Women's Empowerment:



Structure

Strategic Impact Inquiry Research Summary

The Context: In 1993, Eritrea was formally recognized as an independent nation after 30 years of war, but it continues to struggle with extreme poverty and tensions with Ethiopia. While women played important roles in the war and the Government of the State of Eritrea (GoSE) passed progressive policies promoting women's rights, in reality these are not realized or followed at local and community levels.

The Projects: CARE worked in Eritrea from 2000-2008. The focuses of CARE Eritrea's Strategic Impact Inquiry (SII) were the Gender Based Violence (GBV) Project and the Integrated Women's Health and Empowerment Program (IWHEP). Both projects worked with returnees and refugee communities near the Sudan border and aimed to:

- Increase awareness of gender-based violence and women's rights;
- Improve access/quality of health services;
- Empower women; and
- Build capacity of partners to monitor and manage interventions and do advocacy.

CARE Eritrea's Strategic Impact Inquiry (SII): For the SII, CARE Eritrea focused on its work with IWHEP in order to:

- Explore gender issues facing women in Eritrea and women's empowerment
- Assess CARE's approach/processes to promote gender equity.
- Identify and document cultural factors that affect women's empowerment
- Demonstrate the relationship between CARE Programs, principles and structures and the promotion of women's empowerment.

To fulfill these objectives, CARE Eritrea's primary research questions were:

- To what degree does CARE Eritrea's work impact women's empowerment/equity?
- What approach is CARE taking to women's empowerment, and in which social, cultural, political and economic contexts does it seem to hold?

The Methods: CARE Eritrea's research followed a desk review design that allowed multiple analysts to triangulate their reading of key project documentation through a common analytical lens.

RESEARCH DESIGN

- •Research Team: Partners, diverse staff
- •Workshop I: Perceptions of gender, equity, equality, empowerment
- •Workshop II: CARE's SII, plan for process, discuss empowerment dynamics
- •Selection: Purposive samplng

DATA COLLECTION

- •Desk Review: Commitment to gender equity and empowerment
- •Field Assessment: Complement and cross-check desk review findings-- provide research team training on inquiry through focus group discussions, key informant interviews and semi-structured interviews

DATA ANALYSIS

•**Triangulation:** Cross check desk review and field assessment findings.

Limitations:

- Conceptualization of empowerment used was directly from the global framework, not women's own views.
- Limited field validation of findings.

The <u>Strategic Impact Inquiry</u> (SII) seeks to evaluate CARE's impact on women's empowerment. For CARE Eritrea's full SII report, please contact: <u>pqlibrarian@care.org</u>.

ERITREA

Women's Empowerment:



Strategic Impact Inquiry Research Summary

Women's Empowerment: CARE Eritrea did not inquire about women's views of empowerment, but program documents showed its own definition of empowerment:

AGENCY

Capacity to save, earn income Membership in women's association Self-awareness, knowledge of rights and of own potential Improved health status

STRUCTURE

Access to credit
Access to health services
Advocacy for women's rights

RELATIONS

Internal Commitment to Gender Equity, Women's Empowerment:

- **CO Strategic plan** did not explicitly describe women's empowerment as a strategic direction, though the concept was embedded in other aspects of the plan.
- **Annual Operations Plan** allocated funds for activities that promote gender equity and diversity.
- Measurement Indicators considered diversity of needs and aspirations among participants, and required an understanding of power gaps/relations.
- **GAP Analysis** could not trace women managers influence on country office or impact on women's empowerment.
- **Staff Opinion Survey** indicated that CARE policies and leadership promote equal opportunities.
- Programs focused on promoting women's well-being, particularly economic, social and health.

Implications: Tremendous efforts are required to sustain impact on women's empowerment due to interlinked social, traditional, economic, political and religious factors:

Leverage Practical Entry Points for Strategic Change

- To reduce early marriage, address parent concerns (establish boarding school).
- Consider alternative incomes for birth attendants, who are paid to perform female genital mutilation.
- Enhance women's access to health facilities.

Engage Men and Local Power Holders as allies for women's rights

- Men and traditional birth attendants should be primary targets of female genital mutilation awareness/education.
- Continuous education, awareness-raising, sensitization about GBV required in a number of forums (i.e. schools) to halt harmful practices on girls and women.

Support staff to be effective change agents – in and outside of CARE – for gender equity and women's empowerment

- Enhance staff knowledge in gender concepts, analytical frameworks, and tools.
- Engage diverse groups in country office level decision-making.
- Incorporate lessons learnt from previous projects to inform new program designs to address gender issues.

Impact on Empowerment:

| Agency | Structure | Relations |
|--|---------------------|---|
| Knowledge and awareness of women's rights and GBV, self-respect, knowledge of contributions Village savings/loans self-operational, replicate naturally Lower domestic violence, better living conditions Public discussion of gender issues (women's rights, female genital mutilation) Men control women's loans Shift away from pharonic (severe) female genital mutilation, sunna (partial) form widely practiced | marriage reduced | Men's recognition of women's contributions beyond 'reproductive' Women negotiate and discuss credit and income generation activities with men (unclear how much power women have) Greater opportunity for women to engage in social activities and with community |