



GENDER EQUALITY LEARNING FROM PRACTICE SERIES

PART 1: THE GENDER EQUALITY CONTINUUM

DECEMBER 2024



BACKGROUND

A360's gender equality learning from practice series was launched as a way of sharing best practices and lessons learned from A360's experience in integrating gender equality throughout its programming for adolescent girls. This learning series intends to improve gender equality outcomes by equipping practitioners with relevant tools, knowledge, and resources, anchored in what A360 has learned about what works on the ground. This paper, the first in the series, is focused on the use of the gender equality continuum in program design and adaptation. It features case studies from A360's design and adaptation processes in Ethiopia, Kenya, and northern Nigeria.



BOX 1: WHAT IS A360?

Adolescents 360 (A360) is an adolescent girl-centered sexual and reproductive health program implemented in Nigeria, Ethiopia, and Kenya. A360's interventions make contraception relevant to girls' goals and aspirations and support their voluntary uptake of modern methods. In A360's current investment phase, the project is providing technical assistance to governments to sustainably scale these approaches and strengthen the health system for adolescent responsiveness. The project is funded by the Bill and Melinda Gates Foundation and the Children's Investment Fund Foundation.

WHAT IS A GENDER EQUALITY CONTINUUM?

A gender equality continuum is a tool that program designers and practitioners use to assess the level of gender integration of a proposed or current program. It involves considering whether a program or policy 1) is grounded in a gender analysis of the particular context and 2) assesses the extent to which its interventions are designed to address gender inequalities. It can, therefore, be a useful way of looking at a program's potential and actual contribution to increased gender equality outcomes.

A gender equality continuum can be used for more effective planning. It can also be used throughout the lifecycle of a program to assess progress toward gender equality outcomes. Whilst several different continuums are used across various organizations, they tend to share a common feature of moving from the least desirable gender negative or discriminatory outcomes to gender transformative outcomes that challenge the underlying causes and drivers of gender inequalities. The gender equality continuum that A360 currently utilizes (see Figure 1) was initially developed, piloted, and tested by IDEO.org and [Kore Global](http://KoreGlobal). It distinguishes between four different levels of gender integration, as presented below:

Figure 1: The gender equality continuum

GENDER NEGATIVE	GENDER NEUTRAL	GENDER SENSITIVE	GENDER TRANSFORMATIVE
Solutions that reinforce gender inequalities through the use of gender norms, roles, and stereotypes, in order for the program to achieve its objectives	Solutions that maintain the status quo. They fail to recognize or address gender norms, roles and stereotypes, and thereby support gender inequality	Solutions that carefully consider gender issues and work within existing gender norms to address the exclusion of women and girls	Solutions that directly aim to transform power dynamics and structures that maintain gender inequalities. Gender transformative design goes beyond the “symptoms” of gender inequality to address the norms, attitudes, behaviors, and social systems that underlie them


Source: Adapted from IDEO.org and Kore Global, 2021.




While the continuum outlined above - as well as the examples in this paper - often focuses on women and girls, a gender equality continuum can be adapted to different contexts to include gender-diverse groups.

WHAT DOES THIS LOOK LIKE IN PRACTICE?

Gender norms, roles, and stereotypes may manifest and impact society and individuals differently depending on the context and intervention area. Table 1 outlines examples of sexual and reproductive health and rights (SRHR) interventions for adolescent girls and young women at each level of the gender equality continuum and their impacts on gender equality.

Table 1: Examples of SRHR interventions across the gender continuum

CONTINUUM PHASE	INTERVENTION	IMPACT ON GENDER EQUALITY OUTCOMES
Gender Negative 	Programs that aim to increase young women’s use of contraception target men and promote the benefits of child spacing as happier, well-rested wives who will take better care of their husbands. The program encourages men to send their wives for contraceptive counseling.	This approach reinforces discriminatory gender roles, including that men should be the ones to make decisions about family planning, and women’s primary role is as caregivers.

CONTINUUM PHASE	INTERVENTION	IMPACT ON GENDER EQUALITY OUTCOMES
Gender Neutral 	Programs that aim to increase the use of contraception among adolescent girls, offering counseling sessions during set clinic hours, M-F from 7 AM to 10 AM.	This approach fails to recognize that girls are often occupied with unpaid care responsibilities during morning hours, including collecting water and firewood and preparing meals for their families. No accommodations or considerations have been made to reach a population with a specific need.
Gender Sensitive 	Programs that aim to increase the use of contraception among first time mothers and offer a group education session and free childcare during the session.	While this approach does not address the underlying norms around the childcare burden facing women and girls, it does acknowledge the barrier that childcare can present for women and girls' attendance at events and offers a solution.
Gender Transformative 	Programs that aim to increase the use of contraception among first time mothers offer education sessions on different methods for both men and women and facilitate conversations among couples on joint decision-making around timing for child spacing.	This approach challenges discriminatory gender norms by promoting joint decision-making by women and men around contraceptive use.

HOW DO YOU USE A GENDER EQUALITY CONTINUUM?

Before you can apply the gender equality continuum to your program, it's necessary to do some preparatory analysis and mapping.

STEP 1

It is best to start with a situation analysis to gain a deeper understanding of the barriers and enablers to advancing gender equality in a given context. This situation analysis is also known as a gender analysis and can include an assessment of the following:

- existing knowledge, attitudes, and beliefs related to gender among different groups;
- gender roles and behaviors at different levels (individual, household, community, institutional);
- the ability of women, girls, and marginalized groups to exercise choice and agency in decision-making;
- access to and control over resources for women, girls, and marginalized groups;
- service delivery e.g. whether health service providers are discriminatory and/or reinforce existing gender norms;
- policies and practices that either further or restrict gender equality outcomes; and
- attitudes towards gender-based violence (GBV).

It should be noted that a gender analysis doesn't necessarily have to be a standalone research activity. You can get creative by incorporating gender-related questions into ongoing learning activities combined with a light-touch document review, and ad hoc key informant interviews with those who have gender expertise or those who have previously conducted gender analyses in a given context. Gender analyses are not static - or at least they shouldn't be - so it's important to be alert to new contextual information and add to these analyses over the program period.

STEP 2

Next, it is essential to map out your program and separate the different program components. It's advisable to look at each component separately as not all will necessarily have the same potential impact on gender equality or be influenced by the same norms. A360's A Guide to Adaptive Implementation provides detailed guidance on intervention mapping, which involves looking at the different activities or program content, how they are carried out, who is involved and the frequency of activities.

STEP 3

For each program component or concept, consider where this sits on the gender equality continuum. Figure 2 provides a guide, adapted from a toolkit created by IDEO.org and Kore Global, of the questions your team can ask to assess this, including the questions that will help you explore potential gender equality outcomes and impact.

STEP 4

Once you have identified where the components sit on the gender equality continuum, consider what you can do to integrate more gender sensitive and gender transformative elements into the program. It can be useful to develop a Theory of Change to map out the impact pathways and ensure that the log frame and/or monitoring, evaluation, and learning framework reflect these changes.



BOX 2: SHOULD ALL PROGRAMS AIM TO BE GENDER TRANSFORMATIVE?

The short answer is, not necessarily.

Programs should ensure that no aspect of their work is gender negative, reinforcing inequitable or harmful gender norms. However, when assessing each program component, they may vary along the continuum from gender neutral to gender transformative. Programs should set manageable goals, aiming to move these components along the continuum towards gender transformative programming, acknowledging that not all programs have the resources to fully address the root causes of gender inequality. Although the link to gender norms may not be obvious for all programs, there may be ways to pursue these goals, even if this is not a primary program objective.

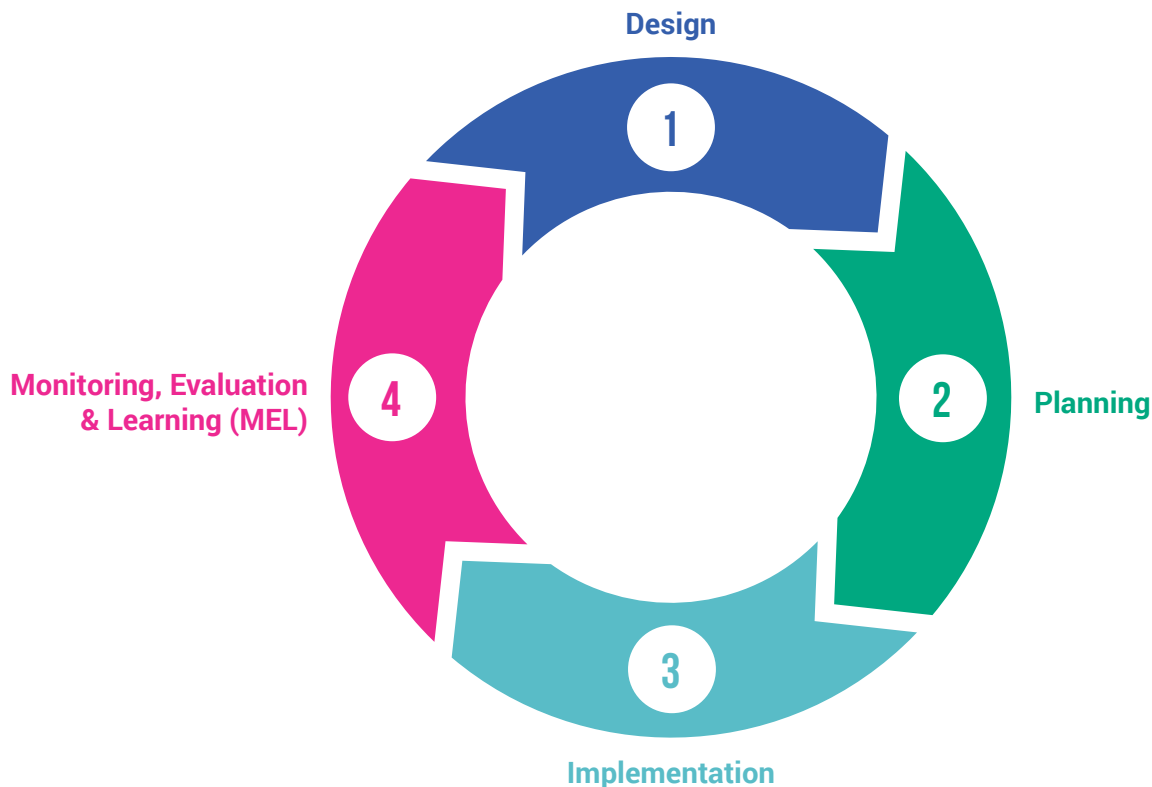
Figure 2: The big questions

START HERE, AND RULE OUT BEING GENDER NEGATIVE	MAINTAIN THE STATUS QUO BY BEING GENDER NEUTRAL	NUDGE THE NEEDLE BY BEING GENDER SENSITIVE	CHANGE THE WORLD BY BEING GENDER TRANSFORMATIVE
<p>BIG QUESTION</p> <p>Does the concept reinforce any negative gender stereotypes or gender norms?</p> <p>Also explore:</p> <p>Does it leverage any negative gender stereotypes or gender norms to attract users or achieve goals?</p> <p>Does it intentionally or unintentionally exacerbate gender inequalities?</p>	<p>BIG QUESTION</p> <p>Does the concept recognize women and men, and girls and boys, as distinct user groups with potentially different needs?</p> <p>Also explore:</p> <p>Does it consider the gender dimensions of the environment and how this may impact program activities?</p>	<p>BIG QUESTION</p> <p>Does the concept seek to improve conditions or outcomes for women and girls?</p> <p>Also explore:</p> <p>Does it strive to improve a “domain” of women and girls’ lives?</p> <p>Does it acknowledge the following, and design with them in mind?</p> <ul style="list-style-type: none"> - Negative gender norms - Unequal power relations - Women and girls’ constraints accessing and controlling resources - Constraints around women and girls’ decision-making power <p>Does the concept consider differences in women and girls of various ages, ethnicity, disabilities, language, etc?</p>	<p>BIG QUESTION</p> <p>Does the concept seek to challenge and change the underlying causes of social and gender inequalities?</p> <p>Also explore:</p> <p>Does it challenge:</p> <ul style="list-style-type: none"> - discriminatory gender roles, attitudes and norms? - unequal power relations between men and women? <p>Does it seek to:</p> <ul style="list-style-type: none"> - provide women and girls with control over assets and resources? - to increase women and girls’ decision-making power in the home and community? <p>Does it explicitly aspire to promote women and girls’ empowerment?</p>
<p>If no to all of the above, your concept is not gender negative.</p> <p>You can advance to the gender neutral prompts.</p>	<p>If yes to all of the above, your concept might be gender sensitive.</p> <p>You can advance to the gender sensitive prompts.</p>	<p>If yes to all of the above, your concept is highly gender sensitive.</p> <p>You can advance to the gender transformative prompts to see if it’s even stronger</p>	<p>If yes to all of the above, your concept is highly gender transformative.</p> <p>Please explore risks and social inclusion further (prompts below).</p>
<p>If yes to one or more prompts, your concept is currently GENDER NEGATIVE.</p> <p>Stay here and explore how you can improve.</p> <p>Note, we should never, ever, proceed to prototyping with a gender negative concept.</p>	<p>If no to one or more prompts, your concept is currently GENDER NEUTRAL.</p> <p>Stay here and explore how you can improve.</p>	<p>If yes to at least 2 of the above, your concept is somewhat GENDER SENSITIVE.</p> <p>If no to all of the above prompts, your solution is actually GENDER NEUTRAL.</p> <p>Stay here and explore how you can improve.</p> <p>Explore how you can improve and if you can’t move back to gender neutral.</p>	

Source: Adapted from IDEO.org and Kore Global, 2021

GENDER INTEGRATION ACROSS THE PROGRAM CYCLE

The gender equality continuum can be used at all stages of the program cycle. Some ideas for how to do so are outlined below.



1. DESIGN

- Conduct a gender analysis to understand existing knowledge, policies, and practices related to gender norms, roles, and relations
- Develop a theory of change and identify objectives to enhance gender sensitive and/or gender transformative outcomes
- Involve women, girls, and marginalized groups in program design (see Box 3)

2. PLANNING

- Determine gender equality-focused learning question(s)
- Build in pause and reflect moments to assess the program's contribution to gender equality outcomes (referring back to the continuum) and adapt as necessary
- Allocate adequate funds to gender integration
- Establish feedback mechanisms to ensure the program is meeting the needs of women, girls, and marginalized groups (again, referring back to the continuum)

3. IMPLEMENTATION

- Involve women, girls, and marginalized groups throughout program implementation and ongoing monitoring of feedback from program participants
- Conduct training for staff on the gender equality continuum and its practical application to the program context



BOX 3: INVOLVING WOMEN, GIRLS, AND MARGINALIZED GROUPS IN PROGRAM DESIGN AND IMPLEMENTATION

Consultations with program participants are essential to ensuring that their needs, experiences, and aspirations are considered and reflected in the content of the intervention. The depth and range of consultation can vary, depending on the program timeline and budget. It is advisable to consult with a diverse group of participants, including women, men, girls, boys, and people of diverse genders, in the initial stages of program design. Ongoing engagement with key program participants is needed throughout implementation to ensure the intervention meets their needs. Guidance for consulting young people is available in A360's [Meaningful Adolescent and Youth Engagement Strategy](#), and there is more guidance on engaging key stakeholders within the resources provided by the [HCD Exchange](#) (see for example, the [Quality and Standards Framework](#), especially Principles 1-3). It is equally important, however, to ensure that the consultation process is not extractive or causes any harm. People's time must be respected and if appropriate, rewarded.

4. MONITORING, EVALUATION & LEARNING (MEL)

- Collect and analyze sex and age-disaggregated data
- Develop gender sensitive indicator(s) to track progress on changing gender norms, including both quantitative and qualitative data
- Analyze changes in knowledge, attitudes and behaviors related to gender norms
- Analyze and elevate gender-related insights and learning
- Share learning and reflections with others



BOX 4: KEY CONSIDERATIONS WHEN DESIGNING GENDER SENSITIVE AND GENDER TRANSFORMATIVE PROGRAMS

- **Collect the right information by conducting a gender analysis and consult key stakeholders**, including women, girls, men, and boys of different ages. This will help you gain a better understanding of existing gender issues as well as the social and gender norms, roles and stereotypes that you are aiming to work around (gender sensitive) or transform (gender transformative).

- **Make sure you have adequate resources and the capacity to pursue your gender-related program goals**, including financial and human resources. It is advisable to appoint a gender focal point with some level of gender expertise and a good knowledge of what strategies work to transform gender norms.
- **Pursue political and institutional buy-in from government and other community gatekeepers** to create a strong foundation from which to influence norms and institutions. Without this support, your program risks falling into gender neutral or even gender negative territory if there is strong resistance to program objectives. Consider any capacity-building activities that might be needed for key program stakeholders and partners.
- **Be sure to put in place a robust implementation and monitoring framework with gender sensitive indicators** to track changes in knowledge, attitudes, and behavior (gender transformative change). At a minimum, data should be disaggregated by sex and age, although the more disaggregation you can include, the richer your data will be.
- **Finally, disseminate program learning and best practices widely**, in order to share knowledge and experiences on what works to increase gender equality and enable and inspire others to contribute to this work.

Source: UNICEF South Asia, 2018

LEARNING FROM A360'S MATERNAL, NEWBORN AND CHILD HEALTH (MNCH) DESIGN PROCESS IN ETHIOPIA AND NORTHERN NIGERIA AND ADAPTATION IN KENYA

The case studies below provide an inside look at how the gender equality continuum was applied to improve A360's gender transformative impact. Girls' agency, defined as a girl's ability to act in line with her choices, is central to A360's approach to gender transformative programming and gender equality. For further details, see A360's [Gender Strategy](#), which outlines how this approach is conceptualized and operationalized across all areas of A360's work.

CASE STUDY 1

DESIGNING A NEW INTERVENTION FOR MARRIED ADOLESCENT GIRLS TO IMPROVE MNCH IN ETHIOPIA AND NORTHERN NIGERIA

BACKGROUND

Smart Start, the A360 intervention in Ethiopia, uses financial counseling as a hook to elicit discussions with married adolescent girls and their husbands around delaying and spacing births. Smart Start is implemented within existing public health structures, primarily at the health post level, leveraging the critical presence and engagement of community Health Extension Workers (HEWs). In northern Nigeria, **Matasa Matan Arewa (MMA)**, Hausa for 'Girls from the North', is A360's intervention tailored to married adolescent girls. MMA uses a two-pronged approach that reaches both young married girls and their husbands through targeted one-to-one outreach by female mentors and male health agents. MMA navigates Northern Nigeria's more conservative context by aligning contraceptive use with concepts of family health and stability. Girls can choose to go directly to a government facility for adolescent-responsive services after engaging with a community mobilizer or to attend four 'Life, Family, and Health' (LFH) classes to build further health-related knowledge and learn critical soft skills such as communication and negotiation from a program mentor. All A360 interventions incorporate an approach that prioritizes girls' life aspirations, positioning contraception as a relevant tool for girls to use to pursue their goals.

Although A360's interventions primarily focus on SRHR outcomes, the program aims to support girls to identify and act on a broader set of aspirations in life, and motherhood remains the primary goal for many of the married adolescent girls reached by A360's programming. Other married adolescent girls supported through A360's programming may not actively choose to become mothers but for religious, cultural, or personal reasons, may have unplanned pregnancies and lack access to safe abortion services. As a result, in 2023, A360 focused on designing new complementary components to its interventions in Ethiopia and northern Nigeria which would support married adolescent girls to pursue healthy pregnancies.

In both Ethiopia and northern Nigeria, A360 followed a Human-Centered Design (HCD)¹ process to create these complementary components. The in-country teams led the design process, which included an insight-gathering phase, two rounds of rough prototyping, and one final round of live prototyping before the intervention designs moved into the pilot stage. They were supported by a design advisory group comprising technical experts across different fields, including gender equality, who acted as thought partners for the country teams. A360 also brought on board IDEO.org as a design partner and utilized its support at key moments in the design process to strengthen the design process and outputs.

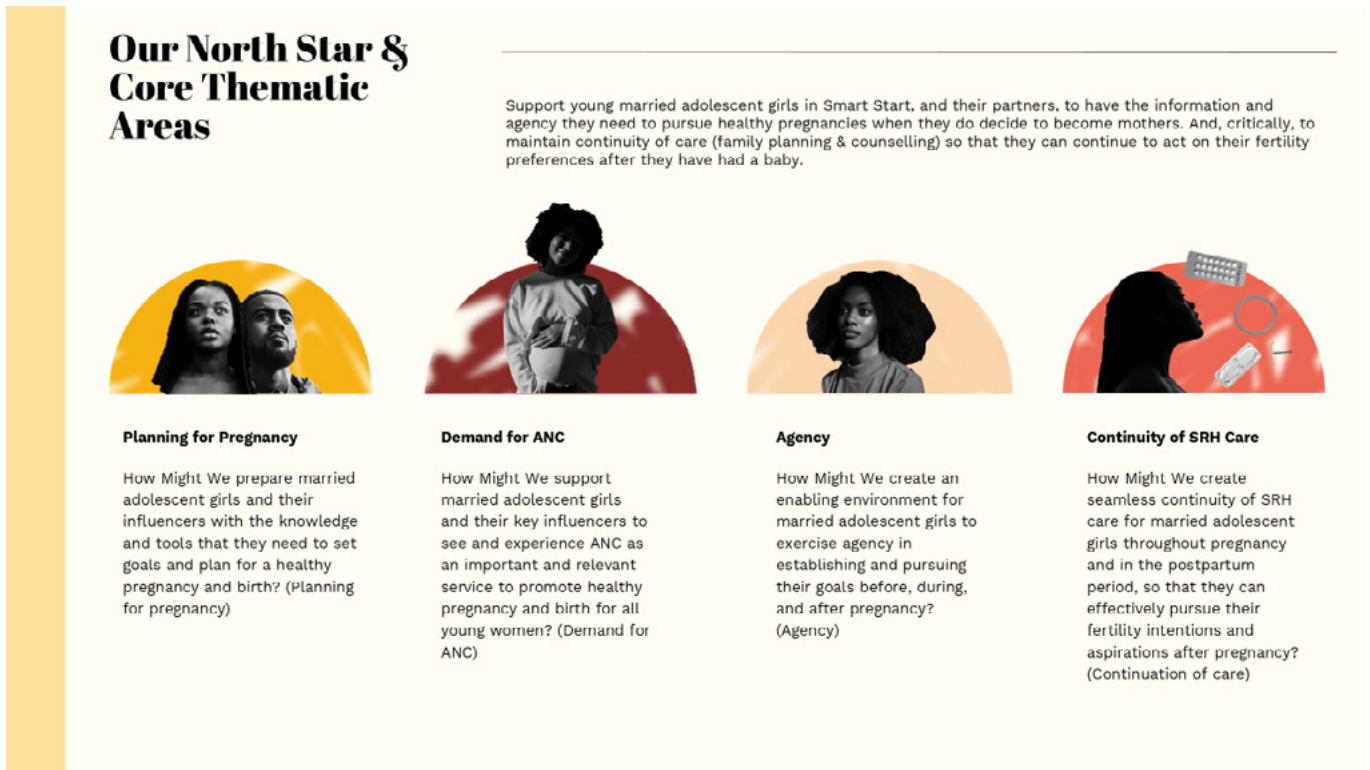
It was also important that the new complementary components could layer onto existing government systems to promote the potential for the sustainable scale-up of the intervention alongside A360's SRHR programming. As a result, A360 engaged the government in both countries in various ways throughout the design process, including government representatives as members of the design advisory committee, holding entry meetings with key government stakeholders, and engaging them in data collection and analysis activities.

¹ For more information on Human-Centered Design, see <https://hcdexchange.org/>

USING THE GENDER EQUALITY CONTINUUM DURING DESIGN

As a first stage in the design process, A360 developed a brief that identified the opportunities the program intended to explore during the design phase for these complementary MNCH components. This brief outlined four broad thematic areas (see Figure 3) to guide the gathering of insights during the formative research stage.

Figure 3: A360 MNCH Design Core Thematic Areas



Under these thematic areas, A360 developed 'How Might We' questions - open-ended questions that focused on the potential solutions to barriers and invited creative ideas for solving problems (see Box 5). Girls' agency was given prominence across all the thematic areas outlined in the design brief; however, one thematic area was also dedicated to the concept of agency in order to re-emphasize the importance of approaching this design process in a way which centered on girls' choices and took a gender transformative approach.



BOX 5: “HOW MIGHT WE” QUESTIONS TO INCREASE GIRLS’ AGENCY

Primary question

- How might we create an enabling environment for married adolescent girls to exercise agency in establishing and pursuing their goals before, during, and after pregnancy?

Secondary questions

- How might we support married adolescent girls’ key influencers to have accurate knowledge about pregnancy identification and care?
- How might we support married adolescent girls to initiate conversations with their key influencers relating to what they desire during pregnancy and birth?
- How might we support couples (married girls and their partners) in reframing the pregnancy experience as a shared responsibility, setting expectations around investment, decision-making, and collaboration early in the MNCH continuum?
- How might we improve married adolescent girls’ self-efficacy along the MNCH continuum of care?
- How might we support married adolescent girls’ key influencers to be supportive partners – to emphasize married adolescent girls’ choices along the MNCH continuum of care?
- How might we support public health systems to deliver gender-responsive adolescent sexual and reproductive health services, for more girls to have the resources and assets they need to act on their pregnancy and birth goals?

The design process started with Insight Gathering across both geographies, to understand the main barriers to married adolescent girls seeking and utilizing appropriate health services both before and during their pregnancy (see Box 6). During this phase, A360 conducted research with adolescent girls, their key influencers, and community members to answer the design questions and better understand what support girls would need to exercise agency in pursuing healthy pregnancies. As the original design themes highlighted the importance of agency, the insights gathered during this phase were organized around agency as a central concept.



BOX 6: EXAMPLES OF AGENCY-RELATED THEMES IN INSIGHT GATHERING

Below are some examples of the insights gathered regarding pregnancy-related care for adolescent girls.

Insight statement: Married adolescent girls' husbands are the sole decision-makers regarding the support and care they receive during pregnancy. A husband's level of knowledge determines the amount of support a girl gets.

"I gave birth at home because my husband wasn't home, and I needed his approval." - Married adolescent girl, Igabi.

Insight statement: Because pregnancy is seen as 'normal', a girl's concerns are disregarded, especially during her first pregnancy. Girls know they won't be taken seriously and don't feel empowered to seek care when they're pregnant, unless they are encouraged by those with experience (sisters, friends, neighbors).

"When I got sick, I used to get mad and ask myself, why did I get pregnant? I couldn't eat, my legs ached. I consulted my sister. She told me it would go away. I did not tell them [my husband and mother] because I didn't think they'd do anything for me. They just tell me to eat." Girl.

The synthesized insights were then used to build initial sketches of solutions that went on to be tested in two rounds of prototyping. These prototyping rounds determined what resonated the most with adolescent girls and their key influencers. They also revealed what had the greatest potential to address the core design areas and promote MNCH-related outcomes. Each prototype was evaluated on its ability to address the design objectives laid out within the core thematic areas established in the design brief. This allowed A360 to intentionally assess whether each prototype would further support not just improved MNCH outcomes but would also do so in a way that supported girls' agency.

Figure 4: A360 Ethiopia Prototype Report Card Example



At each critical stage in the design process, the design advisory group reviewed the insight decks, prototype concepts, and the final design, including an assessment against the gender equality continuum. This enabled the group to identify ways in which the prototypes could be shifted to increase their potential for gender transformative outcomes, particularly improvements in girls' agency.

DESIGN RESULTS

The process of insight gathering, prototyping, and final design that was piloted in each geography resulted in MNCH interventions that strongly supported girls' agency in pregnancy-related care-seeking behaviors. Across the two countries, some cross-cutting elements worth highlighting are presented below.

A360 learned from insights that girls had little awareness or understanding of the pregnancy process. This led to the girls' partners and family members disregarding their concerns, and their lack of confidence to seek care or express their opinions. The final designs in each geography addressed this insight by building in elements that support girls in visualizing the pregnancy process for themselves and intentionally identifying their goals for their pregnancies, as well as the support they require of those around them. The aim is to assist girls in overcoming feelings of powerlessness, to identify areas where they can express what they want and/or act on their own preferences. The program design took various forms - in northern Nigeria, girls are provided with a small brochure for each trimester of their pregnancy that helps them understand what care they will receive at their ANC visits (Figure 5). They also receive support from mentors who help them to identify their goals and motivations for seeking care. In Ethiopia, where pregnancy-related nutrition was identified as a key challenge, girls are provided with a brochure that orients them to essential foods and nutrients and helps them build confidence in their ability to support healthy pregnancies (Figure 6).

Figure 5: MMA pregnancy journey map, northern Nigeria

Your foetus is small and fragile. It needs the right conditions to grow into a healthy baby.

For all women, even those who feel healthy, regular ANC visits reduce the likelihood of stillbirth and early child death. Furthermore, ANC visits can help monitor the baby's growth, avoid a miscarriage and help with symptoms such as excessive vomiting, high blood pressure, anaemia or pelvic infections.

-  **ABDOMINAL CHECK-UP**
A thorough examination of your abdomen to assess the growth and well-being of your baby.
-  **WEIGHT MONITORING**
Keeping track of your weight to ensure healthy weight gain during pregnancy.
-  **BLOOD TEST**
Tests conducted to check levels of hemoglobin (Hb) to track and detect presence of anaemia, screen for HIV, and detect syphilis
-  **URINE ANALYSIS**
Analyzing your urine to identify the presence of albumin and sugar, which can indicate potential health risks.
-  **BLOOD PRESSURE EVALUATION**
Monitoring blood pressure to detect and manage high blood pressure, which can be harmful during pregnancy.

WHY WILL I GO TO ANC?
Use this box to write or draw your personal motivation for going to ANC.

ID

Tip: By the 2nd trimester you should have stabilized and feel better. Discuss with your health worker during ANC visits in trimester 2 any changes you noticed with your body, how you feel when you take your supplements and any complications you are experiencing.







ANTENATAL CARE CHECKUPS

SECOND TRIMESTER

Your baby is growing.
You can help ensure it has all it needs to be healthy.

Figure 6: A360 Ethiopia Smart Nutrition poster



Insights also indicated that married girls often had limited decision-making power about seeking care and that these decisions were most often made by their husbands, influenced by other household members or community leaders. The final designs in each geography purposefully engage male partners to a) build their knowledge of and belief in the importance of pregnancy-related care, b) shift attitudes around girls' rights to make decisions on their own care during pregnancy, and c) identify concrete opportunities where husbands can support their wives during pregnancy. In northern Nigeria, government MNCH experts engage male partners in sessions to build knowledge and support, leading to husbands referring their wives to ANC and in many cases, attending ANC sessions with them (this session is specifically open to men) (Figure 7). In Ethiopia, husbands are engaged in counseling sessions with their wives to establish the importance of pregnancy care and how it influences healthy outcomes for mother and baby.

Figure 7: ANC poster gallery, northern Nigeria



This case study demonstrates how A360's MNCH intervention components were designed to maximize gender transformative impact. The gender equality continuum was pivotal in laying the foundation for meaningful gender integration into the MNCH program design. The pilot phase is ongoing, and the insights from this will be analyzed and evaluated at the end of an 18-month pilot.

CASE STUDY 2

ADAPTING BINTI SHUPAVU FOR GENDER TRANSFORMATIVE CHANGE IN KENYA

BACKGROUND

In Kenya, A360 has been implementing *Binti Shupavu* (*Binti* is Swahili for 'young woman' or 'daughter' and *Shupavu* translates to 'strong' or 'fearless') since 2022, providing adolescent girls with access to SRHR information and services. *Binti Shupavu* is designed to tap into girls' aspirations. The intervention supports girls' agency and contraceptive decision-making by creating a safe space (*Binti Shupavu Clinic*) for young women to build trust in the health system, learn about contraception, and share experiences and stories with their peers. It works with providers to improve their capacity to address young women's concerns and promote the provision of a full range of contraceptive options through counseling. The intervention engages and educates community influencers and those closest to young women (via *Binti Shupavu Stories*), to collaboratively address misinformation, and support the decisions girls make about their bodies and futures. This culminates in an opportunity for girls and those around them to come together to celebrate the unique contributions of young women within their communities (*Binti Shupavu Fest*).

USING THE GENDER EQUALITY CONTINUUM IN PROGRAM ADAPTATION

Even though A360 designed *Binti Shupavu* while considering how the intervention could support girls' agency, after two years of implementing the intervention, the project saw a need to revisit the three core program components with an eye towards further adaptation in pursuit of gender transformative impact. During a 'Pause and Reflect' moment in January 2024, the A360 team in Kenya came together to assess if the program was meeting these objectives and identified opportunities for adaptation. This involved an assessment process for each intervention component against the gender equality continuum to identify how gender transformative it was and where this could be strengthened. These opportunities are depicted in Table 2.

Table 2: Binti Shupavu intervention components and identified areas of gender-related adaptation

INTERVENTION COMPONENT	DESCRIPTION	IDENTIFIED AREAS FOR GENDER INTEGRATION
<p>Binti Shupavu Clinic</p> 	<p>A360 staff or Community Health Workers (CHWs) support attending adolescent girls to go through a goal setting exercise (Figure 8) that helps them identify and chart a path to achieving their goals. As a group, girls then receive information on the contraceptive methods available to them and an ‘opt-out’ moment to speak with the health service provider privately and take up a contraceptive method aligned with their preferences.</p>	<p>While parts of the goal setting activity address critical elements related to girls’ self-efficacy and aspirations, A360 identified an opportunity to better use the goal setting activity to build girls’ critical consciousness or awareness of the ways in which gender norms may restrict their ability to pursue their goals. The team decided to incorporate a section into the goal setting sheet, which prompted girls to identify how the expectations of others in their households and communities influenced the goals they set for themselves.</p>
<p>Binti Shupavu Stories</p> 	<p>In Stories sessions, key community influencers and those closest to adolescent girls (husbands, parents, and community leaders) are educated so that they can collaboratively address misinformation and support the decisions girls make about their bodies and futures. This includes a facilitated information session from A360 staff or CHWs as well as the use of pre-recorded testimonials from adolescent girls.</p>	<p>A360 identified an opportunity to review the facilitators’ guide for these Stories sessions to assess the extent to which the messaging given to influencers was promoting girls’ decision-making power (vs. just their contraceptive use). Additionally, the project decided to create a ‘pocket guide’ for facilitators that could give them practical, short tips on facilitating sessions in a way that emphasized gender transformative messages.</p>
<p>Binti Shupavu Skills Classes/Fest</p> 	<p>Adolescent girls are taken through 6 curriculum sessions facilitated by A360 staff, a CHW, or a trained peer, which focus on improving girls’ capabilities. These sessions cover soft skills such as decision-making and communications alongside financial management and vocational skills that can provide girls with avenues towards earning an income. Upon completing all six sessions, girls’ communities come together in an event that celebrates their achievements and allows them to showcase what they have learned.</p>	<p>Even though the curriculum already contained gender transformative content, there was an opportunity to review it and make recommendations to strengthen these elements. Suggestions included incorporating more skills and content into the curriculum, including self-discovery and mental health, as well as providing resources for sustained engagement with girls. Moreover, given the sensitivity of some of these topic areas, the project elected to revisit the training that facilitators receive so that there were greater assurances that they would not inadvertently reinforce harmful norms within their facilitation.</p>

Figure 8: Binti Shupavu Clinic Goal Setting Activity Sheet



This case study shows how the gender equality continuum can be applied to existing programs throughout program implementation and how adaptations can be made to improve the potential for gender transformative impact. The identified adaptations in Kenya were taken through to completion over six months, assessed through regular feedback from program participants.

RECOMMENDATIONS

The two examples of applying the gender continuum to A360’s program design and adaptation have generated several key learnings and insights that may be useful for other program designers and practitioners aiming to enhance the gender transformative impact of their interventions. These have been summarized in the following recommendations:



Have a vision for what you want to achieve: It’s important to focus on the end user experience and ask what specific interventions and design elements mean to them. However, it is also crucial to acknowledge that values are hard to shift, and social norm change takes time. Women and girls may themselves have strong beliefs that reinforce discriminatory gender stereotypes and harmful gender norms. Changing attitudes and beliefs around gender is a long-term process that requires patience and dedication. However, small successes can and should also be celebrated.



Ensure adequate gender expertise: The integration of gender considerations into new or existing programs can be a challenging process, and not all staff necessarily have expertise in both gender knowledge and program design. Having gender expertise in the design group is crucial. The gender analysis and guidance provided by a gender expert can be invaluable in identifying concrete actions to advance gender equality outcomes. It is vital to think carefully about where resources are best spent and to consult with external experts where necessary. In addition, all program staff should receive orientation and capacity support in using the gender equality continuum.



Contextualize the continuum: Gender norm change can look different in different contexts and across various programs so be sure to ask questions and set gender equality objectives in a way that feels relevant to your team. Doing so will help your team to use the gender equality continuum more practically rather than it being a theoretical framework.



Take the time to find the right entry point: It can be beneficial to consider alternative pathways to change but it is also important to work with what you have. Program staff working directly with program participants are often best positioned to identify opportunities to advance gender equality within the program scope. It isn't always necessary to introduce new elements to a program, and budget and other constraints mean that choices may have to be made. Sometimes all you need are small tweaks or reframing to boost a program's impact on gender equality outcomes, but it requires taking the time to stop, reflect, and reimagine, something that is not necessarily built into program timeframes and planning.



Routinely revisit progress: Gender analysis and program assessments using the gender equality continuum are not intended to be one-off processes carried out only at the beginning of program design. It is highly advantageous to revisit the analysis during implementation because things change, and you should ensure program components are not starting to become harmful or gender negative. Equally, new opportunities that were not present at the beginning of the program implementation could now be available to strengthen positive impact.



Be creative about how to measure impact: Change in gender equality outcomes can be long-term and may not be easy to measure within the timeframe of your program. Qualitative data and continuous feedback from program participants can provide rich learnings and insight and should be incorporated into monitoring, evaluation, and learning frameworks.

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