and interventions to protect and promote food security.
• Assess if any problem resulted from the division of labour or from the inequitable access to resources by women and men.

Vulnerability maps
• Identify areas and sectors of population (women, girls, boys and men) most at risk of food insecurity.
• Identify types and levels of hazards based on past, present and projected trends to assess the needs of the areas and groups of people (disaggregated by sex) most at risk.
• Formulate supplementary feeding programmes for at-risk sections of the population, with the active participation of women, girls, boys and men.

Gender-disaggregated data and gender-sensitive indicators
• Disaggregate by sex existing data on different socio-economic groups in food-insecure communities.
• Conduct surveys and rapid appraisals to collect direct information from women and men, with adequate representation of different socio-economic groups.
• Analyse data with a gender perspective, taking into account the division of tasks, access to and control over productive resources and decision-making patterns between women and men at household and community levels.
• Disseminate information disaggregated by sex to raise awareness among policy-makers on relevance of gender issues in food security programmes and policies.
• Formulate a core set of gender-sensitive indicators to monitor and evaluate the impact of food security programmes and policies on women, girls, boys and men.

Emergency livelihood analysis
• Assess constraints, productive capacity and capabilities of household food secure members of different socio-economic groups, including female- and child-headed households and families with disabled and HIV/AIDS-affected people.
• Identify livelihood strategies of women and men to overcome (transitory) food insecurity and vulnerability.

• Make recommendations to facilitate women's access to land and other productive resources (e.g. credit and technology).

• Consider whether rations are to be provided in grain or meal/flour form as this could add to women's tasks.

• Assess the local cultural practices for women and men when planning food aid programmes to see how acceptable the proposed commodities are to the different segments of the community.

• Promote new income-generation and diversified activities for women, girls, boys and men.

Stakeholders analysis
• Identify the main stakeholders of the food security programme in emergency and rehabilitation contexts.

• Ensure that women and men actively participate in the design, implementation and monitoring and evaluation of food security programmes and policies.

• Actively involve women in policy-making bodies, key advocacy and interest groups.

• Consult with women, girls, boys and men to select appropriate targeting mechanisms.

• Identify potential risks and consequences for creating lasting direct benefits for recipients and to local governance.

• Carry out field visits, focus group discussions, pair-wise comparison ranking, household observations and interviews with mixed or separate groups of women, girls, boys and men.

• Identify with the population the priority problems and development opportunities for each socio-economic group.

Gender-sensitive targeting
• Establish mechanisms to reach the specific target groups of women, girls, boys and men.

• Assess women’s participation in defining target groups.

• Ensure enough flexibility for programmes to be adjusted if particular target groups of women, girls, boys and men are being adversely affected, using a participatory approach.

Capacity building
• Raise awareness of decision-makers and extension workers on the importance of gender issues in emergency programmes.

• Assess what support women and men need to increase their capacities and skills and if both will benefit from new skills introduced by the food security programme.

• Promote equal access to training, extension and information to women and most vulnerable groups.

• Organize business skills development courses (joint or separate training according to the socio-cultural context) for women, girls, boys and men.

CHECKLIST TO ASSESS GENDER EQUALITY PROGRAMMING IN THE FOOD SECURITY SECTOR
The checklist below is derived from the action section in this chapter, and provides a useful tool to remind sector actors of key issues to ensure gender equality programming. In addition, the checklist, together with the sample indicators in the Basics Chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

<table>
<thead>
<tr>
<th>FOOD SECURITY – GENDER CHECKLIST</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Analysis of gender differences</strong></td>
</tr>
<tr>
<td>1. A participatory needs assessment is undertaken, consulting an equal number of women and men, to gather information on:</td>
</tr>
<tr>
<td>• short- and long-term losses of livelihood assets of women and men (e.g. single season's harvest or permanent loss of land);</td>
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<tr>
<td>• changes in women's and men's access to and control over land or other critical productive resources;</td>
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<tr>
<td>• literacy level and employment rates of female- and male-headed households;</td>
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<tr>
<td>• the coping strategies of women and men in the crisis situation;</td>
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<tr>
<td>• malnutrition rates for girls and boys in terms of stunting, wasting and underweight; and</td>
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<tr>
<td>• micronutrient deficiencies.</td>
</tr>
<tr>
<td>2. The data is analysed and used for programming to ensure activities will benefit women, girls, boys and men directly and indirectly.</td>
</tr>
</tbody>
</table>
### Design

1. The operation is designed to address the different effects of the disaster on women and men and to build on existing/available capacities of women, girls, boys and men in the community.

### Access and control

1. Women’s, girls’, boys’ and men’s access to services, as well as control over productive resources, is routinely monitored through spot checks, discussions with communities, etc.
2. Obstacles to equal access are promptly addressed.

### Participation

1. Women and men are systematically consulted and included in food security interventions.
2. Women and men participate equally and meaningfully in decision-making and management of livelihood assets.
3. Women and men participate equally and meaningfully on registration and distribution committees.

### Training/Capacity building

1. Training and skills development is made available to balanced numbers of women, men and adolescent girls and boys based on a needs assessment.
2. Training and skills development activities are organized at a time and venue convenient for both women and men.
3. Training and information materials are developed based on the education level and knowledge of different socio-economic groups.

### Actions to address GBV

1. Training on GBV-related issues and potential risk factors is conducted for an equal number of female and male humanitarian workers to enable them to provide support to affected persons and direct them to adequate information and counselling centres.
2. Programmes are in place to ensure income-generation activities and economic options for women and girls so they do not have to engage in unsafe sex in exchange for money, housing, food or education — or are exposed in other ways to GBV because of being economically dependent on others.
3. Women and men in the community, including village leaders and men’s groups, are sensitized on violence against women and girls, including domestic violence.

### Targeted actions based on gender analysis

1. Public awareness campaigns on women’s and children’s rights (e.g. right to food) are organized.
2. Vulnerable groups are taught about their property rights (e.g. land) to increase their negotiating power and diminish abusive relationships.
3. Social mobilization is supported to raise awareness on the main (practical and strategic) needs of the most vulnerable groups as part of their empowerment process.
4. Gender disparities are addressed in basic and productive infrastructures to ensure food security for the most vulnerable communities.

### Monitoring and evaluation based on sex- and age-disaggregated data

1. The perceptions of women and men regarding changes in their lives (positive and negative) as a result of food security interventions are recorded and the implications are addressed in programming.
2. Assessments are conducted of the specific changes occurring in the livelihood systems of beneficiary female-, male- and child-headed households.
3. An analysis of how women’s and men’s different needs could have been met more efficiently is prepared and informs future programming.

### Coordinate actions with all partners

1. Actors in your sector liaise with actors in other sectors to coordinate on gender issues.
2. The sector/cluster has a gender action plan, has developed and routinely measures project-specific indicators based on the checklist provided in the IASC Gender Handbook.
RESOURCES


In an emergency, the focus is on primary needs and on meeting them through the delivery of aid as quickly and equally as possible. Complex emergencies have different impacts on women and men and often change households’ dynamics. We need to be sensitive to women’s and men’s different needs and interests in food distribution. In other words, gender perspectives must be mainstreamed from the outset in design, data collection, needs assessment and vulnerability analysis, targeting, programme planning and management and, ultimately, monitoring and evaluation. To this end, we must:

- understand the cultural and social context of women’s and men’s roles as they relate to all aspects of food aid interventions;
- understand how gender relations affect access to and control over food;
- understand the variability of food consumption, health and nutrition between women, girls, boys and men and how these factors affect their use of food;
- analyse how the benefits of food aid interventions can be effectively targeted to both women and men and used to promote gender equality; and
- anticipate any negative impacts food aid may have on women or men (e.g. protection concerns for women), understand the power dynamics in the community and ensure that women’s leadership structures are understood.

**THE RIGHT OF EVERYONE TO AN ADEQUATE STANDARD OF LIVING, INCLUDING FOOD**

- Article 25 of the UDHR and article 11 of the ICESCR guarantee the right to food. The principle of non-discrimination, protected by these two instruments, also applies to the right to food.
- The right to food is realized when every woman, girl, boy and man, alone or in community with others, has physical and economic access at all times to quality, adequate and culturally acceptable food, or means for its procurement. Such access must be guaranteed by the State. The right to adequate food shall not be interpreted in a narrow or restrictive sense which equates it with a minimum package of calories, proteins and other specific nutrients.

**LACK OF TRANSPARENCY AND COMMUNICATION INCREASES RISK TO PEOPLE OF CONCERN**

We must inform communities (host, refugees, IDPs, others) about who qualifies for food aid, the selection criteria, targeting and distribution arrangements (timing, composition and size of food rations), entitlements and so on, so that the intervention does not heighten risk and insecurity for anyone. Consultations with various sectors of the population can help identify potential sources of risk and entry points to resolve tensions early on. During a focus group discussion in Colombia, for example, women reported tensions between people receiving food aid and other members of the community not receiving food who were questioning their exclusion from food aid activities.
WHAT DO WE NEED TO KNOW TO DESIGN AND IMPLEMENT A GENDER-RESPONSIVE FOOD DISTRIBUTION SYSTEM IN EMERGENCIES?

What are the population demographics?
- Total number of households/family members — disaggregated by sex and age.
- Number of single female- and male-headed households and number of households headed by children (girls and boys).
- Number of unaccompanied children, elderly, disabled, pregnant and lactating women.

What is the social, political, cultural and security context? What has changed as a result of the emergency?
- What are the existing power structures (formal and informal) within the community?
- Are there differences between women’s and men’s positions/roles and responsibilities in relation to their ethnicity, religious beliefs?
- Are members of the community equally affected by the emergency? Have women, girls, boys and men been affected differently?
- How many people were previously highly vulnerable? What has changed?
- What are the customs, culture and traditions that limit access to and control over food to any members of the household/community/population at large?
- If there are weapons in circulation, who controls them and who is most at risk? How does this affect access to food?
- What are the religion-based food restrictions/preferences for women and men in the community?
- What are the cultural food restrictions/preferences for women and men in the community?

What are the food security and nutrition needs?
- Is food available, accessible and usable by all members of the household/community/population?
- How do gender disparities affect food insecurity?
- How is the food shared within households? (Intra-household food distribution and consumption: who eats first?)
- What is the nutritional status of the affected population (disaggregated by sex/age)?
- Are there any food taboos or restrictions for women, men, children under 5 and pregnant and lactating women? What are the eating habits of the population as a whole?
- Who receives food aid on behalf of the household? Who decides about its use?

** ACTIONS TO ENSURE GENDER EQUALITY PROGRAMMING IN FOOD DISTRIBUTION **

Ensure equality in targeting and registration
- Collect sex-disaggregated data for planning, implementation and evaluation of food aid.
- Involve women and men equally in programme design and targeting.
- Analyse and understand the impact of food aid intervention on women, girls, boys and men.
- Consult with women and men separately to anticipate and address any negative impact food aid interventions may have on women, girls, boys or men.
- Ensure that each household ration card for free food distributions is issued in a woman’s name.
- Register households receiving food aid to facilitate equal distribution.
- Ensure that female- and adolescent-headed households and other vulnerable groups are included in food distribution lists.
- If polygamy is widely practised, ensure that women are recipients of food aid for themselves and their children.

Ensure equal participation of women, girls, boys and men in decision-making and capacity building
- Assess the different roles of women and men in food management and consumption, both at the community and household levels.
- Ensure equal participation of women and men in food management and asset-creation committees, including at executive-level positions.
- Provide training opportunities to women and men on leadership and negotiation skills.
• Determine factors that might hinder women’s or men’s regular participation in committees, trainings or other activities and address them (e.g. provide child care facilities; schedule the meetings so that they do not coincide with traditional meal/prayer times).

**Distribute food aid equitably**

• Ensure that distribution points are as close and accessible to beneficiaries as possible (distance should be no more than 10 km, Sphere Standards).

• Ensure that the distribution arrangements (time, place, schedule, size and weight, etc.) do not discriminate against vulnerable or marginalized groups.

• Arrange food distribution so it does not add burdens on women.

• Adopt positive measures to redress the discrimination in allocation of food resources (e.g. ensure that children under 5, the sick or malnourished, pregnant and lactating women and other vulnerable groups are given priority for feeding).

• Incorporate strategies to prevent, monitor and respond to violence, including gender-based violence and sexual exploitation and abuse, at all stages of the project cycle, for example early distribution to allow beneficiaries to reach home during daylight.

• Ensure that all people of concern are equally and fully informed about the food aid interventions, for example the size and composition of the ration, beneficiary selection criteria, place and time of distribution, no service required in exchange for receiving the ration and proper channels for reporting abuse cases.

• In consultation with women, anticipate and address any negative impacts that the distribution of food to women and the issuance of food entitlements in women’s names may have on the community and intra-household relationships.

• Consider, to the extent possible, direct/easily accessible distribution to the most vulnerable groups and/or the provision of means of transportation to communities or groups of beneficiaries (e.g. community-owned wheelbarrows).

• Identify, together with communities and partners, safe and easily accessible areas for distribution.

**Ensure monitoring and evaluation take gender issues into consideration**

• Ensure equal participation of women and men in monitoring, evaluation and review of progress and results.

• Together with people of concern, develop monitoring and evaluation tools that specifically look at the impact of food distribution on women’s and men’s vulnerability, including in the design of questionnaires that examine how the food needs of women and men have been addressed.

• Assess the impact of the food aid programme on women and men (needs, access and control over resources, physical and human capital, income and livelihood options, etc.).

• Consult women, girls, boys and men in the identification of remaining gaps and areas of improvement.
CHECKLIST TO ASSESS GENDER EQUALITY PROGRAMMING IN FOOD DISTRIBUTION

The checklist below is derived from the action section in this chapter and provides a useful tool to remind sector actors of key issues to ensure gender equality programming. In addition, the checklist, together with the sample indicators in the Basics Chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

**FOOD DISTRIBUTION – GENDER CHECKLIST**

<table>
<thead>
<tr>
<th>Analysis of gender differences</th>
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</thead>
<tbody>
<tr>
<td>1. Participatory assessments with women, girls, boys and men gather information on:</td>
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<tr>
<td>• roles of women, girls, boys and men in food procurement;</td>
</tr>
<tr>
<td>• cultural and religious food restrictions/preferences for women and men;</td>
</tr>
<tr>
<td>• differences in women's and men's control over and access to food resources;</td>
</tr>
<tr>
<td>• cultural, practical and security-related obstacles women, girls, boys and men could be expected to face in accessing services.</td>
</tr>
<tr>
<td>2. Reasons for inequalities between women, girls, boys and men are analysed and addressed through programming.</td>
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<tr>
<td>3. The gender analysis is reflected in planning documents and situation reports.</td>
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<table>
<thead>
<tr>
<th>Design of services</th>
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<tbody>
<tr>
<td>1. Services are designed to reduce women's and children's time spent getting to, at and returning from food distribution points (e.g. distribution organized at different time intervals to avoid crowds and long waiting time; to ensure timely distribution and to avoid long waits for food delivery by partners).</td>
</tr>
<tr>
<td>2. Services are designed to reduce the burden that the receipt of food aid may pose on women beneficiaries:</td>
</tr>
<tr>
<td>• food distribution points established as close to beneficiaries as possible;</td>
</tr>
<tr>
<td>• weight of food packages manageable and efficient for women (e.g. 25 kg vs. 50 kg bags, etc.).</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Access</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Women's, girls’, boys' and men's access to services is routinely monitored through spot checks, discussions with communities, etc.</td>
</tr>
<tr>
<td>2. Obstacles to equal access are promptly addressed.</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Women and men take part equally (in numbers and consistency) in decision-making, planning, implementation and management of food aid programmes.</td>
</tr>
<tr>
<td>2. Committees with equal representation of women and men are formed for targeting, monitoring and distributing of food items and for determining the needs of vulnerable/marginalized groups.</td>
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<table>
<thead>
<tr>
<th>Training/Capacity building</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. An equal number of women and men are employed in food distribution programmes and have equal access to trainings.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Actions to address GBV</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Both women and men are included in the process of selecting a safe distribution point.</td>
</tr>
<tr>
<td>2. Food distribution is done by a sex-balanced team.</td>
</tr>
<tr>
<td>3. “Safe spaces” are created at the distribution points and “safe passage” schedules created for women and children heads of households.</td>
</tr>
<tr>
<td>4. Distribution is conducted early in the day to allow beneficiaries to reach home during daylight.</td>
</tr>
<tr>
<td>5. Security and instances of abuse are monitored.</td>
</tr>
</tbody>
</table>
## Targeted actions based on gender analysis

1. Women are designated as the initial point of contact for emergency food distribution.
2. Women are the food entitlement holders.
3. Positive measures are adopted to redress the discrimination in allocation of food resources (e.g. ensure that children under 5, the sick or malnourished, pregnant and lactating women and other vulnerable groups are given priority for feeding).

## Monitoring and evaluation based on sex- and age-disaggregated data

1. Sex- and age-disaggregated data on food distribution coverage is collected, analysed and routinely reported on.
2. Monitoring and evaluation tools are developed in consultation with women and men in the target population to specifically look at the impact of food distribution on women's and men's vulnerability, including in the design of questionnaires that examine how the food needs of women and men have been addressed.
3. The impact of the food aid programme on women and men (needs, access and control over resources, physical and human capital, income and livelihood options, etc.) is assessed.
4. Women, girls, boys and men are consulted in the identification of remaining gaps and areas of improvement.
5. Plans are developed and implemented to address any inequalities and ensure access and safety for all of the target population.

## Coordinate actions with all partners

1. Actors in your sector liaise with actors in other sectors to coordinate on gender issues, including participating in regular meetings of the gender network.
2. The sector/cluster has a gender action plan, has developed and routinely measures project-specific indicators based on the checklist provided in the IASC Gender Handbook.
RESOURCES


Emergencies are often characterized by a high prevalence of acute malnutrition and micronutrient deficiency diseases, which in turn lead to increased risk of death among the affected population and in particular among vulnerable groups. Women, girls, boys and men face different risks in relation to a deterioration in their nutritional status in emergency contexts. These different vulnerabilities are related both to their differing nutritional requirements and to socio-cultural factors related to gender. Good nutrition programming must take due account of gender issues at all stages of the project cycle — from participatory assessment and analysis through to surveillance, implementation of interventions, monitoring and evaluation.

How do gender issues affect nutritional status?
- In crisis situations where food is in short supply, women and girls are more likely to reduce their food intake as a coping strategy in favour of other household members. This can contribute to under-nutrition among women and girls.
- Because of social traditions men and boys may be favoured and fed better than women and girls.
- Women may face constraints in accessing humanitarian services, including food, as a result of insecurity, cultural discrimination and limited mobility.
- Women, especially those who are pregnant or lactating, may be disproportionately affected by under-nutrition due to their increased physiological requirements. Teenage pregnancy can lead to poor health and nutritional status for both the baby and the mother.

Breastfeeding Challenges in Transition and Emergency Contexts
Following the October 2005 earthquake in Kashmir, Pakistan, women frequently shared a shelter with distant male relatives and/or non-related men. The lack of privacy and support led many women to stop breastfeeding as they felt uncomfortable exposing their breasts in front of men. This emphasizes the urgent need for lactation corners in emergency settings to ensure continued breastfeeding.

- While remaining the main caretakers of children and other dependents within a household, women take on additional activities to support household food security especially in situations where male heads of households are absent. This often leads to disruption in infant and young child feeding practices and reduced caring capacities.
- Men who are single heads of households may be removed from their normal support structures during emergencies. If they do not know how to cook or care for young children, this will result in greater risk for under-nutrition for those children.
- Single men and boys separated from their families can be at risk of under-nutrition if they do not know how to cook or access food distribution.

No Cooking Skills — Poor Nutrition for Boys
In a refugee camp in northern Kenya southern Sudanese boys were separated from their families. Unsurprisingly, their nutritional status deteriorated because they did not know how to cook or access food distribution.
WHAT DO WE NEED TO KNOW TO DESIGN AND IMPLEMENT GENDER-RESPONSIVE NUTRITION PROGRAMMES?

What are the population demographics?
- Number of households.
- Number of women, girls, boys and men.
- Number of female-, male- and child-headed households.
- Number of persons by age and sex with specific needs (unaccompanied children, disabled, sick, elderly).
- Number of pregnant and nursing women.

What is the social, political, cultural and security context? What has changed as a result of the emergency?
- What are the existing power structures within the community? Do women have their own structures?
- What are the differences between women’s and men’s positions/roles and responsibilities with regard to nutrition?
- Have women, girls, boys and men been affected differently by the emergency?
- Who were the most at risk for nutrition problems? What has changed due to the crisis?
- What factors (social, economic, political or security) limit access to and control over food to any members of the household/community/population?

What is the gender-specific nutritional status, ill health and mortality picture?
- Do data on nutritional status (< -2 z-score weight for height) disaggregated by sex and age indicate that girls and boys are disproportionately affected? If so, what are the reasons for these differences?
- What is the nutritional status of women of reproductive age? What are the levels of anaemia?
- Do mortality data (crude mortality rate and under-5 mortality rate) disaggregated by sex indicate that women, girls, boys or men are disproportionately affected? If so, what are the reasons why this is so?

What are the gender and social determinants of malnutrition?
- Are there any socio-cultural practices, taboos, cultural beliefs or caring practices that may affect women’s, girls’, boys’ and men’s nutrition status differently?
- How is food distributed within the home between women, girls, boys and men?
- Who within the household has control over resources and does this impact on access to food and feeding habits?
- Are there any differences in breastfeeding practices for girl or boy babies? Is there a negative impact?
- What are the negative effects that the emergency situation may have had on traditional caring practices?
What is the food and food security access and availability situation?
• Are there differences for women, girls, boys and men in terms of access to food?
• If boys and men are separated from families do they have cooking skills? Can they prepare food for themselves?
• If women are heading households/family groups are they accessing sufficient food? How do elderly women and men access food and does the food basket meet their specific needs?
• How do women, girls, boys and men with disabilities access food and does the food basket meet their specific needs?
• Is there a change in work patterns (e.g. due to migration, displacement or armed conflict) resulting in a change of roles and responsibilities in the household and inhibiting or preventing certain women or men from accessing food?
• What nutrition interventions were in place before the current emergency? How were they organized and did they affect women, girls, boys and men differently?
• How do school children access meals while in schools?
• Do households have access to micronutrients sources?

Address micronutrient deficiencies and nutrition needs
• Ensure that vaccination campaigns and vitamin A supplementation reach women, girls and boys equally.
• Promote fortification of food aid commodities to ensure equal access to micronutrient-rich foods.
• Involve women, girls, boys and men in the design, management and assessment/monitoring of nutrition-related services and control of distribution of supplies.

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Community mobilization and participation
• Involve women, girls, boys and men in participatory assessments, defining health and nutrition priorities, planning solutions, policies, interventions and evaluation from the outset.
• Identify the capacities and skills among the affected population and work with them to build on their capacities and develop community-based sustainable nutrition programmes to avoid medium- and long-term dependence on external assistance.
• Develop community-based nutrition monitoring programmes, including the distribution and use of food within the home and train community nutrition workers on the gender dimensions of health and nutrition.

Treatment of moderate and severe acute malnutrition
• Establish therapeutic feeding centres at both facility and community levels and ensure a gender balance of health workers managing the centres.
• Implement targeted supplementary feeding programmes achieving maximum coverage for all through decentralized distribution.

Technical support and capacity building
• Incorporate in the team as many women and men as possible from the affected/displaced population where possible and appropriate.
• Train local health and nutrition workers on gender-sensitive service delivery.
• Review national guidelines on various aspects of nutrition to ensure gender sensitivity.
• Provide skills in emergency preparedness in relation to gender and nutrition.

Conduct an in-depth nutrition survey
• Ensure gender-balanced nutrition assessment teams, including female translators.

Actions to ensure gender equality programming in nutrition

Rapid assessment/baseline
• Conduct a rapid participatory assessment with women, girls, boys and men of diverse backgrounds to ensure the integration of gender perspectives in the initial nutritional status analysis to identify groups most at risk.
• Obtain information on age- and sex-specific incidence of illnesses, nutrition indicators and health conditions.

Address the nutritional and support needs of at-risk groups
• Consult with key at-risk groups (e.g. pregnant and lactating women) to identify effective and accessible supplementary feeding programmes.
• Set up monitoring systems so that the different groups (by age and sex) benefit from the nutrition programmes.
• Support, protect and promote exclusive breastfeeding and appropriate young child-feeding practices through training of appropriate service providers and information campaigns, as well as the development and application of relevant policies and monitoring.
• Review existing data on nutrition and health to ensure it is disaggregated by sex and age, including statistical significance test.

• Carry out a nutrition survey and identify population groups that are hard to reach and/or marginalized and analyse the data by sex and age.

CHECKLIST TO ASSESS GENDER EQUALITY PROGRAMMING IN THE NUTRITION SECTOR

The checklist below is derived from the action section in this chapter, and provides a useful tool to remind sector actors of key issues to ensure gender equality programming. In addition, the checklist, together with the sample indicators in the Basics Chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

**NUTRITION – GENDER CHECKLIST**

**Analysis of gender differences**

1. Information on the nutritional needs, cooking skills and control over resources of women, girls, boys and men is gathered through participatory assessments.
2. Reasons for inequalities in malnutrition rates between women, girls, boys and men are analysed and addressed through programming.
3. Information is collected on the cultural, practical and security-related obstacles women, girls, boys and men could be expected to face in accessing nutritional assistance and measures taken to circumvent these obstacles.
4. The gender analysis is reflected in planning documents and situation reports.

**Design of services**

1. Nutritional support programmes are designed according to the food culture and nutritional needs of the women (including pregnant or lactating women), girls, boys and men in the target population.

**Access**

1. Women’s, girls’, boys’ and men’s access to services is routinely monitored through spot checks, discussions with communities and obstacles to equal access are promptly addressed.

**Participation**

1. Women and men are equally and meaningfully involved in decision-making and programme design, implementation and monitoring.

**Training/ Capacity building**

1. Training courses on nutrition and gender issues are held for women, girls, boys and men.
2. An equal number of women and men from the community are trained on nutrition programming.
3. An equal number of women and men are employed in nutrition programmes.

**Actions to address GBV**

1. Both women and men are included in the process of selecting a safe distribution point.
2. Food distribution is done by a sex-balanced team.
3. “Safe spaces” are created at the distribution points and “safe passage” schedules created for women and children who are heads of households.
4. Special arrangements are made to safeguard women to and from the distribution point (e.g. armed escort if necessary).
5. Security and instances of abuse are monitored.
# Targeted actions based on gender analysis

1. Unequal food distribution and nutrition rates within the household are addressed through nutritional support as well as programmes to address underlying reasons for discrimination and to empower those discriminated against.

# Monitoring and evaluation based on sex-and age-disaggregated data

1. Sex- and age disaggregated data on nutrition programme coverage is collected:
   - percentage of girls and boys aged 6-59 months who are covered by vitamin A distribution;
   - percentage of girls and boys under 5, pregnant and lactating women in the target group who are covered by supplementary feeding programmes and treatment for moderate acute malnutrition;
   - percentage of boys and girls under 5 who are covered by nutrition surveillance;
   - percentage of women, girls, boys and men who are still unable to meet their nutritional requirements in spite of ongoing nutritional programming; and
   - exclusive breastfeeding rates for girls and boys.

2. Plans are developed and implemented to address any inequalities and ensure access and safety for all of the target population.

# Coordinate actions with all partners

1. Actors in your sector liaise with actors in other sectors to coordinate on gender issues, including participating in regular meetings of the gender network.

2. The sector/cluster has a gender action plan, has developed and routinely measures project-specific indicators based on the checklist provided in the IASC Gender Handbook.

## RESOURCES

