HEALTH POLICY PROJECT

An Evaluation of Gender Mainstreaming by the Ministry of Public Health in Afghanistan to Make Health Policies and Services People-Centered

Presented by

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Conceptual Framework Showing Gender Mainstreaming in Health



PROBLEM IDENTIFICATION

Gender inequity is prevalent in Afghanistan

Afghanistan National Development Strategy (ANDS) (2008–2013) developed by the government, highlights the following actions to address gender inequity

- Improve gender equity within each ministry's work environment
- Support women's shuras (community groups)
- Establish Ministry of Women's Affairs as a lead ministry for women's advancement

National Action Plan for the Women of Afghanistan (NAPWA) (2007–2017) developed by the Ministry of Women's Affairs (MoWA)

Mandates all ministries to have a gender



- The government of Afghanistan emphasizes the importance of gender equity overall and in improving the health status of its people.
- The Afghanistan National Development Strategy (ANDS) and the National Action Plan for Women in Afghanistan (NAPWA) mandate that all ministries have gender departments, improve gender equity internally, and integrate gender into their functioning.
- This outcome evaluation highlights the Ministry of Public Health's (MoPH) success and challenges in mainstreaming gender.

METHODOLOGY

- Case study methodology
- Review of documents
 - Gender strategies
 - Implementation plans
 - Annual reports

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HOW HAS THE IMPLEMENTATION OF THE NATIONAL GENDER STRATEGY IMPROVED GENDER MAINSTREAMING?

- There is greater awareness of the need for gender integration within the MoPH.
 - Financing, programming, and data collection and use
- Healthcare providers are using their knowledge of GBV to diagnose, treat, and refer clients.
- Religious leaders are counseling their congregations on the ill effects of GBV.
- As a result of the pilot intervention clients in some facilities across two provinces are receiving comprehensive GBV care.

NEXT STEPS

Continue to integrate gender into MoPH health policies and programs.

- department
- Encourages all gender departments to develop a five-year implementation strategy

Ministry of Public Health (MoPH) implemented ANDS and NAPWA in 2010

- The Gender Unit of MoPH was established under the Reproductive Health Department
- The Gender Unit was raised to Directorate status in 2010
- A five-year National Gender Strategy (NGS) and corresponding Implementation Plan were developed in 2010 to better integrate gender into health policies and programs

The Gender Directorate of MoPH presented clear objectives in the National Gender

- Key informant interviews with
 - Ministry of Women's Affairs (MoWA)
 - Ministry of Public Health (MoPH)
 - Donors and implementing partners that support gender mainstreaming
 - MoPH departments
 - Provincial Public Health Directorates (PPHDs)
- Improve gender mainstreaming through advocacy and training of healthcare providers and implementers.
- Through IEC messaging, raise awareness of the population on gender barriers to health and encourage the use of healthcare services.

Achievements Made in Gender Mainstreaming in Health

IMPLEMENTING STRATEGIC DIRECTION 1

(Work with all MoPH programs to incorporate a gender perspective)

- The Gender Directorate conducted capacity assessments of four MoPH departments to determine their awareness of the NGS, document how they're integrating gender, and identify areas for improvement
 - The directorate is working with the departments to identify and address gender-based barriers to health programming
- The Gender Directorate and Finance Department are working together to implement gender-responsive budgeting for the entire MoPH on an annual basis

IMPLEMENTING STRATEGIC DIRECTION 2

(Advocate that all administrative policies and procedures of the MoPH are gender equitable)

- The Gender Directorate reviewed a selection of MoPH human resources (HR) policies to look for gender-sensitive language
 - The Gender Directorate is working with the HR Department to make HR policies more gender-sensitive
 - The Gender Directorate and HR Department are working together to ensure equal opportunities for women to be hired and retained
- The Gender Directorate is also reviewing other MoPH policies and guidelines for gender-sensitive language

Strategy (NGS) to integrate gender into health policies and programs

- Strategic Direction 1: Work with all MoPH programs to incorporate a gender perspective
- Strategic Direction 2: Advocate that all MoPH administrative policies and procedures are gender equitable
- Strategic Direction 3: Work to ensure that women and men have equal access to health services that are free from discrimination and that address gender-based violence
- Strategic Direction 4: Create gender-sensitive indicators for all health programs, monitor them, and evaluate programs accordingly

IMPLEMENTING STRATEGIC DIRECTION 3

- (Ensure that women and men have equal access to health services)
- Pre-service and in-service trainings of healthcare providers are being conducted by the Gender Directorate using the following
 - Gender and reproductive rights curriculum
 - GBV training manual for healthcare providers
 - Gender-awareness training manual
- A pilot intervention to integrate GBV services into other existing trainings being administered by the MoPH is ongoing
- Information, education and communication (IEC) messages related to gender and reproductive rights are being disseminated by the Gender Directorate through radio programs, banners, and posters that will be distributed in healthcare centers
 - The IEC messages address norms around health-seeking behavior, nutrition, education, and GBV

IMPLEMENTING STRATEGIC DIRECTION 4

(Create and monitor gender-sensitive indicators)

- Gender has been integrated into quality assurance tools for health facilities
- The Gender Directorate is analyzing gender-sensitive monitoring data from routine MoPH monitoring tools to advocate for addressing gender differences in disease prevalence and gender barriers in utilizing healthcare services
- The Gender Directorate is advocating to integrate more gender-sensitive facility-level indicators across MoPH monitoring tools through the health mangement information system (HMIS), monitoring and evaluation (M&E), and Grants Control Management Unit (GCMU) Departments





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