GENDER ASSESSMENT

July 2012
MALI GENDER ASSESSMENT – AN INTRODUCTORY NOTE

The research for this report was completed in February 2012, before the Coup. As such, we have not incorporated any of the events that have taken place after the Coup, although we are aware that many of the issues discussed in the report have been overtaken by the political situation the country is embroiled in.

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EXECUTIVE SUMMARY

After completing the gender assessment that will inform USAID/Mali’s efforts in the elaboration of their Country Development Cooperation Strategy (CDCS), there are a series of issues that, although will be evident throughout the report, we want to highlight here.

Being cognizant of these issues will facilitate, we hope, an approach that will consider the opportunities as well as the difficulties prevalent in Malian society, and that will lead to a successful development of the programs envisioned through the four development objectives (DOs). This in turn will assure that through USAID’s programming, the discrepancies and inequities encountered because of gender inequalities, will be overcome and will lead to a more just society for all, which will reap benefits for both Malian men and women.

• Mali’s cultural and ethnic norms weigh heavily against women. This coupled with poverty, especially in rural areas, determines the low indices recorded for women.

• Women have very limited capacity to make decisions or act independently. They have limited voice or agency.

• Many of the cultural practices that women are subjected to are harmful and threaten their well-being. Female Genital Mutilation (FGM) and early marriage are among these, as well as domestic violence and other forms of Gender-Based Violence (GBV).

• Rural women are extremely overworked. Women spend 7 to 8 hours on domestic chores, apart from the time they spend working in the fields.

• The majority of women who work in agriculture are not remunerated for their labor. 77% of women farmers declared in a government survey that they have never received wages for their labor.

• Women’s lack of agency contributes to the high fertility rates, and maternal and infant mortality.

• There is a strong correlation between women’s level of education and the drop in fertility rates, the increased well-being of children and many other indices of development.

• Every effort should be made to provide literacy training to women through the different programs the Mission supports.

• Along with literacy, training in entrepreneurship and in other areas that will promote their sense of empowerment and leadership should be undertaken.

• Men should be enlisted as partners that recognize women’s contributions and provide them support.

USAID/Mali has had programs in the past that have achieved high levels of success in increasing women’s agency and leadership. These programs should be emulated and replicated.
Recommendations:

DO1: Accelerated Economic Growth Sector
- Conduct a gender assessment of the value chains that will be selected.
- Provide different types of training, starting from the most basic literacy and numeracy, through leadership training and different types of entrepreneurship training.
- Help women negotiate access to land and to productive assets.
- Explore different types of credit: partnerships with banks and processors, lines of credit, leasing.

DO2: Sustained Improvements in health through increased utilization of high impact services and healthy behaviors
- Integrate advocacy messaging against FGM and girl’s early marriage in all health related programs.
- Promote men’s involvement in behavioral changes at household and community level.
- Customize health-childcare-practices messaging for primary caregivers such as grandmothers and housemaids.
- Perform gender audits of health facilities targeted for quality reinforcement.

DO3: Education Development Objective
- Ensure translations of curriculum into maternal languages do not reinforce gender-based stereotypes.
- Promote gender-friendly messaging and curriculum broadcasted in USAID-funded radio programs.
- Promote equitable gender participation in school management committees.
- Ensure that all efforts related to education include the curtailment of GBV and sexual harassment of students.

DO4: Governance/Communications Development Objective
- Promote gender budgeting in the communes.
- Introduce trainings/capacity building activities to help bring women civil servant leaders up to scale.
- Include national gender policies and rights sensitization in trainings and capacity assistance for civil society.
- Ensure gender-sensitive processes for selecting small-scale infrastructure projects in community action plans.
- Ensure that small-scale infrastructure projects benefit women and not increase their home labor requirements.
GENDER ASSESSMENT FOR MALI

Introduction
In preparation for writing their Country Development Cooperation Strategies (CDCS), USAID/Mali requested the completion of a gender assessment to inform their new strategy and comply with ADS requirements. A CDCS is a forward looking document that will take into consideration input from other USG agencies, host-country governments, other donors, the private sector, and local civil society stakeholders. The aim of the CDCS is to ensure that USAID resources follow a strategic vision, critical development goals are achieved and needs are met in the most efficient manner.

CURRENT GENDER SITUATION IN MALI

Mali is a vast country of 1.2 million square kilometers. However, much of the population of 14.5 million is concentrated in the south due to desert conditions covering two-thirds of the land area. Almost half of the population is under the age of 15 (48.6%) and slightly more than half (50.4%) are women. The average annual population growth is 3.6%. Despite good macroeconomic indicators (e.g., GDP growth rate of 4.5%), living standards are low. Less than half the working-age population is employed in the formal sector (45.1%), slightly lower in the rural sector (44.5%). Forty four percent of the Malian population is considered poor, with 33% of urban residents and 53.2% of rural ones falling within this category.

The Human Development Index (HDI), which takes into account income, life expectancy at birth, the rate of adult literacy and school enrollment, ranks Mali 175 of 187 countries, and the Gender Inequality Index (GII) ranks Mali is 143 of 146 countries. The GII draws attention to major deficits in human development due to gender inequality. While Mali has made some improvements, it is believed that it will not reach the Millennium Development Goal on gender equality and women’s empowerment (MDG 3) by 2015.

Many issues contribute to the low scores on the gender and human indices. While Mali exhibits examples of modernity, much of the country is still very much focused on traditional values and practices that impact on gender equality. The mix between modern and conventional practices provides a context of ambiguity where women and men have increasing access to international standards for living conditions, knowledge acquisition and participation in public life, yet live in a society centered in traditional cultural norms and practices. These practices include female genital mutilation, early marriage, polygamy, unequal division of domestic labor between women/girls and men/boys, and unbalanced roles in the production of food and commodities. Mali’s patriarchal system ensures men the permanent status of family head, and gives legitimacy to unequal access to resources and the exercise of power. Hence, key gender disparities include unequal access to financial resources, very limited capacity for women to engage in decision-making in families, low level of female leadership within state structures, and prominent representation of men in elective institutions.

Government Commitment toward Gender Equality
Since the change of political regime in 1991, Mali has made some positive changes towards creating a more democratic nation and establishing women’s rights. Women’s empowerment
has become a critical issue throughout these past two decades. Discriminatory statements regarding women and girls were removed from the national legislation, and the Ministry for the Promotion of Women, Children and the Family (MPFEF) was created in 1997 to be the main State institution responsible for women’s empowerment and gender equality. The Ministry has a dual mission: to act as a catalyst/coordinator for gender-responsive actions in all the other ministries; and to implement programs focused on women's strategic interests such as the fight against domestic violence and female genital mutilation.

In November 2010, the National Policy for Gender Equality (PNG) was adopted. The policy and its action plan are based on seven guiding principles and six strategic directions which are: (1) equal rights for women and men, (2) development of human capital (for women and men), (3) the integration of women into productive channels, (4) equal participation of women and men in the spheres of decision, (5) establishing the values and egalitarian behavior in Malian society, and (6) the inclusion of man-woman equality as a guiding principle of good governance. The MPFEF is responsible for the monitoring of the PNG. The ‘Gender and Development Thematic Group’ (GT/GED), established by the donor community to facilitate dialogue between the Malian government, development partners and civil society, have provided the necessary means for the elaboration of the PNG and will support its implementation. They have also provided technical assistance in developing the next generation of Mali umbrella programs of poverty reduction (CSCRP), to ensure effective implementation of gender integration in sectoral policies and programs.

Mali is not outdone in international commitments. It has ratified most treaties and conventions and has signed major declarations issued by the International Community. Mali has ratified CEDAW in 1986, the Protocol to the African Charter on Human and Peoples' Rights regarding the Rights of Women in Africa in 2004, and was among the first countries to ratify the Convention on Children’s rights in 1990.

Yet, the National Assembly’s adoption of the new Family Code in 2011 illustrates the immense challenges of turning international rhetoric into public practice. The new ‘Code du Mariage et de la Tutelle’ which was adopted December 2, 2011, supplants the original 1962 Code, after the rejection of an earlier version of August 2009. The 2009 version included raising the minimum age of marriage for girls, improving women’s inheritance and property rights and removing the clause demanding a wife’s obedience to her husband. Although the Code was adopted, it was later withdrawn following an uproar from conservative Muslim groups. The reforms to the 1962 Code were taken in the spirit of further reducing gender inequalities and harmonizing domestic laws with international and regional conventions ratified by Mali. Unfortunately, rights that were previously granted have been lost in the new 2011 Code, such as a woman being able to keep her children if her husband dies instead of having a family counsel decide. Another issue enshrined in the 2009 Code but rescinded later was the issue of only recognizing marriages performed by secular authorities. In fact, some people have described this 2011 Code as a 50 year setback. Human rights advocates and many civil society organizations expressed their disappointment in the new law, perceiving it as discriminatory and regressive and legitimizing gender inequalities.

Education
Access to education has improved in the last five years in Mali. In fact there has been a 14% net growth with Gross Enrolment Rates increasing from 74% in 2005 to 83% in 2010\textsuperscript{12}. While there have been notable gains in overall enrollment levels and steps made to decrease the disparity between males and females, there are still considerable gaps between literacy levels and enrollment rates for males and females, especially in rural areas. For example, net enrollment of females in 2010 was only 57% compared to 71% of males.\textsuperscript{13} Also, females are almost twice as likely as males to dropout of primary school (7.2% of females and 3.9% males enrolled in 2010 did not finish the school year)\textsuperscript{14}. In addition to high attrition rates, Mali is also struggling with providing quality education. This is evidenced by the fact that only 23% of boys and 10% of girls can read a simple French sentence by the end of grade four\textsuperscript{15}. This suggests that the education system may not be adequately equipping students with the skills they need to contribute to Mali’s development. The youth bulge in Mali and high population growth rate are expected to further impact the education system, creating additional demand on an already stretched system.

Despite the challenges, the Government of Mali has declared education a priority and devotes over 30% of the national budget to education.\textsuperscript{16} The Government and Ministry of Education have also developed policies to address the gender disparity. For example, there is a National Policy for Girls’ Education, with an ambitious action plan and an active Education Sector Working Group, in which USAID/Mali participates. In the 2012-2017 National Development Strategy, Mali identifies universal education and reducing disparities between males and females and urban and rural students as priorities. According to the Ministry of Education statistics, the male/female teacher ratio is estimated to about 29%.

Health

Life expectancy at birth is 51.4 years with a slight advantage for women (50.9 years) compared to men (49.5 years). There are still high rates of both infant mortality (96 per thousand live births) and maternal mortality (464 deaths per 100,000 live births).\textsuperscript{17} Mali is at the very beginning of its demographic transition. While the mortality rate has declined steadily since the early 1960, the fertility rate has shown only a slight decrease. Indeed, the fertility rate for the whole country decreased from 7.1 children per woman of childbearing age in 1960-1961 to 6.6 children in 2006: a decrease of 0.5 children in over forty years. During the same period, the fertility rate in Africa has decreased from 6.9 to 4.7 children, a reduction of more than two children\textsuperscript{18}.

Health issues facing Malian women are overwhelming due both to diseases and socially induced health problems. The access to health care is limited because of mobility constraints and very low economic power. With regards to reproductive health, high fertility and maternal mortality rate, as well as low use of contraception are more related to women’s human rights and social status than poor access to health services. The norms of marriage in Mali do not provide equal rights within the couple. Wives are under permanent guardianship with the duty to obey their husband and elderly members of the family. Conflicts among couples or intergenerational misunderstandings are managed on this basis, leaving the family in charge of women’s reproductive choices and sexual behavior. Indeed, childbearing, contraception use, access to family resources and important decisions-making are hardly a woman’s choice. The prevalent
norm is to consult women during decision-making, but not to give them any autonomy to decide. Traditional practices which are harmful to women’s health are evidence to this status-quo.

**Early Marriage**

Almost two-thirds (61%) of women aged 20-49 years were married or lived as such before the age of 18. This attests to the high prevalence of early marriage in Mali, more pronounced among the poorest households (70%) than those who are richer (41%)\(^\text{19}\). National law rules that women can be married as early as 15 years old, while men must be 18 years old to marry. Several health problems may be linked to the practice of early marriage, widely spread among some ethnic groups in Mali. Through early marriage, girls’ undeveloped bodies and reproductive organs take a heavy toll, particularly during pregnancy and childbearing. High maternal and infant mortality rates among this subgroup of women are based on evidences from South Asia and some other parts of Africa, but are yet to be documented in Mali. However, a study in Northern Mali has shown links between this practice and obstetrical-fistulae, and psychological problems experienced by young brides and mothers.\(^\text{20}\)

**Female Genital Mutilation/Cutting**

Female Genital Mutilation (FGM) consists of the partial or total removal of the clitoris, and other cutting in the female genitalia, for reasons other than medical. In Mali, it is reported that 85% of women of reproductive age (15-49 years) have been excised\(^\text{21}\). Many Malians still view FGM as a necessary ritual for young girls in the name of self-preservation, safe sexual life and healthy families.

Starting in the 1990s, the Malian Government in partnership with several women’s organizations has reinforced the on-going advocacy against the harmful practice of FGM. In 2002, the Government established ‘the National Program to Fight the Practice of Excision’ (PNLE), which serves as a platform of actions for all stakeholders throughout the country. Focal points and local Action Committees have been installed as part of this national program.

Mali has not yet legislated on the prohibition of FGM like some neighboring countries. However, advocacy instruments exist against the practice such as the circular letter sent out in 1999 by the Ministry of Health to ban the practice of FGM in medical facilities. Another powerful tool is the law regarding reproductive health which includes provisions that can be used to condemn the practice of FGM. In November 2010, the country adopted a National Policy for the Permanent Eradication of FGM, and designed an action plan for 2010-2014. At the community level, protocols of agreement are being signed with local stakeholders in the fight against FGM, with 400 villages having agreed to abandon the practice.

For years, FGM was presented as a "women's business". With changing perception of the practice as a societal problem that affects the couple and involves fathers, men have become both objects and actors in advocacy interventions. For example, the *Association pour le Progres et la Defense des Droits des Femmes Malienennes* (APDF) has successfully established ‘Goodwill Male Ambassadors’, caravans of young people (girls and boys) and mixed peer educators at the community level for advocacy against FGM. The use of international instruments protecting human rights, and especially those that target women and children specifically, have been
successful in establishing links between FGM and the broader objective of reducing gender inequalities in Mali.

**Gender-Based-Violence (GBV)**

GBV includes rape, sexual harassment, physical and sexual abuse among married couples, verbal abuse, prohibitions of economic activities, among others. All of these behaviors are harmful and many stem from cultural norms and values, such as excision, forced and/or early marriage, nutritional taboos, excess feeding of women, widowhood and remarriage, and religious sequestration.  

An analysis of the 2006 DHS data shows that among women interviewed for this study, many believe that a man has the right to beat his wife (or partner) when she leaves home without his permission (60 %) or if she neglects the children (52 %). A relatively high percentage of those women agree that there physical abuse is acceptable when wives burn food (23 %), stand up to their husbands (49 %) or if they refuse to have sex with the husband (57 %). These results attest to Mali’s tolerance of gender-based violence, especially among women. It reveals a sense of normalcy in the acceptance of domestic violence, including marital rape.

At present, there is no legislation regarding violence against women in Mali. However, existing legal instruments provide, to some extent, opportunities for judicial actions. For instance, the Penal Code defines sanctions against a multitude of offenses detrimental to the integrity of the person. There is evidence that women are taking legal action for abuses such as assault and rape. Unfortunately, rationalization of these acts as well as social pressure on women victims of domestic violence explain the widespread impunity that perpetrators of such crimes experience in Mali. Many NGOs, particularly those headed by women, are making tremendous efforts to make women aware of their rights and to encourage them to report instances of violence.

**Gender issues in the fight against HIV / AIDS**

It is well established that HIV/AIDS strikes more women than men in Africa, and that access to care and support are serious problems for them. The sustained efforts of the authorities and donors have reduced the overall prevalence rate in Mali from 1.7 in 2001 to 1.3% in 2006. The prevalence among women (1.5 %) is higher than for men (1.1 %). The same report emphasizes that gender inequalities in the country increase the risk of spread of HIV / AIDS because of women’s low status and their exclusion from decision-making, which does not allow them to negotiate the use of condoms by their sexual partners. Stigma also strikes women harder than men, with more disastrous consequences, such as accusations of promiscuity, divorce, difficulties of access to care, among others.

Following the various awareness campaigns in the media by the HCNLS/SE, 91 % of women reported having ever heard of AIDS, although among women aged 15-24 only 15 % have a thorough knowledge of prevention and 55 % correctly identify three modes of transmission of the disease from mother to child. These young women are at great risk since a high proportion of them (68 %) have already had sex, 15 % of which had had sex with casual partners and less than 1 % reported using a condom during intercourse.

**Rural women, Agricultural Employment and Land Tenure Issues**
Malian women play a major role in agricultural production, and are responsible for subsistence farming while men participate in both subsistence and commercial agriculture. In terms of the provision of labor, women and men work side by side in almost all the agricultural tasks on the land, while men take on the role of marketing the production and engaging in the commercial part of it. For Malian women, their access to resources and control of the same is mediated through men, either their fathers or husbands, and their agricultural contribution goes largely unrecognized. Even when women have access to assets, they rarely have control over them.

Women make up 38.4% of the economic active population (EAP) in Mali, and of these, 74% are in the agriculture sector. However, these figures are misleading because the definition of EAP includes paid labor, and the Profil Genre of the African Development Bank documents a study in which 77% of rural women working in agriculture declared that they have never received any remuneration.

All sorts of issues mediate against women farmers in Mali. Life for both men and women smallholder farmers is wrought with hardships and poverty. Credit to rural people is almost unavailable and the land tenure system is complicated and oftentimes arbitrary. Most of the land is owned by the government, and in the traditional system of land use, men are more likely to have access to land than women. Their lack of access to land, credit, and other important resources, along with the cultural and traditional issues that preclude them from making decisions or controlling productive resources, hamper their performance in agricultural production.

The Agricultural Law of 2006 (loi d’O’rientation Agricole) takes a strong approach to gender equity, food sovereignty and support for small-scale farming. But enforcement appears to be quite weak and in one study, the majority of the communities surveyed were not even aware of its existence. And, the National Plan of Priority Investment in the Sector of Agriculture (PNIP-SA), following the Agricultural Law, emphasizes certain value chains such as milk and fish where women dominate in all stages of production. Through the value chain approach, it emphasizes the improvement of productivity of non-agricultural activities such as retail trade and processing where women are strongly involved.

A major determinant of gender disparity is lack of access to land. Traditionally, women cannot own land in Mali. They can cultivate or use land temporarily, but land can be taken back from them at any time. This discourages women from investing in land improvements. The President of Mali had recently promised that 10% of state-improved (irrigated) lands would be allocated to women and youth, and the Profil Genre de la Republique du Mali affirms that the situation is improving because in 2008-2009 about 20% of rural women had access to land, an increase of 1.3% from 2007. Women often form associations and request that community land or land owned by a specific owner be allocated to them for their collective use. Although this is a good stratagem, it does not assure them that the land will remain in their possession.

Lack of access to credit is also a major constraint in women’s success in their agricultural pursuits, since it hampers their capacity to purchase the necessary inputs and services. According to the Ministry of Women, women’s access to agricultural sector credit stood at 12% of total credit allocated.
To summarize, rural women engage in activities that have low barriers to entry but are also of low profitability. Women face different and more basic constraints than men, linked to issues such as access to water, access to credit and low demand for their product. In contrast, men are concerned about constraints associated with more sophisticated activities, such as transport costs, road suitability, access to markets and inputs, and market information.

Politics and Governance
Past Malian presidential and parliamentary elections and the upcoming presidential election illustrate Mali’s adherence to a multi-party democracy and the maturity of Mali’s political system. However, there is still a gender divide in voter turn-out and on who gets elected. Representation of women in key positions and elective office are major issues. Women represent only 10% of those positions in Parliament and 21% of Ministerial positions, and make-up a small fraction of political party leadership. Furthermore, the number of women in political positions has not changed since 2008, suggesting parties have been unsuccessful or uninterested in expanding female participation. Despite the clear absence of women in senior political leadership, there are a number of women’s associations and civil society groups that focus on elevating the status of women in Mali, the largest is the Islamic *Union Nationale des Femmes de Mali* (UNFM).

Like many other countries in the region, Mali is taking steps to decentralize financial and administrative power to the regional and commune level. But, it was not until June 2002 that health, education and water services were transferred to the communes by presidential decree. According to the *2010 Desk Study on Decentralization in Mali*, “community involvement remains too limited while a small number of individuals tend to take charge, which occasionally results in corrupt behavior.” The lack of transparency and inclusiveness in the process of decision making at the local level has continued to sideline women’s participation in the governmental process.

The decentralization process is hampered by the low capacity level of local officials. The overall low literacy rates in the country apply to local government and leaders as well, meaning it can be difficult to find fully literate staff. In many cases, the local leaders and elected officials themselves are not fully literate. Sometimes, the literacy level of councilors is so low that their capacity to perform basic administrative tasks is limited. This has a significant effect on rural populations which have lower levels of literacy (while in urban areas, 35% of women and 61% of men are literate, in rural areas only 8% of women and 26% of men are literate) and on rural women who are further disadvantaged.

Civil Society
While local government has been plagued with challenges, Mali’s civil society remains one of West Africa’s success stories. The civil society is not only active, but visible across the country and across economic and class divides, with groups ranging from village associations to organizations that operate across the country and major international NGOs. There has been an especially strong effort by the government and the donor community to develop and support women’s associations that have been able to network and work together to access financial assistance, lobby for rights, and make their voices heard.
The international community, including USAID/Mali has been active in mobilizing civil society, especially women’s groups to participate in local government and financial decentralization decisions whenever possible. But often these groups are hampered by low literacy levels.

Peace and Security Issues

Fighting in the North

The violence and insecurity in northern Mali is rooted in a web of socioeconomic, political and cultural factors. Longstanding perceptions of political and economic marginalization, tribal and ethnic divisions and a weak state have contributed to an insecure situation. Recent fighting between Tuareg rebels and the Malian military has resulted in over 12,000 northern Malians fleeing their homelands, pushing into neighboring countries that lack the infrastructure to support them and respond to the growing population needs. The refugee situation has also led to community-level conflict due to people fleeing and then returning to discover that new people have settled on or are using their homes and land.

Drought

In addition to the political insecurity, northern Mali is currently experiencing a drought that has severely impacted herding pastoralists that support one of the main economic activities in the north. Women in the three most northern regions, Tombouctou, Gao and Kidal, have suffered particularly from the water shortage, since it is their responsibility to fetch water. The current drought has forced women to devote more time and energy to water collection. The lack of infrastructure and subsequent drought in the north is an additional burden to women who must devote more time to locating and fetching water and also have less water for personal use.

GENDER ASSESSMENT OF THE CDCS

DO 1. Inclusive Agriculture Sector Growth in Targeted Areas.

Development Hypothesis: Improving agricultural productivity, expanding markets and trade, and increasing household resilience will increase agricultural production, leading to higher incomes, employment, and improved food security for producers and communities in targeted regions.

- IR1 Improved Agriculture Productivity
- IR2 Expanded Markets and Trade
- IR3 Increased Resilience of Vulnerable Households

DO1 answers to the US President’s Initiative to Feed the Future (FtF) that aims to transform agriculture and respond to the nutritional deficiencies found around the world. It also responds to the National Plan of Priority Investment in the Sector of Agriculture (PNIP-SA) of Mali - 2011-2015 that prioritizes agricultural development and sets the steps and parameters to achieve a rate of growth of 6% in the Agriculture Sector by 2015.35
FTF is at its core an agriculture strategy for both market oriented production and a sustainable small-holder subsistence farming program for small farmers in more challenging environments. USAID will invest strategically to achieve measurable and sustainable outcomes in three agricultural value chains and in children’s nutrition levels in three regions of Mali. The Mali FtF Strategy proposes three interlinked focus areas that 1) will drive agricultural productivity through a value chain approach; 2) will promote the expansions of markets and trade by promoting Malian exports as well as by reducing barriers for needed imports, and establishing a market information system; and 3) will increase resilience of vulnerable households. The Economic Growth and Agriculture team will integrate into their programming areas covered under Food for Peace, Global Climate Change and Natural Resource Concerns, as well as efforts of Private Sector Development and coordination between the Private and Public sectors.

IR1 Improved Agricultural Productivity.
To improve agricultural productivity the team will engage in a more efficient use of productive resources and the adoption of technology in working on a value chain approach. Synergy will be achieved by working in areas where other USAID programs are concentrated. In support of the GOM agricultural priorities, and after broad consultations sorghum-millet, rice and livestock were selected as well as the geographic areas of Sikasso, Mopti and Timbuktu, in which 3.15 million people live. Specific reasons for selection include:

*Millet and sorghum for food security and poverty reduction.* Intensifying production of this crop grown by 75% of Mali’s farmers will increase household security and buffer climatic changes while increasing the supply of this important staple for some of Mali’s most vulnerable. Working with entrepreneurs to build on growing urban demand for high quality processed products and livestock feed will further generate income across the economic spectrum.

*Rice for growth in household incomes and food security.* Better water management, storage and uptake of improved technologies in smallholder rice production systems, combined with adopting voluntary quality standards and private sector investments, will increase food supply and incomes at the local level, substitute for expensive imports, and potentially spur regional exports.

*Livestock for growth in household incomes, nutrition and for national GDP growth.* Improving livestock nutrition and health through expanded access to watering points and more sustainable pasture management will increase the potential off-take rate and household incomes, while indirectly contributing to an increase in milk production. Women will enhance their opportunities to benefit from small-scale dairy activities and increase the availability of animal products.

IR2 Expanded Markets and Trade
USAID/Mali will improve the enabling environment for agricultural growth, food security, and nutrition by empowering selected public and private institutions at the commune and national level to plan, develop, implement and monitor agricultural and food security strategies. Efforts will also include improvement of infrastructure and strengthening of an enabling environment for the modernization of the marketing systems.

IR3 Increased Resilience of Vulnerable Households
USAID/Mali recognized that farmers must adopt climate change adaptations and natural resource management methods in order to mitigate risks to Mali’s agricultural production and natural resource base, and in order to maintain incomes and sustain agricultural growth. Rural
households must be resilient to economic and food security shocks in order to be economically productive and to take risks in growing the investment in their farms. USAID also supports the GOM 10 year health strategy (PRODESS)\textsuperscript{36} which promotes nutrition as an elevated cross-cutting issue and supports fortification policies for staple foods and supplements.

**Comments and Recommendations regarding DO 1**

In a meeting of the U. N. Economic and Social Council, in which the FTF was presented, the **economic empowerment of rural women** was highlighted as one of the FTF’s principal objectives. “The Initiative acknowledges that reducing gender inequality is an important contributor to eradicating global hunger and recognizes the fundamental role that women play in achieving food security. These include women’s access to and control over agricultural assets and how that impacts upon the agricultural value chain. And, it includes input into agricultural research; equal access to inputs and technology as agricultural producers; gender-appropriate extension packages and delivery; improved access to land and other productive natural assets; reduced gender barriers to financial services; and increased knowledge for men and women enabling them to participate in and obtain appropriate returns from the agricultural system.”\textsuperscript{37} In implementing FTF programs, it was proposed in the same meeting, that missions will strive to achieve these goals by improving the potential of farmers and agriculture entrepreneurs, especially of women farmer, to increase their income and well-being through increased agricultural production.

Rural women in Mali have an arduous working life and experience many constraints. By law, all land in Mali belongs to the State, but in practice land is managed by the village chiefs and customary chiefs. The belief among many village authorities is that land should be reserved for men, thus limiting women’s access.\textsuperscript{38} The GOM has a policy of allocating 10% of developed lands to “women and youth,” but often it is difficult for women to secure this right.\textsuperscript{39} Often, women try to access land through cooperatives and associations, in part feeling that by working with others they are somewhat protected. Most women working in agriculture do not get paid for their work. Although women work the land throughout their lives, 77% stated in a government survey that they did not receive any type of remuneration.\textsuperscript{40}

Rural women’s days are long and hard. In the sorghum-millet gender analysis,\textsuperscript{41} women’s and men’s chores in the field were very similar up to the time of moving the cereal from producer to consumer. Women tended to be concentrated in time-consuming processing steps such as hulling and grinding, and were absent from the stages of the value chain where the grain moves from production to consumption and cash payments are made. In a 2008 government survey on time utilization,\textsuperscript{42} it was reported that rural women spend about 29 hours per week on domestic activities, whereas rural men only spend about 2 hours per week on these activities. The report did not classify as domestic activities many such as processing agricultural and food products, and carrying water and wood, which would have added another 3.5 hours per day, or 24.5 hours per week of the work day of girls and women aged 15 to 49.

At the higher levels of the value chain, women face innumerable obstacles related to their lack of capacity to maneuver the systems, lack of knowledge of business practices and lack of networks to facilitate their actions at start-up. While 95% of processing for millet/sorghum is done by women as small processing activities, men control rice processing which is done on a large, more
professional scale. Women also face innumerable operational and financial constraints. For instance, women have difficulty accessing funds and permits for start-up, and Article 38 of the Code du mariage et de la tutelle forbids a woman from undertaking a commercial business without her husband’s authorization, and further asserts that a woman is not considered a trader when she participates in her husband’s business, but rather is only considered so when she exercises a separate business.43

Most of the issues that are encountered by rural women, especially those engaged in either subsistence or commercial farming have already been discussed throughout the relevant literature. 44 We know what the constraints are, but the solutions are not easy to achieve and will require time, patience, and resources. At the household level, women do the bulk of the work but have little say on the outcome of that work. Rural women are extremely time and resource poor. Apart from their agricultural work, they are also responsible for their families and households and often for work in the community. Any new activities, such as attending trainings or meetings will add to their time burden. In addition, gender dynamics in the household denote a power system in which the male is dominant and any change will be perceived as a threat to male power, often with dire consequences for women.

Regarding access to assets and economic opportunities, these are all interdependent, and impact on the capacity to achieve one or another. Thus, lack of access to land often means women cannot offer collateral for loans, join rural producer organizations, and therefore cannot take part in decision-making processes. For women transitioning from agricultural producers to higher levels in the value chain, the obstacles include accessing market information and obtaining support from networks such as marketing associations to facilitate their performance.

**Recommendations:**
The following are general recommendations that will improve women farmer’s lives

- Conduct a gender analysis of the value chains the program will be working with
- Strengthen women’s voice in household decision-making over expenditures and assets
- Strengthen women’s access to land and ownership of assets
- Ensure equitable membership policies for producer organizations
- Develop the capacity of rural producer organizations to represent women’s interests in the market and to allow them a voice in the organization
- Improve the available infrastructure and services, such as processing and storage facilities, transportation, information and communication technologies (ICTs), and facilities at retail and wholesale markets to meet women’s needs.
- Promote actions to reduce rural women’s workload and enhance their opportunities for remunerated employment and income.

Some of the challenges and constraints can be addressed through the provision of different types of training, extension services, schemes to allow women access to credit, to land and other productive assets, and through research.

**Training:** this can be from the most basic literacy and numeracy, to assertiveness and leadership training, and many types of entrepreneurship training. In promoting these, attention needs to be given to the length, timing and mobility issues when training is offered.
Recommend training includes:

**Literacy and numeracy training.** This is the most basic and critical of all training and it is needed by both men and women, but especially by women farmers since their illiteracy rates are higher than men’s. A successful example of a literacy program has been implemented by the IICEM project: Using a technique developed for rural populations by the National Directorship of Adult Literacy of the Ministry of Education, Mali’s flagship value chain program (IICEM) has supported the literacy training of women farmers in a host of communities involved in rice and millet-sorghum cultivation. The program, at a cost of $1,075 per village and $18 per student, takes 45 days, at the end of which participants can handle basic numeracy and literacy.

**Leadership training.** Women have to learn and practice speaking in public, participating in meetings, and articulating their views. They also have to learn to lead, especially so they can compete for positions on the boards of producer associations and so they can function at higher levels of the value chain. This type of training may be offered along with other more specific entrepreneurship trainings, but it is very important to help tear down some of the social barriers that have conditioned women, especially rural women, throughout their lives.

**Entrepreneurship training.** Encouraging the link between agriculture and business is critical to enable competitiveness. Both women and men farmers and agriculture entrepreneurs need a better understanding of contracts, standards, export processes and other business aspects. They also need to learn how to negotiate and how to interact in the business world. In many of these areas women are more greatly disadvantaged due to societal concerns, so special effort needs to be made to provide them opportunities to participate.

**Extension services:** Most of the extension services focus on male farmers. The extension worker will go to the head of the household; thus, women who often perform the planting, cultivating, and harvesting, do not receive key information. If women don’t know that information is available they will not ask for it; and because the primary outreach is to the male farmer women farmers remain in the dark. Men extension workers can work with women farmers but they have to be sensitized to the needs and the time limitations that women have. Funding should be provided for this sensitization training, and it should be repeated on a regular basis.

Other approaches to extension programs include:

- Have both men and women farmers attend sessions with the extension workers;
- Ensure that extension workers visits take place at times when women can attend;
- Encourage the availability of community agriculture extension volunteers and women extension workers;
- Encourage husband/wife teams as lead farmers that can work with other farmers in the community;
- Provide guidelines to extension workers about expectations regarding gender issues and monitor them to ensure they adhere to the guidelines;
- Promote the recruitment and retention of female extension workers.
Access to credit: Credit comes in many forms and with many different kinds of strings attached. The USAID programs should be vigilant in ensuring that the credit schemes they support are fair and the requirements to access them are within reach of their clients. Listed below are some of the types of credit and of lending modalities that can be made available to farmers and agricultural entrepreneurs:

- Linking village savings and loan associations with savings and credit cooperatives;
- Embedded services where buyers provide farmers with in-kind credit;
- Project-supported lines of credit from local banks and micro-finance institutions;
- Partnerships between banks and processors;
- Availability of new banking technologies, such as mobile banking;
- Availability of innovative financing, such as leasing arrangements;
- Assist women in opening bank accounts or insist on joint bank accounts; and
- Conduct a gender review of the financial sector, focusing on agricultural credit and finance, to establish the real situation regarding constraints in lending and potential alternatives.

Access to land and other productive assets:

- Do an analysis of land use in areas where programs will be based;
- Support programs to facilitate women’s access to machinery, farm tools, and other assets that they can handle and that will cut down on their labor.

Messaging
Messaging is an important avenue to reach farmers and get information disseminated. Messaging usually uses mass media. There are many studies that point out that women have very little access to the media. In rural areas, emphasis should be given to community groups, women’s groups, community and traditional chiefs, and other local means such as community radio. Teachers and healthcare workers, as well as extension agents are other avenues for disseminating messages.

Research:

- Women need income-generating, labor-saving and productivity-increasing technologies;
- Women perform an important role in seed selection, land preparation, dairy production and marketing, small ruminant husbandry, poultry management, and other aspects of good farming. Research should capture women’s local knowledge in the management of gene flows, the production and storage of food, and in the use and conservation of biodiversity;
- Provide scholarships and fellowships for women scientists (such as the African Women in Agricultural Research and Development (AWARD) program, funded by the Bill and Melinda Gates Foundation and USAID);
- Include women in research trials;
- Target research on crops and livestock where women are likely to benefit; and
- Support changes to the policy environment to make it more women-friendly.

For the success of programs proposed by the FTF, these will require an enabling environment that promotes greater participation by the private sector. Mali seems well positioned for this,
with a growing agriculture private sector which is making investments, bringing about innovations, and developing markets. And with a GOM engaged in reforms that suggest an improving enabling environment for trade and investment.

**DO 2: Sustained improvements in health through increased utilization of high impact services and healthy behaviors**

USAID development assistance to Mali, in the health sector, is guided and financed under the Global Health Initiative (GHI), a U.S. Government’s health funding investment for six years (2009 – 2014). GHI acts as an ‘umbrella’ strategy for the other health initiatives such as The President’s Emergency Plan for AIDS Relief (PEPFAR) and The President’s Malaria Initiative (PMI). Leading program areas include activities related to HIV/AIDS, Malaria and Tuberculosis (70% of the available funding). Other defined health priorities include neglected tropical diseases, maternal, newborn and child health, family planning and reproductive health, nutrition, and health systems strengthening. Mali is one of the “GHI Plus Countries“, acting as ‘learning laboratories’ that are subjected to particular attention in their implementation process.

GHI focuses on scaling-up health interventions through the reinforcement of on-going efforts, removal of constraints in implementation, building on success-stories, promoting intensive communication programs and relevant collaboration for real impact. The emphasis is on comprehensive approaches to health programming, and significant returns on investment in health initiatives. This led to framing global health agenda in a business model of development, which prioritizes efficient actions and effective results. GHI is based on the following seven core principles:
- Women, girls, and gender equality
- Strategic coordination and integration
- Strengthen and leverage key multilaterals and other partners
- Country-ownership
- Sustainability through health systems strengthening
- Improve metrics, monitoring and evaluation
- Promote research and innovation

The GHI principle on women, girls and gender equality has been further developed in a supplemental guidance document. This guide requires country health-team to do gender-analysis in order to obtain relevant information on the contexts of implementation and have their interventions grounded on sex-disaggregated data (quantitative or qualitative) and provide information on gender inequalities and opportunity for behavior change. The guide emphasizes the need to innovate by focusing on aspects that may appear to be non-health issues such as FGM, gender-based violence, and power relations between men and women. The guide emphasizes considering specific characteristics of Youth (boys and girls) and that of men considered as beneficiaries of health care, women’s partners and promoters of health programs. The document also calls for new types of partnership and multi-sectoral approaches to ensure a better inclusion of women, girls and gender equality in health initiatives. All these new considerations bring about a definite value added to the GHI initial document.
As defined, the overall USAID’s health strategies promote a fertility reduction policy based on altering population growth in Mali. Fertility is viewed through a broader understanding of social dynamics and national planning. This has led to focusing on behavioral change at the household and community levels, and to empowering women to play a greater role in decision-making regarding their health and that of their children.

**Intermediate Results**

**IR 1: Use of quality family planning, maternal, neonatal and child health services increased**

This first intermediate result has to do essentially with mortality and morbidity, family planning, newborn care and nutritional status. It focuses on prevention, access, quality control and behavioral changes to increase demands for services, mostly at the community level. To improve the serious reproductive health problems requires responses that remove barriers related to gender inequalities. Well known constraints concern women being at the margin of family decision-making and involved in various survival strategies without substantial sources of regular income. Additional obstacles to women’s good health concern nutritional taboos throughout the reproductive years, among several ethnic groups in the country.

What are the messages there and what kind of balancing has been pursued through USAID health programs?

Assuming that women’s empowerment is the key to better women’s health, interventions in birth-spacing have impacted indirectly on women’s decision-making by providing them with means to take care of their health costs, and those of their children. This was the underlying logic behind the saving and loan program established by Keneya Ciwara Project, to allow women to pay for their prescriptions, contraception devices, and care for their children. These loans were interest-free when needed for medical reasons as opposed to those based on social motivations. The end result was a relative financial autonomy for women susceptible to bring on agency in decision-making.

Family planning programs have also target men directly, as the usual managers of household resources with decision power in the family. The means of transport are mostly in their possession and they have to allow women to travel as required. Based on the evidence, it has been necessary to draw men’s attention to the need of rapid decision-making in case of obstetric complications with potential risks for the mother and child. It was therefore important to target men in improving women’s health in order to gain their commitment and contribution in the matter.

The Health Policy Initiative (HPI), implemented by Futures Group, has successfully focused on involving men in advocacy for better reproductive situation in Mali. For this purpose, they have implemented actions related to constructive men's engagement (CME), which target men as clients of reproductive health services, partners to women, and agents of change in the family and community. A series of training and technical capacity building were provided for the integration of the gender dimension in the project. Among the achievements in using this proactive strategy was a national CME guidelines adopted by the Malian Ministry of Health, the
inclusion of CME in USAID/Mali’s health portfolio and a momentum of dynamic multi-sectoral collaboration around improving reproductive health in Mali. A pilot project in this design used community peer-educators to counsel couples on communication and joint decision-making. Feedback from the evaluation of this initiative, yielded open communication within couples, and higher use of health facilities by men who came accompanied by their wives. Health providers attested to an increase in demand for contraceptive products as a result of HPI.

The next phase of this project called “Health Policy Project/HPP” is scaling-up this success-story which seems to have had a positive impact on men’s roles in promoting family planning and women’s health in the community. RAPID, the innovative way of informing men about women’s health issues, based on evidence from the DHS survey (2006), is being used to train other religious leaders and new targets such as the parliamentarian network for population and development, women’s associations and the network of traditional communicators. It remains to conduct a study on the declared impact of messages sent through this gender-sensitive tool, seeking behavioral change in demands for health services.

**IR 2: Coverage and use of key malaria and HIV/AIDS prevention and control interventions increased**

IR 2 emphasizes prevention, treatment and monitoring of Malaria and HIV/AIDS. The focus in the implemented high-impact interventions against malaria deals with:

- mass distribution campaign of insecticide-treated mosquito nets (ITNs)
- indoor residual spraying (IRS) with insecticides
- intermittent preventive treatment in pregnancy (IPTp)
- prevention interventions targeting MARPs
- artemisinin-based combination therapy (ACT)

Financial support from the President’s Malaria Initiative (PMI) has made possible these interventions, in alignment with priorities set by the Mali Malaria Control Program. Funding from this initiative has been allocated for research on a vaccine against malaria at the University Malaria Center in Bamako. Another implementing partner is the ‘Keneya Ciwara II Project’ whose ‘Youth Ambassadors against Malaria Initiative’ have been successful in advocacy against malaria in schools, families and at the community level. The ultimate goal is to achieve a wide coverage of distributing ‘long lasting insecticide-treated bed nets’ to the majority of Malian households, eventually reducing the overall level of morbidity and mortality.

USAID-Mali has been recognized by State officials as a valuable partner in the decline of HIV/AIDS prevalence rate in Mali, between 2001 and 2006. Interventions against HIV/AIDS epidemic in Mali rely heavily on funds from “The President’s Emergency Plan for AIDS Relief” (PEPFAR) to cover prevention, treatment and counseling of HIV/AIDS infected individuals. It provides also for advocacy against stigmatization of those infected and policy support to the Malian Government. USAID technical and financial support to the DHS survey has provided an important opportunity to collect reliable data on seroprevalence, in Mali.

With regard to gender issues, it was of great importance that men understood through the campaigns against malaria all the hazards of this disease, especially for pregnant women, and the needs for women and children to sleep under bed-net treated against mosquito. Based on small-
scale studies done by community health volunteers, couples’ life styles have been examined to better adapt the proposed interventions. Indeed, it was important that men have the same level of information as women because once informed, men got more interested in women’s health issues. Through PSI interventions, HIV/AIDS programs have focused on prevention that look out for pregnant women, support quality voluntary testing and counseling centers, and promote social marketing of condoms. The outreach strategy for MARPs is mostly beneficial to women and adolescent girls because they are highly vulnerable to HIV/AIDS due to limited control over their reproductive role and weak negotiation power in their sexual encounters or their married life.

**IR 3: National, regional, district and community management and health systems improved**

The improvement in question concerns scale-up policies and expansion in the provision of services. In conformity with GHI principle, USAID/Mali has promoted country ownership in health system delivery through technical and financial assistance in the implementation and evaluation of the national health strategy (PRODESS). Support for the strengthening of the health system at a decentralized level involved the development of guideline documents for some local partners. USAID-Mali is also leading the donors’ community involved in the health sector to build synergy in their assistance to the Government of Mali. However, the evaluation of PRODESS II has shown that there is a need to better organize the health care system in Mali. The Health Ministry must coordinate the gains in both the health sector and the decentralization process, and identify key players in delimited areas for health facilities: the junction between the two seem to be faulty enough. The department in charge must reorganize health supplies and establish a system of autonomous health districts with clinical/surgical units, and a public health unit for training and supervision.

With regard to capacity building, USAID/Mali and its implementing partners have ensured training to strengthen quality services. Among the primary beneficiaries are the Health Ministry, Civil Society Organizations and the private sector. Efforts have been made to increase the number of trained health workers such as qualified nurses, midwives and birth-attendants. Community health volunteers have been provided with pre-service training. USAID-Mali is also giving support to medical training centers for the improvement of teaching on reproductive health as adapted to new technologies of information. The aim of this capacity-building is to increase the quality of human resources on the Malian labor market that would be available for the health sector.

Since the health strategy is also being implemented through community and facility-based approaches, individual, and communities had to be empowered in various ways including leadership through advocacy, fund-raising for specific activities and reinforcement of accountability and ownership. The availability of facilities with tracer medicine and commodities in stock has been an important component of the expansion of provision of services.

Ensuring gender equity in health management is achieved through training nurses and midwives, strengthening women’s access to health facilities and key postpartum services. Regarding the role of women in health management, a link may be established between the level of women’s
participation and the quality of health services. The problem arises due to the fact that most midwives live in urban areas, and that there is a poor coverage of nurses and doctors in the country. Therefore, reproductive health services in rural areas is left in the hands of female staff made up mostly of unqualified birth-attendants resulting in poor quality of health services. The same problem arises concerning the recruitment of well-trained community health volunteers.

Comments and Recommendations:

Move away from the approach of seeing women as victims with regard to access and control over their health status. We must keep in mind that they often have freedom spaces instead of being completely powerless. This approach helps to find social contexts and communication channels that favor the promotion of family planning, and better negotiation capacities with sex partners. To capitalize on all that has been achieved regarding women’s empowerment, future interventions should develop approaches to promote female leadership at the community level, and establish a mechanism for woman-to-woman mentoring. For the vision of family planning as a development matter to be effective, health services should not remain sole provider of family planning products.

**Recommendation:** Undertake studies in areas of interventions to identify social relationships and household contexts for evidence-based behavioral change targeting both men and women.

Improve on involving men in family planning interventions. The power dimension comes into the picture when including men in strategies aimed at improving women’s health issues. The strategy “are you really a man” depicts men as a problem for family planning. This way of thinking underlines interventions which target male religious leaders for advocacy work. Emphasizing mostly on these problems portrays women as victims and men as interfering negatively in women’s health choices and behavior. Seeing men as agents of change in the family and community involves emphasizing on communication issues and spaces between couples. A good starting point would be discussions on how to transform norms and values of being a husband/father and include them as gatekeepers of women and children’s well-being.

**Recommendation:** Promote men’s involvement in behavioral changes, at household and community level, by training men trainers to deal with discriminations and gender equality in the health sector.

Women do not constitute a homogeneous group. Much focus has been made on maternal mortality, family planning and antenatal health, leaving out the enormous health needs of women in menopause. Ageing is associated in Mali with limited mobility and loss of income which both aggravate a high prevalence of non-infectious diseases such as diabetes, high blood pressure and/or cholesterol, osteoporosis and various gynecological problems. However, older women have great influence on their husband and younger men in the family due to their higher social status and active participation in household decision-making. Women in reproductive years often feed information and pass on their opinion to husbands and local authorities thanks to this relative power of elderly women. It would be interesting to tap into this traditional channel of communication to increase women’s use of family planning services, and foster behavioral change at household level.
Intra-gender analysis shows also the need to consider differences between elderly women and young girls in relation to their social status and daily occupation. Although both subgroups enjoy substantial free-time, are most likely to stay at home and be involved in childcare, girls have specific health needs and much less control over their choices and life circumstances. In particular, adolescent migrant girls who are often employed as nannies or housemaids constitute vulnerable household members at risk of rape, unwanted pregnancy and HIV/AIDS. Including these girls as target for advocacy allows tackling at once HIV/AIDS risk factors, unmet needs in family planning and quality improvement in childcare.

**Recommendation:** Improve High Impact Health Services (HIHS) by taking into account the great diversity among women, throughout the life-cycle;

**Recommendation:** Customize healthy-childcare practices messaging for primary caregivers such as grand-mothers and housemaids.

**Caring for women who suffer from fistula is a real challenge** in Mali due to the complexity of this health problem. In addition to dysfunctional organs, these women are outcasts who often conceal their handicap because of strong stigma and lack of relevant information on the matter. The fistula care project is providing such women, in the region of Gao, with much needed health information and treatments. Health personnel in the main hospital are trained and equipped for emergency obstetric care to prevent medical complication susceptible to bring about fistula. However, to address the root causes of this medical condition, advocacy interventions should clarify the links between traditional practices (for ex, FGM and Girls’ early marriage) and harmful alterations in women’s genitalia and other reproductive organs. Such approach would connect women’s health to their social status, and could involve parliamentarians, religious leaders and civil society organizations already trained to address reproductive issues, at the community level.

**Recommendation:** Integrate advocacy messaging against FGM and girls’ early marriage in postpartum hemorrhage, fistulae and maternal and child health-related-activities.

**Definition of risk groups:** Projects financed by USAID-Mali have allowed identifying and making use of risk groups to enable efficiency and high performance in dealing with increased prevalence of HIV/AIDS among women. This should be considered as a lesson learned from which to build interest in mothers (or their substitutes) who stay out on the street all day-long, showing off twins as a way of making money. Another vulnerable subgroup concerns street kids, young girls and boys, who are also at great risk of rape from pedophiles, malaria and HIV/AIDS. **Recommendation:** Improve the conceptual tool of “MARP categories” in health interventions, to include itinerant mothers and street kids.

**Include a gender dimension in quality control of the health system.** There is no mention of CSCOMs and other health facilities being audited for gender sensitiveness in their infrastructure and recruiting of human resources. A frequent requirement is made by project staff to have gender parity among its field actors, but this request is often turned down on the claim of need for women to take care of domestic chores. Women have limited access to health facilities due to barriers from husbands and other men in the family. The fact that decisions about their health are closely linked to financial autonomy, calls for a behavior shift in the household and cultural shift regarding high fertility in the country.

**Recommendation:** Perform gender audit of health facilities targeted for quality reinforcement.
Include the Ministry of PFEF in Direct Funding. Direct funding is provided to the Ministries of Health and Social Development, and to the National Malaria Control Program (PNLP) for the implementation of high impact health services in MCH, FP, Nutrition, HIV/AIDS, and Malaria at the national, regional and district level. The MPFEF should also be an active partner of USAID in the implementation of its health programs. USAID-Mali active role in the GT-GED offers a space for synergy, in the international community, between actors who are interested in integrating gender issues in their health portfolio. This would provide USAID with an opportunity to work more closely with the MPFEF to better address the integration of gender issues, particularly FGM, GBV and girls’ early marriage. This partnership would offer a point of entry for many other kinds of advocacy related to women’s empowerment, such as adult literacy, since the level of mother’s education is known to be an important determinant of women’s health needs and behavior.

**Recommendation:** Make efforts to link explicitly USAID-Mali interventions in the health sector to the implementation of the national gender policy, in partnership with GT-GED.

Need evidence-based links between health outcomes and MDG goal on women empowerment and gender equality. What different kinds of research might better help improve women’ health care? The evaluation of PRODESS II has shown that there is a need to better organize the health care system in Mali. The Health Ministry must coordinate the gains in both the health sector and the decentralization process, and identify key players in delimited areas for health facilities: the junction between the two seem to be faulty enough. The department in charge must reorganize health supply and establish a system of autonomous health districts with clinical/surgical units, and a public health unit for training and supervision.

**DO 3: Education Development Objective and Program Description**

*Development Objective:* Children are proficient readers by the end of primary school

*Development Hypothesis:* If the quality of literacy instruction is improved and school management is strengthened THEN Children will become proficient readers by the end of primary school.

- IR 1 Improved Quality of Instruction to Reinforce Student Literacy
- IR2 Improved Commune-Level School Management

To improve the quality of education inside the classroom, USAID/Mali will continue working with the Ministry of Education to revise the school curriculum and to use reading related technology in the classroom. The Mission will help improve the school environment by better engaging the communities in school management. Through these two main activities, the Education team will improve the overall reading comprehension of students.

The focus on reading in early and late primary students aligns the program with the global USAID/Education strategy. It also targets Learners at their most formative years—early primary (grades 1-4)—and Learners at their most vulnerable years in terms of drop-out rate—Late
primary (grades 6-8). In addition to meeting USAID’s education strategy, these objectives will directly contribute to the Government of Mali’s five year development strategy for education.

IR 1: Improved Quality of Instruction to Reinforce Student Literacy

To increase the quality of education, the team will focus on curriculum reform at the national level. One aspect of this curriculum would be the use of maternal language in school for basic education. Part of the curriculum development involves producing text books, supporting teacher training, as well as monitoring and evaluating the reform.

In addition to reforming the national reading curriculum, USAID/Mali’s education team is ensuring schools have access to and training in using innovative tools for teaching reading in the classroom. Examples of reading-focused, innovative learning materials include radio broadcasts and the use of MP3 disks. These tools will enhance the MOE’s capacity to provide educational outreach to medersas, community schools, nomadic populations and children with special needs. Focusing on these populations will increase access to basic education for the most marginalized populations in Mali.

IR2: Improved Commune-Level School Management

Since many schools lack control over education resources, USAID/Mali is providing capacity building training to commune-level school management committees. The training focuses on improving community participation in school management decisions, empowering groups to solicit and manage education resources from the central government to the commune level to ensure schools are accountable to and transparent to community members and local officials. Community groups targeted include Parent-Teacher Associations and School Management Committees.

Part of the capacity building training will be centered on ensuring schools are “safe spaces.” A safe school means the school and its surrounding environment meets the physical and mental safety criteria needed to promote healthy behaviors in all students. A major component of the safe schools initiative is to identify and support the needs of both boys and girls, requiring the school officials and community members to apply a gender lens to their activities and programs. Examples of criteria that improve a school’s physical safety include maintaining open and well-lit paths that lead to/from school as well as sanitation and hygiene facilities for both boys and girls.

The schools address mental safety by ensuring that schools have female and male teachers that can provide counseling, support and mentoring for students. By involving School Management Committees, Parent Teacher Associations and local officials in the safe schools initiative, USAID/Mali is sensitizing parents and community members on gender-specific, student needs.

Comments and Recommendations regarding DO
Gender disparity is a widely-noted phenomenon within the education sector in Mali. USAID/Mali has made significant strides to address gender inequity in their past programming. This is apparent in their incorporation of lifeskills messaging in curriculum reform projects. The “safe schools” program that the Mission is implementing in three regions in Mali is also to be commended. The program takes steps to address gender disparities inside and outside the classroom and recognizes that young male and female students need male and female role models in the school to provide mentoring and counseling support.

The safe schools program provides a possible immediate intervention to a major gender issue within the education sector—the shortage of female teachers and administrative staff. The wide ratio between male and female educators is a systemic problem and reflects the wide disparity between education levels of men and women in Mali. Decreasing the disparity between male and female teachers will take time. However, helping male teachers become more aware of gender specific student needs is one way of helping female students feel supported and protected inside a male dominated environment in the immediate future.

Below are recommendations to further ensure that education programming promotes gender equity:

To improve quality of education:

- **Ensure that the new curriculum in maternal languages does not reinforce gender-based stereotypes.** It is possible that the content of maternal language may reinforce certain gender stereotypes and biases. To the extent possible, the Mission needs to identify and address these biases before printing and distribution. In addition to looking for gender issues associated with men and women, it is important to look at how the curriculum addresses boys and girls.

- **Promote gender-friendly messaging and curriculum broadcasted in USAID-funded radio program.** While USAID/Mali is not involved in the design of education broadcasts, the Mission has a responsibility to ensure radio programs are gender-sensitive and do not promote gender stereotyping.

- **Ensure gender-sensitive training for teachers related to technology.** The Mission should encourage that male and female teachers have equitable access to innovative resources. Additionally, it is important to ensure specific gender needs when carrying out training for teachers, recognizing that female teachers may have had less access to technology and need more instruction to feel comfortable using the tools in the classroom.

- **Integrate approaches to curtail GBV into school programs.** There are a number of approaches, such as those promoted by Instituto Promundo (from Brazil and the US) or Sonke Gender Justice Network (from South Africa), that empower girls and promote respect among boys that have been proven to have a positive impact on children. When possible these should be included in the school curriculum and encouraged in all USAID-
supported schools. The programs can also be used with school management committees, PTAs and other school support groups.

- **Consider gender-specific needs of special needs children.** As in most of Sub-Saharan Africa, children with special needs are less visible in the formal school sector. Girl children with special needs are especially vulnerable and often less likely to have opportunities that male children have. The Mission should look at the gender disparity between boys and girls.

**Community support programs**

- **Promote equitable gender participation in school management committees.** USAID/Mali should look at the gender break-down of school management committees, PTAs and other school support groups participation and take greater steps to ensure women are able to actively participate. This involves looking at meeting venues, times of meetings and agenda items to make-sure they encourage equitable participation between men and women and asking the following questions:
  
  - Are men and women involved in determining priorities for the community projects?
  - Are both men and women involved in project planning and implementation?

- **Identify and support future female leaders.** The male to female teacher and administrator ratio is extremely high. While USAID/Mali may not have direct funding to support capacity building of female leadership, the Mission should seek out dedicated, female teachers and administrators and link them to other donor and/or host country programs geared to increasing the number of female leaders in Mali.

- **Involve male and female youth representatives in school management committees.** In addition to encouraging greater equity between men and women, the Mission should look for ways to involve the youth in the meetings, such as electing a male and female student to the committee. The students will benefit from the “safe schools” messaging. The inclusion of female students can be an example of one way the Mission is contributing to the capacity building of future female leaders in Mali.

- **Engage teachers and the school administrators in ways to help prevent girls’ early marriage.** Encourage school staff to identify and use effective ways of interceding with parents once they know the family is trying to marry a girl. School Management Committees and Parent Teacher Associations should develop policies and practices that facilitate young married girls to return to school.

- **Promote school management committees to be active in protecting students and curtailing GBV in schools.**

**DO 4. Governance/Communication Development Objective and Program Description**
Development Objective: Decentralized democratic governance systems strengthened and made more accountable

Development Hypothesis: If Mali has effective, local democratic, governance systems and the community perceives local authorities as legitimate and there is increased community-level civic engagement, then there will be a sustainable solution to insecurity in Mali.

- IR1: Public Resources Managed More Accountably and Efficiently
- IR2: Civil Society Strengthened

USAID/Mali is tackling systems strengthening and security by addressing Mali’s capacity deficit among local government actors and civil society. This assistance is intended to directly contribute to USAID/Mali’s ability to implement USAID/Forward utilization of host country system and local organizations. USAID/Mali’s planned program for the next five years will focus on (1) public resource management and (2) strengthening civil society.

IR1: Public Resources Managed More Accountably and Efficiently

USAID/Mali’s efforts to address resource management and facilitate the decentralization process will focus on building the capacity of local officials through training and assistance related to financial management and the budget process. By focusing on mayors and local officials in communes that have other USAID/Mali programs, the capacity building component will contribute to USAID/Mali’s health, education and economic growth programs.

IR2: Civil Society Strengthened

The Mission will build the capacity of community service organizations (CSOs), through training and assistance for organizations associated with health, education and value chain associations at the commune level. Much emphasis is placed on including women and women groups in these trainings. Targeted groups include community school management committees, local service delivery for health programs and national resource management associations.

USAID/Mali is also facilitating the participation of trained CSOs and individuals in the local government budget preparation process and Commune Council Sessions as a way of promoting local level, transparency and accountability. The CSOs also participate in the monitoring and evaluation of local, government service delivery. Efforts are made to identify and involve women and youth in the budget review process, commune council sessions and monitoring of government service deliveries.

Peace and Security

Recognizing the volatile situation in the north, USAID/Mali will work strategically in the three northern regions to increase provision of local services and promote peace and security. Two new programs include a peace and conflict resolution activity and a small-scale infrastructure program. The peace and conflict program promotes peace and dialogue in northern Mali through trainings and meetings for community leaders and stakeholders as well as peace and security-related radio programming. All of these activities will have a strong focus on youth and women and are intended to promote communication between community members, local government officials and CSOs.
The small-scale infrastructure program adopts an Office of Transition Initiatives (OTI) model of development, funding small scale projects from community action plans. The small scale projects are intended to serves as a bridge between humanitarian emergency assistance and long term, strategic development. The project promotes positive interactions between community members and local officials to make decisions about their community’s needs, ultimately increasing visibility of the Government of Mali in the north—the lack of which is a contributing factor to instability.

**Comments and Recommendations regarding DO**

USAID/Mali strives to reduce gender disparity at the local leadership level by involving women in capacity building trainings and government budgeting activities. Such activities are useful opportunities to challenge some of the traditional gender roles that have marginalized women from local governance issues. Similarly the involvement of men and women in the monitoring of delivery of government services is necessary since the types and frequency of services differ for men, women, adolescent girls and boys and children. Another area where USAID/Mali has demonstrated gender equity is in the design and implementation of elections programming, where considerable emphasis was placed on creating gender-specific messaging for voter registration.

While the Mission has sought out men and women participation in governance activities, it is not always clear how or when female community members transition from simply observing local budgeting and service delivery monitoring to becoming active participants these activities. It is unclear at which stage targeted women are empowered to articulate and lobby for specific needs or even if their participation in the process is resulting in the creation of activities in greater gender-parity budgeting.

Below are recommendations to further ensure governance and communication programming promotes gender equity:

**For Making Public Resources Managed More Accountable and Efficiently:**

- **Strengthen a gender-responsive budgeting (GRB) approach to communal programs by measuring the impact of local decisions on gender issues at the community level.** The Mission has successfully introduced GRB into their decentralization programs by making sure women and youth are active participants in the government planning, programming and budgeting process. However, to ensure women are not simply participants in the process and that local government decisions identify and reflect needed interventions to address gender gaps, it is necessary to analyze the outcomes of local budget decisions. Hence, there is a need to look at the gender impact of local government decisions. This includes looking at the gender-differentiated impact of revenue-raising policies and the allocation of domestic resources and Official Development Assistance at the local level. This is not something that USAID/Mali must do alone. In fact, it is a great area in which to collaborate with other donors such as CIDA and the Dutch who do gender budgeting training and support in targeted communes.

- **Introduce trainings/capacity building activities that can help bring women civil servant leaders up to scale.** The disparity between the number of men and women civil servants
is shrinking but there needs to be greater effort to identify and provide capacity assistance addressing the barriers facing women in the government sector.

- **Incorporate gender policies and regulations into local capacity development assistance.** A major challenge in Mali is that the government does not have the capacity to enforce and promote gender policies. This is especially true at the local level.
- **Identify ways to partner with the Ministry of Women.** The Ministry of Women has developed a National Action Plan. USAID/Mali should look for overlapping activities and as much as possible collaborate with the Ministry to promote gender equity in Mali, especially as it relates to female leadership.

**For strengthening Civil Society:**

- Include national gender policies and rights sensitization into trainings and capacity assistance for civil society.
- **Differentiate youth by gender.** In numerous project reports there was extensive mention of involving women and youth in the local budget process. The needs, powers, and desires of young males and females are different. USAID/Mali needs to look at the involvement of male youth and female youth as separate groups and articulate how they are approaching the distinct needs of young men and women.

**For promoting Peace and Security:**

- Ensure that implementing partners identify and respond to the different roles men and women play in conflict communities when designing and implementing activities, and the distinct issues each group faces in these communities. Man and women play many and varied roles when conflict arises. Partners should make efforts to understand the various roles each plays, as well as their needs and interests.
- **Augment and strengthen the engagement of women in peacekeeping processes.** Women need sensitization and training, as well as facilitation skills. If these are not made available, women may shy away from participating and peacekeeping committees which may turn into male-only structures, devoid of any female participation. Men will also need awareness raising and training in order to accept efforts of gender integration.
- **Ensure gender-sensitive process for selecting infrastructure.** Recognizing that women are especially burdened by the lack of water and sanitation facility, the infrastructure projects have the potential to greatly improve the quality of life for women and girls in the village.
- Ensure that small scale infrastructure projects benefit women, especially that they help decrease their labor (in home and in the fields) requirements.
- **Expand peace messaging radio program to include messaging/program related to education, participation, and governance issues and consider gender issues when selecting radio broadcast times.** Men and women, boys, and girls may be listening to the radio at different times. When broadcasting messages, consider gender-specific programming and make sure programming aligns with when different sectors of the population will be most exposed.

**An Example of an Integrated Approach : The Youth Program**
USAID/Mali has started an innovative program to educate rural youth and provide them with the skills to earn a livelihood, at the same time ensuring that they will stay in their rural communities as contributing members of their societies and providers to their families. The program is sponsored by most of the teams with pooled resources.

Through a market survey three geographical areas were selected, Sikasso, Koulukoro, and Kaye, with the program expected to be active in approximately 200 villages reaching 10,000 youth. Later on, Tumbuctou was added, with 40 more villages and 2,000 youth.

The program has four main objectives, which we will describe below, but it is expected to have a holistic, cross-sectoral approach and aims at increasing the livelihoods of the participants. The four objectives are: 1) basic education, with the teaching of literacy and numeracy in the local language and also in French; 2) a skills training component; 3) workforce and entrepreneurial skills training; and 4) youth leadership development, leading to creating and making viable youth associations in the villages.

For the skills training component, the participants have conducted their own mini-market surveys for the choice of skills training to be offered. One constraint is that training needs to address agricultural needs since FtF is providing support. Among the areas chosen by the students for training are: cereal growth, processing of agricultural products, market gardening, soap-making and other products using shea butter, and others.

The first cycle of the program that will last two years, includes 5575 participants, of which 54% are women and 46% are men. Innovative aspects of this program are the use of Youth Mentors and the creation of a Volunteer Youth Core. Each village has a Youth Mentor who helps teach the curricula and aids in coaching the youth students to develop as future leaders. The Youth Mentors are also young men and women from the local areas, slightly older and more educated, but who were not employed. At present, 63% of the Youth Mentors are males and 37% are females. The program started in the third quarter of FY ’11 and will run for five years at a cost of $25 million.

Monitoring and Evaluation: Comments and Recommendations

- All people level indicators must be sex-disaggregated;
- All programs must have indicators to measure their reach to men and women and to measure the gender impacts;
- Issues such as empowerment and participation require qualitative indicators;
- All programs need to establish baselines at the start of the program;
- Ensure that desired outcomes are reflected in the targets.
- A mid-term evaluation should be conducted to ascertain that attention is being paid to the gender approaches recommended in this diagnostic.
- Consonant with the Agency’s new Evaluation Policy, the impact evaluations conducted for the three DOs at the end of their programs, should pay special attention to the proposed gender results, and document whether these results were achieved as well as their most significant impacts.
Annex 1: Bibliography

Annex 2: Scope of Work
### Annex 3: List of Key Informants

#### Gender Analysis Key Informants

<table>
<thead>
<tr>
<th>Organization/Office</th>
<th>Individual</th>
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<td>Government of Canada</td>
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<td>Baou Diane</td>
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<td>AEG Team Member</td>
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<td>Gov/Com Gender Rep</td>
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<tr>
<td>Food For Peace</td>
<td>Richard Carbane</td>
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## Annex 4: Gender Experts and Organizations in Mali

### Organizations Associations by Area of Intervention

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<thead>
<tr>
<th>NOMS &amp; COORDONNEES DES STRUCTURES</th>
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| **1-. COFEM / Collectif des Femmes du Mali,**  
Siège : Faladié-Séma ; BP E 2790 ; Rue 800 (Rue du Gouverneur), Porte 585, BAMAKO ; Tel / Fax: 20-20-13-09 ;  
Site: www.cofemali.org; E-mail: cofem@orangemali.net | --Lutte contre discriminations & promotion droits femmes  
--Participation politique : leadership féminin; citoyenneté  
--Renforcement statut socio-économique et droits économiques des femmes  
--Genre & NTIC |
| **AMSOPT / Association Malienne pour le Suivi**  
et l’Orientation des Pratiques Traditionnelles  
Siège : Hamdallaye ACI 2000 ; BP 96, BAMAKO  
Tel / Fax : 20-29-58-95; E-mail: amsopt@datatech.toolnet.org | -Violences faites aux femmes : excision ; mariage précoce ; droits de la petite fille  
-Promotion de la Convention de MAPUTO |
| **WILDAF--MALI / Femmes Droit et Développement en Afrique,**  
Siège : Sogoniko, Avenue OUA, Immeuble SOBATO, Appartement #A4  
Tel : (223) 20-23-67-08 ; E-mail: wildafmali@yahoo.fr | --Lutte contre les Violences faites aux femmes : violences domestiques ; Viol ; pédophilie  
- Cliniques Juridiques / Accès à la justice  
--Promotion de la CEDEF et de MAPUTO  
--Promotion de la Charte des Droits des Enfants |
| **APDF / Association pour le Progrès et la Défense des Droits des Femmes Maliennes,**  
BP 1740, Immeuble Djiré, Avenue Cheick Zayed,  
BAMAKO, Siège : Hamdallaye ACI 2000 ; Tel / Fax (223) 20-29-10-28 ; Cell : 66-84-21-18  
E-mail: apdf@datatech.toolnet.org | --Lutte contre l’excision  
--Lutte contre les violences domestiques  
--Promotion de la CEDEF et de MAPUTO  
--Participation politique : leadership féminin, citoyenneté féminine, promotion de candidatures féminines aux élections |
| **RML-MGF / Réseau Malien de Lutte contre les Mutilations Génitales Féminines ;**  
BP E 4180, BAMAKO  
Siège : Hamdallaye ACI, Immeuble Hadja, Rue 400, Porte 235 ;  
Tel : (223) 20-29-33-55; E-mail: rmlgf2@yahoo.fr  
Site : www.courantsdefemmes.free.fr | --Violences faites aux femmes : excision ; mariage précoce ; droits de la petite fille  
--Promotion de la Convention de MAPUTO  
--Renforcement de capacités des organisations membres du Réseau |
| **ONG - SABA ; Siège : MOPTI ;**  
Cell : 66-72-05-19 / 76-14-35-30 ;  
E-mail: aouailo@yahoo.fr | - Encadrement des Organisations Paysannes  
--Développement des pôles d’entreprise agricole autour de certaines filières de production |
| **Réseau des Femmes Transformatrices de Produits Agro-alimentaires** | --Promotion de l’agriculture, l’élèvement & la transformation de produits agro-alimentaires |
| Siège : Sévaré, MOPTI | --Banques de céréales pour les femmes  
Mme Sira Cissé, Présidente / Cell : 76-14-35-49  
E-mail: diakite_sira@yahoo.fr | --Alphabétisation des associations de femmes  
--Assainissement de l’environnement  
--Lutte contre l’excision et le VIH / SIDA |
|-----------------------|-------------------------------------------------|
| Coopérative « Jigi Sèmè » ; Siège : Sévaré, MOPTI  
Mme Baboré Maïga, Présidente Adjointe  
Cell : 76-04-57-36 | --Transformation agro-alimentaire (confiture, boisson, couscous, etc….)  
--Lutte contre la pauvreté et pour la promotion économique des femmes  
--Encadrement des aide-ménagères (sur la santé de la reproduction & l’IEC sur le VIH/SIDA) |
<table>
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<th>NOM &amp; PRENOMS</th>
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<tr>
<td>Mme Sinè Damba, ex-Ministre / Experte Genre Diarra Kadiatou Samoura, Secrétaire générale Sangaré Coumba Touré, Conseiller Technique Coulibaly Mariam Doumbia, Conseiller Technique</td>
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1. The Gender Inequality Index (GII) takes into account gender biases in three main dimensions: reproductive health, empowerment and economic activity. Mali’s rank in the 2011 index reflects poor reproductive health status (a maternal mortality rate of 464 per 100,000 live births; adolescent fertility rate of 186.3 births per 1000 live births), women’s low participation in the Parliament (132 men compared to 15 women), significant gender disparities in educational achievements (8.4% men against 3.2% women in secondary or higher education), and unequal labor force participation (37.6% for women against 67.0% for men).

2. Yves BOURDET & al. ASDI. *Inégalités de genre, croissance et lutte contre la pauvreté au Mali*, 2010, p. 52

3. Ministère de la Promotion de la Femme, de l’Enfant et de la Famille


5. Cadre Stratégique pour la Croissance et la réduction de la Pauvreté – CSCRP 2012-2017


7. La Convention pour l’élimination de toutes les formes de discrimination à l’égard des femmes

8. Le Protocole à la Charte Africaine des droits de l’Homme et des Peuples relatif aux droits des femmes en Afrique, dit ‘Protocole de Maputo

9. La Convention relative aux droits de l’enfant


12. CNDIFE

13. CNDIFE 2010

14. Education CPS-MEALN


19. Mali Demographic and Health Survey (DHS), 2006


22. FAO, Talbe A4, p. 105

23. Profil Genre, p. 11

24. Minimart and Ta, 2011


28. USAID. 2012. Mali:Property Rights....

29. MPFEF-CNDIFE__Base Femme et Enfant


31. PNIP-SA

32. PRODESS


34. IICEM Gender assessment

Recent research found that female-owned plots have the lowest productivity, controlling for other inputs, which suggests that attention to issues of gender differences in control of resources and intra-household bargaining need to be further researched.
