In-depth Analysis
Evidence Brief - Uganda

cascade
Healthier Diets, Resilient Communities.

Contents

1. Acknowledgement

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2. Background

Gender norms are socially and culturally mediated principles that govern the expected behaviour of women/girls, men/boys in society and, people internalise and learn these 'rules' early in life[1] . Social norms are the perceived informal, mostly unwritten, rules that define acceptable and appropriate actions shared by people in each society or group and are based on gender identities[2]. Social norms are internalised during childhood socialisation and continue to shape gender stereotyping throughout one's life[3]. Gender and social-cultural norms influence food, nutrition, and agricultural practices among women of reproductive age (WRA) and children below five years of age.

Accelerating a gender and equity transformative approach towards reducing harmful gender and social norms and practices is considered a major contribution towards achieving the 2030 Agenda on Sustainable Development and its 17 Sustainable Development Goals (SDGs), especially for Target 5.3 on gender equality and can also affect the attainment of other SDG Goals 1[4] , 2[5] , 3[6] , 4[7] and 8[8] [9]. An **In-depth Analysis**[10] was undertaken in the CAtalysing Strengthened policy aCtion for heAlthy Diets and resiliencE (CASCADE) Project intervention districts to understand existing gender and social norms in these areas.

[1] UNFPA and UNICEF, "Technical Note on Gender Norms," 2020.
[2] Beniamino Cislaghi and Lori Heise, "Four Avenues of Normative Influence: A Research Agenda for Health Promotion in Low- and Mid-Income Countries.," Health Psychology 37, no. 6 (2018): 562; UNICEF, "Gender Norms and Unpaid Work," UNICEF DATA, January 2023, https://data.unicef.org/topic/gender/gender-norms-and-unpaid-work/.
[3] UNICEF, "Gender Norms and Unpaid Work."
[4] SDG 1 (End Poverty)
[5] SDG 2 (End Hunger)
[6] SDG 3 (Ensure Healthy Lives)
[7] SDG 4 (Ensure Inclusive and Equitable Quality Education)
[8] SDG 8 (Promote Inclusive and Sustainable Economic Growth and Decent Work)
[9] UNFPA and UNICEF, "Manual on Social Norms and Change (2022)."
[10]An **In-depth Analysis** is the study of differences in the conditions, needs, participation rates, access to resources and development, control of assets, decision-making powers, etc., between women and men in their assigned gender roles.

Objectives of the In-depth Analysis
General objective

The main objective of this study was to examine the constraints, needs and opportunities for gender transformation and social norms (positive and negative) that influence the dietary intake of Women of Reproductive Age (WRA), girls and children under five years in relation to their counterparts (men and boys) in Eighteen Local Governments in the country.

Specific Objectives

i. To assess the dietary practices of WRA and children under five years of age in selected districts within the country.

ii. To identify positive and harmful gender and social norms that influence dietary intake for WRA and children under five years of age in selected districts within the country.

iii. To assess the gender and equity-responsive needs, constraints, and opportunities to inform the design of appropriate strategies and advocacy in selected districts within the country.

iv. To identify community structures that facilitate the transformation of gender and social norms which influence food and nutrition security for WRA and children under five years.

3. Methodology

An exploratory and descriptive gender-focused cross-sectional study design was applied for this study with concurrent data collection across the different regions.
The population of interest for this study were children under five years and WRA in all the CASCADE districts of implementation.

In each administrative unit, data was collected from specific Enumeration Areas (EAs) whose sampling was guided by the Uganda Bureau of Statistics (UBOS).
The study employed multistage sampling that included a purposive selection of the regions and districts where the CASCADE project is implemented; followed by a random selection of counties, sub-counties, parishes, and finally Enumeration Areas[11] (urban, rural, and refugee hosting communities).
Data collection tools and techniques included household questionnaires that were interviewer administered; Focus Group Discussions and Key Informant Interviews using focus group discussions and key informant interview guides.

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[11] A total of 102 EAs (63 Rural, 30 Urban and 9 Refugees) were sampled.

4. Key Findings

Maternal, Infant and Young Child Feeding Practices

A quarter of the WRA (26%) achieved the Minimum Dietary Diversity for Women (MDD-W) across the study regions with observed regional disparities (see Figure 1). Almost all the women (94.8%) consumed foods from the grains, white roots, and tubers food group. Consumption of Animal Source Foods (ASFs) i.e., milk and milk products; meat, poultry, and fish; and eggs was the lowest at 16.1%, 10.1% and 6.4%, respectively. Almost all children aged 6-23 months (96.7%) across all the regions had ever breastfed. More than three-quarters of children aged 6-23 months (78.0%) were reportedly put to the breast within one hour of birth. For children aged 6-23 months, 50.9% had a sufficiently varied diet across all project regions. 31.1% had consumed egg and/or flesh foods, 47.1% had consumed a sweet beverage[12] , 25.1% consumed a "selected sentinel unhealthy food"[13] , 19.9% did not consume any vegetables or fruits, 24.4% were fed from a bottle with a nipple on the day before the study.
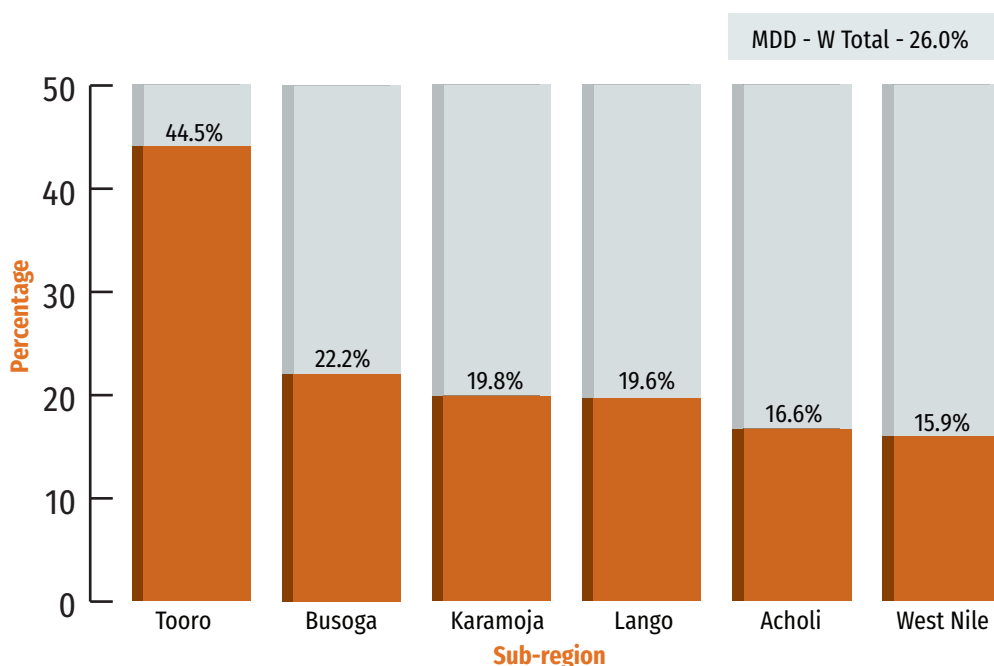

Figure 1: Percentage of WRA achieving MDD-W during the Previous Day and Night, by Sub-region.

R estrictions on the consumption of Animal Source Foods (ASFs) by WRA were reported across all regions. In Karamoja and West Nile, it was believed that consuming ASFs could lead to miscarriages among pregnant women. In Tooro, women were forbidden from consuming their own or their husband's totems, as it was considered sacred and believed to result in curses on the woman and her children. Men, however, were

> *"When a woman is pregnant, she isn't supposed to eat stomach and intestines of animals because the waste in the stomach and intestines of animals can lead to a miscarriage." - **Male FGD Participant Napak***

allowed to eat their wives' totems if they desired. Moreover, certain cultures in Karamoja prohibited women from consuming game meat, which could be.

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[12]Sweet beverages include commercially produced and packaged, sweetened beverages such as soda pop, fruit-flavoured drinks, sports drinks, chocolate and other flavoured milk drinks, malt drinks, etc. They also include 100% fruit juice as well as fruit-flavoured drinks, whether made at home, by informal vendors or packaged in cans, bottles, boxes, sachets, etc. Lastly, they include home-made drinks of any kind to which sweeteners (e.g. sugar, honey, syrup, flavoured powders) have been added.

[13] Selected sentinel unhealthy foods are:
 – Candies, chocolate, and other sugar confections, including those made with real fruit or vegetables like candied fruit or fruit roll-ups.
 – Frozen treats like ice cream, gelato, sherbet, sorbet, popsicles, or similar confections.
 – Cakes, pastries, sweet biscuits and other baked or fried confections which have at least a partial base of a refined grain, including those made with real fruit or vegetables or nuts, like apple cake or cherry pie.
 – Chips, crisps, cheese puffs, French fries, fried dough, instant noodles, and related items which contain fat and carbohydrate and have at least a partial base of a refined grain or tuber. These foods are also often high in sodium.

only opportunity to have nutrient-dense foods. These restrictions disproportionately affect women's access to affordable, protein-rich animal-source foods, preventing them from consuming readily available options that could improve their overall dietary intake during critical life stages. This emphasizes the need to address gender biases within cultural norms to ensure women have equal access to nutritious foods.

Within the Karamoja region, it was a widespread practice to consume alcohol after childbirth, as it was believed to increase breast milk supply.

Additionally, women were not allowed to eat food in the first few days after delivery, a practice that likely affected breast milk supply, delayed the recovery process and had negative implications for the well-being of both the mother and baby. The encouragement of consuming non-food items, such as anthill soil mixed with water, could result in infections for both the mother and child, increasing the risk of postpartum morbidity and mortality. These practices highlight the need to address gender-based norms that can negatively impact dietary choices and overall well-being.

Gender and Equity-Responsive Needs, Constraints, And Opportunities

The division of responsibility between men and women was clear in the study, with men seen as the providers responsible for tasks like planting and harvesting crops, while women were responsible for managing the household food supply, including storing food for lean times and receiving food aid.

The study found that although people perceive men as being responsible for food production, storage, and receiving food aid women were the ones who shouldered most of the responsibility for these aspects, especially in Karamoja and West Nile. The perception of male dominance in these areas is only true in Busoga. Despite the perception of male responsibility, women in Uganda do most of the work when it comes to food security. Regionally, women were reported to have both perceived and actual responsibility for access to food. Despite variations, women were also reported to control this dimension, including in the Busoga region. Women were both perceived and responsible for the dimension of food utilisation, holding control over this aspect. For the stability/resilience to shocks dimension, respondents reported men as perceived and responsible nationally and regionally, except in Acholi and Karamoja, where women were reported to control this dimension.

To promote equitable food security strategies, interventions are needed to empower women by providing them with access to land, tools, and training, and challenging cultural norms that burden them. By recognizing and addressing these biases, Uganda can design more effective food security plans.

The significant gap between perception and reality highlights the need to address gender bias and support women's role in managing food access. This holds in all regions, with West Nile and Karamoja showing the strongest female responsibility. Recognizing and supporting women's crucial role in managing food utilization is essential throughout Uganda.

Understanding the gender dynamics of responsibility for securing food during economic or climate challenges is crucial for designing appropriate strategies that promote resilience and address equity within families. This information can help create better support systems to ensure everyone has access to food, even in the face of shocks. The study found a gender gap in perceptions of who is responsible for securing food during economic or climate shocks. While more than half of respondents believed that men take primary responsibility, the reality may be different. Interestingly, the majority in Karamoja viewed it as a shared responsibility, setting it apart from other regions. This disconnect between perception and reality points to a potential gender bias that needs to be addressed. It is crucial to ensure that strategies promoting resilience consider the

roles played by both men and women in securing food during challenging times.

Analysing gender differences in gender-based violence (GBV) reveals both challenges and opportunities. The data emphasizes the need for comprehensive support services for both genders, including specific programs for women facing physical and emotional abuse, as well as for men experiencing food denial as a control tactic. Strategies must aim to address these issues by promoting zero tolerance and creating safe spaces for reporting. However, the fact that GBV affects everyone presents an opportunity for advocacy to foster solidarity and dismantle the notion that GBV is solely a women's issue. By understanding these needs, limitations, and possibilities, we can design effective strategies and advocacy to create a society free from gender-based violence.

While food distribution, portion sizes, and types of food are commonly cited as triggers for GBV, a concerning finding is that some men view women's financial empowerment as a justification for violence. This highlights the need for strategies that not only address immediate needs but also dismantle unequal power dynamics and promote gender equity. By empowering women economically and challenging harmful norms, we can create a safer environment where everyone has access to a healthy diet.

" *First of all, if a woman is wounded, the kitchen will have nothing which means the*

family will not have what to eat. Also, if you beat her, she will go back to her parents' home and leave you with your children to suffer. If there is domestic violence in a home, there will be no production in that home. Your children will also grow to become violent." - **Male FGD Participant, Moroto**

GBV disrupts food security in multiple ways. Injuries resulting from violence can completely halt food production, and resources intended for nutritious food are diverted to cover medical treatment or fines imposed by families or communities. This disproportionately affects women and children, underscoring the need for strategies that address the financial burdens of GBV and empower women economically. Such efforts can promote food security and a more equitable distribution of resources within households. Beyond physical injuries, verbal and emotional abuse has a devastating impact on families' mental health. This distress disrupts women's ability to provide proper care and nutrition, hindering feeding practices and impairing lactation. This double blow to the nutritional well-being of mothers and breastfed children disproportionately affects women and young children. It highlights the need for strategies to address the psychological impact of GBV and promote a safe and nurturing environment for families.

Needs, Constraints and Opportunities for Food, Nutrition and Agriculture

Men and women had similar needs regarding food, nutrition, and agriculture in the study area. These mostly concerned the creation of enabling environments for the production and consumption of a wide variety of food items. Land was constantly re-iterated as one of the needs for participants to increase food production. Participants were also interested in solutions to the harsh climatic conditions that hindered the production of especially nutrient-dense foods. Respondents of the study also noted the need for capacity building of farmers in modern farming methods as crucial in addressing malnutrition

through the provision of techniques to improve farming practices in the communities.

Constraints to meeting the needs stated above included a lack of resources in terms of money to finance food purchases and production in the households, and malicious middlemen. Opportunities to meet the needs provided by the respondents included adaptation of kitchen gardens; utilisation of community structures such as village savings and credit groups; and engagement of private sector actors to alleviate hunger and malnutrition.

Community Structures That Facilitate Transformation of Social-Gender Norms & Beliefs

The study sought to identify community structures crucial for programmes to foster gender transformation while empowering communities to shift negative norms and promote positive change. Community Development Officers (CDOs), religious and cultural leaders—including local chiefs and Manyatta leaders—and political leaders emerged prominently as influential figures in shaping community perspectives.

Recognising their considerable influence, it is crucial for programmes to cultivate strategic partnerships as well as empower these influential figures with the knowledge and tools necessary to challenge and transform harmful social norms prevalent in their respective regions. This could be achieved through collaborations with implementing partners present in the regions, bridging Government and Non-Governmental Organisations (NGOs), or more specifically through, Women's Rights Organisations (WROs) and Women-Led Organisations (WLOs).

4. Conclusion

The study yielded valuable insights on gender and social norms affecting food, nutrition, and agriculture in the various districts of Uganda. Regional variations in maternal and child feeding practices were very evident, underscoring the importance of region-specific strategies to enhance nutrition outcomes.

This study highlights the crucial role of community structures in navigating the complex web of gender dynamics regarding food, nutrition, and agriculture. The study reveals a fascinating interplay of social norms, some acting as positive enablers while others create significant constraints to achieving food security and healthy nutrition for women and children. Cultural beliefs and ingrained gender inequities were identified as major barriers. Dismantling these through the guidance of community structures is essential to ensure equitable access to healthy diets. Their influence can be harnessed to redefine gender roles within food systems, elevating the status of women and fostering environments that promote healthier dietary practices.

The study also emphasizes the importance of leveraging positive social norms within communities. Cultural leaders can champion these norms while simultaneously challenging detrimental practices that perpetuate inequalities. By engaging in open dialogues about these issues, communities can redefine how food systems function within their specific contexts.

Opportunities for positive change lie in region-specific, community-based initiatives. Collaboration between cultural leaders, government programs, NGOs, and the private sector is crucial. By working together, they can design and support programs that promote gender-inclusive practices as a societal norm within agriculture, food, and nutrition.

A holistic and integrated approach is essential. Cultural and religious leaders hold immense power to unlock transformative change. By collaborating with other stakeholders, they can dismantle existing barriers and create an environment where everyone thrives within the food system.

5. CASCADE Key Actions

01 | **Comprehensive Gender Strategy and Monitoring Framework:**
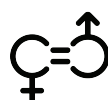
CASCADE, in collaboration with the Ministry of Gender, Labour, and Social Development (MoGLSD), is developing a comprehensive gender strategy to address social and gender norms through multi-stakeholder engagement and targeted interventions. The strategy will include a robust Monitoring and Evaluation (M&E) framework with indicators to track gender norm changes, dietary diversity improvements, and the effectiveness of interventions combatting GBV. Annual reviews will be conducted to adjust strategies for continuous improvement and alignment with project goals.

02 Policy Engagement:

CASCADE will engage leadership at all levels, including local government and community leaders, to advocate for the inclusion of specific gender equality indicators in nutrition-related policies, strategies, and plans across all local government levels. This effort will also involve collaborating closely with community leaders to translate and disseminate these policies through community platforms and targeted dialogues.

" *CASCADE could assist in policy development and strengthening to continue guiding the district."* – **KII 87, District Official West Nile**

By doing so, CASCADE aims to foster greater awareness, appreciation, understanding, and demand within the communities for gender-transformative approaches to nutrition.

03 Social and Behaviour Change Communication (SBCC) Interventions:

CASCADE will implement Social and Behaviour Change Communication (SBCC) interventions in collaboration with Community Development Officers (CDOs), religious and cultural leaders. This will involve conducting quarterly community workshops and media campaigns tailored to local beliefs to promote positive behaviours such as dietary diversity, the consumption of animal-source foods among WRA and children under five and addressing harmful practices like alcohol consumption among pregnant and lactating women.

04 Capacity Building:

Through the Farmer Field Business Schools (FFBS), conduct bi-annual training sessions for female farmers on climate-smart agriculture practices and provide them with access to microfinance services and resources such as seeds and tools.

Additionally, promote small livestock rearing to improve household income generation and animal product consumption, which will enhance both economic and nutritional outcomes.

05 Gender-Based Violence (GBV) Prevention:

CASCADE will partner with non-governmental organisations (NGOs), particularly the Women-Led and Women Rights Organisations (WLOs/WROs), to establish GBV prevention and response committees in each district involving local leaders and women's groups. These committees will work together to develop and establish confidential reporting mechanisms tailored to the needs of their communities,ensuring that survivors can safely report incidents of GBV and access necessary support without fear of exposure. The WLOs/WROs will be capacitated to provide training on GBV awareness and prevention in communities and work with community health workers to establish a referral system that links survivors to health, legal, and psychosocial support services.