

Empowering women and girls in Lesotho: Leveraging Family Ties for Effective Advocacy and Skill Development

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Abstract

In the distinctive socio-cultural landscape of Lesotho, the pursuit of women's and girls' rights emerges as a fundamental component of the developmental narrative. Within this context, entrenched cultural norms play a significant role in defining the roles and empowerment of women and girls in domestic settings. This qualitative meta-analysis examines the role of cultural norms in shaping gender rights advocacy within family structures in Lesotho, integrating data from UNICEF's research initiatives conducted in 2023. The focal points of this synthesis are a descriptive study on breastfeeding practices and an evaluative study spanning three years on an integrated Nutrition-HIV Program. These projects provide a platform for analysing the influence of familial dynamics on the promotion of women's and girls' rights in a setting characterized by entrenched traditional norms. The meta-analysis findings reveal a nuanced landscape where traditional societal structures coexist with signs of evolving family roles, particularly in the domain of child nutrition. While the data reflect persistent influences of a patriarchal system and economic dependencies, there is also evidence of a growing agency among women, suggesting a shift towards more balanced family dynamics. The findings from the Nutrition-HIV Program suggest an association between participation in health initiatives and positive health outcomes, which may imply a potential empowerment effect. The Breastfeeding Study uncovers familial factors influencing breastfeeding practices, indicating an intricate relationship between cultural practices and individual agency. The study underscores the imperative of facilitating empowerment avenues for women and girls, thereby establishing them as integral contributors in both familial and societal spheres. It recommends initiatives aimed at improving economic independence, education, policy sensitivity to gender issues, family inclusivity in decision-making, and family support in empowerment frameworks. This approach outlines a path for advancing gender equality and social development in Lesotho.

Keywords: Women's and Girls' Advocacy, Gender Roles, Family and Community Dynamics, Awareness Raising, Capacity Building

1. Introduction

Lesotho's pursuit of progress in development and public health is intricately linked to its gender dynamics, which cast a profound influence over its socio-economic fabric (Ali, & Deininger, 2023; Stamatakis *et al.*, 2022; Komiti, & Moorosi, 2020; Paramaiah *et al.*, 2020; Kali, 2018; Polasi *et al.*, 2015). The nation's majestic highlands stand in stark contrast to the socio-political intricacies that place a disproportionate strain on its citizens, most notably on women and girls (UNDP's Lesotho Country Office, 2023; Mairos Ferreira, 2023; Government of Lesotho, 2023, b; IMF, 2022; Mukurunge & Bhila, 2019; Chingono, 2016). Gender disparities, entrenched within the societal structure, have a defining role in shaping individual journeys and determining potential from childhood (UNICEF & Lesotho Red Cross Society, 2023; Mairos Ferreira, 2023). The road towards gender equality and empowerment for young women in Lesotho is laden with challenges. These include limited access to and participation in the growing economic sectors that are crucial for the country's advancement (UNDP, 2023; UNDP & UN Women, 2023; Government of Lesotho, 2023, a; Stamatakis *et al.*, 2022; Leenknecht *et al.*, 2021). Addressing these systemic barriers is essential for unlocking the full potential of women and fostering an inclusive economy.

Lesotho's public health landscape is marked by gender-specific challenges, with pressing issues such as a high prevalence of HIV and widespread nutritional deficiencies capturing the focus of global entities and academia (UNICEF, 2023a; UNDP's Lesotho Country Office, 2023; UNAIDS, 2022, 2023; IMF, 2022; Paramaiah *et al.*, 2020; FAO & UNICEF, 2019). Efforts to curb the HIV epidemic have seen progress, but the persistently low rates of early infant diagnosis and ongoing mother-to-child transmission call for refined, gender-sensitive approaches. These approaches must center women's health, especially in perinatal care, to safeguard the well-being of both mothers and children. Despite a commendable 89% rate of antiretroviral therapy (ART) uptake among expectant mothers, the enduring rates of vertical transmission, including through breastfeeding, signal a significant oversight in intergenerational health strategies (iQvia, 2023). In parallel, the stark reality of malnutrition, with a third of the nation's children under five experiencing stunted growth, sheds light on a gendered health crisis (Mairos Ferreira, 2023; Gaston *et al.*, 2022). This malnutrition crisis transcends immediate health impacts, perpetuating a cycle of poverty with far-reaching consequences. It ensnares women and girls in particular, hampering their potential for social advancement and economic independence (Mairos Ferreira, 2023; iQvia, 2023; Gaston *et al.*, 2022). Addressing these complex health issues necessitates an understanding of their intersection with gender inequities, and the development of targeted strategies that recognize and respond to the unique needs of women and girls in Lesotho.

Confronting Lesotho's public health challenges, which intertwine deeply with gender disparities and nutritional deficits, necessitates holistic and integrated strategies (Mairos Ferreira *et al.*, 2023b; Hemat *et al.*, 2022; Paramaiah *et al.*, 2020). Such strategies must

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penetrate the underlying socio-economic structures that perpetuate women's and girls' marginalization, paving the way for sustainable food security and socio-economic empowerment. Addressing these issues requires a concerted effort that combines direct health interventions with initiatives aimed at overturning the socio-economic barriers that restrict women's and girls' potential. This comprehensive approach involves not only immediate health measures but also the establishment of robust systems that enable women and girls to access essential resources and foster opportunities for their development and advancement. By integrating targeted health interventions with initiatives that address the socio-economic foundations of inequality, it is possible to lay the groundwork for enduring solutions that elevate the status of women and girls, ensuring their full participation in Lesotho's path to growth and stability (Gaston *et al.*, 2022; Paramaiah *et al.*, 2020).

2. Illuminating the Interplay of HIV, Nutrition, and Gender

Lesotho's public health sector grapples with profound challenges that are deeply rooted in the socio-economic and gendered realities of the nation (UNDP's Lesotho Country Office, 2023; Mairos Ferreira, 2023; Mairos Ferreira *et al.*, 20023, b; Gaston *et al.*, 2022; IMF, 2022; Hemat *et al.*, 2022; Mukurunge & Bhila, 2019; Chingono, 2016). The high incidence of HIV and pervasive nutritional issues are symptomatic of broader systemic disparities that disproportionately affect women and girls, drawing concerted attention from both international organizations and academic scholars (UNICEF, 2023a; UNDP's Lesotho Country Office, 2023; UNAIDS, 2022; IMF, 2022; Paramaiah *et al.*, 2020; Mukurunge & Bhila, 2019; SADC, 2018).

With an adult HIV prevalence rate standing at a staggering 19.3%, among the highest on a global scale (UNAIDS, 2022), the public health challenges in Lesotho are daunting. The intertwined Tuberculosis exacerbates the situation, creating a dual public health crisis that heavily impacts women, who are often the primary caregivers and thus at greater risk of exposure. The progress made in HIV awareness and treatment in Lesotho is significant, with a notable 94% awareness rate among those living with the virus. High rates of antiretroviral therapy uptake and viral suppression indicate successful disease management strides. However, gaps remain, particularly in early infant diagnoses and the persistent rates of mother-to-child transmission (iQvia, 2023). The relatively high rate of ART coverage for pregnant women is commendable, yet the vertical transmission during the breastfeeding period remains an area needing urgent attention, with gender-sensitive approaches being vital for further improvement.

Malnutrition in Lesotho presents a complex challenge with undernutrition, overnutrition, and micronutrient deficiencies converging to threaten public health (Mairos Ferreira, 2023; Mairos Ferreira *et al.*, 2023, a; iQvia, 2023; WFP, 2023, a; 2023, b). Stunting in children under five, affecting more than a third of this demographic, serves as a stark indicator of the gendered nature of poverty and food insecurity. The Global Hunger Index of 2022 underscores the severity of the issue, with Lesotho's score indicating a critical situation, lagging its regional

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neighbours and spotlighting the urgency for a robust, gender-responsive strategy (UNICEF, 2023a; UNDP's Lesotho Country Office, 2023). Targeted efforts to address malnutrition have been made, but progress is slow. The Lesotho Zero Hunger Strategic Review shows only modest reductions in underweight and wasting among children under five over the past decade (Office of the Prime Minister, 2018). Although stunting rates are on a downward trend, they remain unacceptably high, placing Lesotho within the high prevalence category by World Health Organization standards. These statistics do more than quantify a health crisis; they highlight the gendered intersections of malnutrition, where women and girls often bear the brunt due to their roles in food provision and child-rearing (UNICEF, 2023a; UNDP's Lesotho Country Office, 2023).

In summary, tackling the intertwined public health challenges of HIV, tuberculosis, and malnutrition in Lesotho necessitates a concerted, gender-equitable approach. Policies and interventions must be gender-informed, recognizing the differential impacts on women and girls, and designed to empower them as key agents in promoting health and nutritional well-being. This gender-focused perspective is not merely a moral imperative but a strategic one, essential for the nation to achieve a more equitable and sustainable future (UNICEF, 2023a; UNDP's Lesotho Country Office, 2023; iQvia, 2023; Paramaiah *et al.*, 2020).

3. Methods

This qualitative meta-analysis integrates findings from two distinct yet complementary studies to explore the dynamics of gender rights advocacy within Lesotho's public health context. The first study, an Evaluation of a three-year integrated Nutrition-HIV Program, involved an exhaustive review of program documentation, stakeholder interviews, and participant observations. Thematic analysis was employed to extract recurrent patterns and themes, focusing on understanding the role of cultural norms in shaping gender rights advocacy within family structures in Lesotho. By synthesizing this data, the analysis provides a longitudinal perspective on the program's efficacy and its impact on women's and girls' health and empowerment. Participant narratives were particularly instrumental in revealing how program interventions intersect with and influence the lived experiences of the target demographic. In parallel, the Breastfeeding Study adopted a descriptive approach of the socio-cultural factors influencing breastfeeding practices. Coding of transcripts was performed iteratively, allowing emerging themes to inform subsequent data collection. This method ensured that the findings were grounded in the rich, contextual realities of the participants' experiences. The meta-synthesis of this data illuminated the barriers and facilitators of breastfeeding within family units, highlighting the delicate interplay between traditional practices and the agency of women in the sphere of maternal and child health.

In this qualitative meta-analysis, triangulation was thoroughly carried out to ensure the credibility and trustworthiness of the findings. Data triangulation was achieved by comparing the results from the two studies—despite their different foci, one on the overall health impacts

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of a Nutrition-HIV Program and the other on the specific practices of breastfeeding. This process involved analysing data points where the studies intersected, particularly regarding the empowerment of women and girls in health-related decisions. By examining these intersections, we were able to corroborate the individual study findings, thus validating the emerging themes regarding the influence of familial dynamics on the advocacy and exercise of women's and girls' rights. This cross-study analysis provided a multi-faceted view of the issues, enhancing the depth and breadth of the synthesized conclusions. Furthermore, methodological triangulation was incorporated by considering the common, as well as the singular contributions of each of the various methods within each study. These diverse methods allowed us to explore different dimensions of the same phenomenon, offering a richer, more complex understanding. By employing different angles of inquiry, the analysis accounted for potential biases and facilitated a more nuanced comprehension of the cultural and social contexts that shape breastfeeding practices and the broader health initiatives. The triangulation process also included multiple rounds of coding and analysis, ensuring that the themes developed were not only consistent across different data sets but also reflective of the reality of the participants' experiences, thus contributing to a more grounded and authentic meta-analytic synthesis. In sum, the insights gained from these studies are vital in mapping out the complex terrain of gender rights advocacy in the context of Lesotho's public health challenges.

3.1 Brief synthesis of the Final Evaluation

The Final Evaluation was conducted in three key distinct phases, each contributing significantly to the comprehensive assessment of the program's performance, as per Terms of Reference requirements (UNICEF, 2022). These phases were thoughtfully designed to gather data, analyse it rigorously, and draw meaningful conclusions that would inform the effectiveness of the program. Moreover, the evaluation has generated a collection of crucial recommendations with the potential to instigate positive transformations and improve the effectiveness of not only the program under assessment but also other similar initiatives within the country or similar contexts. In the Inception Phase, the groundwork for the entire evaluation process was laid. It involved defining the scope and objectives of the evaluation. Critical activities during this phase included specifying key objectives, identifying relevant data sources, and constructing a robust evaluation framework. This framework was carefully aligned with the program's Theory of Change (ToC), providing a solid foundation for the evaluation. Following the Inception Phase, the Primary Research Phase involved extensive data collection efforts. This phase incorporated a combination of both primary and secondary data sources. Secondary data were scrutinized rigorously, and extensive fieldwork was conducted. This included surveys, interviews, and focus group discussions (FGDs) conducted at both the national and community levels. The primary data collection process aimed to provide a holistic assessment of the program's reach and impact by integrating qualitative and quantitative insights. The Analysis and Reporting Phase were crucial in evaluating the program's effectiveness. During this phase, the amassed data underwent thorough analysis. Both

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quantitative descriptive analysis and qualitative thematic analysis were employed. These analyses aimed to identify the program's strengths and weaknesses and provide practical recommendations for improvement. The findings were synthesized into coherent and actionable insights that informed the overall effectiveness of the program (iQvia, 2023).

Throughout the evaluation process, a mixed-method and participatory approach was adopted, emphasizing gender sensitivity and social inclusiveness. This approach ensured that a diverse range of perspectives and experiences were considered, despite methodological constraints. The evaluation design was theory-based, meaning it referenced the program's Theory of Change and objectives to assess progress towards anticipated outcomes. The OECD/DAC framework was leveraged, utilizing criteria such as relevance, effectiveness, efficiency, coherence, and partnership to comprehensively appraise the program's performance. The geographical scope of the evaluation covered three districts within Lesotho, namely Maseru, Mokhotlong, and Butha-Buthe. These districts were selected randomly and represented varying levels of HIV/AIDS nutrition impact, providing a well-rounded assessment of the program's reach and impact. The temporal scope of the evaluation spanned from September 2019 to December 2022. This specific timeframe allowed for a comprehensive assessment of the program's performance within a bounded period, providing valuable insights into its operations and outcomes.

3.1.1 Methods

The evaluation methodology was meticulously structured and executed in several phases to ensure a comprehensive and insightful assessment of the program, according to the ToR requisites (iQvia, 2023). It commenced with an extensive desk review, where a total of 20 documents were thoroughly analysed. These documents ranged from literature reviews to program reports from UNICEF Lesotho and inputs from key implementing partners such as Caritas, and Mantsopa. This initial phase laid the foundation for the evaluation by providing a deep understanding of the program's context and objectives. Subsequently, from June to August 2023, the primary data collection phase was carried out. This phase employed a combination of qualitative and quantitative research methodologies at both the national and local levels. Structured qualitative engagements were conducted with a diverse group of stakeholders, including ministry officials, partners, and program beneficiaries.

The selection of participants for these engagements was carefully guided by purposive sampling to ensure targeted insights. While the original plan included 20 Key Informant Interviews (KIIs), logistical constraints led to a reduction to 9 KIIs. Nevertheless, these interviews yielded valuable insights into various aspects of governance, planning, and program execution across different administrative levels. In parallel, 16 Focus Group Discussions (FGDs) were organized, specifically involving female program participants at the grassroots level. These FGDs were facilitated by field enumerators and were complemented by meticulous notetaking, enhancing the precision and reliability of the qualitative data collected.

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Complementing the qualitative component, quantitative data was gathered through 48 household surveys and 21 supervisor surveys. These surveys played a critical role in quantifying the program's reach and assessing its efficacy in achieving its intended outcomes.

3.1.2 Sampling

The evaluation employed a thoughtfully designed sampling strategy that encompassed both purposive and convenience sampling techniques. Its primary aim was to create a cohort of stakeholders that accurately represented the demographics, all while remaining vigilant about potential biases that might arise from convenience sampling. In total, the evaluation conducted interviews with 10 individuals, comprising 8 individual Key Informant Interviews (KIIs) and 1 collective KII. Additionally, 125 participants actively engaged in Focus Group Discussions (FGDs), providing qualitative insights into program implementation that were inclusive of gender perspectives. On the quantitative side, 48 households were surveyed to assess the program's domestic impact and perceived value, complemented by 21 supervisor surveys that contributed to a comprehensive understanding of program oversight and management. The sampling approach intentionally ensured broad gender representation among participants to foster inclusivity, with a specific focus on women within the beneficiary groups (iQvia, 2023).

3.1.3 Data quality assurance and data management

Throughout the evaluation process, maintaining the quality of the data was of vital importance. The journey towards robust data collection began with a rigorous training and pre-testing phase for data collection tools. Led by the project advisor and evaluation lead from iQvia, in collaboration with a team consisting of both local and international members, including a UNICEF evaluation lead, this comprehensive one-day training session encompassed a blend of in-person and virtual modules. It culminated in meticulous pre-testing activities conducted in Maseru, where simulated key informant interviews, focus group discussions, and a pilot survey were executed. Data analysis and management were conducted with precision and thoroughness. Verbatim transcriptions of audio recordings from interviews and discussions underwent rigorous thematic analysis. Additionally, quantitative data were analysed using Excel. The strength of the evaluation lay in its triangulation of data from diverse sources, including interviews, discussions, surveys, and extensive desk reviews. This multi-dimensional approach ensured the integrity of the conclusions, firmly grounding them in well-cross-referenced evidence. Furthermore, to uphold stringent data quality and confidentiality standards throughout the evaluation process, the evaluation team established a secure online database with discrete categorizations for each data type. This structured digital repository facilitated streamlined access and reinforced the team's unwavering commitment to data stewardship and maintaining the highest standards of data quality (iQvia, 2023).

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3.1.4 Ethics

The ethical framework underpinning this evaluation adhered rigorously to the United Nations Evaluation Group (UNEG) Norms and Standards, emphasizing key ethical principles throughout the process. These principles included beneficence, non-maleficence, autonomy, justice, professionalism, and impartiality, collectively ensuring the highest ethical standards were upheld. Integrity and independence were central to the ethical considerations. The evaluation was conducted with unwavering independence to prevent conflicts of interest and biases, guaranteeing that it remained free from undue influence. Accountability was paramount, with transparency maintained at every stage. Stakeholders were engaged in ongoing dialogues to clarify objectives and methodologies, fostering a culture of accountability and ensuring that the evaluation's intentions were clearly communicated to all beneficiaries. Respect and inclusivity were core principles, with active participation of stakeholders from the evaluation's inception to the dissemination of findings. Regular solicitation and integration of stakeholder feedback ensured diverse viewpoints were reflected. Beneficence was upheld through meticulous procedures for obtaining oral informed consent, emphasizing voluntariness and ensuring participants understood potential risks and benefits, protecting them from harm and coercion. Confidentiality was rigorously maintained, with individual-level information safeguarded and only synthesized data shared with stakeholders. Data protection protocols were strictly followed, with personal details securely compartmentalized and access controlled by coded identifiers. Ethical approval and research permits were obtained from relevant authorities, including UNICEF and Lesotho Government as well as local authorities, underscoring the commitment to responsible and ethical evaluation conduct. In summary, this evaluation adhered to a robust ethical framework, ensuring integrity, accountability, respect, beneficence, confidentiality, and data protection throughout the process. Ethical approval and permits were obtained, and the principles of the UNEG Norms and Standards were diligently applied, emphasizing the commitment to conducting the evaluation responsibly and ethically (iQivia, 2023).

3.1.5 Limitations and mitigation measures

The endline evaluation encountered several challenges, each accompanied by strategic mitigation measures that upheld the integrity and reliability of the evaluation process. One significant challenge revolved around access to key stakeholders, particularly program staff, which was complicated by the timing of the evaluation conducted post-programme closure. The solution to this challenge came through the indispensable support of the UNICEF evaluation team, who played a pivotal role in facilitating key informant interviews and focus group discussions. Although only 45% of planned interviews were completed due to limited informant availability resulting from stakeholders' lack of program awareness and role turnover, the evaluation team responded by refining communication strategies to increase participation among essential contributors. Another challenge that arose during the evaluation

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process pertained to the composition of focus group discussions, which consisted exclusively of women aged 18 and older. This configuration had the potential to introduce gender bias into the discussions and impact the dynamics of power within the groups. To mitigate this challenge, individual discussions were initiated with male partners, thereby ensuring a more comprehensive range of insights. Additionally, the process of triangulation with other qualitative and quantitative data allowed for a more robust and balanced assessment of the evaluation findings. Delays in conducting focus group discussions due to local community events and political engagements were mitigated through collaboration with community authorities, ultimately enabling the completion of most FGDs. Despite these methodological challenges, the evaluation's adaptability and strategic planning ensured the identification of core trends and the acquisition of relevant results. The data collected remained both reliable and valid, providing actionable insights for future programmatic considerations (iQvia, 2023).

3.2 Brief synthesis of the Breastfeeding Study

This study delved into maternal and infant care practices in Lesotho, focusing on exclusive breastfeeding during the first year of life. It offers valuable insights into familial dynamics, maternal autonomy, and the complex challenges encountered in the infant feeding journey.

3.2.1 Methods

This research was developed during the final phase of a Nutrition-HIV integrated program and the results have undergone comprehensive analysis in the last quarter of 2023 (Mairos Ferreira, 2023). It adopted a cross-sectional, non-probabilistic, descriptive research design, casting a wide net across the diverse ecological zones of Lesotho. It placed a particular focus on capturing the nuanced perceptions, experiences, and opinions of breastfeeding mothers actively engaged in postnatal care at Mother and Child Health (MCH) Clinics. It's important to note that the non-random sampling method used in this study means that the findings cannot be generalized to the entire population of Lesotho. However, these findings offer crucial insights into the specific context and conditions under which the data was collected. This information holds immense value for identifying trends, patterns, and unique characteristics within the sample. While these findings may not be universally applicable, they have the potential to inform future research endeavours and interventions, contributing to the broader understanding of maternal and child health in Lesotho.

3.2.2 Sampling

A convenience sample of 97 mother-infant pairs was utilized to examine breastfeeding practices among mothers accessing postnatal healthcare services. The sample was drawn from mothers present at clinical appointments, selected based on ease of accessibility for data

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collection. These participants are central to the study's focus on maternal health services. Convenience sampling offers a cost-effective and time-efficient method for data gathering, enhancing the probability of obtaining high response rates, as mothers visiting clinics may be more disposed to partake in health-related research. Eligibility criteria for participants were stringently defined to focus on the study's specific demographic. Women were required to be over the age of 16 and live within a 20-kilometer radius of designated clinics. These clinics, located across various ecological zones of Lesotho, provide a comprehensive view of maternal and child health services across diverse topographies and socioeconomic contexts. The inclusion of sites like Quthing Hospital and Ntšekhe Hospital allows for an extensive analysis of healthcare services distribution and accessibility in different ecological settings.

The survey investigated the structure of family units, a critical factor in maternal and child health, as it influences caregiving dynamics and resource distribution, subsequently affecting infant feeding practices. Data indicated that 51.50% of respondents had one or more additional biological children, suggesting that sibling interactions are a common aspect of the family environments surveyed. Further scrutiny of family configurations revealed varied household sizes. About 51.10% of participants with more than one child had two biological children. There were also families with three biological children (27.7%) and those with four (17.0%). A smaller demographic, comprising 2.1% of the sample, indicated they were managing five or six biological children. These statistics reflect the intricate realities of familial life, where the addition of children can alter feeding practices and the nutritional status of siblings. It highlights the necessity for intervention strategies that cater to the distinct challenges faced by families of various sizes, ensuring that each child has access to appropriate nutrition and healthcare irrespective of family size or sibling birth order (Mairós Ferreira, 2023).

3.2.3 Instruments and procedures

The analysis of breastfeeding patterns among postnatal clinic attendees in Lesotho was approached through a detailed methodological design. A dual-faceted questionnaire comprising 39 items on a 5-point Likert scale, along with open-ended queries, was deployed to elicit in-depth information on mothers' perceptions, practices, and the challenges they face regarding breastfeeding. A meticulous multi-stage validation procedure was applied to the study's instrument to confirm its reliability and cultural aptness. Initially, subject matter experts reviewed the content for relevance and precision. This was followed by a pilot test with a selected portion of the intended demographic to evaluate the clarity and understandability of the instrument. Participant feedback led to the fine-tuning of the survey items, ensuring they resonated with the cultural context and language nuances of the respondents. This thorough process was instrumental in affirming the instrument's consistency and validity within the study's framework. The employment of a structured questionnaire with targeted queries was critical in obtaining detailed data points, enriching the comprehension of breastfeeding practices within the group under study. The additional qualitative insights from open responses

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provided a holistic view, enabling an analysis that quantified patterns and situated them within the participants' real-life contexts. The data amalgamated presents an intricate portrait of breastfeeding in Lesotho, offering nuanced insights that could shape specific health initiatives and guide policymaking with empirical accuracy. Following data collection, an organized procedure for data entry and preliminary scrutiny was conducted using Microsoft Excel, which was essential for producing a refined data repository. At this stage, anomalies such as inconsistencies, outliers, or incomplete responses were detected and corrected to maintain the dataset's integrity. The polished data was then transferred to SPSS for further descriptive analysis, paving the way for insightful conclusions and recommendations.

3.2.5 Data quality assurance and data management

The study prioritized data quality, beginning with detailed training and pre-testing of data collection instruments. Data analysis involved quantitative examination using SPSS. A secure online database was created for data management, with separate categories for each data type, reinforcing a commitment to data quality and confidentiality.

3.2.6 Ethics

The study was meticulously aligned with the United Nations Evaluation Group (UNEG) Norms and Standards, integrating ethical principles into the research framework. Core values such as integrity, accountability, respect, beneficence, voluntary participation, confidentiality, data protection, and adherence to legal requirements were systematically embedded in the study's process. To ensure integrity, the research team operated independently and took deliberate steps to prevent and address potential biases. Accountability was enhanced by continuous engagement with stakeholders, which helped to maintain transparency regarding the study's objectives and procedures. The principle of respect was embodied in the study's commitment to inclusivity and the fostering of active dialogue with participants at every stage of the evaluation. Beneficence was secured through the process of informed consent, which was administered orally. This process not only informed participants of their rights and the study's scope but also reinforced the voluntary nature of their participation, while clearly communicating the possible risks and benefits. Confidentiality was strictly observed by anonymizing personal data and limiting the sharing of sensitive information to authorized personnel only. This was in line with rigorous protocols to ensure that individual privacy was respected and safeguarded. Data protection protocols conformed to UNICEF's stringent policies, with a focus on secure data storage and the establishment of controlled access to personal information. This safeguarded the information against unauthorized use or exposure. Legal compliance was meticulously ensured by obtaining necessary approvals from the Ministry of Health's Ethical Review Committee and the UNICEF's Ethical Review Board, guaranteeing that the study upheld all pertinent ethical regulations and standards. This

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comprehensive approach underscored the study's dedication to conducting ethically responsible research (Mairos Ferreira, 2023).

3.2.7 Limitations and mitigation measures

The assessment of infant feeding practices within the study presented certain limitations, which have been acknowledged to ensure transparency and guide future research improvements. A primary concern was the narrow exploration of contextual factors impacting infant feeding practices. The study provided only a limited perspective, missing the depth needed to understand disparities between reported feeding practices and laboratory test results. To enrich the understanding, a proposed qualitative sub-study is suggested, which would employ in-depth interviews and ethnographic observations to capture the socio-economic, cultural, and healthcare influences on feeding choices. Another limitation was the basic understanding of child feeding practices, specifically the lack of analysis on the types and nutritional content of supplementary foods. The extensive length of the assessment protocol constrained the depth of information that could be gathered. To expand upon this knowledge, future studies are encouraged to collect preliminary data on supplementary foods and offer comprehensive nutritional assessments, which can serve as a foundation for more detailed research. The study also did not sufficiently explore the perceived value of exclusive breastfeeding. Understanding the motivations behind exclusive breastfeeding is crucial, as it informs the decisions made by mothers and caregivers. Although this aspect was not adequately addressed, highlighting this oversight sets the stage for subsequent studies to delve into this vital determinant. Future assessments should include qualitative methods to capture the diverse perspectives and perceived advantages of exclusive breastfeeding. Methodologically, the study faced constraints that affected its generalizability. The lack of randomization introduced selection bias, while the limited sample characterization missed critical demographic factors. The predominance of quantitative methods also limited the ability to capture the rich, qualitative human experiences. To counteract these issues, a diverse sample was constructed, and a qualitative component was added through open-ended questions (Mairos Ferreira, 2023).

4. Findings and discussion

The meta-analysis conducted within Lesotho's socio-cultural environment illuminates the pervasive role of cultural norms in shaping the lived experiences and potential futures of women and girls. Through the lens of key research outputs, such as the comprehensive final evaluation of the Nutrition-HIV Program (iQvia, 2023) and a targeted breastfeeding study (Mairos Ferreira, 2023), the analysis dissects the intricate ways societal traditions intersect with gender rights advocacy and public health. These pivotal studies, alongside corroborative documents like the Baseline Assessment (Maveneka, 2021, Program documents (*e.g.*, Mantsopa Institute & UNICEF, 2022) and complementary research papers (Mairos Ferreira *et*

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al., 2023), provide a continuum of evidence. This body of work, extending from an initial cultural overview to the nuanced findings of subsequent inquiries, delineates the deep-seated societal constructs that inform the status and evolution of women's empowerment. The synthesis of this collective body of research offers a comprehensive examination of the challenges and prospects for women's and girls' empowerment in Lesotho. The findings articulate the necessity for culturally nuanced policies and proactive measures that support gender empowerment within the nation's unique context. This approach is critical to designing interventions that not only address immediate health needs but also champion the rights of women and girls, fostering meaningful societal change. The meta-analysis echoes this sentiment, drawing on an extensive array of scientific and technical literature that emphasizes the historical and cultural determinants of gender roles in Lesotho (The World Bank, 2023; UNICEF & Lesotho Red Cross Society, 2023; Mairos Ferreira et al., 20023b; UNAIDS, 2023, 2022; Chingono, 2016). This rich tapestry of data underscores the tenacity of heritage and societal structures in influencing gender dynamics and family roles, pointing towards the need for targeted strategies that align with Lesotho's socio-political fabric.

Despite formal recognition and ratification of international treaties aimed at promoting gender equality, the lived realities of women and girls in Lesotho reflect ongoing disparities (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). The nation's commitment is evident in its legal framework and adherence to global conventions, yet the translation of these commitments into tangible changes remains an ongoing challenge. Lesotho has positioned itself as a supporter of women's rights and gender equality through the adoption of various international and regional agreements. The nation's legal and policy frameworks, reinforced by the Constitution of 1993, demonstrate a formal pledge to uphold gender equality. Lesotho's signature on the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), its Optional Protocol, and the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa (the Maputo Protocol), among others, illustrates its alignment with global standards for women's rights. The commitment to gender parity is further reflected in the domestic efforts to integrate these international principles into national policy. The Government of Lesotho (GoL) took a proactive step in 2003 with the adoption of the original Gender and Development (GAD) Policy, which aimed to operationalize the principles of gender equality within the country. This policy, recognizing the gaps between commitment and practice, underwent a revision process, resulting in the updated GAD Policy 2018-2030, which outlines strategic directions and actions for the next decade.

However, the persistence of gender inequalities and discrimination signals a gap between policy and practice. Women and girls in Lesotho continue to face challenges that affect their daily lives, opportunities, and overall well-being (The World Bank, 2023; UNICEF & Lesotho Red Cross Society, 2023; Mairos Ferreira *et al.*, 20023, b; UNAIDS, 2023, 2022). Findings from the meta-analysis reinforce these observations by highlighting that Lesotho's enduring patriarchal system, characterized by lineage-based inheritance and male-dominated

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governance, has traditionally positioned men at the forefront of financial control and decision-making (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023).

“A relevant portion of the participants, precisely 66.0%, confirmed that they do receive maintenance money from their partner, husband, or the child's father. This finding underscores that a majority within the surveyed group rely on some form of financial support from these sources, which likely plays an essential role in ensuring the household economic stability and ability to meet childcare-related expenses” (Mairos Ferreira, 2023, *Breastfeeding study*, p. 26).

“Maternal employment data indicates that a substantial percentage of participants have not engaged in paid work in the last year, relying on partners for financial support” (Mairos Ferreira, 2023, *Breastfeeding study*, p. 58).

Additionally, evidence suggests that a substantial number of young women enter marriage or unions before the age of 18, which can have long-lasting impacts on their education, economic opportunities, and empowerment (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). Furthermore, the prevalence of gender-based violence (GBV) is a stark reality, with a high number of sexual offences and assault cases reported, and a significant proportion of women murdered by intimate partners, indicating systemic issues of inequality within intimate and familial relationships.

“In Lesotho, 16.4% of women aged 20–24 years old who were married or in a union before age 18. In 2018, 82.8% of women of reproductive age (15-49 years) had their need for family planning satisfied with modern methods.

However, work still needs to be done in Lesotho to achieve gender equality. The adolescent birth rate is 90.8 per 1,000 women aged 15-19 as of 2017, down from 91 per 1,000 in 2016. As of February 2021, only 23.3% of seats in parliament were held by women. In 2018, 16.5% of women aged 15-49 years reported that they had been subject to physical and/or sexual violence by a current or former intimate partner in the previous 12 months. Also, women and girls aged 15+ spend 15.6% of their time on unpaid care and domestic work, compared to 6.2% spent by men.

As of December 2020, only 33.6% of indicators needed to monitor the SDGs from a gender perspective were available, with gaps in key areas, in particular: key labour market indicators, such as the unemployment rate and gender pay gaps. In addition, many areas – such as gender and poverty, physical and sexual harassment, women's access to assets (including land), and gender and the environment – lack comparable methodologies for regular monitoring. Closing these gender data gaps is essential for achieving gender-related SDG commitments in Lesotho” (UN Women, 2023, p. 1).

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The meta-analysis delineates a pattern of gender inequalities deeply rooted in Lesotho's familial and societal structures, as evidenced by the dominant and often authoritative decision-making roles of men in matters affecting women, children, and broader family affairs (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). These patriarchal norms, which position women in subordinate roles, have been highlighted both in the program's Final Evaluation (iQvia, 2023) and the focused Breastfeeding Study (Mairos Ferreira, 2023). The data from these sources collectively suggest that such entrenched norms are not merely passive cultural backdrops but active forces that significantly contour women's aspirations, access to opportunities, and self-conceptualization. This influence pervades all societal facets—educational trajectories, professional avenues, marital choices, and reproductive autonomy—tightening the boundaries within which women navigate their freedom, authority, and societal participation (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). The synthesis of these findings not only highlights the pervasive impact of gender-based disparities but also underscores the need for targeted interventions to dismantle these systemic barriers and promote gender equity.

While the overarching patriarchal structure presents systemic challenges, there are emerging signs of progress toward increased autonomy for women and collaborative dynamics within familial settings in Lesotho. Instances of shared decision-making in child-feeding practices have been observed, with a certain proportion of mothers reporting joint discussions with their child's father or extended family members (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). This trend suggests a gradual movement toward shared parental responsibilities. Yet, it's also noted that in many families, traditional figures such as grandmothers continue to hold significant sway over such decisions. Additionally, there remains a subset of families where fathers or partners unilaterally determine child-feeding practices, indicating that while strides are being made, the transition towards equitable decision-making within the family structure is still evolving.

“A considerable proportion of participants, specifically 48.4%, indicated that they make feeding related decisions independently, without involving the father of the child or their partner. This reflects a strong sense of autonomy in determining the feeding practices for their child. Approximately 27.9% of participants reported that they jointly make decisions about how to feed their child with the father of the child or their partner. This collaborative approach indicates shared responsibility for infant feeding practices within the family unit, with both parents actively involved in decision-making. Around 11.3% of respondents reported that they jointly make these decisions with other family members. This suggests a collaborative approach that extends beyond the nuclear family, with multiple family members contributing to the decision-making process. Lastly, a noteworthy percentage, comprising 6.2% of participants, mentioned that other family members or grandmothers solely make decisions about how to feed the child. Only 3.1% of participants

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mentioned that the father of the child or their partner exclusively makes these decisions (Mairos Ferreira, 2023, *Breastfeeding Study*, p. 28).

In the socio-cultural context of Lesotho, a burgeoning resilience among women and a potential for progressive change in societal structures (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). Despite the robustness of traditional norms, there is an observable shift towards more adaptive social practices, spurred by the increasing global focus on gender equity and women's rights. Specifically, the Integrated HIV-Nutrition program has demonstrated significant progress in altering deep-seated gender norms (iQvia, 2023). The program's success lies in its comprehensive approach, which promotes an ethos of mutual respect and equal opportunity, contributing to the normalization of equitable gender roles within the community (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). These initiatives serve not only as interventions but also as catalysts for long-term societal transformation, aligning Lesotho's cultural practices with international human rights standards.

“Through the implementation of the Community-led Complementary Feeding and Learning Sessions (CCFLS), women also initiated the savings and lending scheme initiatives. (...) It not only laid a foundation for sustainability in food production and self-sufficiency but also contributed to actively promoting women's autonomy and independence. By promoting household income, women are taking a more active role in financial decisions, which is a positive step towards gender equality. (...) Moreover, this Behaviour Change approach did not only encourage immediate change but also promoted a potential sustainable impact by fostering intergenerational learning. The insights and new behaviours acquired through the program are accessible (and therefore potentially transferable) to other household members, specifically children. This creates a ripple effect of positive behavioural change that can influence future generations” (iQvia, 2023, *Final Evaluation Report*, p. 14).

The meta-analysis examination of the HIV-Nutrition Program discerned a significant shift in gender roles within the realm of family health, particularly highlighting the increased participation of men in antenatal care, as well as in nutrition and sustainable food production practices (iQvia, 2023, *Final Evaluation Report*). This shift reflects the program's success in its inclusive strategy, aimed at addressing HIV & AIDS and malnutrition by promoting community-wide engagement and support. The analysis reveals that prior to the implementation of this program, male involvement in HIV awareness and nutritional practices was markedly low, pointing to a notable gender divide in health engagement within the country (Maveneka, *Baseline Assessment*, 2021). By drawing on comprehensive evaluations and longitudinal data, the meta-analysis underscores the evolution from a previously identified

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male engagement gap to a more gender-balanced participation in health-related activities. The implications of these findings are twofold: they not only highlight the efficacy of the program in fostering male involvement in areas where they were traditionally less active but also underline the potential for such health initiatives to transform societal norms and contribute to a more equitable distribution of family health responsibilities.

The meta-analysis interrogated the program's data and underscored an emergent necessity for targeted educational strategies to bolster male participation in crucial health dialogues. This necessity was particularly pronounced in the context of male involvement in antenatal care and nutrition. The data synthesized in the Final Evaluation Report (iQvia, 2023) pointed to a transformative shift in male behaviour and engagement by the program's conclusion, illustrating the success of tailored interventions aimed at education and behavioural change. The establishment of dedicated health forums was pivotal, serving as a catalyst for this shift. These forums provided a conducive environment that empowered men with knowledge and a platform for active engagement, leading to demonstrable improvements in their approach to health and nutrition. As evidenced in the Final Evaluation Report, the strategic implementation of these forums was instrumental in advancing male understanding and practices related to HIV prevention and nutritional health. The marked increase in male engagement by the end of the project signifies a significant step forward in altering health narratives and promoting inclusive health behaviours among men in Lesotho (iQvia, 2023, *Final Evaluation Report*).

“The program’s findings confirmed that male support is a key factor in facilitating women's and children's access to health services. Additionally, men could progressively assume a more active role in household nutrition through farming. This dual focus on health and nutrition cultivates an inclusive, sustainable strategy that not only achieves immediate health outcomes but also paves the way for long-term family and community ownership of health and well-being, enhancing its potential for intergenerational impact” (iQvia, 2023, *Final Evaluation Report*, p. 70).

By promoting male engagement, these initiatives have not only improved health outcomes for families but have also been pivotal in shifting traditional gender roles. The increased role of men in healthcare, propelled by community engagement, has been a driving force in broadening access to health services for women and children. This collaborative model has laid a foundation for more equitable and informed health and nutrition decisions within families, marking a significant step toward redefining familial roles and responsibilities.

4.1 Women of Lesotho: Navigating Tradition and Pioneering Change in the Heart of the Family

Within the intricate social fabric of Lesotho, the meta-analysis illuminates women's emerging prominence as resilient and influential figures in family life. The findings, documented in iQvia's Final Evaluation Report (2023) and Mairos Ferreira's Breastfeeding

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Study (2023), highlight women's expanding roles beyond traditional confines, showcasing their adaptability and fortitude amidst societal and cultural adversities. The analysis accentuates that women in Lesotho are increasingly recognized not merely as participants in familial structures but as vital agents of influence and decision-making. They play a critical role in underpinning the welfare and progression of their households and communities, effectively reshaping the familial landscape. This shift in familial dynamics represents a significant departure from the conventional patriarchal paradigm. Historically, men have occupied a more dominant position within Lesotho's family units, often characterized by unilateral decision-making. However, as the meta-analysis indicates, there is a transition towards a more equitable engagement where women's input is not only solicited but also valued, fostering a more collaborative environment. This transformation underscores a broader cultural shift, signalling progressive changes in gender dynamics and suggesting a path toward greater balance and shared responsibility in Lesotho's societal structures.

“The involvement of males in child nutrition and HIV is low compared to women's contribution to child-health and nutrition interventions. This is due to men perception of nutrition as female issues; they do not see their role in food security and gender roles play an important role. Child-headed households are more at risk and positive nutrition practices need to be promoted so that re-socialization for boy-child begins with positive practices. According to Lesotho Food and Nutrition Strategy and Costed Action Plan 2019 - 2023, Women are the primary caregivers for their children, but they have few financial means outside of their husbands and male family members. Nutritionists are predominantly women, which reinforces the conventional stereotype that food and nutrition are primarily female concerns. (...) due to the normal practices, social and cultural beliefs of general Basotho people, women receive minimal support from their spouses as there is a general belief that women should be responsible for taking care of child health and children's needs while men only financially contribute to the wellness and upkeep of children and as a result some male persons may hesitate to take part in child nutrition” (Mantsopa Institute & UNICEF, *Program Document*, 2022, p. 2).

The meta-analysis conducted on Lesotho's family dynamics robustly delineates women's substantive roles within familial structures. It is evident from the results that women in Lesotho play multifaceted roles that extend significantly beyond traditional expectations. Their contributions, as identified in the research, span from nurturing family members to adeptly managing household resources and preserving cultural mores. The data from iQvia (2023) and the collaborative work of Mairos Ferreira & Muthengi (2023b) illustrate women's profound agency and their established position as custodians of tradition and catalysts for social transformation. These findings are indicative of a profound societal acknowledgment of women as central to the maintenance of familial well-being and as influential change-makers.

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The meta-analysis highlights the dual aspect of their role: women are portrayed as the linchpins in the transmission of cultural values and as dynamic actors who facilitate familial and community development. This dual role is crucial in understanding the potential pathways for policy interventions and societal support structures aimed at enhancing the status of women in Lesotho.

“It was more about empowering women because women are the key role players within any household. And we know girl children are helpers to their mothers. So, for them to be able to be in a position to produce food for their households and for their kids, it means that's a great contribution that then they can be able to say, okay, I can now be able to feed my family” – Implementing partner (iQvia, 2023, *Final Evaluation Report*, p. 51).

Despite existing within a framework of traditional norms that delineate their roles, women have shown remarkable resilience and agility in navigating these family and societal expectations (iQvia, 2023, *Final Evaluation Report*; Mairos Ferreira, *Breastfeeding Study*, 2023). They are progressively redefining themselves as more autonomous actors in their families' progress and well-being. For example, a relevant proportion of women, as documented by this meta-analysis, assert their independence by making key family decisions on their own, particularly regarding child nutrition, without seeking input from their partners or the child's father or in an equitable collaboration (Mairos Ferreira, *Breastfeeding study*, 2023). Additionally, the adaptability of women in Lesotho is particularly evident as they negotiate traditional roles in the face of modern challenges, contributing to intergenerational learning and change, which was documented as a key achievement of the program (iQvia, 2023, *Final Evaluation Report*). This adaptability is crucial for the family's ability to respond to external pressures, whether economic, social, or health related. Women's evolving roles within the family unit are reflective of a broader societal shift towards gender equity.

4.2 Family-Supported Female Empowerment: A Catalyst for Societal Advancement in Lesotho

The meta-analysis charts a significant shift in the gender landscape of Lesotho, signalling a societal transformation towards recognizing women as active agents of change. This evolution from historical stereotypes of passivity to influential roles in decision-making reflects a substantial reconfiguration of gender roles within both the family and society (Mairos Ferreira, *Breastfeeding Study*, 2023; iQvia, 2023, *Final Evaluation Report*). Central to this shift is the fortification of familial support mechanisms, identified as a critical enabler of women's empowerment across both private and public domains (iQvia, 2023, *Final Evaluation Report*). The surge in female-driven initiatives marks a pivotal change, positioning women at the heart of community and economic development. The meta-analysis draws a direct correlation

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between resource accessibility for women and the resultant societal impact, highlighting the importance of familial encouragement as a cornerstone for their enhanced participation in social and economic reform (iQvia, 2023, *Final Evaluation Report*). It is this solid foundation of family endorsement that is instrumental in actualizing the potential of women in community settings, fostering their transition to leadership roles and civic involvement. Further, the findings accentuate that women with substantial familial support are better equipped to ascend to influential positions within their communities, reinforcing the significance of family as the bedrock in the empowerment narrative (iQvia, 2023, *Final Evaluation Report*). The research substantiates the notion that affirming women's rights and capabilities within the family unit amplifies their confidence and leadership abilities, establishing strong family networks as critical to promoting women's prominence in Lesotho's societal structure. This paradigm shift is succinctly captured by iQvia (2023, *Final Evaluation Report*, p. 14), which states that "this approach translated into an inclusive, sustainable strategy that not only achieved immediate health outcomes but also paves the way for long-term family and community ownership of health and well-being, enhancing its potential for intergenerational impact".

Furthermore, collective empowerment, as documented in this study, emerges as women and girls leverage familial support to address and advocate for issues previously marginalized. This groundswell of collective action is now being recognized as a driving force behind policy reform and community development in Lesotho. The family unit, therefore, is seen as the initial locus of empowerment, with its support being a significant predictor of women's involvement in advocacy and reform movements (iQvia, 2023, *Final Evaluation Report*). The interplay between individual agency and family support has been identified as a significant factor in the advancement of women's roles within the Lesotho community. Empowerment efforts that are anchored in the support of the family have a greater likelihood of long-term success and acceptance within the community. These initiatives, which integrate the promotion of gender equality, foster a holistic approach to the development of society. The established correlation between family support and women's empowerment forms the basis for a replicable model in similar socio-cultural environments. By prioritizing family-centric strategies, there is potential for broadening women's participation in societal roles and elevating their presence in leadership positions. This approach not only reinforces the role of women but also strengthens the family unit as a fundamental entity in societal progress and governance (iQvia, 2023, *Final Evaluation Report*).

Conclusion and Recommendations

The meta-analysis on Lesotho's societal structure, focusing on the roles and realities of women and girls, reveals a complex interplay of entrenched cultural norms, economic dependency, and emerging patterns of empowerment. This comprehensive study highlights the enduring challenges and identifies potential strategies for societal evolution in Lesotho, with a special emphasis on the empowerment of women and girls. It underscores the importance of

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family as the cornerstone for this transformative process, suggesting that the roots of empowerment are often found in the support and dynamics of the family unit. The analysis suggests that when familial structures encourage and participate in the empowerment process, the potential for lasting societal change is significantly enhanced.

At the core of these findings is the persistent influence of cultural norms and a deeply rooted patriarchal system. Despite Lesotho's legal commitments to gender equality, as evidenced by its adherence to international treaties like CEDAW and the Maputo Protocol, there is a significant gap between these formal policies and the lived realities. Traditional norms continue to govern family dynamics and societal structures, often relegating women to subordinate positions. This dichotomy between policy and practice highlights the complex challenge of transcending historical and cultural precedents to achieve genuine gender parity. Economic dependency further complicates this landscape. A substantial portion of Lesotho's female population relies on male family members for financial support, limiting their access to independent economic opportunities. This situation is exacerbated by practices such as early marriages and unions, which impede women's education and economic empowerment. Such socio-economic constraints underline the necessity for multifaceted strategies that advocate for gender equality while simultaneously addressing these underlying issues.

However, amidst these challenges, there are promising signs of progress. The analysis notes a gradual shift toward more egalitarian family dynamics, particularly in decision-making areas like child nutrition. This trend indicates a movement towards shared responsibilities and collaborative dynamics within families. Nonetheless, the influence of traditional figures and the enduring dominance of men in certain decision-making aspects suggest that this transition is still in progress. A key takeaway from this study is the remarkable resilience and potential of Lesotho's women as agents of societal change. Despite societal constraints, women are increasingly assuming more autonomous and influential roles within their families and communities. This adaptability and strength position them as pivotal figures in navigating and shaping both the familial and societal realms. Their growing involvement in family matters, management of household resources, and transmission of cultural values highlight their crucial role as both custodians of tradition and agents of change.

The analysis underscores the critical role of family-supported female empowerment as a catalyst for societal advancement. Women backed by strong familial support networks are more likely to assume influential roles in community and civic engagements. This collective empowerment, fuelled by familial affirmation, is driving policy reforms and community development in Lesotho. The integration of family systems into empowerment strategies is pivotal, emphasizing that progress towards gender equality and societal advancement must be holistic, deeply rooted in the cultural and familial fabric of the nation. In conclusion, this meta-analysis paints a nuanced picture of gender roles in Lesotho, highlighting the ongoing challenges while also pointing to the potential for societal transformation through education, policy reform, and empowerment initiatives. It emphasizes the importance of considering cultural, familial, and socio-economic factors in devising strategies to promote gender equality

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and societal advancement. The findings suggest a path forward that integrates respect for cultural heritage with the pursuit of progressive change, paving the way for a more equitable future in Lesotho.

Based on the findings of the meta-analysis on gender roles and societal dynamics in Lesotho, the following five key recommendations are proposed:

- **Strengthen Economic Independence for Women:** To mitigate the economic dependency of women on male family members, it's crucial to implement programs that promote women's financial independence. This could include vocational training, entrepreneurship opportunities, and access to microfinance. Empowering women economically not only enhances their personal agency but also contributes to broader societal development. By equipping women with the skills and resources to generate income, they gain greater control over their lives and can make more autonomous decisions affecting their families and communities.
- **Enhance Educational Opportunities and Awareness:** Education plays a pivotal role in empowering women and girls and promoting gender equality. Efforts should be made to increase access to education at all levels, particularly for girls who are at risk of early marriage. Educational campaigns should also focus on changing societal perceptions, challenging gender stereotypes, and promoting the value of women's participation in all aspects of life. Education serves as a tool for women to gain knowledge, skills, and confidence, which are essential for challenging the status quo and advocating for their rights.
- **Promote Gender-Sensitive Policy Implementation:** While Lesotho has made commitments to gender equality through various treaties and policies, there is a gap in implementation. Policies should be critically reviewed and reformed to ensure they are not only gender-sensitive but also effectively implemented. This involves training policymakers and implementers, allocating adequate resources, and establishing mechanisms for monitoring and evaluation.
- **Foster Inclusive Family Dynamics and Decision-Making:** Encourage and support the trend towards shared decision-making in families. Programs and interventions should aim to involve men and boys in discussions about gender equality and family responsibilities. By promoting egalitarian family structures where both men and women participate in decision-making, traditional gender roles can be reshaped. This inclusive approach not only benefits women but also contributes to healthier and more harmonious family environments.
- **Integrate Family Support in Empowerment Programs:** Recognizing the crucial role of family support in women's empowerment, programs should be designed to involve and educate family members about the importance of gender equality. This could include community workshops, family counselling, and awareness campaigns that highlight the

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benefits of supporting women's rights and participation in society. By gaining the backing of families, women are more likely to succeed in their endeavours and become influential community members.

Implementing these recommendations requires a multi-faceted approach, involving government, non-governmental organizations, community leaders, and international partners. Together, these strategies can significantly contribute to transforming societal norms, enhancing women's roles, and fostering a more equitable and prosperous Lesotho.

Acknowledgment

The authors would like to express their heartfelt appreciation to the dedicated teams responsible for designing, implementing, monitoring, and evaluating the program. We extend a special note of gratitude to the people of Lesotho, with a particular emphasis on women and girls, whose active and enthusiastic participation in this comprehensive evaluation has greatly enriched our understanding of their needs and experiences. Furthermore, we wish to acknowledge and convey our profound gratitude for the unwavering support and collaborative efforts of the Country Office (CO) Lesotho team. Their pivotal role was instrumental in the successful culmination of this study.

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