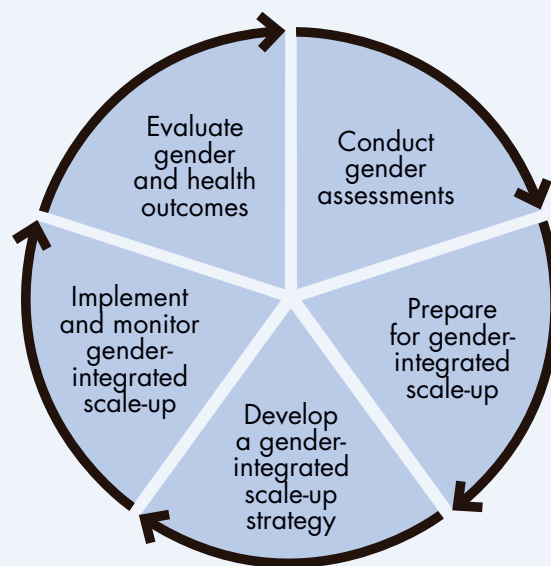# policy

PROMOTING GENDER EQUALITY IN SCALE-UP INITIATIVES

Brief

To achieve the greatest possible improvement in family planning (FP) and maternal, neonatal, and child health (MNCH) outcomes, successful interventions, practices, and approaches must be "scaled up"—that is, implemented on a larger scale and incorporated into the laws, policies, and structures that govern health systems. Gender equality is central to successful and sustainable scale-up because it significantly influences health outcomes, and many barriers to program scale-up are related to inequitable gender norms.

The Health Policy Project's Gender, Policy, and Measurement program (GPM) has designed an approach to help countries advance the systematic integration of gender equality into the scale-up of FP/MNCH interventions and best practices. The approach draws heavily on the process for integrating gender equality into programs and policies—the steps of which are illustrated in Figure 1.

Figure 1: Steps to Integrate Gender Equality in Scale-Up

- Conduct gender assessments
- Prepare for gender-integrated scale-up
- Develop a gender-integrated scale-up strategy
- Implement and monitor gender-integrated scale-up
- Evaluate gender and health outcomes

Scale-Up Approach: Promote Gender Equality

Step 1: Assess

After an intervention has been tested and shown to be effective in achieving the desired outcomes and a decision has been made to scale it up, the scale-up team should undertake efforts to enhance the scalability of the intervention. Assessing the intervention and the environment in which the intervention will be scaled up should be an integral part of this process. Three actions are described below to assess the scalability of an intervention through a gender equality lens.

Conduct a gender assessment. Identify gender-related barriers and opportunities relevant to scale-up to inform decisions about which interventions are scaled up and how and to guide development of the scale-up roadmap (see Step 3).

Apply gender criteria for assessing the scalability of best practices. Prior to scale-up, apply a tool to assess an intervention in terms of its influence on gender equality and gender outcomes to ensure that women's and men's specific needs are met, barriers to accessing health services are overcome, and opportunities for promoting gender equality are taken advantage of. Ask questions such as: Do the results show the intervention has a positive impact on gender equality? What components of the intervention may need to be adapted to fit the local gender context?

> **Gender equality** means equal opportunity for women and men of all ages to access and use resources and services within families, communities, and society, including deriving equal benefit from laws and policies and possessing equal decision-making power (WHO, 2008).

Identify critical gender factors that lead to successful implementation of best practices. Assess the environment in which the pilot project was implemented to identify gender-related factors that may have been essential to the project's success and therefore need to be in place, recreated, or substituted to effectively scale up best practices. These could include contextual factors such as men's support for family planning or women's control of household finances, cultural norms that encourage men's participation in MH programs, or a supportive policy environment that upholds women's rights. They might also include features of the program itself, such as engaging men or religious leaders in support of FP.

Step 2: Prepare for scale-up

Scaling up interventions requires different technical, management, and resource inputs than implementing pilot or small-scale interventions. A strong resource team [i.e., individuals and organizations responsible for promoting and guiding scale-up efforts (ExpandNet/ WHO, 2010)] is crucial to ensuring these inputs are available and in place during scale-up. Likewise, the resource team is the key group responsible for integrating gender equality throughout the scale-up process. The following actions can help ensure the resource team is capable of addressing gender equality during planning and implementation.

Form a diverse resource team with a broad range of stakeholders. Form a diverse planning team including representatives of women's and men's groups and vulnerable populations. Avoid treating women and men as homogeneous groups, instead ensuring that the team reflects diversity of age, ethnicity, sexual orientation, disability, and other relevant characteristics.

Provide gender integration training, support, and team building. Support the scale-up team in accessing gender training to increase awareness of the benefits of gender integration and improve skills for integrating gender into scale-up.

Step 3: Develop a scale-up strategy

A scale-up strategy refers to the plans and actions necessary to fully establish a health intervention in programs, policies, and systems (see ExpandNet/

Country Example: Nepal

GPM has partnered with the Suaahara Project in Nepal to design, implement, and evaluate a scalable capacity-strengthening intervention for Health Facility Operation and Management Committees. GPM and Suaahara will provide gender equity and social inclusion (GESI) sensitization training to all staff and partners engaged in the projects' scale-up efforts. The goal of the training is to increase awareness, motivation, and commitment toward improving gender equality and social inclusion.

WHO, 2010). Below are key actions to ensure opportunities to promote gender equality are not overlooked as the team develops the scale-up strategy.

Develop gender equality objectives for scale-up efforts. Use the results of the gender assessment to develop concrete gender equality objectives to be accomplished during scale-up. This will help sustain focus on gender throughout the scale-up process and hold program managers and staff accountable for gender equality commitments. Examples of gender equality objectives include an increased number of men attending FP services; an increased participation of women in national-level MCH advocacy efforts; and a decreased number of community members condoning violence against women and girls.

Map strategies to address gender-based constraints and opportunities. Use the results of the gender assessment to conduct a mapping exercise to identify how and when to address gender-based constraints and opportunities and reduce gender inequality during scale-up. The mapping exercise should outline the anticipated scale-up phases (e.g., pilot test, national-level advocacy, training, adaptation, and expansion to other geographic areas); identify gender equality issues relevant to each phase (e.g.,

women's limited decision-making power, lack of female health providers, community beliefs that a man's role in antenatal care is limited to providing financial support, and laws that limit women's autonomy); and develop strategies to address barriers to gender equality at each phase to create an enabling environment for change.

Identify necessary adaptations of a best practice to fit the gender context. When expanding a health intervention to other geographic locations or target populations, apply the results of the gender assessment to determine what adaptations may be needed to ensure the model adequately addresses gender inequality issues relevant to the new locations or target populations. For example, many women worldwide prefer female health providers to insert intrauterine devices (IUDs) and will not adopt the method from a male provider. Therefore, when introducing an intervention to promote IUDs, it would be important to assess the acceptability of male providers and availability of qualified female health providers to insert the method.

Mobilize political commitment and financial resources. Securing adequate political commitment and financial resources is essential to ensuring that interventions are sustained. Yet, while many governments have made commitments to promoting gender equality, such political commitment has rarely translated into increased resources or funding for gender-responsive programming (Grown et al., 2006). Therefore, the scale-up team will need to use advocacy to engage decisionmakers and mobilize political support and resources for gender-integrated programs.

Step 4: Implement and monitor

Implementing scale-up means putting into effect the plans and activities outlined in the strategy to scale up a health intervention. Monitoring refers to routine tracking of a program's activities by measuring whether planned activities are being carried out and assessing progress toward program objectives (Adamou et al., forthcoming). Integrating gender equality into scale-up implementation and monitoring can be achieved through the following actions described below.

Make the scale-up process participatory and inclusive. Establish feedback mechanisms to enable proper monitoring from a broad range of stakeholders—such as women's and men's groups, youth, indigenous organizations, and midwives associations—and to ensure that necessary adjustments can be identified.

Develop a monitoring plan. Use the results of the gender assessment to develop a monitoring plan to better understand how gender factors influence the process and outcomes of scale-up. Include not only sex disaggregated data to monitor how the intervention is influencing women and men differently and importantly, but also indicators to monitor progress toward gender equality outcomes.

Step 5: Evaluate

"Evaluation is a process of determining systematically and objectively the relevance, effectiveness and impact of interventions in relation to their objectives" (Adamou et al., forthcoming). Overall, little evidence exists on how efforts to promote gender equality influence the scale-up process and outcomes. Program planners and implementers have an important role in building the evidence base for gender integration and scale-up so health decisionmakers worldwide can better understand how to design, implement, and monitor scale-up efforts that will lead to equitable and more sustainable health outcomes.

Measure gender equality and female empowerment outcomes. Evaluators should develop an evaluation plan to include gender-specific indicators and benchmarks, as well as to collect sex-disaggregated data. Although global gender indicators exist, it is important to adapt those indicators to the context to ensure they are relevant. Evaluations can explore both the impact of gender equality on the process of scale-up as well as the impact of the intervention on health and gender equality.

Country Example: Nepal

GPM and Suaahara are collaborating to strengthen the capacity of local health management committees to address gender equity and social inclusion for high-quality health services. To monitor how the capacity-strengthening intervention is influencing women's and men's participation in local health management committees differently, the project will conduct periodic observations of the meetings and assess the quality of participation by women and men. The monitoring data will be used to further refine and improve the intervention approach.

For more details, see the longer report, Approach for Promoting and Measuring Gender Equality in the Scale-Up of Family Planning and Maternal, Neonatal, and Child Health Programs. Available at: www.healthpolicyproject.com.

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