Women's empowerment and nutrition: what does the evidence tell us?

Many development programmes focus on women’s empowerment as a way to achieve gender equality and achieve other important development outcomes such as improvements in health, education, and nutrition. While “empowerment” can broadly be defined as increased agency or the ability to make strategic life choices, it of course takes on different meanings depending on context. Hence, ways in which women’s empowerment is measured varies considerably.

Several studies have found positive associations between improvements in measures of women’s empowerment and improvements in nutrition outcomes (e.g. reduced stunting), as well as associations between measures of women’s disempowerment and adverse nutritional outcomes. Despite this, there is limited evidence of the impact of several types of programmes – cash transfers, agricultural interventions, and microfinance programmes – on nutrition outcomes.

Qualitative evidence of the impact of conditional cash transfer programmes (CCTs) on women’s empowerment is generally positive, although quantitative findings are mixed. CCTs generally seem to have positive impacts on health and nutrition-related behaviours but impacts on health and nutrition outcomes are mixed with very limited evidence of impact on micronutrient status. Reviews of such studies find no statistically significant impact of CCTs on child anthropometry. For unconditional cash transfers (UCTs), the little evidence available shows mixed impacts on measures of women’s empowerment, limited impacts on health and nutrition-related behaviours, and generally positive but limited impacts on final outcomes. However, there is not much difference between conditional and unconditional cash transfer programmes in terms of their impact on child stunting.

Evidence of impact of agricultural programmes – primarily home gardening and animal production – is limited. Mixed impacts are found on women’s income and control over this income, as well as on women’s time and work load. In general, projects with a nutrition education component have positive impacts on health and nutrition-related behaviours. Recent reviews have however found very little evidence of the impact on final

While nutrition outcomes are often measured, effects on women’s empowerment are not always evaluated.
health and nutrition outcomes, with the exception of vitamin A status.

Microfinance programmes’ (primarily microcredit) impact on women’s empowerment is mixed and controversial; more recent systematic reviews find little effect on empowerment measures, and mixed findings on health and nutrition-related behaviours. Evidence of impact on nutrition outcomes is mixed and there is no evidence of impact on micronutrient status.

Based on this evidence, it is almost impossible to draw firm conclusions on the impacts of these three types of interventions on women’s empowerment, health- and nutrition-related behaviours, final health and nutrition outcomes, or on any ‘pathways’ of impact (evidence of which, for all types of interventions, is nearly entirely absent). Overall, evidence of impact on behaviors is stronger than evidence of impacts on final outcomes; while interventions that aim to empower women generally enable them to make better choices that often result in changes in knowledge and behavior, other intermediating factors (e.g. quality of health services or poor sanitation) may dilute the impact of empowerment interventions on final outcomes. Further, the short time frame of most impact evaluations often precludes the measurement of impacts that unfold over a longer time period. Hence, there is considerable scope for further research on ‘pathways of impact’, and on the various conditions that can influence programme impacts such as implementation modality, sex of the beneficiary, and access to, availability of, and quality of services.

**Recommendations**

1. Carry out thorough gender analyses to
   i) understand power relations that shape societal structures in which women and men live and work, ii) understand women’s and men’s roles in different contexts, their respective risks and vulnerabilities, and their differential access and control over various types of capital, iii) understand potential pathways of project impact, distinguishing between short-term and long-term impacts; iv) examine cultural, non-programme constraints to achieving women’s empowerment, improved nutrition outcomes, or both v) inform the design, implementation, monitoring, evaluation and communication of programmes related to health, nutrition, agriculture, microfinance and social protection.

2. Expand research on the impact of cash transfers on women’s empowerment and nutrition to Africa South of the Sahara and to Asia; expand research on microfinance and financial services beyond Bangladesh to other Asian contexts as well as other non-Asian developing countries.

3. Carry out further research on what is driving programme impacts e.g. how important is conditionality? How important is the sex of the beneficiary? How important is quality of service delivery? How important is implementation modality?

4. Conduct further research on the impact of agricultural interventions on nutrition outcomes (anthropometry and micronutrient status) and examine pathways of impact.

5. Conduct further research not only on microfinance, but also a range of financial services such as savings and micro health insurance that will allow poor women and men to save, build up assets, and better manage risk.

6. Strengthen researcher capacity to carry out gender analyses and collect and analyse sex-disaggregated data.

**Further reading**


**Credits**

This research brief was written by Mara van den Bold. It is based on an evidence review commissioned by Transform Nutrition and authored by Mara van den Bold, Agnes Quisumbing, and Stuart Gillespie (International Food Policy Research Institute).