



To'os ba Moris Di'ak
Farming for Prosperity

Gender Equality and Social Inclusion Analysis

Technical Report 8
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Abbreviations & Acronyms

ADTL Asosiasaun Defisiénsia Timor-Leste / Timorese Association of People with

Disabilities

ASI Adam Smith International Pty Ltd BDM Bolsa da Mae (Child payments)

CA Constituent Assembly
CBM Christian Blind Mission

CEDAW Convention on Elimination of All Forms of Discrimination Against Women CNRT Congresso Nacional de Reconstrução de Timor / National Congress for

Timorese Reconstruction

DFAT Australian Department of Foreign Affairs and Trade

FAO Food and Agriculture Organisation

GBV Gender-based violence
GoTL Government of Timor-Leste

GESIA Gender Equality & social inclusion analysis

GDI Gender Development Index

GNI Gross National Index
FGD Focus Group Discussion
FHH Female Headed Household

INGO International NGO

KAP Knowledge, attitudes & practice

KONSSANTIL National council for food security, sovereignty and nutrition in Timor-Leste

LBW Low Birth Weight

M4P Making markets work for the poor MAF Ministry of Agriculture and Fisheries

MDF Market Development Facility

MIYCN Mother infant & young child nutrition

MoH Ministry of Health

MRG Monitoring Review Group
NGO Non-government organisation
NSA Nutrition Sensitive Agriculture

PHD Partnership for Human Development (Australian Aid)
OPE Office of the Adviser on the Promotion of Equality

PLDW People living with a disability
PRA Participatory Rural Appraisal

PNDS National Program for Village Development Support (GoTL executed,

Australian TA support)

R4D Roads for Development Program (Australian Aid)

RDTL República Democrática de Timor-Leste / Democratic Republic of Timor-Leste RHTO Ra'es Hadomi Timor Oan (RHTO)-Disability Support Association of Timor-

RM Regional manager (TOMAK)

SBCC Social behaviour change communication

SDP Strategic Development Plan

SEM Secretariat of State for the Support and Socio-Economic Promotion of Women

of Women

SISCA Integrated Community Health Clinic (Servisu Integradu da Saúde)

SOL Seeds of Life Program (ACIAR)
SRH Sexual Reproductive Health

TAF The Asia Foundation
TL Team Leader (TOMAK)
ToR Terms of reference

UNTAET United Nations Transitional Authority in East Timor

VAW Violence Against Women

VC Value chain

WE Women's Empowerment

WEAMS Women's empowerment and Market Systems

WEE Women's economic empowerment

WFP World Food Program

Executive Summary

The Gender Equality and Social Inclusion Analysis (GESIA) highlights the socio-cultural norms and context in which women and men live and make decisions in rural Timor-Leste. The analysis has been conducted in three municipalities across Timor-Leste. Various data collection techniques have been used to construct a picture of the situation, views and ideas of women and men as well as a range of other key stakeholders.

The GESIA made considerable efforts to ensure the voice and aspirations of women and more vulnerable community members were captured. The findings contain intergenerational gender analysis, enabling reflection on the differences within genders and indications of changes in gender beliefs and practices across generations.

The GESIA is a live document, signifying a long commitment from TOMAK to reflect, learn and adapt to gender and inclusion information through the life of the Program. The results of the GESIA provide TOMAK with an excellent foundation of analysis required to develop gender-sensitive and transformative approaches, relevant to the key project outcomes of:

- 1. Improving food security and good nutrition in rural communities.
- 2. Improving market systems and the capacity of farmers to confidently and ably engage in profitable agricultural market initiatives.

Key Findings from the GESIA

1. Gender equity

The analysis found that, while gender dynamics are constantly changing, change is slow with strong social norms and customs influencing roles and responsibilities, access to resources and women's participation in economic and political life. Gender and social inclusion values are in flux in Timor-Leste. There is a growing knowledge, acceptance and even pride in the pursuit of human rights and equality. Yet, at personal and institutional levels both men and women struggle to apply these values to themselves.

Prevailing beliefs and attitudes held by men and women towards the expectations of their roles and rights are the biggest barrier to gender equality and social inclusion in Timor-Leste. Women's agency is limited by beliefs in society about their self-worth, which impacts on their self-confidence and levels of acceptance of situations where they are discriminated against. Alternatively, there are few incentives for men to relinquish resources and power to women while increasing their engagement in reproductive responsibilities.

The dominant cultural practice and belief in Timor-Leste is *Lulik*. *Lulik* defines marriage exchange practices and a person's status in society. Marriage exchange practices place emphasis on building and creating connections between families rather than individuals. *Lulik* and marriage exchange practices dominate and set gender role expectations that cascade down to other aspects of life, including inheritance of resources, domicile, domestic/productive roles and household decision-making practices. As there are masculine and feminine elements to *Lulik* which require continuous balance, it can be perceived as both an inhibiting and an enabling consideration in addressing gender and social inclusion inequalities.

2. Social inclusion

Social inclusion is both an outcome and a process of improving the terms on which people take part in society. The GESIA findings suggest that the factors for marginalisation and exclusion in order of influence are; gender, age, status/elite, ethnicity and disability. Usually more than one factor exists to create vulnerability. Disability or gender alone may not be necessarily predictive of vulnerability but gender and disability together may start to increase a person's vulnerability to discrimination and exclusion. For example, a young woman living with a disability form a non-Liurai family who has married into her husband's family potentially has a high level of vulnerability.

Age is a factor for exclusion that mainly impacts on younger people, especially young and unmarried parents and to a lesser extent elderly people of both genders. The perception, knowledge and attitudes towards GE&SI issues can vary considerably between generations, with the biggest difference being between the

older and younger generations. These differences usually increase the potential for one group to be excluded. Young mothers, especially those who have been abandoned or have left their partner, and elderly widowed women are consider the most vulnerable age groups. If a woman in this group has also married into a family where they have no land ownership rights, then the potential for vulnerability increases as she experiences the triple burden of gender, age and status.

Status within Timorese culture can be determined by linage to Lulik (Traditional belief system). Those who have a higher status are referred to as the Liurai and come from Liurai families. Each village would have Luirai and they are the keepers of tradition and custom, usually overseeing the sacred houses and leading the mediation of village disputes. Liurai tend to have a higher economic status then non-Luirai families, usually because they have access to more land and livestock than non-Luirai families. They are usually the traditional owners of land and resources in a village. Connections to Luirai can determine levels of social inclusion or exclusion especially in decision-making. Status can also move with increased economic prosperity as well as through community or national contribution, including involvement in government, business, politics, religious institutions and Timor-Leste's Independence movement.

Ethnicity also arises as a predictive factor in social inclusion. There are biases and stereotyping that dominate people's attitudes towards some ethnic groups in different geographic areas. For instance, in the value chain mapping, key informants talked about areas where people are known to be aggressive and/or have taken over parts of the market system, making it difficult for others to break in. Similarly, people can identify ethnic groups who don't speak up and assert themselves. Women from these areas, in particular, are even less likely to be involved in leadership roles than in other areas.

Men and women with disabilities are considerably more vulnerable to poverty, poor health outcomes and economic disadvantage. Men and women living with a disability are more dependent on family support for income-generating activities. Women with disabilities in particular face more difficulties accessing the support and information that might assist them to increase their capacity to produce food and generate income. The GESIA found that women with disabilities were more economically vulnerable than men, who often had assets and resources and retained their status as a man in the community despite the disability.

3. Household decision-making

Roles and responsibilities in food production, household feeding and income-generation are highly gendered in Timor-Leste. Women are centrally involved in many of the activities linked to all three areas of food production, household feeding and income-generation, often taking on a larger range of roles and having a heavier time burden than men. Gender roles are fluid throughout the life cycle with ethnic, status and intergenerational differences influencing vulnerability.

The GESIA found that not all women are in control of all household spending on food. It is common to hear that women hold the money in a family but this does not necessarily translate to control. Decision-making needs to be consultative between men and women and in most cases the extended family. This starts with use of small resources such as eggs and chickens and increases to higher value items. Women generating their own income are more likely to spend it on food and family essentials than men. Women who have their own income are more confident to buy more high monetary value food with that money without consulting their husbands.

Fear of household conflict is impacting negatively on nutrition and use of food resources. Household tension and conflict can emerge over the lack of variety, convenience and use of food resources. Women are taking this into account in making decisions in these areas to avoid conflict. Men are also taking conflict into account but to a much lesser extent. Use of resources without consultation leads to conflict for both men and women. Joint or extended household decision-making around a number of areas was seen as key to avoiding conflict. The risk of tension leading to violence is probably greater for the more valuable resources.

4. Livelihoods

The 2015 National census reported that Women are heavily involved in the agriculture sector in rural communities at almost equal levels to men (57.5% of women and 60% men). They are farmers both through necessity and by choice. Women farmers carry out a larger range of agricultural and market functions than men. Women's involvement in food production and processing is more diverse and comprehensive than

men's. There are more women marketplace traders than men and women dominate the informal economy around food agriculture products. Despite this, women do not benefit or participate equitably in agriculture and market institutions, programs, technology, leadership and governance. This leaves lots of room for improvement in securing women's leadership and representation in these areas.

All locations assessed experienced high rates of gender asset disparity. Men accumulate more and have more diversity in their assets than women. Men mostly own land, with the exception of matrilineal areas. Some women are able to negotiate use of land with the owners. The security of property rights remains a critical determinant in a woman's willingness to engage and increase their time and financial investment in agricultural production compared to non-agricultural based livelihoods.

Livestock is rarely used to feed the household. Rather it tends to be retained for cultural obligations or 'onceoff' income for house construction or education. Women's ability to access and utilise productive assets has significant impacts on family wellbeing, including nutrition and resilience to withstand economic shocks and recover.

5. Food consumption and nutrition

The key gender equity issue in nutrition relates to the constraints that women face in decision-making and their lack of control over food, which impacts significantly on nutrition choices and the prevention of malnutrition.

Gender and inclusion norms also exist in who is served food first. Largely men eat first, and women and older children eat second. In some sites, women stated that they ate last with the children eating second. If the couple live with their parents, the parents are asked to take the food first, then the husband, and then the rest of the family. There is recognition that small children are allowed to eat whenever they feel hungry and will be fed first, particularly at night as they become tired. In this situation, they would eat before the husband/father. If the male head of the household is not present, food is saved for him before anyone else eats. Guest are fed first regardless of gender indicating that it is not just gender which influences decisions but cultural expectations as well.

Most pregnant women stated that they found they needed to eat regularly but did not indicate how they increased the nutritional value of their diet. Most of the nutritional information directed at pregnant women was focused on what they should not eat and that they needed to eat regularly. There was no mention of particular foods that pregnant women should eat to improve nutrition either for themselves or for their baby.

Despite this, there is recognition and effort paid to meeting the special dietary needs of pregnant woman, more so if advice has been given by a doctor. Both women and men thought it was important for husbands to do what they could to increase the nutritional value of their pregnant wife's diet. The degree of action taken would depend on the family's economic situation.

6. Key recommendations

The GESIA overwhelmingly highlights the need to undertake and continually reflect on the gender and social inclusion factors underpinning human behaviour and societal norms when developing project activities. In many cases these factors will be the reason why change has not occurred in the past and/or is difficult to change.

To ensure sustainable gains in gender equality, women's empowerment and social inclusion, the GESIA study proposes that the following broad recommendations be adopted to guide the design and implementation of TOMAK activities. Simultaneous combinations of these recommendations will deliver transformative gender change.

- 1. Raise the visibility and public perception of women and girls in the project sectors. This should start with increasing visibility of what they do already that is undervalued.
- 2. Design interventions that specifically target women but do not exclude men.
- 3. Integrate domestic violence analysis. Consciously mitigate for the potential of violence and backlash when challenging gender norms.

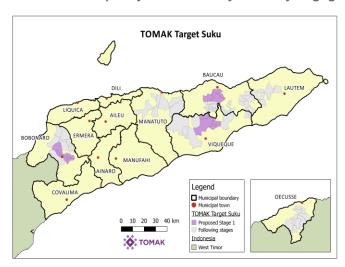
- 4. Take necessary measures to ensure voice and representation of women at all levels within the project.
- 5. Involve women and other vulnerable groups in the design of services and products.
- 6. Invest in the ideas, innovation and leadership of women.
- 7. Promote collective action among women and vulnerable groups.
- 8. Build and protect women's rights and control over economic gains and assets.
- 9. Ensure capacity building initiatives target both technical and empowerment requirements of beneficiaries.
- 10. Ensure behavioural change communication initiatives are gendered and reflect generational, status and inclusion considerations.
- 11. Utilise and promote joint gender and/or extended family unit decision-making models for nutrition and agriculture gains which will reduce household conflict in decision-making.

Main Report

1. Introduction

To'os Ba Moris Diak Program (TOMAK) is a 5+5 year agricultural livelihoods program funded by the Australian government in Timor-Leste. Its goal is to ensure rural households live more prosperous and sustainable lives. TOMAK will achieve this through parallel and linked interventions that aim to:

- Establish a foundation of food security and good nutrition for targeted rural households.
- > Build their capacity to confidently and ably engage in profitable agricultural markets.



The primary target area comprises inland midaltitude areas that have some irrigation capacity. This zone includes around 70-80 suku, located mainly in the Maliana basin (including most of Bobonaro); the eastern mountain regions (including large parts of Baucau and Viqueque) as well as parts of Lautem and Manatuto; and Oecussi. The program will initially focus its activities in Baucau, Viqueque and Bobonaro Municipalities.

Gender equality is fully integrated into both components of TOMAK. TOMAK seeks to pursue a twin-track approach by mainstreaming gender in the design and implementing targeted activities which seek to change gender roles. Gender is systematically incorporated into the design,

implementation and monitoring of all interventions across both components in the following ways:

- Using a women's economic empowerment framework.
- > Seeing women as key agents of change/ decision-makers.
- Working with women as a major target group.
- Recognising and seeking to shift women's workload, income for effort, access and agency.
- Ensuring the program does no harm and mitigating for potentially negative impacts of challenging social and gender norms, such as intimidation, backlash and violence.

The TOMAK design recognised that gender relationships are complex and diverse in Timor-Leste, with each geographic area having different beliefs and practices. Understanding these differences is critical to TOMAK achieving its intended outcomes.

This GESIA¹ is aimed at identifying current social and economic factors that perpetuate vulnerability and disadvantage; marginalised groups including women and girls (women-headed households and older women); and people living with a disability. The GESIA focused on agriculture, nutrition, food security and economic advancement. Key areas of analysis included: (i) the roles, responsibilities, workload and division of labour of women, men, girls and boys; (ii) the use, ownership and decision-making around key assets and resources; (iii) the gender dimensions of decision-making in the household; (vi) access to information, opportunities, life chances and support networks; (v) risk and protective factors around violence and food resources; and (vi) the varying social norms that perpetuate or eliminate the potential for domestic violence in the above areas.

¹ The GESIA assignment was led by Kerry Brogan with oversight from TOMAK Gender Specialist Inga Mepham and Cecilia Fonseca. Team members included Lucia Branco, Jose Antonio (Zeto) da Silva and Agia Ximenes.

This report covers the analysis methodology, the key findings, and program implications. Annexed to the report is further information from the field work and references.

Methodology

This GESIA is not intended to repeat the wealth of data and information that already exists on all aspects of gender relations and norms in Timor-Leste. Specifically, the GESIA wanted to build on what is already known and accepted. The first step in this process was to undertake a desk review, which covered prior research, reports and other documentation. In all, 34 documents were reviewed.

The desk review highlighted gaps in knowledge that needed to be explored further with fieldwork. The fieldwork involved a mixture of targeted interviews and Participatory Rural Appraisal (PRA) techniques, including Focus Group Discussions (FGDs), transect walks and peak-time observations. The methodology is fully described in Appendix 2. Fieldwork was conducted in seven suku, including two suku in each of Baucau and Bobonaro, and three in Viqueque. Suku were selected on the basis of their relevance to the program as possible implementation sites.

The sites selected in each municipality allowed for points of comparison between peri-urban and more rural suku. Key characteristics of each of the suku can be seen in Appendix 4. Recognising that there are two forms of marriage exchange practices in Timor, the field analysis sought to understand any gendered differences emerging from patrilineal (married out) and matrilineal (married in) communities. This analysis was undertaken in Bobonaro, which was the only municipality out of the three that has matrilineal practices.

Following fieldwork and data analysis, preliminary findings were presented to key stakeholders representing 14 organisations. The purpose of the workshop was to enable another layer of critical analysis to be obtained from peers to ensure findings were relevant, reflective and as accurate as possible.

1.1. Analytical framework and questions

TOMAK is designed using a women's economic empowerment (WEE) framework. The WEE framework is a subset of a larger women's empowerment framework. When looking at gender and inclusion this can be simplified to an empowerment framework, where empowerment is seen as the combined effect of changes in:

- 1. A person's own knowledge, skills and abilities (agency);
- 2. Societal norms, customs, institutions and policies that shape choices in life (structures);
- 3. Power relationships through which a person negotiates their path (relations).

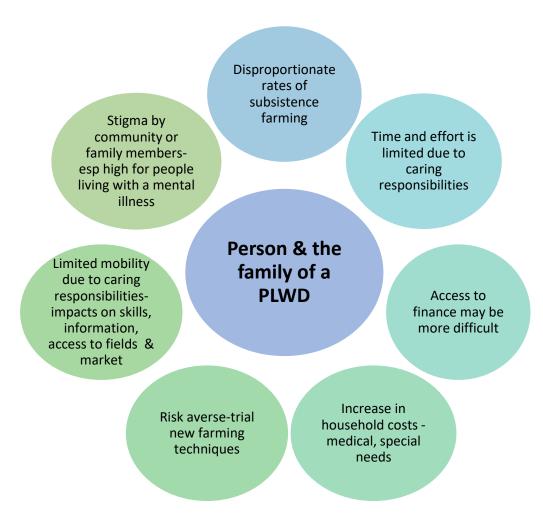
Empowerment frameworks cover eight core areas of inquiry:

- 1. Roles and responsibilities
- 2. Household decision-making
- 3. Control over productive assets
- 4. Access to public spaces and services
- 5. Claiming rights and meaningful participation in public decision-making
- 6. Control over one's body
- 7. Violence and restorative justice
- 8. Aspirations for oneself

In undertaking the GESIA, the three levels of empowerment (agency, structures and relations) were considered across the eight core areas of inquiry.

The GESI analysis also sought to understand the different experiences of people living with disabilities and their families in relation to food security and nutrition, recognising that there are likely to be multiple layers of discrimination facing such members of the community. The GESIA sought to understand if the following perceived disadvantage experienced by people living with a disability (PLWD) and their families holds true:

Figure 1: Impacts that disability may have on a person living with a disability and their family



Building on these analytical frameworks, the following topics were considered most relevant to TOMAK, grouped under eight core areas of inquiry:

GESIA fieldwork analysis - Topics covered by core area of inquiry

Roles and responsibilities

Roles and responsibilities of males and females around food production, nutrition and consumption.

Regular activities undertaken and when these occur (particularly where seasonal).

Household decision-making

Roles of men and women in the house in decision-making: Who dominates in decision-making regarding ingredients used in food in the house? What is the age and sex of the decision-makers?

Gender norms that influence decision-making around infant and child nutrition and feeding; gendered differences in diet for female and male members of the household (babies, children, adults and elderly).

What role do taboos play in decisions about food production and consumption?

What impact do cultural responsibilities have on food security and good nutrition?

Who is making decisions about changes to the production and consumption of food?

Access to and control over productive resources

What are the gendered differences in access to and control over resources including land, finance, information and other assets?

How does disability impact the person living with a disability and their family's access to and control over food?

Which groups/individuals are most marginalised in terms of food security?

Access to public spaces and services

How do gendered differences in mobility impact food production?

Claiming rights and meaningful participation in public decision-making

What roles do men and women hold within the community?

What are the gendered differences in relation to public decision-making?

Control over one's body

Level to which women and men can make decisions about health, intimate partners and children?

Violence and restorative justice

What are the factors that increase the risk of violence in relation to food production and consumption? How are these different for different groups of women in the program area, for example, younger women, older women, veterans, women and men with disabilities?

Aspirations for oneself

Perceived needs, opportunities and preferences of female and male members of the household?

1.2. Respondents and sample

The GESIA targeted both men and women. As the GESIA was hoping to pick up intergenerational gender differences that may impact social inclusion and decision-making, the respondents were classified further into different sub target groups, including;

Table 1: Areas of inquiry and methodology by sub target group

	Sub Target Group	Area of inquiry	Methodology
1	Veterans - male and female	Role in decision-making, role as community leaders and change makers/influencers	Targeted interviews
2	Grandparents (who care for children during the day)	Feeding of children in their care, their own access to food within the family	FGD. Men and women invited with recognition it might be hard to find male participants.
3	Reproductive age	The whole range of GESIA topics	Men and women in separate FGD discussions
4	Female single-headed households	The whole range of GESIA topics, as well as any disproportionate disadvantage or advantage	Targeted interviews
5	Young parents born 1990- 2000	Decision-making for their family-care, food, health seeking, assets, income etc	FGDs - men and women separately
6	Mother of the new father (mother-in-law); oldest child no more than 6 yrs.	Decision-making roles and influence, actions and restrictions on the daughter-in-law	FGDs – combined with grandparents with caring responsibilities
7	Mother of new mother (maternal mother); oldest child no more than 6 yrs.	Decision-making roles and influence, actions and restrictions on the daughter-in-law	FGDs - combined with grandparents with caring responsibilities
8	PLWD and their families	The whole range - disproportionate disadvantage	Targeted interviews

Table 2: Total GESIA participant breakdown by geographic area and methods

Municipal	Suku/Sub district	Aldeia/Villa ge	Transect walk	Peak time observ'n	FGD	Targeted interviews	Munic. people met (advice only)	Total people involved in GESIA	
Bobonaro	2 (Saburai & Ritabou)	2 (Tas Masak & Samelau)	4 (4 farmers) groundnut, mung bean & cattle	1 peak time	10 (total ppl 64)	7 (total ppl 7)	10	85	
Viqueque	3 (Ossu, Karaubalu & Viquequevila)	3 (Osorua, Mamulak & Boraisa Laran)	2 (2 farmers- cattle & groundnut)	0 peak time	6 (total ppl 43)	4 (total ppl 4)	5	54	
Baucau	2 Buruma & Vemasi	2 Suliwa & Ostiko	3 (3 farmers- groundnut, cattle, tomato)	2 peak time	7 (total ppl 32)	9 (total ppl 9)	8	52	
Total	7	7	9	3	23	20	23		
Total participants involved in the GESIA									
64% Female & 36% Male									

1.3. Fieldwork

The fieldwork schedule is detailed in Appendix 3. Three weeks of fieldwork were undertaken, with one week in each district. Fieldwork was undertaken by a team of two TOMAK staff and four consultants. Not all the staff or consultants were in the field all the time. In each municipality, local partner organisations were contracted to assist with fieldwork. Partner organisations that are currently engaged in gender, agricultural, nutrition and income generation activities were selected. The key tasks of the local partner were to provide local contextualised understanding to the team, to facilitate contact with local authorities, to facilitate FGDs, to take notes of FGDs and translate. The partners included:

Bobonaro	Viqeuque	Baucau
Organisation Haboras Moris (OHM)	HAFOTI & Viqueque Women's Association	Centro De Desenvolvimento Comunitario (CDC)

Fieldwork was timed to provide some overlap with fieldwork being carried out concurrently by the TOMAK Value Chain Assessment team and the Nutrition Survey team, to provide opportunity for efficiency and shared learnings across the three activities.

1.4. Ethical framework

An ethical framework was developed for the study drawing on the following guidance notes:

- Australian Council for International Development (ACFID), 'Principles and Guidelines for Ethical Research and Evaluation in Development', 2016.
- > WHO Guidelines on information gathering relating to violence against women.
- > 'Practice Note Collecting and Using Data on Disability to Inform Inclusive Development', Plan International Australia and CBM Australia-Nossal Institute Partnership for Disability Inclusive Development, July 2015.

The GESIA analysis involved primary research using interviews and PRA processes with different groups of men and women. Procedures were applied to ensure that the analysis was sound and protected 'the safety, rights, welfare and dignity of those involved'. Key principles underpinning the analysis, drawn from the above references included:

- > Respect for human participants.
- > Beneficence the activity does no harm and overall is of benefit to the community.
- Research merit and integrity it is justified and uses sounds methodology.
- Justice equity throughout the research process.

The GESIA methodology was designed to minimise risk by avoiding discussion of women's experiences of violence. Recently conducted research provided data on women's experience of violence on which the analysis could draw. Instead the focus for the TOMAK GESIA was questions to women regarding their perceptions of the power they have within the key dimensions of roles and responsibilities, decision-making, and control of resources. The ethical framework was thus predicated on the fact that the line of questioning was not about violence against women – although the program hopes to be able to use the information (and available data about prevalence rates and risk and protective factors) to design program implementation plans that are gender transformative and minimise the risk of harm.

1.5. Limitations of the analysis

The GESIA report should be regarded as a living document, intended to guide but also be tested and updated over time. It was not the intention that this analysis would provide a complete understanding of gendered dynamics in all potential program areas, but to provide a sufficient basis of understanding to commence the design and implementation of relevant TOMAK interventions. A limitation of the GESIA was the short time frame. It did not allow for a long lead-in time with communities and partners. Thus, the information received was what was available on one field trip over a few days in each site, with little opportunity to return for more detailed analysis.

Implementation with local partners proved an excellent strategy in terms of being able to connect with preexisting networks and draw on their analyses and experience, but was more challenging in terms of their skill levels in gender and social analysis. Nuanced understanding of gendered and social dynamics requires

² ACFID Principles and Guidance

gender expertise and skills on gender analysis. These skills were not that well developed among some of the partner organisation staff.

TOMAK mitigated this by ensuring that the TOMAK Gender Specialist was centrally involved in the analysis and by contracting field staff with experience and sensitivity on gender. In relation to local partners, the fieldwork demonstrated considerable openness from the local partners on gender analysis and confirmed that there was considerable potential. Language was also a challenge and, while having local partners engaged mitigated this challenge, it is likely that valuable insights were lost in translation from local languages to Tetum and then to English.

2. Contextual analysis

2.1. Gender equality

Gender equality is a human right. Women and men are entitled to live with dignity and with freedom from want and fear. Gender equality is also a precondition for advancing development and reducing poverty. Women make up 49.2 percent of Timor-Leste's population of 1,183,643, with a ratio of males to females of 103³. This is a slight decrease on the sex ratio in the 2010 figure of 104. The 2014 female Human Development Index for Timor-Leste is 0.548, and 0.631 for males. This results in a Gender Development Index value of 0.868 (UNDP, 2016) ⁴. The GDI is calculated using progress in the following three dimensions to measure gender inequalities: health (female and male life expectancy at birth), education (female and male expected years of schooling for children and mean years for adults aged 25 years and older); and command over economic resources (female and male estimated GNI per capita) ⁵. Timor-Leste is ranked 133 out of 186 countries in UNDP's Gender Inequality Index.

Timorese women have experienced important shifts in gender equality since independence, in particular national political representation, a law on domestic violence, increased education enrolment and completion rates for girls, some reduction in the country's high fertility, maternal and child mortality rates, and the adoption of a law against domestic violence. Women still lag behind men however in terms of education outcomes, have significantly lower rates of employment, continue to face high fertility and maternal mortality rates and very high rates of violence. Women in rural areas have extremely low levels of political participation and engagement in public decision-making.

Women comprise only 32% (11,246) of the Public Service, representing an increase in proportion from 26% in 2001. The increase reflects a fairly slow rate of growth in comparison to the growth of the overall public service. 87% (29,660) of public servants are classified as permanent, with 4,399 on fixed term contracts. Of that 87%, only 27% are women⁶. Representation of women across the government varies. In the Ministry of Health, it is close to parity at 49% when all the permanent and temporary positions are included⁷. In the education sector, however, women remain under-represented at only 35%⁸. Of relevance to TOMAK, the percentage of women in the Ministry of Agriculture and Fisheries is only 15%⁹.

Women hold a very small proportion of management jobs within the Public Service, just 26% of positions at Level 5 and above according to Public Service Commission data from 2016. Women face discrimination and fewer opportunities for training and skills development. While women's rates of education completion are lower than men – a fact that is often referred to as a reason for lower rates of recruitment of women in the formal labour force – it is interesting to note that women also need higher qualifications to attain the same decision-making positions as men¹⁰. The government has committed to an increase in the number of women in management roles and to do this by using special measures to promote gender equality. The newly appointed leadership of the Public Service Commission provides strong opportunities to see progress in this area.

2.2. Legal and policy frameworks

Timor-Leste's Constitution contains provisions that guarantee gender equality and prohibit discrimination on a number of grounds including sex. In 2003, Timor-Leste ratified the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and is required to report periodically to the CEDAW Committee.

³ Timor-Leste 2015 Census Data.

⁴ UNDP Human Development Report, 2015.

⁵ Briefing note for countries on the 2015 Human Development Report, Timor-Leste, UNDP.

⁶ Data from the Public Service Commission (Komisaun Funsaun Publiku, KFP) supplied to the Governance for Development Program on 11 May 2016.

⁷ KFP Data supplied to GfD on 11 May 2016.

⁸ KFP Data supplied to GfD on 11 May 2016.

⁹ Gender Country Assessment, page 94. Another study conducted by BESIK in 2014 indicated that MAF had 18% female staff followed by the Ministry of State Administration with 17%.

¹⁰ CEDAW Concluding Observations, 22a, November 2015.

Timor-Leste's National Parliament has adopted a quota ensuring that one in every three members of Parliament is a woman. Women have attained positions as Ministers and Secretaries of State in government but there is no official quota for government members. Currently women comprise 21% of government members with three female Ministers and five female Vice Ministers and Secretaries of State. A Secretary of State for the Support and Socio-economic Empowerment of Women (SEM) exists, reporting to the Coordinating Minister for Social Affairs, who reports to the Prime Minister.

The RDTL Strategic Development Plan (SDP) 2011-2030 requires government departments to address gender equality and recognise it as a whole of government task through collaboration. The plan includes goals on gender mainstreaming, raising awareness of gender disparities, empowerment of women through livelihood programs, reproductive health programs and zero tolerance to violence in schools and homes. The SDP requires that by 2030 Timor-Leste be a gender-fair society where 'human dignity and women's rights are valued, protected and promoted by our laws and culture.' The Government has adopted National Action Plans on gender-based violence (2012-2014 and currently being revised), and a National Action Plan on Women, Peace and Security (2016). There is also a Strategy on Women's Economic Empowerment developed by SEM

Relevant to TOMAK is the new Maubisse Declaration signed by 6 Ministries and the National Commercial bank of Timor-Leste in October 2015¹¹. It states;

"The construction of an economically and socially modern and developed society is only possible if it is based on the principles of inclusion, tolerance and gender equality. Gender equality is constitutionally guaranteed but, in isolation, this aim has not been achieved.... The signing of the Maubisse declaration marks the start of a new cycle of pro-actively promoting Gender Equality in all development sectors. Such aims require a coordinated response from the various governmental actors that strengthen the capacity of women, improve their access to production inputs and support the development of an environment conducive to Gender Equality."

While these policy frameworks and statements are important to raise awareness and galvanise commitment, they often fall down in the implementation with little allocated in the line Ministries budgets. A positive sign for 2017 is that MAF has allocated 4.2% of their budget (\$674,500) for activities on horticulture and for youth groups, targeting a participation of 50% of women. This is directly linked to their commitment to the Maubisse Declaration.

2.3. Timorese culture

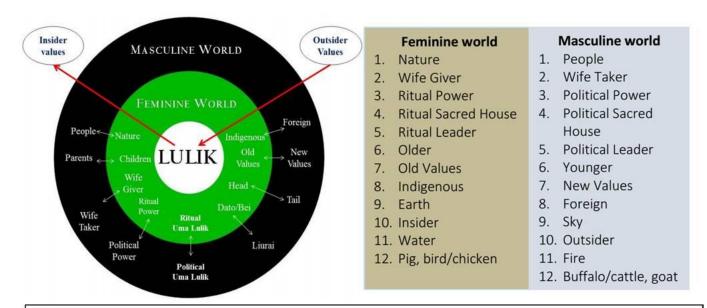
Men and women in Timor-Leste are bound by cultural rules and obligations which significantly impact their lives. Culture is evolving however, and there has been significant social change over the last 20 years. Social norms around men's and women's roles, decision-making, control of assets and control of one's body, generally undermine efforts supporting gender equality.

Timorese culture and traditions are encompassed in a system called *Lulik* (meaning Sacred). *Lulik* is a belief system that aims for peace and tranquillity within society as a whole. This is achieved through the proper balance between two differing and opposing elements, namely the feminine and the masculine worlds. In real life, the two elements must complement each other in order to create a balanced society. If the two worlds are out of balance it will put individuals, families, clans and society as a whole at risk.

Lulik belief and practice are still very much a part of life in Timor-Leste. Lulik influences social norms and all types of decisions from birth to death. It influences gender relations, marriage practices, inheritance and the interactions people have with each other and the land. Fear of facing a Lulik curse (sanction) for disregarding or offending the Lulik code is real. Consequences and sanctions determined by ancestors can include: failed crops; death of livestock; inability to have children; disease; accidents; natural disaster; and conflict between

Maubisse Declaration was signed by the 1. Ministry of Agriculture and Fisheries; 2. Secretary of State for Support and Socio-Economic Promotion of Women; 3. Ministry of Commerce Industry and Environment; Ministry of Public Works, Transport and Communication; 4. Ministry of Tourism, Arts and Culture; 5. Ministry of Health; 6. Ministry of State Administration; the Secretary of State for Vocational Training and Employment Policy; and the 7. National Commercial Bank of Timor-Leste on International Rural Women's Day 201

people, families and ethnic groups. It is thought that this belief in the cause and effect aspects of disrupting *Lulik* balance can in part explain why Timorese farmers are risk-averse to trialling new practices.



Information taken from a presentation on <u>Lulik: The core values of Timor-Leste</u> by Josh Trindade http://karaudikur.blogspot.com/2012/04/lulik-core-of-timorese-values.html

In rural areas *Lulik* is the key system used to decide ownership, use and inheritance of resources, such as land and livestock. *Lulik* defines marriage exchange practices. Marriage exchanges involve negotiations between families to determine mutual expectations as well as the bride price or *barlaque*. In marital exchanges, key cultural value is placed on reproduction and fertility and thus the 'flow of life' moves from wife giver to wife taker (in patrilineal culture) and from husband giver to husband taker (in matrilineal culture).

With the most dominant practice in Timor-Leste being patrilineal rather than matrilineal, this tends to lead to patrilocal family situations, whereby a married couple lives near or with the husband's parents. When a woman marries, she essentially ceases to be a member of her birth family and joins her husband's family. Under this system, parents potentially reap more of the returns on investments in a son because he will remain a part of their family, whereas a daughter will physically and financially leave the household following marriage.

The maintenance of this system is incredibly important. In daily life, the relationships of wife givers and wife takers are always remembered and the consequences of the exchange can impact the inheritance, resources, status and opportunities of generations to come.

Inherently, the marriage exchange practice places emphasis on building and creating connections between families rather than between individuals. When individual aspirations emerge, they may create tension between the couple or within the extended family, especially if they push up against dominant social and gender norms. In some families, such gender norm tension can be negotiated and balanced, allowing opportunities to adapt and change. In other families, the gender norm tension remains unresolved and unbalanced. In these circumstances, it results in unhealthy relationships and can escalate to conflict and family violence.

The balance required between the feminine and the masculine world that sits at the heart of *Lulik* provides a natural opening to framing conversations about gender disparity in communities. It provides a way to unpick the consequences of unregulated masculine power that perpetuates gender disparity, rather than seeing the potential of a society that embraces complementarity and balance between men and women.

Culture also strongly determines the parameters for inclusion and exclusion. As with any society, there are multiple layers of exclusion which affect both men and women differently. These layers can exist within one broad family network and will often result in certain individuals, men and women, having little control of their lives and living in extreme poverty. In Timor-Leste, a system of local kinships remains in place, conferring power on particular families across the country. Strict hierarchies within society also support greater access to resources for elites, which affects both men and women and contributes to marginalisation.

2.4. Women's movement history and achievements

Many Timorese women were involved and active in the struggle for independence. A women's movement was formed in Fretilin (*Organisasaun Popular Mulhere Timorense*, OPMT) with representation down to village level. With the formation of the overarching resistance structure in the 1980s (CNRT), an overarching women's organization was also formed, the Timorese Women's Organisation (*Organisasaun Mulhere Timorense*). In 1998, a Women's Conference was organized in Dili at which emerging women's organisations rallied around a number of issues including violence against women and the growing humanitarian crisis.

After the establishment of the United Nations Transitional Authority in East Timor (UNTAET) in 1999, there was a growing vocalisation for the need to address issues that affected women. In 2000, the first ever East Timorese National Women's Congress was organised by a coalition of women's rights and political groups from all 13 districts¹²: Violence against women, equality and mechanisms to ensure women's participation in the development process were prominent. A national plan of action was developed during the congress which called for, among other things, a law against domestic violence¹³. The umbrella organization *Rede Feto* (the Women's Network) arose out of the Women's Congress in 2000 and remains the peak body for women's organisation in the country.

In the August 2001, Constituent Assembly (CA) elections, 27% of the elected members were women. A Gender and Constitution Working Group was formed to ensure consultation with women across the country to feed into the new constitutional process¹⁴. The consultations resulted in a 'Women's Charter of Rights in East Timor' which called for constitutional guarantees of non-discrimination and protection of women's rights to live free of violence¹⁵.

An Office of the Adviser on the Promotion of Equality (OPE) was created within the Prime Minister's Office in September 2001. In 2007 this became a Secretariat of State reporting directly to the Prime Minister. In 2012, the Secretary of State lost the direct reporting link to the Prime Minister and was required to report to the Deputy Prime Minister. In 2014, the name of the Secretariat was changed to its current form, in a move that was not well received by the women's movement which was offended that gender equality had been lost from the title.

In 2006 the National Parliament voted to require political parties to place a woman as every fourth candidate in their party list, resulting in every fourth member of parliament being a woman. In 2011, following a successful advocacy campaign by the women's movement, the quota increased to every third candidate – and therefore every third member of Parliament – being a woman. As a result of the quota, Timor-Leste has one of the highest rates of women's representation in Parliament in the world. That being said, female parliamentarians are not adequately supported by the overwhelmingly male leadership of the political parties.

Gender mainstreaming has had some success across government but the progress is patchy and the pace slow, often left to be led by women ministers or senior public servants. A Government Resolution from 2011 introduced Gender Working Groups within ministries and agencies to support gender mainstreaming in government plans and budgets. UN Women and SEM (then SEPI) provided training on gender mainstreaming to assist the formation and functioning of the groups. It appears not to have gained intermittent traction with

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¹² Interviews with Manuela Leong Pereira, former Fokupers Director, Dili, 21 November 2012; Merry Barreto, (then) Director of Fokupers, Dili, 21 Feb 2013.

¹³ Hall, Nina (2009), 'East Timorese Women Challenge Domestic Violence', <u>Australian Journal of Political Science</u>, Voc. 44, No. 2, June 2009, p.316.

¹⁴ This group was facilitated by Oxfam and run by Fokupers with funding from UNIFEM.

¹⁵ Interview with Keryn Clarke, Dili, 6 December 2012.

few actively working. Some ministries still have Gender Focal Points, public servants with an existing function who act as a link to SEM and attempt to advance gender mainstreaming within their ministries.

2.5. Health

While successive Timor-Leste governments have focused on maternal and child health since independence, Timorese women still face significant challenges in relation to health. Women's access to health services is often dependent on men, including transport. The fertility rate remains high at 5.7 (from the 2010 Census). Six percent of teenage girls (15-19 years old) are mothers¹⁶. Census figures for this statistic were not yet available at the time of writing the report. Women are not in control of decisions regarding sexual and reproductive health. Decisions on family planning are considered by men and women to be 'mutual' decisions, shared between the husband and wife, but there are severe consequences for women who make decisions without a husband's consent, including refusing to have sex¹⁷.

While the government has recognised the high fertility rate and has set targets to reduce it and to improve health care for women and children, there remain significant sensitivities around family planning, largely related to the use of modern methods of contraception. Government services, Marie Stopes Timor-Leste and progressive religious leaders provide family planning services in all districts.

Women marry younger than men in significant numbers, with 24% of married women having married between the ages of 15 to 19, compared to only 5% for men (based on 2015 Census figures). 36% of married women are married between the ages of 20 to 24, meaning that 50% of women are married by age of 24. It is the reverse for men, with the largest number of men marrying between the ages of 25 to 29 and only 33% being married by the time they are 29¹⁸. In practical terms, in rural communities this means girls marry not long after puberty, during and straight after school. Boys on the other hand are marrying at a stage of life when they are more economically productive. Commonly, a young woman will be married to a man seven to ten years older than her. In a culture where age is a source of status, this difference in age further reinforces the superior status of the husband.

Timor-Leste has one of the highest maternal mortality rates in the world, at 557 per 100,000 live births (2010 Census). The high birth rate, the large number of women not accessing antenatal care, giving birth without skilled assistance and not accessing care after birth, all contribute to the high maternal mortality rate. The infant mortality rate has declined but it remains high at 64 per 1,000 live births¹⁹.

2.6. Household division of labour

Household division of labour is very much gendered, with set women's and men's work that is passed down through families. As discussed above, *Lulik* plays a big part in the setting and reinforcement of these roles. Gendered roles within households are problematic when the workload becomes uneven and one gender has a much heavier workload than the other. In Timor-Leste, the heavier work burden is usually carried by women, especially in rural areas.

Mobility is not so much of an issue for women as it is in many other countries, but men still have greater freedom to be away from home, to travel further distances and more frequently. Restrictions on mobility can be placed on women in an abusive relationship, and it is often raised as an acceptable excuse by men and women for hitting a partner.

CARE's gender and power analysis results found that the most time-consuming tasks for women and men were different, and that women spend more time on reproductive tasks while men are engaged in productive tasks. Summary results are presented in the table below. Both genders are involved in productive tasks however these take similar. The analysis found that food preparation and cooking takes up most of a woman's time, approximately two hours a day. It also found that there is a sense in a women's day that there is no time

¹⁶ Country Gender Assessment, p XV.

¹⁷ Marie Stopes Timor-Leste and La Trobe, p17.

¹⁸ Census 2015.

¹⁹ Country Gender Assessment, p31.

to rest, whereas for men rest times are built into the start and end of each day. There is a sense that labour-saving technology would make a difference to women's and men's domestic workload²⁰.

Table 3: Results of FGD ranking of the most time consuming tasks by gender (CARE International)

Women	No. groups	Men	No. groups
1. Cooking	9	1. Working in the field	7
2. Looking after young children	9	2. Feeding animals/livestock	7
3. Washing clothes	9	3. Doing construction work	6
4. Feeding animals/livestock	9	4. Collecting firewood	6
5. Washing the dishes	8	5. Selling things	5
6. Washing the children	7	6. Chopping firewood	5
7. Cleaning the house	5	7. Working in the rice-paddy	4
8. Fetching water	4	8. Looking after young children	3
9. Watering/working in the kitchen garden	3	9. Fetching water	3
10. Working in the field	3	10. Fishing	2
11. Weaving tais	2	11. Watering/working in the kitchen garden	2
12. Collecting firewood	2	12. Picking coffee	2
13. Chopping firewood	1	13. Making/maintaining fences	1
14. Picking coffee	1	14. Cooking	1
N/A		15. Washing clothes	1

2.7. Nutrition

Despite significant progress to combat under-nutrition, malnutrition continues to be an issue that impacts on women and children across the country. Women in Timor-Leste have poor nutrition with 27% of women aged 15-49 being malnourished and 21% of women suffering from anaemia²¹. The prevalence of children aged 0 – 59 months who are underweight is 37.7%, classified as a 'very high' public health problem by WHO.

The prevalence of stunting in children under five years is decreasing, but is still very high at 50%²². The prevalence of stunting across the three TOMAK municipalities is varied, with Bobonaro being the highest (57%) and Viqueque the lowest (48%). Stunting is 5% higher for boys than girls. Stunting in children is more common if the mother is under-weight (BMI< 18.5), and more common for the lowest wealth quintile who have completed fewer years of education^{23,24}.

A stunted child is more likely to become a stunted adult or a woman of short stature (<145cm). Women who are short are at greater risk of maternal mortality, obstructed labour and delivering a low birth weight (LBW) infant or a premature baby, which, in turn contributes to the intergenerational cycle of under-nutrition apparent in Timor-Leste²⁵. Key to the work of TOMAK are the constraints that women face in decision-making and their lack of control over food resources, which impact significantly on nutrition choices and the prevention of malnutrition²⁶.

²⁰ CARE International. 'Gender and power for the safe motherhood project'. 2013.

²¹ Country Gender Assessment, p33.

²² Timor-Leste Food and Nutrition Survey, 2013 page 30.

²³ Timor-Leste Demographic and Health Survey, 2009/10.

²⁴ Timor-Leste Food and Nutrition Survey, 2013.

²⁵ Black RE, Victoria CG, Walker SP, Bhutta ZA, Christian P, de Onis M, Ezzati M, Grantham-McGregor S, Katz J, Martorell R, Uauy R; Maternal and Child Nutrition Study Group. Maternal and child under-nutrition and over-weight in low-income and middle-income countries. Lancet. 2013 Aug 3; 382(9890):427.

²⁶ Marie Stopes Timor-Leste and La Trobe University, 2016.

Timor-Leste has one of the highest rates of early initiation of breastfeeding (within the first hour of birth) in the region. Since 2003, rates have increased dramatically and now sit at 93%²⁷. This is a positive statistic that points to women having control over their bodies at childbirth and men and women being able to change behaviour.

2.8. Education

Timor-Leste has seen increased enrolment and completion rates for both boys and girls in primary school, but girls still have lower completion rates. Based on figures from the 2015 Census, 47% of those completing primary school are girls²⁸. Girls also account for 47% of those finishing secondary school. Women's completion rates at university are lower again, with women comprising only 42% of those who have achieved a university education. However, they comprise more than half of those who have received informal training²⁹. Adult women have lower education levels than men. Only 16% of women have completed secondary education, as opposed to 25% of men over 25 years of age³⁰. Women comprise only 38% of teachers³¹.

2.9. Livelihoods

There are large gender gaps in employment in the formal sector. Women's lack of access to education and skills training, reliance of households on women's labour for childcare and production of food³², and discrimination against women entering the formal sector all contribute to the gender gaps. The two areas where women are concentrated in productive work are the production of household food and unpaid domestic care work, both of which are not fully recognised as work in the country's labour market survey³³. The data presented in Table 3 comes from the 2015 census and provides a breakdown of employment by sector, age gender and location.

Table 3: Employed population over 10 years by age, gender and location

Sector	Rural female	Urban female	Rural male	Urban male	Total
United Nations and Specialised International Organizations	76	122	108	175	404
Embassies and Bilateral Institutions	65	155	148	319	481 687
Non-Governmental/Non-Profit Organizations	518	1,072	1,234	2,364	5,188
Other	1,166	2,211	1,089	2,925	7,391
State Owned Enterprise (E.g. TVTL, EDTL)	2,521	2,406	3,366	4,851	13,144
Private owned business or farm	1,595	2,970	5,588	8,599	18,752
Self-employed non-farmer	15,549	7,436	10,558	7,246	40,789
Government	6,885	9,467	17,196	19,099	52,647
Self-employed farmer	96,577	9,772	130,642	12,882	249,873
	124,952	35,611	169,929	58,460	

The 2015 Census indicates that of those men and women who say they are employed, 41% are women, and 59% are men. 57% of women say they are economically inactive, as opposed to 42% of men. Women are more likely to be in vulnerable employment (69% for women and 49% for men)³⁴, without a secure income or

²⁷ Timor-Leste Food and Nutrition Survey, 2013 page 46.

²⁸ Census 2015.

²⁹ Census 2015.

³⁰ Country Gender Assessment, 2014, p11

³¹ Ministry of Education website, EMIS data.

³² Labour Force Survey, 2013.

³³ Country Gender Assessment, p XV.

³⁴ Labour Force Survey, p20.

salary and benefits and where they may be more vulnerable to layoffs and sexual harassment, according to the Country Gender Assessment³⁵. Women's engagement in vulnerable employment is significantly higher for women in rural areas³⁶. In rural communities, 57.5% of women and 60% of men are actively involved in agriculture³⁷. Women are much less likely to be employed in the formal sector (24.6%) compared with men (50.8%)³⁸. On average, women working in the formal sector receive lower wages that men³⁹. The more children a woman has, the less likely she is to work⁴⁰.

Women have lower ownership of land, acquiring land largely through marriage. Of critical importance, however, is women's ability to negotiate the use of land, allowing them to invest in crops and grow their business ideas. In a study looking at women's access to land and property it was found that women's ownership of land and property is integral to their security and livelihoods. However, in the Timorese context, women's use of land, access to land, assets and sense of belonging within a family system are equally integral to their overall wellbeing⁴¹.

Those engaged in the production and sale of agricultural crops did so as their main occupation. In contrast, those involved in livestock rearing and/or selling were more likely to do this as a secondary income stream. Based on the 2015 census results, 32.4% of respondents were raising and selling livestock. From the data presented in Table 4 it can be seen that female and male headed households keep a range of livestock, although female headed households tend to keep less large livestock such as buffalo and cattle.

Table 4. Percentage of households by type of livestock kept in the TOMAK target area

TOMAK Araa	Househo	lds with I	ivestock				
TOMAK Area	Chicken	Pig	Sheep	Goat	Cow	Buffalo	Horse
% male head HHs	85%	90%	2%	40%	41%	16%	22%
% female head HHs	82%	84%	2%	34%	30%	7%	7%

If rural women are given better access to improved labour saving technologies, the time saved could be spent far more productively on ensuring better nutrition for their families, enhancing production and participating in income-generating activities. The lack of on-farm and domestic labour-saving devices severely hampers the time available for both men and women to be involved in other productive and reproductive tasks.

Access to financial services in Timor-Leste is restricted, with the Country Gender Assessment noting that 5% of men and women between 16 and 64 years are able to access microfinance services. More women (7%) have access than men (3%)⁴². Women tend to utilise localised financial institutions such as microcredit savings and loans groups. It is important to introduce initiatives that provide women with improved access to credit, which will be an enabler to their participation and lead to greater returns on their productive investments.

Access to credit and extension services plays an important role in enabling women's participation; however, access alone is insufficient to increase women's participation in entrepreneurship. Access needs to be linked to initiatives ensuring the provision of production and marketing support, undertaking capacity building, providing organisational and institutional support, establishing quotas and formulating country-specific initiatives that empower rural women. In order to increase women's incentives to participate, concerted efforts are needed to ensure that they move into the production of higher value market-oriented products rather than produce for subsistence.

³⁵ Country Gender Assessment, p72.

³⁶ Country Gender Assessment, p xv.

³⁷ Government of Timor-Leste (SEPFOPE and General Directorate of Statistics). 2015. Timor-Leste Labour Force Survey 2013.

³⁸ UNDP Gender Inequality Index.

³⁹ Timor-Leste Labour Market Survey, 2013, p vi and p23.

⁴⁰ Country Gender Assessment, p78.

⁴¹ CEPAD (2014) Women's Access to Land and Property the Plural Justice System of Timor -Leste.

⁴² Country Gender Assessment, p 79

2.10. Poverty

There are different methodologies for calculating poverty rates. UNDP's 2015 Human Development Report states that 64.3% of Timorese are classified as multi-dimensionally poor, and 86% are either poor or at risk of poverty⁴³. An alternative UNDP source indicates that Timor-Leste has a poverty rate of 49.9%⁴⁴. Poverty is generally assessed at the household, rather than the individual, level which hampers disaggregated analysis. The vast majority of the poor live in rural areas, with most people living in poverty dependent on farming for livelihoods.

Women's lower rates of education and paid employment render them more vulnerable to poverty. During her visit to the country in 2011, the *Special Rapporteur on Extreme Poverty and Human Rights* highlighted women as a group facing particular risks of poverty:

"Timorese women face pervasive structural discrimination and negative gender stereotypes, which dramatically impede their ability to participate in and benefit from education, employment, health services and political representation. A life of poverty and discrimination is the reality for many women in Timor-Leste, particularly women living in mountainous and highland areas, female heads of household, widows and older women⁴⁵."

In 2015, female headed households (FHH) make up 16% of households in Timor-Leste, a slight overall decrease on 2010 figures⁴⁶. Further information on FHH is contained in Section 4 but it is clear that more information is needed including cross-analysis of different variants such as land ownership and agricultural activity from the 2015 Census Data.

The Timorese Government has a number of social protection payments. These include payments for male and female veterans, for the elderly, for disabled and for vulnerable families, including single headed families and families with large numbers of children. The highest benefit is that for veterans (ranging from \$1,380 to \$9000 per year), the elderly pension (\$360 per year), disability pension for over 18 years (\$360 a year), and the *Bolsa da Mae* (BDM) which is a subsidy for families with children in education ranging from \$40 to \$240 per year⁴⁷.

The largest amount of money goes to male recipients of the veteran's pension. About a third of veterans are women. The vast majority of BDM beneficiaries are women. Village chiefs play a key role in registering people for pensions, meaning that they can be subject to personal interpretation and favour. World Bank analysis of the social protection system in Timor-Leste argues that it is not effectively reaching the poorest households as the largest sums of funds are not distributed according to poverty criteria. The only scheme that does this is the BDM, and 90% of beneficiaries represent female headed households. However, the World Bank argues that current levels of support under the BDM are too low to effectively reduce poverty and that it would need to be increased in reach and size of payment in order to have a significant impact on poverty⁴⁸.

2.11. Gender based violence

Rates of violence against women and girls in Timor-Leste are among the highest in the world. Two thirds (59%) of ever-partnered women have experienced physical and/or sexual violence from a male intimate partner at least once in their lifetime⁴⁹. Most intimate partner violence that women experienced was repeated many times, with only 5% of women saying that the violence had only occurred once. Three-quarters of the women who had experienced physical violence had experienced severe acts of violence. More than half of ever-partnered women had experienced emotional violence by a male intimate partner.

⁴³ As quoted in Monash Study on Poverty and Agriculture, p12.

⁴⁴ UNDP website accessed 28 November 2016

⁴⁵ Report of the Special Rapporteur on extreme poverty and human rights, Magdalena Sepúlveda Carmona, Para 28

⁴⁶ Timor-Leste Census 2015.

⁴⁷ Country Gender Assessment p 82

⁴⁸ World Bank, Policy Note: Assessing the Bolsa da Mae Benefit Structure: A Preliminary Analysis, June 2015.

⁴⁹ Nabilan Health and Life Experiences Survey, 2016, p49.

More than half of the women who had experienced partner violence stated that the violence occurred in front of their children. Ever-partnered women aged 15-19 years were at most risk of intimate partner violence (51% prevalence rate in last 12 months), followed by women aged 20-24 years (48% in last 12 months)⁵⁰. The greater the number of controlling behaviours a woman experiences from her husband, the higher the likelihood she will experience violence⁵¹.

14% of women aged 15 to 49 have been subjected to sexual assault by a non-partner, with 10% in the last 12 months⁵². Of those men who stated that they had ever raped a woman or girl who was not their wife or girlfriend, the rates were higher for Manufahi District (22%) than Dili (15%). More than half of the men who said they had raped did so for the first time when they were teenagers⁵³.

Rates of violence against children and rates of child trauma are high for both boys and girls. The impact of this is that men who have experienced or witnessed violence as a child are more likely to perpetrate violence as an adult. Similarly, women have experienced or witnessed violence as children are more likely to experience violence as adults. The Nabilan Baseline study⁵⁴ found that 72% of female respondents had experienced one form of physical and/or sexual abuse by the time they were 18. The figures were higher for men with 78% in Dili and 77% in Manufahi. Childhood trauma also has implications for adult mental health with both men and women who had experienced childhood trauma more likely to report feelings of depression and suicidal thoughts⁵⁵.

Ending violence against women has been a key advocacy issue for women's NGOs since 1998. There are a number of long-standing organisations that monitor and advocate for ending violence against women and a range that provide services to women and children affected by violence. TOMAK should ensure that program staff are aware of referral networks for violence in each municipality in case they come across violence in the course of their work.

2.12. Social inclusion

Timor-Leste has strong constitutional and legal provisions guaranteeing equality for all, ensuring their equal participation in economic, social and cultural life and protecting them from all forms of discrimination. This provides an overarching policy framework for looking at social inclusion issues.

The Government of Timor-Leste (GoTL) has made significant progress in establishing baseline data and setting up systems for on-going data collection in key areas which paint a picture of vulnerability. The National Census and household based sample surveys such as the Timor-Leste Survey of Living Standards (TLSLS), the Demographic and Health Surveys (DHS), and the sectoral data systems such as Education Management Information System (EMIS) and Health Management Information System (HMIS) have served as important data sources to support the Government's decision-making around priorities and vulnerable groups.

A National Policy adopted by the Council of Ministers in 2012 seeks to promote equal opportunities, active participation and improved quality of life for people with disabilities. It recognises the impact of discrimination against people with disabilities and urges government and state agencies to ensure they are taking into consideration the promotion and protection of the rights of people with disabilities in planning and implementation of programs. In 2014, the Timorese Association of People with Disabilities (ADTL) produced a National Action Plan for People with Disabilities for 2014-2018.

Most of those with a disability live in rural areas. The 2015 National Census found that around 3.2% of the population is classified as having a 'walking, seeing, hearing or intellectual/mental condition'. The largest category of disability is difficulty with vision, but many people have more than one disability. The graph below presents 2015 census data on disability by gender and location. As can be seen from the graph, in most

⁵⁰Asia Foundation, 2016 p53

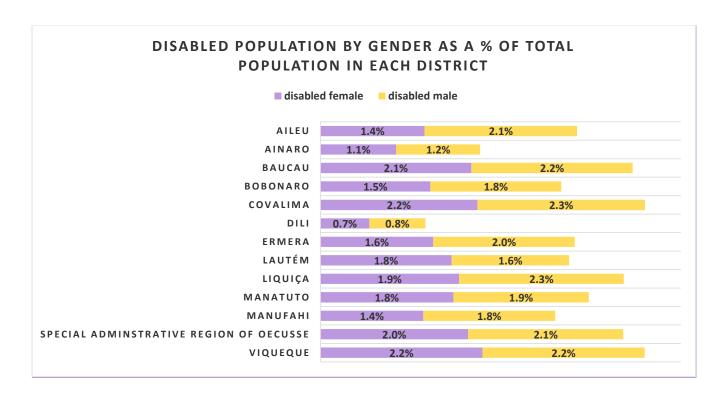
⁵¹ Taft, 2013, p4

⁵² Asia Foundation, 2016 p 63

⁵³Asia Foundation, 2016, p 63.

⁵⁴ It is important to note that the Nabilan Baseline Study is nationally representative for women but not for men. Hence the results for men are for those sites in which the study was conducted with men, Dili and Manufahi.

municipalities there are fairly equal numbers of females and males with a disability. Exceptions include Aileu, which has a disproportionately high number of disabled males, and Lautem, which has a disproportionately high number of disabled females



The 2010 Census found that the majority of people with disabilities cannot find work⁵⁶. People with disabilities tend not to be involved in self-employment programs, vocational training programs or youth training programs⁵⁷. The Secretary of State for Employment and Vocational Training has developed a Disability Action Plan within the National Action Plan which is aimed at disability inclusion and promoting the rights of people with disabilities⁵⁸.

The National Action Plan notes that there is little disaggregated data on the health of people with disabilities or their access to health services⁵⁹. There are few trained specialist health professionals, limited ability to assess disability, and physically inaccessible health facilities⁶⁰. The Ministry of Health has outlined detailed plans within the National Action Plan to include people with disability in planning and implementation.

The Timor-Leste National Action Plan for People with Disabilities notes that women with disabilities in Timor-Leste are 'doubly marginalised' because they are women and have a disability. The Plan notes that women with disabilities are particularly vulnerable and are less engaged in decision-making and in the community⁶¹. A DPO submission to the CEDAW Committee in 2015 argued that understanding the real situation faced by women and girls with disabilities is hampered by a lack of statistical data⁶².

⁵⁶ NAP, page 18.

⁵⁷ NAP, page 18.

⁵⁸ NAP page 20.

⁵⁹ NAP, page 31.

⁶⁰ The United Nations Country Team Report to the Universal Periodic Review (26th Session of the UPR Working Group Oct-Nov 2016) also notes lack of access for people with disabilities to health services and lack of trained medical

⁶¹ NAP, p23

⁶² Ra'es Hadomi Timor Oan. (2015). Submission to the 62nd Session of the CEDAW Committee: Recommendations for the committee's concluding observations on Timor-Leste, p. 8. Available from http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/Countries.aspx?CountryCode=TLS&Lang=EN

There are a number of NGOs working on disability in Timor-Leste including the peak organisation, Timor-Leste Association of People with Disabilities (ADTL), and *Raes Hadomi Timor-Oan* which works on a range of disabilities and has municipal representatives across the country. The government agency responsible for disability is the Ministry of Social Solidarity which has worked closely with DPOs for many years and which is currently engaged in the process of forming a National Council for Disabled Persons. DFAT's Disability Adviser noted a lack of representation of people with different types of disability and women with disabilities and a need to increase the range of voices.

Other factors that may influence social inclusion, in addition to the two most documented ones of gender and disability, include, age, status and ethnicity. These are less pronounced in Timor-Leste in comparison with other countries. There is no persecution of minority or indigenous groups and while a linage of Luirai (sacred) families who dominate traditional leadership exists, there is nothing like caste systems evident in other countries. For age, there is a recent history of youth gangs, linked to martial arts groups, becoming violent with each other and perpetuating the internal conflict experienced in Timor-Leste in 2006. Typically, younger people and the very elderly are more vulnerable to social exclusion than other groups, as can be found in most countries.

The GESIA process was eager to understand the interplay of factors contributing to social exclusion, and the following section attempts to provide some analysis. It is recommended that TOMAK continues to understand the influence of these factors in order to better target program activities.

3. GESIA Findings

TOMAK drew on a gender empowerment framework to understand gendered differences relevant to program implementation. The domains against which the assessment was made are (i) roles and responsibilities; (ii) household decision-making; (iii) access to and control of assets; (iv) access to public space and services; (v) claiming rights and meaningful participation in public decision-making; (vi) control over one's body; (vii) violence and restorative justice; (viii) and aspirations for oneself.

While there are overlaps in relation to a number of the domains, the framework provides a useful way of seeking a nuanced understanding of both social and economic gendered differences. The GESIA used the framework to also look at social inclusion, although the study focused largely on people with disabilities. Findings are presented in this section, based on both the desk review and fieldwork.

3.1. Roles and responsibilities

Roles and responsibilities in **food production**, household feeding and income-generation are highly gendered in Timor-Leste. Women are centrally involved in many of the activities linked to all three areas of food production, household feeding and income-generation, often taking on a larger range of roles and having a heavier time burden than men. Men are also involved, but their roles often require less time. Roles are fluid and can be shared by men and women and, due to intergenerational differences, younger men are providing more support to women in their household work⁶³.

There is a high dependency on support from younger members of the family, both girls and boys and young men and women, to produce food and generate income. This means that those who are less physically able and who do not have relatives to support them are at greater risk of food insecurity. Women and men with disabilities are still expected to engage in gendered roles despite their physical constraints, relying on such activities to feed their children. Older men with disabilities and with young families are more supported.

Women play the key roles in **food preparation** within the household. Women prepare ingredients and cook, including lighting fires. Collection of firewood and water is done by both men and women, girls and boys. These tasks often occur daily but are also frequently performed two to three times per week (firewood). There is a heavy time load for women. The largest category involved in food preparation (in both male and female FGDs) was female children, followed by male children. Women marrying into families are involved in food preparation, probably being delegated by the husband's mother. Grandparents, in particular grandmothers, assist with looking after and feeding young children.

Both male and female roles in food preparation are often delegated as younger members of the household grow older, but the roles remain gender-defined. For example, male involvement in food preparation seemed to be more common for younger male parents than older male parents. Adult male involvement in food preparation was generally confined to special events, where they would be required to kill and prepare meat for cooking. The exception to this is the role of younger male parents in helping to mind children while their wives cook. Once children become old enough to help, fathers become further removed from the task. In Osorua, for example, both older men and women parents stated that women cook without the husband's help although he might collect the wood or water. Children will help but, if they are at school, the women cook alone. In Ostiko, one male participant stated that:

'Before when the kids were still little the husband does everything, but now when the kids are already bigger the wife and female kids cook, with help from the male kids to get water and wash the dishes⁶⁴.'

Older women also delegate cooking to younger women, although appear to still play a central role in managing the household meal preparation. Once children start going to school however the larger share of the burden returns to the mother. In Osorua, a number of older married females had less help with the daily household tasks as the husbands no longer assisted and the children were at school⁶⁵. The role of younger

⁶³ Field Work and Care Gender Analysis for Safe Motherhood Program, 2013, p10.

⁶⁴ FGD 3, Ostiko.

⁶⁵ FGD 2 Osorua.

siblings and children alleviating the burden of women's household work is important. Research on the economic dimensions of domestic violence in Timor-Leste found that younger women are more restricted in income-generating activities than older women⁶⁶. Presumably as their children become older, they receive more help with their many tasks and can focus on income-generation.

Men and women can be involved in all tasks of **growing food**. Field preparation and fencing is often done by men. For certain crops, such as groundnut and shallots, only women perform the planting. **Harvesting** is done by men and women together. Men are also involved in transporting the harvest to the home or storage. Some crops have a higher level of involvement by women in harvesting, in particular maize and peanuts, possibly because the drying process is solely performed by women. Storage of harvest and seeds is also organised by women using household space. Rice production is done by both men and women. Those who can afford it will on occasion employ labourers to assist, especially in Maliana.

Research on gender roles in maize production conducted by the Food and Agriculture Organisation (FAO) in 2014 found that, 'In all districts, women do more of the work related to planting (preparing seeds, making a hole and placing seeds), and harvesting and drying the maize'67. The research found that men do more of the work preparing and making fences with women carrying fencing material and cooking for the men.

Some activities for field preparation and planting are done by several families working together to support each other. This was described in FGDs using the Indonesian term *gotong royong*. Men and women were both involved in supporting others in this way. The system appears to be most used in more rural areas, but less so closer to urban areas. In Saburai, building houses also often occurs through *gotong royong*.

Buying food is generally performed by women, but women's limited mobility means that for the more remote villages this task was often delegated to men. In particular, in Ritabou and Saburai (where men's work as motorbike taxi drivers takes them into the larger towns and gives them access to markets) they were often the ones to buy food from the market. Women would buy food if they were at the market selling produce, or if they could get food in their village. In remote villagers with limited access to markets, women were engaged in bartering of crops for household consumption.

Transporting and selling crops involves both men and women, depending on the crop. Shallots, mung bean, groundnut, beans etc. are usually transported and sold by women in small amounts of 3-4 kg at a time, until all stock has been sold. Men do some of the work of transporting goods to market, but generally not the selling, except for cattle. There are also status implications affecting whether women sell at the market. Women from a Liurai family would not sell in the market as it is considered culturally beneath them.

There are gendered differences in relation to who manages **livestock** on a day-to-day basis. For all areas surveyed, women generally look after chickens and pigs while men largely manage goats. This includes day-to-day care and feeding. Both men and women look after cattle. Cattle generally roam free within a particular area and someone is appointed to look after them in the field. This person may or may not be an owner of some of the cattle. This is usually a man (of any age) but the team also found an example of a women looking after the cattle. In Saburai, the team spoke to a woman who owned a number of cattle and her sister also owned cattle. The women brought the cattle together and the day-to-day care was shared among the sisters and their families. Women and men sell cattle, but women lead more on the sale of pigs and chicken. There were not many examples of women having physically sold a cow whereas for pigs it was more common.

In Ritabou, a woman who was a widow described how she must ask the permission of all of her children over 12 years if she wants to sell a cow that had come from her late husband's side. If she owns the cow independently from her late husband she must inform them but does not need their permission to sell it. There were not many examples of women having sold a cow.

Women seem to have a high level of ownership over pigs, and pig-raising is mainly considered women's work. Having a pig provides a woman and her family with a safety net. Pigs are often given by women on behalf of their family for cultural events. Pigs can be managed closer to home than cattle or goats and are fed by

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⁶⁶ Beyond Fragility and Inequity: Women's Experiences of the Economic Dimensions of Domestic Violence in Timor-Leste, The Asia Foundation, p56.

⁶⁷ Gender in Agriculture Mechanization in Timor-Leste, FAO, September 2014, p3.

women, often consuming household scraps. Women are more likely to take a decision to sell a pig than they are for cattle.

In terms of livestock health care, women have a stronger interest in breeding, pregnancy and vaccination than men. They suggested they were more willing to call village livestock officers in and/or pay for veterinarian services than men. Yet women had virtually no relationship with village livestock services compared to men.

Table 5: Break down of roles on the gendered division of livestock management - TOMAK GESIA field work

F-Female M=Male	Breeding	Feeding	Health	Decision- making to sell or use	Transporting	Selling
Cattle	F & M	F & M	F & M	M & F	M	M
Pig	F	F	F	F & M	F & M	F & M
Goat	M	M & F	M & F	M & F	M	M
Chicken	F	F	F	M & F	F & M	F & M

The Asia Foundation's research on the economic dimensions of domestic violence found that women perceive they are involved in many more income-generating activities than men, and they consider their economic activities of value to the household⁶⁸. Women research participants in Baucau felt that their income-generating activities were equal if not more important to the household than their husband's⁶⁹. This is critical in relation to household feeding and is supported by research by Monash which found that: 'Increased income from selling food crops has the strongest impact: an extra dollar of income translates to 87 cents more for food consumption' ⁷⁰.

There are gendered differences in how the work of men and women was described by men and women, with greater value placed on the work of men. Women's work was often not referred to as work but as 'helping' with crops and livestock, despite the fact that women were doing a large part of the time-consuming and day-to-day work. Men were described by their wives and by themselves to be doing 'work', even though at times their tasks were the same as those of the women who were said to be just 'helping'.

In one situation, the survey team spoke to a woman in Saburai who had lost the labour of her son as he was 'looking for work'. The son still lived (and ate) in the family home and the mother was required to cook for him, but he had stopped caring for their cattle and helping with other household food production chores. Her situation was more acute as her husband was sick and was no longer able to assist in looking after the cattle. This meant that the wife could not invest time in taking her cash crop (groundnut) to market to sell. The family had lost income and was dependent on people within their village coming to the house to buy the groundnut. The son had not yet found work.

Women's obligations to household tasks require more time than those of men⁷¹. Women in Timor-Leste tend to spend 50% of their time on domestic work, compared to only 36% for men⁷². In addition to this labour, women also perform other forms of labour, including income-generation.

In all areas surveyed, there was an absence of youth (15 to 25 years), despite at least two of the sites (Ritabou and Buruma) being close to high schools. This was more pronounced in more remote villages, where youth either lived away from home or travelled long distances to attend school or work. In some situations, families had young male family members studying or working overseas.

⁶⁸ Asia Foundation, 2015, p45.

⁶⁹Asia Foundation, 2015, p42.

⁷⁰ Inder, Brett, Brown, Anna and Datt, Gaurav, <u>Poverty and the Agricultural Household in Timor-Leste</u>: Some Patterns and Puzzles, Monash University, 2014, p36.

⁷¹ CARE International (2013) Gender and Power Analysis for the Safe Motherhood project.

⁷² UNDP Timor-Leste Human Development Report, 2011, p37. Note that the Country Gender Assessment (2014) points out that there is limited up to date data on time use. (p70).

A number of studies have pointed to the fluidity of gender roles within the household. For example, the Market Development Facility (MDF) report on poverty and gender states that there are times when men and women would *describe* strict roles pertaining to preparation of food and childcare, but the research team would find men looking after the household while the wife was away at market⁷³. However, there are still strong social norms regarding women and men's roles which impact men's willingness to adapt. In several FGD's, men spoke about how they could not cook because if their wife went out to the field and they stayed home to look after children and cook, people in the community would accuse them of not working and supporting their family. This would result in shame and loss of standing in the community.

The FAO Gender Mechanisation research asked both men and women about roles that were traditionally performed by women but which men are now taking on. Their results suggest that men appear to think that they are taking on more roles traditionally performed by women than women think they are:

'There are only three traditionally women's tasks that more than 5% of the respondents said men now help with: planting, harvesting and cooking. Three times as many men said they help with cooking than women who identified men as helping, so men have a greater impression that they help with cooking than women do. The difference in men and women's responses about men helping plant and harvest were not as large.'⁷⁴

Emerging clearly from the research was a family's dependence on labour for food security. When discussion group participants were asked who in the community was vulnerable regarding food security, the answer was often those within the community who had limited ability to produce food. This included older men and women who did not have families to support them, widows and FHH. Those most vulnerable are those without family upon whom they can depend to support income-generating activities, including food production.

Men and women with disabilities are much less likely to be engaged in income-generating activities. The survey team spoke to two men and three women with physical disabilities during the field research. One of the men was blind and the other four people had physical disabilities with their legs, although all had a range of movement. All five were engaged in income-generating activities for themselves and for their families. The women were required to engage in food production to support their households and earn income. Two of the women were single, with one forced to live with a male cousin and his family. In that household, she was required to support a range of household tasks including food preparation. The two men, both of whom were married and had older children, were more able to delegate their tasks to their children whereas all three of the women, even the woman who was still married, were actively producing food for household consumption and sale.

3.2. Household decision-making

Research on poverty and gender conducted by MDF in Timor-Leste in 2014 concluded that:

'Men and women reported that women manage the money and that men turn income they receive over to their wives. Decisions about spending tend to be made jointly, although women can decide on household expenditures without consulting their husbands.'75

Findings from the GESIA have dug deeper into this statement and have revealed the picture to be quite complex for rural women. The findings of the GESIA corroborate what the findings from the Asia Foundation that, while women are centrally involved in food production, household feeding and income-generation, there are gendered and intergenerational differences around decision-making.

Women appeared to have two main sources of income: income derived from their own agricultural activities, and money coming in from their husbands. A number of studies have confirmed that generally in Timor-Leste women hold the household money with the exception of situations of severe controlling abuse⁷⁶. The GESIA fieldwork confirmed that women frequently hold the income, but decision-making is performed in consultation with husbands, and certain decisions are taken without consultation.

⁷³ MDF Poverty and Gender, p40.

⁷⁴ FAO Gender in Agricultural Mechanisation, p8.

⁷⁵ Analysis of Poverty and Gender in Agriculture in Timor-Leste, Market Development Facility, Timor-Leste, 2014, p45

⁷⁶ See for example Asia Foundation, 2015

Overwhelmingly, across the six suku surveyed, women said that they could make decisions on very basic day-to-day meals such as rice, instant noodles and vegetables. Some women said that they would have to consult their husbands to buy instant noodles or vegetables. In terms of adding protein to a meal, women were nervous to take this decision on their own and would consult their husband or other family member with status in the household. This analysis is supported by the Asia Foundation research which found that 'while women are purchasing food, there is a level of consent given by the man. While they didn't ask permission, they would inform the husband after the purchase'. Food choices were mostly driven by economic and time factors, although availability of food, including access to markets, was also a significant factor.

Where communities are better off, for example in Ostiko, women make decision on eggs, chickens and other resources available in the village. Women generating their own income were generally more confident to use that income to buy more nutritious food. For example, of the nine older women participants in an FGD in Osorua⁷⁸, five are generating their own income. The majority of women in this group stated that they could take the decision themselves to buy tempe provided they use their own income. However, when asked if they could decide to buy meat, only three stated that they would be prepared to take this decision on their own. Discussions with men in the same suku confirmed that men and women had generally the same understanding of decision-making. This was also consistent across all six suku although in Ritabou, the team found that older women felt they had more control over small purchases than older men.

Younger female parents in Osorua appear to be less confident to buy small quantities of meat, with only one participant out of four in an FGD stating she would make the decision⁷⁹. This may be connected to older women being better able to generate their own income.

Purchase of an imported chicken (*ayam potong*) may be easier for some women than using a household-owned chicken to feed the family. Older women in Ritabou seemed more confident in buying imported chickens than in other places. In general, women made a very clear distinction between buying imported chickens rather than killing a household chicken which was seen as a more valuable asset. One woman stated that conflict could emerge in her household if the husband wanted to go cockfighting but she had killed the chicken for dinner.

Women can sell certain crops (such as groundnut and shallot) without consulting their husbands, but othersecrops, such as rice and maize, require a joint decision. Selling larger animals was seen as requiring the husband's permission in all areas surveyed. There may be varying degrees to which a woman can suggest the sale, but the man makes the final decision to sell. Women living with their mothers-in-law may find their mothers-in-law have additional control over the sale of assets from their mothers-in-law. In Saburai, women participants in an FGD stated that even if their daughters-in-law had earned money from working, they still have to consult their mothers-in-law if they want to buy food⁸⁰.

It is important to note that mutual agreement on decisions needs further understanding. It does not necessarily mean a situation in which two people of equal status have agreed on a particular matter. The Marie Stopes International/La Trobe Study on decision-making in reproductive health states that:

'.... although many men and women perceive that reproductive health decision-making and planning processes are mutual, for some couples 'mutual' appears to contain an element of coercion. The wife should agree with the husband despite any wishes of her own, or face potentially adverse consequences and outcomes.'81

The Asia Foundation (2015) research also points out that it is important to recognise the risks inherent in perceived views that women control household spending⁸². A wife is 'held to account, potentially violently, for shortfalls'.

⁷⁷ Asia Foundation, 2015, p62

⁷⁸ FGD 2, Osorua

⁷⁹ FGD 1, Osorua.

⁸⁰ FGD 3, Saburai.

⁸¹ Reproductive Health Decision Making in Viqueque, Baucau, Ermera and Dili, Timor-Leste, Marie Stopes International and La Trobe University, 2016, p18.

⁸² Asia Foundation, 2015, p62-63.

This has implications for TOMAK in designing interventions linked to household decision-making. It will be important for the program to have a more detailed understanding of household decision-making in specific target areas. CARE's 'Safe Motherhood Program Gender Analysis' found that:

'The DHS [Demographic and Health Survey] measured women's ability to make decisions jointly with her husband in four areas: 1) their own health care, 2) making major household purchases, 3) making purchases for daily household needs, and 4) visits to the woman's family or relatives. Just 50% of women in Covalima participated in all four decisions, compared with 82% of women in Ermera and 85% of women in Liquica. While 92% and 90% of women in Ermera and Liquica made decisions about their own healthcare jointly with their husbands, just 57% of women in Covalima participated in these decisions.'

It cannot be assumed that women in **matrilineal areas** have greater ability to make decisions without consulting their husbands. Matrilineal and patrilineal systems should be seen as a continuum rather than separate systems. Neither is practised in its entirety, resulting in many possible variations. More needs to be understood about how gender impacts decision-making in married-in and married-out communities. Factors impacting differences include whether both the husband and wife are from the area, who has married in, the extended families' ownership of land etc.

In Saburai which is matrilineal, both men and women can own land but this does not necessarily translate to greater control over household food assets by women. Women and men participants in FGDs in Saburai perceived the same level of control by husbands over women's decisions to purchase food or to use livestock for food. Men cannot own land but they can use it with some freedom. There were indications that women in Saburai had more control over pigs and chickens, with men saying they could not sell pigs or chickens without the wife's consent – although in the end the men needed to be comfortable with the sale of the asset.

Men and women with disabilities face multiple layers of discrimination impacting their control of resources and access to education and employment. In relation to decision-making, the situation facing the five people that the GESIA survey interviewed varied. The men appeared to still play a major role in taking key decisions around food resources. They were not excluded from household decision-making and were still considered to be the heads of the households.

One of the women who was not married but had a daughter was dependent on a male cousin for a home and income generation. She had previously been asked to leave her brother's house and was vulnerable to losing shelter. She appeared to have no authority in the household other than over her daughter, with the male cousin's wife taking key decisions around spending of household resources on food. She did not make the decisions regarding her own pension, as these were taken by the male cousin. She could take decisions on the small amounts of money she was able to earn through her own means.

3.3. Control over productive assets

Women's ability to access and utilise productive assets has significant impacts on family wellbeing, including nutrition.

Land in Timor-Leste is largely owned by men, with the exception of matrilineal areas. Four-fifths of land in Timor-Leste is acquired by inheritance under customary law, resulting in women's access to and control over land being extremely limited⁸⁴. However, women are able to negotiate use of the land. Access to land is highly significant for income-generating activities for women. Field research for the Asia Foundation (2015) found that women participants in Dili were much more vulnerable and dependent on their husbands than those in more rural areas because they had less access to land than women in rural areas who were able to grow crops for cash income⁸⁵.

In patrilineal areas, women generally do not have exclusive control over land. There may be situations in patrilineal areas in which women do have control through inheritance, marriage exchange or negotiation and likewise situations in matrilineal areas were women do not have sole control. The assumption cannot be made

⁸³ CARE Timor-Leste, Gender Analysis for the Safe Motherhood Program, p12.FGDs.

⁸⁴ IFC, 2010, p51.

⁸⁵ Asia Foundation, 2015, p42

that women in matrilineal areas are able to determine land use – women may still have to consult with their families⁸⁶. A study on gendered access to customary land in Timor-Leste did not find a strong relationship 'between gendered land access and decision-making in the household. Apart from their role in managing the household budget, women in the three study areas were less influential than men in household decision-making'.⁸⁷

In terms of **crop sales**, the GESIA fieldwork confirmed that women can sell certain crops, including groundnut, mung bean and shallots without consulting husbands. Selling is done either by travelling to markets – often alone – or through bartering in the village. Other crops, such as rice and maize, require joint decisions. This finding is supported by a number of sources. Women participants in FGDs for the Asia Foundation research (2015) stated that they had sole control over papaya, potatoes, maize, rice, groundnut, coconut, mung beans, bananas, cucumber, pumpkin and mango. Women do not have control over land, livestock, transport, television, the house, and phone.

Livestock is rarely used to feed the household, but tends to be retained for cultural obligations. In all locations surveyed, men and women of all ages confirmed that cattle are held as an investment and used when there is a cultural obligation, such as a marriage exchange. While women have more ability to negotiate sale or use of chickens and pigs, men control decisions over cattle. One family in Saburai had also sold a cow to build their house, while another had sold a cow to pay for their son's university fees in Indonesia.

In relation to **tools**, FAO's research on mechanisation in agriculture found that:

'There are no cultural restrictions or designations on tool usage, but there is some indicator of who uses which tools most frequently. Most likely this relates to availability of tools during clearing and ploughing of the land and harvesting of maize'.88

Women generally hold **household money** and have a high level of involvement in how that money is spent in Timor-Leste, but this does not always mean they are in control of the spending. Of significance to TOMAK is that women who participated in the GESIA study appeared to have significant control over any income they generated themselves. Citing the Demographic and Health Survey data (2010), the Asia Foundation (2015) notes that 'fewer women (68 percent) than men (75 percent) perceive there to be joint decision-making over the husband's earnings, indicating that perception of control of these assets remains gendered.'⁸⁹ A perception of control of household spending can also be a risk factor for women. As the Asia Foundation research found however:

'Holding the money' within the household can be a double-edged sword for women. It allows them a measure of control, but can also place them at risk and further increases their integration into a domestic sphere⁹⁰.

In situations where women are experiencing violence from their husbands, they are likely to hide money and engage in less 'conspicuous' spending as a protection strategy⁹¹.

MDF's study on poverty and gender found that 'when there is increased income from agricultural activities, the whole household benefits'. Women participants in the GESIA fieldwork who generated their own income were more confident to buy small amounts of meat and other proteins. Research by Monash University (2014) also found that 'the benefits of increased income are with increased diversity of food intake – households consume more meat, fruit and leafy vegetables'92. The study also notes:

"...it is often found that on average, when a mother receives income, more of that money is spent on direct family needs like food than if an adult male earns the income. It is likely that some of the income sources which most translate to food production (e.g. food crops sold at local markets) are primarily earned by women,

⁸⁶ Asia Foundation, 2015, p68

⁸⁷ Gendered access to customary land in East Timor, Pyone Myat Thu, Steffanie Scott, Kimberly P. Van Niel, GeoJournal (2007) 69:239–255, August 2007, p251

⁸⁸ FAO, Gender in Agricultural Mechanisation in Timor-Leste, September 2014, p7.

⁸⁹ Asia Foundation, 2015, p 57.

⁹⁰Asia Foundation, 2015 p36.

⁹¹Asia Foundation, 2015, p61.

⁹² Inder et al, 2014, p2.

and this may explain the higher returns for food consumption compared to other income sources that are more likely earned by men (e.g. employment income).'93

The Asia Foundation (2015) found that women perceive that they spend money largely on household necessities and food, whereas they perceive that men spend more on items such as alcohol, cigarettes or cultural obligations⁹⁴.

All of the people with **disabilities** interviewed during the GESIA survey were receiving the government disability allowance. One of the women was required to provide the money she received from the government to the male relative with whom she and her daughter lived. There were 10 people living in the house and she was expected to help with collection of water and firewood. She needed to work to earn extra money to feed her daughter, despite the host household receiving the pension, but faced challenges regarding not having control over productive resources such as land.

All five people with disabilities are engaged in income generation activities. They all described how their physical disability reduces their ability to produce food, although those with immediate family around them were more supported as a unit to produce food. The two men and one of the women had access to land and were supported by their families to grow crops and care for livestock. A third women was supported by her family and was producing cakes. The two men had greater access to information, one having been connected with Ra'es Hadomi Timor Oan (RHTO) a disability support organisation and the other, being a respected leader in the community and invited to community meetings. Information from RHTO based on a membership consultation indicates that women with disabilities are less likely to be employed.

'Women with disabilities face particular barriers and struggle to enter employment. This is despite the legislative protection provided by the Labour Law of Timor-Leste, which prevents discrimination against people with disabilities when they apply for or are in employment. 95

Disabled women face barriers in accessing education or vocational training, thus hindering their ability to enter into employment. Of 49 women with disabilities interviewed by RHTO for the organisation's submission to the CEDAW Committee (2015), '86 per cent said they had never accessed vocational training, and 65 per cent do not work or engage in livelihood activities.'96

In terms of other vulnerable groups, in all sites in which GESIA fieldwork was undertaken, men and women stated that those most vulnerable to food insecurity were widows, elderly men and women, orphans and FHH. What is not talked about but needs to be considered for further study is the place of younger boys and girls and men and women who are placed to live within families for different reasons. This is often done for schooling or care reasons.

The Asia Foundation (2015) quotes World Food Program (WFP) data from 2006 that FHH, while experiencing more food insecurity – do not have worse rates of child stunting, 'suggesting that while female-headed households are more often food insecure, these women are often able to navigate this situation well enough to avoid the worst health outcomes for their children'. The Seeds of Life (SoL) End of Program Survey also found that FHHs had a greater 'Progress Out of Poverty Index' than male headed households. A number of factors are likely to be relevant, including the women's ability to negotiate use of land, her living circumstances (whether still in the family home), and whether she has older children to assist her with income generation. One of the FHHs interviewed stated that she could only eat meat on very special occasions, such as on Christmas and All Souls Day (finadu). She commented that she is the most vulnerable person in the community as everyone else has their family.

⁹³Inder et al, 2014, p36.

⁹⁴ Asia Foundation, 2015, p60-61.

⁹⁵ RHTO CEDAW Submission, 2015, p4

⁹⁶ RHTO CEDAW Submission, 2015, p7.

⁹⁷Asia Foundation, 2015, p38.

3.4. Access to public spaces and services

Women's **time commitments** to household responsibilities limit their ability to access public spaces and services as well as livelihood opportunities. The Asia Foundation research (2015) states that women work six hours more than men per week and only attend trainings or undertake paid work if temporary arrangements can be made to absorb their domestic responsibilities⁹⁸. One woman participant in the GESIA survey from Ostiko stated that she had attended a food exhibition in Baucau for one week to learn about food production. The exhibition was organised by local NGO CDC. She was supposed to stay for another week travelling to Dili, but her husband did not allow her to go as she had already spent one week and this meant there was noone to cook for the family or take care of the children⁹⁹.

Women and men appeared to have the same levels of **mobility** to access fields to produce crops and livestock. Generally, men and women walked to the fields, although for particular crops men's presence was limited and they were not required to travel there daily. Further inquiry is needed to understand women's security in relation to travel to the field. Only one woman raised her own security as a concern in crop management, however one other said it was no longer a concern because she was old¹⁰⁰.

Access to markets was more limited for women, in particular in the remote suku. Markets are overwhelmingly located at the Administrative Posts and the Municipal towns, and take place on different days of the week – usually only once per week. In-between market days, and for those with less mobility, bartering within the village is common. In one village, (Viqueque), an informal market had been established to support trading.

In transporting crops and livestock to market, women relied on public transport, their husband and/or male relative to transport larger items to market such as rice and livestock. Women producing commodities such as shallot, mung bean and groundnut would travel themselves by foot or public transport to markets. In Saburai, one woman producing groundnut spoke about the fact that, since she has to take care of her sick husband, she can no longer travel to the market to sell her groundnut as she has too many other household tasks, including looking after the family's cattle. She used to be able to rely on her son, but he is no longer able to help her as he is looking for work, although he remains living in her house. The Asia Foundation research (2015) also confirmed the need for women to seek permission before going to markets¹⁰¹.

There are security concerns around market spaces, especially as rural women sleep in the larger market places for between two and six days at a time. There was little evidence of women being involved in Market place management

Women's limited mobility also impacts their access to other services including **access to health services**, information and their ability to participate in social networks other than the family¹⁰². Women generally require permission to go to the suku office but are able to go to the church, water source or primary school without permission¹⁰³. Pregnant women participating in the GESIA spoke of being dependent on husbands to take them to clinics, or wait for visits from the government integrated health clinic, SISCA (Servisu Integradu da Saúde Communitária), with one woman's husband commenting that he was too embarrassed to take her to the clinic.

The SoL End of Program Survey found that women beneficiaries had much less **access to information** than men. Men receive information from suku extension officers whereas women get it from relatives ¹⁰⁴. Few women who participated in the GESIA had heard of groups or government agencies supporting agricultural production in their suku – but they did know about the women-specific groups that existed. For example, in

⁹⁸ Asia Foundation, 2015, p41.

⁹⁹ FGD 2. Ostiko.

¹⁰⁰ Transect Walk 2, Ostiko.

¹⁰¹ Asia Foundation, 2015, p49.

¹⁰²Asia Foundation, 2015, p48.

¹⁰³ Asia Foundation, 2015, p51.

¹⁰⁴ Seeds of Life End Of Program Survey, p10.

Ostiko the women are supported by a group called *Grupu Feto Desenvolvementu*, and women participants talked about the group's work.

Men and women with disabilities have less access to government services in Timor-Leste¹⁰⁵. A 2013 study on access to health services for people with disabilities found that discrimination, lack of understanding and knowledge among health care workers, inaccessible health care facilities and lack of knowledge among people with disabilities about available services result in the healthcare needs of people with disabilities not being addressed¹⁰⁶. RHTO claims that the government's mobile health clinics (SISCA) are not yet inclusive and people with disabilities cannot access them¹⁰⁷.

Mobility is a significant barrier for those men and women with disabilities interviewed by the GESIA team, although the team only met people with physical disabilities. The women in particular displayed a strong reliance on the household to support income generation due to their physical disabilities. One woman with a physical disability produced food at home. She spoke of wanting a fridge so that she could produce ice from home. All five spoke about challenges with working on crops because of their physical disabilities.

Women with disabilities face multiple layers of discrimination in accessing government-funded services ¹⁰⁸. Women and girls with disabilities in rural areas face extra challenges due to the distance to health posts, and lack of accessible transport. Recent research by RHTO and CBM found that there appears to be less understanding of the rights of women with disabilities and that this is more significant in rural areas ¹⁰⁹. There also appears to be less recognition of the rights of women with disabilities as opposed to women without disabilities to have children among service providers ¹¹⁰.

Women with disabilities are more restricted in their ability to participate in community activities and face additional barriers based on their gender and disability:

"...of 49 women with disabilities interviewed for this submission, **67 per cent said they are not able to** participate in community meetings."

The women with disabilities interviewed by the GESIA survey had less access to information and support – not being aware of any NGOs or receiving information from the radio. The man in Viqueque had heard of RHTO. One woman had no immediate family assisting her and so was dependent on a male cousin to whom she had to give her disability pension. She had not heard of any NGOs supporting people with disabilities. All the people with disabilities interviewed by the team were receiving the government disability support pension. This may not be the case for all people with disabilities. RHTO notes that women with disabilities have not been able to access the disability pension because of lack of support from family or community leaders, difficulty getting the official paperwork required, and inability to travel to government offices. One female RHTO member said:

'I cannot get help from the government through the subsidy because our Chefe de Suku (village chief) does not place attention on people with disabilities. Sometimes I go intending to talk to him, but he always says he doesn't have time.'112

The disability pension does not cover children with disabilities, placing families in already difficult situations in an even more difficult one. RHTO has also raised concerns about the fact that government payments are infrequent, making relying on them very difficult¹¹³.

¹⁰⁵ National Action Plan for People with Disabilities, 2014.

¹⁰⁶ Megan McCoy, Cornelio De Deus Gomes, Joel Alex Morais and Jonio Soares. 2013. "Access to Mainstream Health and Rehabilitation Services for People with Disability in Timor-Leste".

¹⁰⁷ The National Action Plan for People with Disabilities, p31.

¹⁰⁸ RHTO CEDAW Submission, 2015, p8.

¹⁰⁹ Access to maternal and newborn health services for women with disabilities in Timor- Leste, August 2016 CBM-Nossal Partnership for Disability Inclusive Development & Ra'es Hadomi Timor Oan, p 5.

¹¹⁰ CBM-Nossal & RHTO, 2016, p6.

¹¹¹ RHTO CEDAW Submission, 2015, p6.

¹¹² RHTO CEDAW Submission, 2015, p7.

¹¹³ RHTO CEDAW Submission, 2015, p 9

3.5. Claiming rights and meaningful participation in public decision-making

Timor-Leste has been criticised by the CEDAW Committee for discrimination against women in public life:

'Women in the State Party continue to face persistent barriers to access decision-making positions, including discrimination in recruitment; discriminatory stereotypes and attitudes towards women's participation in political and public life; little support from political parties and families; and low confidence.'114

The 2016 suku elections have seen the number of women village chefs increase from 10 to 21, but this figure (around 5%) is in stark contrast with that of men (95%). Almost 40% of suku had no female candidates at all. There are a number of women's organisations, both national and municipality based, that focus on supporting women's participation in public decision-making and women's economic empowerment. These organisations have provided support for increasing the number of women village chiefs.

There are two positions for two women representatives on suku councils. While women in these roles are often constrained by gender norms requiring that women manage funds and arrange hospitality, these roles do provide an important conduit for women in the community to raise issues of concern and to support women.

The six suku in which GESIA fieldwork was undertaken comprised only one suku with a female *Chefe de Suku* and five with male village chiefs. In at least one suku there were no female candidates for the suku elections. The suku with the largest number of female candidates was Ritabou, which is also the suku with the female *Chefe de Suku*. In the field, despite the lack of female candidates, women talked often about the elections and raised issues on subjects that relate to daily aspects of their lives. When the team visited Ostiko, there were around 40 men sitting outside a house. No women were present and the team was informed this was the house of one of the candidates for *Chefe de Suku*. There were no female candidates in Ostiko and when older women parents were asked why no women had put themselves forward as candidates, the women stated that they preferred to support the men from behind.

Women's household responsibilities have a significant impact on their ability to participate in pubic decision-making roles. Women have little time to sit and attend meetings, with constant requirements to cook and care for children and engage in income-generating activities. There are however strong expectations around public roles. Women in Ostiko stated that when making financial contributions to local cultural events, they would list the contribution with their husbands' name and not theirs, as he is the head of the household. This was the case even for women who had generated the income themselves.

Women interviewed had a range of knowledge of development projects such as PNDS, R4D and other Government Projects. Women who knew about PNDS mentioned how the system gave women a process and voice to be involved in suku development that they hadn't had before. One woman mentioned that PNDS was pure and free from entrenched politics that surround the suku leadership system.

TOMAK needs more information on engagement of men and women with disabilities in decision-making. The National Action Plan for People with Disabilities states that people with disabilities still face discrimination in the media and that the media is not accessible for many disabled. For example, there are no sign language interpreters or captioning¹¹⁵. One of the men with a disability stated that he was often invited to meetings. This man had an acquired disability and had previously been a community leader. The three women did not talk about being invited to meetings.

¹¹⁴ CEDAW Concluding Observations, 22(a).

¹¹⁵ National Action Plan for People with Disabilities, p38.

3.6. Control over one's body

Women and girls in Timor-Leste have little control over their own bodies. The implications of this for women's ability to produce household food, provide and access nutritious food and generate income are significant. Women in Timor-Leste have one of the highest fertility rates in the world, with an average of 5.7 children¹¹⁶. Most women (60%) still give birth at home. This figure is even higher in rural areas (71%)¹¹⁷. While most women have assistance from a doctor, a nurse, a traditional midwife or skilled assistant, 33% still give birth with only relatives to assist them¹¹⁸. Men (and at times mothers-in-law) make decisions about care during labour and birth, and men make decisions about sexual relations. Women experiencing violence have less control over reproductive health choices¹¹⁹.

Women participants in the GESIA fieldwork spoke of pressure from grandparents to have large **numbers of children**. Participants also described the wealth benefits of having a larger number of children. Marie Stopes International and La Trobe University recently conducted research on decision-making in sexual and reproductive health focused in four districts, Dili, Baucau, Viqueque and Ermera. The study found that:

'Reproductive health decisions are perceived to be mutually made between husband and wife. Exceptions to this most notably include the decision to seek care during labour and birth, which is thought to be made by the husband or the woman's mother-in-law, and the decision to have sexual relations, which is perceived to be determined by the husband.'120

CARE's Gender Analysis for the Safe Motherhood Program also confirms the dominant role of the husband during birth:

'Over half of the focus groups and a third of the interview participants perceived it was the husband's decision to seek care for his wife during labour and decide on the place of birth. This was mainly believed to be because the woman was unable to focus on such decisions when she was in labour. A third of the interview participants also nominated their mother-in-law as the one to make the decision for them as to birth place.'121

The decision to access **family planning** is overwhelmingly described as a 'mutual' one between wife and husband. The MSI/La Trobe report analyses the notion of 'mutual decisions' related to sexual and reproductive health, noting that consequences for not making mutual decisions were often severe – with divorce and use of force referred to.¹²²

CARE's Gender Analysis for the Safe Motherhood Program also confirmed the presence of severe sanctions backing up a husband's power to control decisions regarding the number of children, with one husband stating that he would hit his wife if she took decisions without consulting him¹²³.

During the TOMAK GESIA study, the team asked questions on household decision-making and roles in relation to **care of pregnant women**. Overwhelmingly men and women participants stated that pregnant women should eat regularly and that there should be flexibility in terms of what they eat. There appeared to be many types of food that were identified by men and women as not being good for pregnant women to eat for cultural and health reasons. These included eggs, pineapple, goat, intestines, and food made from animal blood. However, there was less emphasis on what pregnant women *should* eat.

Most pregnant women stated that they found they needed to eat regularly but did not indicate how they increased the nutritional value of their diet. Most of the discussions with pregnant women were around what they should not eat and the fact that they needed to eat regularly. There was no mention of particular foods that pregnant women should eat to increase theirs and the baby's nutrition. There may be parallels with attitudes towards menstruation. The MSI/La Trobe research found that many participants talked about many

¹¹⁶ UNDP Human Development Report, 2011.

¹¹⁷ Census 2015.

¹¹⁸ Census 2015.

¹¹⁹ Nabilan Baseline Report, p102.

¹²⁰ Marie Stopes International, 2016, Reproductive Health Decision-making in Timor-Leste, p 17.

¹²¹ Marie Stopes Timor-Leste & La Trobe University, 2016, p37.

¹²²Marie Stopes Timor-Leste & La Trobe University, 2016, p 17.

¹²³ CARE Gender Analysis for Safe Motherhood Program, p12.

things women should not do during menstruation – this included not eating and drinking so that the period comes, not drinking cold water or eating cool foods, not taking a bath, not touching cold water and not washing hair¹²⁴.

The change scenario used during fieldwork to measure aspirations [see 4.8] indicated that in theory there was openness to change from both men and women, at least around feeding of pregnant women. Men and women participants in FGDs indicated that it was important for husbands to do what they could to increase the nutritional value of their pregnant wife's diet, although a number of participants in all locations pointed out that this would depend on the family's economic situation.

All stated that it was important for husbands to listen to advice from a doctor, with the women in Ritabou stating that it was important to listen to the doctor and the midwife. This is also supported by the Marie Stopes Timor-Leste and La Trobe study which found that '...advice and information provided by health professionals plays an important role in influencing the decisions couples make with regard to choosing family planning methods." 125

The evident strong recognition of the special needs of pregnant woman and importance of advice from a doctor needs to be analysed with other sources including results of the nutrition survey to confirm actual practices around feeding of pregnant women, as it may provide some entry points for TOMAK on nutrition.

There remains a lack of access for men and women to accurate information about family planning:

'Misinformation and myths pertaining to family planning persist across districts, ages and education status in our study. These myths contribute to the fear and distrust many people feel with regard to modern methods of family planning.'126

Women with disabilities report discrimination in terms of their rights to have and care for their children:

Women with disabilities reported that community members sometimes held negative misperceptions about their sexual activity and parental capacity. This included misperceptions that women with disabilities do not practice sexual behavior, a misperception also reflected by one service provider.'127

3.7. Violence and restorative justice

Fear of household conflict is impacting negatively on nutrition and use of food resources. Household tension and conflict can emerge over variety, convenience and use of resources and women are taking this into account in making decisions around each of these areas to avoid conflict. Men are also taking conflict into account but to a much lesser extent. Joint decision-making around a number of areas was seen as essential to avoiding conflict in the house. Meal preparation time is a key factor in decisions around using particular food types – white rice, instant noodles – to reduce household tension. Too much variety can lead to tension as can the same food served all the time. Use of resources without consultation leads to conflict for both men and women. The risk of this tension leading to violence is probably greater for the more valuable resources.

Rates of intimate partner violence in Timor-Leste are very high with three out of every five ever-partnered women having experienced physical and/or sexual violence from a male partner in their lifetime. Fourteen percent of women have experienced rape from a non-partner. For most women who experience intimate partner violence, the violence is repeated and severe. More than a quarter had been injured at least once and more than half of those had needed medical care. Women do not leave violent partners due to fear of bringing shame to their families, and a belief that violence is normal. Other reasons cited are fear of losing children and fear of retaliation¹²⁸. Most women (66%) do not report violence to anyone, and most (86%) do not approach formal services for help. Close to 80% of women who have experienced violence have never left their partner.

¹²⁴ Marie Stopes Timor-Leste & La Trobe University, 2016, p 37.

¹²⁵ MSI, p30.

¹²⁶ MSI p 56.

¹²⁷ RHTO, CBM women with disabilities access to SRH services, p5.

¹²⁸Asia Foundation, 2016, p114.

Women who experience physical and/or sexual intimate partner violence are significantly more likely to be at risk of disability¹²⁹. Women with disabilities who experience violence face significant barriers to accessing support and justice, including communication with NGO service providers and justice institutions. Facilities are often physically inaccessible and service providers and justice institutions are not always trained to adequately support women and girls with disabilities¹³⁰. The Nabilan Program is facilitating increased awareness of disability among NGOs providing services to women and children who have experienced violence, such as legal aid organisations and shelters, and with RHTO, modifying facilities to improve physical accessibility.

The GESIA fieldwork attempted to understand what tensions exist around food security and nutrition. Participants in the separate women and men's FGDs were asked to identify whether there was likely to be conflict arising from decisions to serve particular types of food or use of particular resources. Across all fieldwork sites, tension between a husband and wife was said to heighten over a lack of meal preparation, variety of the food in the meal prepared and decision-making regarding the use of resources. Spending on items such as meat and eggs, or use of family resources such as eggs, chickens or other livestock in the family diet without consultation was said to lead to tension. While women did not talk about the time taken to cook a meal as a factor leading to tension, there was regular reference to the convenience factor of rice and instant noodles which enabled quick, easy cooking when under pressure.

Women participants in FGDs talked about conflict emerging when the same meal was constantly served. Men also stated that they are not happy if the same food was served regularly, in particular instant noodles. One woman participant in Osorua stated that if she gives rice and instant noodles all the time conflict could emerge¹³¹. A male participant of an FGD in the same village confirmed that he would get angry if he had to eat too much convenience food. In Karabalu older women participants stated that husbands get angry if the same food or instant noodles is served every day¹³².

When a meal is cooked with too much variety, there were also references by both men and women that this could lead to tension, with one participant stating that 'if you had a plate with different varieties of food it could create tension because you are eating too much, too royal with their money, especially for low social economic status and young families'. An older male participant in an FGD in Saburai stated that if a woman served a meal with rice, vegetables and a non-meat form of protein, such as egg or tempe, there would not be conflict but he would tell his wife to buy just one item next time as there is not enough money to have more than one type of food¹³³. The other eight participants agreed with him.

Tension emerges when women take decisions about resources without consulting their husbands, in particular resources that provide protein to the meal. When adding meat, male and female participants all stated that there is no conflict if men are consulted on the decision. Male participants in Osorua, when pressed about what would happen if a wife killed a chicken and cooked it without consultation, responded that this had never happened. Children eating food resources that can be sold (such as fruit) also leads to tension according to women participants of an FGD in the same suku¹³⁴. A male participant in an FGD of older male parents in Saburai stated that if his wife served meat and he had not agreed to it, there would be conflict¹³⁵. In Ritabou older male participants in an FGD stated that women buying instant noodles without consultation with their husbands could lead to conflict. Women participants in the same suku however stated that they could make decisions about buying instant noodles without consulting their husbands.

The GESIA fieldwork focused its enquiry on conflict around the use of food resources. It did not assess the possibility of conflict in relation to gender transformation although this was reviewed in the desk study. Global evidence and the Asia Foundation's baseline survey provide useful guidance here which TOMAK can draw upon. There are risks of violence for women in seeking to transform gender roles at the household and community level although the global evidence base on the impact of women's economic empowerment

¹²⁹Asia Foundation, 2016, p93.

¹³⁰ RHTO Submission to CEDAW Committee, 2015, p5.

¹³¹ FGD 2, Osorua.

¹³² FGD 2, Karabalu.

¹³³ FGD 5, Saburai.

¹³⁴ FGD 2, Osorua.

¹³⁵ FGD 5, Saburai.

interventions on a women's risk of violence is mixed. The WHO multi-country study on women's health and domestic violence against women (2005) states that "partner violence is usually highest when women begin to assume non-traditional roles or enter the workplace" 136. A UK Department for International Development (DFID) Guidance Note on violence against women and women's economic empowerment notes that 'economic development interacts with women's risk of violence 'in a complex and context-specific manner (e.g. depending on dominant gender attitudes regarding women's economic advancement) and this is contingent on other factors such as partner's employment or education'. If a woman starts to contribute more to the household than her husband or takes on a non-traditional role, there appears to be an increase in the risk of violence. 137 In situations where men are out of work or 'economically disadvantaged', there is an increased risk of violence backlash. The risks may be temporary and can 'subside as social norms change'.

In relation to Timor-Leste, 43% of ever-partnered women stated that they had experienced economic violence from their husbands, with 37% in the last year. Categories of economic violence included being prohibited from working or earning money, male partners taking their wives' earnings against their will and a male partner keeping earnings for himself, despite difficulty to pay household expenses. The study found that the most common form of economic violence identified by women respondents who had experienced economic violence was the man prohibiting the woman from working or earning money (27%)¹³⁸. The second most common form was the husband taking the earnings against the wife's will, followed closely by the male partner keeping earnings for himself despite difficulty in meeting household expenses.

3.8. Aspirations for oneself

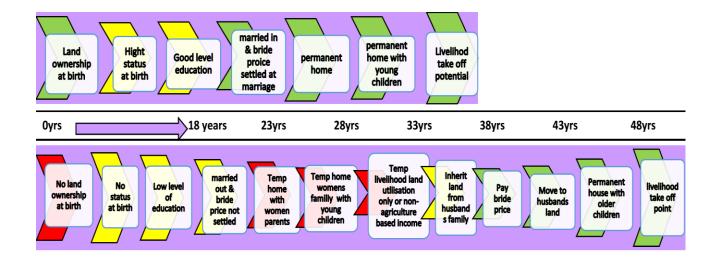
Due to marriage practices and land inheritance systems, women's livelihoods options tend to be delayed much longer than men's or possibly women's form a matrilineal area.

In the illustration below, you can see the easier pathway of life circumstances, where a person, man or women but usually a man, is born knowing they have land-ownership rights. If they are also born into a family of high status, their privilege increases. With education, it rises still. If bride price is settled on marriage, then the path is clear to have children build a permanent house and reach an optimal livelihood point at around 35 years.

The other illustration shows the tougher pathway of life circumstances, where a person, usually a woman, is born without land-ownership rights or status. If the level of education is low and they marry out but their bride price is not settled at marriage, then they enter a period of life and livelihood uncertainty, where their options are temporary and use of resources need to be negotiated with the extended family. This would change when the price is paid and or the husband inherits his land and they move. If this is done, then their livelihood potential becomes more settled and there is more security to build on. In this circumstance, optimal livelihood take of point could be as late as 45 years.

¹³⁶ WHO multi-country study on women's health and domestic violence against women, 2005, p99

¹³⁷ DFID Guidance Note Part A: Addressing Violence Against Women and Girls through DFID's Economic Development and Women's Economic Empowerment Programmes, February 2015, p10
¹³⁸Asia Foundation, 2016, p49



The GESIA survey developed two case scenarios to understand gendered differences around aspirations for change. Scenario one asked a series of questions about a pregnant woman who was told by her doctor that she needed to improve her diet, including eating more protein. Participants were asked how the husband should respond to the doctor's advice, who needed to support any change in the family's use of food resources and who would oppose it.

Overwhelmingly, both older and younger men and women felt that if the doctor was advising the change, it was important for the husband to try to provide the woman with a better diet. The two main reasons cited were that it was important to ensure that pregnant women had sufficient and good food, and because the suggestion came from a doctor. In Ritabou, older female parents said that the doctor and midwives were important to the change. The availability of money was raised as a possible obstacle by participants in two FGDs in Ostiko and Ossorua. Both men and women stressed the importance of the husbands in making the change happen.

The second scenario focused on a woman involved in growing shallots who has the chance to produce and sell more shallots at the market as there is a lot of demand. To be able to do this she needs more help around the house. She would like her husband to be more involved in preparation of meals so the children eat well even if she is not at home. Questions were asked to the different FGDs regarding how the change could happen, who would need to agree to allow the changes, how would they be perceived in the community, who would block the change and who would support it.

Discussion around this scenario pointed to challenges in changing gender roles within the household and to the influence of families, in-laws and community norms. Men and women generally responded the same way to the scenario, pointing out that theoretically the work could be divided but that there would be family and community resistance to the change.

In Ossorua, young female parents did not feel confident that the change could happen¹³⁹. One participant stated that as a woman who married into the community, she would need to look after the family properly. Three out of four participants stated that in-laws might oppose the change and that their support would be needed to make the change happen. In Ostiko, young female parents participating in an FGD also felt that the woman's in-laws might object because their sons were being 'sent' to cook¹⁴⁰. Older female participants from the same village also stated that the community might not be seen as supporting the change and family and in-laws would also resist the change¹⁴¹.

Older women participants in Karabalu stated that the change could happen but some in the community would criticise the wife for leaving her husband to cook¹⁴². In Ritabou younger male parents were concerned that

¹³⁹ FGD 1, Osorua.

¹⁴⁰ Ostiko, FGD 1.

¹⁴¹ Ostiko FGD 2.

¹⁴² Karabalu, FGD 2.

community members would criticise them if the woman went to the field and the men stayed at home to cook and look after the children. "They would say we are lazy. Growing vegetables is not women's work". Older male parents in Ritabou appeared to be more supportive of the change, but perhaps that is because there are older children who can help with the housework¹⁴³. In Saburai, older male participants were more accepting of possible change, with some participants saying that men were already helping with shallots¹⁴⁴. Another group of older male parents in lower Saburai struggled with the role change, with one participant stating that it would be okay to be home for a few days but not more than that¹⁴⁵. In Buruma, participants from the male only FDG stated that men and NGOs were important in making the changes happen.

Men and women have different opportunities for change, in particular for skills development and informal training. This is illustrated by the story of the woman from Baucau who was unable to attend the second week of a two-week training activity because her husband could not manage the household without her. The World Bank Report on Agricultural Exports points out that women's limited ability to participate in training reinforces stereotypes that women are not as clever or skilled as men.

In several of the discussions in the field there were examples of men and women and families making change, in particular around the crops that were produced. A male veteran interviewed in Ossorua described positive changes to the community following the introduction of coconut oil production with support from local NGO Hafoti. Men in Buruma also talked about the change to production of tomatoes because of a lack of irrigation to grow maize and rice. Grandparents in Ritabou talked about a change in the production of maize, with men taking on more planting than women because they are using improved practices for maize production that require more labour initially in setting up and planting fields.

In situations where men and women generally have gendered roles, where women have little control over resources and where consequences for transgressing gender norms can be severe, TOMAK will need to tread carefully. It will also encounter resistance from men and women. There may be few incentives for women to engage in commercial farming or a family business 'where husbands or other relatives control income and or own the land." 146

¹⁴³ Ritabou, FGD 3.

¹⁴⁴ Saburai, FGD 4.

¹⁴⁵ Saburai, FGD 5

¹⁴⁶ IFC report, Investment Climate and Gender, 2010, p29.

4. Recommendations

Gender and freedom from all forms of discrimination are basic human rights. Women and men are entitled to live with dignity free from want and fear. Gender equality is also a precondition for advancing development and reducing poverty. The roles that men and women play in society are not biologically determined, they are socially determined, changing and changeable. While they may be justified as being required by culture or religion, these roles vary widely by locality and evolve over time. Promoting gender equality and social inclusion requires a commitment to striking a firm balance between respecting Timorese cultural and challenging the discriminatory social norms that are impacting the realisation of basic human rights.

It is important not to underestimate the difficulty of achieving change in this area. The road to gender equality and social inclusion is complex and comes with some risk. Essentially, power holders are required to share their privilege. While some are willing to embrace this change, others will fight to retain their power at all costs. Recognising these reactions and what underlies them is critical to developing effective pathways to empower women and vulnerable groups while influencing the powerholders to change.

Even when the focus is just on WEE, there are various ways to go about it. At the agency level women need to improve their skills while challenging their perceptions of their own potential in economic pathways. Significant structural discrimination exists around land and asset ownership despite national laws and regulations designed to address this. There is also a need to rectify the gender disparity in the agricultural support provided to women and men farmers. Similarly, at the relationship level, unequal decision-making opportunities over the use of household income, food and resources limit women's economic opportunities and raise the risk of violence.

The GESIA survey and the TOMAK value chain mapping confirmed that women farmers in Timor-Leste perform a greater number of agricultural and market functions than men, yet their contribution remains systematically under-valued and under-resourced. Gender-blind analysis, resourcing and investments have resulted in missed opportunities to improve agricultural production and profit. Addressing inequalities in access to services and resources and strengthening the capacity of rural women to perform their productive roles more effectively will have a major impact on household economies and food security.

The GESIA overwhelmingly highlights the need to undertake and continually reflect on the gender and social inclusion factors underpinning human behaviour and societal norms when developing Program activities. In many cases these factors will be the reason why change has not occurred in the past and/or is difficult to challenge.

To ensure sustainable gains in gender equality, women's empowerment and social inclusion this study proposes that the following broad recommendations guide the design and implementation of TOMAK activities throughout both outcomes. Simultaneous combinations of these recommendation will deliver transformative gender change.

- 1. Raise the visibility and public perception of women and girls in the Program sectors. This should start with increasing visibility of what they do already that is undervalued.
- 2. Design interventions that specifically target women but do not exclude men.
- 3. Integrate domestic violence analysis. Consciously mitigate for the potential of violence and backlash when challenging gender norms.
- 4. Take necessary measures to ensure voice and representation of women at all levels within the Program.
- 5. Involve women and other vulnerable groups in the design of services and products.
- 6. Invest in the ideas, innovation and leadership of women.
- 7. Promote collective action among women and vulnerable groups.
- 8. Build and protect women's rights and control over economic gains and assets.
- 9. Ensure capacity building initiatives that target both technical and empowerment skills of beneficiaries.

- 10. Ensure behavioural change communication initiatives are gendered and reflect generational, status and inclusion considerations.
- 11. Utilise and promote joint gender and/or extended family unit decision-making models for nutrition and agriculture gains which reduce household conflict in decision-making.

4.1. Agency-level recommendations

- Raise the visibility and public perception of women and girls in the sector including women farmers, traders, extension officers as well as the role that women have in nutrition and food security. The President's Nutrition Awards is a good example of this.
- Invest in the ideas, innovation and leadership of women ensure the program and partners model good gender leadership and match leadership training to technical inputs. Back ideas and aspirations of women it conveys a loud message that they are valued and trusted. Support women-led innovations for production and value chain activities and promote women's innovation ideas.
- Support capacity building initiatives that target both technical and empowerment requirements of beneficiaries ensure training considers the different self-confidence barriers women and men may have in using and influencing others with the training they receive, for example in communication, negotiation and conflict resolution skills.
- Work with men to change and challenge gender-based roles and responsibilities particularly increase men's engagement and participation in food preparation, child care and household nutrition. Support men to change their attitudes toward the contribution of women to the household's economic resilience.

4.2. Relations-level recommendations

- Design interventions that target women but include men examples of these are ensuring that women's groups and activities have the support of their spouse, community leaders and families.
- <u>Utilise and promote joint gender and extended family unit decision-making models</u> for nutrition and agriculture gains and to reduce household conflict in decision-making.
- > <u>Promote collective action</u> of men and women with each other and with organisations and agencies within and across sectors, communities and value chains.
- > Integrate domestic violence analysis as a component of WEE mitigate for the potential of backlash when challenging gender norms.
- <u>Build dynamic partnerships and engage in networks that are committed to gender equity</u> combining networks that engage agriculture, health and women's organisations to come together to learn from each other and promote collective change on key issues.

4.3. Structure-level recommendations

- <u>Promote gender affirmative action</u> this is particularly important in situations where there is deep-rooted and systematic gender discrimination. Quotas, targets and incentives work here.
- <u>Build, lead and engage in strategic gender partnerships</u> or lead on gender components of strategic partnerships. The key here is to target the partnerships where accelerated gender outcomes are possible through collective efforts, influence and advocacy. Include SEM, UNWOMEN, MAF, Rede Feto and Alola Foundation.
- Engage in developing policy and regulatory frameworks that will benefit women and enable pathways for their safety, leadership and voice. Examples could be initiatives of SEM such as the implementation of Maubisse declaration and CEDAW. Gender equality policies in MAF and Municipalities or feeding into market regulatory frameworks.

Appendices

Appendix 1: Terms of Reference

Consultant for

Gender Equality and Social Inclusion Analysis (GESIA)

Background

To'os Ba Moris Diak Program (TOMAK) is a A\$25 million, 5-year agricultural livelihoods program funded by the Australian Government in Timor-Leste. Its goal is to ensure rural households live more prosperous and sustainable lives. TOMAK will achieve this through parallel and linked interventions that aim to:

- > Establish a foundation of food security and good nutrition for targeted rural communities.
- > Build capacity so these communities can confidently and ably engage in profitable agricultural markets.

The primary target area comprises inland mid-altitude areas that have some irrigation capacity. This zone includes around 70-80 suku, located mainly in the Maliana basin (including most of Bobonaro), the eastern mountain regions (including large parts of Baucau and Viqueque), as well as parts of Lautem and Manatuto. The program will initially focus its activities in Bacau, Viqueque and Bobonaro Municipalities.

The 2013 female Human Development Index for Timor-Leste is 0.574, in contrast with 0.656 for males, resulting in a Gender Development Index value of 0.875 (UNDP, 2014). This ranks Timor-Leste as 134th of 186 countries i.e. 72 per cent of countries rank ahead of Timor-Leste in terms of gender equality in relation to three basic dimensions of human development - health, education and command over economic resources. Against this background, TOMAK seeks to improve nutrition and economic opportunities for rural households in Timor-Leste. For TOMAK to be successful, it must recognise and take account of current gender inequities in a complex cultural environment, as well as changes in this environment that might influence gender equality and women's empowerment as the project is implemented.

Gender relationships are complex and diverse in Timor-Leste with each geographic area having different beliefs and practices that play out differently to influence gender relations and norms, and social inclusion of groups, households and communities. Therefore, a 'one-size fits all' approach to gender is inappropriate. It is important that issues of gender and social inclusion within the TOMAK target areas are well understood from a household-level perspective. To develop the range of initiatives required for TOMAK to achieve its intended outcomes, a detailed understanding of the local gender and social inclusion issues and relations is required.

The proposed Gender Equality and Social Inclusion Analysis (GESIA) field survey will focus on the sectors of agriculture, nutrition, food security and economic advancement. Key areas of analysis are in: (I) the roles, responsibilities, workload and division of labour of women, men, girls and boys; (ii) the use, ownership and decision-making around key assets and resources; (iii) the gender dimensions of decision-making both in the home and the community; (vi) access to information, opportunities, life chances and support networks; and (v) the varying social norms that perpetuate or eliminate the potential for domestic violence in the above areas.

The GESIA will include a mixture of data collection techniques, such as: focus group discussions; semi-structured interviews; key informant interviews; and transect walks. The analysis will consider how gender intersects with other potential risk factors including age, marital status and disability that can potentially increase vulnerability. The GESIA will target both men, women and people living with a disability. Data for women will be desegregated into the following groups: (i) Girls 12-18yrs (subset young mothers); (ii) Women 19-49yrs (subsets a. female headed households and b. young mothers); (iii) Women 50 plus (subsets a. female headed household and b. Veterans).

With the information collected through the GESIA, strategies can be developed to support the achievement of project outcomes, avoid unexpected adverse outcomes, and more generally to support gender equality and women's economic empowerment.

Assignment Purpose

The purpose of the assignment is to design and implement a Gender Equality and Social Inclusion Analysis (GESIA) for representative suku in three municipalities of Timor Leste (Baucau, Bobonaro and Viqueque). The GESIA is designed to identify current social and economic factors that perpetuate vulnerability and disadvantage marginalised groups including women and girls (women headed households and older women); and people living with a disability.

Tasks

- a. Develop a work plan and timeline for implementation and completion of the GESIA.
- b. Undertake a desk study (maximum 10 pp) that builds on the gender and social analysis information in the IDD and provides a general picture of social and gender norms in Timor Leste and specifically Bobonaro, Viqueque and Baucau (where data and information exists), together with links to other relevant gender and social inclusion studies. This will form the background of the GESIA.
- c. Lead on the design of the GESIA methodology/tools to be utilised, in consultation with the TOMAK Gender Specialists and other key stakeholders. Ensure the design has a women's empowerment and gender based violence lens and is focussed on household level data. The analysis should be coordinated with other TOMAK analyses relating to the nutrition and the value chain components of the program to ensure there is compatibility of inquiry. It is anticipated that the survey will be implemented by a team of field enumerators equipped with tablets.
- d. Assist with recruitment of the field survey team, and supervise these staff for the period of the GESIA.
- e. Undertake training for the GESIA field survey team
- f. Undertake the GESIA in selected suku in Baucau, Viqueque and Bobonaro, including adequate supervision of the field survey teams so that the integrity of the data collected is assured.
- g. Manage the data analysis process. It is planned that a data analyst will be recruited to support this process.
- h. Submit a draft GESIA draft report no later than the November 4, summarising results and recommendations.
- i. Facilitate a workshop with TOMAK staff and other key stakeholders to validate draft results.
- j. Submit a final GESIA report no later than November 18.

The consultant is expected to work autonomously, but in close liaison with the TOMAK gender specialists and other TOMAK team members as required.

Proposed STA inputs

- a. Gender Specialist (Kerry Brogan, international, up to 25 days)
- b. Data Analyst (tba, international up to 5 days)

Required experience and qualifications

- Master's degree in a relevant field- such as social sciences, gender studies, anthropology and development studies.
- At least 12 years of experience of work on gender equality, women's rights and development.
- > Proven experience in undertaking and managing research and critical assessment/analysis from a gender perspective.
- > Proven experience in undertaking social analysis in Timor Leste with a gender and social inclusion perspective.
- > Proven experience in managing, organizing qualitative and quantitative data collection with a gender perspective.

- Experience in drafting comprehensible analytical reports and assessment.
- Experience working in Gender and social inclusion related issues in Timor Leste will be seen as an advantage.
- > Excellent command of English and excellent writing skills.
- > Tetun language skills will be seen as an advantage
- Computer literacy and ability to effectively use office technology equipment, IT tools, ability to use Internet and email.

Deliverables

- a. Desk study (Max 10 pages) draft due September 29. Final document to be submitted with final report
- b. Design workshop: to be conducted in Dili with key stakeholders
- c. Survey design: by September 20.
- d. <u>Draft report</u>: covering all tasks as listed above. The report is to be prepared in MS Word using the standard TOMAK format by the November 4.
- e. <u>Validation workshop</u>: to be conducted in Dili once the draft report has been submitted.
- f. Final report: incorporating final comments from the TOMAK team and validation workshop by November 18.

Inputs

This contract is for TA services only. All other costs involved in implementing the GSIA will be met by TOMAK, to be defined in the detailed workplan developed at the commencement of the consultancy. Additional costs will include the cost of the enumerators and data analyst; use of vehicles for the field survey and meetings; internet and printing costs; translation and interpretation.

TOMAK will also provide the Consultant with background materials for the desk review, and support in organizing meetings/workshops, field trips, contracts for data collectors and the data analyst.

Timing

The assignment is planned to commence 29 August 2016, with the draft report submitted to the TOMAK no later than the 4 November with a final report submitted on November 18.

Activities/Dates	Aug 29- 23 rd of Sep	Sep 26-30	Oct 3-7	Oct 10-14	Oct 17-21	Oct 24-28	Oct/Nov 31-18 Nov
Desk study, design preparation, Field team recruitment & training	Dili						
Field research		Bobonaro	Dili	Baucau	VQQ		
Analysis & preparation of validation work shop						Dili	18 th Nov
Report preparation							

Appendix 2: Detailed Methodology

TOMAK undertook a gender equality and social inclusion analysis (GESIA) as part of its planning process. Findings from the analysis will be integrated into the strategies TOMAK adopts to achieve the planned outcomes of the project as a whole. The analysis highlights current societal factors that perpetuate vulnerability and disadvantage of vulnerable and marginalised groups including; women and girls (women headed households and older women), people living with a disability and other vulnerable groups within Timorese society. The analysis helped to identify how inequalities impact on different groups' food security, good nutrition and capacity to engage in profitable agricultural markets. The GESIA was not intended to serve as a program baseline but rather to identify key structural barriers to equality at the household and village (suku) level in areas where the program will work that will influence the program's goals on food security and agricultural markets.

1. Analysis Framework

The TOMAK program is designed using a women's economic empowerment (WEE) framework. The WEE framework is a subset of a larger Women's empowerment framework. In understanding social and gender norms impacting on society it is important to use the broader women's empowerment framework. The framework covers eight core areas of inquiry:



2. Disability Inclusion

The GESIA also sought to understand the different experiences of people living with disabilities and their families in relation to food security and nutrition, recognising that there are likely to be multiple layers of discrimination facing such members of the community. The GESIA sought to understand the following barriers:



3. Analysis questions

The GESIA was aimed at seeking understanding at the household and community levels in the program areas of the following questions:

GESIA fieldwork analysis – Topics covered by core area of inquiry

Roles and responsibilities

Roles and responsibilities of males and females around food production, nutrition and consumption.

Regular activities undertaken and when these occur (particularly where seasonal).

Household decision-making

Roles of men and women in the house in decision-making: Who dominates in decision-making on ingredients used in food in the house? What is the age and sex of the decision-makers?

Gender norms that influence decision-making around infant and child nutrition and feeding; gendered differences in diet for female and male members of the household (babies, children, adults and elderly).

What role do taboos play in decisions about food production and consumption?

What impact do cultural responsibilities have on food security and good nutrition?

Who is making decisions about changes to the production and consumption of food?

Access to and control over productive resources

What are the gendered differences in access to and control over resources including land, finance, information and other assets?

Are there any differences in women's access to and control of food in married-in and married-out communities [Bobonaro only].

How does disability impact on the person living with a disability and their family's access to and control over food?

Which groups/individuals are most marginalised in terms of food security?

Access to public spaces and services

How do gendered differences on mobility impact on food production?

Claiming rights and meaningful participation in public decision-making

What roles do men and women hold within the community?

What are the gendered differences in relation to public decision making?

Control over one's body

Level to which women and men can make decisions about health, intimate partners and children?

Violence and restorative justice

What are the factors that increase the risk of violence in relation to food production and consumption? How are these different for different groups of women in the program area, for example, younger women, older women, veterans, women and men with disabilities?

Aspirations for oneself

Perceived needs, opportunities and preferences of female and male members of the household?

Som e of the que stio ns

e also explored in the TOMAK Value Chain analysis and the TOMAK Gender Specialist engaged actively in the Value Chain research to avoid duplication of data collection.

4. Research locations

The TOMAK research was conducted in two rural and/or peri-urban sukus in each of the three program districts, Baucau, Viqueque and Bobonaro. The field research took place over a period of three weeks, with one week per district. Two aldeias were selected for each district, each in a different suku. In Viqueque three aldeias were selected in two sukus:

District	Suku	Aldeia
Baucau	2	2
Bobonaro	2, including at least one matrilineal suku	2
Viqueque	2	3

Criteria for selection of research sites included the following:

- > Within the program area selected by TOMAK or close by
- > A local partner has an existing relationship with the community
- > Strong Female leadership in some sites- women in existing leadership such as the Chefe de suku putting themselves forward to be leaders.

5. Analysis methodology

The study drew on existing qualitative and quantitative data, with qualitative data collected during field work. The following methods were used:

- A desk review the desk review focused on identifying gaps in knowledge and allowed for a review of the analysis questions.
- > Participatory Rural appraisal techniques in particular Focus Group Discussion, transect walks, and peak time observations

- > Semi-structured targeted interviews.
 - 6. Analysis questions and methodological tools

DR=Desk Review

TW=Transect walk

TI=Targeted interview

FGD=Focus Group Discussion

PTO=Peak Time Observation

Analysis Questions	DR	TW 1	TI	FGD/ PRA	PTO
Roles and responsibilities					
Roles and responsibilities of males and females around food production, nutrition and consumption.	Χ	Х	Х	X	X
Regular activities undertaken and when these occur (particularly where seasonal)	Χ	Х		Х	X
Household decision making					
Roles of men and women in the house in decision making; More specifically who dominates on decision making on use of money and food resources in the household? What is the age and sex of the decision makers?	Х		Х	Х	
Gender norms that influence decision making around infant and child nutrition and feeding; Gendered differences in diet for female and male members of the household (babies, children, adults and elderly)	Х		Х	Х	
What role do taboos play in decisions about food production and consumption?			Х	Х	
What impact do cultural responsibilities have on household decision making, more specifically on food security and good nutrition?	X		Х	X	
Who is making decisions about changes to the production and consumption of food?			X	Χ	
Access to and control over productive resources					
What are the gendered differences in access to and control over resources including land, finance, information and other assets?	X	Х	Х	X	
Are there any differences to women's access to and control of food in married in and married out communities [Bobonaro only].	Х		Х	X	
How does disability impact on the person living with a disability and their family's access to and control over food?	X	Х	Х		
Which groups/individuals are most marginalised in terms of food security?	Χ			X	
Access to public spaces and services					
How does gendered differences on mobility impacts on food production?	Х			Х	
Claiming rights and meaningful participation in public decision-making					
What roles do men and women hold within the community?	Х	Х	Х		
What are the gendered differences in relation to public decision making	Х		Х		
Control over one's body					
Level to which women and men can make decisions about health, intimate partners and children?	X			Х	
Violence and restorative justice					

|--|

Municipal	Suku	Aldeia	Transect walk	Peak time observ'n	FGD	Targeted interviews	Munic. people met	Total people involved in GESIA
Bobonaro	2 (Saburai & Ritabou)	2 (Tas Masak & Samelau)	4 (4 farmers) peanut, mung bean & cattle	1 peak time	10 (total ppl 64)	7 (total ppl 7)	10	85

	Sub Target Group	Area of inquiry		Met	hodolog	У	
1	Veterans - male and female	Role in decision-making, role as community leaders and change makers/influencers	Targeted	l interviev	VS		
2	Grandparents (who care for children during the day)	Feeding of children in their care, their own access to food within the family	FGD. Men and women invited with a recognition it might be hard to find male participants.				
3	Reproductive age	Men and discussion		n separa	te FGD		
4	Female single-headed households	Targeted interviews					
5	Young parents born 1990- 2000	FGDs - men and women separately					
6	Mother of the new father (mother in law); oldest child no more than 6 yrs	FGDs – c		_	ndparent	s with	
7	Mother of new mother (maternal mother); oldest child no more than 6 yrs	FGDs - c			ndparents	s with	
8	PLWD and their families	Targeted	l interviev	VS			
Aspi	rations for oneself						
	eived needs, opportunities bers of the household			Х	X		

7. Respondents

The GESIA obtained information from the following groups:

8. Sample

Respondents were selected using purposive or selective sampling through which key informants, such as village chiefs, women representatives on village councils and representatives of disabled people's organisations (DPOs), identified individuals who may be willing to participate. The following sample was reached:

Viqueque 3 (Ossu, Karaubalu & Mamulak & cattle & Peanut) Laran) 2 (Ossurua, Cattle &								54	
Baucau	2 Buruma & Vemasi	2 Suliwa & Ostiko	3 (3 farmers- peanut, cattle, tomato)	2 peak time	7 (total ppl 32)	9 (total ppl 9)	8	52	
Total 7 7 9 3 23 20 23									
Total participants involved in the GESIA									
	64% Female & 36% Male								

9. Participatory Rural Analysis/Appraisal (PRA) Tools

The GESIA used a range of PRA tools to undertake the field work in order to capture all people's voices, experiences and increase participation and a range of perceptions. The PRA tools were focus group

- Discussions, transect walks and peak time observations. The Desk Review also drew on analysis from other studies which used PRA techniques.
- > Focus group discussions
- > Focus group discussions were conducted with the specific groups to identify differences in different households and in particular to understand intergenerational differences. The focus group discussions drew on the work of the Asia Foundation research (2015) by incorporating its findings and taking some of its PRA mapping inquiries further, in particular through further inquiry related to access to and control of resources, roles and responsibilities, decision making, and access to public spaces. The FGDs also sought responses on what limitations exist for women regarding food security and nutrition.

The groups which participated in the FGDs are:

- Grandparents who care for children and mothers-in-law of both men and women with men and women interviewed in the same group
- Older men and women of reproductive age with men and women interviewed separately
- > Young male and female parents with men and women interviewed separately

An FGD tool was developed to cover different processes around allocation of food resources for household consumption, preparation of household food and feeding. The FGDs also covered change and aspirations for change.

Transect walks

Two transect walks were conducted in each aldeia. A key aim of the transect walks was to verify information obtained at earlier stages in the field work, such as from FGDs and interviews. Transect walks allowed for the observation of key landmarks linked to food production, access to and control of assets, roles and responsibilities although it was not always possible to see field sites as they were far from the participants' residence.

For each walk, one to two women (and girls) from the community were asked to assist the team and walk with two team members. The walks attempted to each follow a different value chain commodity such as cattle or peanuts.

Peak time observations

This process involved walking through the village within a set radius to make observations on key activities. It reduced the burden on people to be in sessions with the facilitators and cross checks what had already been identified. It disaggregates by age, gender and roles.

- (a) Morning 5am-7am
- > What are men and women doing in this time?

- > Who is up first?
- > Who is collecting water?
- > Who is lighting a cooking fires?
- Who is cooking?
- > Who is cleaning?
- > Who is eating?
- > Who is caring for children-feeding, bathing getting them ready?
- > Who is getting ready to leave the village-market, fields, school other?
- > Who is relaxing-playing or sitting and talking?
- > Who is sleeping?
 - (b) Evening 4pm-7pm
- > What are men and women doing in this time?
- > Who is working outside of the house (e.g. in a garden or field)?
- > Who is collecting water?
- > Who is collecting fire wood and helping with the fire?
- > Who is cooking?
- > Who is eating?
- > Who is relaxing?
- > Who is sleeping?
- > Who is playing cards?
- > Who is relaxing?
- > Who is going an income generating activity?
 - (c) Night 8pm-lights out
- > What are men and women doing in this time?
- > Who is cooking?
- > Who is collecting water?
- > Who is doing an income generating activity?
- > Who is relaxing?

Semi-structured targeted interviews

A number of targeted interviews were conducted with male and female veterans, people with disabilities and their families, or other particularly vulnerable members of the community who would not be able to participate in the FGDs/PRAs, such as female heads of households. The interviews were conducted on an individual basis. Interviews will be semi-structured and participants were identified through key informants. Interview questions for each category are different.

Appendix 3: Field work activities

Dates	District	Suku	Activity
11-12	Bobonaro	Saburai	FGD1; Male young parents
October 2016			FGD2; Female you parents
2010			FGD3; Female older parents - In-law's
			FGD4; Male older parents - in-laws'
			FGD5; Men mix
			Peak Time Observation
			Transect Walk 1; Cattle
			Transect Walk 2; Peanuts
			Interview 1; Female headed household
			Interview 2; Person living with a disability
			Interview 3; Vetrana
			Interview 4; Female headed household
13-14	Bobonaro	Ritabou	FGD1; older female parents
October			FGD2; older male parents
			FGD3; young male parents FGD4; young female parents
			FGD5; Grandparents and mother in law
			Peak Time 1
			Transect Walk1; Groundnuts
			Transect Walk2; Cattle
			Interview 1; Woman Head of Household
			Interview 2; PLWD
			Interview 3; Pregnant woman Interview 4; Female veteran
19 October	Viqueque	Ossorua	FGD 1; Female young parents
2016	viqueque	O3301ua	FGD 2; Older Women
20-21			FGD 3; Older Men
October			FGD 4; Grandparents and mothers in law
2016			Transect Walk 1; Cattle
25-26 October			Transect Walk 2; Groundnuts
2016			Interview 1; Male veteran
			Interview 2; Pregnant woman Interview 3; Female veteran
	Viqueque	Karabalu	FGD 1; Female young parents
	1.900900	1 (3) (3) (3)	FGD 2; Older Women
			Interview 1; Person living with a disability and their family
	Baucau	Buruma	FGD 1; Female young parents
			FGD 2; Older Women
			FGD 3; Older Men
			FGD 4; Male young parents Transect walk 1; Tomatoes
			Peak Time Observation
			Interview 1; Person living with a disability and their family
			Interview 2; Pregnant woman
			Interview 3; Male veteran
			Interview 4; Female veteran
07	D	0 (1)	Interview 5; Woman head of household
27 – 28 October	Baucau	Ostiko	FGD 1; Female young parents
2016			FGD 2; Older Women parents FGD 3; Older Male parents
			Transect Walk 1; Groundnuts
			Transect Walk 2; Cattle
			Peak Time Observation
			Interview 1; Pregnant woman
			Interview 2; Woman head of household
			Interview 3; Male Veteran
			Interview 4; Person living with disability and their family

Appendix 4: Suku Profiles

District	Suku	Population ¹⁴⁷	Aldeia	Area	Governance	Main crops	Livestock	Matrilineal or patrilineal	Groups active in the area
Baucau	Buruma	Total - 3245 Male - 1677 Female - 1568 People with disabilities -	Suliwa	Peri- urban	Male Chefe de Suku Female candidates	Recently started growing tomatoes – less cultivation of rice and maize due to lack of water	Cattle, Pigs and Chicken	Patrilineal	CDC HPL
Baucau	Ostiko	Total – 1206 Male – 638 Female - 568	Ostiko	Rural	Male Chefe de Suku No female candidates	Sweet potato, Peanuts, tomatoes and vegetables	Cattle, chicken, and pigs	Patrilineal	CDC
Bobonaro	Ritabou	Total – 6617 Male – 3416 Female - 3201	Samelau	Peri- urban	Female chefi de Suku and 7 more women candidates	Vegetables, Union, sweet potatoes	Cattle, chicken,	Patrilineal	OHM One other women's agricultur al group
Bobonaro	Saburai	Total – 2268 Female - 1162 Male 1106	Tas Masak	Rural	Male chefe de Suku and no women candidate	Garlic, union, peanuts, vegetables and tomatoes	Cattle, Pigs and chicken	Matrilineal	ОНМ
Viqueque	Ossorua	Total – 2322 Female – 1175 Male - 1147	Ossorua	Rural	Male Chefe de Suku	Coconut, Banana, Corn, Sweet potatoes, Papaya, Cassava, and peanuts	Cattle, Chicken, Goat and Pigs	Patrilineal	НАГОТІ
Viqueque	Karabalu	Total – 6594 Female – 3275 Male - 3319	Mamulak	Peri- Urban	Male Chefe de Suku	Banana, Vegetable, corn, Cassava and coconuts	Chicken, pigs and cattle	Patrilineal	Viqueque Women's Associati on
Viqueque	Viqueque town suco karau- Balu, Aldeia; Kabira oan		Boraisa Laran	Urban	Male Chefe de Suku 5 Candidate; 1 women and 4 men (Luciana Guterres is the women candidate field officer of Alola Foundation)	Banana, Cassava, sweet potatoes, Corn and peanuts	Cattle, Pigs and Chicken	Patrilineal	Viqueque Women's Associati on

¹⁴⁷ RDTL Census 2015

Appendix 5: Key References

A note on sources

Recent surveys and research projects provide critical insights into gender equality and social inclusion. The Census has just been conducted. The Demographic and Health Survey has also just been conducted although the data is not due for release until 2017. Secondary analysis of particular data sets from the Census and the DHS are forthcoming. There is a new survey on violence against women produced by the DFAT funded Nabilan Program (Ending Violence Against Women) which provides updated prevalence data and important information on what factors are associated with women's experiences and men's perpetration of intimate partner violence. Disaggregated data on people with disabilities is lacking. The latest Census results also indicate that there remain challenges with identification of all those with disability in the country – with just 3.2% of the population have identified/been identified as having a disability. This figure is well below the international average of 15% of the population identified by the World Health Organisation. The National Action Plan for People with Disabilities 2014-2018, provides a useful overview of what data exists and where the gaps are.

There are a number recently conducted qualitative studies to help programs implement activities using both gender accommodating and gender transformative strategies. There are also a number of recent studies analysing the situation of men and women with disabilities.

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