



WFP/Aurore Ishimwe

USAID/BURUNDI INTEGRATED COUNTRY STRATEGY GENDER ANALYSIS REPORT

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ACRONYMS

ADS	Automated Directives System
AFAB	Association of Women Entrepreneurs of Burundi
AFJB	Association des Femmes Juristes du Burundi (Association of Women Lawyers of Burundi)
AFRABU	Associations des Femmes Rapatriées du Burundi (Association of Repatriated Women of Burundi)
AGYW	Adolescent girls and young women
BIDF	Banque d'Investissement et de Développement pour les Femmes (Investment and Development Bank for Women)
BIJE	Banque d'Investissement pour les Jeunes (Youth Investment Bank)
BRAVI	Breaking Cycles of Gender-Based Violence in Burundi
CDFCs	Family and Community Development Centers
CECM	La Caisse Coopérative d'Epargne et de Crédit Mutuel (Mutual Savings and Credit Cooperative)
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CEFMU	Child, early, and forced marriage and unions
CEM	Centres d'Enseignement des Métiers (Trades Teaching Centers)
CENI	Commission Electorale Nationale Indépendante (National Independent Electoral Commission)
CFP	Centres de Formation Professionnelle (Vocational Training Centers)
CHW	Community health worker
CNC	National Communications Council
CNDD-FDD	National Council for the Defense of Democracy–Forces for the Defense of Democracy
COCAFEM	Concertation des Collectifs des Associations Féminines (Consultation of the Collectives of Women's Associations) in the Great Lakes region
CRS	Catholic Relief Services
CRVS	Civil registration and vital statistics
CSA	Climate-smart agriculture
CSO	Civil society organization
CVR	Truth and Reconciliation Commission
DHS	Demographic and Health Survey
DRC	The Democratic Republic of Congo
EPI	Expanded Program on Immunization
EpiC	Meeting Targets and Maintaining Epidemic Control
FAO	Food and Agriculture Organization
FGD	Focus group discussion
FP	Family planning
GBV	Gender-based violence
GCS	Solidarity Guarantee Groups
GDP	Gross domestic product
GNI	Gross national income
GITA	Gender Integration Technical Assistance
GoB	Government of Burundi
GRB	Gender-responsive budgeting
HIV	Human immunodeficiency virus
ICGLR	International Conference on the Great Lakes Region
ICS	Integrated Country Strategy
ICT	Information and communications technology

IDP	Internally displaced persons
IFAD	International Fund for Agricultural Development
INGO	International non-governmental organization
IP	Implementing partner
IPTp	Intermittent preventive treatment
IPV	Intimate partner violence
IRH	Institute for Reproductive Health
ITN	Insecticide-treated net
KI	Key informant
LGBTQI+	Lesbian, gay, bisexual, transgender, queer, intersex and people of diverse genders and sexualities
MEL	Monitoring, evaluation, and learning
MFI	Microfinance institution
MOLI	Mouvement pour les Libertés Individuelles (Movement for Individual Freedoms)
MSM	Men who have sex with men
NAP	National Action Plan
NGO	Non-governmental organization
NMCP	National Malaria Control Program
NN	Nawe Nuze
PDFSD	Provincial Directorate of Family and Social Development
PHO	Provincial Health Offices
PPP	Purchasing power parity
PSMASAN	Multisectoral Strategic Plan for Food Security and Nutrition
SDG	Sustainable Development Goal
SEA	Sexual exploitation and abuse
SF	Strategic Framework
SGBV	Sexual and gender-based violence
SILC	Savings and Internal Lending Communities
SME	Small and medium enterprises
SOGIE	Sexual orientation and gender identity and expression
SOW	Scope of work
SRGBV	School-related gender-based violence
SRH	Sexual and reproductive health
STEM	Science, technology, engineering, and mathematics
STI	Sexually-transmitted infection
TVET	Technical and vocational education and training
UIS	UNESCO Institute for Statistics
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNIPROBA	Unissons-nous pour la Promotion des Batwa (Together for the Promotion of Batwa)
UNSCR	United Nations Security Council Resolution
USAID	United States Agency for International Development
VICOBA	Village Community Banking
VSLA	Village Savings and Loan Associations
WEE	Women's economic empowerment
WFP	World Food Program
WISE	Women's Initiative for Self Empowerment

EXECUTIVE SUMMARY

Following the requirements of the United States Agency for International Development (USAID) Automated Directives System (ADS) 201.3.2.9 and ADS 205, USAID/Burundi contracted Banyan Global to conduct a countrywide gender analysis to inform the U.S. Government Integrated Country Strategy (ICS) (FY2023–2027) and the Mission’s strategic framework (SF). This analysis identifies gender advances, constraints, and recommendations to support three proposed Mission Goals, including nine relevant intermediary results under the ICS. The three Mission Goals are as follows:

- (1) Invest in People: Burundian systems for health and education are strengthened.
- (2) Invest in the Economy: The foundation for a stronger Burundian economy is created through investment, employment, profitable value chains, and sound agricultural and environmental practices.
- (3) Invest in Society and the Region: Burundi is a peaceful, open, and stable actor at home and in the region.

The report addresses the cross-cutting themes of gender-based violence (GBV) prevention and response and women’s economic empowerment (WEE) and analyzes intersecting variables of age (youth), marital status, region, and rural/urban residence.

Banyan Global prepared this report after a multi-stage process that included a review of secondary data sources and primary data collection, through 128 key stakeholder interviews and two focus groups, with a total of 135 key stakeholders consulted in Burundi. Stakeholders included representatives from civil society organizations (CSOs), local associations and cooperatives, USAID/Burundi, USAID implementing partners, the private sector, government, and other donor partners. Stakeholders shared insights into pathways for improving gender equality and social inclusion (GESI) across programs, projects, and activities.

Table I presents the most relevant findings and recommendations identified through the analysis of primary and secondary data. Content is organized by ICS Mission Goals (FY2023–2027) as well as USAID/Burundi’s Development Objectives (2022–2025).

TABLE I. GENDER ANALYSIS KEY FINDINGS AND RECOMMENDATIONS	
FINDINGS	RECOMMENDATIONS
I. HUMAN CAPITAL — HEALTH, EDUCATION, NUTRITION	
INTEGRATED COUNTRY STRATEGY MISSION GOAL I — Invest in People: Burundi systems for health and education are strengthened.	
USAID/BURUNDI DEVELOPMENT OBJECTIVE I — Human capital is developed.	
HEALTH: RECOMMENDATIONS FOR USAID AND OTHER DONORS (STRATEGIC LEVEL)	
Accessibility and quality of services are insufficient to address the basic health needs of Burundian men and women. Women experience gender-specific barriers to traveling the long distances necessary to access health services, especially in rural areas.	<ul style="list-style-type: none">Support the expansion of the mobile clinic model to better reach men, women, youth, and marginalized groups in rural areas with quality health services and care options. Free mobile clinics can reduce gender barriers by providing services at convenient times in locations where women, especially young women, convene, such as schools, community centers, and farms.

<p>Social stigmas contribute to reluctance to seek medical care for sensitive issues related to sexual and reproductive health (SRH), family planning (FP), and GBV. Patients perceive that healthcare is not provided confidentially; some health centers avoid serving lesbian, gay, bisexual, transgender, queer, intersex, and people of diverse genders and sexualities (LGBTQI+).</p>	<ul style="list-style-type: none"> • Advocate for the Ministry of Health to establish clear healthcare standards: no person can be refused health treatment, and all persons must be provided quality care and ethical treatment. Provider responsibilities to patients should be posted in health centers to communicate patient rights to privacy and confidentiality. • Support capacity building and training for healthcare personnel to encourage ethical professional care and confidentiality in the treatment of all persons, including, in particular, sex workers, LGBTQI+ persons, persons living with Human Immunodeficiency Virus (HIV), and persons with disabilities. • Promote donor and Ministry of Health efforts to encourage women to pursue medical professions where women are underrepresented, including doctors specialized in SRH and FP (to accommodate women who are more comfortable with women doctors).
<p>When births are unregistered, parents are unable to obtain specific forms of social assistance, free healthcare, or free primary school for their child. Children from rural areas and low socioeconomic groups are less likely to be registered.</p>	<ul style="list-style-type: none"> • Support donor efforts to work with the Government of Burundi to remove barriers to systems of civil registration and vital statistics (CRVS), especially for rural areas. This includes assessing and removing legal barriers to registration, monitoring coverage and access to birth registration data, and integrating CRVS into national statistical system plans, capacity-building, and resource mobilization efforts. • Support CSOs in efforts: to advocate for the importance of strong CRVS systems; to raise awareness on the importance of birth registrations and the locations of registrars; to promote the ability of single parents to register the birth of their child without the information of their partner; and to subsidize the costs associated with receiving a birth certificate for those who cannot afford the fees.
<p>HEALTH: RECOMMENDATIONS FOR USAID IMPLEMENTING PARTNERS (ACTIVITY LEVEL)</p>	
<p>Men's and women's health-seeking behaviors and decisions are affected by gender norms and attitudes, especially related to the normalization of GBV and social taboos of sexuality.</p>	<ul style="list-style-type: none"> • Ensure that program and activity design is informed by in-depth community analysis of social norms by using tools that have been adapted to the Burundi context, such as the Social Norms Exploration Tool.¹ • Continue to partner with CSOs to engage men and women of all ages to challenge norms and beliefs that negatively influence health behaviors, particularly around SRH, FP, and preventative care. Use community-based methodologies such as the Men as Partners® approach (adopted in the Breaking Cycles of Gender-Based Violence in Burundi (BRAVI) and GIR'ITEKA ("Be Respected") activities)² to create spaces for gender-segregated and mixed learning and discussion. Village Savings and Loan Associations (VSLA) groups can provide valuable entry points for exploration and dialogue on harmful gender norms and practices. • Explore partnering with influential or popular radio stations and other media outlets to disseminate targeted communication campaigns that promote men and women accessing preventative health treatment (especially for malaria, HIV, and contraception) and to provide information on available treatment centers. Work with local associations and organizations to ensure that messaging and methods are appropriately targeted to specific groups, such as rural women and men, Batwa, LGBTQI+, sex workers, and unmarried women. • Engage different community groups and actors, such as parent associations and youth groups, in awareness raising and dialogue sessions focused on reducing stigmatization, myths, and misinformation on sensitive topics such as SRH, healthy and consensual relationships, and sexuality; encourage intergenerational dialogue on these topics to build broad-based support for comprehensive sexuality education for young people.
<p>EDUCATION: RECOMMENDATIONS FOR USAID AND OTHER DONORS (STRATEGIC LEVEL)</p>	
<p>Burundi has achieved near gender parity in primary school enrollment; however, boys and girls experience unique factors that contribute to high dropout rates. Teachers and administrators confront basic resource challenges that impact all students.</p>	<ul style="list-style-type: none"> • Integrate province- and gender-specific strategies in education programming to reduce school dropouts. • Engage the Ministry of National Education to promote enrollment and graduation from teachers' colleges and specifically to support women to become certified teachers to serve as role models. Reducing the high student-to-teacher ratio will be a critical step for improving educational environments for all students.

A lack of hygiene facilities and menstrual kits at schools contributes to absences for girls, and school policies fail to take account of this reason for absenteeism.	<ul style="list-style-type: none"> Work with school administrators and CSOs to provide adequate conditions for menstrual hygiene management at the school level (e.g., sex-separate latrine facilities, clean and sufficient water supply, doors with locks, waste disposal bin, and reusable sanitary napkins). Examine policy alternatives to requiring repetition of grades due to absences.
The stigma and non-acceptance of pregnant girls causes young mothers to drop out of school while they are pregnant. Many do not re-enroll once their child is born.	<ul style="list-style-type: none"> Encourage the Ministry of Education to integrate evidence-based, comprehensive sexuality education into the curriculum. Fund programs that work with the Ministry of Education to support the continued education of pregnant girls and the re-entry of young mothers into the education system, including community-level initiatives that collaborate with community leaders and school administrators.
School-related GBV (SRGBV), including cases of sexual abuse by teachers, contributes to girls dropping out of school. Schools do not have policies or procedures for reporting or addressing GBV.	<ul style="list-style-type: none"> Work with the Ministry of Education to develop clear, safe, and accessible procedures and mechanisms for reporting incidents of SRGBV, assisting victims, and referring cases to the appropriate authorities. Ensure the availability of easily accessible child-sensitive and confidential reporting mechanisms, as well as healthcare services (including counseling and support) and referrals to law enforcement.
EDUCATION: RECOMMENDATIONS FOR USAID IMPLEMENTING PARTNERS (ACTIVITY LEVEL)	
It is socially acceptable for girls to leave school to support unpaid domestic work. The lack of role models of educated girls and women is a significant barrier to girls' education.	<ul style="list-style-type: none"> Informed by social norms research, design community-level activities (media campaigns, community dialogue, and community champions) to tackle the gender beliefs and norms that contribute to girl dropouts, such as the acceptance of unequal care work expected of young girls at home.

FOOD SECURITY AND NUTRITION: RECOMMENDATIONS FOR USAID AND OTHER DONORS (STRATEGIC LEVEL)

Women's lack of access to land contributes to malnutrition and food insecurity. Given that the Burundian economy is agriculture-based, consisting mainly of subsistence farming, those that do not own land or have productive use of land (such as returnees, women, and Batwa) are more likely to be food insecure.	<ul style="list-style-type: none"> Work with legal institutions to guarantee women's rights: to own property (especially land); to inheritance; and to a fair distribution in case of divorce or widowhood. Collaborate with CSOs to promote changes in government laws and policies, as well as changes at the community level to encourage joint-titling of land. Support strengthening home garden programs to diversify nutrient-dense crop production; identify strategies to integrate home gardens for those without access to land.
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II. ECONOMIC GROWTH

INTEGRATED COUNTRY STRATEGY MISSION GOAL 2 — The foundation for a stronger Burundian economy is created.

USAID/BURUNDI DEVELOPMENT OBJECTIVE 3 — The environment for sustainable development is enhanced.

RECOMMENDATIONS FOR USAID AND OTHER DONORS (STRATEGIC LEVEL)

Money is a source of household conflict; women's involvement in household budgets, or earning more than their husbands, can exacerbate GBV. Harvest seasons are associated with higher rates of GBV, when there is a quick influx of cash.	<ul style="list-style-type: none"> Ensure that all agricultural activities conduct sexual exploitation and abuse (SEA) and GBV risk assessments and develop mitigation measures, especially during high-risk times like the harvest season. Ensure that implementers have safe referral and reporting protocols in place so that cases are handled safely and ethically by qualified service providers.
The existence and strength of linkages between rural producers and processing centers varies by crop. They could be strengthened to support cooperatives (particularly	<ul style="list-style-type: none"> Explore opportunities to partner with the private sector in Burundi, particularly in agribusiness, to strengthen market opportunities and linkages for rural producers (particularly women-led cooperatives), with a focus on

women-led) and local agricultural entrepreneurs (particularly women and youth). Women-run cooperatives are perceived as reliable, and cooperatives are an effective way to provide training and support to women, especially single, divorced, or widowed women.	<p>improving productivity and quality as well as the value derived for the participant (producer or processor).</p> <ul style="list-style-type: none"> • Ensure that women's agricultural organizations and cooperatives are routinely and meaningfully engaged in the design and monitoring of agriculture and agribusiness projects to prioritize the needs and priorities of women entrepreneurs in the sector. • Explore ways to partner with the private sector to support strengthening the processing and export sectors in Burundi, to expand opportunities for women to work in higher-paid value chain activities, such as processing centers.
There are little data showing the extent to which women and youth are involved in key agricultural value chains beyond coffee. Labor in coffee production and processing activities is highly gendered.	<ul style="list-style-type: none"> • Conduct robust and province-specific gender-responsive value chain analyses of key agricultural products, such as tea and tropical fruits, to identify opportunities to enable or strengthen women and youth entrepreneurship in agriculture, and to identify existing markets for products.
Women and youth have less access to finance. Microfinance institutions, while increasing in number, are still not an accessible credit option for most women and youth due to burdensome application requirements and limited availability in rural areas. VSLAs are a more accessible credit option for women and youth.	<ul style="list-style-type: none"> • Target programming to increase women's and youth's access to financial services and improve their financial literacy. Work with the Central Bank to adjust policies and requirements for formal microfinance institutions to offer loans that are more accessible for women and youth, such as by taking into account moveable assets and alternative methods for assessing credit worthiness. In conjunction, ensure that potential applicants have necessary financial literacy support to fill out applications and understand the terms of their loan.
Existing strategies to engage male and female youth in vocational training and activities are ineffective, and there is limited evidence to indicate that male and female youth are benefitting from such opportunities.	<ul style="list-style-type: none"> • Work with the Ministry of Education and Scientific Research to strengthen the delivery of Technical and Vocational Education and Training (TVET) services and employ gender-sensitive recruitment methods and training opportunities to engage more youth in high-earning TVET activities, especially female youth.
Rights and protections within the Labor Law have limited application and role in supporting women's employment due to the high level of informal employment and lack of written contracts. Primary data indicate that GBV is common and is perpetrated with impunity also in formal workplaces in Burundi, despite national legal protections.	<ul style="list-style-type: none"> • Conduct research on the extent to which the private sector, civil society, and government entities in Burundi have instituted and enforce protective workplace policies. Use this research to identify model organizations and entities that provide decent working environments for all employees, and leverage these models as examples of leaders in Burundi. • Promote the business case for increased female leadership and participation in decision making to targeted private sector actors to encourage the recruitment, retention, and promotion of female employees in leadership positions. • Work with the Ministry of Labor to establish reporting systems for employees to confidentially report employer violations to enforce the 2020 Labor Code reforms, specifically, provisions that prohibit: firing pregnant workers or those on maternity leave; sexual harassment in the workplace; and discrimination in hiring, promotion, compensation, and termination due to race, color, religion, sex, political opinion, trade union activity, or ethnic or social origin. • Encourage USAID partners and sub-recipients to incorporate decent work, gender equality, and diversity considerations within due diligence processes for procurements and/or capacity-building for partners. The International Labour Organization's Decent Work indicators and the Women's Empowerment Principles established by UN Global Compact and UN Women provide examples of considerations to incorporate within these processes.

RECOMMENDATIONS FOR USAID IMPLEMENTING PARTNERS (ACTIVITY LEVEL)

There are limited gender-specific data on the livelihood strategies that Batwa employ and the specific barriers they experience for engaging in economic participation.	<ul style="list-style-type: none"> • Intentionally partner with organizations focused on improving the lives of Batwa in Burundi, such as Unissons-nous pour la Promotion des Batwa (UNIPROBA), to better understand the challenges Batwa men, women, and youth face to earn a livelihood; identify ways to address these challenges to strengthen Batwa economic participation.
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Engaging male family members' support for women's participation in economic empowerment programming is essential due to strong negative perceptions about women who engage in productive activities outside of the household, particularly in rural areas. Discriminatory norms, the need for a husband's permission, time poverty, and low literacy levels hinder women's ability to participate in skill- and capacity-building opportunities and activities, including agricultural and non-agricultural income-generating activities.

- Use and integrate into USAID programming household dialogue models that are adapted to the Burundi context (or, adapt existing household dialogue models to the Burundi context) in order to address and reduce discriminatory norms that hinder women's ability to meaningfully participate in income-generating activities, such as household time poverty or stereotypes that working women are sex workers.
- Strengthen monitoring and evaluation efforts within programs that use VSLAs in order to identify which VSLA approaches are showing promising results for women's empowerment.

Although women are primarily responsible for managing daily household water and fuel sources and needs, they are significantly underrepresented in local natural resource management groups. If women do participate in these groups, they are often not in leadership positions. Batwa and youth also are not represented in these groups.

- Work with local natural resource management groups, such as colline water committees, to increase the meaningful participation and representation of women, youth, and Batwa in these groups and in local resource management decision making.

III. GOOD GOVERNANCE AND CIVIL SOCIETY

INTEGRATED COUNTRY STRATEGY MISSION GOAL 3 — Invest in Society and the Region: Burundi is a peaceful, open, and stable actor at home and in the region.

USAID/BURUNDI DEVELOPMENT OBJECTIVE 2 — Peacebuilding is consolidated.

RECOMMENDATIONS FOR USAID AND OTHER DONORS (STRATEGIC LEVEL)

Quotas for women's representation have not resulted in women's enhanced political influence, although women now have more representation in positions subject to the quota. Women in leadership roles do not often have the same visibility, financing, and political influence as their male counterparts. Women in politics are perceived as not necessarily being the most qualified or the most politically active, but as selected to meet the quota and to follow political parties' agendas.

- Establish programs that encourage and promote women running for office at each government level; consider partnering with local organizations such as Association of Repatriated Women of Burundi (AFRABU) who are working in this space.
- Prioritize intentional strategies to strengthen women's leadership across all sectors. Such strategies could include providing skill-building opportunities and promoting women who are leaders in their communities as role models and mentors. Couple leadership skill-building with programming designed to shift intra-household dynamics to adjust caretaking responsibilities and support women's increased participation outside the home.

While civil society associations have advanced women's position in society, their support is relatively limited, as demonstrated by low budgets and limited buy-in from other stakeholders across the country.

- Prioritize grantmaking to women-led and feminist organizations in support of the USAID's dual goals of advancing gender equality and localization.

The media landscape is dominated by male voices, and the media often perpetuates gender stereotypes, particularly of women. Few women work in the media, and those that do face discrimination and harassment. Media reports only the most severe cases of GBV, furthering the normalization of sexual harassment and Intimate Partner Violence (IPV).

- Increase capacity building for gender-sensitive media. Work with the media actors (such as outlets like IWACU Press Group, Association of Women Journalists, and the National Council of Communication) to train staff and journalists on gender-sensitive reporting. Support fellowships to develop content to address gender inequality, including reporting on all forms of GBV, including sexual harassment or IPV.
- Work with media companies to promote women in public facing and leadership roles to improve women's visibility and meaningful participation in the media sector.

<p>Women are underrepresented in law enforcement and defense forces, and face stigma and sexual harassment in these positions. Women officers are regarded as being more supportive of survivors of GBV than men in law enforcement.</p>	<ul style="list-style-type: none"> • Work with Burundi's National Police and Ministry of Justice to conduct a study to identify a comprehensive list of barriers women in particular face for enrollment and retention in law enforcement positions. Use the study's findings to inform strategies to reduce structural and normative barriers that hinder women from applying to, being hired for, and assuming leadership positions in law enforcement.
<p>GBV is poorly prosecuted in accordance with the Constitution and existing laws.</p> <p>Stakeholders report a culture of impunity for perpetrators of GBV and low confidence in the justice system to prosecute cases. GBV survivors face additional barriers to seeking justice in a court of law.</p>	<ul style="list-style-type: none"> • Conduct a study to comprehensively examine the use of the <i>bashingantahe</i> for GBV-related cases, including the extent to which do-no-harm considerations are taken into account and survivor-centered resolutions are pursued. Greater research is also needed on the effect of women's participation in <i>bashingantahe</i> on women's empowerment outcomes. • Work with the Ministry of Justice to activate the portion of the 2016 GBV law that requires that all law enforcement departments, particularly at the local level, to have focal points trained specifically to handle cases of GBV. In addition to the focal points, ensure that all law enforcement officers—both men and women—are trained in how to receive, process, and manage cases of GBV and how to interact with survivors in keeping with ethical codes of conduct, including making confidential referrals for care. • Support the Ministry of National Solidarity, Human Rights, and Gender to develop an updated five-year GBV strategy. • Work with the Ministry of Justice to train lawyers and judges—both men and women—at all levels of government on how to effectively and appropriately prosecute and handle cases of GBVs in accordance with existing laws.
<h3>RECOMMENDATIONS FOR USAID IMPLEMENTING PARTNERS (ACTIVITY LEVEL)</h3>	
<p>Limited awareness of the rights to equality and to live free from violence, as well as a lack of role models and low levels of self-confidence, hinder women's empowerment particularly among young girls and Batwa women.</p>	<ul style="list-style-type: none"> • Implement awareness campaigns as well as training on individual rights and equality, specifically targeting women, youth, and other marginalized groups such as the Batwa. Incorporate references to existing provisions in the Constitution into these awareness campaigns. Work with the media or social influencers to disseminate these campaigns to reach rural populations, to educate women and youth, in particular, about their rights to equality and safety.
<p>Influential leaders, such as religious leaders, who engaged in preventing the escalation of politically-motivated violence during the 2015 conflict have largely stayed silent on issues related to GBV.</p>	<ul style="list-style-type: none"> • Identify and work with local religious and other key influential leaders and champions to denounce GBV within their communities. Consider replicating the Faithful House and Islamic Family Life approach of Catholic Relief Services (CRS), which promotes joint household decision making as entry points to working with religious leaders on enhancing gender equality at the household level. • Embed household dialogue models adapted to the Burundi context in programming to target norm and behavior change within the household, to promote more equitable household decision making and to shift norms that contribute to GBV.
<p>Norms that limit women's participation in economic and civic life, including those that limit girls' and women's confidence, are key barriers to strengthening women's leadership.</p>	<ul style="list-style-type: none"> • Use evidence-based individual and group empowerment methodologies, particularly those that have been successfully developed and adapted to the Burundi context, to promote women's and girls' sense of self, self-confidence, and self-efficacy. Ensure that projects have effective monitoring, evaluation, and learning (MEL) approaches to assess the empowerment outcomes of interventions and continue to build the evidence base for what works. • In program design, expand the use of community-level diagnostic tools that have been adapted to the Burundi context, such as the Social Norms Exploration Tool, to identify barriers that limit women's political and civic participation and women's and girls' leadership.

I. INTRODUCTION

I.1 BACKGROUND

Following requirements of the USAID Automated Directives System (ADS) 201.3.2.9 and ADS 205, USAID/Burundi hired Banyan Global to undertake a countrywide gender analysis to inform the U.S. Government Integrated Country Strategy (ICS) (FY2023–2027) and the Mission’s strategic framework (SF), as specified in the scope of work (SOW) in [Annex A](#). The gender analysis aligns with the [USAID Gender Equality and Female Empowerment Policy \(2012\)](#), [U.S. Strategy to Prevent and Respond to GBV \(2016\)](#), the [Women’s Entrepreneurship and Economic Empowerment \(WEEE\) Act of 2018](#), and the first [U.S. National Strategy on Gender Equity and Equality \(2021\)](#).

A gender analysis is a systematic process used to identify, understand, and describe gender differences in a specific context, with attention to the relevance of gender roles, responsibilities, rights, opportunities, patterns of decision making and leadership, and access to resources and services. It is a tool for examining both the causes and consequences of inequality, while identifying gender program priorities for more impactful and equitable development interventions. The USAID/Burundi gender analysis identifies gender gaps and provides data to enhance the integration of gender equality and women’s empowerment, and it provides recommendations to better address gender-related inequalities, constraints, advances, and opportunities.

I.2 REPORT STRUCTURE

This report is organized in two parts, with accompanying Annexes, as summarized in Table 2.

TABLE 2. REPORT STRUCTURE OF USAID/BURUNDI GENDER ANALYSIS

REPORT SECTION	DESCRIPTION OF SECTION	ORGANIZING ELEMENTS OF GENDER ANALYSIS
Section 2: Country Level Gender Equality Overview	A country level analysis, per the gender analysis domains delineated by the USAID Automated Directives System 205 Gender Directive.	<ul style="list-style-type: none">• Laws, policies, regulations, and institutional practices• Cultural norms and beliefs• Gender roles, responsibilities, and time use• Access to and control over assets and resources• Patterns of power and decision-making
Section 3: Gender Analysis Findings and Recommendations	Findings, recommendations, and illustrative indicators are organized by Integrated Country Strategy Mission Goals (MG) and Intermediate Results (IR). Each of the MG sections examines intersecting variables of age, province, urban/rural residence, and marital status. Cross-cutting themes of women’s economic empowerment and GBV prevention and response are also analyzed.	<ul style="list-style-type: none">• MG1: Invest in People: Burundian systems for health and education are strengthened• MG2: Invest in the Economy: The foundation for a stronger Burundian economy is created through investment, employment, profitable value chains, and sound agricultural and environmental practices• MG3: Invest in Society and the Region: Burundi is a peaceful, open, and stable actor at home and in the region
Annexes		<ul style="list-style-type: none">• Annex A: Gender Analysis Scope of Work• Annex B: Methodology• Annex C: Country Context• Annex D: Quotas in Burundi Political Representation• Annex E: List of Key Documents Consulted

1.3 METHODOLOGY AND DATA LIMITATIONS

This report is based on a desk review of nearly 200 sources, as well as primary data collection through 128 semi-structured interviews and two focus groups that engaged a total of 135 stakeholders. Through remote and in-person methods, the research team conducted primary data collection during February 7–March 28, 2022. Due to travel and health restrictions associated with COVID-19, one team member was unable to travel to Burundi; they conducted remote interviews with stakeholders in Bujumbura, for whom remote meetings were a standard part of their work.

Stakeholders included USAID staff, prime and local implementing partners, government officials, development partners, national and international non-governmental organizations (INGOs), key civil society stakeholders, and USAID program participants. Of the 135 key stakeholders consulted, 99 (73 percent) were women and 36 (27 percent) were men. Key stakeholders were identified through an initial list provided by USAID, supplemented with a list of key implementers or actors based on the desk review. Additional informants were then identified via snowball sampling. Table 3 presents the number of stakeholders consulted by each sector included in this analysis.

TABLE 3. NUMBER OF STAKEHOLDERS CONSULTED BY SECTOR

SECTOR	NUMBER OF STAKEHOLDERS
USAID/Burundi Staff	6
Education	21
Health and Nutrition	33
Civic Engagement / Good Governance	29
Business / Economic Empowerment	18
Agriculture and Food Security	19
Climate and Environment	10
Total	135

USAID implementing partners, national and international NGOs, and local civil society made up the majority of stakeholders consulted. Due to limitations in securing interviews, only seven interviews were conducted with government representatives. Furthermore, the research team was able to conduct only a brief trip to provinces outside Bujumbura Mairie. Eighty-one percent of stakeholders were based in Bujumbura, although some of these stakeholders could speak to regional programs. In summary, the report is most significantly informed by the profile of development stakeholders in Bujumbura, with relatively less input from government and regional perspectives. See [Annex B](#) for further information on the study's methodology.

1.4 KEY POINTS TO CONSIDER

After conducting both secondary and primary data collection, the research team would highlight the following two key points to consider when reviewing the findings of this study.

There are limited available data on key metrics for analyzing gender equality and inclusion in Burundi. Almost no country-wide data exist to reliably document prevalence of GBV or to disaggregate indicators by key vulnerable groups, such as LGBTQI+ persons, sex workers, and Batwa. (See [Annex C](#), Country Context, for the ethnic composition of Burundi's population.) The most recent data on land ownership that are sex-disaggregated are from 2008. The report presents available sex-disaggregated data while noting the lack of recent and robust country-wide data to inform a clearer picture of issues related to gender. The accuracy of available data is also unknown; many stakeholders shared that official statistics do not always align with their experience.

The COVID-19 pandemic has hindered progress in gender equality throughout all sectors in Burundi. USAID/Burundi conducted [a mission-wide gender analysis](#), completed in April 2017, that concentrated on three sectors: health; democracy and governance; and food security, agriculture, and economic growth. In reference to that earlier gender analysis, this study's findings indicate limited progress in closing gender equality gaps, in part because of the significant impacts of the COVID-19 pandemic. The pandemic has deepened pre-existing inequalities and exposed vulnerabilities in Burundi's social, political, and economic systems. It must be noted that communities had experienced two and a half years of a global pandemic at the time of this report.

2. COUNTRY LEVEL GENDER EQUALITY OVERVIEW

This section presents cross-cutting analysis that identifies gender equality considerations relevant to each Mission Goal. Based predominantly on secondary data and validated through interviews, the findings are organized per domains identified in [USAID ADS 205](#), as required components of gender analyses: (1) laws, policies, regulations, and institutional practices; (2) cultural norms and beliefs; (3) gender roles, responsibilities, and time use; (4) access to and control over assets and resources; and (5) patterns of power and decision making.

A country context, presented in [Annex C](#), provides a brief overview of Burundi's geography and history, as well as significant factors influencing the country's development such as population growth and poverty rates. Readers who are less familiar with Burundi are encouraged to read this Annex to help contextualize the gender analysis findings.

2.1 LAWS, POLICIES, REGULATIONS, AND INSTITUTIONAL PRACTICES

2.1.1 NATIONAL COMMITMENTS AND POLICIES ON GENDER EQUALITY

The Government of Burundi (GoB) has subscribed to many international agreements and conventions to promote women's rights and gender equality, including the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) (ratified on January 8, 1992), the Beijing Declaration and Platform for Action (adopted in September 1995), and United Nations Security Council Resolution 1325 (UNSCR) (adopted in October 2000). Burundi has not yet ratified the Protocol to the African Charter on Human and Peoples' Rights, which, if ratified, would mandate the effective participation of women in decision-making bodies and the right to inheritance for women and girls. These international conventions have been supplemented with national level gender policies, action plans, and regulations to support gender equality and non-discrimination on the basis of gender, discussed below.

The Ministry of National Solidarity, Social Affairs, Human Rights, and Gender established and currently implements the National Gender Policy, effective 2012–2025. This policy aims to effectively address inequalities and discrimination between men and women to advance gender equality throughout Burundi, and it provides a substantial gender-responsive budget to do so.³ The National Gender Policy is also advanced by gender focal points or gender units within ministries, although the capacity and effectiveness of the focal points is inconsistent. At the provincial and municipal levels, the Ministry runs family and community development centers (CDFCs), now known as the Provincial Directorate of Family and Social Development (PDFSD), to provide vulnerable groups with “medical, legal and judicial assistance, [to] support services to GBV survivors, and [to] coordinate operations to combat GBV at the municipal level across Burundi”⁴ and also mobilize, train, and support savings groups.⁵ PDFSD stakeholders from provinces outside Bujumbura indicated that while their staff are skilled, they are too few in number to be effective and their services are not well known among community members.⁶ Those that are aware do not have high confidence in PDFSD staff capacities to provide adequate and sufficient services to GBV survivors.⁷

2.1.2 QUOTAS TO INCREASE WOMEN'S POLITICAL REPRESENTATION

The Beijing Platform for Action, a UN resolution adopted during the Fourth World Conference on Women in 1995, included a target of at least 30 percent of decision-making positions to be held by women, legitimizing the adoption of gender quotas. Women activists in Burundi accordingly campaigned for a gender quota during the Arusha peace talks. Their activism resulted in the 2005 Constitution (Articles 129, 164, and 182(2)) setting a minimum of 30 percent representation in the Executive Branch and the Parliament;⁸ subsequent revisions to the Electoral Code and Law of Political Parties further extended the quota. See Table 4 for a summary of the political quotas for women’s representation. Quotas do not apply to the presidency, local *colline* level political positions, governors, ambassadors, or the civil service. (*Colline*, meaning hill in French, refers to the decentralized governance level under provinces and communes.) Burundi is divided into 17 provinces, 117 communes, and 2,638 collines.⁹ (See [Section 3.3.1](#) for a discussion of the effectiveness of the quota system in promoting women’s equal participation and representation in Burundi.)

TABLE 4. SUMMARY OF GENDER QUOTAS WITHIN BURUNDI’S LEGAL FRAMEWORK

EXECUTIVE BRANCH AND PARLIAMENT	At least 30 percent women in the Executive Branch and the Parliament, both the National Assembly and the Senate. Source: Constitution (Articles 129, 164, 182(2)).
COMMUNAL COUNCILS	At least 30 percent of the 15-member Communal Councils must be women. Source: Electoral Code (Article 182.2), revised 2009. ¹⁰
POLITICAL PARTY CANDIDATE LISTS	Lists must take gender balance into account; one in four candidates must be women. Source: Electoral Code (Article 127(4)), passed 2011.
POLITICAL PARTY COMMITTEES	At least 30 percent women in the compositions of national and provincial executive committees of political parties. Source: Law of Political Parties (Article 33).

2.1.3 LAWS AND POLICIES COMBATING GBV

At international and regional levels, the GoB is a party to multiple instruments aimed at combating GBV (see Table 5). These international instruments are incorporated into the Burundian constitution, and the GoB has implemented several national-level laws, strategies, and action plans to combat GBV.

TABLE 5. INTERNATIONAL AND REGIONAL FRAMEWORKS RELATED TO GBV

INTERNATIONAL COVENANT ON ECONOMIC, SOCIAL, AND CULTURAL RIGHTS	Ratified by Burundi in 1990 to guarantee that articulated rights need to be exercised without discrimination
MAPUTO PROTOCOL	Signed, but not ratified, by Burundi in 2003 to guarantee equal rights between men and women
KAMPALA DECLARATION ON SEXUAL AND GENDER BASED VIOLENCE	Signed by Burundi in 2011 to prevent GBV, end impunity, and provide support to survivors of GBV
UN SECURITY RESOLUTION 1325	Adopted by Burundi through a first National Action Plan in 2017 to promote the participation of women in decision-making processes
INTERNATIONAL CONFERENCE ON THE GREAT LAKES REGION (ICGLR)	Burundi became a member in 2008, which includes the adoption of the Protocol on the Prevention and Suppression of Sexual Violence against Women and Children

In 2016, Burundi adopted the Law on the Protection of Victims and the Prevention and Punishment of Sexual and GBV (Act No. 1/13 of 22 September 2016). This law provides a comprehensive definition of GBV along with an approach to address the investigation, prosecution, and punishment of perpetrators, and protection and support services for victims, including legal aid (Article 30) and compensation (Article 58). The law prohibits domestic violence, rape (including spousal rape), and sexual harassment, with penalties of up to 30 years' imprisonment, and either a fine or 3–5 years' imprisonment for conviction of domestic abuse of a spouse. The law includes various articles that hold different stakeholders accountable. It tasks the government with establishing training programs on gender and GBV for professionals, including education professionals (Article 9 and 10), and plans for the creation of a specialized unit or focal point on GBV within the police force (Article 11). The GoB is also responsible for creating welcome centers and emergency shelters for victims to have access to medical, psychosocial, judicial, legal, and social reinsertion services (Article 20). The GoB created such integrated centers in Gitega, Kirundo, Makamba, Rumonge, and Cibitoke with the purpose of providing holistic care to survivors of GBV. Regional stakeholders observed that these centers are relatively new and have limited resources to fully support survivors of GBV. However, with limited resources, they provide some support directly or refer survivors elsewhere for care, though they cannot effectively support survivors with safe housing or relocation.¹¹

Article 2 of the 2016 law requires judges specialized in GBV to be appointed in prosecutors' offices, and for a chamber specialized in GBV and for minors to be established within high courts. However, as of October 2020, the special chamber had not yet been created, and no police officers or judges had been prosecuted under the law's stricter punishment for concealing violent crimes against women and girls.¹² Key informants (KI) noted no progress in this regard since 2020; they cited that the highest needs are the creation of this special chamber for GBV and minors, appointment of trained focal points to rapidly care for and support survivors within the justice system, and establishment of the *tribunal de grande instance* (Court of First Instance).¹³

The Ministry of National Solidarity, Social Affairs, Human Rights, and Gender is the designated Ministry responsible for developing a national strategy on GBV.¹⁴ Embedded into the National Gender Policy (2012–2025) is the National Strategy to Combat GBV (developed in June 2018). Its primary purpose is to combat different types of discrimination and inequality affecting women in order to achieve equality between the sexes, including establishing action plans.

The legal age of marriage in Burundi is 18 for women and 21 for men (according to the 1993 Code of Persons and Family, Article 88). However, according to Article 88, a provincial governor can authorize a marriage below the legal age in extenuating circumstances, providing a legal loophole allowing child marriage. Creating such an exception to the legal age of marriage conflicts with Article 2 of the Law on the Protection of Victims and the Prevention and Punishment of Sexual and GBV, which prohibits child marriage: specifically, no one can marry under the legal age or when the person does not have the biological, physical, and psychological capacity to marry.¹⁵

The GoB does not collect nor produce national statistics on the extent to which child marriage occurs throughout the country.¹⁶ According to the 2016/2017 Demographic and Health Survey (DHS), 19 percent of girls in Burundi are married by age 18, and 3 percent by age 15.¹⁷ Child, early, and forced marriage and unions (CEFMU) are perpetuated by discriminatory gender norms, political alliances, and violence against girls. In Kirundi, girls are sometimes referred to as **umukobwa**, meaning, “intended for bride price.”¹⁸ Girls learn normative household tasks from an early age to prepare for their expected roles as a wife and mother. The lack of an inheritance law limits girls' potential to inherit land, and considering the few options girls have to earn and control their own income, many girls feel pressure to marry early in order to secure a source of livelihood support and respect within society.¹⁹ Additionally, in cases of pregnancy outside of marriage or in cases of rape, families sometimes force their daughters to marry their sexual partner or attacker to avoid family shame associated with girls having sex outside of marriage, even in cases of rape.²⁰

2.1.4 INHERITANCE

There are no laws regulating inheritance in Burundi; customary law is applied, which effectively impedes women from accessing and owning land.²¹ (See [Section 3.2.1](#) for a discussion on the impacts of the lack of an inheritance law for Burundian women and girls.)

2.2 CULTURAL NORMS AND BELIEFS

Cultural norms and beliefs underpin the roles and responsibilities, access to resources, and patterns of decision-making power for women and girls, and men and boys in Burundi. Burundian cultural norms and beliefs are rooted in the country's strong patriarchal system, which shapes and defines sociocultural expectations for women and men.²² **Umukenyenzi** is the word Burundian society uses to describe the ideal woman; it means, “the one who ties her loincloth on thorns and walks without flinching and without the outside world noticing her pain.”²³ It serves as a metaphor of what Burundian men expect from a wife: a woman who carries the burdens of marriage with her head held high—and her mouth held shut.²⁴ An ideal man is described as **umushingantse**—“the one who embodies power, respect, and value.”

Normative expectations shape Burundian women's role in overseeing household responsibilities and childcare,²⁵ limiting women's opportunities for participation in activities outside their homes. This is further reinforced by the belief **inkingi y'irembo**—“she is responsible for everything at home.”²⁶ A married woman is expected to be submissive to her husband, to respond favorably to his sexual desires, and to be a good mother.²⁷ Such normative expectations shape the ways in which women see their roles in society and how an ideal woman should behave, often relegating women to the domestic sphere and to unpaid or low-paid activities.

Likewise, normative expectations shape how men should behave as an ideal man, one who typically exercises visible leadership and is influential in public and private roles. As such, Burundian men maintain power and influence in any decision-making pertaining to familial, economic, and social life.²⁸ Women are not considered autonomous individuals who can make decisions for themselves or others, given the highly entrenched patriarchal system. Burundian women's agency and aspirations are constrained by their social environment, which defines their value as inherently inferior to men.²⁹ Women are expected to follow the advice of men and must weigh the potential consequences of contesting their husband's expectations and decisions, including possible divorce, abandonment, and GBV.³⁰

Such norms are reinforced by legal practices and policies, as illustrated in the Code of Persons and the Family, Article 122, which establishes the husband as the head of the household: "He performs this function to which the wife contributes morally and materially in the interest of the household and children. A wife undertakes this function when the husband is absent or prohibited from doing so."³¹

Parenting practices in Burundian society reinforce and perpetuate existing gender dynamics and norms for future generations by assigning children to gender-normative tasks, with girls performing household work, helping to raise children, and respecting and submitting to men (in preparation for her future husband).³² A widely held belief holds that, because girls are expected to grow into wives and mothers, their training should be at home; formal education would unnecessarily delay their assumption of motherhood and wifely duties.³³ Other pressures and stigmas also contribute to girls' dropout of school, including due to teenage pregnancy. (See [Section 3.1.2](#) for more information about cultural norms related to school dropout rates.) Formal education as well perpetuates cultural norms, beliefs, and values that position women as inferior to men.³⁴ School textbooks and classroom practices reflect and reinforce stereotypical gender roles and social expectations. Examples of such beliefs include the generalizations that girls behave better than boys and are better at reading, while boys are better at math.³⁵

The topics of sex, sexual and reproductive health (SRH), and sexuality, especially sex outside of marriage, are stigmatized and not openly discussed.³⁶ Parents are expected to teach sexual education to their children of the same sex, but they rarely do; it typically falls to extended family members of the same sex. As families have become increasingly geographically dispersed, extended family members are not close by and so such conversations around sexual education are limited.³⁷

Social norms also strongly associate women's virginity before marriage with family honor and a moral upbringing. It is common for parents to keep their daughters at home before they are married, to "protect" their daughters' morality and the family's honor.³⁸ In cases of pregnancies outside of marriage, girls may be forced into marriage to protect their family's honor. If an unmarried pregnant girl does not marry the father, she will not be welcomed back to her parents' home and cannot return to her school.³⁹ Despite social norms, sexual activity before marriage is common, including girls having coerced sex or sex in exchange for gifts or money.⁴⁰ Contraception is rarely used, even though it is becoming less socially acceptable to have more children than one can care for.⁴¹ (See [Section 3.1.1](#) for more information about how norms related to SRH impact health-seeking behaviors and outcomes.)

Additionally, there are strong social stigmas and legal provisions against both sex work and same-sex relations.⁴² In 2009, the GoB passed legislation criminalizing sex work and same-sex sexual relations.⁴³

Lesbian, gay, bisexual, transgender, queer, intersex and people of diverse genders and sexualities (LGBTQI+), as well as sex workers, reported face discrimination and human rights violations.⁴⁴

Norms that devalue women and non-heteronormative identifying individuals enable the continued acceptance and perpetuation of GBV. Data from the DHS show a decrease in acceptance of certain forms of GBV, such as intimate partner violence (IPV), since the 2010 DHS. In 2016/2017, 62 percent of women and 35 percent of men considered it acceptable for a husband to beat his wife for at least one reason; in 2010, fully 73 percent of women and 44 percent of men considered it acceptable.⁴⁵ Women are indeed socialized to view violence as a normative part of family life.⁴⁶ Stakeholders from PDFSD shared that it is normal for a husband to beat his wife if he perceives (rightly or wrongly) that she is not faithful to him, or if she refuses sex with him.⁴⁷ Although national policies and laws exist to protect and promote women’s rights, they are poorly enforced; unequal power relations between men and women can lead to harmful consequences for women who challenge the status quo or seek justice.⁴⁸

2.3 GENDER ROLES, RESPONSIBILITIES, AND TIME USE

The typical division of labor among Burundians is highly gendered, as men and women assume different gender-normative roles.⁴⁹ Such division of labor is deeply rooted in the patriarchal culture, in which the man’s role is to exercise authority over household affairs, to make decisions, to protect the household from perceived and real threats to safety, and to provide a livelihood for the members of the household.⁵⁰ Women are expected to do unpaid domestic duties, including household chores and caring for children and other members of the family. There is increasing openness in urban areas to the idea that household chores can be shared between men and women, but women still effectively bear responsibility for household chores.⁵¹ On average, women spend 5.5 more hours per day on household tasks and care work than men (see Table 6).⁵²

TABLE 6. COMPARISON OF TIME SPENT ON HOUSEHOLD AND CARE WORK (WOMEN AND MEN)		
AVERAGE HOURS PER DAY	WOMEN	MEN
Caring for children	4.4	1.1
Cooking	3.3	2.1
Other domestic tasks (including collecting water and firewood)	2.2	1.1

Participation in income-generating activities is also highly gendered. Crop farming and animal husbandry constitute the main economic livelihoods in Burundi, particularly in rural areas.⁵³ On the farm, men assume roles perceived to be physically demanding, such as land preparation, cutting trees and grass, and hoeing. With respect to livestock, men are typically responsible for bringing the animals to graze, an activity that can take an entire day.⁵⁴ Men handle all agricultural sales and negotiations.⁵⁵ Burundian women, particularly in rural areas, provide unpaid agricultural labor for agricultural tasks perceived to be physically less demanding (such as planting, weeding, cultivating, and harvesting), working on household plots owned by their husbands or male relatives; their labor accounts for 62–70 percent of total farm-work hours.⁵⁶ Increasing land fragmentation in recent years also increases the time women spend on the farm, as they have to walk from one field to another, often at considerable distances.⁵⁷

Changing rain patterns, soil degradation, and the low return from agricultural sales have resulted in men's out-migration to larger cities or neighboring countries for economic opportunities, which in turn, has increased women's household agricultural production roles and responsibilities.⁵⁸ As a result of male outmigration, women have been forced to take on men's normative roles, such as land preparation, felling trees, and livestock management, in addition to their domestic chores and their previous income-generating activities, such as market and roadside selling.⁵⁹

2.4 ACCESS TO AND CONTROL OVER ASSETS AND RESOURCES

Women have limited access to the inputs and resources needed for agricultural production and income-generating activities, as compared to men. Such inputs and resources include access to credit, land, training, information, and loans.⁶⁰ Without a national inheritance law, discriminatory customary practices continue to limit women's access to land and property. Without access to land, women are less likely to have the necessary collateral to obtain credits and loans.⁶¹

Women also have limited or no influence in decision making about how land and resources are managed.⁶² If women do cultivate their own plots, it is typically for household food consumption.⁶³ Regarding livestock ownership, cows are usually owned by the male head of household, though women may own small livestock. However, her husband can use her livestock for any purpose he deems necessary.⁶⁴ A stakeholder shared anecdotal evidence that an intended program beneficiary had stopped buying goats, because she knew that the goats would automatically become her husband's property: she would lose this income source and would be unable to invest her earnings into other businesses.⁶⁵

Although women engage in some income-generating activities, such as selling fruit or vegetables, they seldom exercise authority over how to spend the resulting income.⁶⁶ Women's income-generating activities are carried out close to home, and their income is treated as a secondary source of household income.⁶⁷ Men typically engage in activities that provide higher incomes, such as cash crop production, salaried employment, and vocational jobs. Although women must typically negotiate with their husbands how to spend their earned income, men enjoy autonomy in spending their earnings, whether for household needs or even alcohol consumption.⁶⁸ Risks of GBV further limit women's influence in decision making or managing household incomes.⁶⁹ More recently, however, a study by Tuyikeze and Wandere found that men may sometimes use their own income to fund their wives' business ventures such as vegetable selling, suggesting there may be some norm shifting around husbands' support for women's participation in income-generating activities.⁷⁰ Many key stakeholders nevertheless cited the difficulty of securing the husband's support and permission as a key barrier for women to engage in and benefit from income-generating activities.⁷¹

2.5 PATTERNS OF POWER AND DECISION-MAKING

Burundian society follows a normative patriarchal system which generally limits women's power and influence in decision making, both within and outside of the household. Men typically assume decision-making authority within the household and community, as well as at the national level.⁷² Within the household, either the husband or the eldest son holds decision-making power as the head of the household. Typically, when a husband is not present (whether temporarily away from the household or deceased), deference is given to the eldest son to assume decision-making control.⁷³ This is demonstrated by the Kirundi proverb *nkokokazi ntibika isake ihari kaba ari agesema*, translated as, "the hen does not crow when a rooster is present, it is a curse."⁷⁴ It is more common for women and girls to express their voice in urban areas than in rural communities, particularly at social events.⁷⁵

Men's role as the decision-maker usually includes control over what his wife can and cannot do, where she can and cannot go, how household income and agricultural harvests are managed, and other daily decisions. Women and girls often do not make decisions with respect to their own reproductive healthcare, unless they have negotiated such decisions with their husbands.⁷⁶ Women can decide which ingredients and recipes to use for each meal—typically favoring what their husbands prefer or what their children like—so long as they are able to grow or purchase the food items.⁷⁷

Practices of marriage in Burundi reinforce women's inferior role in the household and society, limiting their power and decision-making control. The traditional marriage ceremony, **Gusaba umugeni** ("asking for the door"), requires a payment from the man's family to the woman's family to persuade them to accept the marriage, placing the woman under her husband's control. This marriage payment takes place in a public ceremony witnessed by community members, as the transfer of authority over the woman from her own family to her new husband. This custom is observed in both rural and urban areas.⁷⁸ It is also common for men and women to live together and act as a married couple without official registration, though it is illegal in Burundi. This practice used to be more typical in lower socioeconomic groups who cannot afford marriage payments, but it is increasingly common among other socioeconomic groups as it is expensive and cumbersome to officially register a marriage.⁷⁹ Informal polygyny is also common in Burundi, particularly for men who travel for work and take a second or third wife in another province.⁸⁰ Unregistered marriages leave women and their children (in particular) extremely vulnerable, as they cannot claim any legal right to children or property in the event of a disruption to the union—whether their partner is deceased or ends the relationship, or decides to take a second or third wife.⁸¹

Decision-making patterns may vary slightly depending on socioeconomic status.⁸² For example, a woman whose extended family is at least as wealthy as her husband will have greater influence in decision making around children or shared assets.⁸³ Women's influence in household decision making is also positively associated with the husband's level of education, more than with their own level of education.⁸⁴

Beyond such intersections, a 2020 report by Tuyikeze and Wandere suggests that intra-household norms around decision-making are shifting more broadly, and discussions between husbands and wives about how to spend household wages are becoming more common.⁸⁵ Key informant interviews confirmed that, in urban areas, it is increasingly common for husbands and wives to share household expenses based on their individual incomes.⁸⁶ Both men and women respondents in the Tuyikeze and Wandere study said that better communication between spouses led to more "harmonious" relationships and household dynamics.⁸⁷ Interviews with stakeholders outside Bujumbura echoed the importance of spousal communication; they described household dialogue models, such as Gender Action Learning System (GALS) or Family Farming Council (FFC), as effective methods for promoting behavior change and specifically for men becoming more open to sharing household responsibilities, such as by including their wives in household decision-making on how to spend income from crop sales (for example).⁸⁸ These observations suggest that such activities are useful to promote shifts in attitudes around household decision making.

Beyond the household level, the presence of women in decision-making positions is limited at all levels. In 2021, only 38.2 percent of seats in the national parliament are held by women, and in local government 33.3 percent of elected seats are held by women.⁸⁹ At the colline level, where there is no quota, women's representation is largely unchanged since 2015: for colline councilors, at 19.3 percent in 2020, down from 20.6 percent in 2015; and for colline leaders, 7.9 percent in 2020, up from 6.3 percent in 2015.⁹⁰ (See [Section 3.3.1](#) and [Annex D](#) for an in-depth discussion of women's political participation and representation.)

The *bashingantahe* is a community-based customary conflict-resolution mechanism (i.e., one not governed by law), showing some incremental progress on women’s representation. While it used to be only composed of men, women have increasingly been appointed in an effort to reach parity in participation at the community level.⁹¹ Women, and particularly Batwa, were historically marginalized from participating in *bashingantahe*, and accordingly women and Batwa in general were reluctant to use this means of conflict resolution; however, they now are accepted and even intentionally included as members.⁹² At the colline level, women members are increasingly called to settle conflicts and apply the principle of *Ukuri kuri mu muntu ntikuri mu mugabo* (“The truth is in human beings, not only men”).⁹³ However, women’s time poverty limits their ability to fully participate in *bashingantahe*, and men still predominate in adjudicating conflicts at the colline level.⁹⁴ Younger women are usually not included, as they are perceived to be too immature to serve in conflict-resolution positions.⁹⁵ Despite these indications of progress, further study is required to examine the participation of youth, women, Batwa, and other marginalized groups in the *bashingantahe*.

3. GENDER ANALYSIS FINDINGS AND RECOMMENDATIONS

3.1 MISSION GOAL I — INVEST IN PEOPLE: BURUNDIAN SYSTEMS FOR HEALTH AND EDUCATION ARE STRENGTHENED

USAID/Burundi is supporting ICS Mission Goal I through Development Objective I (“Human capital is developed”). This objective focuses on the delivery of health, education, and humanitarian assistance services.

3.1.1 IMPROVE HEALTH OUTCOMES: FINDINGS

TABLE 7. SNAPSHOT OF RELEVANT STATISTICS

- Maternal mortality ratio: 548 per 100,000 live births⁹⁶
- Infant mortality rate (deaths per 1,000 live births): 39 total (34 girls and 43 boys)⁹⁷
- Fertility rates: 53/1000 women (age 15-19)⁹⁸; 180/1000 women (age 15 to 44)⁹⁹
- Rate of contraceptive use by women (age 15-49): 23 percent¹⁰⁰
- Average number of children per woman: 5.2 children¹⁰¹
- HIV/AIDS prevalence (age 15-49): 0.6 percent of women; 0.5 percent of men¹⁰²
- Percent (age 15-49) who have ever experienced sexual violence: 23 percent women; 6 percent men¹⁰³
- Percent (age 15-49) who have ever experienced physical violence: 36 percent women; 32 percent men¹⁰⁴

Accessibility and quality of services are insufficient to address the basic health needs of Burundian men and women. Although 80 percent of Burundians live within five kilometers of a health facility, rural facilities are not equipped with the necessary tools or resources to support basic healthcare needs, forcing rural Burundians to travel longer distances to receive adequate care in city health centers. Insufficient modes of transportation as well as poor infrastructure and roads compound the challenges of reaching a quality healthcare center. The long distances to health facilities have a significant impact on women’s access to health services, especially for women in rural areas.¹⁰⁵ Women experience gender-specific barriers to accessing health services over longer distances: potential exposure to GBV during travel; limitations on their freedom of movement away from the home; and time poverty.¹⁰⁶ Women’s household and agricultural duties often conflict with daytime clinic hours. Women may have to travel to or from the clinic late in the day, when there is insufficient transportation as well as increased exposure to GBV, especially if clinics are far away or have long wait times.¹⁰⁷ When women cannot easily access a healthcare provider, they miss opportunities for diagnosis and treatment of diseases, for changes to treatment regimens, and for escalation of care. Less contact with health providers also means fewer opportunities to screen for IPV and to refer to GBV support services.

Insufficient female medical personnel and a lack of confidentiality practices discourage women’s use of health services. Years of historical political conflict has led to underinvestment in health systems and human resource management.¹⁰⁸ Disruptions—such as the displacement of personnel, lack of dedicated funding, supply chain interruptions, and deteriorating or damaged health facilities—have significantly reduced the capacity of the national health system, with effects that continue to hamper the national health system.¹⁰⁹ Although recent data are unavailable, in 2011 women represented 41 percent of all medical personnel in Burundi’s health system, concentrated in administrative and support roles. Aside from nurses, midwives, and health management staff, all other medical personnel categories were dominated by men.¹¹⁰ Stakeholders explained that the low number of women medical personnel reflect gender inequalities in educational opportunities.¹¹¹ Health experts also observed that women may prefer women doctors for treatment of sensitive issues related to SRH, FP, and GBV.¹¹² Regardless of the gender of medical personnel, patients have an overarching perception that healthcare is not confidential, citing issues with organizational management, personnel from their own community working in the health centers, and poor enforcement of ethical practices and codes of conduct. These privacy concerns deter women from seeking care in their community of residence, if a health center is nearby.¹¹³

Harmful gender norms and attitudes affect the quality and types of services women and men receive, which contributes to gender-based inequalities in health. Health facilities tend to focus on women’s reproductive capacity and provision of care for children, to the neglect of services unrelated to these needs.¹¹⁴ Standard practices and policies administered at health centers, such as intake questionnaires, assume only heteronormative unions and fail to take into consideration the diversity of the Burundian population. Some health centers avoid serving LGBTQI+ persons, however, several non-governmental organizations are working to fill this gap in health services.¹¹⁵ Table 8 gives more information. Table 8 gives more information

TABLE 8. ORGANIZATIONS SUPPORTING LGBTQI+ HEALTH IN BURUNDI

MOUVEMENT POR LES LIBERTÉS INDIVIDUELLES	Mouvement pour les Libertés Individuelles (MOLI) is a Burundi-based regional organization working to address discrimination based on sexual orientation and gender identity and expression (SOGIE). Their programming focuses on building the capacity of civil society organizations to implement SOGIE-sensitive programming and increasing dialogue around policies that discriminate based on SOGIE. In particular, MOLI programming targets MSM and transgender people through communication and advocacy activities. ¹¹⁶
TOGETHER FOR WOMEN’S RIGHTS	Together for Women’s Rights (TWR) is engaged in the fight against violence to women, any gender-based discrimination, gender inequalities, sexual and reproductive health education, sensitization on the prevention of breast cancer and colon cancer, mental health, and women’s economic empowerment.
CENTRE REMURUKA	Remuruka is a community space offering holistic counseling and HIV services for MSM and transgender people. This space is also used for discussions on topics related to sexual and reproductive health and inclusive MSM and transgender community development.
FHI 360	FHI 360’s HIV programs in Burundi offer prevention and treatment services to key groups including LGBTQI+ communities, MSM, sex workers, transgender people, and people who inject drugs. From 2014 to 2019, the USAID and PEPFAR-funded LINKAGES project connected newly diagnosed HIV-positive individuals from high-risk communities to treatment. A FHI 360 assessment found that peer-assisted HIV self-testing approaches were potentially effective for diagnosing hard-to-reach populations and Linking them to treatment. ¹¹⁷ Under the Meeting Targets and Maintaining Epidemic Control (EpiC) global project (2019-2024), FHI 360 is building upon LINKAGES by continuing to focus HIV prevention and treatment services on priority populations. ¹¹⁸ FHI 360 also provided capacity-building and advocacy support to seven LGBTQI+ -led CSOs through a Dutch-funded initiative, “Advancing the Rights of LGTBQI Burundians through HIV-Focused Intervention” (November 2018–January 2020). ¹¹⁹

Gender norms and attitudes affect men's and women's health-seeking behavior. Individuals interviewed for this study expressed that men are dissuaded from seeking preventative health services because of beliefs around masculinity that portray men as strong and not in need of care. Men may wait to seek care until pain becomes intolerable, sometimes when it is too late.¹²⁰ Likewise, beliefs around purity and chastity discourage women from disclosing ailments related to sexual intercourse to healthcare providers.¹²¹ For example, women may be apprehensive to request HIV/STI testing; for married women, requesting to be tested could imply she has been unfaithful or believes her husband has been unfaithful. For unmarried women, requesting to be tested could imply she is impure.¹²²

Despite GoB commitments to improve access to family planning (FP) tools, progress on key FP and other reproductive health indicators has been slow. As a member of the FP 2030 initiative, Burundi committed to the following goals: 1) improve the quality of contraceptive services by making services accessible to the larger population; 2) increase community mobilization on matters related to family and reproductive health, and provide basic health training to the community health workforce; 3) attain a contraceptive prevalence rate of 50 percent by 2020; 4) increase the number of people accepting a modern contraceptive method; and 5) increase government budget allocation for FP and reproductive health to 10 percent annually.¹²³

The GoB continues to implement strategies to advance these goals; however, to date only 1.6 percent of its budget is directed to FP and SRH, totaling 11,785,250 USD in 2019.¹²⁴ While the GoB has mobilized funding to purchase modern contraceptives, addressing the supply side of SRH,¹²⁵ barriers to the uptake of contraceptives remain. In 2021, the contraceptive prevalence rate among all women was 17.7 percent, including 28.4 percent among married women and only 4.1 percent among unmarried women.¹²⁶ Women in northern provinces and urban areas are more likely to use modern contraception methods (29 percent urban compared to 22 percent rural).¹²⁷ Modern contraceptive use is higher in northern provinces (41.1 percent in Ngozi, 34.9 percent in Kayanza, and 41.6 percent in Muyinga) compared to southern provinces (14.9 percent in Rumonge, 13.9 percent in Bururi, 12.5 percent in Makamba).¹²⁸ The reasons are unclear; one study (by Nzokirishaka and Itua) suggests as a contributing factor that family planning efforts have been more concentrated in the north, as the most populated part of the country.¹²⁹ More significant determining factors for contraceptive use than geography are age, number of children, education, and economic level.¹³⁰ Fertility rates among adolescent girls and young women are among the highest in the world, at 54 births per 1000 women (ages 15-19),¹³¹ although rates have slightly decreased since the 2010 DHS. Fourteen percent of girls have already had their first birth before the age of 18, and 77 percent by the age of 25.

SRH services in Burundi are not designed to support unmarried persons and youth; they often lack specially trained staff to ensure privacy and confidentiality, and many are known to have unreasonable wait times, inconvenient operating hours and locations, or an uncomfortable clinic and office environment.¹³² The limited level of targeted services toward unmarried persons and youth, combined with strong stigmas around pre-marital sex as well as limited access to SRH services in general, contributes to unintended pregnancies, forced marriages (particularly for unmarried adolescent girls and young women who become pregnant), and unsafe abortion practices.¹³³

Men strongly influence decisions around the timing and spacing of pregnancy, family size, and contraceptive use. Men are the primary decision-makers around contraceptive use, and some do not allow their partners to use contraception.¹³⁴ In Burundi, it is culturally expected that women's role is to serve their husbands, be submissive, and bear children. Some stakeholders noted that use of contraception without a husband's permission can contribute to IPV.¹³⁵ Experts interviewed stated that Burundian women may use contraception in secret, out of fear of negative reactions if discovered by their partner.¹³⁶ A study by Nkunzimana et al. found that the most used form of modern contraception was injectables.¹³⁷ Key stakeholders noted this as a preferred method of contraception by women seeking to avoid any physical evidence of taking it.¹³⁸

Religious messaging and misconceptions about modern contraceptive methods and their potential side effects contributes to the low uptake of contraceptives. Religious beliefs and social norms make sexuality taboo in Burundi.¹³⁹ Norms that prohibit sexual intercourse outside of marriage deter young unmarried women from seeking SRH and FP services, as they fear providers will stereotype them or treat them poorly.¹⁴⁰ For example, health providers may counsel girls to practice abstinence instead of providing options for contraception.¹⁴¹ According to experts consulted, and confirmed in a study conducted by the USAID-funded PASSAGES project, church leaders and religious messaging forbid contraceptive use and encourage natural methods if couples choose to engage in family planning.¹⁴² Such teachings dissuade church members from openly seeking and accessing modern contraception.¹⁴³ Several studies identified fear of side effects as a significant reason for underutilization of contraceptives,¹⁴⁴ possibly fueled by messaging from religious leaders promoting misconceptions that modern contraception can cause permanent infertility.¹⁴⁵ Women may be ashamed and afraid of being seen by others when seeking FP services because of such strong stigmas around FP.¹⁴⁶ However, the same study from the USAID-funded PASSAGES project suggested that religious norms around FP acceptance may be shifting, and that it is increasingly perceived negatively to have more children than one can care for.¹⁴⁷

Insufficient information about sex discourages youth from discussing SRH and seeking available health services. According to the study conducted under the USAID-funded PASSAGES project, young people in Burundi—particularly girls—do not receive adequate SRH education because of the shame and taboo typically associated with sexuality. Parents and other influencers, like school administrators and church leaders, reinforce that discussing sexuality is taboo; they are unlikely to share information with girls beyond encouraging abstinence. Aunts and female friends are more likely to be open to discussing such topics but they may share inaccurate information, whereas school-based health clubs or health providers are identified by the study as sharing the most accurate information. The lack of factual information on topics such pregnancy, menstruation, and HIV/AIDS leaves young people unprepared and unable to make informed decisions about their sexual health, resulting in poor menstrual health practices, unsafe sex, unintended pregnancies, and low willingness to report sexual violence. The study cites that menstruation comes as a surprise to many young girls.¹⁴⁸

Pregnant women's utilization of antenatal and postnatal health services is affected by social and economic factors at the individual, household, and community levels. In 2006, the GoB abolished all user fees for pregnant women and for children under five,¹⁴⁹ and data since 2010 show antenatal and postnatal care increasing. Between DHS studies carried out in 2010 and 2016–2017, the percentage of women who attended at least four antenatal care visits rose from 33 percent to 49 percent; the percentage who attended an antenatal visit in the first trimester rose from 21 percent to 47 percent.¹⁵⁰ The percentage of women who received postnatal care within two days of birth rose from 30 percent to 51 percent in the same period.¹⁵¹ Ministry of Health figures from 2021 indicate that

approximately 79.5 percent of pregnant women attended at least one antenatal visit; 68 percent attended two, 56.8 percent attended three, and 35.9 percent attended four antenatal visits.¹⁵²

Pregnant women's wealth, occupation, and marital status have a positive effect on the likelihood of accessing antenatal and postnatal health services from a trained service provider.¹⁵³ Findings suggest that educated women are more likely to seek antenatal and postnatal health services from a trained service provider. Approximately 63 percent of women of reproductive age cited limited economic means as a barrier to accessing antenatal and postnatal care; this figure was higher for divorced women, at 81.6 percent.¹⁵⁴

Eighty percent of women from Bururi cited economic means as a key barrier in accessing antenatal and postnatal health services, compared to 41.7 percent of women from Bujumbura Mairie.¹⁵⁵ Overall, approximately 5.5 percent of women of reproductive age cited the need to receive permission as a barrier to accessing such health services; in Bururi province, fully 27 percent of women cited this as a key barrier. Overall, 19 percent of women indicated that they did not want to go alone to access these services, citing this as another key barrier. This is a more significant issue in Bururi (48.9 percent) and Kayanza (25 percent) than other provinces.¹⁵⁶

At the household level, a study by Habonimana and Batura found that women from large and poor families have lower utilization rates of maternal health services. At the community level, living in a rural setting is negatively associated with receiving antenatal and postnatal health services from a trained service provider.¹⁵⁷ For example, just 45.7 percent of rural women attended an antenatal visit in the first trimester during their most previous pregnancy, compared to 61.6 percent of urban women; only 49 percent of rural women received a postnatal exam within two days of their most recent birth, compared to 71.5 percent of urban women.¹⁵⁸ These figures vary by province as well: only 22.9 percent of women in Muramvya received a postnatal exam within two days of their most recent birth, compared to 54.5 and 77 percent in Cibitoke and Bujumbura Mairie, respectively.¹⁵⁹ Additionally, women from Kirundo and Mwaro provinces are two times less likely to access antenatal services from a trained health professional.¹⁶⁰ Approximately 80 percent of women in Bururi cited at least one significant barrier to access antenatal and postnatal services, compared to 46.8 percent in Bujumbura Mairie.¹⁶¹

Long travel distances to the health facility, as well as the mountainous terrain, deters pregnant women from rural areas from seeking health services for antenatal and postnatal care even though they are entitled to them.¹⁶² Approximately 36 percent of rural women cited this as a barrier, compared to only 16 percent of urban women. Approximately 58 percent and 50.1 percent of women from Bururi and Rutana, respectively, cited distance to a health facility as their main barrier of access.¹⁶³

Unmarried women face more challenges to accessing free, public antenatal and postnatal health services than married women. The study by Habonimana and Batura found a strong positive association between marital status and likelihood to utilize antenatal and delivery services.¹⁶⁴ The study's authors suggest that intake practices may impose additional barriers for unmarried women to seek such services, particularly at public and religious health institutions that require marriage certificates for women to access free antenatal and postnatal health services.¹⁶⁵ This was confirmed by a representative of the Association of Women Lawyers of Burundi (AFJB), who elaborated that pregnant women, whether single or living with a partner without an official marriage registration, cannot access free public health services because they must present their marriage certificate in order to receive the services.¹⁶⁶

Unregistered births prevent parents from obtaining crucial services for their child, such as treatment from a health facility or government provider and enrollment in free primary school. In Burundi, families have 15 days to register the birth of the child without incurring a fee; two witnesses must be present to register the child, and the father's and mother's information must be presented for the registration.¹⁶⁷ Although registering the birth is free of charge, receiving the birth

certificate record costs approximately \$0.52.¹⁶⁸ According to the 2016/2017 DHS, one in three children lacked a birth certificate. Eighty-four percent of births were registered; 66 percent of births had a birth certificate, and 17 percent were registered but without a certificate.¹⁶⁹ Another 16 percent were not registered at all. Without a birth certificate, children cannot receive specific forms of social assistance and free healthcare, nor can they enroll in free primary school.¹⁷⁰

Certain populations, such as migrants, returnees, Batwa, or parents who are not registered themselves, are less likely to register their children. Women are also less likely to register their children if they are not married to the father, including sex workers, second or lower-ordered wives in informal polygynous relationships, and single mothers.¹⁷¹ Long distances to registration services and associated travel costs present an additional barrier to registering a child's birth, for those living in rural areas.¹⁷²

According to the 2016/2017 DHS, approximately 16 percent of children under five and 28 percent of children under one year are unregistered.¹⁷³ Children born in urban areas were more likely to be registered (at 90 percent) compared to children in rural areas (83 percent). Only 70 percent of children born to parents in the lowest socioeconomic group were registered, compared to 93 percent in the highest socioeconomic group. The lowest percentage of children were registered in Kirundo province (54 percent) and the highest in Gitega province (93.6 percent).¹⁷⁴ Table 9 shows registration data for all provinces, in descending order.

TABLE 9. PERCENTAGE OF REGISTERED CHILDREN UNDER AGE FIVE, BY PROVINCE¹⁷⁵

PROVINCE	PERCENTAGE	PROVINCE	PERCENTAGE	PROVINCE	PERCENTAGE
Kirundo	54	Bubanza	84.4	Muramvya	88.4
Cankuzo	72	Ruyigi	85.2	Ngozi	88.5
Makamba	78	Rumonge	85.2	Cibitoke	88.8
Muyinga	80.8	Rutana	87.2	Bujumbura Mairie	90.5
Bururi	81.5	Mwaro	87.8	Bujumbura	90.9
Karusi	83.5	Kayanza	88.1	Gitega	93.6

In 2021, UNICEF Burundi implemented birth registration campaigns in Kirundo, Cankuzo, and Makamba provinces, while successfully advocating for a legal review by the Ministry of the Interior, Community Development, and Public Security to reduce the barriers parents face in registering their children, such as the requirement for two witnesses and the 15-day registration window.¹⁷⁶

GBV remains a pervasive issue in Burundi, which is enabled by patriarchal norms that position women and marginalized groups as inferior to men in society. GBV is a serious public health issue in Burundi. According to the country's most recent DHS (2016/2017), approximately one-third of Burundian women have experienced physical violence at some point in their lives, while 23 percent of women and 6 percent of men have experienced sexual violence.¹⁷⁷ Sexual violence, a form of GBV, is higher in rural areas than urban areas.¹⁷⁸

Violence against women is normalized within family and community life. IPV varies by province, from 31 percent of women in Bujumbura to 50 percent in Ngozi and 73 percent in Kirundo.¹⁷⁹ A woman who is perceived to be unfaithful to her husband, who refuses to have sex with her husband, or is seen as eroding household cohesion is “allowed” to be beaten.¹⁸⁰ Community members do not get involved in issues of domestic violence, as it is considered a household issue. This reinforces the expectation that women should not seek help when they experience domestic violence.¹⁸¹

According to the 2016/2017 DHS, 62 percent of women and 35 percent of men believe it is acceptable for a husband to beat his wife for at least one reason; these percentages are lower than in the 2010 DHS, when 73 percent of women and 44 percent of men believed it was acceptable. Data from USAID implementing partners indicate that GBV sensitization programming may contribute to reducing attitudes that support domestic violence. An assessment of health provider attitudes conducted by the USAID-funded BRAVI project (2014–2019) found a decrease in providers' harmful beliefs related to SGBV (sexual and gender-based violence). Providers showed decreased belief that women should obey husbands in all things (-43%) and that a woman who is raped brings shame to her family (-23%).¹⁸² A CARE International study administered a questionnaire to 2065 individuals (1022 men and 1043 women) in 18 communities across six provinces (including 13 communities where CARE was working). The study found that more than 60 percent of both male and female respondents stated that there is *no* situation in which it is acceptable for a husband to beat his wife.¹⁸³ The study indicated, however, that the behavior of respondents may not align with their self-reported opposition to domestic violence. Beyond the DHS, there have been no large-scale studies of attitudes towards violence against women in Burundi, nor activity-level evaluations assessing if changes in attitudes are aligned with changes in behavior.

Marginalized groups at risk for various forms of GBV include young women, women returnees, women who head households, sex workers, and LGBTQI+ persons. Internally displaced (IDP) and returnee women and girls remain highly vulnerable to sexual violence and rape, especially on palm oil plantations and when searching for firewood or water.¹⁸⁴ IDPs share that fear of authorities, who can be perpetrators of abuse themselves, is a factor that discourages reporting incidents of abuse.¹⁸⁵

Most healthcare facilities across Burundi are not trained to conduct SGBV screenings and do not have adequate coordinated referral mechanisms to support survivors. Challenges to improving the availability and quality of services for survivors include: the low capacity of trained healthcare providers to conduct SGBV screenings and provide referrals; inconsistent supplies of necessary treatment and preventive supplies to facilities (including post-exposure prophylaxis for HIV, STI treatments, and emergency contraception); a lack of safe and confidential spaces for intake and treating survivors at facilities; and a lack of official data on SGBV in the national health information system, which hampers policymakers and program designers in designing evidence-based solutions.¹⁸⁶ The Ministry of Health has approved SGBV screening procedures, developed under USAID programming, to be used across health service providers; however, a limited number of centers and personnel have been trained.¹⁸⁷ Likewise, most medical personnel do not have the training and information needed to refer GBV survivors to adequate psychosocial, judicial, and safety services.¹⁸⁸ For example, medical certificates are required to prosecute GBV cases, but doctors do not always issue these certificates when treating patients, as issues of prosecution do not come to mind when supporting survivors in GBV. PDFSDs are available to provide psychosocial services, but staff have limited training in supporting GBV survivors. However, donors such as USAID have invested in systems to improve the capacity of healthcare workers and the quality of services to establish and increase the effectiveness of

referral mechanisms to support survivors of GBV in targeted provinces. See the Box 1 below detailing USAID's GIR'ITEKA Health Activity.

BOX 1. INTEGRATING GBV PREVENTION AND RESPONSE INTO HIV TREATMENT AND PREVENTION PROGRAMMING: GIR'ITEKA

USAID's GIR'ITEKA ("Be Respected") Health Activity delivers technical assistance to integrate GBV and FP programming within PEPFAR's HIV partners in six provinces. As of October 2021, GIR'ITEKA had strengthened GBV screening and referrals at 158 health providers, working with the health providers to offer a basic package of post-GBV clinical services as well as to increase the availability of confidential spaces, psychosocial counseling, and choice of a female provider.

Additionally, GIR'ITEKA works with men, community leaders (including religious leaders), and couples to promote positive masculinities, support survivors in accessing care, and speak out against GBV. GIR'ITEKA also supports USAID implementing partners (IPs) to work with community actors to support survivors to disclose GBV as well as refer them to services.

Sources: SWAA-Burundi. 2021. "GIR'ITEKA PROJECT (Be Respected Health Activity): FY2021 Narrative Annual Report." USAID and PEPFAR. October 2021. ([Link](#)); Burundi News Agency. "The International Women's Day Has Been Celebrated." 2022. ([Link](#)); and Engender Health. 2022. "Changes in Perceptions of SGBV among Community Leaders and Health Service Providers in Ngozi Province, Burundi." International Conference on Gender Studies in Africa (ICGSA), Makerere University. Presentation. ([Link](#))

IDPs have unmet needs for HIV and other sexual health services. Cross-border movements and internal displacements were triggered by political turmoil between 2015 and 2017, exacerbating ongoing natural disasters. (According to the Internal Displacement Monitoring Center (IDMC), approximately 23,000 Burundians were internally displaced due to conflict in 2015, a number which has since been decreasing; in 2020, approximately 51,000 Burundians were internally displaced due to a disaster. As of the end of 2021, the IDMC reported a total of 19,093 living in displacement, 97.5 percent of whom were displaced during the 2015-2017 political crisis.)¹⁸⁹ Particularly vulnerable persons (such as widows, women who head households, and IDPs) may turn to commercial sex in order to earn a livelihood or in exchange for food and other basic needs.¹⁹⁰ Often isolated, they do not know where to receive HIV and sexual health services and information. Interviewed stakeholders recommended targeting services to IDPs and other individuals, such as women and girls from particularly low socioeconomic status, who may turn to commercial sex for survival.¹⁹¹ No sex-disaggregated quantitative data on the rates of HIV exposure or infection among IDPs in Burundi could be identified.

HIV infection rates are higher among divorced and widowed women (8.2 percent) than for single (0.5 percent) or married women (0.9 percent).¹⁹² Among adults age 15–49, the HIV rate in 2020 was 1 percent, representing a decrease from 1.7 percent in 2017.¹⁹³ Women of those ages have higher rates than the men (1.1 percent, compared to 0.8 percent).¹⁹⁴ HIV prevalence is particularly high among certain key groups such as sex workers (at 21.3 percent). Recent evidence suggests that women with disabilities are especially vulnerable to HIV infection.¹⁹⁵ Women's vulnerability to HIV can be attributed to multiple factors: they are more likely to be victims of sexual violence;¹⁹⁶ women and AGYW are also more likely to engage in transactional sex to meet their livelihood needs, which increases their potential exposure to HIV;¹⁹⁷ finally, women have less decision-making control over contraceptive choices, which may also further expose them to HIV infection.¹⁹⁸

HIV infection rates are also much higher among divorced and widowed women (8.2 percent) compared to single (0.5 percent) and married women (0.9 percent).¹⁹⁹ The pathways accounting for HIV infection among widows and divorced women are complex. Key stakeholders referenced customary and religious

laws that govern widows' inheritance: widows without property may engage in transactional sex to avoid destitution, increasing their vulnerability to HIV infection.²⁰⁰

Women infected with HIV/AIDS are stigmatized in society, which further exacerbates their marginalization. An HIV-positive woman may be expelled from her home at the insistence of the husband's relatives, for having revealed an HIV-positive status or for not breastfeeding children to avoid exposing them to HIV.²⁰¹ Healthcare providers also perpetuate stigmatization and discrimination against women with HIV/AIDS: for example, by refusing to provide care to pregnant women with HIV during labor and childbirth, or refusing to treat newborns from HIV-positive mothers.²⁰²

Malaria is a main cause of mortality in pregnant women and children under age five.^a

Malaria is the leading cause of morbidity and mortality in Burundi, with over 9.6 million cases in 2019 and an incident rate of 808 per 1,000 inhabitants, according to the National Health Information System. Malaria accounted for 59 percent of in-hospital deaths in 2019, with a 1.4 percent case fatality rate among hospitalized patients in 2020. Although sex-disaggregated case data are not available, the most vulnerable populations are children under five years of age and pregnant woman, especially from rural areas.²⁰³ Pregnant women with malaria are at increased risk of miscarriage, stillbirth, premature delivery, and low-birthweight infants.²⁰⁴

The 2021–2027 Strategic Plan for the National Malaria Control Program (NMCP) has the goal of reducing malaria-related morbidity by at least 60 percent by 2027 and reducing malaria-related mortality to zero by 2027.²⁰⁵ Interventions in Burundi to control malaria during pregnancy include distribution and promotion of insecticide-treated nets (ITNs) as well as intermittent preventive treatment (IPTp) with sulfadoxine-pyrimethamine.²⁰⁶ IPTp administration started in 2016;²⁰⁷ the NMCP's objective is for every pregnant woman to receive at least three doses of IPTp. Based on 2020 DHIS2 data, 79 percent of women who attended antenatal care received one IPTp dose, 70 percent received two doses, and 58 percent received three doses.²⁰⁸ The USAID Tubiteho's 2020 annual report showed 62 percent of pregnant women received at least three IPTp doses during ANC visits within the six provinces supported by the project.²⁰⁹

Taking place every three years, ITN mass distribution campaigns target pregnant women and children under five. Nets are also distributed through antenatal care visits and in Expanded Program on Immunization (EPI) clinics for children under five. According to a DHS survey conducted in 2016–17, 56 percent of pregnant women reported sleeping under an ITN the night before the survey, as did 40 percent of children under five.²¹⁰ Some qualitative data indicate that decisions regarding ITN use are generally made by men;²¹¹ however, gender norms are likely not the most significant factor influencing their use. A 2018 study found that following the 2017 mass distribution campaign, the main reason nets were no longer in use was because they were torn.²¹² To address the need for new nets, community health agent groups are mobilized to identify households with ITN needs, whether due to new births or damage.²¹³

The number of ITNs distributed in 2020, during the COVID-19 pandemic, decreased compared to 2019, due to delays in ITN shipments and people's hesitancy to seek health services.²¹⁴ Annual statistics from the Ministry of Public Health and the Fight Against AIDS show declining ITN coverage after 2019. The proportion of women who received an ITN at a first antenatal care visit declined from 82.7 percent in

^a A 2009 study identified Malaria as the main cause of mortality in pregnant women and children below five years of age; whether it remains the leading cause could not be confirmed by more recent data. A 2018 study confirmed malaria infections to be the main cause of hospitalization and mortality among children under five. Nkurunziza, Hermenegilde. 2010. "Bayesian modelling of the effect of climate on malaria in Burundi." *Malaria Journal* 9:114. (Link); Moise, Imelda K. 2018. "Causes of Morbidity and Mortality Among Neonates and Children in Post-Conflict Burundi: A Cross-Sectional Retrospective Study." *Children* 5:125. (Link)

2019 to 76.2 percent in 2020, and further decreased to 69.1 in 2021. ITN distribution at EPI clinics also declined, from 87.7 percent in 2019 to 81.8 percent in 2020 and 78.9 percent in 2021.²¹⁵

Because antenatal care is an essential channel for delivering IPTs and ITNs, addressing underlying challenges to Burundi’s health programs will be critical to combating malaria: improving health care access in remote areas, addressing financial burdens, and promoting uptake of health-seeking behaviors. USAID supports social and behavior change communications, a critical component of the NMCP, including messaging to promote ANC visits as well as use of ITNs through radio, theater, community outreach, and print materials.²¹⁶

3.1.2. INCREASE EQUITABLE EDUCATIONAL OPPORTUNITIES

TABLE 10. SNAPSHOT OF RELEVANT STATISTICS

- Primary school enrollment: 94 percent (girls); 91 percent (boys)
- Secondary school enrollment: 31 percent (girls); 24 percent (boys)
- Primary completion rate: 68 percent (girls); 58 percent (boys)
- Secondary completion rate: 36 percent (girls); 29 percent (boys)²¹⁷
- Literacy rate, age 15 and above: 61 percent (female); 76 percent (male) ²¹⁸
- Youth literacy rate (ages 15–24): 86 percent (female), 91 percent (male)²¹⁹
- Percentage of female teachers: 50 percent (primary); 25 percent (secondary)²²⁰

Since the introduction of free primary education in 2005, Burundi has achieved near gender parity in primary school enrollment; however, boys and girls experience unique factors that contribute to high dropout rates. For both boys and girls, school dropouts are higher in rural areas due to higher poverty rates, increased distance to schools, and lower education levels of the head of household.²²¹ Boys may drop out of school because of higher class failure rates²²² or to work,²²³ whereas girls may drop out to support household work²²⁴ or if they become pregnant. As out-of-school rates vary significantly by province, geographic and gender-specific analysis is needed to inform retention strategies. This section focuses on factors contributing to girls dropping out, because youth literacy rates (ages 15-25) are lower for girls and because more data are available on girls dropping out. However, more research is needed to identify drivers of boys’ drop outs, as official statistics indicate that boys comprise the majority of out-of-school children and adolescents at primary and secondary levels.²²⁵

One national trend is that girls are less likely to enroll in higher levels of education. Girls enter secondary school at slightly higher rates than boys, according to official statistics; however, they are more likely to drop out of school as they become older.²²⁶ Boys have higher rates of enrollment for tertiary and post-secondary schooling than girls. For tertiary school, the gross enrollment rate for adolescent girls is 4 percent, compared to 6 percent for adolescent boys.²²⁷ Many post-secondary schools are in urban areas, requiring rural women to leave their communities to attend. Some families may prefer their daughters to stay at home, fearing risk of increased exposure to GBV.²²⁸ Additionally, the costs associated with higher education limits the enrollment of girls in post-secondary and tertiary education.²²⁹

The stigma and non-acceptance of pregnant girls causes young mothers to drop out of school while they are pregnant and to re-enroll, if possible, after their child is born. Pregnant girls drop out of school for several reasons, including: difficulty in concentrating at school; stigma against pregnant girls; or a need to gain employment or for income, for which pregnant girls may engage in transactional sex with older men in exchange for money or gifts.²³⁰ Young mothers typically do not re-enroll but permanently drop out. In 2018, the GoB briefly implemented a ban that prevented pregnant

teens and young mothers, as well as the boys that impregnated them, from attending public or private schools. Although this ban only lasted one month, due to pressure from CSOs, it reinforced stigmas associated with teenage pregnancy across the country. After the ban was revoked, committees were established to facilitate reintegration of affected students, but reports indicate that school authorities, particularly those in remote rural areas, still prevent pregnant girls from attending school.²³¹ Stakeholders shared that when young mothers do want to re-enroll in school, they are encouraged to enroll in a new school farther from their home.

The lack of role models of educated girls and women is a significant barrier to girls' education.²³² Primary data indicate that girls are not taught to see the importance of education, as education may deter a girl from following social expectations to marry and have a baby at a young age.²³³ Stakeholders also suggest that girls who do attend school may not fulfill their academic potential because their household tasks compete with studying, contributing to some girls repeating grades.²³⁴ Without role models, girls in Burundi are less likely to see the purpose of going to school. Girls in urban areas have more exposure to educated role models (sisters, cousins, female family members) who have successfully completed school, compared to those in rural areas.²³⁵ Likewise, the limited number of women in political positions, civil service positions, or employed in leadership roles can hinder girls from seeing the value in education.²³⁶

Across the board, the Batwa experience significant barriers to obtaining education. Batwa households suffer from economic insecurity and a long history of marginalization, and they lack access to land. They must frequently move to a different area to secure livelihoods, which makes it difficult for them to register and enroll their children in school.²³⁷ A 2019 study by Unissons-nous pour la Promotion des Batwa (UNIPROBA) indicated that 82 percent of Batwa have never been to school.²³⁸ No sex-disaggregated data could be identified for Batwa school enrollment or educational outcomes.

A lack of hygiene facilities and menstrual kits at schools contributes to absences for girls, but school policies fail to take account of this reason for absenteeism. In Burundi, only 36 percent of schools are supplied with water, which limits the possibility for proper hygiene facilities²³⁹ and 34 percent have satisfactory latrines for girls.²⁴⁰ Because of the lack of appropriate hygiene facilities (e.g., private toilets or latrines), some girls miss significant days of school during their menstrual cycle.²⁴¹ School policies around the number of absences permitted before a student is required to repeat a grade does not take into consideration girls' absences from school when menstruating due to the lack of adequate hygiene facilities. As a result of this policy, girls may repeat grades more than boys for reasons not related to educational performance.

Informal fees for school materials pose a significant barrier to universal education. As part of a Poverty Reduction Strategy,²⁴² the GoB declared public school to be free for all students starting with the 2005–2006 school year, which reduced financial barriers for boys and girls to access primary education. However, although school fees have been abolished, the indirect costs involved in schooling—such as school fees for uniforms, textbooks, writing materials and school supplies (pens, rulers, notebooks, photocopies, etc.), in addition to unofficial fees for teachers—mean that financially disadvantaged families must conduct an informal cost-benefit analysis to decide which child's education to fund, leading to greater investment in boys' education over girls.²⁴³

The insufficient supply of school teachers, particularly female teachers, influences parents' decision to send their girls to schools.²⁴⁴ Schools lack even the basic infrastructure, resources, or materials to support basic teaching, so teachers and administrators have little attention for such refinements as gender-responsive pedagogy, or supporting children with different needs. During the 2015 political conflict, funding for the education sector was significantly reduced to address the emergency, affecting the quality of education across Burundi. The lack of support for enrollment in

teacher colleges, especially for women, has left the country with a shortage of teachers, resulting in class ratios of 1 teacher per 100 students (whether rural or urban). Despite prioritizing girls' education and implementing measures to reduce the education gender gap, the GoB continues to face social, economic, structural, and political barriers to providing quality education for girls and boys across Burundi. As schools are not equipped with the basic educational resources, parents consider it more beneficial for their daughters to stay home and gain homemaking skills, rather than sit in a class without learning anything.²⁴⁵

The farther schools are from home, the higher the likelihood of students dropping out.

Although recent data are unavailable, a 2013-2014 household survey found that students were less likely to go to school the farther they live from school. A student ages 7-19 years old living 2 km away from school was 1.18 times more likely to be out of school compared to a student less than 1 km away. Students living 3 km or farther away were 1.25 times more likely to be out of school.²⁴⁶ No sex-disaggregated data are available on the effect of school distance on dropouts, however, some stakeholders shared that farther distances discourage the continued education of girls, in particular. Coupled with factors of inadequate school infrastructure and high-class sizes, some parents are reluctant to send their daughters to school if they need to walk long distances alone because of risks of harassment.²⁴⁷

School-related GBV^b in schools, including cases of sexual abuse by teachers, contributes to girls dropping out of school.

Secondary and primary data indicate school-related GBV (SRGBV) is underreported but is a contributing factor for girl dropouts. In more than half of the focus groups conducted by the USAID Passages project, male teachers were mentioned as examples of those in positions of authority who coerced girls into having sex, sometimes offering improved grades in exchange for sex.²⁴⁸ According to the most recent data, teenage girls represent approximately 40 percent of victims of physical or sexual violence in Burundi.²⁴⁹ Interviewed stakeholders suggested that girls who are older than their classmates are vulnerable to SRGBV perpetrated by students and teachers.²⁵⁰

The lack of awareness and standard operating procedures for reporting SRGBV incidents within schools has contributed to the normalization of SRGBV.

There are currently a lack of reliable data on the extent of SRGBV in Burundi.²⁵¹ Given that schools do not have policies or procedures on responding to violence, school staff and students do not report incidents and there is a general lack of attention to improving school safety.

The lack of health and safety protocols at schools during the COVID-19 pandemic decreased the quality of education.

²⁵² Primary data from the stakeholder interviews indicated that schools remained open during the pandemic, but many students, teachers, and school administrators fell sick because health and safety precautions were not in place.²⁵³ Schools experienced a rise in teacher absenteeism in regions where COVID-19 spread rapidly.²⁵⁴ However, secondary data specific to Burundi are lacking on the extent to which the pandemic impacted the education of girls and boys.

^b SRGBV is defined by UNESCO as “acts or threats of sexual, physical, and psychological violence occurring in and around school, perpetrated as a result of gender norms and stereotypes, and enforced by unequal power dynamics.” UNESCO and UN Women. 2016. *Guidance on Addressing School-Related Gender-Based Violence*. ([Link](#))

3.1.3 IMPROVE FOOD SECURITY AND NUTRITION OUTCOMES

TABLE 11. SNAPSHOT OF RELEVANT STATISTICS

- Prevalence of stunting among children under 5 years (0–59 months): 54.2 percent (57.5 percent boys; 51 percent girls)²⁵⁵
- Rural children are more at risk of stunting: 58.8 percent, compared to 27.8 percent in urban areas²⁵⁶
- Prevalence of anemia in adults (15–49 years): 39 percent of women, compared to 12.2 percent of men²⁵⁷

Women’s lack of access to land contributes to malnutrition and food insecurity. Burundi ranked last on the Global Hunger Index in 2014, the most recent year with reliable data.²⁵⁸ Burundi’s low status has been further exacerbated by a range of factors: endemic malaria; the COVID-19 pandemic; natural disasters; population growth; land scarcity, increased prices for staple foods, slowed economic growth; poor access to clean water; and chronic poverty. Of Burundi’s 17 provinces, Gitega, Karusi, Kayanza and/or Kirundo, Muyinga, and Ngozi are highly food insecure. Those provinces are characterized by high population density (with an increase in refugee returnees), harsh climatic conditions (droughts and periodic hail), and environmental issues such as soil erosion.²⁵⁹ Given that the Burundian economy is agriculture-based, consisting mainly of subsistence farming, those that do not own land or have productive use of land (such as returnees, women, and Batwa) are more likely to be food insecure.²⁶⁰ This is especially true for women-headed households, as women lose their land tenure when they become widowed.²⁶¹ A 2017 World Food Programme (WFP) food security analysis found that women-headed households are 1.3 times more likely to be food insecure than male-headed households.²⁶² (See [Access to Land findings under IR3.2.1 Establish Foundations for an Enabling Business Environment](#) for a detailed description of land tenure for women, including drivers of widows’ loss of tenure.)

Limited income-generating opportunities beyond agriculture and small-scale subsistence farming amplify issues of food security for Burundian women. As the primary landowners, men in general make decisions about household agricultural production and control the income from sales; women contribute labor to all agricultural production, but they make decisions only about crops for household consumption (referred to as *ibitegwa mbumbarugo*, “crops that save families”).²⁶³ In addition to lacking control over agricultural income, women have limited opportunities to engage in other income-generating activities and therefore have low purchasing power to invest in productive resources (such as livestock or agricultural inputs).²⁶⁴ Households with access to livestock and home gardens experience greater food security.²⁶⁵

Although women are often responsible for obtaining food and preparing meals, their ability to secure nutritious, diverse, and enough food for the family is influenced by broader household decisions. Women are more vulnerable to unstable food prices, as they are often responsible for purchasing (or growing) food for consumption. To provide for the family, women often eat last and consume less as well as lower quality food.²⁶⁶ The 2017 WFP food security analysis found greater food security in households where spending and food budgets were co-managed by spouses, compared to households with decision-making by one person.²⁶⁷

Women are subject to malnutrition, which can affect the efficacy of HIV treatment and can lead to detrimental health and wellbeing outcomes during pregnancy. In general, Burundians do not have a nutrient-dense diet, and the country has made limited progress in reducing diet-related non-communicable diseases among men and women.²⁶⁸ Pregnant women and young mothers, with limited availability of iron-rich foods such as vegetables or meat, are especially vulnerable to the effects of malnutrition; most women of reproductive age suffer from anemia.²⁶⁹ In Burundi, 19 percent of women are in a state of chronic energy deficiency; a majority of these women are in rural

areas. Particularly in rural areas, women and girls tend to eat smaller quantities and less nutrient-dense foods compared to men and boys.²⁷⁰ Approximately 25 percent of women in urban areas are either overweight or obese.²⁷¹ Malnutrition may contribute to the progression of HIV, and while antiretroviral therapy improves nutritional status,²⁷² some experts and studies indicate worse prognoses for patients who are malnourished at the start of treatment.²⁷³ Indeed, according to experts interviewed, malnutrition reduces the efficacy of antiretroviral therapies for HIV treatment.²⁷⁴

Malnutrition among pregnant women also contributes to acute stunting among children in Burundi. Fetal growth restriction and preterm birth are the first causes of stunting, followed by limited access to clean water, poor sanitation, and personal hygiene, as well as mother and child feeding practices. The age of the mother, her nutritional status, her agency to space out pregnancies, and the number of antenatal care visits she receives also affect fetal growth.²⁷⁵ Stunting is particularly high in rural areas such as Ngozi (71 percent), compared to urban areas (55 percent).²⁷⁶ High fertility rates, inadequate infant and child practices, and increasing strain on natural resources hinder the ability to meet the nutritional needs of children. Climate shocks, conflicts, and social factors increase women’s agricultural labor burdens, which in turn can limit their ability to engage in the recommended feeding practices for infants and young children.²⁷⁷

3.1.4. RECOMMENDATIONS

Table 12 provides recommendations derived from findings in this assessment for USAID/Burundi to consider in future programming to achieve USG goals for reducing gender inequalities aligned with Mission Goal 1 and USAID/Burundi Development Objective 1.

TABLE 12. RECOMMENDATIONS FOR ICS MISSION GOAL 1: INVEST IN PEOPLE

HEALTH: STRATEGIC PRIORITIES FOR USAID AND DONORS

- Support the expansion of the mobile clinic model to better reach men, women, youth, and marginalized groups in rural areas with quality health services and care options. Free mobile clinics can reduce gender barriers by providing services at convenient times in locations where women, especially young women, convene, such as schools, community centers, and farms
- Advocate for the Ministry of Health to establish clear healthcare standards: no person can be refused health treatment, and all persons must be provided with quality care and ethical treatment. Provider responsibilities to patients should be posted in health centers to communicate patient rights to privacy and confidentiality.
- Support capacity building and training for healthcare personnel to encourage ethical professional care and confidentiality in the treatment of all persons, including in particular sex workers, LGBTQI+ persons, persons living with HIV, and persons with disabilities.
- Promote donor and Ministry of Health efforts to encourage women to pursue medical professions where women are underrepresented, including doctors specialized in SRH and FP (to accommodate women who are more comfortable with women doctors).
- Support donor efforts to work with the Government of Burundi to remove barriers to systems of civil registration and vital statistics (CRVS), especially for rural areas. This includes assessing and removing legal barriers to registration, monitoring coverage and access to birth registration data, and integrating CRVS into national statistical system plans, capacity-building and resource mobilization efforts.
- Support CSOs in efforts: to advocate for the importance of strong CRVS systems; to raise awareness on the importance of birth registrations and the locations of registrars; to promote the ability of single parents to register the birth of their child without the information of their partner; and to subsidize the costs associated with receiving a birth certificate for those who cannot afford the fees.

HEALTH: ACTIVITY-LEVEL APPROACHES FOR USAID IMPLEMENTING PARTNERS

- Ensure that program and activity design is informed by in-depth community analysis of social norms by using tools that have been adapted to the Burundi context, such as the Social Norms Exploration Tool.²⁷⁸
- Continue to partner with CSOs to engage men and women of all ages to challenge norms and beliefs that negatively influence health behaviors, particularly around SRH, FP, and preventative care. Use community-based methodologies such as the Men as Partners® approach (adopted in the Breaking Cycles of Gender-Based Violence in Burundi (BRAVI) and GIR'ITEKA ("Be Respected") activities)²⁷⁹ to create spaces for gender-segregated and mixed learning and discussion. Village Savings and Loan Associations (VSLA) groups can provide valuable entry points for exploration and dialogue on harmful gender norms and practices.
- Explore partnering with influential or popular radio stations and other media outlets to disseminate targeted communication campaigns that promote men and women accessing preventative health treatment (especially for malaria, HIV, and contraception) and to provide information on available treatment centers. Work with local associations and organizations to ensure that messaging and methods are appropriately targeted to specific groups, such as rural women and men, Batwa, LGBTQI+, sex workers, and unmarried women.
- Engage different community groups and actors, such as parent associations and youth groups, in awareness raising and dialogue sessions focused on reducing stigmatization, myths, and misinformation on sensitive topics such as SRH, healthy and consensual relationships, and sexuality; encourage intergenerational dialogue on these topics to build broad-based support for comprehensive sexuality education for young people.

EDUCATION: STRATEGIC PRIORITIES FOR USAID AND DONORS

- Integrate province- and gender-specific strategies in education programming to reduce school dropouts.
- Engage the Ministry of National Education to promote enrollment and graduation from teachers' colleges and specifically support women to become certified teachers to serve as role models. Reducing the high student-to-teacher ratio will be a critical step for improving educational environments and learning outcomes for all students.
- Work with school administrators and CSOs to provide adequate conditions for menstrual hygiene management at the school level (e.g., sex-separate latrine facilities, clean and sufficient water supply, doors with locks, waste disposal bins, and reusable sanitary napkins). Examine policy alternatives to requiring repetition of grades due to absences.
- Encourage the Ministry of Education to integrate evidence-based, comprehensive sexuality education into the curriculum.
- Fund programs that work with the Ministry of Education to support the continued education of pregnant girls and the re-entry of young mothers into the education system, including community-level initiatives that collaborate with community leaders and school administrators.
- Work with the Ministry of Education to develop clear, safe, and accessible procedures and mechanisms for reporting incidents of SRGBV, assisting victims, and referring cases to the appropriate authorities. Ensure the availability of easily accessible child-sensitive and confidential reporting mechanisms, as well as healthcare services (including counseling and support) and referrals to law enforcement.

EDUCATION: ACTIVITY-LEVEL APPROACHES FOR USAID IMPLEMENTING PARTNERS

- Design community-level activities informed by social norms research (such as media campaigns, community dialogue, and community champions) to tackle the underlying gender beliefs and norms that contribute to girl dropouts, such as the acceptance of unequal division of labor and unpaid care work and the exploitation of young girls at home.
-

FOOD SECURITY AND NUTRITION: STRATEGIC PRIORITIES FOR USAID AND DONORS

- Work with legal institutions to guarantee women's rights: to own property (especially land); to inheritance; and to a fair distribution in case of divorce or widowhood. Collaborate with CSOs to promote changes in government laws and policies, as well as changes at the community level to encourage joint-titling of land.
 - Support strengthening home garden programs to diversify nutrient-dense crop production; identify strategies to integrate home gardens for those without access to land.
-

3.1.5 ILLUSTRATIVE INDICATORS

TABLE 13. RECOMMENDED ILLUSTRATIVE INDICATORS FOR MISSION GOAL 1

HEALTH

- Number of people reached by a USG-funded intervention providing GBV services, such as health, legal, psychosocial counseling, shelters or hotlines (GNDR-6 gender)
- Percentage of health units with at least one service provider trained to care for and refer GBV survivors (Custom indicator: USAID WE3 TA Indicator)
- Number of USG-assisted community health workers (CHWs) providing FP information, referrals, or services during the year (USG F indicator)
- Percentage of women who use modern contraceptives to limit and space pregnancies (Custom indicator)

EDUCATION

- Number of schools implementing policies to address SRGBV (Custom indicator)
- Number of teachers who receive training in gender-sensitivity (Custom indicator)
- Percentage of teacher graduates who are women (Custom indicator)
- Percentage of mothers and fathers who agree that it is more important for adolescent girls to provide household support than attend school (Custom indicator)
- Percentage of adolescent girls who believe that it is not appropriate to go to school when they are menstruating (Custom indicator)
- Percentage of female students enrolled in primary education who are over-age for their grade (Custom indicator)

FOOD SECURITY AND NUTRITION

- Number of women who report control over land for agricultural production (Custom indicator)
- Number of women who have diversified their farm or garden production by at least one nutrient-dense product

3.2 MISSION GOAL 2 — INVEST IN THE ECONOMY: THE FOUNDATION FOR A STRONGER BURUNDIAN ECONOMY IS CREATED THROUGH INVESTMENT, EMPLOYMENT, PROFITABLE VALUE CHAINS, AND SOUND AGRICULTURAL AND ENVIRONMENTAL PRACTICES

TABLE 14. SNAPSHOT OF RELEVANT STATISTICS

- Employment: 76.4 percent of men are employed, 78.9 percent of women are employed.²⁸⁰
 - Share of employment in agriculture: 77.3 percent of employed men, 94.7 percent of employed women
 - Share of employment in services: 16.1 percent of employed men, 5.4 percent of employed women
 - Share of employment in industries: 6.5 percent of employed men, 1 percent of employed women
- Professional and technical workers: 46 percent women, 54 percent men
- Percent of firms with women in majority ownership: 44 percent²⁸¹
- Percent of firms with women as top managers: 16 percent²⁸²
- Percent of internet users: 1.5 percent of women, 3.9 percent of men²⁸³
- Length of paid maternity leave, 84 days²⁸⁴; length of paternity leave, 4 days²⁸⁵
- Percent of adults (age 15 years older) with a financial institution account: 6.5 percent of women, 7.35 percent of men²⁸⁶

3.2.1 ESTABLISH FOUNDATIONS FOR AN ENABLING BUSINESS ENVIRONMENT

Women’s economic participation is limited to lower paid agricultural and informal activities, due to lower literacy rates and restricted ability to migrate compared to men.

Significant gender gaps exist within Burundi’s employment structure, and women and youth have limited opportunities within the underdeveloped formal sector. Women are disproportionately employed in the agriculture sector—94.7 percent of women are employed in agriculture compared to 77.3 percent of men.²⁸⁷ Agriculture work is among the most vulnerable forms of employment; subsistence agricultural activities yield unpredictable productivity and wages and are highly vulnerable to external factors, such as effects of climate change. Men are more likely to work in formal employment (19 percent of men, compared to 9.6 percent of women); women are more likely to be working in less stable positions as self-employed or contributing family workers (79 percent of men, 90 percent of women).²⁸⁸

Level of education and ability to migrate are two factors that affect access to job opportunities outside the agriculture sector.²⁸⁹ Women workers have lower levels of literacy and advanced education to meet job requirements and run businesses, compared to men. Women are completing primary education at higher rates than men,^c nevertheless, women’s literacy rates remain lower than men’s.^d Ninety-four percent of women workers have less than a basic level of education, compared to 89 percent of men workers.²⁹⁰ Men, even if illiterate, are more likely to seek out and retain employment due to normative pressures, as the main financial provider for a household; illiterate women are less likely to seek out or retain employment, as representing a secondary source of household income.²⁹¹ Several stakeholders pointed to illiteracy as a justification for why women should not engage in income-generating or formal labor activities, suggesting that the money an illiterate woman could earn would not offset the reduction in her time spent on household responsibilities.²⁹²

Additionally, as Burundi’s population has grown and supporting a family through agriculture has become increasingly untenable, job seekers move to more urban areas for more opportunities. Young men are seen as being the main drivers of urban migration and are perceived as being more mobile than young women.²⁹³ Stakeholders observed that young women are increasingly accessing formal employment opportunities in urban areas and taking positions typically occupied by men, such as on construction sites or in offices as support staff. However, no sex-disaggregated quantitative data are available to confirm whether a younger generation of women workers is securing more formal employment.²⁹⁴

Women are under-represented in the service and industry sectors in Burundi. Although more women are economically active overall—with 78.9 percent employment, compared to 76.4 percent for men—men significantly dominate Burundi’s service and industry sectors. Women comprise only 10 percent of workers in export firms, mostly in lower value-added manufacturing sectors.²⁹⁵ A study by the UN Conference on Trade and Development on the impact of trade liberalization on the gender labor gap warns that women’s representation in export and manufacturing jobs may further decrease, without targeted training programs and technological upgrading to support the transition of women workers from agriculture to higher value-added sectors.²⁹⁶ Stakeholders confirmed this concern,

^c According to UNESCO 2018 data, 47.47 percent of females and 38.55 percent of males who enter the first grade of primary education are expected to reach the last grade UNESCO. 2018. “Survival to the last grade of primary (%)” Accessed through UNESCO Institute for Statistics. ([Link](#))

^d According to UNESCO 2017 data, 61 percent of female were literate, compared to 76 percent of males. This literacy gap is closing as more young women are educated. Among ages 15-25, 86 percent of females and 91 percent of males are literate.

UNESCO. 2017. “Literacy rate, adult female (% of females ages 15 and above); Literacy rate, adult male (% of males ages 15 and above)- Burundi.” Accessed through World Bank Databank. ([Link](#))

pointing to the so-far limited investment made to expand key sectors that could engage women in formal employment opportunities, such as the agribusiness processing sector.²⁹⁷

Women are less likely to own businesses or be employed in decision making and leadership roles, compared to men. Women are less likely to own businesses compared to men, although at levels slightly higher than in other countries in sub-Saharan Africa. Among the 3,000 registered firms in the formal sector, 15 percent are run by women; 44 percent have women participating in ownership.²⁹⁸ Additionally, women are less likely to be hired or employed in leadership or key decision-making positions at companies or organizations.²⁹⁹

Primary data indicate that GBV is common and perpetrated with impunity in formal workplaces in Burundi, despite national legal protections. The Labor Code of 1993 was revised in November 2020 to include provisions against gender discrimination as well as policies aiming to support working women. However, in practice, women still face workforce discrimination in the hiring process or once they have been hired.³⁰⁰ Article 14 of the Labor Code prohibits direct or indirect discrimination based on sex, but there is no specific law mandating equal pay for equal value work.³⁰¹ Stakeholders reported that it is common for men to be promoted more than women.³⁰² Women are sometimes pressured to have sex with employers to advance. Women in leadership positions face assumptions that they are less qualified or have not equally earned their position.³⁰³

There are limited mechanisms in place to enable workers to report gender discrimination or GVB in the workplace, particularly without retribution, creating hostile working environments for women.³⁰⁴ Stakeholders indicated that such violations also occur in the informal workplace, and informal workers are not protected by the Labor Code law.³⁰⁵ In general, the rights and protections within the Labor Law have limited application and role in supporting women's employment, due to the high level of informal employment and lack of written contracts.³⁰⁶

Poorly enforced or absent workplace policies on sexual harassment, anti-discrimination, and parental leave create unequal work environments for women, resulting in low hiring, retention, and promotion of women. The 2020 reform of the Labor Code protects against dismissal of pregnant workers, and female employees are entitled to 12–14 weeks of paid maternity leave.³⁰⁷ The law does not prohibit employers from asking about family status. The expectation that women be the primary caretakers for children is also reflected in limited paternity leave (four days) and the lack of flexible family leave.³⁰⁸ There are reports of some employers suspending the salaries of employees on maternity leave, or refusing to provide medical coverage for married female employees and their families.³⁰⁹ Some private sector employers prefer to hire men because they anticipate that women may be absent from work because of maternity leave or taking care of a sick child.³¹⁰ Stakeholders interviewed shared that it is common for employers to fire women for becoming pregnant, and for pregnant employees on maternity leave to learn they have been fired or had their salaries suspended.³¹¹

Access to land is a determining factor for the income opportunities of women in agriculture; however, across Burundi, women and girls have less access to land than men and boys, as determined by customary inheritance practices that vary in their application. According to the 2008 General Population and Housing Census, out of the 80.2 percent of the population that owned land, 62.5 percent of the total landowners were men and just 17.7 percent were women.³¹² The gender gap in land ownership is attributed to customary inheritance practices, in the absence of a formal inheritance law: most customary practices exclude daughters from inheritance. Widows have a lifetime usufruct right in land following the death of their husbands.^e However, this right

^e Usufruct is defined as the legal right to use and benefit from a particular property, the ownership of which belongs to another person.

is vulnerable to claims by the late husband's family or brothers, and many widows have to return to their family's home and do not benefit from (let alone inherit) their husband's land.³¹³

The application of customary inheritance practices does vary across Burundi. In customary usufruct norms, under the practice of *agaseke*, a small piece of land is given to married daughters to use in usufruct; however, her brothers often dispute this right.³¹⁴ Typically, daughters in a family receive a combined inheritance equal to the share of one son. So, for example, if there are three girls and two boys in a family, the land is divided into three parts and the three girls share one part of the land.³¹⁵ In Kayanza and Ngozi provinces, boys are not allowed to sell land they inherit, and if they do, girls and women are then authorized to sell their portion of the land.³¹⁶ For another example, Muslim households follow inheritance practices outlined in the Quran, which gives daughters (collectively) the right to inherit one-third while sons (collectively) inherit two-thirds of land or property. Widows keep 20 percent of assets, and the rest is split among the children.³¹⁷ Conflicts over land between brothers and sisters are brought to religious councils first; if unresolved, they are then presented to institutional courts.³¹⁸

Several interviewees observed that some families have started to treat girls and boys equally with respect to inheritance.³¹⁹ Such families promote a girl to be the *samuragwa*, “the one who will manage the whole inheritance before its share is open to all successors.”³²⁰ More educated or financially independent women can leverage their status to receive an inheritance by negotiating with their brothers, offering to help pay for household expenses or school fees for their nieces and nephews.³²¹

Programs and initiatives have found success in improving women's access to land by promoting joint ownership in the absence of an inheritance law. Since 2017, several national organizations have implemented initiatives to promote women in land ownership, as either a sole owner or joint owner with their husband or male relative.³²² Such approaches have been effective at convincing men to register their wives as joint owners of household land. When women are registered on the land certificate, they can use it to apply for loans from banks and financial institutions. This was confirmed by a key stakeholder from a microfinance institution that has granted loans to women in agribusiness who used joint land ownership as collateral.³²³ However, progress has been slow; many men resist registering their wives on land certificates as they see it as an indicator of relinquishing control and power over family resources.³²⁴ Other effective approaches include those undertaken by the Women Lawyers Association, which trains judges on the Constitution of Burundi, specifically on how to interpret and apply the articles that require equal treatment of both men and women under the law.³²⁵ These associations also pay lawyers to assist women fighting discrimination in court, specifically around access to land.³²⁶

In the absence of an inheritance law, there is a lack of clarity among authorities on how to resolve land disputes, whether by formal court ruling or by the *bashingantahe*.³²⁷ A draft inheritance law was initially under review by the Cabinet in 2006, but it was considered a potentially sensitive issue that required a national consultation process. In 2008, NGOs succeeded in removing the national consultation requirement,³²⁸ but there has been no further progress in revisiting the law since 2013.³²⁹

3.2.2 INCREASE ACCESS TO CAPITAL, TRAINING, AND ENTREPRENEURSHIP

While improving financial inclusion and access to credit is a priority of the GoB, women and youth have less access to finance. Mobile banking options are becoming increasingly available and accessible for women and youth. The Ministry of Finance and Economic Development Planning developed a National Financial Inclusion Strategy (2015–2020) with specific objectives to expand access to rural populations, women and youth, and micro and small entrepreneurs in an effort to reach segments of the population least served by financial institutions.³³⁰ A 2012 national financial inclusion survey found that men were twice as likely as women to have an account with a

formal financial institution, and youth (18-29 years old) were 50 percent less likely to have an account than persons 30 years and older.³³¹ Survey results also showed that higher account usage is correlated to more formal levels of employment, with farmers having the lowest rate of ownership compared to public sector employees, private sector employees, and traders.³³²

While primary data suggest that women and youth are still limited in their ability and willingness to open a formal bank account, mobile money options such as Lumicash and Ecocash are becoming more popular and accessible in Burundi, especially among youth.³³³ Vendors are also increasingly accepting mobile payments, and banks are beginning to invest in and develop new types of mobile banking options.³³⁴ To open and access an account, a user needs a mobile phone. While secondary data on sex-disaggregated mobile phone ownership could not be identified, a recent World Bank report suggests that mobile phone and internet usage is lower among rural women, compared to women in urban areas and men in general.³³⁵ In rural areas, typically there is one phone for a household, which is owned and managed by the husband. Stakeholders observed that younger women, particularly in Gitega, are more likely to own their own mobile phone and can set up their own online bank accounts without having to go to a brick-and-mortar bank.³³⁶ Often, young people working in urban areas will send money to their household or mothers, in particular if they can have access to a mobile phone, via mobile banking options.³³⁷

Microfinance institutions, while increasing in number, are still not an accessible credit option for most women and youth due to burdensome application requirements and limited availability in rural areas. Microfinance institutions (MFI) are intended to promote financial inclusion and can provide women and youth with critical seed capital for income-generating activities. Existing MFIs targeting women include La Caisse Coopérative d'Epargne et de Crédit Mutuel (CECM), Women's Initiative for Self Empowerment (WISE), the Investment and Development Bank for Women (BIDF), and the Association of Women Entrepreneurs of Burundi (AFAB). In addition to facilitating women's access to credit, AFAB also provides legal, administrative, and technical assistance for business development and best management practices.³³⁸ These institutions aim to empower women by improving their access to financial and non-financial services. In 2020, the GoB created the Youth Investment Bank (BIJE) to address youth unemployment by financing projects initiated by young people grouped into associations, cooperatives or businesses, at an interest rate of 7 percent and without the requirement of having a bank account. The bank has 15 percent government participation; the remaining 85 percent is provided by communes/municipalities.³³⁹

However, the MFI sector is fairly underdeveloped in Burundi, as they are still only operate in urban areas and have onerous (even prohibitive) application requirements.³⁴⁰ Regional stakeholders in Kirundo, Muyinga, and Cankuzo explained that MFIs are not decentralized, so are only available in Bujumbura Mairie or Gitega.³⁴¹ While MFIs offer micro-loans with lower interest rates targeted towards women and youth, they still must follow Central Bank policies, such as requiring collateral and substantial loan application paperwork.³⁴² These requirements continue to effectively exclude women, youth, and other marginalized groups most in need of access to credit, who do not have the collateral, adequate literacy levels, or mentors, networks, or knowledge to help complete a loan application.

Village savings and loan associations (VSLAs) are a more accessible credit option for women and youth. Savings groups are widespread at the colline level and are a more favorable credit option for women and youth, particularly those in rural areas, as reported by many stakeholders in this assessment.³⁴³ Savings group members are not subject to similar requirements to accessing loans from MFIs and they can access microloans with favorable repayment terms to support their businesses or

needs.³⁴⁴ Additionally, members can benefit from technical support, assistance, or training as part of their participation in savings groups, as well as access additional key resources.³⁴⁵

Savings groups take a variety of forms in Burundi; many are funded by the GoB while others are funded and supported by NGOs. Examples of such groups include VSLAs, Solidarity Guarantee Groups (GCS), savings and internal lending communities (SILC) such as Nawe Nuze (NN), Village Community Banking (VICOBA), Ibirimba, tontines, and community associations and/or cooperatives. Within the National Financial Inclusion Strategy (2015–2020), the GoB aimed to form 20,000 savings groups and link them to financial institutions. The National Microfinance Law (2018) also encourages voluntary registration of savings groups, which allows groups to open accounts with financial institutions.³⁴⁶

Savings groups allow individuals to apply for loans they could not qualify for through traditional banking or micro-finance institutions and are reported to have a range of both financial and nonfinancial benefits. Secondary evidence indicates that some women who have participated in savings groups have been able to buy plots of land and livestock, which in turn creates collateral to apply for new loans.³⁴⁷ A randomized control study of VSLAs in Burundi found households who participated in savings groups coped better with economic stress, increased education spending, raised household consumption, and experienced reduced levels of poverty.³⁴⁸ Because savings groups may be coupled with other activities, such as financial trainings and family-based discussion groups, participation can result in additional benefits, such as women's increased role in household decision-making and a reduced acceptance of violence against women.³⁴⁹ One review found that greater improvements in gender equality outcomes (i.e., men contributing to more household work and women having increased access to resources) within mixed-gender groups than in women-only groups.³⁵⁰ Other evidence indicates that women's participation in savings groups has had positive effects on their social status within both the household and the community.³⁵¹ Varela et al. found no observable effects on rates of IPV for women who participated in savings groups in Burundi.³⁵² However, without gender-intentional design and monitoring to do no harm, increasing women's participation in savings groups may put them at higher risk for violence within the household without giving them increased control over money.³⁵³

Limited access to credit, networks, and social norms significantly hinders women's and youth's entrepreneurship potential, despite national strategies to promote entrepreneurship.

Women and youth face particular barriers to starting economic enterprises, such as limited access to credit as loan applications are often time consuming and require specific know-how to fill out all necessary paperwork.³⁵⁴ Navigating business regulations and administrative practices at local and national levels can be a costly and cumbersome process, especially for women and youth who are less likely to have relevant relationships or mentors to help navigate those processes. Some women entrepreneurs report fearing to register their businesses because of regulation requirements, but also because of sexual harassment or pressure for bribes from tax and municipal officials. Other women entrepreneurs have also shared that power relations and family dynamics affect their experience as entrepreneurs, with some husbands preferring they not formalize a business; in addition, social norms may restrict the level of socializing and networking that is considered acceptable for women.³⁵⁵

Entrepreneurship programs are supported by both public and donor-funded initiatives, and entrepreneurship is one of the pillars of the GoB's strategy for reducing unemployment. The National Employment Policy (2018–2022) aims to increase support to women and youth entrepreneurs and to modernize agriculture, as a source of youth and women employment in rural and peri-urban areas.³⁵⁶ Targeted objectives of the policy include supporting access to employment for rural women, supporting

women entrepreneurs, and developing special job creation programs in the sanitation and environmental protection sectors for youth and women living in urban and peri-urban areas.³⁵⁷

Engaging male family members' support for women's participation in economic empowerment programming is essential due to strong negative perceptions about women who engage in productive activities outside of the household, particularly in rural areas.

Women who participate in activities outside of the household, including income-generating activities, without explicit permission from their husbands risk being perceived by the household and community as perhaps meeting with other men, cheating on their husbands, or engaging in sex work.³⁵⁸ This perception can influence a husband's decision whether to allow his wife to participate in such activities, for fear of such suspicions and social stigma.³⁵⁹

Discriminatory norms, the need for a husband's permission, time poverty, and low literacy levels hinder women's ability to participate in skill- and capacity-building opportunities and activities, including agricultural and non-agricultural income-generating activities.³⁶⁰ With the loss of male heads of households, through conflict as well as migration, widows and other female heads of households must take on typically "male" duties, including in agriculture and income-generating activities.³⁶¹ These activities typically remain in the informal agriculture sector, which requires minimal qualifications and skills.³⁶² Low literacy rates among women, coupled with their limited access to resources, continue to hamper women's ability to access more lucrative and higher-skilled income-generating activities.³⁶³

Given their time-intensive normative roles, such as unpaid household tasks, care of dependents, and agriculture work, women have limited time to participate in higher value agricultural (or non-agricultural) activities.³⁶⁴ Men in Burundi are not constrained with their time in a similar way.³⁶⁵ Regional stakeholders shared that when community consultation meetings are convened to promote agricultural training, women are rarely invited or able to participate.³⁶⁶ Other stakeholders shared that even if women are permitted to attend a training, they are often unable to participate if the training is held during inconvenient times that conflict with their domestic duties, such as during meal preparation.³⁶⁷

Existing strategies to engage male and female youth in vocational training and activities are ineffective, and there is limited evidence to indicate that male and female youth are benefitting from such opportunities. Although the GoB prioritizes public technical and vocational education and training (TVET), it has struggled to provide the necessary funding to deliver quality training for in-demand jobs. The majority of students in TVET are enrolled in private institutions, but these are limited in scope and availability. The GoB Sector Plan for the Development of Education and Training (2012–2020) set targets to expand vocational and technical training, but a lack of qualified teachers, educational supplies, and equipment stymied the success of public vocational training, stakeholders confirmed.³⁶⁸ The plan aimed to increase by nearly eight-fold the number of youth receiving lower-level vocational training (after completing basic education) through government trade education centers (Centres d'enseignement des Métiers, CEMs), reaching 16,000 trainees in 2020.³⁶⁹ The plan involved establishing new CEMs to provide a training center in each of Burundi's 129 communes. Additionally, the plan involved doubling enrollment in Professional Training Centers (Centres de Formation Professionnelle, CFP) in all 17 provinces.³⁷⁰ At the time of data collection, new regional centers are being constructed in Muyinga, Rutana, Cankuzo, and Cibitoke.³⁷¹ A government stakeholder shared that these centers are not yet able to reach their targets, due to a lack of qualified teachers, training materials, and modern equipment.³⁷²

With centers available in multiple regions, CEMS aims to be a viable option for young women who are likely to be limited to training opportunities near their home.³⁷³ Programs that offer potential to work in an industry with jobs in urban areas are more attractive to youth, but these require equipment that

CEMS do not have, such as mechanics, welding, ICT, and electricity.³⁷⁴ No sex-disaggregated quantitative data could be found for different vocational training tracks, but a key government stakeholder overseeing CEMS implementation cited that the GoB has struggled to engage young women in vocational training beyond such low-paying activities as sewing and embroidery. The GoB has tried to integrate more women in training for more male-dominated and higher-paying activities, such as construction, masonry, and welding, but have struggled in doing so.³⁷⁵

In addition to private and public training programs, short-term programs are offered through donor-funded initiatives or private companies, but these tend to be sporadically offered, with limited geographic coverage.³⁷⁶

3.2.3 TRANSITION TO MARKET-BASED ECONOMY WHILE PROTECTING AND ENHANCING NATURAL ENVIRONMENT

Men are considered “farmers”, while women are “laborers” who manage crops for household consumption and provide labor for men’s crop production for sale. Ninety percent of Burundian livelihoods rely on small-scale subsistence agriculture,³⁷⁷ with an average family plot of 0.5 hectares (owned by the male head of household).³⁷⁸ As legal and customary landholders, men are considered to be the farmer and manager of agricultural household production, although many leave daily maintenance and harvesting activities to women while they seek agricultural or non-agricultural income-generating activities, locally or in other regions.³⁷⁹ Women manage their domestic tasks while maintaining agricultural production activities for both market crops and home consumption.³⁸⁰ Men manage all agricultural sales and income earned.³⁸¹

Lack of access to land and credit, and low levels of literacy, limit women’s potential for influence over agricultural decisions and inputs, despite providing most of the labor. As women typically do not own land and have limited access to credit to purchase land, they are not considered the land managers or decision-makers over how household land is used.³⁸² Stakeholders also point to women’s low literacy rates as showing lack of ability to be involved in decision-making.³⁸³ For both cash and food crops, women contribute most of the labor, including planting, land maintenance, harvesting, and post-harvesting activities; but even so, it is uncommon for a husband to involve his wife in production decisions or managing crop sales or income.³⁸⁴ It is also uncommon for women to be targeted for extension advisory services, limiting their potential influence in household decision-making around agricultural activities.³⁸⁵

According to normative gender roles, men handle all cash, negotiations, and sales transactions, limiting women’s ability to influence decisions regarding sales or income. Women generally require their husband’s permission to engage in any activity that involves a transaction and often need their husband’s engagement to manage money and sales.³⁸⁶ Men also manage household budgets, regardless of who earned the income.³⁸⁷ Women cannot, for example, sell a part of the harvest to meet their individual needs without their husband’s permission. There is a strong cultural sentiment that women do not (and perhaps should not) handle cash or cash transactions.³⁸⁸ Even if a woman earns her own income, she may have some latitude in deciding how it is spent, but typically she must negotiate with her husband about expenditures.³⁸⁹ However, recent evidence suggests that women do manage the sales of certain crops to use part of the income to purchase household needs, giving the rest to their husbands.³⁹⁰ Further research is required to better understand the conditions under which women can engage in agricultural sales and marketing activities or influence income-related decisions.

Money is a source of household conflict; women’s involvement in household budgets, or earning their own money, can exacerbate household GBV. Okonya et al. found that issues of IPV prevent women from asking about how harvests are managed—whether sold or retained for household consumption—for fear that their husbands may use violence. One study participant shared,

“Never ask your husband where he has put the money from crop sales if you want your marriage to be peaceful.”³⁹¹ Issues of money, particularly when women start earning and wanting to control their own money, are reported as a source of violence and conflict within the household.³⁹²

Some anecdotal evidence suggests that women earning income can be subjected to IPV due to the husband’s mistrust or jealousy about how she earned the income. This points to possible negative unintended consequences of women’s economic empowerment, potentially threatening men’s identity as the provider for the household.³⁹³ However, other anecdotal evidence suggests that women who earn more income may garner more respect and influence in the household and community, as reported by both male and female stakeholders in several regions. Conversely, when regional borders closed due to COVID-19, women traders faced increased rates of GBV at home, citing their loss of income as the trigger for increased spousal frustration and violence, as reported by TradeMark East Africa.³⁹⁴

Stakeholders shared that some locally elected officials who have been sensitized to gender issues will not validate the sale of a household plot or livestock without the agreement of the wife, suggesting shifts in practices at the local level.³⁹⁵ It is unclear to what extent this occurs, or what are the potential effects for women. Other research suggests that women earning more money than their husbands is seen as a threat to men’s role as the household provider—a social stigma that disincentivizes women from engaging in income-generating opportunities.³⁹⁶

There is an opportunity to partner with the private sector in agribusiness, to strengthen market opportunities and linkages for local women cooperatives and entrepreneurs, strengthen the processing sector in Burundi, and increase women’s participation in activities at higher nodes of the value chain. Private sector agribusiness stakeholders observed that their engagement with the donor sector has been limited and should be increased, in particular to engage in building and strengthening market linkages for agricultural producers in key crops. One stakeholder noted that NGOs and development projects often “go to a community and say ‘grow this’ without assessing if there is really a market for that crop”;³⁹⁷ this effectively hinders producers’ ability to engage in the market and expand their production. While the existence and strength of linkages between rural producers and processing centers varies by crop, overall they could be strengthened to support cooperatives (particularly women-led) and local agricultural entrepreneurs (particularly women and youth).³⁹⁸

There is a perception among private sector agribusinesses that women-run cooperatives are more reliable, trustworthy, and well-managed than men-run cooperatives, and they expressed a preference to work with women-run agricultural cooperatives.³⁹⁹ One stakeholder explained that women-led cooperatives are more reliable producing partners and are extremely hard working compared to men, and that women-led cooperatives take feedback on quality more seriously.⁴⁰⁰ Cooperatives are an effective way to provide training and support to all women, especially single, divorced, or widowed women who are “hard to support individually,” according to a key agribusiness stakeholder.⁴⁰¹ GoB-supported cooperatives at the colline level (often led by men) are challenging to work with, according to agribusiness stakeholders, as there is limited opportunity to negotiate as well as significant political influence over how the negotiation or engagement occurs, which can incur negative and potentially dangerous consequences for the company.⁴⁰²

The lack of agriculture insurance in Burundi limits men’s and women’s ability to expand their agricultural activities; women in particular are less able to diversify income sources and have limited influence in productive decisions. Agribusiness stakeholders cite the lack of insurance options as a key barrier for women to expand in agriculture and also as a factor discouraging

youth from participating in agricultural production, perceived as an occupation with high risk and limited return.⁴⁰³

Women have less access to resources to invest into their agricultural production, a key barrier hindering women’s ability to move from subsistence to market-based agriculture.

To move from subsistence to market-based production, producers must invest to improve quality and productivity. Productive investments include adding new or higher quality fertilizers, insecticides, new technologies, improved seeds, and in some cases, wage labor to assist in productive tasks.⁴⁰⁴ Women and men producers have different needs for and access to key resources. For example, women coffee farmers in Burundi typically have to pay wage labor to assist in certain productive activities, such as stumping, pruning, and applying inputs—an additional expense that men coffee farmers can avoid by relying on family labor, unless they have a large farm operation or manage multiple income-generating activities.⁴⁰⁵ Women have limited ability to earn an income on or off the farm.⁴⁰⁶ Farms with higher incomes are associated with higher levels of productivity; women, with less ability to earn an income, are less able to improve the quality and productivity of their crops.⁴⁰⁷

Divisions of labor in coffee production and processing activities are highly gendered. Coffee represents approximately 70 percent of Burundi’s foreign exchange earnings⁴⁰⁸ and is primarily grown in the northwest provinces, where the climate is favorable for both *Arabica* and *Robusta* varieties. Coffee production is a sole source of income for approximately 600,000 smallholder households,⁴⁰⁹ characterized by small plots owned by men and managed by women within the household. As typical with cash crops in Burundi, men have control over productive decisions and engage in the agricultural tasks perceived to be more physically demanding or dangerous.⁴¹⁰ Women of the household are responsible for daily maintenance farm activities, such as light pruning and weeding. Men, women, and their children will participate during the harvest season to pick the coffee cherries; men manage the negotiation and sale to coffee washing stations.⁴¹¹ Stakeholders cited that while men mostly are responsible for transporting the coffee to the washing stations, in many cases women bring the harvest to washing stations after their husbands have negotiated the sales.⁴¹² Transporting the cherries occurs at night, after a woman finishes her household chores, which puts women at risk of GBV as they have to travel, often by foot, to the washing stations.⁴¹³

If coffee production should decrease due to environmental issues or poor management practices, men will typically turn over all responsibilities to their wives and seek other income sources. In these situations, stakeholders note that women are unlikely to maintain best practices, as they cannot afford the necessary inputs and lack time to maintain production activities.⁴¹⁴ Women-headed coffee-producing households and women coffee farmers have less economic resources to invest in production because of lower levels of capital and resources.⁴¹⁵ They also incur more expenses, as they cannot rely on family labor and must hire labor, often men, to work on their plots.⁴¹⁶ A recent study found that women coffee farmers were less likely to engage in riskier marketing strategies to sell their coffee beans compared to their male counterparts, suggesting that women farmers have less tolerance for risk in coffee production.⁴¹⁷

All smallholders sell their unprocessed coffee cherries to public or private washing stations, where the cherries are opened and the green coffee beans are sorted by quality and packaged for market or export.⁴¹⁸ Men are typically employed to lift and transport the boxes of coffee cherries and operate the machinery to wash the cherries. Women work in dry processing activities, sorting the green coffee beans as a means of quality control. Men’s activities are higher paid than women’s activities.⁴¹⁹ Within the coffee sector, youth are more often employed in washing stations as these are wage-based positions that do not require access to land or inputs. Further research is needed on the extent to which men, women, and youth are involved in other nodes of the value chain, such as key input suppliers, traders, and middlemen, and in marketing and exporting activities.

There are little data on women's and youth's participation in key agricultural value chains beyond coffee. Research and donor programming have focused heavily on the coffee value chain as the second most exported product (comprising 47 percent of Burundi exports).⁴²⁰ Beyond coffee, there is limited evidence or understanding about men's, women's, and youth's participation in other key high value crops and agricultural products, such as tea (representing 24.9 percent of exports in 2020), rolled tobacco (6.25 percent), beer (4.95 percent), wheat (2.46 percent), and tropical fruits (1.22 percent).⁴²¹ It is unclear to what extent women and youth are currently involved in these agricultural value chains and where there may be opportunities to strengthen women's and youth's participation and benefit. It is also unclear where there is potential to position women and youth as entrepreneurs in agriculture.

Harvest seasons are associated with higher rates of GBV. During harvest seasons of perennial crops, like coffee, when men receive a quick influx of cash, stakeholders report that “this period is very charged for the household and community.”⁴²² It is common for men to spend the cash on mistresses and at bars.⁴²³ Anecdotal evidence points to high rates of violence during this period; one stakeholder said, “women do not like this period at all.”⁴²⁴ Men may also impregnate mistresses, who they then will take as a second wife (through unofficial polygyny); often the first wife is unaware that her husband has another wife and child elsewhere.⁴²⁵ When men return home to their first wife without the expected cash for the household from the harvest, the wife becomes angry, and the result may be violence against the wife.⁴²⁶ In Bubanza, Bujumbura Rurale, and Cibitoke, this can be observed during the rice harvest season, and in Muyinga in the coffee harvest season.⁴²⁷ Crops with continuous harvest seasons are not associated with such acute periods of increased GBV.⁴²⁸

Climate change has disproportionate effects on women, exacerbating their time poverty and risk for GBV. Women are responsible for managing and securing daily household energy and water supplies.⁴²⁹ Ninety-six percent of energy used by Burundian households comes from traditional biomass: 70 percent from wood, 18.4 percent from agriculture residues, and 5.8 percent from charcoal.⁴³⁰ Sometimes women enlist their children to fetch water and biofuel, especially if ready sources are far away, in order to free up their time to complete other tasks, shifting onerous time demands and physical burdens onto boys and girls.⁴³¹

When water sources are dried due to droughts—exacerbated by climate change—women and children will need to travel further distances to identify and secure new water sources for their household, exacerbating women's time poverty.⁴³² Traveling further distances, often alone, also puts women and young girls at increased risk to GBV, particularly in rural areas.⁴³³ Women will sometimes coordinate to travel in pairs or collectively to reduce such risk.⁴³⁴

Effects of climate change are projected to continue to negatively affect Burundi's already poor agricultural production, particularly for important staple and cash crops. As women are responsible for managing household diets, food preparation, and natural resource management tasks, they also absorb the burdens of managing effects of climate change on household well-being. For example, when food crops are ruined due to intense floods, women will need to identify new ways to feed their families.⁴³⁵

Although women are primarily responsible for managing daily household water and fuel sources and needs, they are significantly underrepresented in local natural resource management groups. Due to discriminatory norms and time poverty, women rarely participate in such groups such as water committees, and if they do, they are rarely in leadership positions.⁴³⁶ In addition to women, Batwa and youth are also underrepresented in these natural resource management groups organized by the local government.

Women's lack of land ownership, limited influence over productive decisions, and limited access to key resources reduces their ability to adopt Climate-Smart Agriculture methods to improve best agricultural practices. Climate-smart agriculture (CSA) provides an alternative to

poor or unsustainable agricultural practices in Burundi for small-scale farmers to improve the resilience and productivity of their livelihood, at the same time mitigating negative effects of climate change.⁴³⁷ However, CSA practices often require additional technical and input investments into the land that most women farmers cannot afford or are unable to implement. For example, soil erosion is a major environmental issue negatively affecting small-scale agricultural production in Burundi; farmers need to utilize higher quality inputs, like fertilizers, and implement better agricultural practices on their plots.⁴³⁸ Moreover, women often cannot influence their husband’s investment decisions, as they rarely if ever own a plot of land.⁴³⁹ In sum, women have less ability to implement CSA practices in agriculture than men, even though they predominantly work in the sector.⁴⁴⁰

3.2.4. RECOMMENDATIONS

Table 15 provides recommendations derived from findings in this assessment for USAID/Burundi to consider in future programming to improve USG goals of advancing WEE and reducing gender inequalities aligned with Mission Goal 2 and USAID/Burundi Development Objective 3.

TABLE 15. RECOMMENDATIONS FOR ICS MISSION GOAL 2: INVEST IN THE ECONOMY
STRATEGIC PRIORITIES FOR USAID AND DONORS RELATED TO ECONOMIC GROWTH
<ul style="list-style-type: none"> • Ensure that all agricultural activities conduct SEA and GBV risk assessments and develop mitigation measures, especially during high-risk times like the harvest season. Ensure that implementers have safe referral and reporting protocols in place so that cases are handled safely and ethically by qualified service providers. • Explore opportunities to partner with the private sector in Burundi, particularly in agribusiness, to strengthen market opportunities and linkages for rural producers, especially women-led cooperatives, with a focus on improving productivity, quality, and value derived from the activity for the respective actor (i.e., producer, processor). • Ensure that all agricultural activities conduct sexual exploitation and abuse (SEA) and GBV risk assessments and develop mitigation measures, especially during high-risk times like the harvest season. Ensure that implementers have safe referral and reporting protocols in place so that cases are handled safely and ethically by qualified service providers. • Explore opportunities to partner with the private sector in Burundi, particularly in agribusiness, to strengthen market opportunities and linkages for rural producers (particularly women-led cooperatives), with a focus on improving productivity and quality as well as the value derived for the participant (producer or processor). • Ensure that women’s agricultural organizations and cooperatives are routinely and meaningfully engaged in the design and monitoring of agriculture and agribusiness projects to prioritize the needs and priorities of women entrepreneurs in the sector. • Explore ways to partner with the private sector to support strengthening the processing and export sectors in Burundi, to expand opportunities for women to work in higher-paid value chain activities, such as processing centers. • Conduct robust and region-specific gender-responsive value chain analyses of key agricultural products, such as tea, tropical fruits, and beer, to identify opportunities to enable or strengthen women and youth entrepreneurship in agriculture, and to identify existing markets for products. • Target programming to increase women’s and youth’s access to financial services and improve their financial literacy. Work with the Central Bank to adjust policies and requirements for formal microfinance institutions to offer loans that are more accessible for women and youth, such as by allowing alternative forms of collateral. In conjunction, ensure that potential applicants have necessary financial literacy support to fill out applications and understand the terms of their loan. • Work with the Ministry of Education and Scientific Research to strengthen the delivery of Technical and Vocational Education and Training (TVET) services and employ gender-sensitive recruitment methods and training opportunities to engage more youth in high-earning TVET activities, especially female youth.

- Conduct research on the extent to which the private sector, civil society, and government entities in Burundi have instituted and enforce protective workplace policies. Use this research to identify model organizations and entities that provide decent working environments for all employees, and leverage these models as examples of leaders in Burundi.
- Promote the business case for increased female leadership and participation in decision making to targeted private sector actors to encourage the recruitment, retention, and promotion of female employees in leadership positions.
- Work with the Ministry of Labor to establish reporting systems for employees to confidentially report employer violations to enforce the 2020 Labor Code reforms, specifically, provisions that prohibit: firing pregnant workers or those on maternity leave; sexual harassment in the workplace; and discrimination in hiring, promotion, compensation, and termination due to race, color, religion, sex, political opinion, trade union activity, or ethnic or social origin.
- Encourage USAID partners and sub-recipients to incorporate decent work, gender equality, and diversity considerations within due diligence processes for procurements and/or capacity-building for partners. The International Labour Organization's Decent Work indicators and the Women's Empowerment Principles established by UN Global Compact and UN Women provide examples of considerations to incorporate within these processes,

ACTIVITY-LEVEL APPROACHES FOR USAID IMPLEMENTING PARTNERS RELATED TO ECONOMIC GROWTH

- Intentionally partner with organizations focused on improving the lives of Batwa such as UNIPROBA, to better understand the challenges faced by Batwa men, women, and youth in earning a livelihood; identify ways to address these challenges to strengthen Batwa economic participation.
 - Use and integrate into USAID programming household dialogue models that are adapted to the Burundi context (or, adapt existing household dialogue models to the Burundi context) in order to address and reduce discriminatory norms that hinder women's ability to meaningfully participate in income-generating activities, such as household time poverty or stereotypes that working women are sex workers.
 - Strengthen monitoring and evaluation efforts within programs that use VSLAs in order to identify which VSLA approaches are showing promising results for women's empowerment.
 - Work with local natural resource management groups, such as colline water committees, to increase the meaningful participation and representation of women, youth, and Batwa in these groups and in local resource management decision making.
-

3.2.5 ILLUSTRATIVE INDICATORS

TABLE 16. RECOMMENDED ILLUSTRATIVE INDICATORS FOR MISSION GOAL 2

- Number of persons trained with USG assistance to advance outcomes consistent with gender equality or female empowerment through their roles in public or private sector institutions or organizations, by sex (USG F indicator)
 - Percentage of USAID partners that have written equitable workplace policies, including for sexual harassment and anti-discrimination, disaggregated by type such as prime implementing partners, sub-recipients, private sector institutions, public sector institutions (Custom indicator)
 - Percentage of female participants in USG-assisted programs designed to increase access to productive economic resources (assets, credit, income, or employment) (USG F indicator: GNDR-2)
 - Percentage of women reporting decision-making power related to agricultural production and business (Custom indicator: USAID WE3 TA indicator)
 - Percentage change in visibility and position of women in high-value sub-sectors and value chains (Custom indicator: USAID WE3 TA indicator)
 - Percentage growth of women-run enterprises, measured by profits, capital, number of employees, etc. (Custom indicator: USAID WE3 TA indicator)
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3.3 MISSION GOAL 3 — INVEST IN SOCIETY AND THE REGION: BURUNDI IS A PEACEFUL, OPEN, AND STABLE ACTOR AT HOME AND IN THE REGION

TABLE 17. SNAPSHOT OF RELEVANT STATISTICS

- Percent of women in the police force (as of 2016): 6.39 percent⁴⁴¹
- Percent of registered voters in 2020 elections: 52.45 percent of women, 47.54 percent of men⁴⁴²
- Percent of registered voters in 2015 elections: 51.2 percent of women, 48.8 percent of men⁴⁴³
- During the 2015–2020 period, women represented 36.36 percent of members in parliament and 31.8 percent of officials in the executive branch⁴⁴⁴
- The odds for a male candidate to be elected in non-quota positions are more than twice the odds for a female candidate (68 percent versus 29 percent)⁴⁴⁵

3.3.1 PROMOTE OPEN AND INCLUSIVE GOVERNANCE AND RESPECT FOR HUMAN RIGHTS AND THE RULE OF LAW

Although legally mandated quotas are met, women’s representation, influence, and contribution to decision making are limited in political processes in Burundi at every level. Despite the 30-percent quota for women’s representation at Executive Branch, Parliament, Community Council, and political party candidate and committee levels, women’s political participation and decision making is hampered by limited political support and restrictive cultural biases. Overall, since 2001, each category of political positions has observed a steady increase in the representation of women, with or without a legal quota;⁴⁴⁶ however this has not directly translated into women’s enhanced political influence. Women do not perceive that they have greater political representation because of the quota,⁴⁴⁷ although some note the potential benefits of women in politics as role models for girls and young women.⁴⁴⁸ Some stakeholders interviewed shared that because political parties and institutions usually only name women candidates for the purposes of fulfilling the quota, the quota is treated as a maximum threshold instead of a minimum standard.⁴⁴⁹ See [Annex D](#) for a snapshot of women and minority representation in quota and non-quota positions following the 2020 elections.

In political positions not subject to quota requirements, women are more significantly underrepresented. In institutions and decision-making bodies where the 30-percent quota for women is not specifically required (including in public administration generally as well as diplomatic posts, the judiciary, and defense and security forces), the 2005 and 2018 Constitutions instead mandate “gender equilibriums,” defined according to the Arusha Peace Accord as 30 percent women (in addition to 60 percent Hutu and 40 percent Tutsi representation) (Articles 135, 208, 255).⁴⁵⁰ Some institutions follow this mandate, such as the Truth and Reconciliation Commission (CVR), the National Independent Commission on Human Rights, and the National Independent Electoral Commission (CENI).⁴⁵¹ But at the colline level, in practice, this mandate is not followed. Data shared from regional stakeholders point to the underrepresentation of women within colline-level political positions. For example, in Muyinga province, only 15 colline leader positions out of 230 are held by women (6.5 percent).⁴⁵² Stakeholders note that these elected women were often community leaders who participated in and benefited from soft skills training in VSLAs and were encouraged to run in an election for colline leadership.⁴⁵³

Quotas for women’s participation are treated as a ceiling and do not overcome the exclusion of women in political decision making. While legal quotas have been successful in securing a minimum of 30 percent of women’s participation in political bodies, they do not ensure equal influence in these roles, nor in the electoral process. While some women occupy important positions at the national level, including in the Ministries of Justice, Health, and Finance, women are the minority in positions of high authority and power.⁴⁵⁴ Although Burundi had a woman serve as Prime Minister in

1993 and another woman served as Vice President from 2005 to 2007, no woman has held a high political office since.

Stakeholders observed that the quota system is ineffective for changing in how resources are allocated and decisions are made. The quotas are not significantly changing internal resource allocation to advance gender equality in programming and policies, or changing decision-making patterns to be more equitable and inclusive, or changing internal structures and power dynamics.⁴⁵⁵ The *bashingantahe* institution shifted their internal demands for representation away from quotas and towards parity, aiming to ensure women and men are equally represented in decision-making at all levels. While this shift increased the number of women represented, women's participation is still limited due to the time poverty associated with women's normative household responsibilities.⁴⁵⁶ No recent studies could be identified to further examine the effect of parity practices on the quality of women's participation within the *bashingantahe*.

Women in political positions are perceived as not necessarily being the most qualified or the most politically active, but instead selected to meet the quota and follow the party's political agenda.⁴⁵⁷ Stakeholders shared perceptions that women in political positions are not selected based on skill or merit, but are selected as a favor and therefore have to serve the party's agenda or fulfill other promises made in exchange for holding the position.⁴⁵⁸ The electoral system's use of blocked lists makes seeking and keeping party favor essential for the success of candidates and politicians, whether male or female. (In this system, political parties create blocked lists that rank candidates in a fixed order, and voters select a party's block, not individual candidates. At the colline level, in contrast, candidates campaign individually.⁴⁵⁹) Women politicians are perceived as fearing being replaced if they do not continue to serve the needs of the political actors that facilitated their election,⁴⁶⁰ and they are generally taken less seriously and have less influence than their male counterparts.⁴⁶¹

Women in leadership roles do not often have the same visibility, financing, and political influence as their male counterparts. For positions not subject to the quota, the likelihood of a male candidate to be elected is more than twice as high as for a female candidate (68 percent versus 29 percent).⁴⁶² Women face more difficulties in campaigning, including fewer resources, less mobility to go far from their homes while campaigning, and less-developed political networks. These limitations are particularly relevant when campaigning for positions that are not elected through the blocked-list party system, including at the colline level, because women have less exposure to the electorate and fewer opportunities to influence.⁴⁶³ Furthermore, once a quota is met, other women who may be well-qualified are discouraged from running for an elected position.⁴⁶⁴

Marginalized groups, such as youth, persons with disabilities, and Batwa have limited opportunities for meaningful political participation and influence. Those that are elected may not necessarily reflect or strongly advocate on behalf of those with similar identities, especially if doing so would depart from their party's politics. Female youth, in particular, have limited opportunities to engage in politics, and those that do are perceived negatively as *inshirasoni*, "the one who does not have a good education." Persons with disabilities are not consulted in policy-making processes and there is no law facilitating or requiring their participation in political decision-making processes, as explained by one stakeholder.⁴⁶⁵ Reports indicate that Batwa people also face significant barriers to political participation, including in the 2020 national elections without the necessary documents to vote—further highlighting their marginalization.⁴⁶⁶

Across government, there is limited staff awareness and capacity to address gender issues or to effectively integrate a gender perspective into internal government staffing structures or planning and budgeting.⁴⁶⁷ Key government, NGO, and civil society stakeholders point to a lack of gender mainstreaming in internal government structures, staffing plans, budgets, and programs.⁴⁶⁸ Stakeholders called attention to differences in the types of positions that men and women hold in government, noting that men tend to hold higher-level positions with more influence than

women. There is a perception that women workers experience more stress and are overwhelmed by balancing home duties with government tasks, and this perception contributes to women being overlooked for promotions.⁴⁶⁹

Stakeholders also observed that very few of the gender focal points at ministries, or government staff in general, are trained in gender mainstreaming or gender-responsive budgeting (GRB).⁴⁷⁰ Some stakeholders mentioned that some CSOs give ad hoc training on GRB or gender mainstreaming to certain ministry staff, but there are no known formal training mechanisms to ensure that staff have sufficient capacity to apply gender mainstreaming in policy making and planning and GRB.⁴⁷¹ There is a perception that government staff lack interest and motivation to improve their knowledge and application of gender mainstreaming in policy, planning, or budgeting.⁴⁷²

Women working as cross-border informal traders navigate corruption and potential GBV from border officials. Burundi is among the most corrupt countries in the world, ranked 165 out of 180 countries according to Transparency International's most recent index.⁴⁷³ Reports of the experiences of cross-border women traders provide important insight documenting the gender-specific ramifications of corruption, which are otherwise little reported on. Secondary and primary data both indicate that women traders operating at the borders with Rwanda, Tanzania, and the Democratic Republic of Congo (DRC) experience sexual harassment, verbal abuse, physical violence, and requests for sexual favors from customs and tax officials on both sides of the border.⁴⁷⁴ For example, stakeholders reported cases where women traders paid border officials an undetermined sum of money or paid "with their bodies" to be able to cross the border and continue their trade without paying official taxes,⁴⁷⁵ constituting a form of sextortion.^f Several stakeholders cited this as a well-known occurrence among border traders and customs officials.⁴⁷⁶ A recent initiative, funded by Trademark East Africa and implemented by Association of Repatriated Women of Burundi (AFRABU) and Partner Africa, is working to raise awareness of GBV issues faced by women traders along the border to make a safer environment for women to work, focusing on promoting positive masculinities among traders and their families.⁴⁷⁷

3.3.2 SUPPORT FOR CIVIL SOCIETY AND HUMAN RIGHTS IS STRENGTHENED

Several civil society associations in Burundi are active in promoting women's rights, positive masculinities, and gender equality in Burundian society. Associations work on a range of issues including: advocating for women's empowerment and equitable access to key resources, such as credit and land; promoting awareness among community members of their rights; addressing issues of violent masculinity; and promoting enforcement of equality under Burundian law. Some associations also work on sensitizing magistrates and lawyers to these issues as well as to existing laws on equal rights to advance inheritance case law.⁴⁷⁸ As of 2021, case law on the equitable sharing of acquired household property between men and women exists,⁴⁷⁹ but stakeholders confirm that it is rare for girls and women to submit their cases before the tribunals.⁴⁸⁰

Associations in Burundi that operate in this space include: Concertation of Collectives of Women's Associations in the Great Lakes region (COCAFEM), AFRABU, Impunity Watch, AFJB, Search for Common Ground, and Catholic Relief Services. See Table 18 for an overview of these organizations' work. Civil society efforts, in collaboration with key partners including the Ministry of National Solidarity, Social Affairs, Human Rights, and Gender as well as bilateral and multilateral partners, led to the revision of the GBV law and enacted more equitable provisions in the recent constitution.⁴⁸¹ Many

^f Sextortion is a form of gender-based violence in which sexual favors are coerced in exchange for favors. Although there may be perceived consent, this form of corruption involves the abuse of authority that is enabled by unequal gender norms. Elden, Asa, Dolores Calvo, Elin Bjarnegard, Silje Lundgren, and Sofia Jonsson. 2020. Sextortion: Corruption and Gender-based Violence. Expertgruppen for bistandsanalys (EBA). ([Link](#))

organizations are promoting women's political participation, achieving a modest increase in registered women voters of 1.55 percent⁴⁸² between the 2015 and 2020 elections.⁴⁸³

While organizations like these, backed by vast networks of partners at the national, regional, and local levels, have advanced women's position in society, their support is nevertheless relatively limited, as demonstrated by low budgets and limited buy-in from other stakeholders across the country.

TABLE 18. INTERNATIONAL AND LOCAL ORGANIZATIONS PROMOTING WOMEN'S RIGHTS IN BURUNDI

CONCERTATION OF COLLECTIVES OF WOMEN'S ASSOCIATIONS	Concertation of Collectives of Women's Associations (COCAFEM) is a Great Lakes regional network of women's associations established in 2001, with chapters in Burundi and other regional countries. It convenes regional conferences of women's associations on the issue of GBV prevention, following UNSCR 1325. COCAFEM also works to increase the capacity of government ministries to understand gender issues and integrate gender sensitivity into their programming and budgeting. ⁴⁸⁴
ASSOCIATION OF WOMEN REPATRIATED FROM BURUNDI	Association of Women Repatriated from Burundi (AFRABU) holds a strong focus on promoting women's political participation as part of its peacebuilding mission. ⁴⁸⁵ Founded to address challenges facing returning women refugees and IDPs, AFRABU's work has ranged from community-level income-generating activities to promote inclusion to national-level advocacy to represent women's concerns in policymaking. ⁴⁸⁶
IMPUNITY WATCH	Impunity Watch (IW), an international organization established in Burundi in 2011, works to empower survivors of violence and injustice at all governmental levels using community-based transitional justice processes. IW works to identify challenges faced by women in Burundi to effectively participate in political decision-making processes. IW also works with youth and men to promote positive masculinities and to address factors contributing to violent masculinities in Burundian society. ⁴⁸⁷ IW targets youth to engage them in positive dialogue and to address issues of generational trauma to ensure conflict transformation. ⁴⁸⁸
ASSOCIATION OF WOMEN'S LAWYERS OF BURUNDI	Association of Women Lawyers of Burundi (AFJB) offers judicial assistance to women to enable their access to resources, including land. It also builds the capacity of judicial and institutional actors to effectively apply and respect the right to equality that men and women in Burundi are guaranteed in the constitution. ⁴⁸⁹
SEARCH FOR COMMON GROUND	Search for Common Ground, an international NGO, supports peace and reconciliation in Burundi by working with local stakeholders in addressing transitional justice, GBV, and positive youth development. Search for Common Ground's USAID-funded Tuyage and Tuyage II projects address social norms that restrict women's property and productive asset ownership and active participation in civil society in Burundi. The projects partner with media outlets and communication activists to promote economic empowerment. ⁴⁹⁰
CATHOLIC RELIEF SERVICES	CRS has employed models designed to disrupt harmful gender norms within agriculture, nutrition, and governance programming. Through the nutrition-focused Amashiga activity (2014–2020), CRS focused on addressing gender inequalities and wellbeing outcomes across nutrition, agriculture, governance, and joint household decision-making in Muyinga province. The Amashiga activity employed CRS's Faithful House and Islamic Family Life approaches to promote joint decision-making within the household, as a mechanism to increase women's influence in household decisions and lead to more equitable decision-making and control over household assets. Amashiga reached 3,746 couples and found that between 2017 and 2018, the average score of women's influence in decisions over agricultural sales for participating couples rose from 6.88 to 9.28 (score range between 0 and 12). ⁴⁹¹

Incidents of GBV are rarely prosecuted in accordance with the Constitution and existing laws. According to the 2016/2017 DHS, approximately 1 in 2 Burundian women has experienced physical or sexual violence from an intimate partner.⁴⁹² Stakeholders observed that violence against women is common and is perpetrated by those in positions of power, such as husbands and other male community members.⁴⁹³ The 2016 Law on the Protection of Victims and the Prevention and Punishment of Sexual and Gender-based Violence is not well enforced by law enforcement nor sufficiently prosecuted in the courts. Courts are supposed to have GBV focal points; however, the extent to which the focal points are in place and trained is unclear. These personnel, if well trained, have potential to serve an important community outreach function to explain rights to survivors and to reach individuals who cannot afford to go to court.⁴⁹⁴

Additionally, there is little budget available within the Ministry of National Solidarity, Social Affairs, Human Rights, and Gender to implement these laws and policies, including the GBV prevention policy and action plans.⁴⁹⁵ The National Strategy to Fight Gender-Based-Violence expired in 2021; updating the strategy presents an opportunity to bring stakeholders together to assess progress, identify lines of efforts, and improve coordination of efforts.⁴⁹⁶

Stakeholders report a culture of impunity for perpetrators of GBV and low confidence in the justice system to prosecute cases. With limited access and control to resources, women often cannot afford to prosecute their abuser in court, or fear retaliation that threatens their livelihood or reputation.⁴⁹⁷ Women are less represented in decision-making positions at all levels, with little voice and influence in the design and implementation of mechanisms for effective justice and accountability.⁴⁹⁸ Anecdotal reports indicate that the *bashingantahe* receive cases of IPV.⁴⁹⁹ However, information was unavailable to assess the frequency or the efficacy of the *bashingantahe*'s involvement in GBV-related cases, or the extent to which survivor-centered resolutions that “do no harm” are achieved in those cases.

The government's lack of enforcement of GBV laws and policies contributes to continued acceptance and prevalence of GBV and to continued violence towards women.⁵⁰⁰ Several stakeholders pointed to the lack of enforcement enabling a culture of impunity, where perpetrators feel empowered to continue committing acts of GBV, knowing that they will likely not be prosecuted or face either legal or social consequences.⁵⁰¹ Examples of gaps in implementation of the 2016 Law on the Protection of Victims and the Prevention and Punishment of Sexual and GBV include: the lack of special chambers designated for GBV cases and minors; the lack of specific training for judges and lawyers to try GBV cases; and the requirement of medical certificates to prosecute GBV cases, even though doctors do not always issue these certificates.

The culture of impunity further discourages survivors to report GBV cases, out of fear of reprisal or social stigma.⁵⁰² The Global Network of Women Peacebuilders found that lack of enforcement of GBV laws, local law enforcement accepting bribes in exchange for immunity for perpetrators, the lack of access to medical facilities, and slow judicial processes contribute to low reporting of incidents of GBV.⁵⁰³ Other reports as well as regional stakeholders consulted for this assessment detail that at the community level, law enforcement officers as well as the judiciary trivialize cases of GBV or sometimes harass survivors that do report, contributing to survivors' reluctance to come forward and seek justice.⁵⁰⁴

GBV survivors face additional barriers to seeking justice in a court of law. Stakeholders report that doctors may fail to issue medical certificates—a requirement for prosecuting cases of GBV—within the necessary timeframes, or they may require payment for their services, which survivors may be unable to afford.⁵⁰⁵ Other factors that hinder survivors from pursuing legal action include fear of reprisal or threats from the abuser’s family and awareness of the poor record of successful legal outcomes for survivors.⁵⁰⁶ Stakeholders from the provinces of Muyinga, Cankuzo, and Gitega cite a lack of funds available to survivors (and their witnesses) to attend court proceedings,⁵⁰⁷ even though Article 58 of the 2016 Law on the Protection of Victims and the Prevention and Punishment of Sexual and GBV stipulates that funds be made available both for compensation and to facilitate such transport.⁵⁰⁸ Representatives of PDFSD also pointed to the lack of women lawyers and judges in rural areas who are trained to prosecute cases of GBV or are sensitized to the specific needs of GBV survivors in rural communities.⁵⁰⁹ A representative from the Ministry of Justice emphasized the need to have more women represented in law in Burundi, and specifically to train more lawyers and judges to effectively prosecute cases of GBV at all levels of the judicial system.⁵¹⁰ While more women lawyers trained in prosecuting GBV cases would likely encourage more survivors to come forward, it is important that GBV cases be considered a specialization to be developed by both men and women judges and lawyers.

Limited awareness of the right to equality and to live free from violence, a lack of role models, and low levels of self-confidence are factors that hinder women’s empowerment.

Many stakeholders described a need for supporting women’s self-efficacy and ability to advocate for themselves.⁵¹¹ A lack of confidence, limited sense of self beyond traditional caregiving responsibilities, and lack of knowledge of legal rights were cited by stakeholders as contributing factors that hinder women’s empowerment.⁵¹² Stakeholders pointed out that, traditionally, men “own” the household including their wives and their wives’ time; women accept such power differentials as normal parts of life within communities, highlighting a lack of awareness of their individual right to equality.⁵¹³ There are few women to emulate as successful entrepreneurs, business women, or political or community decision-makers, particularly for rural women and girls.⁵¹⁴

Influential leaders, such as religious leaders who spoke out to stem the escalation of politically-motivated violence in 2015, have largely stayed silent on issues related to GBV.

Stakeholders perceived that the Church and other religious leaders do not speak out against issues related to GBV, as Burundi’s patriarchal norms in fact align with church teachings.⁵¹⁵ Other stakeholders noted that religious leaders are key partners for working in the community,⁵¹⁶ and USAID-funded GIR’ITEKA is engaging religious leaders to denounce GBV.

The media landscape is dominated by male voices, and the media often perpetuates gender stereotypes, particularly of women. Few women work in the media, and those that do face discrimination and harassment. Women’s voices and perspectives are underrepresented in Burundian media.⁵¹⁷ According to a study conducted by the National Communications Council (CNC), women are not well represented in the media either as journalists (17.9 percent of journalists) or as journalistic sources (40 percent of sources).⁵¹⁸ Recent studies by the Search for Common Ground and Pact suggested that women’s opportunities to work in journalism are limited by their household responsibilities, due to journalism’s intensive time commitments and non-standard hours. In a mid-term evaluation of the USAID-funded Tuyage activity, implemented by the Search for Common Ground, respondents cited the need for women to secure their husbands’ support and permission as a key barrier hampering women’s ability to work as a journalist and in the media.⁵¹⁹ Men are not similarly constrained.⁵²⁰ Media officials in 2017 openly questioned women’s ability to work in journalism on this basis, citing restrictive beliefs that women do not have the same ability as men to work outside of the home.⁵²¹

Women who work in the media face discrimination and sexual harassment.⁵²² For example, media or news companies may prefer not to hire women out of concern regarding potential maternity leave or due to the perception that women employees may need to take time off to care for children or family members.⁵²³ The midterm evaluation of Tuyage cited that women journalists face sexual harassment in the workplace as well as from potential sources; a source might offer an interview on the condition of a date. Men do not encounter such situations.⁵²⁴ Many forms of GBV, including sexual harassment, are considered socially acceptable, which makes it challenging to address and combat the issue.⁵²⁵

Women media professionals are not promoted into leadership or key decision-making positions, and are typically assigned social or entertainment stories instead of issues like politics or the economy.⁵²⁶ Stakeholders shared that women journalists are taken less seriously than men journalists, and that men journalists are shown more respect. One stakeholder shared an anecdotal example to demonstrate this point, that it was easier for men journalists to secure an interview during reasonable working hours than women journalists.⁵²⁷ Additionally, stakeholders observed that media segments, stories, or narratives reinforce negative stereotypes of women, often portraying them as weak and as followers of men rather than as strong leaders.⁵²⁸

The Tuyage activity has worked to diversify the types of stories reported by both women and men journalists, particularly focusing on economic stories, and has helped journalists establish stronger relationships with a more geographically and sectorally diverse pool of sources.⁵²⁹ Tuyage's mid-term evaluation identified differences between the practices and perceptions of men and women journalists. While all journalists may hesitate to report on subjects perceived as politically sensitive, including some economic topics, the study found this was especially true of women journalists, who tended to shy away from topics or sources that were perceived to be intimidating or that would put them at potential risk of harassment. However, the evaluation also found that sources trusted women journalists with confidential or sensitive information more than men journalists, suggesting that women journalists may be able to gather richer information for their stories.⁵³⁰

The CNC established a partnership with the Association of Women Journalists in 2018 to increase women's participation and representation in journalism and media.⁵³¹ In collaboration with NGO and donor partners, radio programs have run stories and segments on topics related to women's empowerment as well as preventing GBV, aimed at sensitizing citizens as well as local authorities to these topics.⁵³² Based on secondary and primary data, it is unclear to what extent these media segments have been effective at reaching target listeners or shifting perspectives. Several stakeholders reported that the media still tend to report only the most severe cases of GBV, for example when a husband kills his wife.⁵³³ The media do not cover issues of other forms of GBV, such as sexual harassment in the workplace or IPV.⁵³⁴

3.3.3 BURUNDI'S DEFENSE AND LAW ENFORCEMENT AGENCIES CONTRIBUTE TO PEACE AND STABILITY IN BURUNDI AND THE REGION

Women remain underrepresented in both law enforcement and defense forces. The integration of women into the police force remains extremely weak. The most recent data available show that women accounted for 6.39 percent of the police force in 2016.⁵³⁵ The number of women expressing interest in joining the police force has reportedly increased, due to campaigns conducted by the Ministry of Interior, Community Development, and Public Security designed to increase women's recruitment.⁵³⁶ However, a recent media report indicates that the number of new women recruits has actually decreased.⁵³⁷ Key government stakeholders cited the lack of separate rooms for men and women in training, as well as high levels of GBV faced by women officers, as key factors deterring women's enrollment.⁵³⁸ Male officers will assign women of equal rank to secondary or inferior tasks, and demonstrate a lack of trust in female officers.⁵³⁹ Women officers report needing to work twice as hard to "assert themselves and be stronger against their male colleagues."⁵⁴⁰ Additionally, the culture in

Burundian law enforcement still treats it as an occupation reserved for men, with little professional mobility for women.⁵⁴¹ All key operating and decision making positions in law enforcement are held by men, with two exceptions: Clotilde Poyongo, the first female Judicial Police Officer; and Generose Ngendanganya, the first female Principal Police Commissioner,⁵⁴² who will retire soon.⁵⁴³ There are no women in regional or provincial Commissaire offices.⁵⁴⁴

Data from 2014 suggest that women represent a small minority (approximately 10 percent) in the national defense force; more recent figures are not available.⁵⁴⁵ Women face similar deterrents and challenges for enrolling in the military as for police work. The military requires women to sleep in the same barracks with men and stand security watch with men at night, which exposes them to GBV.⁵⁴⁶ There are no women generals or commandants of military camps.⁵⁴⁷

Women law enforcement officers face stigma and sexual harassment. They are also considered more supportive of survivors of GBV than men in law enforcement. As noted above, women officers face reportedly high levels of GBV in their occupation⁵⁴⁸ and are stigmatized for their chosen occupation by community members. Women officers are perceived as too aggressive or as bad wives due to their occupation; people often assume that a woman officer could not be married, as a husband would never accept that perceived level of aggression.⁵⁴⁹ Women officers are also perceived as being more strict and “ruthless” on smaller infractions, such as road safety, compared to male officers.⁵⁵⁰

A 2012 GIZ study found more than 50 percent of women officers indicated that sexual harassment hampers their ability to do their job.⁵⁵¹ Stakeholders confirm that little progress has been made, noting that the prevalence of GBV among officers hinders women officers’ ability to effectively perform their job and stymies recruitment efforts.⁵⁵²

However, women and girls in the community are reportedly more willing to disclose incidents of GBV to women officers than men officers, suggesting that women officers play a key role in providing access to justice for victims. A woman from Bwiza asserted:

We know that if you are beaten by your husband, that if you are the victim of such or such other injustice at home and that you go to the police, it is always better to meet a woman there. They are more understanding. [Women officers] always do us justice, whereas men tend not to agree with us even when the truth is on our side.⁵⁵³

While recruiting more women officers is likely to be an encouraging factor for survivors to report GBV, stakeholders also highlighted the need for sensitivity and anti-gender bias training for men officers as an important strategy for increasing reporting.

The Association of Women Actresses of Peace and Dialogue has been effective for integrating women’s role in peacebuilding at the local level. Driven by UNSCR 1325, a network of women mediators called the Association of Women Actresses of Peace and Dialogue was established in Burundi to increase women’s participation in conflict resolution at the community level.⁵⁵⁴ Starting with 534 women in 2014, the network expanded to over 16,000 women in 2021; it has decentralized from national to colline levels and has supported more than 30,000 cases of resolved conflicts and more than 21,000 dialogue sessions.⁵⁵⁵ Through their collaboration with provincial and local authorities, this network of women mediators has prevented and resolved conflicts and has encouraged local consultations at the community level to identify strategies to build community security and social cohesion.⁵⁵⁶ Women mediators interviewed in Muyinga and Gitega provinces shared that all types of conflicts, including political ones, are addressed in collaboration with community leaders.⁵⁵⁷ Women mediators are also encouraged to run for election positions at the colline level, which helps to increase women’s political participation in community decision-making.⁵⁵⁸

3.3.4. RECOMMENDATIONS

Table 19 provides recommendations derived from findings for USAID/Burundi to consider in future programming to improve USG goals of advancing women's economic empowerment and reducing gender inequalities aligned with Mission Goal 3 and USAID/Burundi Development Objective 3.

TABLE 19. RECOMMENDATIONS FOR ICS MISSION GOAL 3: INVEST IN SOCIETY AND THE REGION
STRATEGIC PRIORITIES FOR USAID AND DONORS RELATED TO GOOD GOVERNANCE AND CIVIL SOCIETY
<ul style="list-style-type: none"> • Establish programs that encourage and promote women running for office at each government level; consider partnering with local organizations such as AFRABU who are working in this space. • Prioritize intentional strategies to strengthen women's leadership across all sectors. Such strategies could include providing skill-building opportunities and promoting women who are leaders in their communities as role models and mentors. Couple leadership skill-building with programming designed to shift intra-household dynamics to adjust caretaking responsibilities and support women's increased participation outside the home. • Prioritize grantmaking to women-led and feminist organizations in support of the USAID's dual goals of advancing gender equality and localization. • Increase capacity building for gender-sensitive media. Work with the media actors (such as outlets like IWACU Press Group, Association of Women Journalists, and the National Council of Communication) to train staff and journalists on gender-sensitive reporting. Support fellowships to develop content to address gender inequality, including reporting on all forms of GBV, including sexual harassment or IPV. • Work with media companies to promote women in public-facing and leadership roles to improve women's visibility and meaningful participation in the media sector. • Work with Burundi's National Police and Ministry of Justice to conduct a study to identify a comprehensive list of barriers women in particular face for enrollment and retention in law enforcement positions. Use the study's findings to inform strategies to reduce structural and normative barriers that hinder women from applying to, being hired for, and assuming leadership positions in law enforcement. • Conduct a study to comprehensively examine the use of the <i>bashingantahe</i> for GBV-related cases, including the extent to which do-no-harm considerations are taken into account and survivor-centered resolutions are pursued. Greater research is also needed on the effect of women's participation in <i>bashinganatahe</i> on women's empowerment outcomes. • Work with the Ministry of Justice to activate the portion of the 2016 GBV law that requires all law enforcement departments, particularly at the local level, to have focal points trained specifically to handle cases of GBV. In addition to the focal points, ensure that all law enforcement officers—men and women—are trained in how to receive, process, and manage cases of GBV and how to interact with survivors in keeping with ethical codes of conduct, including making confidential referrals for care. • Support the Ministry of National Solidarity, Human Rights, and Gender to develop an updated five-year GBV strategy. • Work with the Ministry of Justice to train lawyers and judges—both men and women—at all levels of government on how to effectively and appropriately prosecute and handle cases of GBVs in accordance with existing laws.
ACTIVITY-LEVEL APPROACHES FOR USAID IMPLEMENTING PARTNERS RELATED TO GOOD GOVERNANCE AND CIVIL SOCIETY
<ul style="list-style-type: none"> • Implement awareness campaigns as well as training on individual rights and equality, specifically targeting women, youth, and other marginalized groups such as the Batwa. Incorporate references to existing provisions in the Constitution into these awareness campaigns. Work with the media or social influencers to disseminate these campaigns to reach rural populations, to educate women and youth, in particular, about their rights to equality and safety. • Identify and work with local religious and other key influential leaders and champions to denounce GBV within their communities. Consider replicating the Faithful House and Islamic Family Life approach of Catholic Relief Services (CRS), which promotes joint household decision making as entry points to working with religious leaders on enhancing gender equality at the household level. • Embed household dialogue models adapted to the Burundi context into programming to target norm and behavior change within the household, to promote more equitable household decision making and to shift norms that contribute to GBV. • Use evidence-based individual and group empowerment methodologies, particularly those that have been successfully developed and adapted to the Burundi context, to promote women's and girls' sense of self, self-confidence, and self-efficacy. Ensure that projects have effective MEL approaches to assess empowerment outcomes of interventions and continue building the evidence base for what works. • In program design, expand the use of community-level diagnostic tools that have been adapted to the Burundi context, such as the Social Norms Exploration Tool, to identify barriers that limit women's political and civic participation and women's and girls' leadership.

3.3.5 ILLUSTRATIVE INDICATORS

TABLE 20. RECOMMENDED ILLUSTRATIVE INDICATORS FOR MISSION GOAL 3

- Percentage of participants reporting increased agreement with the concept that males and females should have equal access to social, economic, and political resources and opportunities (GNDR-4 Gender)
- Number of male and female community leaders or custom court magistrates trained in GBV, gender equality, and women's rights in property and family law (Custom indicator)
- Number of training and capacity-building activities conducted with USG assistance that are designed to promote the participation of women or the integration of gender perspectives in security sector institutions or activities (USG F indicator: GNDR-9)
- Extent to which a national budget is broken down by gender, age, income, or region (Custom indicator: USAID WE3 TA Indicator)
- Number of USG-supported activities designed to promote or strengthen the civic participation of women (USG F indicator)
- Number of USG-assisted political parties implementing initiatives to increase the number of candidates or members who are women, youth, and from marginalized groups (USG F indicator)

ANNEX A: USAID/BURUNDI GENDER ANALYSIS SCOPE OF WORK

A.1 PURPOSE

The [2021 ADS 205.3.3](#) requires a gender analysis as part of the design of country strategies. The gender analysis must be completed prior to completing a revised SF so that its findings will appropriately inform strategic decisions about each development objective and intermediate result. The analysis must provide country and sector-level quantitative and qualitative information on the key gender gaps in each of the domains described in section 205.3.2 at the country level and in specific sectors where Mission resources are likely to be concentrated.

Banyan Global will carry out an analysis under the Gender Integration Technical Assistance (GITA) II Task Order to analyze and identify opportunities around gender equality and women's empowerment in the mission's proposed development objectives to inform its 2023-2027 SF and integrated country strategy (ICS).

A.2 BACKGROUND

A.2.1 GENDER EQUALITY/WOMEN'S EMPOWERMENT

Burundian women face many deeply ingrained gender norms that make it difficult to adequately participate in the social and economic development of the country. Legal and cultural restrictions have prevented a significant number of women from owning or inheriting property and productive assets without a spouse, partner, or male family member. For instance, only 17.7 percent of women are agricultural landholders compared to 62.5 percent of men. This has resulted in a lack of livelihood and business opportunities for women, especially in rural areas where more than 60 percent of women live and for over 25 percent of Burundian women are widows. As a result, Burundian women are vulnerable to a higher incidence of poverty and are unable to fully participate in the social, economic, and political development of the country. These barriers are compounded by very high fertility rates and low access to FP, limited access to primary and secondary education, and high rates of GBV.

A.2.2 GBV

GBV is pervasive in Burundi and takes on many forms, including physical, sexual, emotional, psychological, and economic abuse. Research conducted by Engender Health under the USAID-funded Breaking Cycles of Gender-Based Violence in Burundi (BRAVI) activity revealed the existence of strong cultural norms that normalize GBV, wherein masculinity is linked to dominance, violence is seen as a normal form of conflict resolution, and it is believed that men have a right to have sex with their spouse whenever they desire. The 2016 Demographic Health Survey (DHS) found that one in four women aged 15-49 have experienced sexual violence, and one in three have suffered a form of physical violence. Children, adolescents, and youth are especially vulnerable due to gender norms that encourage child/early forced marriage, early pregnancy, and transactional sex.

The government's National Strategy to Fight GBV from June 2018 identifies the groups most at risk for GBV as young girls and women, women who head households, and marginalized populations such as female sex workers.

Burundian law prohibits rape, including spousal rape, with penalties of up to 30 years' imprisonment for conviction. The law prohibits domestic abuse of a spouse, with punishment if convicted ranging from fines to three to five years' imprisonment. Government negligence in enforcing this law significantly contributes to continued violence towards women.

In 2016, the government adopted a law that provides for the creation of a special gender-based crimes court, makes GBV crimes unpardonable, and provides stricter punishment for police officers and judges who conceal violent crimes against women and girls. However, this special court has not been created, and no police or judges have been prosecuted under the law.

Violence against women is related to a larger context of gender inequality in Burundi. Discriminatory practices against women remain prevalent in the country. Violence is used as a means of social coercion and to prevent women from advocating for their rights and better treatment. Domestic violence is a pervasive problem that permeates family life, but it is not widely perceived as a negative social norm. Masculinity is accepted as the center of the social hierarchy.

The established norms around masculinity make life difficult for those who are perceived to go against them, such as men who have sex with men, transgender persons, and others. These groups face inequality and discrimination that place them at greater risk of GBV and HIV infection. GBV fosters the spread of HIV by limiting a person's ability to negotiate safe sexual practices, access services due to fear of reprisal, and disclose HIV status, which can itself trigger violence.

A.3 OBJECTIVES AND TIMELINE OF THE GENDER ANALYSIS

A.3.1 OBJECTIVE

To conduct a holistic USAID/Burundi mission-level Gender Analysis that considers opportunities for gender equality and women's empowerment in Burundi to inform the mission's SF, with a focus on the following draft ICS Mission Goals:

- **Mission Goal 1:** Invest in People: Burundian systems for health and education are strengthened
 - **Mission Objective 1.1:** The Burundi government's ability to plan and transparently manage resources dedicated to the improvement of health outcomes is improved.
 - **Mission Objective 1.2:** Equitable educational opportunities in Burundi are increased.
 - **Mission Objective 1.3:** Burundi's food security and nutrition outcomes are improved.
- **Mission Goal 2:** Invest in the Economy: The foundation for a stronger Burundian economy is created through investment, employment, profitable value chains, and sound agricultural and environmental practices.
 - **Mission Objective 2.1:** The foundations of an enabling business environment, including a more attractive investment climate, are established.
 - **Mission Objective 2.2:** Policies facilitating access to capital, training, and entrepreneurship, especially for underserved or vulnerable populations, are in place.
 - **Mission Objective 2.3:** The transition from subsistence agriculture to a broad, market-based economy is initiated while protecting and enhancing the natural environment.
- **Mission Goal 3:** Invest in Society and the Region: Burundi is a peaceful, open, and stable actor at home and in the region.
 - **Mission Objective 3.1:** The successful 2020 transfer of power is capitalized on to promote more open and inclusive governance and respect for the rule of law.
 - **Mission Objective 3.2:** The government protects human rights and press freedoms, reforms judicial institutions, and encourages an active civil society.
 - **Mission Objective 3.3:** Burundi's defense and law enforcement agencies positively contribute to peace and stability both within Burundi and the region, working with the United States and like-minded countries as their partners of choice.

The gender analysis will:

1. Analyze gender equality and women's empowerment advances and gaps in Burundi in all of ICS Mission goals and objectives listed above. GBV prevention and response, self-reliance and WEE will be key cross-cutting priority focus areas addressed under all objectives. Key variables/populations will include: youth, region, rural/urban, and marital status.
2. Identify opportunities and provide recommendations (programmatic and partnerships) for gender and women's empowerment to be integrated into USAID/Burundi's strategic planning and programming.
3. Furthermore, the gender analysis will comply with ADS Chapter 205 requirements for gender analysis, which includes gathering and providing data on the following gender analysis domains:
 - Laws, Policies, Regulations, and Institutional:
 - Cultural Norms and Beliefs
 - Gender Roles, Responsibilities, and Time Use:
 - Access to and Control over Assets and Resources
 - Patterns of Power and Decision-making

It will also address the following intersectional variables: age, disability, rural/urban location, and sexual orientation. Recommendations will also propose F and custom indicators in the Gender Analysis Report. The key stakeholders, or the primary audience for the analysis results, will be USAID/Burundi and USAID/Washington. At the same time, the analysis (or public version of it) will be accessible to all interested parties in the development community and beyond.

A.4 METHODOLOGY

The gender analysis will comprise a combination of primary and secondary data collection structured around six key deliverables:

- Inception Report (including a comprehensive literature review of secondary data sources, proposed methodology, work plan/schedule, a list of key stakeholders to interview, and research questions guides)
- In-briefing with USAID/Burundi Mission Staff
- Primary Data Collection (in-person)
- USAID/Burundi Mission-level Gender Analysis Presentation of Preliminary Findings and Recommendations
- Draft mission-level Gender Analysis Report
- Final Mission-level Gender Analysis Report (incorporating written feedback from USAID/Burundi)

The section below speaks primarily to the methodology for the inception report, in-country primary data collection, and presentation of preliminary findings and recommendations, and deliverables.

1. **Inception report:** The inception report will include the methodology, work plan, a preliminary list of key stakeholders to interview, and research questions guides. It will also include a comprehensive desk review of secondary data and literature, by development objective, including national and regional statistical databases. Banyan Global will create a secured Google Drive Folder for the mission to share any pertinent reports or documentation that are not available publicly online (i.e., USAID/Burundi PAD- and activity-level gender analyses, as well as any other relevant reports and information). Documents may include the following:

USAID/Washington documents including, but not limited to:

- ADS 201 and 205
- USAID's 2020 Gender Equality and Female Empowerment Policy

- U.S. Strategy to Prevent and Respond to GBV Globally (2016)
- USAID Vision for Ending Child Marriage and Meeting the Needs of Married Children (2012)
- U.S. National Action Plan on Women, Peace and Security;
- USAID Vision for Ending Child Marriage and Meeting the Needs of Married Children;
- USG 2018 Act on Women's Entrepreneurship and Economic Empowerment Act
- U.S. Strategy to Empower Adolescent Girls (March 2016)
- Counter-Trafficking in Persons Policy (2012)
- USAID's Youth in Development Policy (2012)
- USAID Disability Policy Paper (1997)
- Advancing Disability-Inclusive Development
- USAID Policy on Non-Discrimination (2011)
- 2021 Executive Order on Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation

USAID/Burundi mission documents, such as, but not limited to:

- The current Health and DG PAD- and activity-level gender analyses/assessments
- The Mission's 2019-2020 ICS
- Mission Burundi ICS (2022-2025) revision in progress and available Nov-Dec
- USAID's 2022-2026 draft strategic results frameworks
- Mission PPR and Portfolio Review
- Mission Gender & Social Inclusion Mission Order
- Studies, analyses and assessments concerning gender equality conducted by donors, UN agencies, NGOs, national governments, regional organizations, and the academic community; Catholic Relief Services Amashiga studies, Development Food Assistance Project baseline assessment)
- COVID Gender Analysis (World Vision)
- National statistics on women from the DHS, the UNDP Human Development Index Reports, and the World Economic Forum's Global Gender Gap Index.
- Recent literature that addresses gender equality and women's empowerment issues related to the mission's draft goals and objectives.

2. **In-Country Primary Data Collection:** The research team will carry out in-country primary data collection to inform the in-country presentation of preliminary findings and recommendations, and the draft and final gender analysis reports. The primary data collection will include a survey, semi-structured interviews and focus groups with USAID staff, implementing partners, government counterparts, United Nations agencies, national NGOs, program beneficiaries, and key civil society stakeholders. The research team will consider the following:

- Key stakeholder interviews and focus groups with USAID/Burundi and implementing partners' staff involved in developing the Mission program. These will include where possible:
 - Interviews with the Gender/Inclusive Development Advisor, the gender and social inclusion working group, the Program Office, the Front Office.
 - Interviews with mission office teams and implementing partners on specific sectors and areas of interest to identify possible entry points for the incorporation of gender equality and women's empowerment into ongoing and future activities, taking into consideration the current context of Burundi.

- Interviews with selected key expert stakeholders, beneficiaries and other community members involved in current and proposed programs; site visits to selected program activities as time permits to identify gender equality and women's empowerment priorities and potentialities for improving attention to gender in USAID activities.

Primary data collection will take place in the following priority regions: Northern, Eastern and Southern Provinces (Kirundo, Cankuzo, Muyinga, Rutana, Makamba), Central (Gitega), Bujumbura rural and Bujumbura Mairie.

3. **Presentation of Preliminary Finding and Recommendations:** The research team will present an in-country presentation of preliminary findings and recommendations to USAID/Burundi staff. The presentation will also include a question and answer/discussion to validate key findings and recommendations to inform the gender analysis report.

For all deliverables, Banyan Global's home-office technical staff will provide consistent and regular technical guidance to the research team to ensure that the methodology and deliverables meet USAID and internal Banyan Global quality standards.

A.5 DELIVERABLES AND GUIDELINES

A.5.1 KEY DELIVERABLES

The associated work will include the following deliverables. Note that dates have been updated to reflect the final implementation schedule.

DELIVERABLE/TASK	CONTENT
1 Inception Report	Inception report, including methodology, workplan, interview question guides and literature review of secondary data
2 USAID/Burundi shares list of key stakeholders	USAID will share names, organizational affiliation, and contact information for individuals who it is recommended that the research team meet with. This list will be incorporated into the Stakeholder List the Inception Report Annex.
3 In-country briefing with USAID/Burundi Mission Staff	Presentation to mission on the purpose of the Gender Analysis; proposed research questions; methodology; suggested time frames for field work; proposed key respondents
4 USAID provides feedback on inception report	Feedback on inception report, any recommended changes to the interview guides or data collection plan
5 Primary Data Collection	Collection of primary data in target regions in Burundi
6 Debriefing with mission staff - Presentation of Preliminary Findings and Recommendations	Presentation of preliminary findings and recommendations to USAID/Burundi
7 Draft Gender Analysis Report	Draft gender analysis report that takes into account the literature review and primary data collected in Burundi
8 Mission review of draft report	
9 Final Gender Analysis Report (incorporating USAID/Burundi feedback)	Final report taking into account USAID/Burundi's feedback on the Draft Gender Analysis Report

A.5.2 REPORTING GUIDELINES

The Gender Analysis report (36 pages excluding Executive Summary, Table of Contents, Acronyms and Annexes) should follow the format below and be submitted electronically in Microsoft word and PDF versions:

- Executive Summary (4 pp.)
- Table of Contents (1 pp.)
- Acronyms (1 pp.)
- Introduction (1 pp.)
- Background (2-3 pp.)
- Methodology (2 pp.)
- Country Context: Findings, by USAID ADS205 gender analysis domain (5 pp)
- Findings and Recommendations, by development objective, (including the proposal of 2 gender equality and women's empowerment intermediate results and indicators per ICS Mission Goal and Objective) (35 pp)
- Annexes
 - Mission-Level Gender Analysis SOW
 - List of Key Documents
 - List of key stakeholders and organizations consulted

A.6 TEAM COMPOSITION

Team Leader (International) (Task Order Labor Category: Senior Consultant (expat)) with the following qualifications:

This position seeks an international consultant with core experience working with and knowledge of USAID programs and must be an experienced social scientist with expert level knowledge in conducting gender analyses in Sub-Saharan Africa (required), preference given for relevant Burundi experience. Other qualifications include:

- Minimum of 10 years' experience in research, policy formulation and program design in gender and/or social inclusion.
- At least 6 years of experience in gender analysis– including a focus on GBV prevention and response.
- Familiarity with USAID strategic planning and program management is strongly desired.
- Excellent speaking and writing English language skills are required.
- Exceptional interpersonal and intercultural skills.
- Excellent leadership skills.
- Expertise in one of the priority development objectives/sectors.
- Formal studies in gender and/or social inclusion and a minimum of a Master's degree in sociology, anthropology, economics, or relevant social science field.
- Experience with other donors is highly desirable.
- Fluency in English and French.
- U.S. nationality.

Senior Gender Expert (International) (Task Order Labor Category: Senior Consultant (expat)) with the following qualifications:

- Minimum of 10 years' experience in research, policy formulation and program design in gender and/or social inclusion.

- A minimum of 5 years of experience in gender analysis—including a focus on GBV prevention and response.
- Expertise in one of the priority development objectives/sectors.
- Experience in the drafting and implementation of qualitative research instruments.
- Familiarity with USAID strategic planning and program management is strongly desired.
- Excellent speaking and writing English language skills are required.
- Formal studies in gender and/or social inclusion and a minimum of a Master's degree in sociology, anthropology, economics, or relevant social science field.
- Fluency in English and French.
- U.S. nationality.

National Gender Expert (2) (Task Order Labor Category: Senior Consultant and Mid-Level Consultant (local) with the following qualifications:

The team includes two Gender Experts (one senior, and one mid-level) who exhibit complementary skills to the Team Lead and Senior Gender Expert and core experience conducting thorough evidence-based research on gender issues in Burundi. Qualifications include:

- Minimum of 10 years' experience in conducting evidence-based research and expert knowledge on gender and WEE issues in Burundi.
- Expertise in one of the priority development objectives/sectors.
- Excellent speaking and writing English, French, and Kirundi language skills are required.
- Must be conversant with socio-cultural beliefs and practices in Burundi.
- Exceptional interpersonal and intercultural skills

Examples of past analysis reports produced under the direction of the proposed team leader and National Gender Expert may be requested as well as character and professional references. Other team members can be considered if the need presents itself.

A.7 ANALYSIS MANAGEMENT

A.7.1 LOGISTICS

A USAID focal point will be assigned to assist the team to gather relevant contact information from those groups, organizations and individuals identified for interviews

A.7.2 SCHEDULING

The expected period of performance for the analysis will be roughly 120 days per the deliverables schedule above (extended timeframe due to end of year holidays).

The team will have 3.5 weeks (25) working days after completing the fieldwork to submit a preliminary draft to USAID/Burundi.

Due to office space constraints the team will need to identify an ideal workspace and will have to occasionally schedule meetings with USAID/Burundi staff for interviews and to discuss issues.

A.7.3 INTERVIEW NOTES AND RESOURCE DOCUMENTS

The Contractor must provide summaries of all key meetings, workshops, discussions, and any data collection exercises conducted during the course of the analysis. These summaries must be submitted to USAID/Burundi Activity Manager, along with copies of any background documents and reports gathered in the course of the assessment. All information must be provided in an electronic format, organized and fully documented for use.

A.7.4 DATASETS

Should the Contractor use quantitative data, all datasets generated during the performance of the assessment must be submitted in a machine-readable, non-proprietary format and excluding any personally identifiable information, with supporting documentation describing the dataset, such as code books, data dictionaries, data gathering tools, notes on data quality, and explanations of redactions. All datasets created during the performance of the task order must be submitted to the Development Data Library per open data requirements found in ADS 579, USAID Development Data, and per the instructions outlined in ADS 302mas (302.3.5.22). The Contractor must submit the Dataset and supporting documentation within thirty (30) calendar days after the Dataset is first used to produce an Intellectual Work or is of sufficient quality to produce an Intellectual Work.

A.8 SUBMISSION TO THE DEVELOPMENT EXPERIENCE CLEARINGHOUSE (DEC)

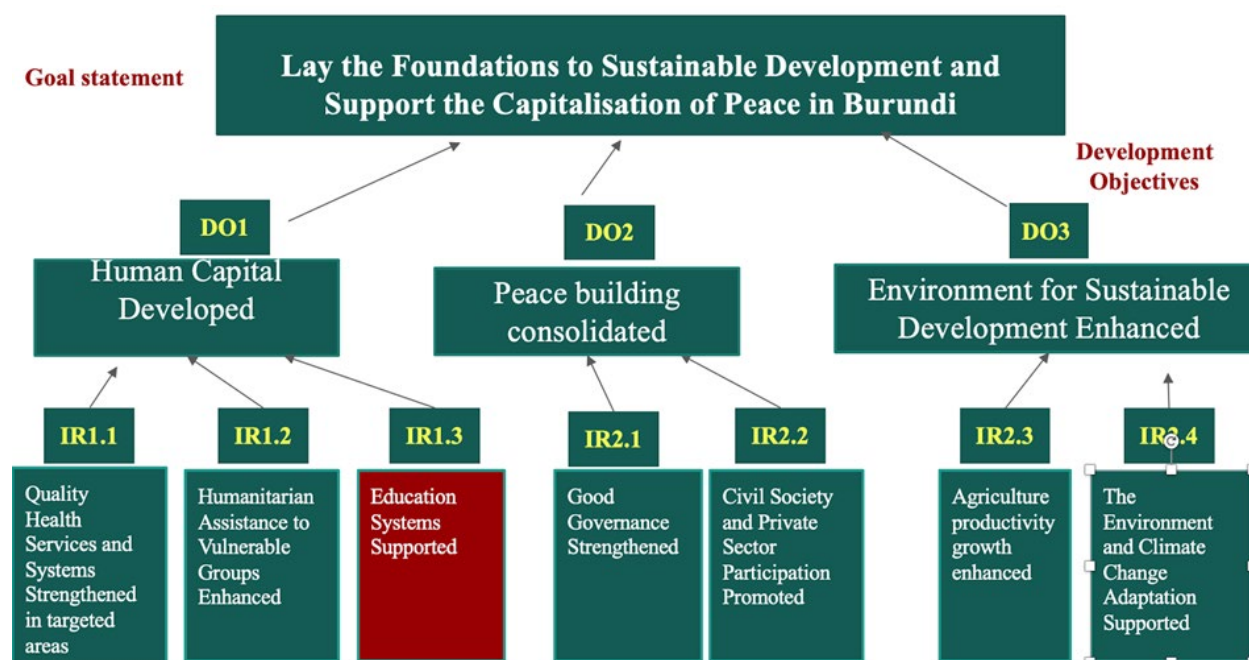
The final approved report must be a public document, unless otherwise specified to be submitted to the Development Experience Clearinghouse (www.dec.org) (DEC) following the required Office of GenDev format (see Annex II). The contractor must make the final gender analysis report publicly available through the Development Experience Clearinghouse within 30 calendar days of final approval of the formatted report.

A.9 TASK ORDER PACKAGING, BRANDING, AND MARKING

Task Order packaging and marking shall be performed in accordance with Section D of Advancing the Gender Integration Technical Assistance II Task Order: 47QRAA18D00CM.

The Contractor shall comply with the requirements of the policy directives and required Marking shall comply with the USAID "Graphic Standards Manual" available at www.usaid.gov/branding or any successor branding policy.

FIGURE A1. USAID/BURUNDI STRATEGIC RESULTS FRAMEWORK



ANNEX B. METHODOLOGY

B.1 LITERATURE REVIEW

A research team of four consultants (two international and two national) conducted a desk review of nearly 200 secondary data sources from December 1, 2021 to January 12, 2022. Based on the data gaps identified during this review, the research team designed the primary data collection instruments to guide primary data collection with key stakeholders representing the major sectors covered in this analysis. These sectors are: health and nutrition; education; agriculture and food security; business and economic empowerment; climate and environment; and civic engagement and good governance. The research team also conducted interviews with USAID/Burundi staff.

B.2 PRIMARY DATA COLLECTION

From February 7 to March 28, 2022, the research team carried out in-person and remote primary data collection in Burundi through semi-structured interviews and focus group discussions (FGD). See Table B1 for details.

TABLE B1. PRIMARY DATA COLLECTION METHODS AND TOOLS

TECHNIQUE	STAKEHOLDERS	PURPOSE
Semi-structured interviews and FDGs	USAID Staff, USAID partners, GoB counterparts, national gender equality and women's empowerment organizations, international donor organizations, national and international NGOs	<ul style="list-style-type: none">• To gather data on gender equality advances, gaps, challenges, constraints and opportunities in line with the USAID/Burundi priority sectors, cross-cutting themes, and priority geographical areas.• To identify lessons learned from previous gender integration efforts and recommendations moving forward.

Due to travel and health restrictions associated with COVID-19, the research team adjusted to a hybrid model of remote and in-person primary data collection. Three members of the research team conducted in-person interviews, while one member coordinated remote interviews with key stakeholders. In many instances, key stakeholders preferred to conduct remote interviews rather than meet in-person, and the research team accommodated such requests via Google Meet, Zoom, or WhatsApp. For in-person interviews, the research team met the stakeholder at their preferred location and time and followed COVID-19 health protocols.

Primary data collection took place with stakeholders in rural and urban zones located across the key regions prioritized in the SOW, including the Northern and Eastern provinces (Kirundo, Cankuzo, Muyinga), Central (Gitega), Bujumbura, and Bujumbura Mairie. In some instances, stakeholders—particularly those from a similar organization—preferred to conduct their interviews in a group setting, whether remotely or in-person. In Cankuzo and Gitega, one FGD was held with local members of education groups.

When conducting the interviews and FGDs, the research team registered basic demographic data for each stakeholder (name, sex, organization, sector, years in position, etc.). All interviews were facilitated by a trained qualitative interviewer. Extensive notes were taken during each interview, as the basis for the raw qualitative data. The research team de-identified (and in some cases, at the stakeholders' request, anonymized) these notes as needed. All data collection and management procedures will follow the research guiding principles listed in the textbox.

RESEARCH GUIDING PRINCIPLES

Do No Harm
Free Prior Informed Consent
Informant Confidentiality
Protection of Information
Non-Discrimination and Respect
Ethical Data Collection
Holistic Participation
Collaborative Learning
Cultural Sensitivity
Intersectionality

B.3 STAKEHOLDERS CONSULTED

A total of 135 key stakeholders were consulted for this assessment. These stakeholders included: USAID staff; prime and local implementing partners; government officials; development partners; national NGOs and INGOs; key civil society stakeholders; and USAID program participants. Of the 135 key stakeholders consulted, 99 (73 percent) were women and 36 (27 percent) were men. Key stakeholders were first identified by an initial list provided by USAID, supplemented by key implementers or actors based on the desk review. Additional informants were then identified via snowball sampling. Tables B2 and B3 present the number of stakeholders consulted included in this assessment, by sector and region.

TABLE B2. NUMBER OF STAKEHOLDERS CONSULTED BY SECTOR

SECTOR	NUMBER OF STAKEHOLDERS
USAID/Burundi Staff	6
Education	21
Health and Nutrition	33
Civic Engagement / Good Governance	29
Business / Economic Empowerment	18
Agriculture and Food Security	19
Climate and Environment	10
Total	135

TABLE B3. NUMBER OF STAKEHOLDERS CONSULTED BY REGION

REGION	NUMBER OF STAKEHOLDERS
Bujumbura Mairie*	110
Bujumbura Rural	1
Gitega	9
Muyinga	5
Cankuzo	7
Kirundo	3
Total	135

* Bujumbura Mairie number also includes stakeholders working in Bujumbura Rural.

B.4 PROTECTION OF KEY INFORMANT INFORMATION

At the beginning of every semi-structured interview, the research team obtained free and prior informed consent at the organizational and individual levels. This discussion included:

- An explanation of the purposes of the research, how long it will take, and the procedures to be followed
- A description of any risks to the person participating (if relevant)
- A statement describing whether the data will be anonymous or stored confidentially
- Contact details provided to the informant to use, if they have questions or concerns regarding the research
- A statement that participation is voluntary, that refusal to participate will involve no penalty, and that the subject may stop participating at any time

For interviews with individuals or groups whose physical safety may be put in danger if they participate, the research team took measures to ensure confidentiality when scheduling the interviews and did not cite the names of respondents in the gender analysis report. Specifically, the research team obscured or did not record all personally identifying information, including names, ages, organizations, and even times and dates of interviews.

B.5 DATA ANALYSIS AND REPORT PREPARATION

The research team delivered the draft gender analysis report to USAID/Burundi on April 19, 2022 and provided a presentation of the findings and recommendations to USAID/Burundi on April 20, 2022. The purpose of the presentation was to validate and expand upon the findings and recommendations with USAID/Burundi staff and any invited stakeholders. After receiving USAID feedback on the presentation and draft report, the research team submitted updated versions of the report until finalizing.

ANNEX C. COUNTRY CONTEXT

Burundi is a landlocked country in East Africa that shares borders with Rwanda, Tanzania, the Democratic Republic of the Congo, and Lake Tanganyika, the largest freshwater reservoir in Africa. Burundi is a constitutional republic with two effective capitals: Bujumbura is the economic capital, and Gitega is the political capital (as of 2019). Both the Presidency and the Senate moved to Gitega in 2019.

Since becoming independent in 1962, Burundi has experienced cycles of conflict, violence, and political instability, with six episodes of civil war that forced millions of Burundians to flee to neighboring and foreign countries and others to become IDPs.⁵⁵⁹ Underlying political instability, power struggles, and unresolved conflicts between different ethnic groups, namely the Hutu and Tutsi, have perpetuated and flamed cycles of violence. These power struggles were initiated by Belgian colonialists, who favored the Tutsi elite and marginalized the Hutu. The president and several officials were assassinated during a coup d'état in 1993, sparking a civil war between the Hutus and Tutsis that lasted until 2005. More recently, after President Nkurunziza controversially sought and secured a third term, another attempt to change government resulted in violence in 2015, underlining the failure of the Arusha Accord for Hutu and Tutsis to share power.⁵⁶⁰ In June 2018, Burundi signed a new Constitution, which extended presidential term limits from five to seven years and created the function of the vice-president and prime minister, splitting political power among the three roles. President Nkurunziza died in 2020, and President Ndayishimiye assumed office on June 18, 2020 after being elected with 68.7 percent of the vote. President Ndayishimiye, with the international community.⁵⁶¹



Figure 1: Administrative map of Burundi (Source: NationsOnline.org)

In 2019, bilateral aid in Burundi accounted for 19.5 percent of Burundi's total Gross National Income (GNI); most of the aid supported either health and population services (25 percent) or humanitarian aid (24 percent).⁵⁶² Investments into economic infrastructure and services represented the least share of aid received (0.23 percent).⁵⁶³ Trade between Rwanda and Burundi remains closed due to the unique political tensions between the two countries. Food security remains among the most important humanitarian issues facing Burundian people today, exacerbated by the COVID-19 pandemic, an increase in repatriated Burundian refugees,⁵⁶⁴ and reduced economic activity.

Burundi is the fourth most densely populated country in Africa, with a population of 11.9 million persons in 2020 on an area of 27,834 km² (including 2,700 km² covered by water and 23,500 km² of potentially arable land).⁵⁶⁵ A majority of the population (approximately 86 percent) live in rural areas.⁵⁶⁶ The population is nearly evenly split between men (49.6 percent) and women (50.4 percent) in 2021;⁵⁶⁷ it is also very young: just 52.4 percent are 15–64 years old, while 45.1 percent are under the age of 14.⁵⁶⁸ According to the most recent census in 2008, approximately 85 percent of the population are Hutu, 14 percent are Tutsi, and 1 percent are the Batwa (also known as Twa).⁵⁶⁹ The Batwa are a forest-dwelling group that has historically been marginalized and excluded from mainstream society.⁵⁷⁰

Burundi's national gross domestic product (GDP), at purchasing power parity (PPP), is valued at \$9.1 billion USD.⁵⁷¹ Burundi's economy is largely dependent on the informal sector and is one of the least competitive economies in the world, ranking 129 out of 137 by the Global Competitiveness Index.⁵⁷² Burundi has experienced slow growth over the last few years, stagnated by disruptions due to COVID-19, political instability, population growth, and increasing poverty.⁵⁷³ In 2021, the poverty rate in Burundi (defined as living on no more than \$1.90 per day) was approximately 87 percent.⁵⁷⁴ A majority of the population (85 percent) is reliant on the agricultural sector, which contributes approximately 28 percent of the national GDP.⁵⁷⁵ Burundi's main exports are coffee and tea.⁵⁷⁶

According to the World Economic Forum (2021) Global Gender Gap index, Burundi ranks fourth among sub-Saharan African countries, with small or moderate gender gaps across multiple sectors.⁵⁷⁷ Burundi scores highest on economic participation and opportunity, where women's participation (at 81.7 percent of women) is slightly higher than men's (at 78.3 percent); however, high wage gaps and limited women's representation as legislators, senior officials, managers, and professional workers lower this score. Burundi scores lowest for educational attainment, as women's literacy rate and tertiary school enrollment significantly lag behind men's. Finally, Burundi's gender gap scores for health and survival (97.9 percent) and political empowerment (34.5 percent) are better than average for the Sub-Saharan region (97.3 percent for health and survival, 20.8 percent for political empowerment).⁵⁷⁸ GBV is prevalent in Burundi, with 46.7 percent of women facing some type of GBV in their lifetime.⁵⁷⁹

Burundi's natural landscape is mountainous and hilly, with abundant river networks, freshwater lakes, marshlands, and fertile land. Factors including deforestation, land degradation, and increasing population pressures have significantly reduced Burundi's forest coverage to around 6.6 percent.⁵⁸⁰ Burundi is the fourth most vulnerable country in the world to the effects of climate change and has very limited capacity to respond. Rural households typically cope with chronic poverty by expanding their agricultural activities into areas under environmental protection, including draining wetlands and employing highly unsustainable agricultural practices (such as slash and burn). These practices further exacerbate issues of land and soil degradation, deforestation, soil erosion, which in turn exacerbate the effects of climate change and further displace rural populations.⁵⁸¹ While this occurs throughout Burundi, it is particularly intense in Cibitoke, Bubanza, and Bujumbura provinces.⁵⁸²

Erratic rainfall and rising temperatures further negatively impact agricultural production and livelihoods. Extreme weather events include intense floods, droughts, wildfires, and landslides. Poor agricultural practices that undermine soil integrity and deforestation exacerbate the intensity of these extreme events.⁵⁸³ Effects of climate change, such as natural disasters and erratic rainfall, have significantly disrupted agricultural production and thus significantly increased the number of people who rely on food and humanitarian assistance even in a single year, between 2020 and 2021, mainly affecting women and children. Effects of climate change and decreasing agricultural productivity increase women's daily responsibilities, exacerbating the gender gap in time burden between men and women.

ANNEX D. QUOTAS IN BURUNDI POLITICAL REPRESENTATION

During the 2015–2020 period, women represented 36.36 percent of members in Parliament; after the 2020 election, women now occupy 38.2 percent of members in Parliament. (See Table D1 for data on women in elected government positions in the 2020 election.)

TABLE D1. WOMEN'S REPRESENTATION IN ELECTED POLITICAL POSITIONS AS A RESULT OF THE 2020 ELECTION

ELECTED POSITIONS	TOTAL INDIVIDUALS ELECTED	PERCENTAGE OF WOMEN
President	1	0
Deputies (National Assembly)	123	35.77
Senators	39	41.02
Community Councils	3495	33.30
Community Administrators	119	36.13
Colline Councils	14552	19.36
Colline Leaders	2911	7.9

The percentage of women who held non-elected political positions, which are not subject to the quota, is shown in Table D2 for the year 2020.⁵⁸⁴ While only one category saw more than 30 percent participation of women (Ministers), there was an increase in women's participation in these positions since the 2015 elections, although some were only marginal. For example, the representation of women in diplomatic missions rose from 2 (at 9 percent) in 2015 to 7 (at 24 percent) in 2020. For another example, the leaders of *collines* rose from 6 percent representation of women in 2015 to 7.9 percent in 2020.

TABLE D2. WOMEN'S REPRESENTATION IN NON-ELECTED POLITICAL POSITIONS IN 2020

APPOINTED POSITIONS	TOTAL INDIVIDUALS APPOINTED	PERCENTAGE OF WOMEN
Ministers	15	33
Diplomatic missions and consulates	29	24
Permanent secretaries (Vice ministers)	15	13
Province governors	17	18

The number of men and women deputies in the National Assembly after the 2020 election is shown by ethnic group in Table D3. Despite quotas for ethnic representation in the National Assembly, the Batwa population remains marginalized relative to the Hutu and Tutsi ethnic groups.⁵⁸⁵ The 2020 election saw the first Batwa person ever elected to a Minister-level position: Imelde Sabushimike, elected as Minister for Solidarity, Social Affairs, and Human Rights.⁵⁸⁶

TABLE D3. REPRESENTATION BY ETHNIC GROUP AND SEX IN NATIONAL ASSEMBLY (2020–2025)⁵⁸⁷

ETHNIC GROUP	NUMBER OF MEN (PERCENTAGE OF TOTAL)	NUMBER OF WOMEN (PERCENTAGE OF TOTAL)
Hutu	52 (42 percent)	20 (16 percent)
Tutsi	25 (20 percent)	23 (19 percent)
Batwa	2 (2 percent)	1 (1 percent)
Total	79 (64 percent)	44 (36 percent)

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