

Gender Analysis for USAID NAWIRI

Statement of Work (SOW)

Date	Services Performed By:	Services Performed For:
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Problem Statement

USAID NAWIRI is a Food for Peace-funded program designed to reduce persistent acute malnutrition in four counties of northern Kenya: Turkana, Samburu, Marsabit and Isiolo. Mercy Corps’ consortium—comprised of Save the Children, Research Triangle Institute (RTI), Centre for Humanitarian Change (CHC), the BOMA Project, African Population and Health Research Center (APHRC), Caritas Lodwar, and Caritas Maralal—will implement USAID NAWIRI in Turkana and Samburu counties with an overall budget of USD \$100 million. CRS and its consortium will implement USAID NAWIRI in Marsabit and Isiolo counties.

Turkana and Samburu are home to a population in which 75% live in poverty; less than 70% of households register acceptable food security scores and only 25% of children 6-23 months receive a minimally acceptable diet. Global acute malnutrition levels are consistently above emergency thresholds, peaking as high as 35% in Turkana during recent drought. Malnutrition, particularly among adolescent girls, reinforces intergenerational cycles of deprivation through early pregnancy. Key drivers underlying poor nutrition outcomes in northern Kenya include decades of under-investment; insecurity and conflict; low levels of education and literacy; gender inequalities; high dependence on natural resources; and climate change impacts that are accelerated by population growth, environmental degradation and rapid demographic shifts.

Over the course of five years, from October 2019 through September 2024, USAID NAWIRI will maintain a robust learning and research agenda, framed by priority thematic areas of inquiry (AoI), which this gender analysis will inform and complement. Through research and learning activities that are designed and executed in close collaboration with county government, civil society, private sector, and communities themselves, this agenda will fill critical gaps in our understanding of the complex causality of persistent acute malnutrition in Samburu and Turkana, while providing valuable insight into the combination of integrated activities that show promise for sustainably reducing persistent acute malnutrition in the local context. Findings of research and learning activities that demonstrate promise will be used to co-create and execute—together with county partners—integrated multi-sector activities that deliver lasting results for nutrition resilience at scale in Samburu and Turkana. These activities will support the four purpose areas of USAID NAWIRI’s ToC that include Purpose 1: Vulnerable households maintain food security despite exposure to shocks and stresses; Purpose 2: Vulnerable households have low disease burden; Purpose 3: Stable and resilient nutrition enabling environment; and Purpose 4: Formal institutions monitor, learn and adapt to more effectively manage and scale interventions to prevent and respond to acute malnutrition.

Key Research Objectives

The fundamental objective of this analysis is to identify, understand, and describe gender differences and the impact of gender inequalities as they relate to persistent acute malnutrition in Turkana and Samburu. Gender and identity can either undermine or support nutrition resilience. In Turkana and Samburu—like much of the world—women, men, adolescents and youth have unique and intersecting identities and live within complex social systems that dictate roles, responsibilities, power dynamics, decision-making and relationships.

While patriarchy is a major influencer of social and cultural norms in both Turkana and Samburu, both counties have unique socio-cultural and livelihood dynamics that contribute to persistent acute malnutrition. Intra-household and inter-personal dynamics are a significant influencing factor across different household types such as male-headed, female-headed and polygamous households, as well as the life cycles of diverse women and men. Of note are the gender barriers that adolescent girls face, considering their early debut to motherhood and the influence of older female relatives on their health and nutrition practices in these contexts. Diverse livelihood patterns and ethnicity also shape gender relations differently. For example, pastoralists, agro-pastoralists, farmers, and fishers experience and uphold different gendered divisions of labor. Women of reproductive age in these communities have diverse workloads and engagements in productive, reproductive and community roles. Women, men, adolescents and youth also have different levels of access to resources such as water, markets, and health and nutrition services. Across all communities, women and girls must balance extreme time poverty with the uptake of good maternal and child health care practices.

Further investigation is also needed to understand how gender and social relations limit or enable food and nutrition security during stable times and times of crises and shocks. This will require an understanding of the different levels of access by women and men to key resources and services; how individual and household needs are prioritized; how decisions are made; how mobility and time use patterns vary among different groups; and how specific cultural norms such as prohibited foods hinder food and nutrition security among women of reproductive age. In both counties, social expectations of how women and men should behave in households and communities at different stages of their lives also influence food and nutrition security. Geographic and migration factors, such as how patterns of gender relations differ in rural and peri-urban settings, will also be considered in this gender analysis. Different forms of gender based violence (GBV), mainly experienced by women and girls, are contributing factors to food and nutrition insecurity. It is critical that USAID NAWIRI interventions do not inadvertently increase GBV.

Specific objectives of the gender analysis are to:

- Identify and describe specific gender norms and how they influence women's and men's gender roles, decision making, access to resources and services related to food and nutrition security at household and community levels and during different seasons and times of crises/shocks; this will consider differences across age groups, cultures, livelihood patterns, geographic patterns and dis/ability in each county. An understanding of gender identities related to masculinity and femininity in the different communities and throughout the life cycle will be built with the awareness of how they evolve and shape gender relations, and what opportunities exist to transform gender identities that undermine gender equality in food and nutrition

security. Resources and services include those related to markets, livelihoods, health, nutrition and WASH and how women and men access and interact with them. Harmful gender norms as they relate to food and nutrition security such as prohibited foods and the beading practice amongst Samburu girls will also be investigated. There will be an analysis of the potential impact of program interventions on the above. *This first objective relates to Purposes 1 and 2 of the theory of change focusing on food security and the disease burden.*

- Review relevant formal and informal laws, policies and institutional systems and structures related to gender equality and how these influence food and nutrition security; this process will identify enablers and barriers to gender equality and women's empowerment for food and nutrition security and the level of influence that women and youth have in decision-making processes at community and local government levels. Specifically, there will be a focus on local government and community leadership structures, local organizations and private sector actors related to livelihoods, natural resource management, and peace building and conflict resolution, especially where conflict is a significant driver of persistent acute malnutrition. Institutional capacity gaps and opportunities to support gender equality and women's empowerment in the two counties will be identified under this objective. *This relates to Purposes 3 and 4 of the theory of change focusing in a stable and enabling environment, learning and institutions.*
- Based on the analysis of the first two objectives, identify which specific gender and age drivers that USAID NAWIRI must address and at which point in the ToC to achieve the program's goal; make recommendations on how to reduce gender barriers faced, especially by women and girls, in ensuring food and nutrition security; this may include specific recommendations on how women's workloads could be reduced, how men can take on more child care and share decision making power, and how gender based discrimination can be reduced within formal and informal institutions such as health facilities.
- Explore how women's and girls' empowerment can be safely navigated by the program, communities and local government for food and nutrition security; potential negative consequences of program interventions on gender relations such as increased work loads of women from their participation in program activities and the risk of GBV arising from changing power relations between women and men will be identified and recommendations made on how these can be mitigated.

Justification of Research Questions

Despite years of investment and notable progress against other key development indicators, persistent acute malnutrition remains stubbornly high in Samburu and Turkana. Undernutrition causality is complex, dynamic, and specific to local contexts. In January 2020, USAID convened stakeholders from across the USAID NAWIRI consortia, which included County participants, for a Gender, Youth and Social Dynamics Consultation in Isiolo, Kenya. Questions in this Gender Analysis seek to fill knowledge gaps in relation to the intersection of gender, youth, social dynamics and malnutrition that were identified during this consultation. The analysis will examine how laws, policies, regulations and institutional practices; cultural norms and beliefs; gender roles, responsibilities, and time used; access to and control over assets and resources; and patterns of power and decision-making influence the behavior, perceptions and choices afforded to women, men, adolescents and youth as it relates to acute malnutrition. Questions across these five domains of gender equality and women's empowerment (GEWE) will be

answered through the Gender Analysis and the Learning and Research Agenda. They are organized within the following four focus areas that are key drivers of acute persistent malnutrition:

FOCUS AREA 1: How do adolescents and youth exercise personal agency as it relates to their sexual and reproductive health and behaviors? Turkana and Samburu have two of the highest rates of early pregnancy in Kenya at 26% and 20%, respectively.¹ Multiple studies have established that adolescent pregnancy increases risk of poor infant nutrition outcomes, including preterm birth, low birth weight, and small for gestational age.² Previous nutrition deprivations from before their own birth, limited self-agency, harmful cultural practices and early marriage, poverty, exclusion, and reliance on/exposure to risky practices, including transactional sex, are among the many potential intersecting drivers of early pregnancy and poor maternal and young child health and nutrition outcomes in Turkana and Samburu. An understanding of the beliefs, practices and decision-making—among girls, boys and their caregivers—related to early marriage, early pregnancy, sexual practices, and sexual and reproductive health is essential to informing approaches and activities that will interrupt the intergenerational cycles of malnutrition that occur through early childbearing. Older men and women are custodians of culture and wield significant influence on whether a practice or a norm is upheld or discontinued. They also provide a significant amount of psychosocial support and mentorship to adolescent girls and young women during significant life events such as rites of passage into adulthood, marriage, pregnancy, the birth of children and their upbringing and in this way enhance resilience capacities in households³. In Samburu, the older generation take pride in seeing long held practices transferred from generation to generation e.g., a study of the beading practice in Samburu brought out the influence that older women and men have in the continuing of the practice. In Turkana, women’s role involves guiding and counseling girls to be effective members of society. While younger men and husbands travel to seek pasture for their livestock, older women and men are left with pregnant or lactating women and therefore have significant influence on household decisions⁴. This influence likely extends to the lives of adolescents, youth, young women and young men, as well as household nutrition habits.

And yet a gap in contextual knowledge exists as it relates to sub-populations in Turkana and Samburu. How do adolescents view certain practices that are both harmful to girls and accepted by the community, such as “beaded girls” in Samburu? How does broader conflict and household violence influence the norms around relationships and sex among adolescents? Do adolescent girls and boys have agency in health-seeking behavior, sexual behavior and sexual debut? What social and gender norms do families and communities uphold related to sex and reproductive health that contribute to persistent acute malnutrition? Who are the gatekeepers of these norms and how can the program work with them to transform harmful norms? How do the Samburu age-sets influence their sexual practices, decision-making and social capital? Who do pregnant girls and young mothers rely on for advice on child care practices? How well-positioned are formal institutions in addressing gaps around adolescent sexual and reproductive health and promote gender equitable attitudes and behaviors?

1 Kenya 2014 Demographic and Health Survey

2 Gibbs, CM., Wendt A., Peters, S., Hogue, CJ. (2012) The Impact of Early Age at First Childbirth on Maternal and Infant Health. *Paediatric and Perinatal Epidemiology*, 26(s1), 259-284.

3 The Samburu Women’s Trust (2016) The Unspoken Vice in Samburu Community. Samburu Women’s Trust Research Report. [https://www.ngeckkenya.org/Downloads/SWT%20Girl-Child%20beading%20Research%20in%20\(Laikipia,%20Samburu%20and%20Marsabit\)%20Counties.pdf](https://www.ngeckkenya.org/Downloads/SWT%20Girl-Child%20beading%20Research%20in%20(Laikipia,%20Samburu%20and%20Marsabit)%20Counties.pdf)

4 Wawire, V. (2003) Gender and the Social and Economic Impact of Drought on the Residents of Turkana District in Kenya; Gender Issues Research Report Series, no. 21; <https://media.africaportal.org/documents/girr-21.pdf>

FOCUS AREA 2: What are the attributes, behaviors and roles that define masculinity within Turkana and Samburu societies? Men in Samburu and Turkana are shaping their identities against a backdrop of poverty, conflict, climate change and shifting livelihoods. A growing body of evidence shows that engaging fathers has positive outcomes for maternal, infant, and young child nutrition as they play a crucial role in providing instrumental and emotional support to mothers and children. Male engagement is connected to improved weight gain in preterm infants, improved breast-feeding rates and uptake of maternal health services. Research has also indicated that men themselves, as well as their partners, would prefer that they play a more active role, although the societal and health system norms often do not support their engagement. However, we don't know if this global evidence holds true in the Turkana and Samburu contexts. How do men, women, adolescents and youth view men's ideal roles in the reproductive and productive sphere? What barriers and opportunities exist for men to realize these ideals? How does the identity of pastoralists as warriors influence men's behavior? Is GBV accepted by men and under what circumstances (i.e., his wife has not prepared a meal)? How is GBV perceived and addressed in the community and by formal institutions? How does community and institutional response impact survivors of GBV, especially women and girls? What leverage points (i.e., rituals, relationships and livelihoods) exist for redefining healthier masculinities and encouraging positive social and behavior change (i.e., equitable decision-making) for reducing persistent acute malnutrition? To what extent do local attitudes and perceptions influence formal institutions in the delivery of information and services?

FOCUS AREA 3: How do women and men in Turkana and Samburu define and experience (or not experience) women's empowerment? Scholars define women's empowerment as the ability to claim enabling resources, exercise voice and agency, and make decisions that directly affect their lives. A wealth of evidence shows that women's empowerment is associated with improved household dietary diversity and improved optimal infant and young-child feeding practices. This positive correlation is linked to the gender roles that are subscribed to women in the household. Among Samburu pastoralists, "women are foremost constituted as food givers, responsible for providing sustenance to children and elders."⁵ We also know that women's workload, particularly around water, has serious implications for child care practices. And yet, there is a lack of evidence on how Turkana and Samburu women exercise power (or lack thereof) within various domains of empowerment. Analysis will focus on domains that are critical for improving maternal and child nutrition outcomes including: What role do women play in decision-making and access to household resources and expenditures? How do women exercise agency related to family planning, health-seeking behaviors and MIYCF practices? Does this change across differently-structured households? How are responsibilities in the reproductive sphere shared among women and girls, men and boys? Do women have and/or want more access to economic opportunities? What are the views of men and community leaders on women's empowerment? What are formal institutions actively doing to enhance women's empowerment? What are women's attitudes toward intimate partner violence and other forms of gender-based-violence? How do they view the wider community's acceptance or non-acceptance of GBV? This analysis will also seek to understand the potential risks and harm for both women and men when interventions seek to empower women (i.e., increased economic opportunities for women may also increase their time poverty or exposure to violence).

5 Holtzmann, J. (2002). Politics and Gastropolitics: Gender and the Power of Food in two African Pastoralist Societies; p. 1045.

FOCUS AREA 4: How do women, men, adolescents and youth define shocks and stresses, their vulnerabilities to these shocks and stresses, and their capacities to build resilience? Evidence has established a connection between climate change, migration and gender disparities, but the data is scarce. There is little known on how women and girls are affected (as those left behind or those who migrate) and how this impacts household nutrition security, MIYCF practices and care-seeking behavior. When drought forces men to migrate with their herds, women report more opportunities as well as greater roles at home and increased violence.⁶ When women and girls are compelled to migrate to urban areas for work, they also face risks. How do women and girls, men and boys view vulnerabilities and capacities tied to different shocks and stresses?

Tables 1 and 2 organize these questions within a matrix of the five domains of GEWE and USAID NAWIRI’s four purposes. Table 1 includes research questions for the Gender Analysis and Table 2 includes questions that will be integrated into the Learning and Research Agenda (there is overlap of some questions).

Table 1: Illustrative Key Questions for the Gender Analysis

Thematic Area/Domain	Vulnerable households maintain food security despite exposure to shocks and stresses	Vulnerable households have low disease burden	Stable and resilient nutrition enabling environment	Formal institutions monitor, learn and adapt to more effectively manage and scale interventions to prevent and respond to acute malnutrition
Patterns of Power and Decision-making	<p>What leverage points (i.e., rituals, relationships) exist for redefining healthier masculinities?</p> <p>What are the key “win behaviors” among men that, if adopted, would support improved food and nutrition security (i.e., men’s engagement in child care; shared water collection)?</p> <p>What household spending decisions do women and men make separately and what household decisions are made jointly?</p>	<p>How and what decisions do women and men make as it relates to family planning, health-seeking behaviors and MIYCF practices?</p> <p>Do adolescent girls and boys have agency in their own health-seeking behavior, sexual behavior and sexual debut?</p> <p>If yes, what decisions do they make and how? If no, who makes these decisions?</p>		

⁶ Abebe, M.; “Climate Change, Gender Inequality and Migration in East Africa,” Washington Journal of Environmental Law & Policy. Vol. 4:1.

Cultural Norms and Beliefs	<p>What are the specific sociocultural norms that influence food and nutrition security of women and men, boys and girls (i.e., gender based food taboos, dietary patterns of pregnant and lactating women and girls)?</p> <p>How does broader conflict and household violence influence the norms around relationships and sex among adolescents?</p> <p>How do the Samburu age-sets influence behavior (i.e., sexual practices and social capital)?</p>	<p>What sociocultural norms and practices may contribute to increased risk of STI/HIV transmission, particularly among girls?</p> <p>How do adolescents view practices that are harmful to girls and accepted by the community (i.e., female genital mutilation, "beaded girls" in Samburu)?</p>	<p>What are the perceptions of violence against women among women, men and young people?</p> <p>Is GBV acceptable or not acceptable in the community and in what contexts?</p> <p>Does seasonality affect interpersonal violence and how so?</p>	
Gender Roles, Responsibilities and Time Use	<p>How are responsibilities in the reproductive sphere allocated among women and girls, men and boys?</p> <p>How do men, women and youth view men's ideal roles in the reproductive and productive sphere?</p>	<p>How does time use vary among women, men and youth in relation to MIYCF practices?</p>	<p>What types of risks do adolescent girls and women face when collecting water or fuel?</p> <p>What economic opportunities do women and youth identify as safe, secure and possible?</p> <p>What are the perceptions and roles of women and men in both conflict and peace building?</p>	<p>How are social and livelihood based interventions by formal institutions designed to respond to gender differences in roles, responsibilities and time use?</p>
Access to and Control over Assets and Resources	<p>What household resources do women have access to within the home?</p> <p>Do women have and/or want more access to economic opportunities?</p> <p>Are men supportive of women earning income?</p> <p>How do vulnerabilities and capacities tied to different shocks and stresses differ across groups?</p>		<p>What barriers and opportunities to safe livelihoods are identified by men, women, adolescents and youth?</p>	<p>Do women, men and young people feel they have access to someone with political voice who can raise concerns on their behalf?</p>
Laws, Policies, Regulations & Institutional Practices	<p>What are the laws, policies, regulations and institutional practices at the national, county, sub-county and local levels that support or inhibit gender equality (i.e., GBV, child marriage and child custody) across Turkana and Samburu? Are they practiced and enforced?</p>			

Table 2: Illustrative Key Questions for the Learning and Research Agenda

Thematic Area/Domain	Vulnerable households maintain food security despite exposure to shocks and stresses	Vulnerable households have low disease burden	Stable and resilient nutrition enabling environment	Formal institutions monitor, learn and adapt to more effectively manage and scale interventions to prevent and respond to acute malnutrition
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Patterns of Power and Decision-making	What decisions do women make in securing or allocating household resources? <i>Longitudinal Study</i>	How and what decisions do women and men make as it relates to family planning, health-seeking behaviors and MIYCF practices? <i>Longitudinal Study and MIYCN Study</i>		What is the level of meaningful representation of women and young people in relevant formal institutions? <i>Political Economy Assessment</i>
Cultural Norms and Beliefs	What are the specific sociocultural norms that influence food and nutrition security of women and men, boys and girls (i.e., gender based food taboos, dietary patterns of pregnant and lactating women and girls)? <i>Longitudinal Study</i> Who decides at what age a boy or girl marries? <i>Longitudinal Study</i>		Does seasonality affect interpersonal violence and how so? <i>Longitudinal Study</i>	What is the capacity of formal institutions to work within and also transform existing sociocultural norms and beliefs to promote positive behavior change? <i>Political Economy Assessment</i>
Gender Roles, Responsibilities and Time Use	How do men, women and youth view men's ideal roles in the reproductive and productive sphere? <i>Longitudinal Study</i>	How does time use vary among women, men and adolescent girls related to WASH? <i>Longitudinal Study</i> How does time use vary among women, men and youth in relation to MIYCF practices? <i>Longitudinal Study</i>	What types of risks do adolescent girls and women face when collecting water or fuel? <i>Longitudinal Study</i>	How are social- and livelihood-based interventions by formal institutions designed to respond to gender differences in roles, responsibilities and time use? <i>Political Economy Assessment</i>
Access to and Control over Assets and Resources			What are the key barriers and enablers that influence men, women, adolescents and youth to seek health services? <i>CHS Research (8)</i> What role do women and youth play in water management? <i>WASH Research (7)</i>	
Laws, Policies, Regulations & Institutional Practices	What are the laws, policies, regulations and institutional practices at the national, county, sub-county and local levels that support or inhibit gender equality (i.e., GBV, child marriage and child custody) across Turkana and Samburu? Are they practiced and enforced?			

Justification of Research Design and Methods

Sampling Framework

The gender analysis will use maximum variation sampling, which aims at capturing and describing the essential themes across different key populations; this also allows for a smaller sample size. **This analysis does not seek to present statistically generalizable information.** The scope of this analysis carefully balances the need to ensure

data validity with considerations for feasibility, time and cost required for data collection and analysis. The research team will collect data at two sites in Turkana and two sites in Samburu: pastoral/agro-pastoral and peri-urban.

Table 3: Sampling Framework for Turkana

	Pregnant Women and Mothers with Children U5 in Turkana	Fathers in Turkana	Adolescent Girls, Unmarried, in Turkana	Adolescent Boys, Unmarried, in Turkana	Key Informants (inclusive of elders) in Turkana	Turkana TOTAL
Pastoral and agro-pastoral	2 FGD	2 FGD	2 FGD	2 FGD		
	6 SSI	6 SSI				
Peri-urban, including fisheries	2 FGD	2 FGD	2 FGD	2 FGD		
	6 SSI	6 SSI				
TOTAL	4 FGD	4 FGD	4 FGD	4 FGD	0 FGD	16 FGD
	12 SSI	12 SSI	0 SSI	0 SSI	4 SSI	28 SSI

Table 4: Sampling Framework for Samburu

	Pregnant Women and Mothers with Children U5 in Samburu	Fathers in Samburu	Adolescent Girls, Unmarried, in Samburu	Adolescent Boys, Unmarried, in Samburu	Key Informants (inclusive of elders) in Samburu	Samburu TOTAL
Pastoral and agro-pastoral	2 FGD	2 FGD	2 FGD	2 FGD		
	6 SSI	6 SSI				
Peri-urban, including fisheries	2 FGD	2 FGD	2 FGD	2 FGD		
	6 SSI	6 SSI				
TOTAL	4 FGD	4 FGD	4 FGD	4 FGD	0 FGD	16 FGD
	12 SSI	12 SSI	0 SSI	0 SSI	4 SSI	28 SSI

The four sites (see Tables 3 and 4 for details) are diverse in terms of population; access to services; current and historic trends in global acute malnutrition; health indicators (e.g., access to water and sanitation services and reported disease burden); percent of population on safety nets; rate of change in malnutrition spikes and dips pre- and post-shock; and socio-economics. In addition, the approach aligns with assessments and formative data collection planned within the broader Learning Agenda as outlined in the “Learning and Evidence Gap Analysis Overview” submitted to USAID.

The team will conduct a total of **32 focus group discussions (FGD)** and **56 semi-structured and/or key informant interviews (SSI)** across the following key populations: pregnant women and mothers with children under 5; fathers; unmarried adolescent girls; unmarried adolescent boys; and elders/community leaders.⁷ Following best practice, this analysis will include **four FGDs and 12 SSIs across key populations with shared**

⁷ FGDs will potentially include gathering information from adolescents who may be below 18 years of age and could require IRB clearance. Expedited IRB review would require 2-3 weeks.

characteristics, as well as KII with critical state and non-state actors available at both county and sub-county level. Evidence shows that 80% of insights are captured by just two to three FGDs among participants with the same characteristics and 90% of insights are captured by just 3 to 6 FGDs of the same characteristics.⁸

Feasibility requires that we will not assign too many specific characteristics to each key population, which would result in too many different groups to collect data from, which may end up with an exhaustive FGD data collection effort that generates so much data that becomes challenging to analyze. This analysis will be iterative and flexible; if the data reveal substantial differences among groups across livelihood zones, the team will revise its data collection plan for the analysis and/or inform additional data collection in the subsequent year. Key populations will also be more targeted where necessary (i.e., mothers of children under 2 to inform specific feeding practices).

Research Methodologies

Qualitative methods offer opportunities to build trust between an interviewer and a group of participants while also being flexible, voluntary and allowing participants to co-create topics of inquiry. This analysis will employ a desk review and qualitative methods to investigate individual, household, community and institutional gendered attitudes and beliefs, behaviors and aspirations that contribute to persistent acute malnutrition or offer entry points for positive social and behavior change. Sensitive issues (i.e., GBV) will not be explored in individual interviews and will be approached carefully, asking about community acceptance and perceptions around such issues and not individual experiences. Informed consent will be obtained from all respondents taking into consideration their different literacy levels. Methodologies include:

- **Desk review:** A substantial body of gender- and nutrition- related research on Northern Kenya exists. The Kenya “National Demographic and Health Survey” was released in 2014 and has a wealth of region-specific data on gender equality and women’s empowerment. USAID’s investments have yielded substantial data as well, such as PREG’s Gender Analysis in 2018. Mercy Corps has also conducted several assessments as a part of its Girls Improving Resilience through Livestock (GIRL) project and conducted a qualitative study, *Wealth and Warriors*, on the differential individual vulnerabilities and capacities within Turkana households during drought. There is also a body of literature that examines the intersection of persistent acute malnutrition and gender, including an ethnographic study on factors influencing MIYCF behaviors, beliefs, contexts and environments in Turkana⁹ conducted by NAWIRI’s Research and Design Lead in Turkana county.
- **Focus group discussions (FGD):** Discussions will be conducted with a diverse cross-section of the population in Turkana and Samburu. These will include **adolescent consultations**, which are a creative and flexible methodology that gives adolescents a safe environment to discuss meaningful and sensitive issues and identify pathways that support positive social change and healthier lives. The methodology asks participants to create, through drawing, personas and reflect and/or project their own experiences onto the created persona.
 - **Trend analysis:** Within the focus group discussions, trend analysis will ask participants to discuss various changes related to gender and identity that have occurred within the community over a

⁸ Guest G, Namey E, and McKenna K (2016) How many focus groups are enough? Building an evidence base for nonprobability sample sizes. Sage Journals, Volume 29, Issue 1, 3-22.

⁹ Peltó G and Thuita FM (2016): Focused Ethnographic Studies of Infant and Young Child Feeding Behaviours, Beliefs, Contexts, and Environments in Vihiga, Kitui, Isiolo, Marsabit, and Turkana Counties in Kenya. Monograph, March 2016.

period of time. Examples include the impact of livelihood transitions on the roles and identities of men and women; women's decision-making in the household and community; and how capacities to respond to shocks and stresses change or stay the same. Important events will be used to identify the period of time explored, as people often cannot relate when just dates are provided.

- **Social mapping:** Within the focus group discussions and adolescent consultations, social mapping will ask participants to develop an inventory of resources within the community (i.e., modes of transport, water sources, health services, GBV services, schools, public service buildings) and within the household; as well as identify the location of community resources in relation to the households and how this changes across seasons and/or migration. Social mapping will also be used to track mobility patterns of women and girls, especially in terms of safety.
- **Semi-structured interviews (SSI):** Informants will include a cross-section of community leaders, older women and men, and those in traditional and formal governance structures. These may include interview guides with a limited number of preset questions that will also allow flexibility for informants to elaborate on specific topics if desired.

Data Collection and Management

- **Data Collection:** This Gender Analysis will be co-led by a Consultant and the USAID NAWIRI Gender, Youth and Social Dynamics Lead, with support from Mercy Corps' Regional Gender Advisor and Deputy Chief of Party. The research team will comprise ten members (five men and five women), inclusive of those on the USAID NAWIRI team and short-term researchers. The Consultant and the GYSD Lead will simultaneously each lead a team (Team A and Team B) to collect data in either Turkana or Samburu. Teams A and B will be further separated into five two-person teams to include both an interviewer and a note-taker for every FGD or SSI. Each two-person team will conduct 6 FGDs and 12 SSIs over the course of 6 days. In ensure that all the views from the focus group are capture, voice recorders will be use during discussion after getting appropriate consent. Immediately following each FGD or SSI, the team will review all written notes for accuracy and clarity. With the support from the NAWIRI Research and M&E teams, each two-person team will be responsible for translating and transcribing each recording into a typed document. All researchers will be trained in qualitative research methods and principles, notetaking and best practices in transcription.
- **Data Protection:** In all FGD and SSI, no name will be used, but participants will be given a unique respondent code that will be used for identification and analysis of the collected data. Consent will be secured, verbally and in writing. Transcripts will be encrypted, using Axcrypt, and emailed to the Consultant and the NAWIRI GYSD Lead and M&E Lead. Transcripts will live in an encrypted folder on a shared Google Drive with limited access.
- **Coding the Data:** The Consultant and GYSD Lead will use qualitative data analysis software (i.e., Nvivo or Atlas.ti) to code the data.
- **Analyzing the Data:** The Consultant will engage the research team, USAID NAWIRI team members, technical experts and local stakeholders in a **Participatory Data Analysis and Interpretation Workshop**.

The ultimate results of the workshop will include 1) a draft of key findings backed by evidence and 2) an interpretation of each finding that includes similarities and differences between key populations.

Preliminary Results Application Plan

- High-level findings will be shared with the USAID NAWIRI team, county governments and other stakeholders in Turkana and Samburu. Adolescents will share their drawings and findings from the Adolescent Consultations with their communities through facilitated discussions where possible.
- Findings and recommendations will inform the design of various studies and pilots while complementing findings of other formative and implementation research to inform the design of multi-sectoral approaches.

Consultant Competencies

- Advanced degree in gender and women studies, sociology, international development, rural development or related field required.
- Broad knowledge of gender and development issues as they relate to nutrition and food security.
- Experience in qualitative research methods, coding and analysis, as well as gender-related research within the development context.
- Knowledge of gender, youth and social dynamics in Northern Kenya and/or the ASALs; experience working in Northern Kenya preferred.
- Experience leading and organizing a research team.
- Demonstrated cultural sensitivity, particularly in multi-ethnic and multi-religious contexts.

Timeline

Provided travel restrictions because of the novel coronavirus are lifted and field visit activities can take place, the analysis will be conducted in 2020 for a duration not exceeding 58 working days (for the consultant) including field work, data analysis and report write up. To mitigate any potential delay in the completion of the work, some activities can take place remotely via virtual engagement with relevant stakeholders.

Task	Days
Develop a detailed work plan	1
Conduct desk review and meet with staff and partners	4
Develop qualitative tools and plan for data collection	5
Facilitate training on overall gender analysis and qualitative tools with the USAID NAWIRI team and researchers, inclusive of translating and piloting tools	6
Data collection in both Samburu and Turkana	10
Translate and transcribe data with research team and support from USAID NAWIRI M&E team	10
Code the data	3
Plan and co-facilitate the 2.5 day Participatory Analysis and Interpretation Workshop	4
Prepare and present initial findings from Workshop in PowerPoint to USAID NAWIRI team and county governments in collaboration with USAID NAWIRI team	3

Task	Days
Write Draft 1 of report	8
Incorporate feedback into Draft 2 of report	2
Finalize report	2
Total	58

The LOE (58 days) reflects the time for the consultant or firm to complete the necessary deliverables. Gender analysis will be on-going through the life of the program. The work will be highly inclusive and involve team members as well as government counterparts to ensure key findings are not only immediately put into action but also become an integral part of the program going forward.

Deliverables

The consultant will be responsible for:

- **Comprehensive work plan for the Gender Analysis**, developed by the consultant and USAID NAWIRI Gender, Youth and Social Dynamics Lead. This will be submitted to the USAID NAWIRI Chief of Party, Deputy Chief of Party, Strategic Learning Lead and Monitoring and Evaluation Lead; Mercy Corps' Deputy Director of Research and Learning; and Mercy Corps' Regional Gender Advisor within 7 days after contract award.
- **Research tools for data collection and analysis** (draft and final tools) submitted to the NAWIRI Gender, Youth and Social Dynamics Lead; NAWIRI Monitoring and Evaluation Advisor; Mercy Corps' Deputy Director of Learning and research and Mercy Corps' Regional Gender Advisor.
- **Final research protocol to be submitted, reviewed and approved by a Kenyan IRB** to be developed in collaboration with the NAWIRI Research and Design Lead.
- **A PowerPoint presentation** of initial findings, presented to the NAWIRI team upon completion of the assessment. An electronic version of the final presentation must also be provided.
- **An electronic Google Folder of all tools and transcripts** created as Word document. Data and tools should be expertly organized and encrypted.
- **An information brief** (written in collaboration with the Gender, Youth and Social Dynamics Lead) that describes key findings and recommendations.
- **A report outline** for the final report that includes a methods section with adequate detail; maps the results with the activity ToC purposes and thematic areas/domains; outlines implications for changing the TOC, learning and research design and interventions; states clearly what the USAID NAWIRI team will do differently; and includes a gender strategy with implementation plan.
- **A final report, no more than 30 pages**, that includes:
 - Introduction and background
 - Objectives and research questions
 - Design and methods
 - Findings organized by ToC purposes and thematic areas/domains

- Discussion of implications for changing the ToC or interventions planned
- A gender strategy with implementation plan, with specific recommendations to improve the quality of learning and research, the accessibility and equity of pilot activities and interventions, and preliminary gender- and youth-sensitive indicators
- References and annexes.

Roles and Responsibilities of Partners

Role of Contract Organization

Mercy Corps' responsibilities include the following:

- Provision of the necessary documents for review and access to staff and partners needed for a greater understanding of the program.
- Guidance in the use of suggested frameworks and accompanying tools and/or equivalent methodologies.
- Support with logistics directly related to the research (i.e., transport, hotel accommodation, deployment of the research team).
- Introduction to county government officials and other key stakeholders in Turkana and Samburu Counties.
- Facilitating partnership for Gender Analysis collaboratively with County Governments of Samburu and Turkana.