



Report to the GAVI Alliance Board

4-5 December 2012

Subject:	Fourth annual report on implementation of the Gender Policy
Report of:	Helen Evans, Deputy CEO
Authored by:	Meegan Murray-Lopez, Senior Executive Officer
Agenda item:	Annex A
Category:	For Information
Strategic goal:	Affects all strategic goals

Section A Overview

1 Purpose of the report

- 1.1 The purpose of this report is to update the GAVI Alliance Board on progress in 2012 in implementing the GAVI Alliance Gender Policy.

2 Recommendations

- 2.1 This report is for information only.

3 Executive Summary

- 3.1 Since the last annual update to the Board, the internal GAVI Gender Working Group has implemented a work plan of gender activities for 2012 and has reported on those activities to the Executive Team and the Board on MyGAVI on a quarterly basis.
- 3.2 Key activities in 2012 related to strengthening awareness and understanding on gender and immunisation within the Secretariat and Independent Review Committee panels, strengthening approaches to gender within GAVI programming, and incorporating gender into GAVI's media and advocacy activities.
- 3.3 The GAVI Alliance Board became compliant with the Board Guidelines on Gender Balance for the first time in April 2012 when it reached a 60/40 ratio of male and female Board members and Board Alternates. However, the next round of nominations to be approved by the Board in December may modify this ratio.
- 3.4 Each IRC panel in 2012 included a gender and equity expert, who reviewed the proposals or annual progress reports with a gender lens and prepared detailed recommendations on gender.

- 3.5 An external evaluation of the Gender Policy is currently in its final stages and will be provided to the Board in early 2013. Based on the results, the Alliance may consider revising the policy in 2013 and the Secretariat has budgeted for this policy work.

4 Risk implication and mitigation

- 4.1 The Gender Working Group is planning to carry out a risk assessment related to the implementation of the Gender Policy in 2013.

5 Financial implications: Business plan and budgets

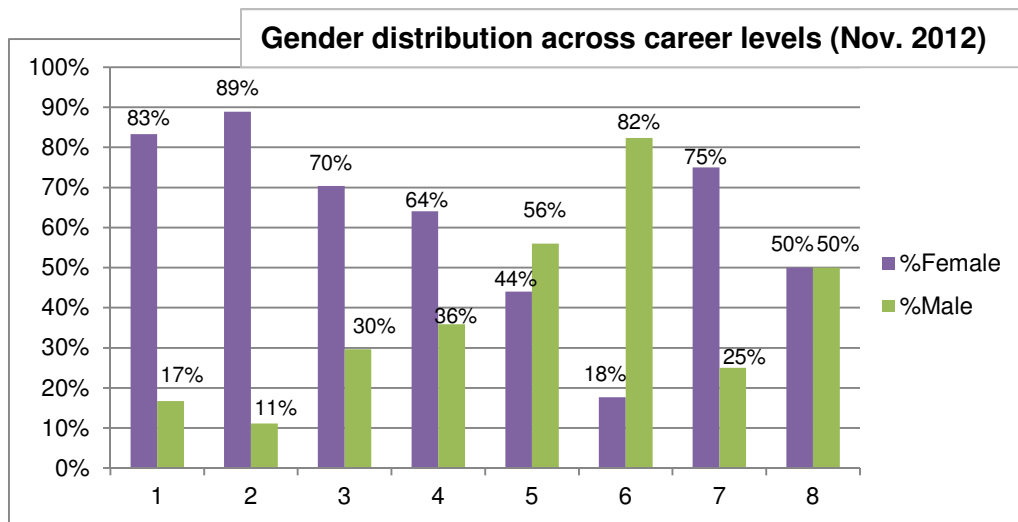
- 5.1 Funding for the implementation of the Gender Policy for 2013-14 has been included in the Mission Support and Policy budget lines.

Section B Content

1 Gender and the Secretariat

- 1.1 In 2012, the internal GAVI Gender Working Group ('GWG') took on the gender functions that had been performed by an external consulting firm in 2011 (the 'Gender Help Desk') on the basis that there was now sufficient capacity on gender within the GWG to do so.
- 1.2 The GWG is comprised of staff from each department as well as Staff Council and Human Resources. The group meets on a monthly basis and is chaired by a Senior Executive Officer in the Executive Office.
- 1.3 In 2012 the GWG implemented a plan of activities that included 30 activities on gender. Key activities included:
- (a) Ongoing training activities such as conducting new staff orientation sessions on gender and immunisation, and providing information sessions on gender for all IRC panels;
 - (b) Designing and implementing a new, more gender-sensitive parental leave approach, which makes primary carer leave (16 weeks) available to female or male staff;
 - (c) Programmatic policy-related activities such as engaging in the policy development process for the proposed Country-by-Country approach (see Doc 12), which includes gender as a part of the equity indicator;
 - (d) Advocacy-related activities such as incorporating gender within the development of, or updates to, leadership communications, GAVI publications and websites, including the GAVI Progress Report, Factsheets on Gender, Equity, and HPV; and
 - (e) Conducting a gender review of communication materials and interviews with relevant staff as part of developing photographer and writer guidelines on gender, and in preparation of communications training on gender.

- 1.4 As part of the Business Plan reporting process in 2012, a Key Performance Indicator on Gender was reported to the Executive Team and Board on MyGAVI each quarter. The KPI tracks the percentage of activities in the Gender Working Group plan of activities that are completed on time. The latest result on this KPI for Quarter 3 was 93% of activities completed on time.
- 1.5 The Human Resources team monitors statistics on gender within the Secretariat. Currently the Secretariat staff is 63% female and 37% male. The breakdown of gender across career levels within the Secretariat is also monitored (see figure below). The Secretariat reflects some typical patterns with respect to gender and career levels, as seen in many organisations; e.g., having many female staff in the administrative levels (1-2) and an increasing proportion of male staff in the higher levels. However, the Secretariat does have an atypical gender balance at the Executive Team level, as 75% of Managing Directors (level 7) are female.



2 Gender and GAVI programming

- 2.1 **Study on gender and immunisation.** In 2010, GAVI funded a comprehensive review by WHO that generated evidence on gender and immunisation. The study showed that globally there are no significant differences in immunisation coverage between boys and girls. However, differences in coverage favouring either boys or girls are found in some countries and groups. The study also found that in societies where women have low status, their children – both girls and boys – are less likely to be immunised. According to the study, health service providers can improve immunisation coverage by better understanding and considering the barriers that women face in accessing immunisation and other health services for their children. These findings underpin GAVI's programmatic approach on gender, which focuses on using health systems

strengthening funding to address gender-related barriers to accessing vaccination.

- 2.2 **Health systems strengthening.** Countries applying for health systems strengthening funding from GAVI are requested to conduct a gender analysis and to identify any gender-related barriers to accessing vaccination. An information note on gender-related barriers was developed to accompany the guidelines for HSFP funding. In the 2013-14 Business Plan, it has been proposed that gender is included in programme objective 2.1.2 on health systems strengthening.
- 2.3 **Application materials.** The application materials and guidelines for health systems strengthening and new vaccines (including new guidelines for HPV and rubella) were revised in 2011 and 2012 to include more detail for countries on what level of gender-related information and analysis is required. The annual progress report (APR) form has also been revised to request countries to provide sex-disaggregated data.
- 2.4 **Increased focus on equity, including gender equity.** In 2012, gender has been progressively incorporated into the broader GAVI approach on equity.
- (a) The Country-by-Country Framework, which has been provided to the Board for consideration and approval at this meeting (Doc 12), aims to identify countries with gender differences in immunisation coverage as outlined in the inclusion criteria for countries with equity concerns, along with wealth and geographic inequities.
 - (b) In addition, in the proposed 2013-14 Business Plan, UNICEF will lead on work to improve equity in 10 countries (programme objective 2.2.1). UNICEF, working with partners, will lead rapid coverage assessments and action planning across these countries and focus on re-programming HSS grants and supporting implementation. It has been proposed that gender is included as one of three equity considerations, together with wealth and geography.
- 2.5 **Strengthened Country Support Team.** In 2012 the number of Country Responsible Officers (CROs) has increased. Each CRO will be responsible for a smaller number of countries and better able to respond to individual country needs, facilitate in-country co-ordination and conduct real time monitoring and feedback to countries. Several of the new tools designed to support CROs in their strengthened role include gender components, such as the CRO country visit framework.

3 Gender and other GAVI Alliance structures

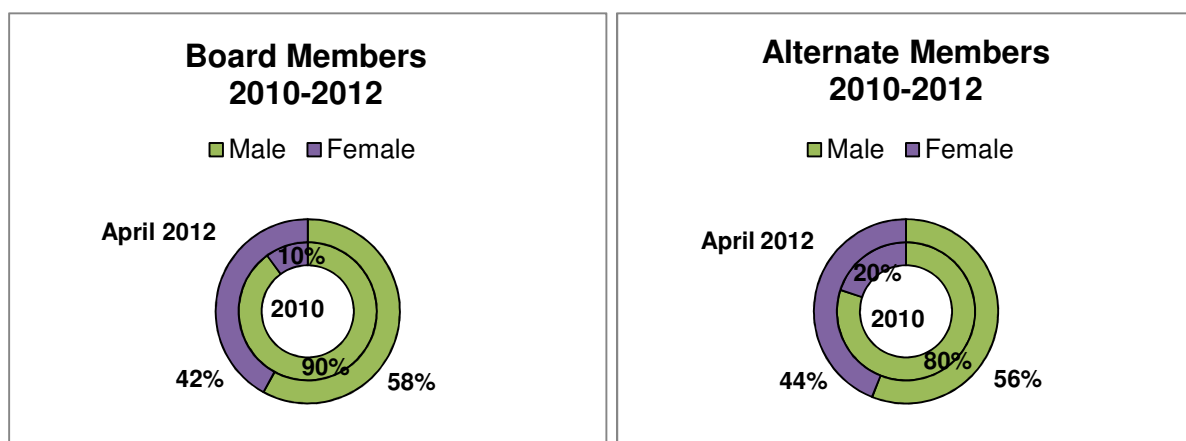
Independent Review Committees (IRCs)

- 3.1 **Gender information sessions.** All IRC panels in 2012 received information sessions on gender and immunisation as part of the IRC pre-briefings.

- 3.2 **Gender expert function.** All IRC panels in 2012 included a gender expert, who reviewed proposals and APRs with a gender lens and prepared an analysis of gender-related content.
- 3.3 **Gender balance.** In 2011, for the first time, the Monitoring IRC was composed of 50% male and 50% female reviewers. The July 2012 IRC maintained the gender balance, again with a 50-50 split. The Secretariat also endeavoured to achieve gender balance on the other IRC panels in 2012.
- 3.4 IRC reports and recommendations.
- (a) Revise gender questions. All IRC panels in 2012 recommended that the Secretariat review the wording of the gender questions in both the proposal and annual progress report forms.
 - (b) Linkage to health systems strengthening interventions. The HSFP IRCs noted that while some countries had conducted gender analyses and identified gender-related barriers, those countries had not then linked their analysis to specific interventions. It was recommended that the Secretariat consider what kind of additional technical support could be provided to countries to make this linkage. These recommendations will be followed up by the Secretariat.
 - (c) Sex-disaggregated data. The 2012 Monitoring IRC report included an analysis of the responses to the gender questions in the 2011 APRs. At this stage, only 20% of countries were in a position to provide sex-disaggregated data as requested in the forms.

Gender and the GAVI Alliance Board

- 3.5 **Board papers.** The template for Board and Board Committee papers contains a dedicated section on gender implications.
- 3.6 **Board composition.** The Guidelines on Board Gender Balance require that the Board establish and maintain a 60/40 ratio of male to female Board Members and Alternate Members.
- (a) In April 2012, the Board became compliant with the Guidelines with 58% male and 42% female Board Members and 56% male and 44% female Board Alternates. However, the next round of nominations to be approved by the Board in December may modify this ratio.
 - (b) The charts below show the change in composition of Board and Board Alternates from the time the Guidelines were approved in 2010 until April 2012.



4 Evaluation of the Gender Policy

- 4.1 The Gender Policy specifies that a full external review of the policy and its implementation should be conducted in 2012.
- 4.2 The Secretariat conducted a competitive process and selected the firm ICF Macro. The evaluation will focus on the Gender Policy's rationale, design, implementation and results, and assesses the extent to which planned activities were implemented, outputs delivered and outcomes attained.
- 4.3 The evaluation report, once finalised and reviewed by the Evaluation Advisory Committee, will be provided to the Board in early 2013.

Section C Implications

1 Impact on countries

- 1.1 Countries applying for funding through the HSFP are requested to provide an analysis of gender-related barriers to accessing services. Countries submitting APRs are also requested to provide any sex-disaggregated data they have from the past three years.

2 Impact on GAVI stakeholders

- 2.1 In 2012, the Secretariat engaged with GAVI Alliance partners on the subject of gender through its consultations on the the Country-by-Country approach. The Secretariat expects additional engagement with partners on upcoming equity work, as described in the Business Plan for 2013, that will include a gender component.
- 2.2 Partners were also requested to participate in interviews for the evaluation of the Gender Policy.

3 Impact on Secretariat

- 3.1 As flagged in the last annual update to the Board in November 2011, the topic of gender-related barriers to accessing immunisation is complex, and staff awareness and capacity to deal with these matters is gradually increasing. This is being addressed through regular information sessions on gender as part of the orientation program for new staff as well as through team-specific discussions.

4 Legal and governance implications

- 4.1 Not applicable

5 Consultation

- 5.1 Not applicable

6 Gender implications

- 6.1 This report is an update to the Board on the GAVI Gender Policy.