



# Rapid Gender Analysis: Research Report

*March, 2016*



## Rapid Gender Analysis Report

**Background:** Drought, worsened by the effects of El-Nino is having a devastating impact on the lives and livelihoods of Ethiopians, and according to the Government and the inter-agency mid-*Meher* and *Meher* seasonal assessments, the number of people that will require food assistance in 2016 increased from 8.2 million in October 2015 to 10.2 million in December 2015, making Ethiopia home to the largest acutely food insecure population in the world. Recognising that crisis can further exacerbate existing vulnerabilities and gender norms, CARE Ethiopia sought to better understand the gender dynamics at the household and community level in order to improve the design of its interventions and build on the strengths and capacities of drought affected households. To help achieve this aim, CARE developed a bespoke participatory Rapid Gender Assessment (RGA) approach, allowing for a diverse group of staff to collect information quickly from a sample of affected communities in zones of East Hararghe, West Hararghe, South Gondar and Afar. The RGA focused on the existence and impact of any changing gender dynamics in drought affected households and communities.

**Purpose:** To learn, explore and better understand the gender dynamics within the populations which CARE Ethiopia serves in the face of the current emergency context of El Niño and drought.

**Objectives:** To better understand and identify:

- how women, men, girls and boys are affected by the drought,
- the different coping strategies these groups are using to address the drought situation,
- the impact of the drought on gender dynamics and gender norms in these communities,
- emerging opportunities to shift rigid gender and social norms.

**Goal:** To increase the capacity of CARE Ethiopia (and its partner's) in exploring the realities faced by drought impacted households and design impact driven participatory emergency response interventions.

**Methodology:** CARE Ethiopia Emergency Field Staff conducted:

- Focus group discussions with picture codes
- Transect walk / Resource mapping

**Picture Codes:** this is a qualitative tool that allows women, boys, girls and men to easily relate to situations that pictures represent, and tell their reality as they live it and remember. This tool was applied in Focus Group Discussions (FGD), held with men, women, boys and girls in separate groups to help stimulate discussions, in a safe space, about how the drought has affected them; how they faced the situation (coping mechanisms); and to identify any emerging or changing social norms and opportunities.

**Transect Walk/ resource mapping:** This is a tool used to obtain community level information about existing resources, assets, services and infrastructure in a community, and the related access and management by different community members. Focus group discussions using the picture code and the transect walk and resource mapping were carried out in four kebeles in each region for a period of two weeks. The staff received training on Gender in Emergencies (GiE) before the start of the RGA process, received briefings in their field offices before starting the assessments and had a comprehensive workshop and de-briefing process after the RGA.

**CARE collected data using these two tools on the following themes:**

- Vulnerability and coping mechanisms
- Education and school attendance
- Nutrition/malnutrition
- Migration
- Mobility
- Social norms and practices
- Emerging opportunities
- Availability, access and control over resources

The data collected was purely qualitative in order for CARE to focus deeply on social and behavioural changes and perspectives of community members on gender-specific vulnerabilities, needs and capacities in relation to the drought and emergency situation.

**Validation workshop:** Following the data collection in each zone was completed, CARE held and organised a workshop in Addis Ababa with staff who were directly involved in the data collection in order to review the process, analyse the findings and propose recommendations for current and future interventions.

**Summary (Key findings):** Key findings of all the areas are summarized in this section.

**Findings:** Four separate RGA reports – one per area in which the RGA was conducted - East Hararghe, West Hararghe, South Gonder zones and Afar region are produced. The report includes secondary data describing the context of each area. Changes in the livelihood of the community because of the drought, vulnerability, coping mechanism, GBV and social norms and practices, availability, access to and control over the resources at the household and community level is extracted from primary data.

**Recommendations:** Recommendations from this RGA were organised into a table which staff developed based on the key findings as well as the existing CARE Ethiopia Gender Action Plan.

## Summary (Key findings)

The key findings of the assessment are summarized below:

### Changes because of the Drought

**Livelihoods:** From the above findings, we can understand that there are common (key) findings in each target region. In all regions, the drought has affected the productivity of the land, water sources and pastures such that agricultural output was limited, water points dried-up and forage did not regenerate. This affected the livelihood of every member of the community (men, women, boys and girls) in different ways with varying degrees of impact:

To save the lives of livestock, men and boys are forced to migrate to the neighbouring Woreda or Kebele where there is good pasture and water. As a result, they may encounter conflict with the neighbouring community as they are competing for limited resources. In addition, men and boys migrate to other towns in search of jobs while the women stay in their neighbourhoods taking care of the household. Men also are psychologically burdened because of unavailability of food to provide for their family.

This situation is highly challenging for women too, as they have to cope with their domestic workload, also taking on the chores usually managed by the men, and try to provide for their dependents as well. In all areas of the study, there is the tendency for girls to migrate to other towns to find employment so as to economically contribute to their family.

The elderly, children, pregnant and lactating mothers are most vulnerable to food and water scarcity since they are not able to travel long distance to in search of water and food. Mostly girls are responsible to help their mothers and share their mothers' household chores such as fetching water, collecting firewood and preparing food.

Women and girls travel long distances to fetch water (East Hararghe, Afar and South Gondar) or wait in long lines or fight to get water (West Hararghe). In order to avoid the long queues and conflict that are faced during the day, some girls and women choose to fetch water at night and thus the risk of GBV is increased as they are more vulnerable while less people are around.

In all areas, FHHs are the most affected compared with MHHs because of the burden to support the family and the restriction of not being able to leave in search of work. Women who live in polygamous families in Afar, and East and West Hararghe are also most vulnerable since their life depends on the favour of their husband. The husbands share the limited resources with the family they favour the most. In South Gondar area, there is no polygamy, however occasionally men still have a *Wushima*.

Health is endangered by water scarcity, pollution, and contamination. In all areas studied, lack of safe and clean water cause health problems particularly, diarrhoea. The community is vulnerable to sanitation related health problems as well. Currently, in Afar, there is a measles problem without a solution to address it in the community. Another drought-related challenge is the observed increase in theft and conflict. People are stealing cattle and Teff and fighting over limited resources, including pasture and water.

*School:* School absenteeism and dropouts are increasing across all areas because of the drought. More girls than boys are absent from school as they are spending more time on domestic responsibilities such as fetching water, caring for younger siblings at home and trying to generate income through trading hat and wood for fuel. Both boys and girls (Afar and East and West Hararghe) are dropping out of school due to lack of school materials. Boys travel long distances to search for pasture and water for livestock or migrate to other towns to pursue work as daily labourer which affects their school attendance.

*Nutrition:* In all the areas, boys, girls, men, women, elderly and children are affected by malnutrition because of the drought. Women are often most affected by different health problems and malnutrition since they give feeding priority for their children and husbands. In all areas, men and children under the age of three eat first in the family, boys and girls next and women eat last. Thus, lactating and pregnant women can be severely affected by malnutrition. In some areas like West Hararghe and South Gondar, women have some cultural restrictions from eating certain food types. In almost all the studied communities, infants depend on their mothers' breast milk or cow milk for food source. Due to the drought, the supply of milk from both their mothers and cattle is reduced as well as the frequency of breast feeding due to the busy schedule of mothers. These circumstances increase the chance of experiencing malnutrition. Furthermore, some of the coping mechanism in all areas is either to reduce food consumption frequency, to eat single component of a meal which lowers dietary diversity (for example, injera without stew or maize without milk) and to decrease the amount of the food consumed. This increases the chance of malnutrition amongst people, particularly for the most vulnerable in these communities.

*GBV & Social Norms and Practices:* Chat chewing is a common practice in Afar, East and West Hararghe although there is some reduction because of the drought. Drinking alcohol is common practice in South Gondar. In East Hararghe, the finding shows that men get upset as they cannot buy Chat as often as usual. This could also be one factor leading to domestic quarrels/violence. Conflicts over resources between wives and husbands in polygamous families can also be a cause for domestic violence. However, this needs further assessment to determine accurately. Furthermore, it would be relevant to assess whether conflict is created between husband and wife in other areas (Afar and West Hararghe) because of Chat.

In all areas, safety/protection is also another issue for women, girls and children when men and boys are away. Women and girls can't move as freely due to fear GBV and attack by wild animals like hyenas and tigers in West Hararghe. Early/child marriage is practiced in all areas although there is no evidence of this being exacerbated by the drought. However, in South Gondar, the finding shows that child/early marriage is practiced without the wedding ceremony because of the drought. In Afar, the practice of *Mira*, whereby it is seen as normal for men rape or force sex on women in their homes when their husbands are away. With more men migrating, this practice is expected increase which is extremely concerning.

*Coping Mechanisms:* In all areas studied, women are involved in petty trade as a key coping mechanism. Women in East Hararghe make handicrafts (*Sifet*) and sell Chat, cooked cereals (*Nifro*), firewood and charcoal. Other skills women are utilizing to earn income in West Hararghe are pottery making, weaving and braiding hair. Women are also involved in daily labour such as washing clothes, fetching water, goat herding and weeding. In Afar, women have skills to prepare ornaments and utensils from *Unga*. Girls mostly share their mothers' role in the domestic sphere, but at times migrate to other towns to get hired as a house maid and support the family. Men and boys often use migration as a coping mechanism. In addition, they are involved in daily labour or cattle trade or they rent their camels for transportation of commercial commodities in Afar.

*Access to resources:* Accessing food rations from CARE and the government and engaging in VSLAs are the most common resources accessed in these communities

## East Hararghe

**Area Context:** East Hararghe zone is an administrative zone located within the Oromia Regional State. It is located in the eastern part of the State, 501 km from Addis Ababa, capital of Ethiopia. Of the 48,360 km<sup>2</sup> total zonal land mass, 67.76% is lowland, 24.66% midland and the remaining, 7.67% is highlands. The zone has 19 districts (called woredas) with a total population of 3,142,390 of which 1,595,737 are male and 1,546,653 are female. The Zone has bimodal rainfall pattern with two seasonal agricultural periods annually, namely the *Belg* and *Meher* in Amharic and *Arfassa* and *Ganna* in Oromifa, respectively. The success of these seasonal harvests are fully dependent on timely and sufficient rainfall. Consequently, the El-Nino phenomenon in 2015 altered the rain pattern of many parts of the country including East Hararghe Zone and resulted in 100% failure of the *Belg/Arfassa* season production, which normally contributes 28% of the annual agricultural production for the zone. Furthermore, there was also a substantially lower *Meher/Ganna* seasonal production due to delay in rain by two to three weeks, leading to an overall dramatic reduction of food production and availability in the zone.

### Changes due to the Drought

*Livelihoods:* The drought has affected the people whose livelihoods are dependent on agriculture. Land, water resources and pasture are also affected by the drought. The elders, women, men, boys and girls, pregnant and lactating mothers are vulnerable to several types of problems at varying degrees with key examples as follows:

- Men travel to nearby towns looking for work while the women stay in their communities taking care of their children and other domestic duties. The women also travel long distance to fetch water since there is lack of water in the area due to the drought.
- Girls do not often travel to towns in fear of gender based violence (GBV). However now girls may migrate to other neighbouring kebeles and towns to work as housemaids. Most of the girls that leave for the towns to be housemaids often go without the consent of the family. However, their intent is to improve the lives of their families.
- Female headed households (FHHS) are most affected than the Male Headed Household (MHHS) because all the burden to support the family falls on the shoulders of the women. However, they cannot travel far away in search of jobs. In MHHS, while women take care of household tasks, the men go out to look for work and food.
- Also, men have the privilege to eat outside their homes while women and children may not have access to food at home. Therefore, they are forced to wait for the HH men to bring them food to eat. Furthermore, men are psychologically burdened because of unavailability of food which they would normally be expected to provide for their families.
- The water shortage limits water for washing and other domestic uses of water, therefore community is vulnerable to sanitation related health problems.

*School:* Many students have been forced to drop out of school due to the need for extra labour at home; girls in particular have had to drop out or be absent from school because they are obliged to take care of young siblings when their mother is busy. Girls assist their mothers in household chores, travel long distance to fetch water and feed livestock and attend to other domestic chores. Boys do the same as their fathers by travelling to other places looking for daily labour. Households also have financial difficulty to purchase exercise books, pens and other materials for students. Unlike unaffected families, most drought affected families are putting their resources towards feeding the family rather than purchasing school materials, therefore overall school becomes unfeasible in these cases.

**Nutrition:** Culturally, priority of feeding is given to the husband, then to children and lastly to women. When drought affects the economy of the community, it results in families having less resources to provide enough quality food in households. This situation has the potential to lead to malnutrition which primarily affects children, and lactating and pregnant women. However, during the drought, children - especially those who are breastfed- are given feeding priority. At times, mothers will have to leave the children at home to travel to collect fire wood and fetch water or their breasts would fail to produce sufficient amount of breast milk as they are not having enough to eat due to the drought.

**GBV & Social Norms and Practices:** Domestic violence and early marriage are present in this area as well as wife beating in the communities the RGA team visited. Female FGD participants explained, "Since there is no money to take the violated women to hospitals, they may end up suffering." Most of the time, the major cause of the violence is disagreements between husbands and wives on money management. Men become upset since they don't chew Chat as often as they used to; which would also lead them to violence. Conflicts over resources are common between wives and husbands in polygamous families. Women do not travel far to market centres or to seek daily labour due to fear of being victimized by violence.

**Coping Mechanisms:** Some of the FHHS are supported by Village Saving and Loan Associations (VSLA) which provides them with a means of financial income, increased control of economic resources and a good entry point for interaction with other women in the community. Women in the community are involved in petty trade such as, selling Chat, cooked cereals (*Nifro*), fire wood and coal which they use income from to buy food for the family. Some of the women who have the least income amongst the community also go to town to work as daily labourers by carrying water containers for money. Others produce handcrafts (*Sifet*) whenever there is time to spare, usually at night, and also sell these for extra income. Men engage in labour work or travel to distant places as daily labourers. They transport Chat from farm to the market or collect stones used for construction and carry them to vehicles. Both men and women work on removing impurities of commercial corn brought by traders.

**Access to Resources:** Available resources in the area are Village Saving and Loan Association (VSLA) interventions; water provided by the government using water tanker trucks; and food aid through the Joint Emergency Operation (JEOP) of which CARE is a partner. Women seeking assistance on security problems can report to the Woreda Women and Children Office, Kebele level task force or security bodies at Kebele level. Men seeking security assistance can report to the Kebele level task force, Woreda police and security bodies at Kebele levels.

## West Hararghe

**Area Context:** West Hararghe Zone is one of 18 Zones of Oromia Regional State which is subdivided into 14 districts and 2 administrative towns. It is bordered by East Shewa and Arsi Zone in the West, Bale Zone in the South, East Hararghe Zone in the East, Somali regional State in the North and Afar Regional State in the Northwest. The total population residing in the Zone is 2,234,078 out of which 1,089,277 are female and 1,144,801 are male. The livelihood of 85% of the population depends on agriculture while 15% is based on various income generating activities such as petty trading, off-farm activities, daily labour and sale of charcoal. West Hararghe also has two rainy seasons, *Belg* and *Meher*. There was an absence of *Belg* rainfall in 2015 and the crop production and the pasture development was much below normal resulting in zero agricultural production and the death of many livestock. Additionally, although the *Meher* season rainfall onset in terms of timing was normal, the amount and distribution was erratic and much below normal.

### Changes because of the Drought

**Livelihoods:** Due to the drought, agricultural production and productivity has been low, crops have dried up in fields and cattle are dying due to shortages of animal fodder and water. Children under seven years of age, pregnant and lactating women, the elderly, and vulnerable groups are experiencing shortages of food and water. Important observations and findings on vulnerabilities and gender norms are as follows:

- Farming, taking cattle out for grazing and watering tends to be the men's role whereas fetching water and household tasks are the women's role. This division of labour has not been changed by the drought. The men still farm even though they do not harvest as much as they previously did.
- The women continue fetching water and wait in long queues due to the current drought. Sometimes, conflict happens between women waiting in queues to get water, therefore in order to avoid this conflict, some women prefer to fetch water at night.
- Widows and women in polygamous family are most affected by the drought since they are either dependent on their husbands for resources or simply do not have access to resources. Husbands in polygamous families might allocate more resources to the wives they favour or distribute resources unequally.
- FHHS are also vulnerable since their farmland is not ploughed properly. As a result, their harvest production is smaller.
- As in West Hararghe, men and boys often migrate to nearby towns looking for daily labor jobs while women and girls take care of domestic tasks, as well as attend to children and the elderly. The migration of men increases the burden on women since they also need to take over the economic and social responsibilities normally handled by their husbands.
- Safety is also another concern for women, girls and children due to GBV risks and possibility of attack by wild animals that inhabit the area.
- The community is predominantly Muslim. While Chat chewing is common in the society, it has decreased due to the drought.
- The drought has resulted in decreased community social interaction and increase in the incidence of theft in the area.

*School:* School absenteeism and dropouts are increasing here as well because of the drought since students do not have food to eat at home. More girls have become absent from school in order to fetch water from far away, trade Chat, sell fuel wood or care for siblings at home. AS in East Hararghe, some students - both boys and girls - have dropped out of school due to lack of school materials.

*Nutrition:* Children and lactating and pregnant women in the village are affected by malnutrition since the frequency of feeding and the amount of food consumed has decreased. The elderly, boys and girls and men are also affected by the nutrition problem, although differently. Women could be the most affected by different health problems and malnutrition since they give priority to their children and husbands. Men and children under three years eat first, followed by boys while women and girls eat last. The frequency of breast feeding has decreased since women are busy with other activities outside home such as collecting fire wood, fetching water and trying to generate income through petty trading activities. There are also cultural practices in this area that influence the diet of women and girls and restricts what they can and cannot eat. For example, women and girls are not allowed to eat food prepared from animal's tongue, brisket, head, hump therefore the option for females are more limited than for males.

*GBV & Social Norms and Practices:* Marrying off underage girls is carried out by illegal "local agents." Girls often are married before they reach adolescence and are forced to take on household responsibilities. Even though the government and traditional protection laws are in place to prevent GBV, women and girls feel that threat of sexual violence as they walk alone in the surrounding areas.

*Coping Mechanisms:* Women and girls engage in different petty trades and daily labour such as washing clothes, fetching water, goat herding, weeding, different hand crafts (weaving), hair making, wood and charcoal selling and even begging. Men and boys engage in cattle trade, migration and daily labour such as compost transportation. Girls may also get married or migrate to other towns work as house maids in order to support their families. Women and girls are skilled in saving, petty trade, pottery making where as men and boys have good farming skills and are more involved in daily labour.

*Access to Resources:* People are accessing food through food aid, local markets or by sharing limited resources with each other, since the harvest from their land is very minimal.

## Afar

**Area Context:** Afar Region is located in northeastern lowlands of Ethiopia, bordering Djibouti to the East and Eritrea to the North. As with other pastoralist areas of Ethiopia, Afar is highly vulnerable to natural and manmade crises that affect livestock production and thus threaten the food security and the livelihoods of its people as pastoralists primarily depend on livestock and livestock products. As such, their capital assets and the livestock production system rely on timely and adequate amount of rainy seasons in Afar, namely *Sugum* and *Karam*, which covers mid-February to April and July to mid-September respectively. The consecutive seasons of below-average rainfall of 2014 *Karam* rains, and also 2015 *Sugum* rains, have led to poor rangeland and livestock body conditions. Poor rainfall was persistent in 2014, affecting pasture regeneration, livestock conception and calving and rain-fed farming activities for pastoral and agro-pastoral communities. The *Karam* rains of 2015 are late, further exacerbating the situation.

### Changes because of the Drought

**Livelihood:** Communities in Afar are mostly pastoralist and agro-pastoralist which bring different types of risks and vulnerabilities which were captured as follows:

Water points are dried-up because of the drought. People travel long distances in search of water for animals as well as for household consumption. The degree of the impact the drought resulted depends on the age of the affected people and the gender dynamics. The most vulnerable groups are children, however, pregnant and lactating women are also vulnerable since they are not able to travel long distances to search for food. Water shortage, health and nutrition problems are other factors of vulnerability. Some of the community members have skills in small scale irrigation. However, the current drought crisis has resulted in drying-up of crops in fields.

Among domestic animals, cattle are the most affected, then shoats (sheep and goat and lastly camels. Male FGD participants said, "For the sake of our livestock, we are forced to migrate to the neighbour woreda or kebele where good pasture and water is available. And therefore, we encountered conflict with the communities we compete with for resources. Our cattle were looted by some community members who are not happy about our migration to their area. This happened when we went to the Amhara Region, the special Zone of Caffa in Oromia Region or Woladi area."

Health of Afar communities is also endangered by diseases such as diarrhoea due to scarcity, pollution, and contamination of water. Due to the drought, animal products which are key food sources such as milk and butter food are reduced. The environment is dustier due to the drought increases the risk of airborne disease. There are also reported cases of measles.

Women face specific challenges during the drought as they continue to have responsibilities including breast feeding, firewood collection, food preparation, travelling long distances to fetch water on daily basis, and going to the mills. Girls help their mothers and share part of their responsibilities and they also watch over cattle or shoats. During these periods, girls eat less frequently and sometimes go whole days without food.

Boys travel long distances in search of pasture and water for their livestock which results in food shortages and lack of water for them during the journey. The drought may cause anxiety on men since they will be worried to overcome the situation or rebuild the depleted household assets.

The women in polygamous households, locally called *Hagoyita*, are more vulnerable as the resource distribution between households is not equal. Though it depends on the economic status of couples, most of the time women in polygamous marriages are more affected by drought than others because there are more people in the family to divide resources amongst. FHHS are also more affected by the drought than MHHS because all the burden to support the family falls on the women.

If water and pasture is unavailable, pastoralists inevitably migrate to a place where there is water and pasture available. In Afar, people share information, called *Dagu* in local language, regarding the location of available water and pasture. Children, women, elders and disabled people stay at home since they cannot travel to long distances.

Migration also has various impacts on women. The work load increases since they transport their house on donkeys and reconstruct it at the settlement site while continuing to fetch water, collect firewood and cook food. Pregnant women may not be able to access health services and they are more vulnerable to be robbed of their property.

*School:* Boys and girls school dropout rates are high during drought. Although the school attendance of both boys and girls can be affected due to shortage of water, food and other supplies, girls are more challenged since they wake up early in the morning to travel long distances in search of water and miss school hours as a result. Also, girls are expected to cover household tasks along with their mothers. Shortage of school materials like pens, exercise books, and uniforms is another reason for students' dropout and absenteeism. At the Kebele level, secondary school is not usually available close to homes. Thus girls are often required to discontinue to reach secondary education. It can be considered inconvenient and unnecessary for girls to travel long distances and spend extended time away for the purpose of education.

*Nutrition:* Women are affected by nutritional problems due to shortage of food, pregnancy and heavy work load. If women's health is impaired, then their children will not receive appropriate nutrition. Food priority is given for young children and husbands followed by boys and girls; women are the lowest priority. Infants are more dependent on animal milk and breast milk than other children. Children may also not be fed properly as mothers have lesser time to spend with their children while attending to their workloads. As a result, children may suffer from malnutrition. Children under five are also affected by drinking polluted water and can suffer from diarrhoea. These recurrent health and nutrition problems could also lead to stunting. Pregnant and lactating women do not get appropriate food at required intervals. As a result, the foetus or infant could be affected by malnourishment in the womb and it can continue after birth. FHHS are especially affected due to depletion of livelihood asset for basic subsistence. Boys are considered young and strong enough to confront hardship. Hence, they might migrate with camels and as a result endure substantial food shortage. During the drought the amount of milk available is not sufficient as cows are not receiving sufficient water and pasture.

*GBV & Social Norms and Practices:* Chewing chat is a common practice in Afar although it has now reduced because of the drought. As customary in the Afar community, it is women who construct the family's house. Women and girls are at risk of GBV as they move from place to place. Child/early marriage to wealthy men exist though it is somewhat reduced now. The most distressing harmful practice in Afar is *Mira* whereby it is considered normal for men to come into women's homes when their husbands are away and to rape/have sex with them. With more men migrating, this practice is expected to increase and is a very concerning form of GBV.

*Access to resources:* People can gain access to food from government aid and markets. However pregnant women do not receive proper treatment and follow-up from health stations due to the distance, therefore they are exposed to anaemia and other pregnancy related problems.

*Coping mechanisms:* Some of the current coping mechanisms include leasing camels for transportation of commercial commodities; moving to Djibouti; selling of livestock and buying NIDO (canned milk) for HH consumption as a substitute for cow milk; consuming maize without milk; skipping meals; decreasing quantity of food consumed; and eating boiled and dried coffee locally called *Hashara* as food. Some have skills of cultivating small scale farming through irrigation from Dawe River. However, currently the harvested crops have dried-out. Some people migrate toward pasture and water sources or engage in petty trade, and also wood collection for selling. Women have the capacity to properly manage the available food in the house. They are also able to sell wood, use *Unga* (a plant that grows in the area) to make ornaments, beds (locally called *Aloyita*), milking utensils (locally called *Ayini*) and traditional Afar house preparation materials. Girls follow in their mother's footsteps to cope with the drought. Men also have skills of preparing objects such as milk storage vessels (locally called *Kora*) and milking instruments called *Koba*. Additionally, they work as daily labourer (as do boys) on sugar cane plantations or road construction by migrating to nearby towns.

## South Gondar

**Area Context:** South Gondar Zone is one of the administrative zones located in the centre of the Amhara National Regional State. It is located in the North-Western part of the country, 660 km from Addis Ababa. The zone covers 14,298.75 km<sup>2</sup> of which 3% is forest, 36% highland, 51% semi highland and 10% is lowland. The Zone is currently characterized by erratic rainfall and recurrent crop failure. The zone has 15 districts/woredas (10 rural and 5 semi-urban) and 2,435,345 inhabitants of which 1,224,736 are male and 1,210,609 are female. The average annual rainfall of South Gondar zone ranges between 800 and 1600 mm, with considerable spatial and temporal variability in quantities and distribution. The average annual temperature ranges between 6 and 29°C. Rural communities in South Gondar are suffering from chronic food insecurity due to cumulative effect of various factors including erratic rains due to the El Nino affect, small landholdings, highly degraded farmlands, infertile soil, pest infestation, livestock disease and malaria. Out of the 10 rural woredas in South Gondar, Ebinate, Simada, Lay Gayint and Tach Gayint are the most highly affected by the drought.

### Changes because of the Drought

**Livelihoods:** As in the other areas of the RGA, the drought has resulted in critical shortages of water and food and the land has become dry. Crop production of staple crops like sorghum, teff, beans, chick peas are affected. The cattle are also suffering from lack of feed and water.

Women, men, boys and girls are all affected by the drought as follows:

- The elderly, mothers and children are most vulnerable. Pregnant and lactating women are also vulnerable. The elderly do not have the capacity to go out and work while mothers are not able to leave their children and migrate to seek income.
- Women and girls fetch water from the river by traveling more than two hours. As a result, girls are either late or absent from school. Girls who migrate also face various hardship, dropout from school and labour exploitation.
- Men and boys migrate to different areas to find feed and water for animals or looking for employment. As a result, they may face labour exploitation, unemployment and be ailed with diseases like malaria.
- The drought increases the community vulnerability to waterborne diseases.
- FHHS that engage in small trade such as selling *Tella* (a local drink) are unable to engage in this income generating activity because of their responsibility of managing their households. They are also unable to migrate to different areas as they fear to depart from their residential area or because travelling alone becomes more stressful. FHHS plough their land with the support of other people. Regardless their land did not produce much harvest this past year. Thus, they are very stressed since they are unable to feed their dependents.

**School:** The drought affects school attendance of both boys and girls. Although the government here provides school materials, students are absent from school because they cannot attend school with empty stomachs. Some students miss school as they travel to other towns looking for work. The other reason for school absenteeism is the increased amount of time spent in search of water and grazing land for cattle by girls and boys respectively. Girls also drop out of school to get married.

**Nutrition:** Mothers give feeding priority to their young children and husbands followed by girls. Therefore, women eat last. Pregnant and lactating mothers can be vulnerable to malnutrition which in turn affects their children, primarily infants. Boys in FGD said, at HH level, "We share one injera for three without any stew." Previously, the husbands used to eat first, but as a result of drought conditions, it is now children who eat first. For cultural reasons, there are people who do not eat the meat of black chicken, sheep and goat or the meat of an animal unless they see it being slaughtered. Some others do not eat the heart and kidney of animals because they believe that eating these organs will cause their teeth to fall out. Some of these traditional beliefs affect their eating habits which is even more limited in drought and in turn their health.

*GBV & Social Norms and Practices:* Alcohol is consumed in this society particularly by men, but consumption has decreased because of the drought. Theft in general and specifically of cattle and Teff is increasing. The divorce rate has increased and social interaction has decreased which has impacted women. There is no polygamy in the area, however, having an informal wife *Wushima* is sometimes observed in the area. Despite the governments efforts, child (early) marriage is practiced in the area. However, it is being done without a wedding ceremony due to the drought because of the costs.

*Access to Resources:* People in the affected woredas listed above access food rations provided by CARE and also the government. Except for Teff, other food items are available on the market, although, in many cases, the community cannot afford to purchase them.

*Coping Mechanisms:* Some of the coping mechanisms include decreasing frequency of meals especially by women, selling of animals (such as cattle, goat and sheep), utilizing government aid and taking loans from Amhara Credit and Saving Association and from their VSLAs. Boys find employment in road construction or produce charcoal to sell and girls seek out daily labour jobs such as fetching and selling water.

## Recommendations

The following table outlines the key recommendations based on the RGA findings, organised by different programming stages.

<b>Assessment</b>	<ul style="list-style-type: none"> <li>• Ensure gender balanced respondents, including women from different HHs such as Female-headed, Male-headed and those in polygamous relationships</li> <li>• Ensure sex and age disaggregated data in all assessment and M&amp;E</li> <li>• Identification and inclusion of vulnerable groups such as pregnant and lactating mothers, female headed households, people with disabilities and the elderly</li> <li>• Plan for periodic RGAs in emergency drought and recovery stages</li> <li>• Ensure that emergency assessments specifically look at the prevalence of GBV and Harmful Traditional Practices (HTP) and include in risk analysis of the project</li> <li>• Ensure gender assessment team are composed of both men and women and they are briefed and trained on the assessment tools</li> </ul>
<b>Project planning and budgeting</b>	<ul style="list-style-type: none"> <li>• WASH and food assistance targeting vulnerable groups needs to be prioritised as interventions through the crisis phase, including rehabilitation of water supplies and focus on quality food distribution</li> <li>• Integrate psycho-social support activities into emergency response where possible; if not possible within means of project, link with other long-term projects and services which are delivering psycho-social support</li> <li>• Identify available agencies for GBV prevention and response in the area to link to the project</li> <li>• Ensure there is a specific plan and adequate budget and plan for gender sensitive emergency interventions as well as a mechanism for preventing and responding to different forms of GBV</li> <li>• SAA is a key activity in long-term projects and assures the engagement of both men and women; in emergency programming concrete efforts should be made to link with existing SAA groups in the target areas starting from the design and budgeting stages</li> <li>• Implement complaint hearing mechanism in all emergency projects (using the JEOP model) to ensure that communities have a reliable means to bring forward grievances with a system to address them</li> </ul>
<b>Coordination</b>	<ul style="list-style-type: none"> <li>• Coordinate with existing CARE development project SAA groups in order to raise issues of emergency specific tensions and anxieties as well as HTP, with men and women, boys and girls</li> <li>• Link with existing HTP committees in the CARE emergency intervention target areas and plan for their integration into emergency programming as key stakeholders</li> <li>• Improved collaboration is needed between NGOs like CARE and UN agencies, particularly to lobby to the government to crack down on illegal brokers who are arranging early marriages</li> </ul>
<b>Targeting and Distribution</b>	<ul style="list-style-type: none"> <li>• Ensure gender-sensitive targeting for all activities that look at the specific needs of men, women, boys, and girls; for example, in psycho-social support, examining the specific stresses/challenges faced by the different gender and age groups</li> <li>• Emergency programs to work closely with government and community leaders, targeting committees (including female members), and women's and children's affairs when targeting activities as to ensure FHHH, women in polygamous marriages, and other vulnerable groups are not excluded.</li> <li>• CARE emergency project staff to explain targeting and selection approach from a gender analysis perspective to each target community, for instance differentiating between activities that are targeted to Females, Males, Female-Headed HHs, etc. and the rational</li> <li>• Distribution of emergency interventions should be planned carefully with both female and male leaders</li> <li>• Distribution to consider the needs of the community at the time of distribution such appropriate timing, distance location and amounts, ensuring that distribution is accessible for vulnerable groups.</li> </ul>

<b>Training</b>	<ul style="list-style-type: none"> <li>• Train project staff in CO and FOs about the complaints response mechanism and how to effectively implement it</li> <li>• Provide training to women’s and children affairs offices, CBOs and women’s associations on inclusive decision making to ensure inclusive governance especially in cases when men are migrating in and emergency context</li> <li>• All emergency projects to include training for staff, partners and govt. stakeholders on GBV, HTP, gender in emergencies and related CARE policies</li> <li>• Integrate sessions on equal decision making, gender norms, communication, and conflict resolution sessions into all trainings planned during the project</li> </ul>
<b>Monitoring, Evaluation and Learning</b>	<ul style="list-style-type: none"> <li>• Monitoring of GBV and HTP should be a part of all emergency project M&amp;E plans and to be done jointly with relevant government offices such as women and children affairs and community HTP committees. GBV and HTP should be a key evaluation area that all emergency interventions assess in end-line.</li> <li>• Hold separate discussions with men and women, boys and girl target groups</li> <li>• Track a sample of the same HHs and individual women over the course of an emergency intervention to better compare situations and changes over time</li> <li>• Using findings from RGA and emergency projects to present learning internally at CARE and use in future emergency project design</li> <li>• Carry-out an in-depth cohort study in target areas to gain a deeper understanding of women from different areas and HHs, and their coping mechanisms over time</li> <li>• Ensure that the RGA recommendations (for each RGA) feed into emergency gender action plans and other relevant CO policies and strategies</li> </ul>
<b>Communication</b>	<ul style="list-style-type: none"> <li>• All emergency projects to clearly communicate the complaints hearing mechanism system to staff, local government partners and communities and also appoint focal points in each area to ensure this communication and liaison at field level</li> <li>• Develop timely and gender sensitive communications materials which do not perpetuate existing gender stereotypes or harmful gender norms</li> <li>• Using existing social structures to disseminate information and communicate with target communities such as mother to mother groups, SAA and VSLA groups, father to father groups.</li> </ul>
<b>Policy and Advocacy</b>	<ul style="list-style-type: none"> <li>• Present and share findings from RGA and emergency projects to raise the profile of Gender in Emergency issues in different forums in Ethiopia (Ethiopian Humanitarian Country Team, Women and Children’s Affairs Ministry at different levels, INGO networks, etc.)</li> <li>• Use influential project stakeholders as advocates for addressing GBV, HTP and early marriage, such as religious and community leaders</li> </ul>



[www.care.org](http://www.care.org)

## *Rapid Gender Analysis Report*

*CARE Ethiopia*  
Hailegebreselassie Road  
P.O. Box 4710 Addis Ababa, Ethiopia  
T: +251 116 183294

*About CARE: Founded in 1945, CARE is a leading humanitarian organization fighting global poverty. CARE started working in Ethiopia in 1984 in response to severe drought and famine that devastated the population and claimed the lives of nearly one million people. Since then, the organization's activities have expanded to address the root causes of poverty and vulnerability. To learn more, visit [www.care-international.org](http://www.care-international.org).*