

A Collaboration Between:



Tool: Integrating Intersectionality in Nutrition Programs

With financial support from:



*[Gender-Transformative Framework for Nutrition](#)





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Acronyms

GTFN	Gender-Transformative Framework for Nutrition
CanWaCH	Canadian Partnership for Women and Children's Health
NGO	Non-Governmental Organization
WHO	World Health Organization
FAO	Food and Agriculture Organization of the United Nations
MEAL	Monitoring, Evaluation, Accountability & Learning



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Integrating Intersectionality in Nutrition Programs

Purpose

This tool helps users **incorporate intersectionality into the development of gender-transformative nutrition programs and highlight weaknesses, gaps, and areas for improvement to ensure that no one is left behind in programmatic efforts.** Using the [Gender-Transformative Framework for Nutrition](#) (GTFN) as the underlying framework, this tool will explicitly address key factors related to **agency, resources, and opportunity structures**, ensuring that these critical elements are carefully considered throughout the programming life cycle. By guiding users to recognize and assess the diverse and intersecting identities and experiences of target populations, this tool will support the creation of more inclusive and effective nutrition programs that consider the complexities of gender, power, and access to resources.

A Note on the Approach and Language

While this approach focuses on the gendered barriers that disproportionately impact women and girls, **it does not negate the importance of men and boys in achieving gender equality.** Their engagement as allies is critical; however, given the current systemic realities, male engagement is not the dominant lens of analysis. Instead, all tools in the GTFN toolkit are designed to shift harmful norms and institutional practices that reinforce inequities, ensuring that all individuals—regardless of gender—can thrive.

Throughout this toolkit, the term “priority population(s)” will be used to reference the unique individuals, groups, and communities that your organization’s program

targets, which may include women, girls, men, boys, and gender-diverse individuals of varying intersecting identities. This concept will be discussed in greater detail in Step 1: Identifying the Priority Population(s).

Audience

The **primary audience** for this guidance is organizations involved in designing and delivering nutrition programs, for example:

- Non-governmental organizations focused on nutrition, food security, and public health
- International development organizations
- Community-based organizations working on food security and nutrition
- Multilateral organizations such as the World Health Organization (WHO) and UNICEF

The guidance may also benefit other audiences including:

- Government agencies responsible for health and nutrition programs
- Donor agencies and philanthropic organizations
- Academic institutions engaged in research

This toolkit may supplement tools developed by the GTFN Coalition, including:

- Applying the GTFN: A Systems-Based Approach to Defining Nutrition Challenges
- Assessing Gender-Transformative Capacity in Nutrition Programming: An Organizational Guide
- Advocacy Guidance Note Using the Gender-Transformative Framework for Nutrition

Background

Good nutrition is critical for health and well-being, and acts as a foundation for education, economic prosperity, and equality. Without it, individuals of all ages may be unable to reach their full potential and/or break intergenerational cycles of poverty and inequality. Malnutrition currently impacts one in three people globally, disproportionately affecting women and girls. Given these disparities, organizations such as the Food and Agriculture Organization (FAO) and World Food Programme [Joint Programme on Gender Transformative Approaches for Food Security and Nutrition](#) are implementing gender-transformative approaches to nutrition programming.

This tool has been developed to fill an identified gap related to the practical application of intersectionality frameworks.

An intersectional approach to gender-transformative nutrition programming is required to make sure that no one is left behind. Intersectionality has gained traction as a theoretical tool for understanding how social characteristics intersect to shape inequalities in health outcomes, including malnutrition (Fivian et al., 2024). As defined by the [United Nations Network on Racial Discrimination and Protection of Minorities](#) (2022), intersectionality is a concept and theoretical framework that facilitates the recognition of the complex ways in which social identities overlap and create compounding experiences of discrimination and concurrent forms of oppression based on two or more grounds, such as:

- Sex, gender identity, or gender expression
- Sexual orientation
- Ethnicity
- Age
- Class
- Caste, descent, or inherited status
- Education
- Income
- Disability
- Health status

Many global health groups and multilateral organizations have acknowledged the importance of intersectionality, including intersectional-related goals and objectives in strategic plans, guidelines, and other publicly available communications. UN Women's Intersectionality Resource Guide and Toolkit: [An Intersectional Approach to Leave No One Behind](#) (2022) aims to facilitate integration of intersectionality in policies and programs by providing an overview of intersectionality and "a practical framework and tools for reducing compounded and intersecting inequalities faced by people experiencing diverse and compounded forms of discrimination" (p. 6).

Why take an intersectional approach to nutrition programming?

According to the [Guidance Note on Intersectionality, Racial Discrimination, and Protection of Minorities](#) (2022) developed by the United Nations Network on Racial Discrimination and Protection of Minorities, applying an intersectional framework helps to advance a human rights–based approach in policy development, programming, and project implementation to ensure that no one is left behind. This is especially important when developing programs for priority populations due to their vulnerability to human rights violations, discrimination, and oppression. Bridging principles from this guidance note with a gender-transformative context, an intersectional approach to the programming life cycle can support human rights advancements in the following potential ways:

- **Ensuring specific attention to and action for priority populations who are insufficiently protected from human rights violations**, including those who belong to minorities and face racial and intersecting discrimination.
- **Increasing visibility, active participation, and an equal voice for priority populations who have historically and systemically been silenced.** An intersectional perspective stresses that addressing discrimination is interrelated with the empowerment, participation, and inclusion of priority populations, including in the development, implementation, and monitoring of policies and programs affecting them.



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- **Recognizing that social categories (e.g., “women” and “girls”) are not homogeneous.** Intersectionality facilitates the development of policies and programs that recognize intra-group diversity and avoids homogenizing approaches while respecting, protecting, and ensuring human rights and responding to unaddressed needs of all priority populations.
- **Enhancing the availability and analysis of disaggregated data** as the basis for effective programming that targets priority populations.
- **Advancing gender-transformative change** by addressing the structural causes of gender inequality and disadvantage that are associated with intersecting forms of discrimination, including the laws, policies, institutions, socio-cultural norms, and harmful stereotypes that perpetuate and/or aggravate the exclusion of certain individuals, groups, and communities.

This tool has been developed to fill an identified gap related to the practical application of intersectionality frameworks. While intersectionality in programming has gained some momentum, there is limited guidance on the practical application of an intersectional approach to gender-transformative nutrition programs. To further investigate the need for such a resource, a review was conducted of the Landscaping Analysis (2023) and Needs Assessment (2023) developed by members of the GTFN Coalition and the Canadian Partnership for Women and Children’s Health (CanWaCH). A key takeaway from the review was that professionals of various backgrounds and levels want more support in integrating intersectionality in their work, as this is crucial for ensuring that gender-transformative approaches address the diverse and interconnected identities and experiences of individuals. As such, this tool has been developed to both support organizations in their analysis of intersectionality and to provide guidance on the integration of intersectionality into gender-transformative nutrition programs by identifying weaknesses, gaps, and areas for improvement to ensure inclusivity. Grounded in the GTFN, this tool helps users assess agency, resources, and opportunity structures, enabling the design of more equitable and effective programs that account for diverse and intersecting identities.



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How To Use This Tool

This tool includes three steps to help users incorporate intersectionality into the development of gender-transformative nutrition programs to make sure that no one is left behind.

Intersectionality recognizes that issues like gender, sex, sexuality, race, socio-economic status, disability, and geographic location do not exist in isolation

Step 1: Using an intersectional lens, identify the priority population(s) targeted by this program (page 15).

Using an intersectional lens in the first step of the programming life cycle helps to identify and address the unique overlapping factors that may affect priority populations. Intersectionality recognizes that issues like gender, sex, sexuality, race, socio-economic status, disability, and geographic location do not exist in isolation; rather, they intersect to create complex layers of disadvantage. Without this approach, programs may inadvertently overlook priority groups, exacerbating inequalities in nutrition and health outcomes. For example, a woman from a low-income, rural community might face more barriers to accessing proper nutrition than an urban woman due to factors like limited access to health care, education, or nutritious food. By understanding these compounded challenges early in the program development process, public health efforts can be more targeted, inclusive, and effective in improving the health and nutrition of priority populations.

Step 2: Complete the Key Questions To Ask through the Programming Life Cycle table (page 15) to identify areas for improvement.

This toolkit includes a list of key questions to ask throughout the programming life cycle to assess the extent to which intersectionality is considered in your program and provide insight into areas of your program where intersectionality may be integrated more meaningfully. The key questions are categorized based on the six stages of the programming life cycle: needs assessment; planning and design; resource mobilization; implementation; monitoring, evaluation, accountability, and learning (MEAL); and program sustainability (a framework adapted from the Humanitarian Programme Cycle developed by the United Nations Office for the Coordination of Human Affairs). The questions are also categorized based on GTFN considerations of agency, resources, and opportunity structure (Cinnamon, 2020). Meaningful consideration of intersectionality through the programming life cycle will involve applying an intersectional lens at all stages and considering factors related to agency, resources, and opportunity structure.

Step 3: Review recommendations and resources for further learning (page 20).

After completing the table in Step 2, users will be able to identify areas for improvement to integrate intersectionality more meaningfully into their program. Based on the identified area(s) for improvement, the user may refer to the general recommendations and specific online resources provided below (pg.X) to explore potential solutions and best practices. While the resource list is not exhaustive, it serves as a starting point for assessing and strengthening intersectional approaches within programming. Organizations should use these insights to engage in internal discussions and collaboratively determine the most effective strategies to address identified limitations.

Key Concepts

Intersectionality

Intersectionality is a concept and theoretical framework that recognizes the ways in which social identities intersect and create compounding experiences of discrimination and concurrent forms of oppression. Intersectionality recognizes that different groups experience inequities as a result of their unique intersecting individual circumstances, identities, systems of power, and institutions (Figure 1). Intersectionality pays specific attention to:

- The socio-structural nature of discrimination and inequality
- The diversity within each category, group, or community (non-homogeneous experiences and needs)
- The narratives, empowerment, and agency of individuals and groups facing intersectional discrimination.

Individual circumstances	Aspects of identity	Systems of power	Institutions
Referring to circumstances that are unique to each individual	• Gender • Class • Sexuality • Family Structure • Ethnicity • Ability • Indigeneity • Religion • Location • Age • Citizenship • Language	• Ableism • Racism • Sexism • Classism • Ageism • Capitalism • Heterosexism • Colonization	• Politics • War • Education • Economy • Government • Law Globalization • Immigration

Figure 1: Intersectionality Recognizes Individual Circumstances, Aspects of Identity, Systems of Power, and Institutions (adapted from Manning, 2021)

What is an intersectional program analysis and why is it important?

An intersectional analysis examines how effectively public policies, services, and programs reflect the perspectives, knowledge, and experiences of diverse individuals and communities. It highlights whose needs are being overlooked or are unlikely to be addressed, serving as a foundation for implementing necessary changes. The main objective is to make policies, services, and programs more accessible and inclusive for everyone, **leaving no one behind** (Manning, 2021).

Program stage	Why take an intersectional approach?
Needs assessment & problem identification	• Intersectionality helps to identify the diverse needs of priority populations. Intersectionality challenges the homogenization of “women and girls” and other priority groups by recognizing that each individual has unique needs. This approach helps to capture the challenges and needs of various groups (e.g., women and girls of different ethnicities, socio-economic backgrounds, locations), which leads to a comprehensive understanding of nutritional gaps across diverse populations. • Intersectionality helps to identify historically overlooked issues. Intersectionality ensures that the voices of priority populations with multiple intersecting identities are not overlooked in the needs assessment stage. Without considering the intersections of identities, programs may focus on one group while ignoring others who are experiencing compounded barriers. An intersectional approach enables the effective identification of needs and the development of more targeted interventions.
Program planning & design	• An intersectional approach helps to create responsive, effective interventions. An intersectional approach challenges “one-size-fits-all” approaches to nutrition programming by helping in planning and designing programs that address compounded barriers to nutrition faced by priority populations. For example, rural women may face different barriers to nutrition than urban women, and young women may have distinct needs compared to older women. • Intersectionality supports cultural and contextual sensitivity in program design. Intersectionality facilitates the development of nutrition programs that are culturally, socially, and economically relevant to the targeted groups, which will ensure that the dietary needs, preferences, and constraints of all priority populations accessing the program are considered.

Program stage	Why take an intersectional approach?
Resource mobilization	• An intersectional approach to advocacy helps to highlight disparities and generate meaningful support. An intersectional approach supports programmatic advocacy efforts by highlighting disparities and prioritizing the nutritional needs of priority populations, ensuring that advocacy outputs are inclusive. • An intersectional approach to partner and donor engagement creates opportunities to prioritize equity. An intersectional approach to fundraising and resource mobilization will attract diverse stakeholders, global partners, and donors who support the programmatic goals of health equity, seeking to ensure no one is left behind. This broadens the support for the program, aligning funding priorities with the needs of priority populations. • Intersectionality in human resource mobilization creates change at the organizational level. Recruiting staff, technical experts, and volunteers with diverse perspectives and lived experiences will ensure more inclusive and responsive interventions, strengthen program effectiveness, and create change at the organizational level. • An intersectional budget promotes equity. Allocating resources through an intersectional lens ensures that funds are directed toward programmatic initiatives that address the unique barriers faced by different groups. This approach promotes equity by prioritizing those most affected by nutritional disparities across sectors.
Implementation & delivery	• An intersectional approach addresses complex intersecting barriers. Implementation strategies informed by intersectionality (e.g., accessible program delivery for individuals with disabilities, language support, community outreach, multisectoral collaboration) are equipped to address the multi-dimensional barriers faced by priority populations and ensure that interventions are accessible to those with compounded disadvantages, resulting in a more effective program that creates meaningful change. • Intersectional programs support equitable resource allocation to priority groups. By understanding that some groups disproportionately experience barriers to nutrition based on intersecting identities, applying intersectionality to resource allocation ensures that program resources are distributed where they are most needed, preventing further harm to specific groups that can often be overlooked in nutrition programming. • Intersectionality creates opportunities for priority populations. Considering intersectionality during the implementation stage supports the inclusion of diverse voices in decision-making, providing priority populations from all backgrounds with opportunities to engage with the program beyond just accessing nutrition. This may include opportunities for learning, leadership development, and contributions to educational advancement.

Program stage	Why take an intersectional approach?
Monitoring, evaluation, accountability, & learning (MEAL)	• An intersectional approach to data collection and analysis ensures that assessments are accurate and holistic. Intersectionality helps assess whether the program truly benefits all priority populations or if certain groups are still being left behind. For instance, the collection of disaggregated data might reveal that nutrition programs are not reaching women with disabilities or women from minority ethnic groups because their needs were not adequately considered. • Intersectionality facilitates course-corrections to ensure no one is left behind. Through an intersectional lens, monitoring and evaluation can inform necessary adjustments in the program, ensuring that any inequalities or gaps in implementation are addressed promptly. This allows for continual improvement in how the program affects different groups, ensuring long-term success, sustainability, and inclusivity. • Intersectionality should be explicit and clear in knowledge translation practices to ensure accountability and transparency. Using an intersectional approach in the evaluation and reporting processes ensures that there is a clear understanding of who benefits and who may still be excluded. It holds leadership accountable for ensuring that no one is left behind and fosters empowerment through knowledge-sharing with participants and other relevant communities, particularly for those with intersecting identities who face multiple forms of oppression.
Program sustainability	• Integrating intersectionality into sustainability strategies facilitates the long-term success of the program. Programs should be designed to meet the diverse needs of priority populations even after the organization exits or the program ends. › <i>Community-led, partnership-centric sustainability planning</i>—including participatory decision-making or co-designing solutions with local groups representing diverse communities—can support the development of intersectional, responsive sustainability strategies. › <i>Establishing ongoing intersectional monitoring and feedback mechanisms</i> (e.g., collecting disaggregated data on different social groups) will support continued program adaptation to meet evolving needs after the organization exits. › <i>Advocacy and knowledge translation</i> can create structural change that supports the program’s sustainability. Working with local governments and institutions to integrate intersectional approaches into policies and programs can ensure that the unique nutritional needs of all priority populations are considered in regional health and nutrition strategies. • An intersectional approach to capacity-building supports program sustainability. Equipping local organizations, leaders, and community members with necessary skills and resources will help to sustain the program and foster long-term success. Training and empowering leaders from priority communities to take ownership of the program ensures that the program remains inclusive and responsive, leaving no one behind.



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The Gender-Transformative Framework for Nutrition

The [Gender-Transformative Framework for Nutrition](#) is a conceptual model (Figure 2) supported by research and practice that enables improved gender analysis, solutions design, and monitoring and evaluation of nutrition approaches that advance gender equality and promote the empowerment of priority populations. Through the empowerment rings of **agency**, **resources**, and **opportunity structure** found in the centre of the framework, the GTFN applies a systems-thinking approach that enables users to critically examine the multisectoral and gender-related drivers of malnutrition.

The GTFN acknowledges that achieving meaningful change in both nutrition and gender equality requires coordinated action across multiple sectors, referred to as **domains**. The seven domains outlined in the GTFN are, in no particular order:

- Equitable education
- Equitable food systems
- Gender- and adolescent-responsive health and nutrition systems
- Economic inclusion
- Safe and equitable water, sanitation, and hygiene
- Social protection
- Environmental and political resilience



Figure 2: GTFN Conceptual Model: The GTFN modularizes the multisectoral dimensions of malnutrition and provides an analysis of each domain using the three empowerment components: agency, resources, and opportunity structure. The seven domains outline the relationship between diet and disease, as it relates to nutrition (GTFN, 2020).

Agency, Resources, and Opportunity Structure

Agency

Central to the GTFN is the promotion of **agency**: empowering priority populations to set and pursue their own goals. Agency is at the heart of the framework (Figure 3) because enhancing agency is fundamental to achieving gender equality and creating lasting, transformative change. By fostering agency, priority populations gain the ability to influence decisions that affect their lives, ultimately improving their health, nutrition, and overall well-being.

Priority populations often face overlapping challenges that restrict their ability to make informed choices about their nutrition and health. These challenges may arise from systemic discrimination, societal norms, or limited access to decision-making roles, and intersecting identities intensify the effects. By promoting agency through an intersectional lens, nutrition programs enable priority populations to take active roles in determining their nutritional needs and health outcomes, ensuring that program design and implementation prioritizes their diverse perspectives and requirements.

Resources

To achieve their goals, priority populations require access to a wide range of **resources**. These resources go beyond material assets like income and property, and include social support, knowledge and information, and access to services.

Access to nutrition-related resources—such as financial support, education, health care, and social services—varies widely among priority populations, highlighting the need for an intersectional approach in nutrition programming. For example, individuals from low-income, racialized, or rural populations or communities with disabilities often experience barriers that limit their access to these resources, which can worsen health inequalities. By applying an intersectional perspective, nutrition programs can better identify and address these disparities, ensuring that resources are distributed fairly and meet the specific needs of all priority populations.

Opportunity structure

Priority populations exercise agency within a broader system known in the GTFN as **opportunity structure**. Opportunity structure speaks to the system that encompasses both formal and informal institutions, including laws, policies, and social and cultural norms and practices, which shape behaviour and determine the extent to which priority populations can fully exercise their agency.

Opportunity structure significantly influences the social and cultural environments in which priority populations live, affecting different groups in unique ways based on intersecting identities. Using an intersectional approach to explore how these systems impact access, nutrition programs can identify and address the barriers created by discrimination, ensuring that programs provide fair opportunities for priority populations to succeed, promoting equity and inclusion while leaving no one behind.



Figure 3: Agency, Resources, and Opportunity Structure in the GTFN.

Step 1: Identifying the Priority Population(s)

To meaningfully integrate an intersectional approach throughout the programming life cycle, the **priority population(s)** must first be identified. This requires a multi-faceted approach that considers factors such as gender, sex, sexuality, socio-economic status, geographic location, ethnicity, disability, age, and cultural or legal barriers. Additionally, attention must be paid to intersecting factors that further exacerbate oppression, such as gender-based violence, education, and employment. These priority population(s) may face compounded discrimination, making it harder for them to access health services or participate in decision-making processes. Through an intersectional lens, key questions to investigate in Step 1 may include:

- Which group(s) should the program target?
- Which group(s) has historically and systemically been excluded from nutrition programs?
- Which group(s) disproportionately experiences poor health outcomes?

Many approaches have been used to assess priority individuals, groups, and communities based on institutional, historical, legal, or other circumstances that affect excluded groups across domains. For example, public health agencies may collect disaggregated data on health outcomes and incorporate perspectives from local communities to ensure the voices of these priority populations are included. Additionally, collaborating with grassroots organizations and local leaders can also provide valuable insights into the unique challenges these groups face. Your organization may have its own process, indices, toolkit, framework, or model for assessing and identifying priority populations. Examples from global health organizations spanning various domains include, but are not limited to:

- [*Health Equity Assessment Toolkit \(HEAT and HEAT Plus\)*](#), WHO
- [*Vulnerability Assessment Tool, UN High Commissioner for Refugees*](#) (UNHCR)–IDC
- [*Guidance Note on Gender-Sensitive Vulnerability Assessments in Agriculture*](#), UN Food and Agriculture Organization

- [*Social Inclusion Assessment Tool \(SiAT\)*](#), World Bank
- [*A Gender and Social Vulnerability Assessment Approach*](#), Mekong River Commission
- [*How To Integrate Intersectionality Theory in Quantitative Health Equity Analysis? A Rapid Review and Checklist of Promising Practices*](#), Pan-Canadian Health Inequalities Reporting Initiative

Step 2: Key Questions to Ask through the Programming Life Cycle

Once the priority population(s) have been identified, answer the questions in the table on page X with “Yes,” “Somewhat,” or “No” to identify weaknesses in your program and prioritize areas for improvement. This tool has been developed to be adaptable. The table may be filled out at any stage of the programming life cycle, depending on the organization’s needs. For example, users may utilize this table prior to program development to guide the process. Alternatively, organizations may use this table to assess a past program to identify gaps and weaknesses, thereby supporting the meaningful integration of intersectionality in future programs.

Suggestions:

- Users may print the table and highlight responses to facilitate visual analysis of strengths and areas requiring improvement.
 - › (e.g., “Yes,” “Somewhat,” “No”).
- Digital versions of the table can be used in collaborative digital platforms (e.g., Google Docs), allowing stakeholders, organization leaders, and consultants to document insights and share recommendations.
- Organizations may complete this table with partners at the local community level to gain valuable insights and perspectives on program weaknesses and meaningfully support the integration of intersectionality into their programs.
- Program leaders may use this table as a group activity with staff and field workers to build capacity, enhance awareness of intersectional approaches, and strengthen the organization’s integration of equity-focused strategies.

Answer the following questions with “Yes,” “Somewhat,” or “No.”

Program stage	GTFN concepts		
	Agency	Resources	Opportunity structure
General questions to ask in all stages of programming life cycle	Does this program support the priority population(s) <i>identified in Step 1</i> in gaining control of their lives, facilitating decision-making power, and pursuing their own goals?	Does the program increase access to resources (e.g., income, property, knowledge, services) for the priority population(s) <i>identified in Step 1</i> (e.g., through program outputs and/or other stages of the program cycle, such as providing payment for consultation services)?	Does this program address existing barriers to empowerment for the priority population(s) <i>identified in Step 1</i> within structures and systems (e.g., formal and informal institutions, including laws, policies, and social and cultural norms and practices)?
Needs assessment <i>“What does this community need?”</i>	- Are priority populations actively involved in identifying their own nutritional needs and priorities? - Does the needs assessment identify barriers for priority populations to exercise decision-making power over their nutrition and health? - Are relevant local and grassroots organizations consulted in identifying the issue?	- Does the needs assessment analyze the ways in which different subgroups of priority populations have equitable access to nutrition-related resources (e.g., income, education, health care, and social support)? - Does the organization create opportunities by hiring or engaging staff, volunteers, and technical experts from priority communities to ensure inclusive data collection and analysis? - Are processes in place to ensure that the perspectives of priority populations are represented in the agenda-setting stage, including those who have limited access to financial, educational, and income resources?	- Does the needs assessment examine how social norms, policies, and institutional barriers impact the ability of priority populations to access nutrition services? - Does the organization have processes in place to ensure that the needs assessment reflects the voices of historically overlooked priority populations from diverse social, economic, and cultural backgrounds? - Were accommodations made to facilitate the inclusion of priority populations in the needs assessment stage (e.g., accessible location, providing transportation, child care, translation, or interpretation)?

Answer the following questions with “Yes,” “Somewhat,” or “No.”

Program stage	GTFN concepts		
	Agency	Resources	Opportunity structure
Planning & design <i>“How can we meet the needs of the community?”</i>	- Does the program design include strategies to enhance the decision-making power of priority populations over their nutrition and well-being? - Are priority populations meaningfully consulted in program planning and decision-making to ensure their agency is centred?	- Are planned interventions designed to equitably distribute nutrition-related resources among different social groups? - Does the organization allocate resources toward recruiting diverse staff, technical experts, and volunteers who bring intersectional perspectives to program design?	- Does the program design address systemic barriers (e.g., legal restrictions, discriminatory policies, cultural norms) that limit the ability of priority populations to engage with the program? - Are internal policies and structures designed to ensure that planning teams reflect the diversity of the communities served?
Resource mobilization <i>“Where and how can we find support to make a difference?”</i>	- Are priority populations meaningfully involved in mobilization efforts, including decision-making on budgeting and funding priorities? - Are priority populations from under-represented groups included in discussions with donors, partners, and stakeholders to shape funding priorities?	- Are financial and material resources allocated in a way that prioritizes the priority populations? - Does the organization intentionally recruit and support diverse fundraisers, grant writers, and financial managers who understand and prioritize intersectionality?	- Are partnerships and donor engagement strategies designed to support long-term, equity-focused nutrition programming that addresses systemic barriers? - Are partnerships and donor engagement strategies designed to uplift women-led and community-based organizations that prioritize intersectional approaches?

Answer the following questions with “Yes,” “Somewhat,” or “No.”

Program stage	GTFN concepts		
	Agency	Resources	Opportunity structure
Implementation <i>“How do we turn our plans into action?”</i>	- Does the program create opportunities for priority populations to take on leadership roles in implementation? - Does the implementation plan empower all priority populations to actively participate in the implementation and delivery of the nutrition policy, ensuring they can influence the process?	- Are nutrition services and interventions accessible to all, including those from underserved and hard-to-reach communities? - Are sufficient resources allocated to build the capacities of priority populations to access nutrition programs and services? - Does the organization hire and train diverse staff, including those with lived experience of nutritional inequities, to improve service delivery? - Does the implementation plan include tailored resources (e.g., culturally relevant nutrition education, accessible facilities for women with disabilities) to address the specific needs of priority populations from diverse backgrounds?	- Does program delivery actively challenge or reform cultural and institutional norms that affect nutrition access? - Does the implementation process account for the existing opportunity structures (e.g., laws, policies, and social norms) that may limit or enable women’s and girls’ ability to fully participate in the nutrition program? - Does the implementation plan address the intersecting barriers (e.g., cultural, legal) that prevent priority populations from benefiting equitably from the nutrition program?

Answer the following questions with “Yes,” “Somewhat,” or “No.”

Program stage	GTFN concepts		
	Agency	Resources	Opportunity structure
Monitoring, evaluation, accountability, and learning (MEAL) <i>“Is the program doing what we want it to do?”</i>	- Does the program’s monitoring framework track how well priority populations are able to make decisions about their nutrition and health? - Is there an explicit effort to ensure that priority populations with intersecting identities (e.g., Indigenous status, low income, LGBTQA+) can provide feedback and actively participate in monitoring and evaluating the program? - Does the monitoring and evaluation process assess whether the program has helped create more opportunities for priority populations to exercise their agency in making nutrition-related decisions?	- Is data disaggregated to assess whether all groups have benefited equitably from nutrition-related resources? - Does the organization create opportunities for staff and technical experts who specialize in intersectional data collection and analysis? - Are processes in place to ensure that data is collected on priority populations who experience resource disparities (e.g., low socio-economic status, rural and non-urban areas, low education)?	- Do accountability mechanisms ensure that priority populations have a voice in evaluating the program and influencing changes? - Are feedback mechanisms designed to ensure that priority populations have a platform to hold the organization accountable? - Does the monitoring and evaluation framework include intersectional indicators related to the dismantling of structural and systemic barriers (e.g., assessing changes in public attitudes and social norms regarding gender roles and sexual identity, tracking access of nutrition programs among rural, sexual minority women)?
Program sustainability <i>“How can we support the continued success of the program?”</i>	- Are strategies in place to strengthen the long-term leadership and decision-making capacity of priority populations in nutrition programming? - Are leadership pathways in place to transition program ownership to local priority populations?	- Are sufficient financial, technical, and community resources allocated to ensure continued nutrition access for priority populations after the program exits? - Does the organization allocate resources for ongoing capacity-building and mentorship of diverse community leaders?	- Have policies and institutional structures been influenced or reformed to ensure that intersectional nutrition approaches continue beyond the program’s lifespan? - Are internal policies structured to ensure that intersectional approaches remain embedded in future programs and advocacy efforts?

Step 3: Areas for Improvement, Recommendations, and Resources

Review the answers for questions in Step 2 to identify gaps and areas for improvement. Prioritize the areas for improvement that reflect questions answered with “No”, followed by “Somewhat.” Refer to the general recommendations and specific online resources below to explore potential solutions and best practices. While this list is not exhaustive, it serves as a **starting point** for assessing and strengthening intersectional approaches within programming. Organizations should use these insights to engage in internal discussions and collaboratively determine the most effective strategies to address identified limitations.

General resources

- [*Intersectionality Resource Guide and Toolkit: An Intersectional Approach to Leave No One Behind*](#) (UN Women & UNPRPD, 2022)
- [*Practical Guide for the Incorporation of the Intersectionality Approach in Sustainable Rural Development Programmes and Projects*](#) (FAO, 2022)
- [*Guidance Note on Intersectionality, Racial Discrimination and Protection of Minorities*](#) (UN OHCHR, 2022)

Area for improvement	Recommendations	Additional resources
Program scope & target population	• Use disaggregated data in your needs assessment. Use disaggregated data to identify how intersecting social identities (e.g., gender, race, class, disability, age, migration status) shape nutrition inequities. • Be explicit and specific when defining your program goals. Within program design and objective setting, explicitly prioritize priority populations who are disproportionately affected by the issue (e.g., food insecurity, malnutrition) to ensure your outreach efforts focus on populations facing multiple compounding barriers.	• Applying the GTFN: A Systems-Based Approach to Defining Nutrition Challenges • Revisit Step 1: Identifying the Priority Population(s) (p.13) for additional resources

Area for improvement	Recommendations	Additional resources
Program reach & access	• Identify and address barriers to program access. Address structural barriers to program engagement by considering factors such as cost, transportation, digital access, language, and cultural dietary restrictions. For example, if transportation is required for rural groups to access your program, ensure that you have allocated resources to ensure that all individuals have the opportunity to use your program (e.g., budget for transport costs, organize alternative transportation options, advertise your program in rural areas). • Ensure your outreach strategies are inclusive. Design outreach materials that reflect intersectional identities by using inclusive images, testimonials, and languages that resonate with diverse lived experiences. Ensure materials do not reinforce gender stereotypes or ignore the experiences of non-binary individuals. • Consult with community-based organizations to develop appropriate outreach strategies. Collaboration with groups that already serve the priority population(s) can improve trust and program engagement. These partnerships can help tailor outreach strategies, identify program participants, and facilitate appropriate communication.	• <i>Including Children with Disabilities in Humanitarian Action: Nutrition</i> (UNICEF)

Area for improvement	Recommendations	Additional resources
Community engagement & partnerships	• Consult the community at all stages of programming. Ensure diverse representation by including individuals from intersecting backgrounds in advisory committees or leadership roles within the program. • Support equitable engagement and create opportunities for progress through compensation. Compensate community leaders for their expertise and lived experiences through payment, honorariums, or other tangible forms of recognition to ensure equitable participation and support empowerment. • Apply participatory approaches to uplift and empower the voice of your community. When conducting research, apply participatory approaches (e.g., community-based participatory research, feminist participatory action research) that centre the lived experiences of your community. This will help you to understand if your program is having its intended effect and provide insight into areas that may need improvement.	• <i>Gender Equality and Social Inclusion (GESI) Toolkit for Health Partnerships</i> (Tropical Health and Education Trust) • <i>Engaging with Organizations of Persons with Disabilities in Humanitarian Action</i> (UNICEF)



Area for improvement	Recommendations	Additional resources
Data collection & analysis	• Avoid grouping the priority population(s) into a single category. Collect and analyze disaggregated data by sex, gender identity, race, ethnicity, disability, socio-economic status, Indigenous status, and other key factors to understand disparities more comprehensively. • Use qualitative and mixed-methods approaches to gain in-depth information. Supplementing quantitative data collection methods (e.g., surveys and program use statistics) with in-depth interviews, focus groups, or photovoice projects can capture information on the program and its participants that may be missed otherwise. • Engage community members as co-researchers. Training and hiring local researchers to collect data, conduct interviews, or administer surveys can help build trust, ensure data is gathered in a culturally sensitive manner, and create opportunities for empowerment. • Apply an intersectional approach when designing surveys and interviews. Avoid one-size-fits-all questions that assume homogeneity among your participants or community. For example, instead of asking about the general community's access to food, explore how the social location and identities of individuals living in that community (e.g., gender roles, disability, education, rural or urban location) influence their access.	• <i>Sex & Gender in Health Research Resource Hub</i> (WHO) › Toolkits and resources available online • <i>Sex- and Gender-Based Analysis (SGBA): A Toolkit for Nutrition Programs</i> (Nutrition International) • <i>PROGRESS-Plus Framework</i> (Cochrane Equity Methods) • <i>Gender-based Analysis Plus Course</i> (Government of Canada) • <i>Strengthening the Integration of Intersectionality Theory in Health Inequality Analysis (SIITHIA) Checklist</i> (Public Health Agency of Canada)

Area for improvement	Recommendations	Additional resources
Reporting & knowledge translation	• Co-develop recommendations with the community. To ensure findings from your program translate into transformative change, engage community members and program participants during this stage. For example, you may decide to hold focus groups with participants to review and validate preliminary findings from your program and suggest solutions before reports are finalized and published. • Prioritize dissemination at the community level to address power dynamics in knowledge translation. Local advocacy efforts, policy change, and capacity-building based on findings from your program should be prioritized over institutional or academic dissemination. • Report all information back to the community and create opportunities for dialogue. Your organization may decide to host feedback sessions or town halls where findings are shared interactively. All program participants and community members should know how and where to access information related to programming outcomes and relevant data collection. • Translate findings into multiple formats to support inclusivity and accessibility. Your organization may use infographics, videos, or social media to support traditional knowledge translation methods (e.g., written reports, academic articles).	• <i>Feminist Monitoring, Evaluation, Accountability, and Learning</i> (OXFAM Canada) • <i>UNICEF Guidance on Gender Integration in Evaluation</i> (UNICEF)

Area for improvement	Recommendations	Additional resources
Organizational readiness	• Create leadership opportunities for those with intersecting identities within the organization. By actively recruiting individuals with diverse lived experiences into decision-making roles, organizations can ensure that diverse perspectives are considered. Representation should go beyond tokenism to ensure meaningful participation. • Seek out funding opportunities that prioritize goals of intersectionality. Secure sustainable funding for intersectional initiatives by advocating for dedicated financial resources to support inclusive program design, data collection, and ongoing engagement with diverse communities. • Support program sustainability by: › Co-creating [with priority populations] culturally relevant, easy-to-use resources such as toolkits, training manuals, and community-led monitoring frameworks that local groups can adapt and continue using post-program. Ensure these materials are inclusive and available in accessible formats and languages. › Ensuring gradual and inclusive leadership transitions by working closely with multiple community sub-groups (e.g., women's networks, LGBTQ+/SOGIE advocacy groups) to prevent power imbalances in the handover process. › Prioritize those most affected by nutrition inequities in leadership succession planning, ensuring that those with the most at stake remain central in decision-making post-program.	• <i>Assessing Gender-Transformative Capacity in Nutrition Programming: An Organizational Guide</i> • <i>A Primer on an Intersectional Approach to Data</i> (Global Partnership for Sustainable Development Data) • <i>Unpacking Intersectional Approaches to Data</i> (Global Partnership for Sustainable Development Data) • <i>Budgeting and Mobilizing Resources for Disability Inclusion in Humanitarian Actions</i> (UNICEF)



By applying an intersectional lens to programming, users can systematically analyze the complex interactions between gender, nutrition, and broader social determinants.



Photo courtesy of Nutrition International



Conclusion

This tool provides practical guidance for embedding intersectionality and key GTFN concepts—including agency, resources, and opportunity structures—into nutrition programs. It is designed to support users in identifying opportunities to strengthen intersectional approaches throughout the programming life cycle, ensuring greater equity and inclusion for priority populations. By applying an intersectional lens to programming, users can systematically analyze the complex interactions between gender, nutrition, and broader social determinants. This approach will enable organizations to develop strategies that create sustainable, meaningful impact in diverse contexts.

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