

**FOR INFORMATION**

In 2008 the GAVI Board approved the Gender Policy and asked the Secretariat to develop an implementation plan. This document has been prepared to update the GAVI Alliance Board on progress to date on the plan's deliverables, subsequent to the update that went to the Board in June 2009.

## **Second Report on Implementation of the Gender Policy**

### **1. Context**

1.1 In 2008 the GAVI board approved the Gender Policy and asked the Secretariat to develop an implementation plan in support of that policy. The implementation plan was approved by the GAVI Executive Team in early 2009 (Annex 1), in alignment with the budget approved by the GAVI Board in the 2009-2010 approved work plan (\$420,000 for two year period).

1.2 The goal of the Gender Policy is "To promote increased coverage, effectiveness and efficiency of immunisation and related health services by ensuring that all girls and boys, women and men, receive equal access to these services". The implementation plan focuses on four specific outcomes, supported by outputs and activities, and is structured as a nested log frame within the GAVI overall work plan (component 4.1).

1.2.1 Outcome 1: New evidence on gender issues in relation to immunization coverage and access to health services generated, reported and analysed

1.2.2 Outcome 2: Gender sensitive funding and policies in place

1.2.3 Outcome 3: Advocacy for gender equality used as a means to improve immunization coverage and access to health services

1.2.4 Outcome 4: GAVI Alliance structures introduced gender sensitive approaches

### **2. Update on progress toward 2009-2010 deliverables**

2.1 Below, please find a brief summary of progress to date on the plan's deliverables subsequent to the update that went to the Board in June 2009.

#### **2.2 Output 1.1: Review on gender and immunization implemented [WHO]**

2.2.1 This work is being led by WHO's Immunization Vaccine Research (IVR) cluster, with funding from GAVI transferred through the work plan.

2.2.2 WHO/IVR prepared a project outline and convened an Ad-hoc Advisory Committee on Gender and Immunization which met on 15 September 2009 to discuss and finalise the project.

## FOR INFORMATION

2.2.3 Calls for proposals were published in November 2009. The Swiss Tropical Institute was selected and contracts issued by January 2010.

2.2.4 Systematic reviews and the demographic and health survey (DHS) analysis have been conducted, and interim data were discussed at the 2nd meeting of the Ad-hoc Advisory Committee on Gender and Immunization on 21-22 June 2010.

2.2.5 Final reports from systematic review, statistical analysis, as well as two case studies, have been submitted to WHO/IVR, and are currently being reviewed.

2.2.6 A full report on the gender and immunisation project will be available for discussion by SAGE on 11 November 2010 in the context of the session "Update on the epidemiology of the unimmunized and gender-related issues."

### **2.3 Output 2.1: Current guidelines, proposals, annual reporting forms incrementally changed to include gender dimensions [GAVI Secretariat]**

2.3.1 Health systems strengthening (HSS) guidelines were updated to refer to relevant gender issues in the context of other socioeconomic factors. New vaccine guidelines also make reference to gender discrepancies.

2.3.2 The Annual Progress Report (APR) template for 2010 is under revision. The new form will aim to capture gender-related issues in immunisation coverage. Further, those countries that have disaggregated data by gender will be requested to provide it to GAVI.

2.3.3 The joint application form for funding through the Health Systems Funding Platform (HSFP) is nearing finalisation. Although agreement must be reached between all HSPF partners, the aim is to mainstream gender and equity considerations in the application.

### **2.4 Output 2.2: Independent Review Committees able to assess gender issues in country proposals and reports and conclude findings in report to the Board [GAVI Secretariat]**

2.4.1 Although no new criteria for review have been drafted for the monitoring or new proposals Independent Review Committees (IRCs), the IRCs are made aware that any gender discrepancies are to be reviewed and commented on.

2.4.2 The IRC membership will be reconstituted from 2011 with an open competitive bidding process. This will take into consideration new criteria including gender expertise.

## FOR INFORMATION

### **2.5 Output 2.3: Enhanced country capacity for sensitive planning in immunization, and health systems and uptake of new vaccines [WHO, UNICEF]**

2.5.1 The Comprehensive multi-year plans for immunization (cMYP) guidelines are due to be revised in 2011, and the modifications that relate to increase gender sensitivity will be included at this point. Already, review workshops being conducted in preparing for cMYP writing by countries consider gender balance in their approach.

### **2.6 Output 3.1: Gender perspectives considered in demand creation activities, communications (C4D) and service delivery [UNICEF]**

2.6.1 In 2009, UNICEF started to develop Operational Guidance documents to guide gender (Gender Equality and the Empowerment of Girls and Women) mainstreaming in all Focus Areas of the medium term strategic plan (MTSP), which will be launched prior to the end of 2010. Following the institutional gender evaluation conducted in 2007, a UNICEF Gender Task Force was established involving senior-level staff at the headquarters and regional levels to monitor the implementation of an action plan to follow-up on the evaluation's recommendations to more effectively mainstream gender in the organisation's work.

2.6.2 In 2009, UNICEF Immunisation Team appointed a gender focal point.

2.6.3 Gender equity is in the focus of UNICEF actions on reaching the un-immunised population.

2.6.4 UNICEF is a global leader in maternal and neonatal tetanus elimination programme with support from the GAVI Alliance. In 2009, UNICEF provided support to 19 countries to implement immunisation campaigns and assess progress towards elimination and 24 countries implemented tetanus toxoid (TT) supplementary immunisation activities (SIAs) targeting more than 35 million women in the most vulnerable areas of these countries.

2.6.5 UNICEF promotes sex-disaggregated data in its Multiple-Indicator Cluster Survey and in other surveys and data collection activities that it supports. As part of the country programming process, Country Offices conduct situation analyses on women and children. Furthermore, as part of its updated gender policy, UNICEF is setting an organisational minimum standard of collecting and utilising sex- and age-disaggregated data.

### **2.7 Output 3.2: Communications reflecting gender sensitive messages and harmonized with GAVI partners and other donors [GAVI Secretariat]**

2.7.1 In 2010, GAVI became a member of the Partnership for Maternal Newborn and Child Health (PMNCH), whose secretariat is hosted in WHO. GAVI was actively engaged in the development of the UN Secretary General's Global Strategy for Women and Children's Health, which was launched at the

## FOR INFORMATION

Millennium Development Goal summit in New York. The strategy advocates to global leaders, donors, private sector, and civil society for a greater commitment to maternal and newborn child health in order to accelerate progress towards the MDGs.

2.7.2 An internal, Secretariat-wide working group on women's health and maternal newborn and child health (MNCH) was established. The working group strengthens coordination within GAVI on women's health and MNCH through cross-team collaboration.

2.7.3 GAVI senior leadership participated at the Women Deliver Conference from 7-9 June 2010 in Washington DC. In addition, GAVI will participate in the plenary session at the PMNCH Partner's Forum Pledges to Action in New Delhi on 13-14 November 2010.

2.7.4 Two literature reviews were conducted to provide fact-based messaging for advocacy and communication around gender, in particular women's and maternal health. The first examined the impact of GAVI-specific antigens on women's health and, in particular, maternal health. The second identified how the platform of delivery services in immunisation is leveraged to provide maternal health services and reproductive health services to women. These are available on the GAVI website.

2.7.5 New publications with gender sensitive messages and a focus on women's health were published in print and on the web. They include a new publication, "Results and Opportunities," which highlights women's and maternal health, an updated HPV factsheet, a new factsheet on GAVI's contribution to protecting women's and children's health ("Protecting women's and children's health"), and materials on the contribution of vaccines to reaching the Millennium Development Goals ("GAVI and its role in achieving the Millennium Development Goals"), including gender-equity topics. A section of the Evidence Base publication, which was launched in March 2010, focused on Women and Immunisation.

2.7.6 Several press releases prepared by the GAVI Media and Communications Team in 2010 have placed women's health alongside children's as a priority for GAVI's programmes (for example, see [http://www.gavialliance.org/media\\_centre/press\\_releases/](http://www.gavialliance.org/media_centre/press_releases/) for press releases on the 6 October meeting; and Joint Financing Arrangement in Nepal). Gender was also a key component of the 50-panel photographic exhibition which was on display in Geneva for the month of September 2010 ahead of the MDG Summit and which explained the impact of vaccination to prevent disease in the world's poorest countries.

2.7.7 The GAVI style guide has been updated to include new explicit guidance on gender sensitive communications.

2.7.8 The GAVI Progress Report 2009 specifically promotes gender awareness/sensitivity and includes content related to women's health and

## FOR INFORMATION

gender issues, maternal health, and highlights the role of female health workers and women's involvement in civil society.

### **2.8 Output 4.1: Current male/female imbalance in the Board, its governance and advisory groups, corrected [Governance Committee and GAVI Secretariat]**

2.8.1 In June 2010, the GAVI Alliance Board approved the Gender Policy Guidelines on Board Composition and annexed them to the Gender Policy. The Guidelines aim to:

- 2.8.1.1 clarify the terms of the Governance Committee's mandate to bring the nominations process into compliance with the Gender Policy;
- 2.8.1.2 specify procedures for both the achievement and maintenance of a gender-balanced Board; and
- 2.8.1.3 set expectations for nominating entities.

### **2.9 Output 4.2: All Board documents are gender sensitive [GAVI Secretariat]**

2.9.1 As part of the Gender Policy implementation plan, the GAVI Secretariat will put in place a technical support system for easy access of the GAVI Secretariat to gender and health expertise. As described under Output 4.3 below, the Secretariat has launched an RFP for this technical support ("Gender Help Desk") in November 2010. As part of the Terms of Reference for the Gender Help Desk, the service provider will screen Board and Board Committee documents, as well as other documents and publications produced by the GAVI Secretariat, for gender sensitivity.

### **2.10 Output 4.3: Technical support system in place for easy access to gender and health expertise [GAVI Secretariat]**

2.10.1 In 2009 the Secretariat drafted Terms of Reference for a Gender Help Desk to provide technical support on gender and health issues. However, the RFP was delayed until the second year of implementation of the policy to allow for a better assessment of needs within the Secretariat and by partner agencies.

2.10.2 As described above, a request for proposals for the Help Desk was launched in November. The contract will be in place and the first component of the work underway before the end of the year.

2.10.3 The firm selected will provide a range of gender-related services, including conducting a scoping exercise of GAVI Secretariat needs in relation to gender and developing activities for 2011, including a training plan to address staff needs in this area. Further, the Gender Help Desk will review new research results on gender and immunisation issues and provide regular updates to the Secretariat.

## FOR INFORMATION

### **2.11 Output 4.4: Ensure gender sensitive human resource policies and workforce [GAVI Secretariat]**

2.11.1 Human resource policies and guidelines have been designed to include gender aspects. More specifically, GAVI's human resources policies make explicit that sexual harassment and discrimination based on gender is not tolerated and would be grounds for dismissal. Also, any internal committees and processes now require a gender balance; e.g., Selection Panels for new recruits. (For annual human resource statistics disaggregated by sex see Annex 2).

### **2.12 Output 4.5: Accountability, monitoring and evaluations systems in place for the Gender Policy implementation [GAVI Secretariat]**

2.12.1 The evaluation of the Gender Policy is part of the evaluation multi-year plan and is planned for 2011/12. For prospective monitoring, means of verification of each output in the implementation plan have been identified and are described in the matrix. The Monitoring & Evaluation team unit is responsible for ensuring these are appropriately reported. Further, gender equity will be tracked through monitoring indicators being developed for performance monitoring of the 2011-2015 GAVI Alliance Strategy. All indicators that can be disaggregated by sex will be disaggregated by sex.

### **Annexes**

Annex 1: GAVI Alliance Gender Policy Implementation Plan (2009-2010)

Annex 2: Gender by Career Step within the GAVI Secretariat

## FOR INFORMATION

### ANNEX 1: GAVI Alliance Gender Policy Implementation Plan (2009 – 2010)

Outputs	Time	Verification	Activities	Responsible
<b>Outcome 1</b> linked to Gender Policy strategic direction 1 <b>New evidence on gender issues in relation to immunization coverage and access to health services generated, reported and analysed</b>				
1.1. Review on gender and immunization implemented	2009 2010	Report to SAGE  SAGE review and position  Publication	i) Review and analyse data / information on <ul style="list-style-type: none"> <li>- evidence on sex differences in vaccination coverage and VPD burden of disease</li> <li>- gender dimensions of delivery of immunisation services</li> <li>- feasibility of collecting sex disaggregated data in immunisation routine reporting</li> <li>- feasibility of survey data collation and presentation to address gender related barriers.(DHS and MICS data)</li> <li>- gender aspects relating to introduction of GAVI supported new vaccines and to new age groups</li> </ul>	WHO
<b>Outcome 2</b> linked to gender policy strategic direction 2 <b>Gender sensitive funding and policies in place</b>				
2.1. Current guidelines, proposals, annual reporting forms incrementally changed to include gender dimensions	2009	Update letter and revised proposal forms	i) Sensitize countries about gender perspectives in HSS proposals through an update letter	GAVI Secretariat (Country Support)
	2009	Instructions for APRs	ii) Format Annual Progress Reports to ask for available information on gender relevant questions	
2.2.	2010	IRC reports to	i) Develop additional review criteria for the three IRCS	GAVI Secretariat

**FOR INFORMATION**

<b>Outputs</b>	<b>Time</b>	<b>Verification</b>	<b>Activities</b>	<b>Responsible</b>
Independent Review Committees able to assess gender issues in country proposals and reports and conclude findings in report to the Board		Board		(Country Support)
			ii) Ensure competence among IRC members	
2.3. Enhanced country capacity for sensitive planning in immunization, and health systems and uptake of new vaccines	2010	Reports to Secretariat	i) GAVI supported trainings and meetings (regional. GIM, etc) include a gender component	WHO, UNICEF
		cMYP guidelines	ii) Revise cMYP guidelines to include gender information	
<b>Outcome 3 linked to Gender Policy strategic direction 3 Advocacy for gender equality used as a means to improve immunization coverage and access to health services</b>				
3.1. Gender perspectives considered in demand creation activities, communications (C4D) and service delivery	2010	Analysis and strategy documents	i) Integrate gender perspectives into situation analysis	UNICEF
			ii) Integrate gender perspectives into communications strategies	
3.2. Communications reflecting gender sensitive messages and harmonized with GAVI partners and other donors	2009	<ul style="list-style-type: none"> <li>- Publications</li> <li>- Speeches</li> <li>- Briefing notes</li> <li>- Press clips</li> <li>- Web site</li> <li>- Outreach material</li> </ul>	i) Articulate gender in key GAVI messages, Web presence, media briefings, and press releases	GAVI Secretariat (External Relations)
			ii) Include gender messaging guidance in Style Guide, and ensure gender sensitivity in GAVI Progress report 2008 and 2009, and other publications	

**FOR INFORMATION**

Outputs	Time	Verification	Activities	Responsible
			iii) Include gender in briefing notes and speeches for the Executive office	
			iv) Include gender in private philanthropy fundraising communication materials	
<b>Outcome 4 linked to Gender Policy chapter 5</b> <b>GAVI alliance structures introduced gender sensitive approaches</b>				
4.1. Current male/ female imbalance in the Board, its governance and advisory groups, corrected	2009	GC report to Board	i) Revise charter for GC to be responsible for monitoring of gender balance in Board committees and advisory groups	Governance Committee and GAVI Secretariat (Executive Office)
			ii) Monitor and change, male/ female balance when committees and advisory groups are reappointed	
4.2. All Board documents are gender sensitive	2009	Review of Board documents	i) Revise guidelines for board submissions and train staff accordingly	GAVI Secretariat (Policy)
4.3. Technical support system in place for easy access to gender and health expertise	2010	Help Desk arrangement	i) Design ToR and commission contract for external Help Desk to provide technical support to Secretariat	GAVI Secretariat (Executive Office)
			ii) Set up help desk arrangement and support staff to use as required. Activities to include: <ul style="list-style-type: none"> <li>- Technical advice</li> <li>- Screening of documents</li> <li>- Monitoring of global debate and new research</li> <li>- Summarise lessons learnt</li> <li>- Support integration of gender in 2011-2012 work plan</li> <li>- Other activities as necessary</li> </ul>	

**FOR INFORMATION**

<b>Outputs</b>	<b>Time</b>	<b>Verification</b>	<b>Activities</b>	<b>Responsible</b>
4.4. Ensure gender sensitive human resource policies and workforce	2009	Annual HR report	i) Design HR policies and guidelines to be explicit on gender aspects	GAVI Secretariat (Human Resources)
		HR policies and guide-lines	ii) Disaggregate annual HR statistics by sex, diversity and professional levels	
			iii) Integrate gender issues in management lines, tools and responsibilities	
			iv) Implement general and specialised gender training for staff	
4.5 Accountability, monitoring and evaluations systems in place for the gender policy implementation	2009-2010	Executive team minutes/  GAVI progress Report chapter on gender	i) Design evaluation plan and indicators for base line and monitoring for evaluation in 2012.	GAVI Secretariat (Policy)

## FOR INFORMATION

### ANNEX 2: Gender by Career Step within the GAVI Secretariat

