

ANNUAL MEETING 2022

GNC Our Future

Session 2-A—Gender and Gender-Based Violence (GBV)

Evidence base: exposure to GBV and nutrition outcomes for children—Christine Heckman, UNICEF

Technical Support Team (TST)
Gender and GBV work
stream—Brooke Bauer, GNC
Technical Support Team

Why is GBV relevant in the context of Nutrition programming?

- Linkages between exposure to GBV and nutrition outcomes
- Safer/more accessible programming
 → more effective service delivery
- Women and girl caregivers are the main users of nutrition services
- Communities value nutrition services and high levels of trust toward staff → entry point for survivors to seek support



Global Rapid Evidence Assessment (REA) Commissioned by UNICEF

Part of UNICEF's broader work on GBV and nutrition integration

Builds upon a desk review conducted in 2019

Examined linkages between direct/indirect exposure to GBV and nutrition outcomes for children

84 studies total

rapidly expanding evidence base

REA Objectives

Review the quantitative evidence on linkages between:

- GBV against girls and their own nutrition outcomes
- 2. Intimate partner violence against a maternal caregiver and their children's nutrition outcomes









With thanks to the US Department of State Bureau of Population, Refugees and Migration (PRM).

Overview of Findings—Indirect Pathway









 Amongst all associations assessed in the evidence-base, maternal exposure to combined forms of intimate partner violence (IPV) (including physical IPV) or physical IPV only were most consistently associated with lower birth weight.

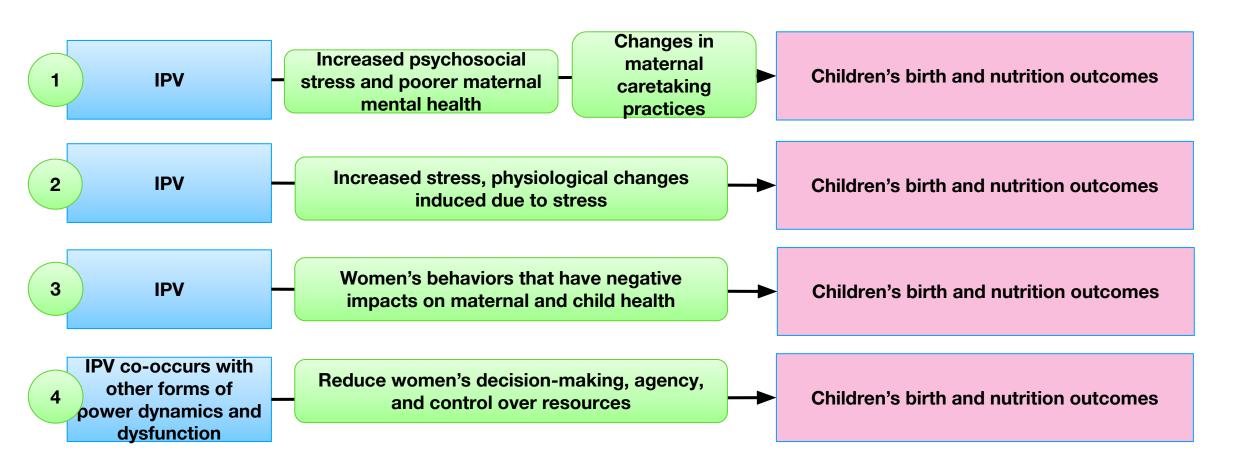


- Women who experienced IPV less likely to practice exclusive breastfeeding or to engage in early initiation of breastfeeding.
- One study reported positive association between maternal IPV and children not meeting minimally acceptable diet



- Combined physical and sexual IPV significantly associated with stunting for children ≤5 years
- Severe physical abuse associated with severe and acute malnutrition (weight for age)
- Exposure to controlling behavior associated with significantly lower height for age

FLESHING OUT THE INDIRECT PATHWAY (A FEW HYPOTHESES)

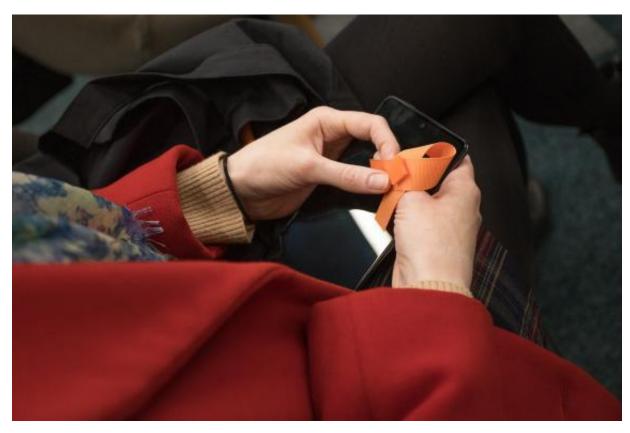


Looking Ahead

- Publishing current results
- Additional systematic review on GBV and women's nutrition
- Demographic and Health Survey analysis on GBV/Nutrition intersections
- Forward-looking research agenda
- Completion of operational research on GBV/Nutrition in South Sudan







The vision of the Gender and GBV
Workstream formally began in 2020 and has since grown. Current members include
International Medical Corps, Action Against Hunger (ACF) USA, Save the Children, ACF Canada, and UNICEF.

In addition, in 2021 the TST included a gender and GBV risk mitigation component with a dedicated advisor within their support.







Workstream Vision

The vision of the Gender and GBV Workstream is that all humanitarian health and nutrition organisations mitigate and respond to gender inequality and GBV risk mitigation within their organizations and in their work with crisis affected populations.







Strategic Goal

The Gender and GBV Workstream will support the integration of Gender and GBV risk mitigation within the Alliance technical support



Working Methods

The membership of the Gender and GBV Workstream is open to all GNC Technical Alliance partners. External members can be invited on exceptional basis and with approval of the workstream chair(s) if their participation is relevant for the workstream.







Core Function and Key Tasks

Working in coordination with other Alliance Partners, Global Thematic Working Groups, and relevant entities, the Gender and GBV Workstream undertake the following actions:

- 1. Put into place practical actions to ensure that gender and GBV risk mitigation are incorporated into the ways of working of the TST
- 2. Act as a champion for gender and nutrition in the nutrition arena including Technical Working Groups, donors, and other key stakeholders.
- 3. Facilitate linkages with members' Gender and GBV networks to ensure the TST is well informed and aware of relevant tools and resources.
- 4. Identify and support the development of best practices and lessons learned on gender and GBV risk mitigation in nutrition and share these lessons with field-based actors and in the interagency community.



Actions so far

- Detailed workplan developed
- Gender and GBV risk mitigation capacity assessment conducted with TST members
- Nutrition GBV Risk Mitigation checklist developed and included in TST advisor/consultant orientation package
- Coffee chat on Gender and Language
- TST orientation on Gender and GBV risk mitigation
- Two-part webinar series on GBV risk mitigation integration into Humanitarian Needs Overviews/Humanitarian Response Plans in collaboration with UNICEF
- Inclusion of GBV risk mitigation session in technical support trainings for infant and young child feeding in emergencies/community-based management of acute malnutrition
- Regular review of all terms of reference (ToR) for advisor deployment from a gender perspective
- Gender considerations included in TST reporting templates
- Presentation to UNICEF Middle East and North Africa Regional meeting on Gender/GBV

	Actions	<u>Planned</u>
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High Priority Activities	Timeline
Provision of in-country or remote technical support on gender and GBV within nutrition programmes to United Nations, nongovernmental organizations, and government partners by gender advisor	Ongoing
Provide technical backstopping during support including review of ToR and support development by gender advisor	Ongoing
Sensitisation/awareness raising on importance of and availability of support for gender/GBV and nutrition	Ongoing
Lead 3-hour GBV Risk mitigation training to TST	Q1
Review key TST templates for deployments for gender and GBVRM	Q1
With localisation colleagues design a strategy to support the engagement of women-led and gender equity focused organization to the center of the TST work	Q1 Q2
Perform joint mission with TST and UNICEF GBV team to identify best practices for TST gender and GBV support as identified at the field level	Q1, Q2
Develop TST systems to ensure integration of gender/GBV risk mitigation into all technical support	Q1, Q2
Develop and publish TST inclusive language in nutrition document	Q2 Q3
With Alliance partners and local/national actors, identify ways for LGBTIA+ inclusion within humanitarian nutrition action	Q2, Q3



Examples of Technical Support Available

- Helpdesk support: existing resources, guidance and tools on gender/GBV risk reduction
- In-depth support (remote or in-country):
 - Capacity strengthening on gender transformative approaches and GBV risk reduction
 - Integrating gender/GBV risk reduction into nutrition programmes (support in design, implementation and monitoring)
 - Gender analysis studies
 - Review/development of Gender/GBV Policy or Strategy and action plan



Questions. Reflections.

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THANK YOU

FOR ADDITIONAL INFORMATION ON THE GBV/NUTRITION REA, PLEASE CONTACT: CHRISTINE HECKMAN <u>Checkman@unicef.org</u> or elisabeth roesch <u>eroesch@unicef.org</u>