

GENDER ANALYSIS FOR THE FOLLOW-ON USAID/SENEGAL CDCS (2019-2024)

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This publication was produced for review by the United States Agency for International Development. It was prepared by Darcy Ashman, Brian Calhoon and Awa Fall-Diop, Management Systems International, A Tetra Tech Company.

CONTENTS

Contents	i
Acronyms	ii
Map of USAID/Senegal Priority Regions	V
Executive Summary	v
Introduction	l
USAID CDCS Gender Analysis Guidelines	
USAID/Senegal Gender Analysis Report Overview	3
Gender Inequality in the Country Development Context	3
Democracy, Human Rights and Governance	9
Findings: Gender gaps and issues	
Recommendations for Democracy, Human Rights and Governance (DRG)	
Strengthen gender-sensitive DRG strategy	
Additional gender-sensitive program approaches and indicators	13
Education	I 4
Findings: Gender gaps and differences	
Recommendations for Education	
Strengthen gender-sensitive education strategy	
Additional gender-sensitive IRs, program approaches and indicators	
Health	2 I
Findings: Gender gaps and issues	
Recommendations for Health	
Strengthen gender-sensitive health strategy	
Additional gender-sensitive program approaches and indicators	27
Economic Growth	
Findings: Gender gaps and issues	
Recommendations for Economic Growth	
Strengthen gender-sensitive economic growth strategy	
Additional gender-sensitive program approaches and indicators	34
Cross-Sectoral Gender Issues	35
Conclusions and Lessons Learned	36
Annex I: Statement Of Work	38
Annex II: References	43
Annex III: Global and Regional Gender Indices	47
Anney IV: Female Representation in Local Legislative Rodies by Region	49

ACRONYMS

AfDB African Development Bank

CDCS Country Development Cooperation Strategy

CEDAW Convention on the Elimination of All Forms of Discrimination Against Women

CSW Commercial sex worker

DEEG Directorate for Equity and Gender Equality, Ministry of Women, Family, and

Children

DOs Development objectives

DEC Development Experience Clearinghouse

G2G Government to government

GBV Gender-based violence

GDI Gender Development Index, UNDP

GEI Gender Equality Index, African Development Bank

GGGR Global Gender Gap Report, World Economic Forum

GII Gender Inequality Index, UNDP

GOLD Governance for Local Development activity

GOS Government of Senegal
FGM Female genital mutilation
HDI Human Development Index

IR Intermediate Result

LGBTI Lesbian, gay, bisexual, transgender, and intersex
MEP USAID/Senegal Monitoring and Evaluation Project

MOH Ministry of Health

MOLG Ministry of Local Government

MOWFC Ministry of Women, Family, and Children

MSI Management Systems International

MSM Men who have sex with men

OECD Organization for Economic Cooperation and Development

OFOR Office of Rural Boreholes
PAD Project Appraisal Document

PAQUET Program for the Improvement of Quality, Equity and Transparency (Programme

d'Amélioration de la Qualité, de l'Equité et de la Transparence)

PMP Performance Management Plan

RMNCH Reproductive, maternal, newborn and child health

SDG Sustainable Development Goal

SIGI Social Institutions and Gender Index, OECD

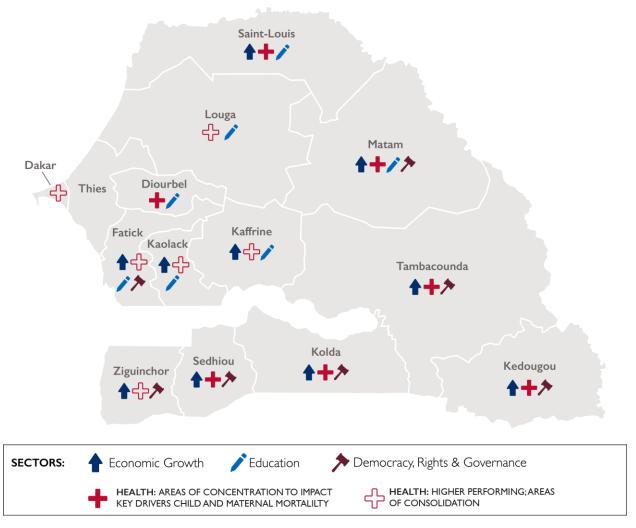
UNDP United Nations Development Program

USAID United States Agency for International Development

WASH Water, sanitation, and hygiene

WEF World Economic Forum

MAP OF USAID/SENEGAL PRIORITY REGIONS



The focus regions of USAID/Senegal's four technical offices. The health team will focus on the areas of concentration (filled crosses) highlighted in the above map while still maintaining programming in areas of consolidation (empty crosses). Regions with several programs provide opportunities to increase gender-sensitive outcomes through coordination of relevant cross-sector activities. In particular, the three regions with the highest GBV rates, Diourbel (72%), Fatick (68%), and Ziguinchor (66%) are program sites of two to four sectors.

EXECUTIVE SUMMARY

This gender analysis will inform planning for the USAID/Senegal follow-on CDCS, which will likely have a term of April 2019 – April 2024. The findings identify major gender gaps at the country and sector levels. The recommendations provide gender-sensitive strategies to reduce these gaps and increase opportunities for women and girls to participate in Senegal's development and governance as leaders and managers, elected officials, business owners, community mobilizers and other meaningful roles along with men and boys.

Gender gaps and issues: Senegal ranks in the lower-middle quarter of each of the major global and regional gender inequality indices. Senegal's overall score has improved since 2009 in the Global Gender Gap Report (GGGR) by the World Economic Forum, primarily due to improvements in political empowerment and educational attainment. Of four sectors covered by the GGGR, political empowerment demonstrates the largest gender gap, followed by the economic, education and health sectors. The country's GDP growth rate is strong at 6.6 percent in 2016² but widespread poverty remains high at nearly 47 percent of the population.

Senegalese gender relations are shaped by socio-cultural norms and customs that establish hierarchical relationships in which males are dominant and females are subordinate. Although the degree and dynamics of these relationships vary by urban/rural residence, ethnic group and religion, in general, Senegalese society expects women to be wives and mothers, performing (unpaid) household responsibilities such as housework, child rearing, and subsistence agricultural labor. Men are expected to be primary decision-makers, earn income through formal employment or entrepreneurship, and take active roles in public life, whether as leaders, public officials, or citizens.

On-going gender issues which limit Senegalese girls' and women's rights, dignity and well-being include early marriage, discriminatory family code (laws and institutional practices governing marriage, divorce and inheritance), and many forms of gender-based violence (GBV) including female genital mutilation (FGM).

Cultural gender norms take time to transform,³ yet significant tangible changes in access to education, healthcare, economic opportunities and political participation have been achieved in Senegal. Senegalese movements for gender equality have established a strong legal and policy framework for women's rights and gender equality that provides an enabling environment for progress to continue in every sector and sphere, from the household to community to local and national politics and civic life. USAID/Senegal has supported many of these efforts over the years. The following recommendations for gender-sensitive CDCS program strategies will enable USAID/Senegal to continue and strengthen its impact on gender equality and women's empowerment.

Contributions to Gender Equality and Female Empowerment Policy Outcomes: The recommended gender-sensitive strategies, when implemented, will enable the follow-on CDCS to contribute to all three USAID gender equality policy outcomes, as follows:

¹ The World Economic Forum's Global Gender Gap Report (GGGR), The United Nations Development Program's Gender Inequality (GII) and Gender Development (GDI) Indices, the Organization for Economic Cooperation and Development's Social Institutions and Gender Index (SIGI), and the African Development Bank's Gender Equality Index (GEI).

² http://www.worldbank.org/en/country/senegal/overview.

³ Ridgeway, Cecilia L., Framed by Gender: How Gender Inequality Persists. Oxford University Press, 2011.

Outcome I: Reduce gender gaps in access to/control over economic, political and social resources

Recommended strategies in Economic Growth will increase women farmers and entrepreneurs' access to finance, land, and technical support for their farms and organizations. Training and mentoring for young women entrepreneurs will enable them to increase their incomes over time. Similarly, USAID/Senegal investments in growing the private sector in Water, Sanitation, and Health (WASH) and in Health should ensure that women gain access to these opportunities along with men.

Recommended strategies in Education and Health will increase girls' and women's access to relevant quality services, thereby improving their status and capabilities to participate in development. At a minimum, F Indicator GNDR-2 Percentage of female participants in USG-assisted programs designed to increase access to productive economic resources (assets, credit, income or employment) and other custom indicators should be used in performance monitoring.

Outcome 2: Reduce gender based violence and mitigate its harmful effects on individuals and communities, so that all people can live healthy and productive lives

Recommended strategies in the Health sector include support to the Gender Unit of the Ministry of Health (MOH) to train public health workers to recognize and treat GBV according to its standard protocol. In addition, given that GBV is an on-going critical issue, USAID/Senegal should pursue additional cross-sector work, aligned with Government of Senegal (GOS) policy, to improve research on the prevalence and root causes of GBV in the different regions. This in turn can inform expanded efforts in advocacy, enforcement, and social services. At a minimum, F Indicator GNDR-6 Number of people reached by a USG funded intervention providing GBV services should be used.

Outcome 3: Reduce constraints that prevent women and girls from leading, participating fully in and influencing decisions in their societies

Recommended DRG and Health strategies will increase the civic leadership and participation by women, especially in local governance and management of local service delivery. Lessons learned from the evaluation of the Women's Leadership and Civic Journalism activity will inform on-going activities to strengthen women's leadership in peacebuilding and community development in the conflict-affected Casamance region.

Recommended strategies in DRG, Health and Education to coordinate with the GOS gender mainstreaming bodies and support capacity development programs will increase the number and skills of women in higher level executive and management positions and improve the management culture for women through gender-sensitive training. DRG capacity building for local elected officials include women and men with gender-sensitive content. At a minimum, F-Indicator GNDR-10 Number of women participating in a substantive role of position in a peacebuilding process supported with USG assistance and F-Indicator GNDR-8 Number of persons trained with USG assistance to advance outcomes consistent with gender equality or female empowerment through their roles in public or private sector institutions or organizations should be used in performance monitoring.

Recommendations by sector: The current CDCS and project plans were informed by gender analysis and included some gender-focused program plans, but did not fully integrate gender-sensitive content in the DOs, IRs, narratives, and indicators, as required in ADS 205. Thus, the recommendations provide suggested revisions to continue and strengthen current plans, as well as new strategies to address key gender gaps and issues.

Democracy, Human Rights and Governance (DRG): Strengthened programming will improve inclusive governance through gender-sensitive capacity development of local governance structures and processes and through civil society women's leadership promotion. Focus regions include Matam, Fatick, and the Southern regions of Kolda, Sédhiou, Ziguinchor, Kédougou, and Tambacounda, where gender inequality, poverty, and conflict are relatively worse. Coordination with the health and education sectors will support increased access to quality services for women and girls. Lessons learned from the evaluation of the Women's Leadership activity in Thiès, Diourbel, and the Casamance should be incorporated in the design of a follow-on activity, which should be scaled-up to reach a wider population. New Government to Government (G2G) programming should support the Directorate for Equity and Gender Equality (DEEG) in the Ministry of Women, Family, and Children to implement gender mainstreaming priorities at the national and local levels.

Education: Programs should continue to focus on maintaining gender parity and high enrollment rates in primary education; new strategies to improve retention and completion rates for girls and boys should be added. Target regions include Fatick, Kaolack, Kaffrine, Matam, Louga, Diourbel and St. Louis. The Mission should continue to work with the Ministry of Education to increase the number of female teachers, administrators, and supervisors as well as develop the capacity of men and women working in these positions. In addition, to enhance the ownership and sustainability of this work, the Mission should support the Ministry's Gender Unit to more effectively coordinate activities across donors and systematically mainstream gender throughout the education system. Similarly, USAID/Senegal should add investments in technical and vocational training (TVET) for women and youth to increase their access to higher-paying, if non-traditional, occupations.

Health: Programs should continue to focus on women as consumers of health care and as citizens in local communities. Priorities include reducing maternal and child mortality, child malnutrition, and increasing access to quality services (RMNCH). Activities will consolidate previous gains in Dakar, Thiès, Fatick, Kaolack, Kaffrine, Louga, and Ziguinchor and concentrate efforts in Diourbel, Sédhiou, Kolda, Kédougou, Tambacounda, Matam, and Saint Louis. Support to the central MOH will increase its capacity to deliver gender-sensitive priority services, including sensitizing male medical staff to increase regard for female patients, creating private spaces for women's health exams, and adapting 'teen corners' to the different concerns of young women and men. Behavior change efforts will engage more men and boys, promoting shared responsibility for healthcare. Community mobilization will ensure that women participate in the management of health services; approaches will accommodate women's different time availability, child care responsibilities and other potential constraints to their participation.

Recommended new strategies include involving women entrepreneurs in the development of private sector health care and ensuring that human resource capacity development work prioritizes supporting women leaders and managers in public sector service delivery.

Economic Growth: Programs should continue to focus on increasing women's and adolescent girls' access to agricultural inputs, financial resources, and land. Target regions include the Southern Forest Zone (SFZ) and the Senegal River Valley (SRV) (parts of Saint Louis, Matam, Tambacounda, Kédougou, Kolda, Fatick, Kaolack, Kaffrine, Sédhiou, and Ziguinchor). USAID/Senegal should also raise awareness

GENDER ANALYSIS FOR THE USAID/SENEGAL CDCS (2019-2024)

⁴ USAID/Senegal FY 16 PPR notes gender-based constraints on women and girls including violence, limited access to resources and economic opportunities, limited access to and retention in schools, and displacement of households and communities, associated with increased numbers of female-headed households.

of these opportunities by championing successful women agriculturalists and land owners. Gendersensitive WASH strategies should increase women's voices through representation in local water users' associations. USAID/Senegal should ensure that women not only increase their access to clean water and sanitation as consumers, but they also have opportunities, along with men, to build the private sector development of these services through access to training and finance.

<u>Cross-sectoral gender issues.</u> Women's and girls' human rights under the family code and all forms of GBV are severe gender issues in Senegal which are only partly addressed through the sector programs in Health (GBV) and DRG (CSO advocacy for family code rights). Given the two additional years before the follow-on CDCS, USAID/Senegal should invest in a Rights/GBV gender analysis to inform future programming. USAID has numerous institutional resources on both issues, including policy guidelines, toolkits, training materials and a GBV Incentive Fund based in Washington. The follow on CDCS should include a separate DO and IRs to ensure strategic focus and outcomes.

INTRODUCTION

When work for this Gender Analysis began, USAID/Senegal expected that its follow-on CDCS would be in place by October 2017. However, as the Analysis progressed, USAID/Senegal received an extension of the current CDCS from October 2017 to April 2019. Therefore, this Analysis will be used to inform planning for the Mission's follow-on CDCS, which will likely have a term of April 2019 – April 2024. A gender analysis is among the mandatory analyses for a USAID CDCS. Since USAID/Senegal has completed (or will complete) sectoral gender analyses and research in women's leadership, agriculture, health, and education, the data, findings, and recommendations from these analyses shall be integrated into an updated gender analysis along with additional data from the democracy and governance sector and the national level.

Through the USAID/Senegal Monitoring and Evaluation Project (MEP), USAID/Senegal enlisted a team to review existing gender analyses, statistical evidence, and other research information, identify where any further data gathering and analytical work was needed, conduct such work, and then use the analysis to draft the updated gender analysis for the new CDCS, framing the report to be useful in drafting the sections required in ADS 205.3.3. The scope of this gender analysis focuses on enabling the Mission to develop a gender-sensitive country strategy. It identifies the major macro- and sectoral-level gender inequalities and obstacles to female empowerment and recommends strategic improvements and additions to the current CDCS and Project Appraisal Documents (PADs) reviewed. This gender analysis report relies primarily on existing secondary data and interviews with Government of Senegal (GOS) officials and USAID Sector Teams. The Gender Analysis team includes a senior Senegalese gender specialist, a senior US-based gender specialist, a US-based analyst and key MEP staff.

USAID CDCS Gender Analysis Guidelines

USAID gender and development policy recognizes that increasing gender equality and women's empowerment strengthens development outcomes, democratic governance, and efforts to build more peaceful and resilient societies. In 2012-2013, USAID updated its gender policy and official operational guidance to strengthen the agency's focus on gender integration in the program cycle, from strategic planning at the country or regional level, to project and activity design and implementation, to monitoring, evaluation, and learning. Operational guidance is provided in ADS 201, USAID Program Cycle Operational Policy, and ADS 205, USAID Integrating Gender Equality and Female Empowerment in USAID's Program Cycle. USAID revised ADS 205 (4/27/17) during the course of this review and the Team has revised the recommendations of this report to address the updated requirements to the extent possible under the SOW.

The CDCS defines the Mission's strategic approach to achieving development results, showing how results in particular sectors contribute to the Mission's overarching goal and development objectives (DOs). The CDCS establishes program priorities and key approaches for each sector. The development of the CDCS provides a forum for interaction and buy-in with local stakeholders. The CDCS provides some explanation of how the strategy will be implemented, but not in-depth details about projects and activities, either in the current portfolio or those that will be designed.

⁵ ADS 201, p.16.

⁶ ADS 201, p.17.

The gender analysis in this report will assist USAID/Senegal in developing a gender-sensitive CDCS, consistent with the key requirements of ADS 205:

- Gender-sensitive country background section (development context, challenges and opportunities). Discussion of the country conditions and supporting evidence to support selection of the overall Goal and DOs to include:
 - Evidence of key gender gaps and differences, including sex-disaggregated statistics and other data, along with a brief profile of leadership roles of women and men and relevant gender norms.
 - Explicit narrative discussion of how the country strategy will contribute to the three
 USAID Gender Equality and Female Empowerment policy outcomes: I) reductions in
 gender gaps in access to/control over economic, social and political resources; 2)
 reductions in the prevalence of gender-based violence; and 3) reductions in constraints
 preventing women and girls from leading, participating in and influencing decisions in
 their societies.
- 2) Gender-sensitive DOs and Intermediate Results (IRs). DO and IR narratives identify specific relevant gender gaps and issues and discuss how the gaps will be reduced using appropriate gender-sensitive approaches. Since much of USAID programming targets specific regions, this report will further disaggregate relevant data to the sub-regional level where possible. Similarly, since USAID's inclusive development approach also seeks to benefit other disadvantaged groups, statistics and other evidence regarding their relative status is included to the extent possible.
- 3) **Gender-sensitive Results and M&E framework**. CDCS Mission-level indicators include gender-specific indicators to track progress in closing gender gaps or achieving female empowerment, keeping in mind that all person-level indicators need to be sex-disaggregated.

For the purposes of this report, the five domains of gender analysis described in ADS 2057 provided the analytic framework to review and synthesize previous gender analyses, research and statistical reports. Gender inequalities in any society are a result of complex systems of inter-related factors highlighted in each domain. The Senegalese data revealed that gender gaps cut across two or more domains, such as cultural gender norms, roles and responsibilities, or laws, institutions and patterns of power and decision-making. This report frames the gender gaps and issues in terms relevant to the context and sector; all resulted from gender analysis consistent with ADS 205 and are linked implicitly or explicitly to one or more of the five domains.

Gender analysis goes beyond identifying differences between males and females, as the revised ADS 205 makes clear. People in many societies face inequalities due to their gender identity, when it does not conform to societal norms. USAID policies also promote rights and services for key populations affected by HIV/AIDS and lesbian, gay, bisexual and transgender (LGBT) groups. Moreover, gender is not the only social identity factor contributing to inequality and development challenges; other factors such as age, ethnicity, religion, income, etc. are increasingly important to understand for inclusive development programming. To the extent possible, these considerations have been taken into account in this gender analysis report.

⁷ 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 (ADS 205, 2013, p. 9. The analytic approach of this report is consistent with the updated guidance in ADS 205, 2017, p. 13)

Finally, the report does not conflate gender equality with girls' and women's empowerment only. The focus of gender analysis is to identify gender-based disparities to be addressed through programming. Gender disparities may affect females, males, or other gender and social identity groups. When boys and men are relatively worse off, with negative consequences for their rights, well-being, dignity, and contributions to development, gender analysis informs programming to benefit males as well as females. This is the case with approaches to primary education in some areas of Senegal, which now must seek to maintain gender parity by attending to the needs of girls and boys when they are different. Further, gender relationships are interdependent; when appropriate, a holistic approach that involves men and boys, along with women and girls, enables them to understand and support transformative change towards more equal gender norms, roles, and relationships.

USAID/Senegal Gender Analysis Report Overview

This report, as requested, is structured to reflect the key CDCS sections and requirements described above. Findings of the gender analysis – key gender gaps and issues -- are reported at the country level for the country development context, challenges, and opportunities section, and at the sector level for each of the current USAID/Senegal sectors: Democracy and Governance, Education, Health and Economic Growth. The sector level findings of gender gaps and issues deepen the information provided in the country overview for the specific sector and if data is available, regional variations.

Recommendations for strengthening and expanding current USAID/Senegal programs to become more gender-sensitive and better address significant gender gaps and issues are provided in each of the sectors and an additional section on cross-cutting gender issues. DO and IR sector narratives draw from available USAID gender assessments, Project Appraisal Documents (PADs), and the current CDCS 2012-2019 (last updated in June 2015, and extended in May 2017). The recommendations build on and support existing USAID priorities and programming, suggesting how intended gender outcomes and approaches can be articulated more explicitly in the CDCS, including in development hypotheses, DOs, IRs, and indicators. Recommendations also highlight additional programming opportunities to address important gender gaps and issues.

GENDER INEQUALITY IN THE COUNTRY DEVELOPMENT CONTEXT

Gender equality is understood in the context of Senegal's overall political, economic, social, and cultural characteristics. Senegal is a stable country that has peacefully transferred power in three national elections since independence in 1960. Senegal's current population of 15.9 million has increased by about 3 million since the 2010 USAID/Senegal Gender Assessment, and is projected to reach 16.3 million by early 2018.8 The sex ratio at birth is about equal (.944 on a scale of 0 (most unequal) to I (most equal) according to the 2016 Global Gender Gap Report (GGGR)). Fifty-six percent of the population lives in rural areas.9 The population is primarily Muslim (96.1 percent, with 3.8 percent Christian and .1 percent animist¹⁰), and as of 2011, included more than eight ethnic groups (Wolof 38.7

^{8 (}http://countrymeters.info/en/Senegal).

⁹ World Bank website.

¹⁰ DHS 2015, p.2.

percent, Pulaar 26.5 percent, Serer 15 percent, Mandinka 4.2 percent, Jola 4 percent, Soninke 2.3 percent, and other 9.3 percent¹¹).

Low income/low human development/moderate inequality. In 2016, the World Bank changed Senegal's income classification to Low (per capita GNI below \$1,025) from Lower Middle. The growth rate is strong and increasing, from 4.5 percent in 2014 to 6.5 percent in 2015 and remaining stable in 2016 (6.6 percent). However, the growth rate is not strong enough to reduce widespread poverty, which remains high at 46.7 percent of the population.

The United Nations Development Programme (UNDP) classifies Senegal as a low human development country, ranking it 170 of 188 countries in the 2015 Human Development Index (HDI). Its score of .494 is below the average of .505 for countries in this category, and internal inequality further reduces the HDI to .331 on the Inequality Human Development Index (e.g. inequality in HDI indicators leads to a loss of 33.1 percent in overall human development) and placing Senegal in the moderately unequal group of countries.

Lower middle quarter rank. On overall gender equality, Senegal ranks in the lower middle quarter of countries included in the major gender inequality indices, as demonstrated in Table I below.¹³ The World Economic Forum's GGGR and the UNDP's Gender Inequality Index (GII) and Gender Development Index (GDI) report on key economic, health, educational, and political status or empowerment indicators.¹⁴ The Organization for Economic Cooperation and Development's (OECD) Social Institutions and Gender Index (SIGI) and the African Development Bank's Africa Gender Equality Index (GEI) measure additional indicators of gender inequalities, including relevant laws and social institutions and physical safety (SIGI). Each index must be understood in terms of its own specific indicators and methods for analyzing data as they are not necessarily strictly comparable across indices or even longitudinally within a given index. However, the scores and rankings provide a useful snapshot of gender inequality in Senegal compared to other countries.

Several of the measures have been developed or modified since the 2010 USAID Gender Assessment, making it challenging to identify major trends in gender inequality.¹⁵ However, the improvement in the GGGR score since 2009 reflects important achievements in the political and education sectors, even though they remain the sectors with the two largest gender gaps. The GGGR illustrates comparative gender equality across the four sectors in which USAID/Senegal programs operate.¹⁶ The largest gender gaps, indicated by blue shaded rows, fall in the political and economic sectors, followed by education and health, respectively. Health scores are near parity. Scores and indicators for each sector are shown below in Table 2 (0 = gender imparity and I = gender parity).

The increase in the political empowerment score is due to the increased percentage of women in parliament, from 22 to 43 percent in the 2012 elections. The increase in educational attainment is due to increases in the literacy rate and enrollment of girls in primary schools¹⁷. These are major

¹¹ CIA World Fact Book, 2010-2011.

¹² http://www.worldbank.org/en/country/senegal/overview.

 $^{^{13}}$ Calculated by converting the rank to percentage and comparing the percentages across the indices, grouped into four quarters (upper I - 25 percent; upper middle 26-50 percent; lower middle 51-75 percent; and lower 76-100 percent).

¹⁴ See Annex II for explanations of each index.

¹⁵ UNDP (2015) "Gender Equality in Human Development – Measurement Revisited." Human Development Report Office.

 $^{^{16}}$ The GGGR health sector indicators must be supplemented with maternal and child health indicators to reflect USAID programming priorities. See the health sector section of the report.

¹⁷ At the same time, primary enrollment rates for Senegalese boys appear to have declined, especially in the north, so equal attention needs to be given to both girls' and boys' enrollment in primary and other levels of schooling.

achievements in gender equality by Senegalese leaders and society that are important in their own rights and shown by global evidence to be associated with improved governance and development outcomes. ¹⁸ USAID/Senegal programs have supported these achievements.

Key sector-wise gaps: This sector-wise comparison suggests that the most important gender disparities for USAID/Senegal to address are those in the economic and political sectors. Although there are important opportunities in Senegal to advance gender equality in all four sectors, evidence suggests that progress in political and economic empowerment is inter-related and key to overall gender equality. These relative sector inequalities are found across many countries; recent global development commitments such as the 2017 Commission of the Status of Women and the Sustainable Development Goals (SDGs) have prioritized increasing women's economic access to and control of resources.¹⁹

TABLE 1: SENEGAL COUNTRY RANKING GENDER EQUALITY INDICES

Index, Agency	Score (2016 or most recent available)	Rank	Changes since 2010 Senegal Gender Assessment
GGGR, WEF	.685 (I = gender parity)	82 of 144 countries	Increase (2009 score .643, rank 102 of 134)
GII, UNDP	.521 (2016, 1 = gender parity)	I 20 of I 88 countries; Lower than average score of other Low HDI countries (.590) and Sub-Saharan Africa (.572)	N/A (not reported)
GDI, UNDP	.886 (ratio female to male HDI, 2016: .436 f/.494 m)	Higher than average score of other Low HDI countries (.883) and Sub-Saharan Africa (.877)	N/A (new measure 2014)
SIGI, OECD	Medium category (low category is best)	52 of 102 countries	No change
GEI, AfDB	51.9 (2015, 100 is gender parity)	30 of 52 African countries	N/A

Laws and institutions. The 2001 Constitution and current legal framework establish substantial equal rights for women and men. The most recent elections in 2012 increased the percentage of women in parliament from 22 percent to 43 percent, the highest proportion in sub-Saharan Africa, next to Rwanda. At the local level, women increased their average representation from 16 percent (prior to the 2010 parity law) to 47 percent (following the 2010 parity law) across all regions. Freedom House (2016) rates Senegal as one of twelve "Free" sub-Saharan African countries.

¹⁸ Chen, Li-Ju (2010). Do Gender Quotas Influence Women's Representation and Policy Outcomes? European Journal of Comparative Economics. Vol. 7, No. 1, pp. 13-60.

¹⁹ http://www.un.org/sustainabledevelopment/sustainable-development-goals/and http://www.unwomen.org/en/csw/csw61-2017.

²⁰ Le profil genre des collectivités locales. UAEL - Février 2015.

<u>Significant gender disparities.</u> However, women continue to face significant violations of their rights and well-being, including female genital mutilation (FGM), rape, domestic abuse and other forms of gender-based violence (GBV), and forced early marriage. Lesbian, gay, bisexual, transgender, and intersex (LGBTI) identity groups and lower caste Senegalese also face severely restricted space.²¹ Various forms of forced child labor, including begging by boys who attend *daaras* (Koranic schools) in Dakar and sex trafficking, are also significant concerns.

Both the SIGI and AfDB GEI include measures of legal and institutional discrimination against women and girls; the latter focusing on issues common across Africa. Senegal falls in the highest (worst) category for family legal code (legal age of marriage, early marriage, parental authority, and inheritance), and high (next worst) category for physical integrity (gender-based violence (GBV), FGM, and reproductive autonomy). It is in the low (best) category for son bias (missing women and male fertility preference).²² The SIGI Senegal overview reports that poverty affects women and girls disproportionately, with girls leaving school earlier than boys. Urban-rural residence also affects women's access to formal laws and justice, with urban women better protected than in rural areas where patriarchal customary and religious practices dominate.

TABLE 2: GLOBAL GENDER GAP REPORT, SENEGAL, SECTOR BREAKDOWN

Sector	2016 S core	2009 Score	Indicators
Political empowerment	.316	.141	Women in parliament, women in ministerial positions, years with female head of state (last 50)
Educational attainment	.830	.817	Literacy, enrollment primary, enrollment secondary, enrollment tertiary
Economic participation & opportunity	.628	.638	Labor force participation, Wage equality for similar work, Est. earned income, US \$ PPP ²³
Health & survival	.967	.974	Sex ratio at birth, healthy life expectancy

Senegalese cultural gender norms, roles, responsibilities and leadership. Senegalese gender relations are shaped by socio-cultural norms and customs that establish hierarchical relationships in which males are dominant and females are subordinate. Although these relationships vary by urban/rural residence, income level, ethnic group, and religion, in general Senegalese society expects women to be wives and mothers, performing (unpaid) household and domestic work including child-bearing and rearing, care and maintenance of the household, and subsistence agriculture. Women, especially elder women, have influence in these areas, although conflict, at times violent, among co-wives in polygamous households is reported. Men, on the other hand, are expected to be the primary decision-makers, earn income through formal employment or entrepreneurship, and take active roles in public life, whether as leaders, public officials, or citizens. The increasing influence of conservative Islamic culture in Senegal (as in other countries) further skews gender relationships towards inequality. Inheritance customs, for example, vary by region but favor males over females: daughters receive half of what sons receive and

²¹ Freedom in the World Report, Senegal, 2016.

²² http://www.genderindex.org/country/senegal.

²³ Data for two other indicators not available in Senegal: legislators, senior officials and managers; professional and technical workers.

widows receive a quarter of the inheritance unless there are children in which case they receive an eighth of the inheritance.

<u>Leadership roles</u>. These gender norms play out in privileging males' access to leadership opportunities in formal positions in the public and private sectors. Institutional cultures reflect and support males' preferences and leadership styles, often creating work environments that are non-conducive or even hostile to women's empowerment through leadership opportunities, promotion, or equal pay. Political representation has increased due to the adoption of quotas, especially at the national level, yet much work remains to be done to increase the political influence and substantive representation of women at all levels and in all regions of Senegal.

GBV, early marriage, FGM, and discrimination against LGBT all constitute manifestations of gender inequality that severely limit women's, girls', and LGBT individuals' human rights, dignity, wellbeing, and opportunities. USAID policy recognizes these harms and has adopted programming guidelines.²⁴

Research on the prevalence of GBV and effectiveness of legal and social services in Senegal is scarce. However, a 2015 study by the *Groupe d'Etudes et de Recherches Genre et Sociétés* at the Université Gaston Berger showed that the majority of GBV cases occurred in the home (52 percent). Regionally, GBV is present throughout the county (see Table 7 in the Health section), and affects more women (63 percent) than men (37 percent).²⁵ This study found that GBV affects both sexes, including a range of types of violence, from physical, sexual, and psychological to economic and financial.²⁶ In the work place, GBV occurs through physical violence (6 percent of cases), psychological violence (50 percent), sexual violence (17 percent), economic violence (11 percent), and other forms (17 percent).²⁷

The power differences embodied in Senegalese gender cultural norms are reflected in DHS data that show nearly 60 percent of women ages 15-49 say that violence within a marriage is justifiable, while only 25 percent of men say it is justifiable.²⁸ DHS data over the last decade show that these opinions have remained static. Regionally, the acceptance of marital violence is highest among women in the south (70 percent) and center (68 percent) and lowest in the west (41 percent). Reasons given as justifications for violence include burning food, verbal arguments, going out without telling the husband, ignoring children, and refusing sex.²⁹

According to the NGO Childfund, almost 75 percent of young girls have experienced some form of sexual harassment.³⁰ This includes 74 percent of schoolgirls being sexually harassed, 22 percent having

²⁴ United States Strategy to Prevent and Respond to Gender-Based Violence Globally: 2016 Update, https://www.state.gov/documents/organization/258703.pdf; USAID, Child, Early, and Forced Marriage Resource Guide, 2015, https://www.usaid.gov/sites/default/files/documents/1865/USAID_CEFM_Resource-Guide.PDF; USAID, Ending Child Marriage & Meeting the Needs of Married Children: The USAID Vision for Action, 2012, http://pdf.usaid.gov/pdf_docs/pdacu300.pdf; The United States National Action Plan on Women, Peace, and Security, 2016, https://www.usaid.gov/sites/default/files/documents/1868/National%20Action%20Plan%20on%20Women%2C%20Peace%2C%20and%20Security.

²⁵ Groupe d'Etudes et de Recherches Genre et Sociétés – Université Gaston Berger (GESTES – UGB) / Centre de Recherche et de Développement International (CRDI), « Les VBG dans les ménages : représentations, connaissances, prévalences et prise en charge », 2015.

²⁶ Ibid.

²⁷ Groupe d'Etudes et de Recherches Genre et Sociétés – Université Gaston Berger (GESTES – UGB) / Centre de Recherche et de Développement International (CRDI), « Les Violences Basées sur le Genre au Sénégal : la prévention comme alternative aux périls de sécurité et de justice : Une analyse des violences basées sur le genre en milieu professionnel », 2013.

²⁸ DHS, 2015.

²⁹ Ibid

 $^{^{30}\ \}underline{\text{http://blog.childfund.org/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/2014/07/in-senegal-mobilizing-communities-adainst-girls-adain$

experienced attempted rape, and 8 percent being raped. More often than not, the perpetrators are known to the victims. A 2016 inquiry by the Committee of Struggle against Violence on Women and Children in Senegal showed that 65 percent of violent incidents occur within the family. Fifty-eight percent of cases are linked to rape, aggression, incest, pedophilia, sexual harassment and sexual exploitation.³¹

While the overall rate of early marriage remains a concern, it is declining nationally: girls aged 20-24 who were married by 18 has fallen to 33 percent (UN Women) from 39 percent in 2010 (USAID Gender Assessment 2010). The national rate of women subjected to FGM is reported to be 24 percent by the Demographic and Health Survey 2015 and 26 percent by UN Women. According to the DHS 2015, the rate of FGM ranges from 6.9 percent in the Center (Fatick, Kaolack, Diourbel, and Kaffrine), 11 percent in the West (Dakar and Thiès), to 31.1 percent in the North (Louga, Saint-Louis, and Matam), and an extremely high 76.9 percent in the South (Ziguinchor, Sédhiou, Kolda, Tambacounda, and Kédougou). Rates are 60 percent or higher among the Soninke, Jola, Poular and Mandinka.³²

Progress and remaining challenges Although cultural gender norms take a long time to transform,³³ significant, tangible changes in attitudes, laws, institutions and access to opportunities and resources can (and do) improve the dignity and well-being of women, girls, and their families and societies. In Senegal, movements for gender equality have established a strong legal and policy framework for women's rights and gender equality that provides an enabling environment for progress to continue in every sector and sphere, from the household to community to local and national politics and civic life. Highlights of progress include:

- Legal guarantees and political representation. The 2001 Constitution is key, specifically Articles 7 (gender equality), 15 (equal access to land), 18, 19, and 22, as are Senegal's endorsement of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the Maputo Protocol to the African Charter on the Rights of Women (2004). Additional key measures, while not without gaps, provide key protections for women and girls: violence against women (1999), reproductive health (2005), HIV (2010), gender equality (2010), tax equality (2008), and nationality (2013).
- Greater openness among political leaders, ministers, and parliamentarians, with greater commitment to increasing women's political participation and to ensuring gender mainstreaming in public policies.
- Strengthened protection and promotion of equal rights in agriculture, fisheries, livestock, health, education, employment, and social protections.
- Increased numbers of women in occupations traditionally reserved for men, such as mechanical and civil engineering. Small but encouraging gains include: of the 500 students enrolled in the *Programme d'Appui au Développement et à l'Intégration de l'Apprentissage* in the regions of Thiès, Kaolack, and Fatick, young women make up 2 percent of metalworking, 8 percent of cooling and refrigeration, and 9 percent of auto mechanics.³⁴ In the military and paramilitary corps, 300 women were enrolled in the Senegalese army in 2007, implementing the Decree 91-1173 of 1991 on recruitment in armed forces.³⁵

33 Ridgeway, Cecilia L., Framed by Gender: How Gender Inequality Persists. Oxford University Press, 2011.

³¹ http://www.huffingtonpost.co.uk/johanna-higgs/senegal-access-justice b 12639626.html

³² DHS 2015.

³⁴ Fall-Diop, Awa, Programme d'Appui au Développement et à l'Intégration de l'Apprentissage, Stratégie de Promotion de l'Egalité Femmes-Hommes, 2016.

³⁵ Journal Officiel J.O. Nº 6775 du Samedi 15 février 2014

• Reduced age of first marriage nationally (although still high at 33 percent who marry before age 18) and first child, due to increased girls' retention in schools; mobility and choice in marriage.

Remaining major gaps and differences at the country level to address through gender-sensitive development policy and programs include:

- Lack of women's legal rights and/or weak enforcement of such rights in marriage, divorce, and inheritance of wealth, land, and other property.
- Lack of women's equal access to productive agricultural land and financial capital.
- Persistent prevalence of GBV, weak legal protection, and gaps in legal and social services.
- Discrimination against LGBTI individuals, including physical attacks, police harassment, arrest, and fines or prison sentences.³⁶
- Increasing influence of conservative Islamic traditions which limit women's equal rights in marriage, divorce, inheritance and other areas.

Additional key sector-specific gender gaps are discussed in each of the four sector sections.

DEMOCRACY, HUMAN RIGHTS AND GOVERNANCE

Findings: Gender gaps and issues

Some may be surprised to learn that gender inequalities in Senegal are more severe in the political sphere as compared to the other three sectors (economic, health and education),³⁷ given the recent gains in numbers of elected women representatives at the national (from 19 percent to 43 percent in 2012) and regional levels (from 16 percent to 47 percent) due to the Law on Equality of Men and Women in Electoral Lists of 2010 (Gender Parity Law). Still, women remain severely underrepresented in the leadership and senior management of public sector, making up 18 percent of ministers.³⁸ In departmental and municipal bureaus women account for only 22 percent and 13 percent of members, respectively.³⁹ Senegal has had a female head of government (prime minister) for just three of the last 50 years.

Legal environment. Senegal's legal framework establishes gender equality in the 2001 Constitution and in a number of important laws passed since then, demonstrating strong political will by several successive administrations to achieve gender equality. Additional protections to those noted in the country overview include provisions in the 2001 Constitution which reaffirm Senegal's commitment to international agreements and to the equality of women and men, especially Articles 7 (equality before the law), 15 (equal right to possess and own land), 18 (outlaws forced marriage), 19 (wives have equal rights to goods and property as husbands), and 22 (right for all children to attend school). Men and women have the same rights in the eyes of the law. Additional changes include the Tax Equality Act (2008), which allowed for men's and women's income to be taxed at the same rate, and the Nationality Law (2013). A 2008 legislative provision allowed women to join the military, the gendarmerie, and the police. Internationally, the GOS is a signatory to the Convention on the Elimination of All Forms of

³⁶ Freedom in the World Report, 2016

³⁷ GGGR 2016. See Table 2 above. The GGGR Political empowerment score is .316, well below the economic participation score at .628.

³⁸ Author calculations using data found here, www.gouv.sn/-Le-Gouvernement-.html Recent USAID (Women in Power, 2016) and UNDP (Gender Equality in Public Administration, 2016) studies provide global evidence of this important gender gap for women's political empowerment and development.

³⁹ La Cellule d'appui aux Elus Locaux (CAEL), Le Profil Genre des Collectivités Locales du Sénégal, February 2015. Additional information on regional and local gender disparities in female representation is provided in Annex 3.

Discrimination Against Women (CEDAW) and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (2004). These documents address gender equality, the prohibition of female genital mutilation, and the prohibition of early marriage, as well as provide for women's access to land and promote girls' education.

Despite these gains, Senegal's SIGI rating for the family legal code places it among the worst for gender equality in marriage and inheritance. Similarly, legal and institutional protections from GBV and FGM are also relatively weak. Although many laws formally establish gender equality rights and protections, many Senegalese people, especially in rural areas, are not aware of them and thus do not seek their enforcement. Moreover, governance structures and practices, especially at regional and local levels, are influenced by traditional customary laws and conservative Islamic practices contrary to the formal laws on gender equality.

Gender policies and architecture. The *Direction de l'Equité et de l'Egalité de Genre* (Directorate of Equity and Gender Equality, DEEG) within the Ministry of Women, Family, and Children (MOWFC) is the main governmental body dedicated to mainstreaming gender and monitoring implementation in ministries, NGOs, and the private sector. The DEEG is responsible for the *Stratégie Nationale pour l'Equité et l'Egalité de Genre* (SNEEG) (National Gender Equity and Equality Strategy), which aims to establish an institutional, socio-cultural, legal and economic environment that will support the achievement of gender equality in Senegal and effectively integrate gender into development interventions in all sectors.⁴⁰ Each line ministry has established a Gender Unit to coordinate with the DEEG in implementing national gender mainstreaming goals.⁴¹ The Government of Senegal (GOS) is currently evaluating the results of the former SNEEG as it prepares the next ten-year gender strategy (2016-2026).

However, the DEEG and the ministry Gender Units are constrained by a lack of resources and staff with appropriate skills to integrate gender in plans, policies, procedures, and practices across the government. The DEEG has only one gender consultant to support implementation across ministries of health, local governance, hydraulics and sanitation, and vocational training.⁴² Positions in all ministry gender units are typically given to women without gender and sector expertise, and they are not provided with job descriptions, scopes of work, or specific results to achieve.⁴³ There are no men employed in these units, which further isolates and stigmatizes their work.

Gender cultural norms and democratic governance. One of the main factors slowing progress in realizing women's equal rights, opportunities, and well-being in Senegal is the influence of cultural norms that subordinate women to men and encourage men to lead and participate in the public sphere, whether at national, regional or local levels. These norms also influence deliberative bodies where men maintain leadership roles in spite of strong female representation. In the longer-term, these norms should change over time, as elected women gain more of a foothold in politics, take on higher level leadership positions, and become role models paving the way into politics for younger women. In the meantime, gender-sensitive leadership and governance capacity is lacking, especially at local levels where the larger project of democratic governance is relatively new.

⁴⁰ Also important is the Plan d'action national pour l'accélération de l'abandon de l'excision 2010-2015 (National Action Plan to Accelerate Ending Female Genital Mutilation), overseen by the Ministry of Family, Food Security et al.

⁴¹ Sr. Gender Specialist Awa Fall-Diop interviewed representatives of the Directorate for Equity and Gender Equality (DEEG) and the gender units in the Ministries of Health, Local Government, and Education to identify current plans and priorities for strengthening.

⁴² Ibid.

⁴³ Ibid.

Conflict, gender, and governance. Conflict, poverty, and more pronounced cultural gender discrimination⁴⁴ create an especially challenging environment for democratic governance in the Casamance region. The region has been home to a separatist movement that has, displaced more than 60,000 and resulted in more than 5,000 deaths since the early 1980s. Conflict takes the form of livestock theft, natural resource disputes, and land disputes, with the lingering political crisis simmering in the background. Remnants of the MFDC are still active and they exacerbate localized conflicts. Yet evidence globally indicates that improvements in inclusive, gender-balanced citizen engagement and local government responsiveness, transparency, and accountability can reduce eruptions of conflict as they provide more effective channels for redressing grievances and allocating local resources.⁴⁵ Indeed, USAID/Senegal had success mitigating conflict in the Casamance by supporting gender- and youth-balanced inter-village committees through its Strengthening Community Opportunities for Peace and Equality project.

"Women were never associated with access to land and thanks to the program [USAID's Women's Leadership and Civil Journalism], now we are. Now we have our fields that we could not have had before. It is the same for our land titles."

-Interview, Comité Directeur of the Association Rurale de Lutte contre le SIDA

In addition, USAID's Women's
Leadership and Civic Journalism activity
has helped transform women into
leaders through radio programming.
Women have gained confidence and
demonstrated their leadership on
gender, governance, conflict, elections,
decentralization, health, and many other
sectors and leading initiatives in their

communities. As noted above in the textbox, the norms that regulate women's lives and expectations are changing.⁴⁶

Recommendations for Democracy, Human Rights and Governance (DRG)

This report offers two sets of recommendation to the DRG (and other USAID/Senegal) sectors: those to build on and strengthen the gender-sensitive focus of current program plans found in the CDCS and PAD, and those that will expand current programs to address important gender gaps or issues.

Strengthen gender-sensitive DRG strategy

The current CDCS and DRG PAD include gender analysis of constraints to women's full participation as leaders and in decision-making in local governance and civic life. The project level gender analysis is considerably more detailed than the strategic level, as it should be. Both documents describe plans to ensure greater involvement of women's organizations in advocacy and to reduce gender based constraints on women's leadership through mentoring and capacity building programs. However, these plans are not well-integrated in the CDCS DO, development hypothesis, Results Framework or solicitation for the main DRG activity, Governance for Local Development (GOLD). The DRG PAD does include two activities which address women's political empowerment: PACE, which supports women parliamentarians, and Women's Leadership and Civic Journalism, which focuses on peacebuilding and community development in the Casamance region. The PAD also includes two relevant suggested

⁴⁴ Data indicates that early marriage, FGM, HIV/AIDS and other harmful traditional practices are more prevalent in the Southern Region (USAID Health Gender Assessment, 2014, Senegal DHS 2015).

⁴⁵ The United States National Action Plan on Women, Peace, and Security, 2016, https://www.usaid.gov/sites/default/files/documents/1868/National%20Action%20Plan%20on%20Women %2C%20Peace%2C%20and%20Security.pdf.

⁴⁶ USAID/Senegal, "Women's Leadership and Civic Journalism Final Evaluation Draft Report," April 2017.

outputs in "3.2.1.2 train CSOs on gender and social inclusion and partner with youth and women ... in advocacy and networking."

The following revisions to the DO, development hypothesis and IRs in *italics* better capture the strategic level plans more explicitly, which in turn should help the Mission and its implementers ensure that interventions, staffing and budgetary allocations more explicitly address the gender-focused elements of their activities, indicators, and results. First, USAID/Senegal's current Development Objective to increase citizen participation (DO 3) should clarify the intention to reach women and other marginalized groups, for example: "More effective *and inclusive* citizen participation in the management of public affairs at the national and local levels." ⁴⁷

Similarly, the development hypothesis would communicate a gender-sensitive theory of change better by strengthening the focus on gender equality and inclusion in planning, collaborating, managing, and allocating resources:

If local governments are strengthened to equitably, collaboratively, and effectively collect, plan, program, and manage local resources; If meaningful citizen participation, including women and other marginalized individuals, in the governance process is obtained; If equitable allocation of national resources to local governments is rationalized and more efficient; and If Senegalese communities, including, men, women, and other marginalized groups, vulnerable to violent conflict learn to resolve resource-driven differences constructively; Then the equitable delivery of basic services (health, education, water and sanitation, food security) will improve, and government legitimacy and the state-citizen social contract will be strengthened for all.

IR 2: Responsive and inclusive democratic governance strengthened

Sub-IR 2.1: Increased citizen engagement by women and men in governance processes;

Sub-IR 2.2: Strengthened effective local governance for all citizens; and

Sub-IR 2.3: Improved government transparency and accountability to all citizens

Gender-sensitive program approaches. The focus regions of Matam, Fatick, and the Southern regions of Kolda, Sédhiou, Ziguinchor, Kédougou, Tambacounda are well-selected in that DRG program activities will affect change in areas where gender inequality, poverty, and conflict are relatively worse. As The next CDCS (and modifications to current solicitations and/or awarded activities) should be more specific and intentional about integrating its gender-focused plans into the main technical approach and results framework. The following approaches build on the plans stated in the CDCS and DRG PAD so that they may be included more prominently and specifically in the DO narrative. Two additional approaches that constitute new programming directions are described in the next section on recommended new approaches and indicators.

Women's leadership and management training and mentoring. Tailored training and mentoring provided by and for women leaders is essential to build self-confidence and the leadership and decision-making skills for which men are better socialized. Training alone is seldom sufficient for internalizing new

⁴⁷ USAID/Senegal, Development Objective 3.

⁴⁸ USAID/Senegal FY 16 PPR notes gender-based constraints on women and girls including violence, limited access to resources and economic opportunities, limited access to and retention in schools, and displacement of households and communities, associated with in creased numbers of female-headed households.

learning and applying new skills on the job, so combining training with willing coaches and mentors to provide ongoing support is an effective approach.

Inclusive mobilization of women and men community members in local governance. Since the local governance system and associated expectations for community participation are new to most communities — not only to women — vibrant awareness-raising and educational campaigns are needed to increase participation. USAID/Senegal supported campaigns are recommended to educate communities about the role of the local commune and opportunities for them to get involved in planning, budgeting and service delivery oversight. Gender-sensitive content will demonstrate the opportunities for women as well as men, and will illustrate the types of benefits to all through such participation. Important content for rural areas, especially in the South, is information about women's equal legal rights in key areas, especially equality before the law, equal rights to land, and the illegal practice of forced marriage, etc.

Both of these approaches should be employed in the cross-sector coordination activities with the health, education, and economic growth sectors. USAID/Senegal must send consistent messages about the value of gender integration and reinforce rather than duplicate gender integration efforts. Although not easy to coordinate different government units and IPs, these kinds of mutually reinforcing investments, interventions, and communications can be very beneficial in giving necessary support to the challenging work of transforming cultural norms and increasing the leadership and participation of women for the benefit of their communities and families. The two regions in which all four sectors operate (Fatik and Matam) may be the best areas to test cross-sector collaboration for gender equality.

Women's leadership in peacebuilding and community development. The current evaluation of the Women's Leadership activity should produce findings and recommendations to continue, improve, and, if possible, scale up this innovative and holistic model. Tools such as the Scaling Up guide by MSI⁴⁹ provide a useful framework for thinking through the conditions and strategy for successful scaling up.

Additional gender-sensitive program approaches and indicators

Gender sensitive local governance and service delivery. Evidence regarding women's political empowerment points to the importance of gender-sensitive institutional policies, practices, and cultures for the entry, advancement, and effectiveness of women's participation.⁵⁰ Training and capacity building for women, as currently supported by the DRG office, is important but not sufficient for successful transformation of public institutions to be inclusive. Providing training only for women can backfire and further distance the genders from each other by fostering jealousy among men who do not have access to training and undermine women's increased skills and influence. Men and women need to work together equitably, with mutual respect and open communication.

Specific measures include ensuring that tailored curricula on gender equality is included in all training for newly-elected men and women officials, and that specialized functional training for participatory planning, budgeting, and monitoring address gender differences among officials and community members in the methods for facilitating participation, such as time and resource constraints, different levels of formal education, different priorities in allocation of local resources, etc.

Government-to-government (G2G) cooperation. To foster ownership and sustainability of USAID/Senegal's work in gender sensitive capacity development of local government and service delivery, the DRG office should extend its cooperation with the GOS to include both the Gender Unit

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⁴⁹ Management Systems International, Scaling Up – From Vision to Change to Large-Scale Change: A Management Framework for Practitioners, 2012, http://www.msiworldwide.com/wp-content/uploads/Scaling-Up-Framework.pdf

⁵⁰ Women in Power Final Report, 2016, USAID.

of the Ministry of Local Government (MOLG) and the DEEG of the Ministry of Women, Family and Children, the national office responsible for gender mainstreaming policy and implementation. USAID/Senegal should initiate talks with the DEEG to explore possibilities for coordination and support.

Opportunities for collaboration with the MOLG should build on its recent work to conduct a gender audit, develop a gender institutionalization plan, and create a series of five training sessions on gender. Representatives suggest that USAID/Senegal support would help to develop a pool of gender trainers, train its staff in gender, train local representatives in gender, and measure progress with gender-sensitive indicators.⁵¹

Gender-sensitive indicators. The following additional illustrative gender-sensitive indicators⁵² will be useful for monitoring progress and results from these gender sensitive strategies, relative to the three sub-IRs in current and future PMPs:

- Number of persons trained to advance outcomes consistent with gender equality or female empowerment through their roles in public or private sector institutions or organizations (Findicator GNDR-8)
- Number of women participating in a substantive role or position in a peacebuilding process (Findicator GNDR-10)
- Capacity of the MOLG Gender Unit to sustainably train ministry staff and elected officials
- Capacity of local elected officials to facilitate participation of both women and men in local governance functions
- Leadership self-efficacy of local elected women and men
- Number of women community members who participate in local governance
- Number of decisions by local governments that reflect input by women community members
- Number of legal instruments drafted, proposed or adopted to promote gender equality or nondiscrimination against women or girls at the national or sub-national level (F-indicator GNDR-I)
- Number of CSO advocacy initiatives to improve awareness and/or enforcement of Senegal's gender equality laws

EDUCATION

Findings: Gender gaps and differences

The benefits of education transcend the bounds of any single sector. For example, the OECD estimates that girls' and women's increased educational attainment accounted for nearly 50 percent of the economic growth in member countries in the past 50 years.⁵³ A global study showed that for every year of education for women of reproductive age, child mortality decreased by 9.5 percent.⁵⁴ Education provides citizens with the intellectual tools necessary to participate in an inclusive democracy.⁵⁵

⁵¹ Awa Fall-Diop, interviews with the *Direction de l'Equité et de l'égalité de Genre*, The Ministry of Local Government, the Ministry of Education, and the Ministry of Health. April 14, 2017. No other donor is supporting these tasks.

⁵² The phrase "with USG assistance" has been deleted from the F-Indicators to conserve space. The full statements provided in ADS 205 should be used in formal USAID reporting and documentation.

⁵³ http://www.oecd.org/employment/50423364.pdf, pg. 3.

⁵⁴ http://www.unwomen.org/en/what-we-do/economic-empowerment/facts-and-figures#notes

⁵⁵ UNESCO, Global Education Monitoring Report 2016: Gender Review, http://unesdoc.unesco.org/images/0024/002460/246045e.pdf, pg. 45.

The overall gender gap in literacy rates for women and men aged 15-49 years is 42 percent for women as compared to 58 percent for men. The gap widens substantially in rural as compared to urban areas: only 17 percent of women and 44 percent of men in rural areas are literate, as compared to 59 percent of women and 71 percent of men in urban areas.⁵⁶

Socio-cultural barriers. Although gender parity in primary enrollment trends are encouraging, traditional conceptions of a woman's role in society still contribute to lower educational outcomes for girls and women once they enter puberty. Seventy-two percent of school-age pregnancies occur between 13 and 17 years of age and 28 percent occur during the final two years of high school, between 18 and 19 years old. School-aged pregnancies result in 54 percent of new mothers dropping out, 39 percent repeat some classes, and only 15 percent restart their studies. ⁵⁷ In 2007, circular n°004379/ME/SG/DEMSG/DAJLD officially made it possible for girls who became pregnant while in school to restart their studies after they give birth. In practice, however, the necessary assistance in schools and communities is not yet in place to allow many young mothers to return to school.

Many traditional gender stereotypes are still taught and reinforced in schools. Teachers treat girls differently than boys by perpetuating the sexual division of activities and social roles, and textbooks depict sexist stereotypes rather than professional female role models. Even school management practices reinforce gender roles, such as assigning girls to keep the school clean if there is no janitor. A study of GBV in schools found that 74 percent of schoolgirls have been sexually harassed, 22 percent have experienced attempted rape, and 8 percent have been raped. Sexual harassment of young girls harms them and limits their educational attainment when they drop out or avoid attention from teachers. More benignly, in the home, girls and boys occupy gendered spaces for leisure, play, meals, and other pursuits, which is reproduced in schools. This is even codified in slogans, chants, and television series, old and new alike, such as *Dina Ma Neex*, *Wiri Wiri*, and popular stories.

Gender and enrollment, retention, and completion. The GGGR Educational attainment score improved from 2010 (.817) to 2016 (.830) (see Table 1). This score includes literacy rates, enrollment in primary education, enrollment in secondary education, and enrollment in tertiary education. School enrollment, retention, and completion data sources vary, but in general, Senegal has strong enrollment rates for boys and girls during primary school, but that enrollment weakens as they enter secondary school and again at the tertiary level. Recent trends, according to UNESCO data (Table 3), indicate that Senegal has surpassed gender parity in primary education enrollment. However, as boys and girls enter secondary school the gross enrollment ratio for boys surpasses that of girls (Table 3). This has a lasting effect on the economic outcomes of girls as global research has found that one year of secondary education correlates with nearly a 25 percent increase in wages later in life.⁵⁹

⁵⁶ DHS 2015, pp. 32-33.

⁵⁷ UNFPA, Sénégal : étude sur les grossesses précoces en milieu scolaire, June 2015, http://countryoffice.unfpa.org/senegal/drive/ETUDESURGROSSESSESENMILIEUSCOLAIREAUSENEGALjuin 2015.pdf

⁵⁸ Childfund, "In Senegal, Mobilizing Communities to Fight Violence Against Girls and Women", http://blog.childfund.org/2014/07/in-senegal-mobilizing-communities-to-fight-violence-against-girls-and-women/

⁵⁹ https://www.unicef.org/education/bege 61625.html

TABLE 3: EVOLUTION OF GROSS ENROLLMENT RATIOS (PERCENT), 2010 – 2015 (BOYS/GIRLS)

	2010	2011	2012	2013	2014	2015
			Primary			
Boys	79.72	78.47	78.07	77.01	77.52	77.59
Girls	84.16	83.54	84.31	86.05	84.31	86.85
Total	79.72	78.47	78.07	77.01	77.52	77.59
			Secondary			
Boys	38.02	41.87		•••	•••	50.18
Girls	33.15	38.25	•••	•••	•••	49.1
Total	35.6	40.07		•••	•••	49.65
	Tertiary					
Boys	9.3	12.22	12.29	12.59	12.96	12.94
Girls	5.49	7.15	7.21	7.41	7.72	7.83
Total	7.39	9.68	9.74	10	10.34	10.39

Source: UNESCO, http://uis.unesco.org/country/sn#slideoutmenu

Although Senegal has made substantial progress enrolling boys and girls in school, the outcomes for boys and girls are not equal. Law 2004-37 modified the law on education of 1991. Its third article states that, "education is obligatory for all children of both sexes between the ages of 6 and 16 years. The state is required to maintain, within its educational system, children between the ages of 6 and 16 years. Free obligatory education is guaranteed in public schools." In 2013, the parity index was 1.12 in favor of girls over boys. The middle school gender parity index of 1.04 still favors girls. Despite strong primary school enrollment, the quality of education remains low; illiteracy remains high and a low percentage of children complete basic education. Reasons for continuing disparities include poverty and gendered cultural expectations that girls become wives, mothers, and homemakers rather than educated and active citizens.

The primary to secondary transition is where girls' school enrollment begins decreasing. At this point, girls lose 2 percentage points to boys, 89 percent to 91 percent, respectively.⁶³ In Table 3 above, the gross enrollment rate for boys (50 percent) surpasses that of girls (49 percent) at the secondary level. Then this gap expands to five percentage points for tertiary education (boys: 12.94 to girls: 7.83).

USAID/Senegal's recently completed nationwide household survey shows the rural and urban variation for completion of middle school. In urban settings, it is quite high for boys (62 percent) and girls (72 percent). In rural settings the rates are much lower for boys (38 percent) and for girls (28 percent).

⁶⁰ http://www.education.gouv.sn/root-fr/upload_pieces/Rapportpercent20Nationalpercent202013.pdf, pg. 59.

⁶¹ Examen National 2015 de l'Education pour Tous.

⁶² USAID/Senegal, CDCS 2012-2017, pg. 5.

⁶³ UNESCO, http://uis.unesco.org/country/sn#slideoutmenu.

TABLE 4: BOYS AND GIRLS COMPLETING MIDDLE SCHOOL, BY ENVIRONMENT

	Boys (%)	Girls (%)
Urban	62.3	72.3
Rural	37.7	27.7

Source: USAID/Senegal, Données préliminaires de l'« Etude Nationale sur les Enfants et Jeunes Hors du Système Educatif au Sénégal ».

The comparison of boys and girls in the two age classifications underscores that a greater proportion of girls aged 6-11 (70 compared to 61 percent) and 12-16 (60 compared to 58 percent) are educated. While the undereducated proportions are relatively the same in both age groups, there is a large increase in undereducated children of both sexes starting around middle school. This is likely due to poverty impacting families and children who are becoming old enough to work having to contribute to family income.

The divide between urban and rural enrollment and retention rates is significant. For children aged 6-11 years living in an urban setting, only 15 percent are out of school, while in rural settings this figure reaches 46 percent.⁶⁴ The same trend appears in middle school with only 23 percent of urban children aged 12-16 out of school, but 53 percent of children of this age group in rural areas are out of school.⁶⁵ In both settings and age groups, boys out of school rates are higher than girls.

TABLE 5: EDUCATION PROFILE OF SENEGALESE SCHOOL CHILDREN BY AGE AND SEX

	Boys (%)		Girls (%)			
Age classification	Educated	Undereducated	No schooling	Educated	Undereducated	No schooling
6-1 lyears	61.1%	4.2%	34.7%	70.0%	2.3%	27.7%
12-16 years	57.5%	13.9%	28.7%	60.1%	15.4%	24.5%
Total Est. total#	59.6% 1,235,383	8.3% 171,670	32.1% 666,519	66.0% 1,288,590	7.7% 152,539	26.4% 507,558

Source : USAID/Senegal, Données préliminaires de l'« Etude Nationale sur les Enfants et Jeunes Hors du Système Educatif au Sénégal »

A current USAID national study on out-of-school children and youth showed that school dropout rates in the four regions of the Casamance are relatively equal between boys and girls. 66 In conflict-affected areas of Sédhiou and Ziguinchor, population displacement, violence against women and girls, and economic uncertainty are the main reasons for dropping out of school or not being schooled at all. The out-of-school rate for girls occurs most frequently at the elementary level except in Ziguinchor where drop-outs occur later and at the middle and high school levels. 67 It should be noted that poverty impacts boys and girls. Some families have to choose which boys may be expected to work in the fields or earn income as "Jakarta" drivers to supplement family income.

⁶⁴ USAID/Senegal, Données préliminaires de l'« Etude Nationale sur les Enfants et Jeunes Hors du Système Educatif au Sénégal », forthcoming, 65 Ibid.

⁶⁶ USAID, Données préliminaires de l'Etude Nationale sur les Enfants et Jeunes Hors du Système Educatif au Senegal, draft report, May 2017. 67 Ibid.

Gender equality advocates are concerned by the potential counter-influence of increasing number of Franco-Arab public elementary schools supported by the Gulf States and promoted through television and radio. In 2014, there were 374 Franco-Arab schools. Initially, boys were the primary students, but families have increasingly been enrolling girls in these schools. In 2014, nearly 55 percent of students in Franco-Arab schools were girls.⁶⁸

The majority of teachers in Senegal are male. The most recent data shows that only 32 percent of primary teachers are female (2014) and only 18 percent of secondary teachers are female (2011).⁶⁹ A program supported by the Ministry of Education and USAID provides preferences to female teachers who have been on the job for at least five years. The physical conditions in schools vary greatly. There is little data on school hygiene facilities, but it is widely noted that schools do not provide adequate hygiene facilities for girls and boys which makes it difficult for girls to continue schooling once they reach puberty. Boys and girls often use the same restrooms and often these do not have locking doors

Gender, Youth, and Technical and Vocational Training (TVET). Senegal's population has a high proportion of youth. More than 60 percent are under the age of 25.70 According to preliminary data from USAID/Senegal's nationwide out-of-school youth study, far more women (50%) than men (22%) between the ages of 17-24 are unemployed.71

TVET is offered to Senegalese youth during secondary and tertiary education. Sixty-three percent of TVET students are in Dakar, followed by Thiès (10 percent), Ziguinchor (5 percent), Saint Louis (5 percent), Diourbel (4 percent) and Kaolack (4 percent). The cumulative total of the eight remaining regions does not reach 10 percent of the total number enrolled in TVET programs.⁷²

Fifty-one percent of TVET students are girls,⁷³ but female TVET students focus on (lower paid) sectors where they are traditionally employed.⁷⁴ Young women are overwhelmingly enrolled in sewing (58 percent) and hair styling (28 percent); young men have a more diverse enrollment in sewing (29 percent), auto repair (25 percent), and carpentry (17 percent).⁷⁵ Women make up only 35 percent of teachers at TVET institutes.⁷⁶

However, the Ministry of Vocational Training, supported by donors, is trying to break down these gender divides in favor of increased gender integration in TVET. The ministry's Learning Development and Integration Support Project is working toward sectoral gender parity in enrollment. This program succeeded in enrolling girls in auto repair, cooling and refrigeration, and metalwork. While this is an important first step, the mixed gender workshops and classrooms still require the addition of separate changing rooms and bathrooms for men and women.

Ministry of Education Gender Priorities. The Ministry of Education has an ambitious education improvement program known as the *Programme d'Amélioration de la Qualité, de l'Equité et de la Transparence (Program to improve the Quality, Equity, and Transparency, PAQUET)* 2013 – 2025. This strategy aims to improve access to quality education for all boys and girls. It explicitly highlights gendersensitive priorities, including: mobilizing and increasing the participation of women; improving access,

⁶⁸ Etat des lieux de l'éducation de base au Sénégal Evaluation diagnostique et prospective de l'éducation de base au Sénégal-2014

⁶⁹ World Bank, http://data.worldbank.org/topic/gender

⁷⁰ ANSD, Rapport National du Recensement Général de la population et de l'Habitat de 2013.

⁷¹ USAID/Senegal, Données préliminaires de l'« Etude Nationale sur les Enfants et Jeunes Hors du Système Educatif au Sénégal », forthcoming 72 Ibid. p. 12

⁷³ Annuaire Statistique (2013) Ministère de la Formation Professionnelle, de l'Apprentissage et de l'Artisanat, 2014, p. 11.

⁷⁴ Ibid p 27

⁷⁵ USAID/Senegal, Données préliminaires de l'« Etude Nationale sur les Enfants et Jeunes Hors du Système Educatif au Sénégal », forthcoming 76 Ibid, p. 18

retention, and success for girls; fighting against GBV in schools; and ensuring efficient coordination and monitoring and evaluation of activities.⁷⁷

The Ministry of Education has identified a number of initiatives in which it would welcome support from USAID/Senegal:78

- Institutionalize gender in the ministry's policies through a gender audit and an institutionalization plan;
- Train the staff in gender sensitivity, in particular those who develop policies, the teachers, and the members of the gender unit;
- Update training tools to reflect gender, building from the documents already developed by USAID projects;
- Strengthen the interventions at Tambacounda and Louga (transhumance, marriages with emigrants), Kaffrine (access to education, fight against poverty), Kédougou (fight against poverty, fight against GBV, and Diourbel (improve regular school attendance); and
- Support the fight against GBV, in the suburban areas of Dakar, Thiès, and Saint Louis to maintain progress.

Recommendations for Education

The USAID/Senegal education program addresses DO 3: more effective citizen participation in the management of public affairs at the national and local levels. It contributes to this objective by preparing citizens to engage in their own affairs. Education activities target the regions of Fatick, Kaolack, Kaffrine, Matam, Louga, Diourbel and St. Louis and works with the Ministry of Education. The Mission currently uses funds to promote a new reading approach in primary schools and an access to education project in the southern conflict region of the Casamance.

Over the next five years the Mission will work to maintain girls and boys enrollment in primary education. This report recommends that they also seek to improve gender-balanced retention and completion. The Mission will work with the Ministry of Education to increase the number of female teachers, administrators, and supervisors as well as develop the capacity of men and women working in these positions. In addition, the Mission should strengthen the Ministry's Gender Unit to effectively coordinate activities across donors and mainstream gender throughout the education system. Finally, to increase meaningful employment opportunities for young women, the Mission should also invest in increasing their access to technical and vocational training.

Strengthen gender-sensitive education strategy

One sub-IR is stated in gender-sensitive terms, 1.3: Increased equitable access to education in conflict-affected regions. Similarly, the suggested revisions to the following IRs in italics will help the Mission and its implementers maintain a focus on the gendered aspects of their activities, indicators, and results.

IR I: Better educated boys, girls, young women and men

Girls and boys are enrolling in primary school at high rates throughout Senegal thanks in part to proactive government policies to promote primary education access and in part to donors who focused

⁷⁷ Programme d'Amélioration de la Qualité, de l'Equité et de la Transparence (PAQUET) : Secteur Education Formation 2013-2025, p. 113-114.

⁷⁸ Interview, Awa Fall-Diop, Ministry of Education, April 14 2017.

on educational enrollment as part of Millennium Development Goal 2: Achieve universal primary education.

Sub-IR I.I: Improved early grade reading performance of boys and girls

While maintaining its focus on enrolling girls and boys in primary school, the education program will increase its emphasis on the quality of education. Gender-specific approaches and outcomes will be identified in the gender plan submitted by USAID/Senegal's large early grade reading project.

Sub-IR 1.2: Improved education system performance for all

USAID/Senegal will work with the Ministry of Education, supporting the implementation of PAQUET. Approaches to strengthen gender mainstreaming include:⁷⁹

- Increase number of women teachers, supervisors, and administrators. USAID and the Ministry of Education can work to develop incentive programs to hire more teachers. Building on the success of efforts to reward female teachers for remaining teachers is a path to consider. Incentives could include things such as choice of work location, increased pay for high performance, etc.
- Improve teacher and administration capacity at all education levels. Teachers and administrators need additional assistance to better carry out their jobs, especially in regards to gender sensitivity. Primary and secondary schools that are managed in a manner that is sensitive to adolescent girls' hygiene needs will in turn promote their retention in the educational system.

Additional gender-sensitive IRs, program approaches and indicators

Related to IR I: Better educated boys, girls, young women and men, looking forward, the focus should be on the quality of the education received in addition to accessing education. Similarly, USAID/Senegal Education programs also should address the huge gap in meaningful employment opportunities for young women and men by investing in increased access for females to a wider range of TVET coursework to prepare them for higher-paying occupations.

Sub-IR 1.0: Improved retention and completion rates for boys and girls

Sub-IR 1.4: Increased employment-oriented educational opportunities for young women and men

Additional gender-sensitive approaches include:

Research and pilot test approaches to improve retention and completion. Related to Sub-IR 1.0: Improved retention and completion rates for boys and girls, USAID should continue to support research on the reasons girls and boys drop out of school around the transition from primary to secondary education, including regional variations. Evidence from this research can then be used to design and test pilot interventions to improve retention in selected areas, in coordination with the Ministry of Education. Although successful interventions may not be proven for several years, they will then be available to be scaled up nationwide.

Strengthen the Gender Unit in the Ministry of Education to coordinate gender interventions. At present there are several gender interventions, such as a girls' scholarship program and mobilizing communities for girls' education, being supported by USAID, UNICEF, and other donors, but there is no coordination of efforts across donors. The Gender Unit has indicated that it requires support to carry

⁷⁹ Interview, Awa Fall-Diop, Ministry of Education, April 14 2017.

out a mapping of the various interventions and developing an operational plan to implement gender mainstreaming goals at all levels of the education system.

Additional gender sensitive indicators include:

Related to Sub-IR 1.0: Improved retention and completion rates for boys and girls:

• School completion rates in primary, secondary and tertiary (disaggregated by sex)

Related to Sub-IR I.I: Improved early grade reading performance of boys and girls:

- Primary school completion rates (disaggregated by sex)
- Percent of primary school aged boys and girls who read at grade level

Sub-IR 1.2: Improved education system performance for all

- Number of functional sanitation facilities for adolescent girls in primary and secondary schools
- Number of female teachers
- Completion rates for secondary, tertiary, or TVET education, disaggregated by sex
- Percentage of female youth studying in a non-traditional field
- Number of female professors at teacher training colleges
- Number of women who are inspectors and administrators at educational institutions

Sub-IR 1.3: Increased equitable access to education in conflict-affected regions

- Study findings used to inform gender-sensitive program approaches
- Drop-out rates for girls and boys in the target areas in the Casamance (five years after pilot interventions begin)

Sub-IR 1.4: Increased employment-oriented opportunities for young women and men

- Enrollment rate of young women in vocational training/mentorship programs.
- Percentage of youth who believe they can succeed in fields of study typically dominated by the opposite sex following USAID intervention, disaggregated by sex
- Number of USAID-supported public events/activities promoting female entrepreneurs as role models
- Number of young women and young men starting their own business
- Number of young women and young men mentors used to guide other young women and men who want to start their own business.
- Percentage of female participants in USG-assisted programs designed to increase access to productive economic resources (assets, credit, income or employment) (F-indicator GNDR-2)

HEALTH

Findings: Gender gaps and issues

Among the four sectors surveyed in the World Economic Forum's GGGR (2016), Senegal's highest gender parity rate is in the health sector. It is near parity at .967, only a slight decline since 2009 (.974). The two sub- indicators are sex ratio at birth (.944) and life expectancy (slightly in favor of females 1.018). Overall, life expectancy at birth has consistently improved since 1990 from 57.2 to 66.9 years in

2015.80 Females suffer from chronic respiratory disease less than males (33 percent to 61 percent, respectively), while females' rates of HIV/AIDS are more than three times that of males (24 percent to 7 percent, respectively). Females and males have roughly similar rates of suffering from cardiovascular disease, cancer, and diabetes.81

Reproductive, maternal and child health. As global WHO evidence indicates, in spite of the major progress during the Millennium Development Goal (MDG) era, major challenges remain in terms of reducing maternal and child mortality, improving nutrition, and achieving further progress in the battle against infectious diseases such as HIV/AIDS, tuberculosis, malaria, neglected tropical diseases and hepatitis.⁸² The importance of these issues for gender equality are affirmed in both the UNDP GII and the AfDB GEI, which track key indicators of reproductive, maternal, and child health.

Despite generally improving trends in Senegal, mortality rates for mothers, infants, and young children remain too high, especially in underserved areas with more limited access to services due to poverty, geographic location, and social factors.⁸³ Senegal ranks 28 of 36 African countries included in the WHO relative inequality index for reproductive, maternal, newborn, and child intervention coverage (2005-2013), scoring 66 on a scale of 0 to 100, where 100 is equal.⁸⁴

As the USAID/Senegal Health Gender Assessment found, women's low decision-making power, economic dependency, and overburdened gender-based responsibilities for domestic and caregiving work (which vary with wealth, education, urban/rural residence and ethnicity) contribute to their delays in seeking needed health care for themselves and their children.⁸⁵

Table 6 below shows selected reproductive, maternal and child health indicators, disaggregated by region where possible. Evidence of relative disparities by region, with the Center and South typically worse off, and rural/urban residence are notable for most of the available indicators.

HIV/AIDS rates for females as compared to males are relatively high, as noted above, 24 percent and 7 percent, respectively.86 Rates among key populations remain about the same compared to 2010: 22 percent for men who have sex with men (MSM) compared to 22 to 38 percent, and 18 percent for commercial sex workers (CSW) as compared to 19.5 percent.87

⁸⁰ UNDP, Human Development Indicators.

⁸¹ Global Gender Gap Report, 2016.

⁸² World Health Statistics for the SDGs, 2016.

⁸³ USAID/Senegal Health Project 2016-2021 Redacted PAD, World Health Statistics for the SDGs, 2016, WHO.

⁸⁴ WHO Statistics for SDGs, 2016, pp 17-20.

⁸⁵ USAID/Senegal, Health Gender Assessment, 2014, pp. 13-30.

⁸⁶ GGGR, 2016.

 $^{^{87}}$ See USAID Health PAD and Gender Assessment 2010.

TABLE 6: SELECTED INDICATORS REPRODUCTIVE, MATERNAL AND CHILD HEALTH

Indicator	Current statistic	Change, if any	Disaggregated, if available
Fertility	5 per woman (USAID Health PAD)	No change since 2010 (USAID Gender Assessment)	Women's age 15-49, DHS 2015: North: 7.9 West: 6.9 Center: 10.2 South: 5.9
Adolescent birth rate (15-19)	78.6 percent (UNDP 2015)		
Maternal mortality	315 per100K live birth (UNDP 2015)	Decreasing (392 USAID Health PAD 2015; 401 USAID Gender Assessment 2010)	
Newborn mortality	19 per 1K live birth (USAID PAD); 23 per 1K live birth (DHS 2015)		Urban: 20/1K (1st month of life; DHS 2015) Rural: 28/1K North: 21/1K West: 17/1K Center: 31/1K South: 32/1K
Child (under 5) mortality	47.2 per 1K (UNDP 2015)	Decreasing (54 USAID Health PAD; 85 in USAID Gender Assessment 2010)	F: 54percent; M: 44.3percent (WB gender portal, 2016) Urban: 47 (DHS 2015) Rural: 78 North: 50 West: 42 Center: 81 South: 93
Child (under 5) stunting	Ranges from 18 percent (USAID Health PAD), 19.4 per 1K (UNDP 2015), to 21 percent (DHS 2015)		Urban: 14.3percent (DHS 2015) Rural: 23.9percent North: 18.9percent West: 15.6percent Center: 22.9percent South: 25.5percent
Use of modern contraception	21.2 percent married women age 15-49 (DHS 2015); 20 percent (USAID Health PAD)		Rural: 15.2percent (DHS 2015) <u>Urban: 30.3percent</u> North: 20.7percent West: 32.2percent Center: 13.8percent South: 15.3percent

Men's attitudes towards health. Men's attitudes towards women's, children's, and their own health are also important reasons why women and children do not get the care they need early or often enough. Men and boys lack knowledge of positive health practices. They see health practices as women's domain, with male gender norms encouraging them to be independent, strong, virile, and actively

engaged beyond the household. Unsafe and risky sexual behavior is seen as 'natural.' An unintended negative consequence of previous programs that have targeted women for reproductive health has led to men's negligence of their own health and that of their families and communities. Given their decision-making power and control of resources, males' lack of knowledge and engagement with positive health practices contributes to lower access to necessary health care for women and children⁸⁸.

LGBTI. Homosexuality is prohibited and data on LGBTI populations in Senegal is sparse. Amnesty International reports that in 2016-2017, at least seven men and one woman were arrested for their presumed sexual orientation. The seven men were ultimately acquitted by the Dakar Court of Appeal.⁸⁹ Among MSM populations, nearly 20 percent are HIV positive.⁹⁰ In comparison, the rate among the general population is less than I percent.⁹¹ Programs designed to prevent HIV/AIDS in Senegal reach approximately 75 percent of MSM.⁹² While underground, the MSM population is concentrated in the urban regions of Dakar, Thiès, Saint-Louis, and Kaolack.⁹³

Gender-based violence (GBV) and other harmful practices. Although statistical evidence is limited, sources agree that three common social practices in Senegal harm women's and girls' health, well-being, and dignity: GBV, female genital cutting, and early marriage and pregnancy. GBV is reported to be common across the country, while the other two are found primarily in the Southern region and among certain ethnic groups.⁹⁴ The available data on these practices is summarized in the country background section above (pp 10-11). Table 7 shows the regional variation of GBV prevalence; regions with the three highest rates shaded in red.

TABLE 7: PREVALENCE OF GBV BY REGION, % OF POPULATION EXPERIENCING SOME FORM OF GBV

Region	GBV Prevalence (%)
Dakar	52.5
Saint-Louis	41.1
Matam	36.3
Kaolack	54
Tambacounda	60.8
Louga	38
Kaffrine	53
Thiès	53.8
Diourbel	72.3
Kolda	54
Kédougou	55
Sédhiou	60
Ziguinchor	66
Fatick	67.5

⁸⁸ A Gender Assessment of USAID/Senegal's Health Program. Waller, Ndir, and Kane. December 2014, pp 13-30.

GENDER ANALYSIS FOR THE USAID/SENEGAL CDCS (2019-2024)

⁸⁹ Amnesty International, Amnesty International Report 2016/17: That State of the World's Human Rights, 2017.

⁹⁰ Etude d'évaluation des Interventions chez les Homosexuels au Sénégal ELIHoS, 2013.

⁹¹ Enquête Démographique et de Santé à Indicateurs Multiples au Sénégal (EDS-MICS), 2010 – 2011.

 $^{^{92}}$ Rapport de situation sur la riposte nationale a l'épidémie de VIH/sida Sénégal : 2012-2013

⁹³ Évaluer les interventions de prévention des IST et du VIH auprès des homosexuels masculins au Sénégal (projet ANRS 12139) : Rapport Scientifique (Groupe ELIHoS) 2010

⁹⁴ Ibid.

GOS Ministry of Health and Social Action. GOS health policy goals target ending preventable child and maternal mortality⁹⁵ and providing universal health coverage. The Ministry of Health (MOH) needs to build on the progress it has made in developing its capacity to improve its performance management, especially in closing urban-rural gaps in access to quality services, and in overall gender-sensitive planning, management and delivery of health services.⁹⁶

The leadership, management, and medical staff of the MOH continues to be overwhelmingly male, which contributes to a working environment that is "male-dominated and sometimes hostile to women." Doctors, nurses, and management staff are mostly male. Only Reproductive Health Coordinators and midwives are female, but even then, trained individuals are typically not available in more remote rural areas. 98

A Gender Unit has been established in the Ministry of Health, and USAID and other donors provide support to develop and implement gender training for all staff. USAID has supported it to carry out a gender audit and provides support for training for all health workers in a standard protocol for treating suspected cases of GBV. Two current activities, implemented by Intrahealth and Abt Associates are assisting the MOH, in coordination with the Gender Unit, to strengthen capacity in gender expertise, resources, trainers, and curriculum.

However, the Gender Unit does not yet have an operating budget and requires additional support to develop tailored training on understanding gender approaches for different groups of staff at all levels of the MOH who deal with different health issues and have different skill sets.⁹⁹ It is especially important to ensure gender training and follow up reaches the local level facilities.

Recommendations for Health

USAID/Senegal is currently implementing its Health PAD (2016-2021), which was developed with gender analysis from the USAID Health Program Gender Assessment (2014). The major focus is on reducing maternal and child mortality, child malnutrition, and increasing access to quality services (RMNCH), especially in priority regions where conditions are worse. The program's gender focus is highlighted in its Purpose statement: Health services are sustainably improved and effectively utilized to reduce child and maternal mortality and contribute to an AIDS free generation.

The three IRs and eight sub-IRs mapped out in the Results Framework 100 are not explicitly gender-sensitive, but the narrative of the PAD indicates that the Mission plans to build on the recommendations of the 2014 Gender Assessment and its own lessons learned to mainstream gender and implement gender-sensitive approaches and interventions.

This section provides recommendations to strengthen and expand the gender-sensitive program strategy in the follow-on Health sector CDCS, including revised language for the three IRs, more explicitly stated and new gender-sensitive approaches, and new gender sensitive indicators for selected IRs.

⁹⁵ MOH National Health Development Plan goals.

⁹⁶ Ibid.

⁹⁷ Ibid.

⁹⁸ Ibid.

⁹⁹ Interview, Awa Fall-Diop, April 20, 2017.

¹⁰⁰ USAID/Senegal Health PAD, p. 6

While the USAID/Senegal program targets women, children, and affected populations as *consumers* of health care (IR I, sub-IR I.I) and as *citizens* of communities who take an active role in overseeing and managing local health care service delivery (IR 2, sub-IRs 2.I, 2.2), it may also address other opportunities within its existing Results Framework to be gender-sensitive and improve gender equality outcomes. USAID/Senegal should ensure that *women entrepreneurs* are included in its efforts to strengthen private sector service delivery (IR I.2). USAID/Senegal should support the MOH to strengthen its gender mainstreaming and capacity building of its governance and management systems and human resources, which in turn will increase the number and capabilities of *women leaders and managers* in health service delivery (IR 3, 3.1, 3.2). The latter approach can be carried out in conjunction with USAID/Senegal's local governance activity, GOLD, which focuses on strengthening the management of local service delivery across several sectors.

Strengthen gender-sensitive health strategy

Health programming has long been at the forefront of gender-sensitive programming. The following recommendations would enhance the visibility of the strategy.

Gender-sensitive IRs. The italicized text in the following existing IRs will strengthen the IRs to be more explicit in framing expected gender-sensitive results.

IR 1: Increased access by mothers, young children and male and female youth to quality priority services and products.

IR 2: Increased commitment of *female and male* individuals and communities in the management of their own health and health services.

IR 3: Improved performance of the health system for all Senegalese.

Gender-sensitive approaches. Recommended approaches will increase central MOH capacity to develop gender-sensitive services to reduce maternal, neonatal and child mortality, malaria, and HIV. This will increase access to high quality priority services at MOH facilities and communities in the seven regions of concentration (Diourbel, Kédougou, Kolda, Matam, St. Louis, Sédhiou and Tambacounda). Gender-sensitive approaches will reduce barriers to care associated with gender norms, poverty, and geographic distance from facilities, and internal service delivery gaps such as the lack of staff, lack of private spaces, lack of medications, and long-wait times.

Existing gender-sensitive approaches that should be expanded and framed more prominently in the DO and IR narratives include:

Engage men and boys in health care promotion. Given gender roles in Senegal households described above, especially in the poorer regions targeted by the Health program, USAID/Senegal has learned that the positive involvement of men is necessary to bolster their support for women to seek health care for pregnant women, mothers, and young children. Outreach will test creative approaches that increase males' awareness of the benefits to them and their families of improved health and lead to increased use of local services. (IR. I, Sub-IR I.I, 2.I, 2.2).

Outreach to a broader range of existing community groups (mothers' clubs, men's groups, moderate religious leaders, etc.) to increase their awareness and use of health care services. Community members are more likely to convince one another of the value of health care and reduce attitudinal barriers through these kinds of groups and social networks in which they participate. Existing social trust and linkages can be mobilized to spread messages and increase use more quickly than generic or individual-based approaches. (Ir. I, Sub-IR I.I, 2.I, 2.2).

Complementary services address HIV/AIDS transmission. Some reproductive health services also align with the strategic plan of the National AIDS Council to eliminate HIV mother to child transmission, such as the Badienu Goxx (God-mother) program in which women leaders at the community-level advocate, support and facilitate for women/family health issues. (IR 1, Sub-IR 1.1).

Additional gender-sensitive program approaches and indicators

Gender sensitive evidence-based advocacy and social and behavior change communication. USAID/Senegal will continue its partnership to support the MOH and regional health authorities to design and implement tailored interventions to reach women, men, and youth of all genders to adopt healthy behaviors. Specific knowledge of each group, which may be influenced by age, ethnicity, and location, in addition to gender, is crucial for the development of successful approaches. (IR 2)

Increase gender-sensitivity of local service delivery, e.g. sensitize male medical staff to increase regard for female patients, create private spaces for women's health exams, and increase gender-sensitiveness of 'teen corners' for young women and men, who have very different experiences and needs as they enter puberty and reproductive age. (IR I, Sub IR I.I).

Ensure equal opportunity for women-owned businesses to receive private sector support through the Mission's Development Credit Authority to provide health services. ¹⁰¹ This can take the form of set-aside contracts reserved for women-owned businesses or other equal-opportunity measures. The availability of this support must be communicated to prospective women businesses through appropriate channels and outlets. (IR I, Sub IR I.2). The benefits of this approach, including increased income for women business owners, will also contribute to reducing gender gaps in the Economic Growth Sector.

In Senegal's decentralized and deconcentrated governance, communities have critical roles to play in engaging with local governance and management of health services to demand responsive services and hold the government accountable to its commitments. Approaches to increase community involvement will be designed to address women's and men's time availability, attitudes, motivations, and constraints to participation.

Gender sensitive community mobilization strategies will transform gender norms constraining women's participation in public spaces, ensuring that women as well as men take part in community management and oversight of health services. In the Casamance region, successful approaches to community mobilization developed by the Women's Leadership activity may be adapted and employed in local health service delivery. (IR 2, Sub-IR 2.1).

Lobby local women elected officials for improved local health service delivery. The recently increased number of women elected to local legislative bodies represent a potential constituency for improved RMNCH services within the government. Community mobilization strategies that target engaging citizens in governance can target meetings with local elected women to support their interests. (IR 2, Sub-IR 2.2).

USAID/Senegal will address key health system constraints. One such constraint to improved service delivery for women's health care includes the lack of fully mainstreamed gender sensitivity in the MOH and accompanying gender disparity in the numbers of male and female senior managers. ¹⁰² USAID will continue its support to the Gender Unit of the MOH in its training of public health workers in

¹⁰¹ Health PAD, p. 7.

^{102 2014} Health Program Gender Assessment.

recognizing and treating GBV. It will also expand its support to the Gender Unit to develop additional tailored gender training plans in conjunction with Human Resources management.

Support MOH gender focal point to develop a sequence of tailored training curricula. Focus on understanding gender approaches for different groups of staff at all levels of the MOH and its regional deconcentrated entities, who deal with different health issues and have different skill sets that need to be adapted for work with women, men, girls and boys. (IR 3, Sub-IR 3.1, 3.2).

Gender-sensitive Human Resource capacity development. USAID support to strengthen the human resource capacity of the MOH will address gender equality in recruitment and promotion, family leave policies, etc. This work will also serve to increase the number of women in senior management and leadership positions. (IR 3, Sub-IR 3.2).

Gender-sensitive indicators. The following illustrative gender-sensitive indicators should be included in the Health sector PMP to monitor progress towards desired results for women, girls and key populations affected by HIV/AIDS and GBV.

Related to IR I: Increased access by mothers, young children and male and female youth to quality priority services and products. Sub-IR I.I Increased access to quality health services and products in the public sector, add:

- Number of men and boys who demonstrate positive attitudes towards women's healthcare
- Number of men who demonstrate positive attitudes towards children's healthcare
- Number of men and boys who demonstrate positive attitudes towards their own health care, especially in reproductive health

Related to Sub-IR 1.2 Increased availability of quality private sector delivery points and products, add:

• Number of women owned private sector providers of health care services and products

Related to IR 2: Increased commitment of female and male individuals and communities in the management of their own health and health services. Sub-IR 2.1 Increased adoption of healthy behaviors by women, men, boys, girls, and key at-risk populations, add:

• Number of people reached by a USG funded intervention providing GBV services (e.g., health, legal, psycho-social counseling, shelters, hotlines, other) (F-indicator GNDR-6)

Related to Sub-IR 2.2 Increased community involvement in health systems management, add:

- Numbers of women and men involved in community advocacy and oversight of health service delivery
- Number of efforts to lobby local female elected officials to improve local health service delivery

Related to IR 3: Improved performance of the health system for all Senegalese. Sub IR 3.1 Improved health system governance and finance, add:

- Number of public health staff to recognize and treat GBV according to the MOH standard protocol.
- Capacity of the MOH Gender Unit to sustainably design and deliver relevant gender training for all levels of the health system

 Percent of pregnant women, mothers, and young women seeking reproductive and maternal care at MOH facilities.

Related to Sub IR 3.2 Improved management and availability of qualified human resources, add:

- Number of human resource policies drafted with USG support for the recruitment and promotion of female medical and administrative staff.
- Number of women in senior management positions at regional and national levels.

ECONOMIC GROWTH

Findings: Gender gaps and issues

As a whole, Senegal's economy performed well in 2016, posting 6.6 percent growth. It performs well compared to its peers in West Africa and Sub-Saharan Africa. However, this growth is largely exportdriven and thus gender-biased, since women are not major stakeholders in the export sector. He four sectors included in the GGGR, economic participation and opportunity is the second largest gap (see Table 2 in the introduction). In fact, it declined modestly from 2009 (.638) to 2016 (.628). He several areas of the economy, gender inequality is notable, demonstrating the lack of access to economic opportunities and resources for women: labor force participation (.65 female/male ratio), unemployment (.5 female/male ratio, access to financial accounts (.51 female/male ratio), and pay gap (.5 female/male earnings for similar work). Women's participation in the workforce rates have remained stable since 2010, at about 67% in 2015.

Under Senegal's Family Code, men are legally the head of the household which grants them greater access to agricultural inputs and land. As an example, all dowry items are to be turned over to the husband to manage "en bon père de famille." [108] Equal land ownership rights for males and females, enshrined in the Constitution, are not enforced. In particular, rural communities use a traditional, patrilineal inheritance system that restricts women's access to land through inheritance or divorce.

Occupational opportunities. Work is gendered by cultural practices that have been reproduced over centuries and translated into Senegal's current economy. Specific types of work are defined as "women's" and others are as "men's." Table 8 below shows the type of work that women and men are concentrated in today; key gender-based disparities are highlighted in red to show concentration of women and blue to show concentration of men. Women provide all formal domestic help in Senegal and are over-represented in sales and services. Few women are involved in the higher-paying occupations of manual labor or professional work. Roughly equal numbers of men and women work in agriculture, but women are concentrated in subsistence crops. The Senegalese private sector is also dominated by

¹⁰³World Bank, http://www.worldbank.org/en/country/senegal/overview

¹⁰⁴ The Stratégie Nationale de développement économique et sociale 2013 – 2017 (National Economic and Social Development Strategy accelerates exports from each region, which contributes to strong economic growth, but skews it towards men, who own and manage export-oriented businesses, rather than women who work primarily in the agricultural, informal and unpaid care sectors.

¹⁰⁵ Global Gender Gap Report, 2016

¹⁰⁶ Global Gender Gap Report, 2016.

¹⁰⁷ USAID, Gender Assessment 2010; World Bank, Women, Business, and the Law, http://wbl.worldbank.org/data/exploreeconomies/senegal/2015

¹⁰⁸ Code de la Famille, Article 385.

males. In 2014, women only accounted for 23 percent of firm owners and 14 percent of top managers. 109

Official employment data hides an additional gender difference in employment since many women work on men's farms as a free source of labor. However, if a woman needs additional labor assistance on her farm, she has to pay a laborer to help. This is an additional factor that contributes to women farming smaller plots.

Gender and customary agricultural practices. Approximately 60 percent of Senegal's labor force is involved in agriculture which only accounts for 14 percent of GDP.¹¹⁰ Most agricultural growth is due to men's production. Women are concentrated in subsistence farming, producing more than 80 percent of all subsistence crops.¹¹¹ Women only manage 16 percent of farms and only control 6 percent of the total land under cultivation.¹¹²

TABLE 8: OCCUPATION BY SEX, PERCENT

Occupation	Male (%)	Female (%)
Work in sales and services	15	35
Work in agriculture	32	28
Work as domestic staff	0	12
Work in qualified manual labor	28	10
Work as non-qualified manual labor	10	8
Work as professional/ technician/ manager	10	5
Work as undefined laborers	I	>

Source: DHS, 2015, pp. 39-40

The type of land and agricultural activities that women have access to is also defined by gender. Women traditionally farm rain-fed lowland rice in river valleys. In fact, women make up 90 percent rice producers in Senegal. Women generally do not have access to fertilizers (using approximately four times less fertilizer than men), and do not have access to modern farming equipment. Women depend on men's equipment, but that means they have to wait for it to be available. Has results in low yields of non-profitable crops. As the environmental conditions change, rain-fed agriculture in lowlands is negatively impacted by increased salinization, whereas irrigated crops in the highlands are not. Similarly, work in the fishing sector is gendered. Men specialize in capturing fish and wholesaling, while women process fish and sell it at the market in lower quantities. Exceptions exist, such as in the Saint Louis region, where Léboue women have a certain amount of autonomy within their marriage and thus are more able than many Senegalese women to make their own choices with how they use their income.

¹⁰⁹ World Bank, http://data.worldbank.org/topic/gender

¹¹⁰ Gender Assessment in the Agricultural Sector (GAAS), 2016, pg. 6.

III GAAS, 2016, pg. 7.

¹¹² SNEEG, 2016 - 2026.

¹¹³ Diop-Fall, Awa, Synthèse des Etudes sur l'Etat des Lieux de la Chaine De Valeur Riz Au Sénégal, 2015

¹¹⁴ GAAS, 2016, pg. 12.

¹¹⁵ GAAS, 2016, pg. 8.

¹¹⁶ GAAS, 2016, pg. 10.

¹¹⁷ GAAS, 2016, pg. 17.

Access to Land. The influence of customary and inheritance laws persists. Most ethnic groups do not allow women to directly access land or inherit property. In addition, the most common Islamic inheritance law allows women to inherit only a fraction of what a male may inherit. The husband's status as the head of the household grants him access to land and agricultural support services. Men are considered the producers and land, inputs, and services benefit their profitable value chain activities to the detriment of women.

To increase gender equality in land ownership, Senegal has passed laws to give men and women the same rights to land ownership and economic opportunities. Article 54 of the Agro-Sylvopastoral Orientation Law (LOASP) of 2004 states, "the state ensures equal rights of men and women in rural areas, particularly in farming. Furthermore, ability to access property and credit are granted to women." In 2014, this was followed by the Emergent Senegal Plan and its implementation mechanism, the Program for Accelerating the Cadence of Senegalese Agriculture (PRACAS). PRACAS aims to increase and create opportunities for women's access to productive resources (land, inputs, finance, equipment, and infrastructure).

Finance and Gender. Access to finance is difficult in general but especially for women. On average, women represent 43 percent of decentralized financial institution clients, but they only account for 27 percent of deposits. What is more, women are 53 percent of active entrepreneurs, yet they only account for 29 percent of loan portfolios. ¹²⁰ The banking and lending structures in Senegal do not take into account the cycle of agricultural activities or women's situations. Often the criteria for lending are prohibitive, especially to women. ¹²¹

Nutrition, WASH, Natural Capital, and Gender.¹²² EGO's nutrition efforts focus primarily on women and children under age five. USAID/Senegal's nutrition efforts were part of the Feed the Future initiative. Current data on child nutrition shows little variation between sexes. Stunting is more common among boys than girls but not substantially so. Gaps in nutrition outcomes emerge by looking at a mother's education level and regionally. Stunting is more common among children whose mother has no education (23 percent). For children whose mother has a primary education the rate of stunting drops to 16 percent, and with a mother who attended at least secondary school the rate of prevalence drops to 11 percent. Regionally, stunting is most common in the south (26 percent) and least common in the west (16 percent). This regional variation also coincides with increased poverty in the south.

Women and girls are most often the primary users, providers, and managers of water in their households. Women fetch all water needed for drinking, washing, cooking, and cleaning. ¹²⁴ They are also the ones most commonly concerned with hygiene. Evidence shows that where there is little access to clean water and sanitation facilities, school attendance suffers, productivity drops, and health and nutrition decline.

Nationwide, 79 percent of the population has access to improved drinking-water sources.¹²⁵ Women and girls are commonly the primary water users in a household, and they are responsible for household

¹¹⁸ GAAS, 2016, pg. 3.

¹¹⁹ GAAS, 2016, pg. 8.

¹²⁰ GAAS, 2016, pg. 13.

¹²¹ GAAS, 2016, pg. 14.

¹²² The analysis team received little information on USAID's priorities for nutrition and natural capital. For WASH, there is limited data available online.

¹²³ DHS, 2015 pg. 155.

¹²⁴ WASH PAD, pg. 36.

¹²⁵ Ibid., pg. 89.

hygiene. It is known that, on average, women and girls, especially in rural communities, spend many hours fetching water for drinking, cooking, cleaning, and washing. The time spent collecting water detracts from the time and energy they have for other activities.

TABLE 9. CHILD HEALTH OUTCOMES, BY SEX (%)

	Boys	Girls
Prevalence of stunted children < 5 years of age	22.5	18.5
Prevalence of wasted children < 5 years of age	8.3	7.4
% of children < 5 years who had diarrhea in the prior two weeks	17.4	18.7

Source: DHS 2015

The Ministry of Hydraulics and Sanitation's Office of Rural Boreholes (OFOR) wants to ensure that every house has clean water. Part of this initiative involves privatizing aspects of water delivery. The OFOR will manage water production and contract out the operations and maintenance. ¹²⁶ As a result, the role of local actors in water delivery will be increased.

In 2014, it was estimated that 25 percent of urban households and 11 percent of rural households had a handwashing facility at home with soap and water. Table 10 shows how access to sanitation facilities has improved in Senegal from 1990 to 2015. The percent of the population defecating openly dropped from 37 to 14 percent. In urban areas, open defecation is all but eliminated. In rural areas it has been reduced by more than half from 56 to 24 percent. In spite of improving access to clean water and sanitation services, 25 of 100,000 Senegalese die each year due to exposure to unsafe WASH services.

TABLE 10. USE OF SANITATION FACILITIES (% OF POPULATION)

	Use of Sanitation Facilities (% of population)											
	Urban			Rural				Total				
Year	Improved	Shared	Other unimproved	Open defecation	Improved	Shared	Other unimproved	Open defecation	Improved	Shared	Other unimproved	Open defecation
1990	58	20	14	8	21	5	18	56	36	П	16	37
2015	65	22	12	I	24	8	34	24	48	15	23	14

Source: UNICEF and WHO, "25 Years Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment", 2015.

¹²⁶ USAID/Senegal, "Water, Sanitation, and Health (WASH): Project Appraisal Document", December 11. 2014.

¹²⁷ UNICEF and WHO, "25 Years Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment", 2015. https://www.wssinfo.org/fileadmin/user_upload/resources/IMP-Update-report-2015_English.pdf

¹²⁸ World Health Organization, World Health Statistics 2016: Monitoring Health for the SDGs.

Recommendations for Economic Growth

USAID/Senegal has nearly completed implementing its 2012-2017 economic growth strategy, which was informed by USAID's 2010 Gender Assessment. Since that initial strategy, USAID/Senegal's water, sanitation, and hygiene (WASH) team developed a PAD for FY2016 – FY2020. In 2016, the economic growth office (EGO) conducted a gender assessment of the agricultural sector, ¹²⁹ both of which have been incorporated into these recommendations along with updated Results Framework information from the Team.

Strengthen gender-sensitive economic growth strategy

The USAID/Senegal Economic Growth Development Objective (DO) 1: Increased inclusive economic growth signals its intent to produce positive outcomes for women and relatively impoverished areas and communities. The program targets the Southern Forest Zone (SFZ) and the Senegal River Valley (SRV) (this includes parts of Saint Louis, Matam, Tambacounda, Kédougou, Kolda, Fatick, Kaolack, Kaffrine, Sédhiou, and Ziguinchor). The SFZ and SRV include many of the poorest regions in Senegal.

Two IRs should be revised to more clearly signal gender-sensitive results, highlighted in the italicized terms below:

If women and men had equal economic opportunities, women could contribute up to an additional 26 percent annual global GDP by 2025.

-Source: McKinsey Global Institute, The Power of Parity: How Advancing Women's Equality can Add \$12 Trillion to Global Growth, September 2015 IR I Increased income among female and male beneficiaries

IR 3: Hygiene of females and males in households and community environments improved

Gender-sensitive approaches. A key component of this sector's work is rightly on increasing agricultural productivity for women. Men's

agricultural activities are more productive, on average, than that of women, since the more profitable crops and value-chains are dominated by male ownership and management. Women have little margin to increase their profits on low value-added agricultural outputs. By increasing women's agricultural productivity, their incomes will raise which will enable them to have choices for health care and education for themselves and their families and increase their quality of life generally.

The following gender-sensitive strategies should be highlighted more prominently in the EG sector DO and IR narratives related to IR 1:

Increase access to finance: Women make up approximately half of all borrowers, yet the value of their loans is close to one quarter of the total value of loans. As highlighted in the 2016 agricultural gender assessment, women need greater access to financing that is structured in a way that coincides with when their revenues are expected. With increased access to finance, women could access additional agricultural inputs and increase crop yields.

Increase access to land: Land reform is a major challenge that confronts women, especially lower-income women. By working with the National Land Commission and raising awareness of existing laws on land ownership, USAID/Senegal could promote equal rights to land. This strategy should also raise

¹²⁹ Gender Assessment in Agriculture USAID/Senegal, 2016.

awareness among men, land commissions within municipal councils and local authorities to change perceptions, systems, and practices to expand the amount of land allocated to women.

Increase access to management and organizational development support: Tailored small business management and organizational development will help women be more efficient in processing agricultural products and identify channels to market them more profitably.

Target agricultural support services for women farmers: Women are often overlooked as producers, and as such they rarely receive agricultural support services such as irrigation, seeds, fertilizers, and modern equipment. These agricultural inputs typically benefit large, profitable, maleowned and managed farms and value chains. Making agricultural support services available to women will increase their crop yields, increase their access to markets, and increase their revenues.

Additional gender-sensitive program approaches and indicators

Raise awareness to increase access to resources: Complement newly developed services with tailored messaging to raise women's and communities' awareness of the availability of resources such as fertilizers, machinery, extension services, and financing. This will increase their uptake of the new services. A campaign that features successful women land owners and farmers could also help to sensitize men, women, boys, and girls, to granting women access to land.

This report endorses the EG Team's plans to add approaches to reach young women in order to increase entrepreneurship opportunities. Recommended approaches include:

Capacity building in entrepreneurship for young women and adolescent girls:

- Mentoring: Established women business owners mentor younger women and adolescents. This
 may be done in country or through the USAID global partnership project, SPRING project
 (Strengthening, Partnerships, Results, and Innovation in Nutrition Globally).
- Disseminate positive role models: The 2016 USAID/Senegal Gender in the Agricultural Sector
 Assessment identified a number of successful women agricultural entrepreneurs that could serve
 as role models. Profiles of successful young women entrepreneurs can be disseminated to men
 and women through social and traditional media campaigns so that they become sensitized to
 seeing successful women.

The following gender-sensitive strategies should be highlighted more prominently in the EG sector DO and IR narratives related to IR 3:

USAID/Senegal's WASH PAD notes three challenges for improving the enabling environment for the WASH sector: I) an underdeveloped private sector, 2) weak governance and management capacity, and 3) policies that do not support sustainability. Each of these challenges provide opportunities for women's empowerment:

Increase women's involvement in the WASH private sector: As the primary water users and proponents of health care within families, USAID should encourage women to engage in the private sector for WASH services. TVET and business development training should target women to work in this sector as there will be a large demand for maintenance, installation, and delivery of clean water and sanitation facilities.

¹³⁰ WASH PAD, pp. 14-15.	
130 VVASH PAD, DD. 14-15.	

Increase women's representation on ASUFORs (local water users' associations) and other local water management committees: USAID will be able to leverage the GOLD activity to increase women's representation in ASUFOR's and strengthen their role within them.

Increase WASH sector research and ways to use it more efficiently: While the WASH PAD notes the success of previous WASH activities, there is no evidence to say whether or not the efforts are sustainable. USAID should commission research to ensure that future policies to promote sustainability are supported by data. USAID could study the sustainability of public-private WASH partnerships, the outcome of sanitation facility subsidies for the poorest Senegalese, or the sustainability of Community Led Total Sanitation approach.

Gender-sensitive indicators: In addition to the current gender-sensitive cross-cutting indicators (Women's Empowerment in Agriculture Index (EG.3-b); Number of full time equivalent jobs created with USG assistance (EG.3-9) (standard disaggregation by sex; custom disaggregation by age); Number of women's groups assisted and applying improved practices (disaggregation of EG.3.2-4 and EG.3.2-20); and Age and sex disaggregates of "Number of MSMEs receiving business development services"), the following additions are recommended to more clearly monitor and measure progress towards gendersensitive results:

Related to Purpose: Sustainably reduce poverty and undernourishment among targeted beneficiaries. To Average consumption shortfall of the poor, add: disaggregated by men and women, boys and girls

Related to IR I: Increased income among female and male beneficiaries, add:

- Percentage of female participants in USG-assisted programs designed to increase access to productive economic resources (assets, credit, income or employment) (F-indicator GNDR-2)
- Number of women business owners registering businesses
- Number of women business owners applying for and receiving permits or passing inspections

Related to Cross Cutting Sub-IRI: Increased access to finance. To Value of agricultural and rural loans, add distributed to men and women. Also add:

Number of men and women receiving enterprise development training

CROSS-SECTORAL GENDER ISSUES

Given the severe discrimination against women and girls in the family legal code (early marriage, divorce, inheritance) and the prevalence of all forms of GBV, including FGM, USAID/Senegal should consider addressing them through an additional DO and set of IRs in the follow on CDCS. The currently recommended work on GBV by the Health sector and on CSO advocacy on women's legal rights by the DRG sector are important, but will not result in strategic impact on the issues.

In-depth recommendations for the content of a new DO, IRs, approaches and indicators are beyond the scope of this review, but in the next two years USAID/Senegal should conduct a GBV/women's family rights gender analysis for the new CDCS. As a recent evaluation of USAID GBV policy implementation¹³¹ recommends, USAID/Senegal should align its GBV strategy with GOS policies and collaborate with researchers and CSOs to improve research on the prevalence, root causes, and consequences of GBV in the different regions. This research then informs expanded efforts in advocacy

¹³¹ United States Agency for International Development Evaluation of Implementation of the United States Strategy to Prevent and respond to Gender-based Violence Globally August 2012 through July 2015. November 2015.

to raise awareness and mobilize action, enforcement of relevant laws and improvements in access to quality social services.

USAID/Senegal may enlist technical support through MEP and/or USAID DRG human rights/gender equality or GenDev GBV specialists in Washington (or the Regional Mission, if present) to inform or conduct these analyses. In the past, Missions have accessed GBV Incentive Funds to implement relevant programs. These have operated similarly to the Women's Leadership funds which USAID/Senegal has accessed.

CONCLUSIONS AND LESSONS LEARNED

This Gender Analysis Report for the Follow-on CDCS was produced through an innovative approach. USAID/Senegal had completed a number of relevant gender analyses and several Project Appraisal Documents (PADs) integrated gender analysis findings and recommendations to varying degrees, extending well beyond the CDCS time frame. Thus, the Gender Analysis Team strove to use and update the existing gender analyses and to focus recommendations on strengthening the existing plans and adding a limited number of new recommendations given the existing plans and probable budgetary constraints. Two developments in the course of the gender analysis changed the context in which the report will be used, e.g. the extension of the start-date of the follow-on CDCS until 2019 and the revision of ADS 205. To the extent possible, this report has been revised to ensure compliance with the revised ADS 205 and to provide additional recommendations on the assumption that the new timeframe may also permit new budgetary resources to be allocated for gender-sensitive programming. This section offers several conclusions and lessons learned that may be useful for future efforts in similar circumstances.

Status of gender integration in the CDCS. In general, the current USAID/Senegal CDCS and sector PADs are informed by gender analysis, yet gender-sensitive objectives and approaches are not always clearly and specifically framed in the DOs, IRs, narratives, and indicators. Although all indicators are required to be disaggregated by gender, none of the existing indicators identify gender equity in their definition or narrative. As a result, the gender focus is hard to discern, which in turn makes gender-sensitive strategy difficult to implement, monitor, evaluate and learn about. The one solicitation reviewed (for the GOLD activity) includes reference to women (and youth, marginalized groups) only as illustrative outcomes rather than to gender equality and women's empowerment as an integral aspect of the local governance activity design. In this respect, the USAID/Senegal CDCS and program documents are similar to those of other USAID Missions, and the revisions to ADS 205 should help clarify and explain how to fully and specifically integrate gender in USAID strategies, projects and activities.

To strengthen gender integration in the CDCS, this report recommends revised gender-sensitive language to relevant DOs and IRs. Terms such as 'inclusive,' 'equitable,' 'for all,' or even 'women and girls' make objectives and results more specifically gender-sensitive. This report has also selected and profiled gender-sensitive approaches that are relevant to one or more IRs for use in the narrative sections. Some of these approaches were briefly mentioned in the current CDCS; others are new suggestions by the Sector and Gender Analysis teams. Finally, this report suggests a number of gender sensitive indicators (F-Indicators and custom) for all of the sector strategies.

Yet even a gender-sensitive CDCS will *only* produce the desired results of reduced gender gaps and increased women's empowerment *if* the gender-sensitive plans are embedded in PADs, solicitations and activity awards. IP workplans, budgets, staffing and M&E must adequately support the planned gender work, and USAID/Senegal sector teams must provide guidance and oversight to ensure that implementation and reporting attends to gender.

Efficient and effective gender analysis. The approach was efficient in tasking the Gender Analysis Team with using existing gender analyses and research, and in using a virtual Team approach with one member in Senegal and two others in the US. While this approach conserved resources, as compared to a 'typical' gender analysis by a full team in country for six or more weeks, it also involved some inherent challenges, including limited opportunities for face to face communication among the team and with the Mission and key stakeholders. The following lessons learned may be useful for other similar efforts.

The USAID/Senegal COR was key to the Team's ability to perform the work. He provided a well-designed SOW, ensured that the Team received all relevant USAID/Senegal documents from the various sectors, responded quickly and helpfully to questions, facilitated scheduling of important interviews with the busy USAID/Senegal sector teams, and provided useful feedback on the interim and final reports. Without this support, which was also facilitated by the MEP in-country coordinator, the virtual nature of the Team would have hindered necessary communication and coordination with the Mission.

The lack of face-to-face communication in the context made it more challenging to interpret and synthesize the statistical and research data reviewed. The excellent guidance of the senior Senegalese gender specialist and the MSI MEP COP and staff filled this gap. Their roles in providing input, feedback and in conducting interviews with key stakeholders in USAID/Senegal and the GOS gender ministries were essential. In the future, USAID/Senegal should consider including a short in-country visit for the purposes of discussion of key findings, formulating recommendations among the team and for holding various consultations with stakeholders in USAID and the country.

The presence of at least one bilingual team member also was instrumental to virtual communication. The final document was to be produced in English, yet many source documents were in French. Familiarity with the USAID program cycle and gender policies and operational guidelines is also necessary for a successful gender analysis and report. It is helpful for the Team Lead, at a minimum, to have this familiarity in order to guide data collection, analysis and report writing. There may well be other approaches that the Team may have used or limitations to the report that would need to considered in the future. Comments are welcome to the Team Lead at Dashman@msi-inc.com.

ANNEX I: STATEMENT OF WORK

GENDER ANALYSIS FOR CDCS DESIGN

STATEMENT OF WORK

Contracted under AID-685-C-15-0000

USAID Senegal Monitoring and Assessment Project

PROJECT DESCRIPTION

USAID/Senegal is preparing follow-on to the current 2012-2017 Country Development Cooperation Strategy (CDCS). The new CDCS is expected to be in place by September 2017 and will cover the period FY 2018 – 2022. A revised gender analysis is among the mandatory required analyses for the new CDCS. Since the preparation and approval of the existing CDCS, the Mission has completed or is in the process of completing several sectoral gender analyses, including agriculture, health and education, and believes that there exists sufficient analysis related to gender to preclude having to conduct a Mission-wide, full-fledged gender analysis. Therefore, the Mission plans to enlist a consultant to review existing gender analysis and information, identify where any further analytical work is needed, conduct such analysis, and then from the analysis of these sources, draft the gender analysis for the new CDCS. The analysis will primarily use secondary data (existing data). However, the consultant, along with the Mission gender working group, may consider conducting limited, tailored field research to address any important information gaps that the desk review may identify.

BACKGROUND INFORMATION SOURCES

USAID's <u>Gender Equality and Female Empowerment Policy</u> and <u>ADS 205 Integrating Gender Equality and Female Empowerment in USAID's Program Cycle</u> (specifically ADS 205.3.1 and ADS 205.3.3) provide guidance with respect to requirements for gender analysis in USAID strategies. ADS 205.3.1 specifies that a CDCS gender analysis "should identify the macro or sectoral level societal gender inequalities or obstacles to female empowerment so that gender equality and female empowerment can be linked to the achievement of an Operating Unit's (OUs): CDCS Goal; Development Objectives (DOs); and Intermediate Results (IRs) and/or sub-Intermediate Results".

Using the above-mentioned policy documents as a guide, the consultant will employ a multi-step approach to prepare the gender analysis for the new CDCS. First, the consultant will review all gender-related analyses in process or completed by the Mission since the development of the current CDCS, in order to determine to what extent existing materials serve to meet CDCS gender analysis requirements as outlined in ADS 205. Second, the consultant will identify any additional steps (e.g. additional consultations, research, compilation of descriptive statistics, packaging of existing materials) required to complete a new CDCS gender analysis, and will prepare a plan (with timeline) for completing those

steps. Next, the consultant will be responsible for completing any further analysis that is needed, including interviews and site visits if necessary. Finally, the consultant will produce a final report that will serve as the gender analysis for the new CDCS. The USAID/Senegal gender working group, including the gender adviser and gender focal points in Mission technical teams, will review this report prior to finalization.

The consultant will rely on selected sources to prepare the CDCS gender analysis, including previous gender assessments conducted by the Mission, sectoral gender analyses, strategy documents, and data from the GoS, donors and other sources. The selected background materials to consult includes the following:

USAID/Senegal-related gender documentation

- Country Development Cooperation Strategy (CDCS) original 2012-2016 CDCS and revision/extension of CDCS to 2017 that was completed in 2015;
- 2) USAID/Senegal 2010 Gender Assessment
- 3) Health sector 2014 Gender Assessment
- 4) Agriculture/Feed the Future Gender Assessments (2014 & onwards)
- 5) Scope of Work and any available preliminary reports for Gender in Agriculture Assessment (ongoing assessment)
- 6) Gender Assessments in Project Appraisal Documents (PADs) for Education, Democracy & Governance, Economic Growth and Health
- 7) FY 2010-2016 Operational Plans (OPs)
- 8) FY 2010-2015 Performance Plan and Reports (PPRs)
- 9) Mission portfolio review documentation (2010 & onwards)

Country-related documentation and other sources

- 1) 2014/2015 MOH, Demographic Health Survey
- 2) UNDP Gender inequality index (GII)
- 3) Senegalese Social Institutions and Gender Index (SIGI)
- 4) Women's Empowerment in Agriculture Index
- 5) Other donor and international gender reports, as available and time permits

TASK PURPOSE, AUDIENCE AND INTENDED USES

USAID/Senegal conducted a Mission-wide gender assessment in 2010. As the new Mission CDCS is being developed for 2017, a Mission-wide gender analysis is required. The purpose of the gender analysis is to support the Mission's ability to design approaches across all technical teams which take into account programmatic differences in impact between genders and specifically target gender outcomes identified in the USAID gender policy. This gender analysis will review all gender analysis conducted by technical teams as a part of their project and activity designs and will provide guidance on areas where the Mission needs to provide more emphasis on gender in planning, implementation, data tracking and analysis. The analysis will be conducted in close collaboration with the Mission's Gender Working Group.

APPROACH

Data Collection Method and Reporting

The analysis team will use the following three phases and steps:

Phase I: Document and data review

- Guided by the Gender Working Group, review and analyze all gender-related analyses in process or completed by the Mission since the development of the current CDCS in 2012. This will include conducting interviews with each Mission technical team (Education, Health, Economic Growth, and Democracy and Governance) to collect information on new, emerging, or persistent gaps, lessons learned and challenges, as well as opportunities for improving gender integration in the new CDCS.
- 2) Determine to what extent existing materials serve to meet CDCS gender analysis requirements as outlined in ADS 205, and to broadly address the gender gaps that are barriers to achieving the development outcomes as defined in the CDCS.
- 3) Identify any additional steps required to complete a new CDCS gender analysis, and prepare a plan (with timeline) for completing those steps.

Phase 2: Primary data collection

- Complete any additional gender analysis work required, which may include additional consultations with Mission technical teams. If interviews with selected external stakeholders (e.g. GoS counterparts, implementing partners, civil society representatives and donors) are required, additional LOE and time will be added to the workplan.
- 2) Using material from the steps above, from the analysis of these sources draft the gender analysis for the new CDCS.

Phase 3: Reporting and dissemination

Based upon the desk research and primary data research, The Gender Analysis Team will develop the gender analysis report. There is no set format for the CDCS gender analysis; however, the consultant will use the *Gender Equality and Female Empowerment Policy* and ADS 205 to determine what is necessary and sufficient to satisfy CDCS requirements. As specified in ADS 205.3.1, the gender analysis must include as many of the areas listed below as possible:

- Descriptive statistics on the status of males and females; and
- Domains of Analysis, including:
 - 0 laws, policies, regulations, and institutional practices;
 - o cultural norms and beliefs;
 - o gender roles, responsibilities, and time used;
 - O access to and control over assets and resources; and
 - o patterns of power and decision-making.

In addition, the gender analysis will be used to prepare various sections of the CDCS; as such, the analysis should discuss how the USAID/Senegal program may contribute to the three outcomes specified in the USAID Gender Equality and Female Empowerment Policy:

- Reductions in gaps between males and females in access to/control over economic, political, and social resources;
- 2) Reductions in the prevalence of gender-based violence; and
- 3) Reductions in constraints that prevent women and girls from leading, participating fully in, and influencing decisions in their societies, including increased capabilities of women and girls.

Furthermore, to the extent possible, the analysis should include a description of country conditions with respect to gender, and describe gender gaps at sub-national levels with the objective to assess any differences in gender inequalities and/or women's empowerment among regions, as relevant to USAID current and expected programming. The description should provide also a brief profile of the status of women and men in terms of their leadership roles in society and the gender norms that should be taken into account in the CDCS.

The main source of data for the analysis will come from a broad range of existing or in-process documentation on gender and consultations with Mission technical teams and the Mission gender working group. The consultant will also review and analyze statistics on gender from the GoS, international sources, implementing partners and research centers and highlight any limitations these data sources may have. It is assumed that, as time permits, the consultant will gather additional reports and data as she or he conducts the work.

7. DELIVERABLES

The Gender Analysis Team will provide the following deliverables:

The consultant will provide the following deliverables:

- Inventory of materials and data reviewed and analyzed (Note: See Annex 2 References).
- <u>Brief assessment</u> of the strengths and weaknesses of the existing gender information in an Interim report with respect to CDCS gender analysis requirements, including any gaps that need to be addressed.
- <u>Draft and final gender analysis</u> for the new CDCS. The report will be drafted and finalized in English and should not exceed 20 pages total, excluding annexes.

8. TEAM COMPOSITION

The Gender Analysis Team will be led by a Gender Specialist who is experienced in working on compliance issues with the 2015 Gender Policy and ADS. The Gender Analysis Team Leader will work

closely with a Senegalese Gender Expert who is an experienced researcher and familiar with GOS statistics, other donor and NGO data and issues on gender. A mid-level technical manager from MSI's home office will support the Team Leader in the desk research review. MEP's M&E coordinator, Sadio Coulibaby, will oversee the task. All team members are required to provide a signed statement attesting that they have no conflict of interest and that all work conducted under this SOW will remain confidential. Table I shows deliverables and estimated levels of effort (LOEs) for the gender analysis team. Slight modifications may occur following the Desk Review based on identified information gaps.

9. PARTICIPATION OF USAID STAFF AND PARTNERS

The analysis team will work closely with the Mission Gender Working Group and will hold an initial briefing session with the Gender Working Group at the outset of this task to ensure clarity around the scope and objective of this analysis. The analysis team will brief the Gender Working Group on the additional information that is required to collect as part of this analysis.

ANNEX II: REFERENCES

Country level

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ANNEX III: GLOBAL AND REGIONAL GENDER INDICES

World Economic Forum's Global Gender Gap Report (GGGR): Through the Global Gender Gap Report, the World Economic Forum quantifies the magnitude of gender disparities and tracks their progress over time, with a specific focus on the relative gaps between women and men across four key areas: health, education, economy and politics. The 2016 Report covers 144 countries. More than a decade of data has revealed that progress is still too slow for realizing the full potential of one half of humanity within our lifetimes. Accessible at: http://reports.weforum.org/global-gender-gap-report-2016/

United Nations Development Program's Gender Inequality Index (GII): The GII is an inequality index. It measures gender inequalities in three important aspects of human development—reproductive health, measured by maternal mortality ratio and adolescent birth rates; empowerment, measured by proportion of parliamentary seats occupied by females and proportion of adult females and males aged 25 years and older with at least some secondary education; and economic status, expressed as labour market participation and measured by labour force participation rate of female and male populations aged 15 years and older. The GII is built on the same framework as the IHDI—to better expose differences in the distribution of achievements between women and men. It measures the human development costs of gender inequality. Thus the higher the GII value the more disparities between females and males and the more loss to human development.

The GII sheds new light on the position of women in 159 countries; it yields insights in gender gaps in major areas of human development. The component indicators highlight areas in need of critical policy intervention and it stimulates proactive thinking and public policy to overcome systematic disadvantages of women. Accessible at: http://hdr.undp.org/en/content/gender-inequality-index-gii

United Nations Development Program's Gender Development Index (GDI): The GDI measures gender gaps in human development achievements by accounting for disparities between women and men in three basic dimensions of human development—health, knowledge and living standards using the same component indicators as in the HDI. The GDI is the ratio of the HDIs calculated separately for females and males using the same methodology as in the HDI. It is a direct measure of gender gap showing the female HDI as a percentage of the male HDI. For more details on computation see Technical Notes.

The GDI is calculated for 160 countries. Countries are grouped into five groups based on the absolute deviation from gender parity in HDI values. This means that grouping takes equally into consideration gender gaps favoring males, as well as those favoring females.

The GDI shows how much women are lagging behind their male counterparts and how much women need to catch up within each dimension of human development. It is useful for understanding the real gender gap in human development achievements and is informative to design policy tools to close the gap. Accessible at: http://hdr.undp.org/en/content/gender-development-index-gdi

Organization for Economic Cooperation and Development's Social Institutions and Gender Index (SIGI): SIGI is a cross-country measure of discrimination against women in social institutions (formal and informal laws, social norms, and practices) across 160 countries. Discriminatory social institutions intersect across all stages of girls' and women's life, restricting their access to justice, rights and empowerment opportunities and undermining their agency and decision-making authority over their life choices. As underlying drivers of gender inequalities, discriminatory social institutions perpetuate gender gaps in development areas, such as education, employment and health, and hinder progress towards rights-based social transformation that benefits both women and men.

The SIGI covers five dimensions of discriminatory social institutions, spanning major socio-economic areas that affect women's lives: discriminatory family code, restricted physical integrity, son bias, restricted resources and assets, and restricted civil liberties. The SIGI's variables quantify discriminatory social institutions such as unequal inheritance rights, early marriage, violence against women, and unequal land and property rights. Through its 160 country profiles, country classifications and unique database, the SIGI provides a strong evidence base to more effectively address the discriminatory social institutions that hold back progress on gender equality and women's empowerment. Accessible at: http://www.genderindex.org/

African Development Bank's Africa Gender Equality Index (GEI): The GEI measures gender equality across three dimensions, and each dimension draws on a series of indicators. Countries are scored in each of the three dimensions, and overall, on a scale from 0 to 100, with 100 representing perfect gender equality. The GEI will be published every two years. Over time, the hope is that it will be used to identify what policy measures are most effective in tackling the complex and deep-seated challenge of overcoming gender inequality, and to demonstrate that doing so can deliver major development returns. Accessible at: https://www.afdb.org/en/topics-and-sectors/topics/quality-assurance-results/gender-equality-index/

ANNEX IV: FEMALE REPRESENTATION IN LOCAL LEGISLATIVE BODIES BY REGION

Rank	Region	% Women (2015)	% women (former legislature) (rank)	Women/Total#
I	Diourbel	48.90%	14% (12)	947/1937
2	Kaolack	48.60%	12% (14)	953/1962
3	Kaffrine	48.10%	15% (9)	788/1639
4	Kolda	48.10%	12.9% (13)	984/2045
5	Fatick	47.90%	15% (8)	849/1774
6	Ziguinchor	47.80%	14.7% (10)	692/1448
7	Matam	47.70%	14.4% (11)	652/1366
8	Sedhiou	47.40%	16% (6)	885/1868
9	Kedougou	47.30%	19,3% (2)	437/924
10	Saint-Louis	47.30%	16% (5)	919/1942
П	Tambacounda	46.80%		1022/2184
12	Louga	46.60%	16.1% (4)	1221/2620
13	Thies	46.60%	17,7% (3)	1277/2740
14	Dakar	44.60%	24,5%(I)	1477/3311
	Total	47.20%	15.9% (# women (4,134)	11,854/27,760

Source: La Cellule d'appui aux Elus Locaux (CAEL), Le Profil Genre des Collectivités Locales du Sénégal, February 2015.

U.S. Agency for International Development
1300 Pennsylvania Avenue, NW
Washington, DC 20523