



Enhancing Nutrition and Food Security during the First 1,000 Days through Gender-sensitive Social and Behavior Change

A Technical Brief

Food security requires physical and economic access to sufficient food to meet dietary needs for a productive and healthy life at all times. Households that are vulnerable to food insecurity often demonstrate malnutrition—particularly undernutrition, which includes stunting, wasting, underweight, and micronutrient deficiencies. This is a particular concern during the critical 1,000 days from conception to a child’s second birthday, where malnutrition can result in life-long, irreversible damage and compromises maternal, neonatal, and child health, physical and cognitive growth, educational achievement, and productivity as adults. To prevent these detrimental results and break the cycle of poor nutrition, the 1000-day window of opportunity has been identified as critical for ensuring adequate nutrition for women and their children.

Evidence shows a strong correlation between gender inequality and nutrition and food insecurity. Women and children are at greater risk of malnutrition than men: twice as many women suffer from malnutrition as men, and girls are more likely to die from malnutrition than boys. Nutrition is impacted by factors at various levels: the immediate causes are related to food and nutrient intake and health; underlying causes include factors at household and community levels, such as household food insecurity, inadequate care for women and children, poor health and hygiene practices, and poverty; and the basic causes of undernutrition are influenced by sociocultural, economic, environmental, and political issues. However, although women are disproportionately affected by nutrition and food insecurity, they also play a critical role in guaranteeing nutrition and food security in households and driving economic growth.

To tackle this complex problem, a multisectoral approach that addresses the myriad of immediate, underlying, and basic causes of malnutrition is needed. This approach must be gender-sensitive and utilize social and behavior change (SBC) to transform community norms. This technical brief highlights key research and methodological findings on gender-sensitive SBC approaches and presents critical actions, best practices, resources, and tools relevant to the planning, implementation, and evaluation of nutrition and food security projects, and gender mainstreaming within organizations, to improve nutrition outcomes during the 1,000-day window of opportunity. More details can be found in the corresponding Technical Resource Guide.

BOX 1. Key definitions

Gender-sensitive: Describes an approach or intervention in which the different needs, abilities, and opportunities of women, men, girls, and boys are identified, considered, and accounted for to ensure that they receive equitable benefits from the development process.

Social and behavior change: A behavior-centered approach to facilitating individuals, households, groups, and communities to adopt and sustain improved, evidence-based practices.

1000-day window of opportunity: The period between conception and age two when irreversible damage caused by malnutrition can and should be prevented.

GENDER-SENSITIVE SBC APPROACHES: THE WHAT AND THE WHY

Gender inequality continues to place burdens on the nutrition and food insecurity of pregnant and lactating women (PLW) and their children. Women’s education, economic standing, social status, age, health, and decision-making capacity relative to men’s are significant determinants of maternal and child health and nutrition. Changes in the ways that men and women live in the world and interact with each other are an expression of changes in gender roles and relations; it is these dynamics related to nutrition and food security practices that practitioners are trying to change in order to improve nutrition outcomes during the first 1,000 days. Both men and women have unique roles to play to improve nutrition and these roles and related practices must be addressed in behavioral interventions.

When planning, implementing, or evaluating nutrition interventions, it is important to understand the social and gender dynamics that could help or hinder their effectiveness. Gender-sensitive social and behavior change approaches are behavior-centered approaches that identify, consider, and account for the needs, abilities, and opportunities of women, men, girls, and boys to facilitate individuals, households, groups, and communities to adopt evidence-based practices and transform the environment in which behavior change occurs. Gender-sensitive SBC approaches are essential to increase optimal nutrition practices, demand for services and commodities, and ultimately, increase utilization of services. Addressing gender also allows for effective linkages across sectors, spanning health, agriculture, food security, and economic empowerment, among others. Gender-sensitive SBC interventions are not separate or autonomous activities that have to be “added” onto other projects. This functional approach to development programming needs to be integrated within all interventions to enhance the project’s effectiveness. Gender-sensitive SBC approaches to improve nutrition outcomes for PLW and their children during the 1,000-day window of opportunity are powerful tools in the battle against food insecurity.



EVIDENCE-BASED GENDER-SENSITIVE SBC INTERVENTIONS

Malnutrition can be greatly reduced through the delivery of simple interventions encouraging specific behaviors at key times in the lifecycle—for the mother, during pregnancy, and for the mother and child, during delivery, infancy, and early childhood. Many of these practices are part of the Essential Nutrition Actions (ENA) and Essential Hygiene Actions (EHA). By implementing specific interventions at different levels (e.g., policy, mass media, peer groups, individual), participants can demonstrate changes in knowledge, attitudes, and skills, which can lead to changes in key behaviors or practices. While there are too many potential gender-sensitive SBC interventions to list, the following table highlights a number of well-recognized multisectoral gender-sensitive SBC interventions that impact nutrition during the 1,000-day window of opportunity (Figure 1).

There is considerable variation in effective gender-sensitive SBC interventions used during the critical first 1,000 days. Evidence suggests that using multiple SBC interventions to change behaviors is more effective than using one. Such interventions may have different target groups, content, messages, scale and coverage, length, and intensity. They should aim to cut across sectors (e.g., agriculture, education, health, water, sanitation, and hygiene [WASH]) to harmonize interventions, messages, and resources to improve nutrition during the 1,000-day window of opportunity. Some SBC interventions (e.g., exclusive breastfeeding [EBF], complementary feeding) may be suited to iterative programming, because even if standards for behaviors are not met, there can be incremental change toward the optimal, evidence-based behaviors. In addition, it is best to utilize existing mechanisms, such as integrating technical assistance activities within the existing government health and nutrition systems.

FIGURE 1. Examples of effective gender-sensitive social and behavior change interventions

	Access to Food	Maternal and Child Care	Water, Sanitation, Health Services
Interpersonal/ Individual/Family Approach	<ul style="list-style-type: none"> • Increase access to high-nutrient content food through homestead food production • Incorporate nutrition-related education in Farmer Field School (FFS) 	<ul style="list-style-type: none"> • Promote dietary diversification through one-on-one counseling • Organize husbands/father peer groups to build skills to enhance gender roles, motivators, and barriers 	<ul style="list-style-type: none"> • Promote hand washing and hygiene practices • Install water wells and tanks to reduce women’s time and labor burdens
Community Level Approach and Advocacy	<ul style="list-style-type: none"> • Develop a village model farm that highlights crops managed by women • Form, organize, and support farmer and non-agricultural associations for women 	<ul style="list-style-type: none"> • Organize Care Groups to promote good feeding and nutritional care practices • Train healthcare workers on SBC of feeding practices 	<ul style="list-style-type: none"> • Hold Child Health Days to provide health and nutrition services • Provide ITN to PLW and children and ensure usage
Mass Media and Information and Communication Technology	<ul style="list-style-type: none"> • Produce documentary promoting gender equality, nutrition, and HIV in FFS • Develop billboards to promote Animal Source Foods and Food Production 	<ul style="list-style-type: none"> • Give fathers reminder stickers for antenatal care visits • Distribute information, education, communication materials on EBF to males 	<ul style="list-style-type: none"> • Develop a radio and TV campaign for men focused on feeding actions • Create drama about harmful cultural practices that affect maternal and child nutrition
Structural/ Systems Approach (Enabling Environment)	<ul style="list-style-type: none"> • Focus poverty reduction and economic growth programs on women and girls • Promote nutrition dimension in development, poverty, and food security plans 	<ul style="list-style-type: none"> • Enhance capacity of national research institutions to address gender and nutrition in extension training • Enforce legal marriage age of 18 years or older 	<ul style="list-style-type: none"> • Strengthen health systems to improve availability and access to medical products • Increase capacity of female managers in organizations

CRITICAL ACTIONS, BEST PRACTICES, AND RESOURCES FOR GENDER-SENSITIVE SBC

Identifying and addressing gender inequalities during strategy and project planning, implementation, monitoring and evaluation (M&E), and documentation of a project has the potential to improve food security, health, and nutrition outcomes for families. For each stage, critical actions on how to improve the gender sensitivity of SBC programming are presented as well as best practices, key resources, and tools to improve nutrition and food security during the first 1,000 days and beyond. See page 8 for a complete list of resources and tools.

Program Planning

Gender-sensitive SBC projects for maternal and child nutrition need to be grounded in formative research, be multisectoral, engage relevant partners, and must be tailored to the local context to effectively change harmful practices and encourage sustainability of positive ones.

Critical Actions and Best Practices

Conduct a gender analysis and SBC formative research. A systematic study of differences in the local context relative to women, men, girls, and boys should inform all project activities, including planning, implementation, M&E, and communication. Analyses should use quantitative and qualitative data and be applied at the project level, ideally before a project begins.



Interview women, men, girls, and boys to get all relevant perspectives during formative research to understand relevant gender dynamics in the community.

Ensure project strategies and plans are gender sensitive. At the beginning of project activities, some practitioners suggest developing explicit gender and SBC strategies that outline theories of change,

messages, and communication channels, for example. If that is not possible, ensure all project planning documents or strategies integrate gender analysis findings.

Strengthen gender-related partnerships. Create a wide network of stakeholders that can transform gender (e.g., government, CBOs, private sector, international platforms). Leverage all partners' core competencies and harmonize interventions and messages to maximize impact.



Meet with community members to understand promising points of entry to transform gender attitudes and norms and how to leverage them to create change.

Ensure project objectives and SBC interventions address gender needs and gaps. Projects should address identified gender needs and gaps, with an emphasis on leveraging existing gender equity and increasing women's participation in project and community activities. Projects should be tailored to local needs and consider roles in the household and community.



Involve women, men, girls, and boys in designing objectives and interventions to ensure everyone's needs are met.

Beyond impacting maternal and child nutrition outcomes, projects should strive to transform gender relations to make a lasting difference.

Make linkages across multiple sectors. In response to the pervasive and complex health, social, and behavioral determinants to undernutrition and illness, innovative interventions should incorporate multiple sectors, such as agriculture, health, WASH, education, social protection, economic strengthening, and women's empowerment to maximize impact.



Gender should be addressed within other project components and be given as much time as other project components receive.

Highlighted Resources and Tools **See page 8 for more**

[A practical guide for managing and conducting gender assessments in the health sector \(2013\)](#)ⁱ

[Gender analysis, assessment and audit manual & toolkit \(2012\)](#)ⁱⁱ

Program Implementation

Implementing gender-sensitive SBC approaches requires flexibility, regular monitoring, and continuous adjustments to ensure activities are achieving desired outcomes. Involve a range of influencers and consider the needs and preferences of males and females to maximize impact.

Critical Actions and Best Practices

Engage a range of important influencers. Projects should target influential change agents, such as husbands, fathers, grandmothers, religious leaders, health workers, and extension workers, to positively contribute to nutrition outcomes during the first 1,000 days. Also, local champions who understand and communicate the issues may contribute greatly to efforts.



Try to achieve gender balance in the recruitment of project participants to influence both parents for improvements in maternal and child health and nutrition practices.

Celebrate successes. For example, recognizing families who demonstrate optimal practices or celebrating the championship of community workers can inspire others.

Consider needs and preferences of men and women when implementing activities. Examine and address the unique needs and preferences of men and women when implementing gender-sensitive SBC

interventions to improve maternal and child nutrition. In particular, challenge gender norms in gender-specific practices, respect or address overstretched workloads, and maximize the adoption of labor- and time-saving technology.



Help beneficiaries recognize the impact of program activities. For example, when parents see a difference in their child’s health, dialogue in couples increases.

If men or women are reluctant to participate in activities, set minimum target levels for gender-balanced participation.

Gender and SBC trainings need to be integrated, balanced, and impactful. Raising awareness in gender and behavior change are long-term processes that need to be addressed through integrated and coordinated training activities and require proper facilitator training.



When projects send staff to trainings, give them a role when they return; this allows them to apply the learning, build their facilitation capacity, and share knowledge.

When facilitating trainings, be sensitive to the local context and personal beliefs.

Review project messages and materials to ensure gender considerations are included, where appropriate. Maternal and child nutrition messages and materials—including images and characters—should cater to the unique identities and abilities of the broad range of all project stakeholders to reduce knowledge gaps and change behavior.



Develop an internal checklist with input from stakeholders to ensure messages and materials are gender-sensitive.

Ensure interventions “do no harm.” Make sure gender-sensitive SBC interventions do not create or increase risk for women, men, girls or boys. This requires an ongoing monitoring of shifts in the local context; unintended consequences or issues should be promptly addressed.

Highlighted Resources and Tools **See page 8 for more**

[Nurturing connections: A participatory approach to gender and nutrition \(2012\)](#)ⁱⁱⁱ

[Gender model family manual for community workers \(2013\)](#)^{iv}



Program Monitoring and Evaluation and Documentation

Continuous monitoring and evaluation is needed to assess whether gender affected the activities undertaken and whether the anticipated results affect women and men differently. Findings should be disseminated broadly as well as used to broaden the evidence base.

Critical Actions and Best Practices

Collect and analyze sex-disaggregated and gender-sensitive indicators. Sex-disaggregated data and gender-sensitive indicators should be collected where feasible and relevant. Such data should be regularly monitored and analyzed to identify discrepancies between males and females in services, access, and outcomes.



Ensure that project teams conducting M&E activities and project beneficiaries sampled in data collection are comprised of both women and men.

Standardize gender-sensitive SBC measures within and between projects. Practices and indicators need to be standardized in order to attribute changes in outcomes and compare findings across studies. Some SBC interventions (e.g., EBF, complementary feeding) may be suited to iterative measures to gauge incremental change toward the optimal behaviors.



Broaden the focus of SBC indicators and evaluation designs to include those that will measure antecedents on the pathway to behavior change.

Broaden the evidence base. Due to limited research on the impact of gender-sensitive SBC programming, more intensive and rigorous research is critical for creating behavioral interventions that are effective and sustainable to help achieve progress in maternal and child nutrition. Such data is important for scaling up these approaches and for institutional learning.



Since SBC related to gender is an ongoing, long-term process, M&E of gender-sensitive SBC programs should continue after implementation, if possible.

Facilitate partnerships on research and M&E for gender-sensitive SBC amongst national research boards, local universities, and global health partnerships.

Document and share results, best practices, and lessons learned. Projects aimed at improving nutrition outcomes and gender equity during the 1,000 day window are encouraged to document and share success, failures, and lessons learned internally and externally inspire changes in approaches and deeper understanding of local gender issues and responses.

Highlighted Resources and Tools **See page 8 for more**

[Tool kit on gender equality results and indicators \(2013\)^v](#)

[Guidance on methodologies for researching gender influences on child survival, health and nutrition \(2011\)^{vi}](#)

Gender Mainstreaming

Gender mainstreaming is the process of incorporating a gender perspective into organizational policies, strategies, and administrative functions, as well as into the organization's institutional culture. Improving gender equality at an organizational level strengthens the impact of gender-sensitive SBC programming. While a range of actions are required, two are highlighted below.

Critical Actions and Best Practices

Leadership is supportive of and committed to gender issues. Gender mainstreaming needs to be prioritized by organizational leadership and given the space required to be effective. Gender strategies, policies, and tools should be communicated effectively to all staff.



In addition to leading gender integration across project activities, the gender point of contact should be a core member of the project implementation team.

Consider gender issues in the hiring process and workplace. Gender roles and norms influence workers' positions, work conditions and terms, performance and opportunities. Organizational and project leaders should recognize how gender influences education and the workplace to recruit and retain the robust workforce needed to improve nutrition outcomes.

Build capacity of all staff to address gender. Staff need to understand the principles of gender integration in projects (e.g., conduct gender analyses, collect and analyze sex-disaggregated data) and to critically reflect on the impact of gender on their own lives.



Regular fieldwork should be conducted to understand gender realities and findings need to be shared with all staff to inform program planning and implementation.

Highlighted Resources and Tools **See page 8 for more**

Pursuing gender equality inside and out: gender mainstreaming in international development organizations (2015)^{vii}

The gender audit handbook: A tool for organizational self-assessment and transformation (2010)^{viii}



Authors: Megan Ivankovich, MPH (WI-HER LLC), Taroub Harb Faramand, MD, MPH (WI-HER LLC)

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For more information, including a complete list of references, please see “**Enhancing Nutrition and Food Security during the First 1,000 Days through Gender-sensitive Social and Behavior Change: A Technical Resource Guide**,” available at www.coregroup.org/GenderSBC and www.fsnnetwork.org/GenderSBC.

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RESOURCES AND TOOLS

Overarching Guidance

- **Improving nutrition through multisectoral approaches.** The World Bank (2013).^{ix}
- **IGWG gender and health toolkit.** IGWG (2012).^x
- **Engendering transformational change: Save the Children gender equality program guidance & toolkit.** Save the Children (2014).^{xi}
- **Integrating gender throughout a project's life cycle: A guidance document for international development organizations and practitioners 2.0.** Land O'Lakes (2015).^{xii}
- **Integrating gender in improvement activities: Implementation guide.** WI-HER/URC (2012).^{xiii}
- **ADS chapter 205: Integrating gender equality and female empowerment in USAID's program cycle.** USAID (2013).^{xiv}

Planning

- **Gender mainstreaming for health managers: A practical approach (Facilitators' guide and Participant's notes).** World Health Organization (2011).^{xv}
- **A practical guide for managing and conducting gender assessments in the health sector.** USAID/IGWG (2013).^{xvi}
- **Gender analysis, assessment and audit manual & toolkit.** ACDI/VOCA (2012).^{xvii}
- **CARE gender toolkit.** CARE.^{xviii}
- **Designing for behavior change: For agriculture, natural resource management, and gender.** CORE Group (2014).^{xix}

Implementation

- **Nurturing connections: A participatory approach to gender and nutrition.** HKI Bangladesh (2012). Contact Ramona Ridolfi (rridolfi@hki.org) for more information.
- **Gender model family manual for community workers.** SEND West Africa (2013).^{xx}
- **Guidelines for implementing Nutrition Impact & Positive Practice (NIPP) Circles.** GOAL Ireland (2013). Contact Hatty Barthorp (hbarthorp@goal.ie) or Sinead O'Mahony (somahony@goal.ie) for more information.
- **Gender-specific approaches, rural institutions and technological innovations.** IFPRI/FAO (2014).^{xxi}
- **Violence, gender & WASH: A practitioner's toolkit.** SHARE (2014).^{xxii}
- **Engaging grandmothers to improve nutrition: A training manual for dialogue group mentors.** USAID/IYCN (2011).^{xxiii}
- **The integration of nutrition within Extension and Advisory Services (EAS): A synthesis of experiences, lessons, and recommendations.** GFRAS (2013).^{xxiv}

Evaluation

- **M&E of gender and health programs.** MEASURE Evaluation (2014).^{xxv}
- **Tool kit on gender equality results and indicators.** Asian Development Bank/Australian Aid (2013).^{xxvi}
- **Gender-sensitive evaluation and monitoring best and promising practices in engendering evaluations.** USAID (2014).^{xxvii}
- **Guidance on methodologies for researching gender influences on child survival, health and nutrition.** United Nations Children's Fund (UNICEF) (2011).^{xxviii}
- **Gender and health data and statistics: An annotated resource guide.** MEASURE Evaluation (2011).^{xxix}
- **Compendium of gender scales.** C-Change (2011).^{xxx}
- **Women's Empowerment in Agriculture Index (WEAI).** IFPRI (2012).^{xxxi}

Gender Mainstreaming

- **Pursuing gender equality inside and out: gender mainstreaming in international development organizations.** PRB (2015).^{xxxii}
- **The gender audit handbook: A tool for organizational self-assessment and transformation.** InterAction (2010).^{xxxiii}
- **IASC gender marker tip sheet.** IASC. (2011).^{xxxiv}

Reference Documents

- **USAID gender equality and female empowerment policy.** USAID (2012).^{xxxv}
- **USAID multisectoral nutrition strategy.** USAID (2014).^{xxxvi}
- **World Development Report 2012: Gender equality and development.** World Bank (2012).^{xxxvii}
- **Agriculture, nutrition and health essentials for non-specialist development professionals.** IFPRI (2011).^{xxxviii}

ENDNOTES

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