



USAID
FROM THE AMERICAN PEOPLE

USAID
ASSIST PROJECT
*Applying Science to Strengthen
and Improve Systems*

Gender considerations are critical to improving quality of care

Dr. Taroub Harb Faramand

Founder and President

WI-HER, LLC

ASSIST Project

April 27, 2017

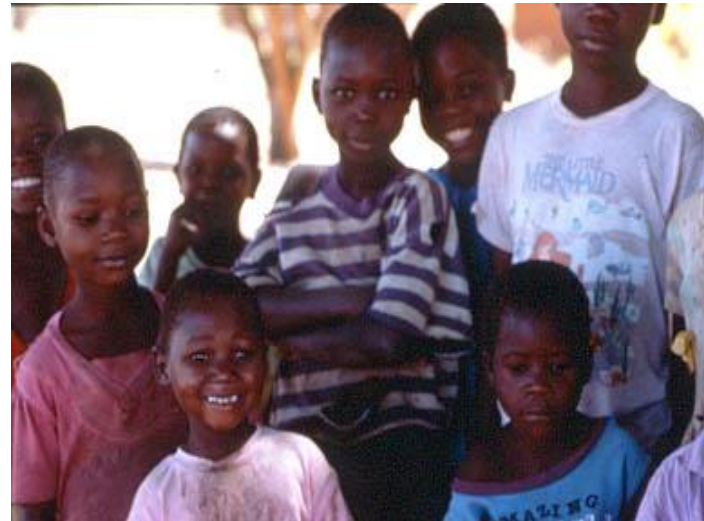
DEFINING GENDER AND RELATED CONCEPTS

Gender & Sex



What is **gender**?

What is **sex**?



Sex

A medical term used to refer to the chromosomal, hormonal, and anatomical characteristics that are used to classify an individual as female, male or intersex



Intersex: An umbrella term that refers to a variety of chromosomal, hormonal, and anatomical conditions in which a person does not seem to fit the typical definitions of female or male.



Gender Expression

The external display of one's gender, through a combination of appearance, disposition, social behavior, and other factors, generally measured on a scale of masculinity and femininity.



Gender norms: A culturally-defined set of roles, responsibilities, rights, entitlements, and obligations, associated with being female and male, as well as the power relations between and among women and men, boys and girls.





USAID
FROM THE AMERICAN PEOPLE

USAID
ASSIST PROJECT

*Applying Science to Strengthen
and Improve Systems*

Why Gender?

Why consider gender in improvement work?

- Gender norms and inequalities, and Gender-Based Violence (GBV) affect health outcomes for all people
- Enjoying the highest attainable standard of health is a human rights issue
- Understanding the unique needs and vulnerabilities of all people helps us identify target populations, tailor responses and dedicate resources where they are most needed

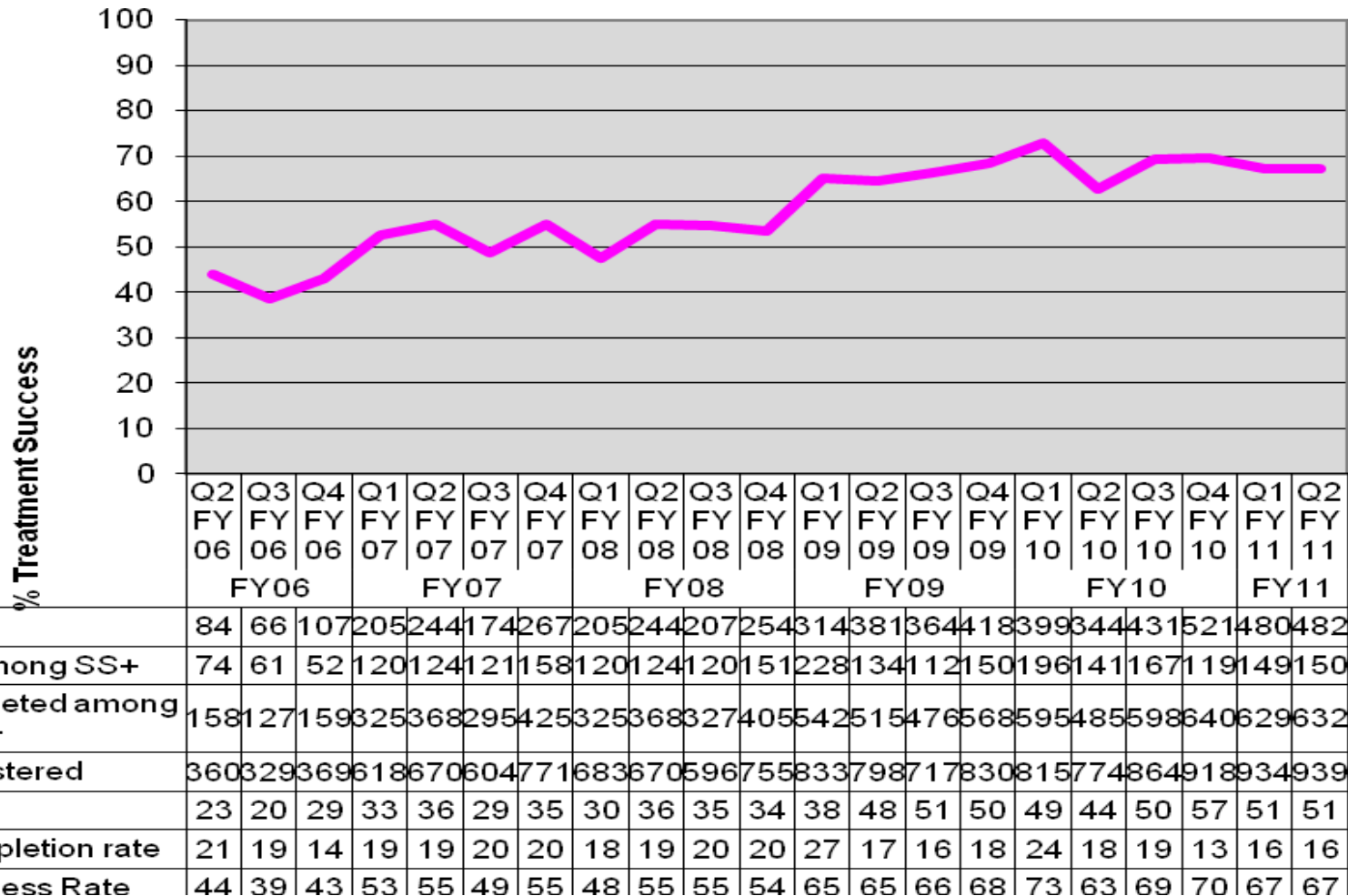
Make sure we are doing the right things at the right time for every person, every time

Improvement Results

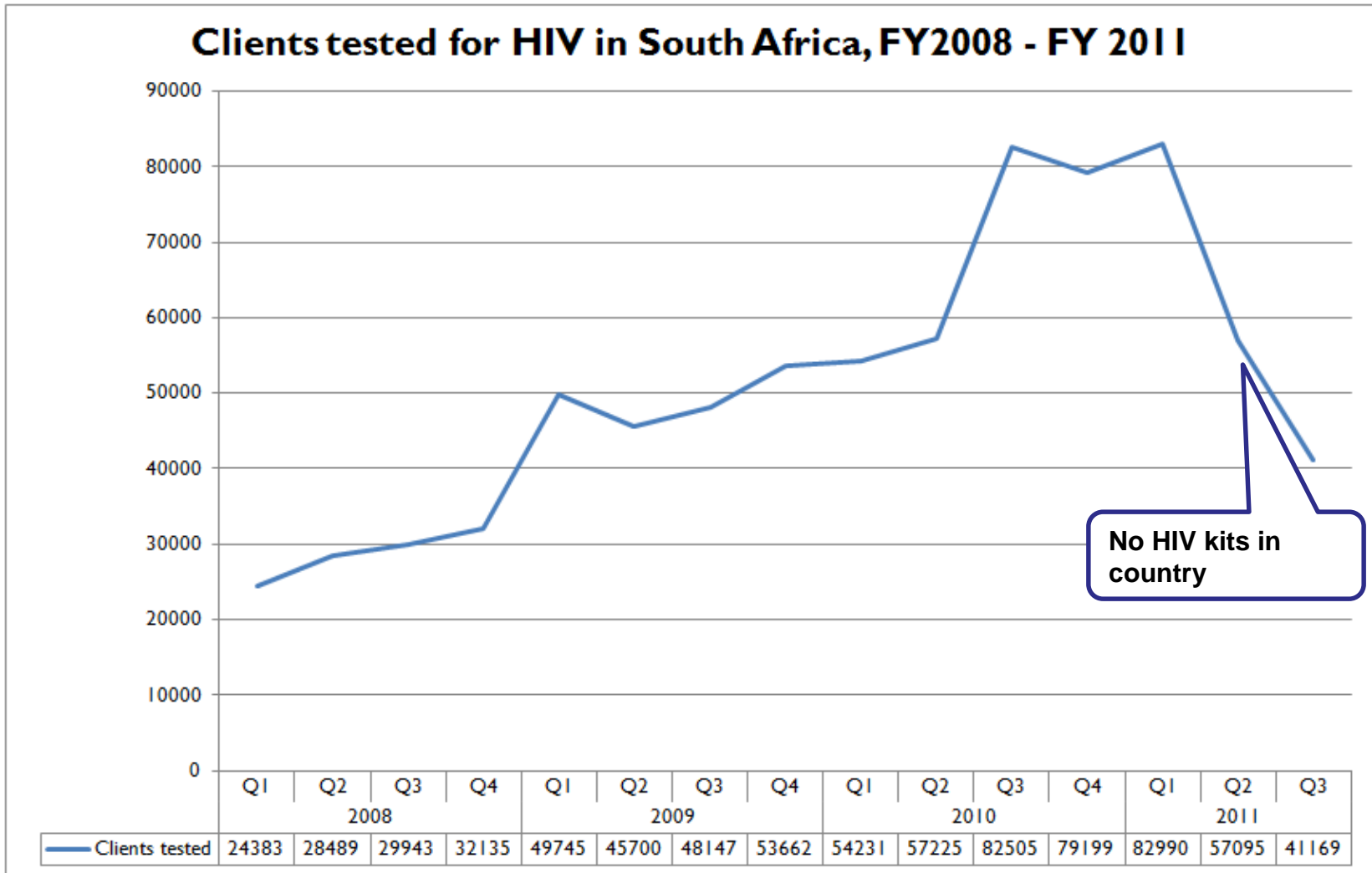
Tuberculosis Treatment Success in Swaziland

Changes tested:

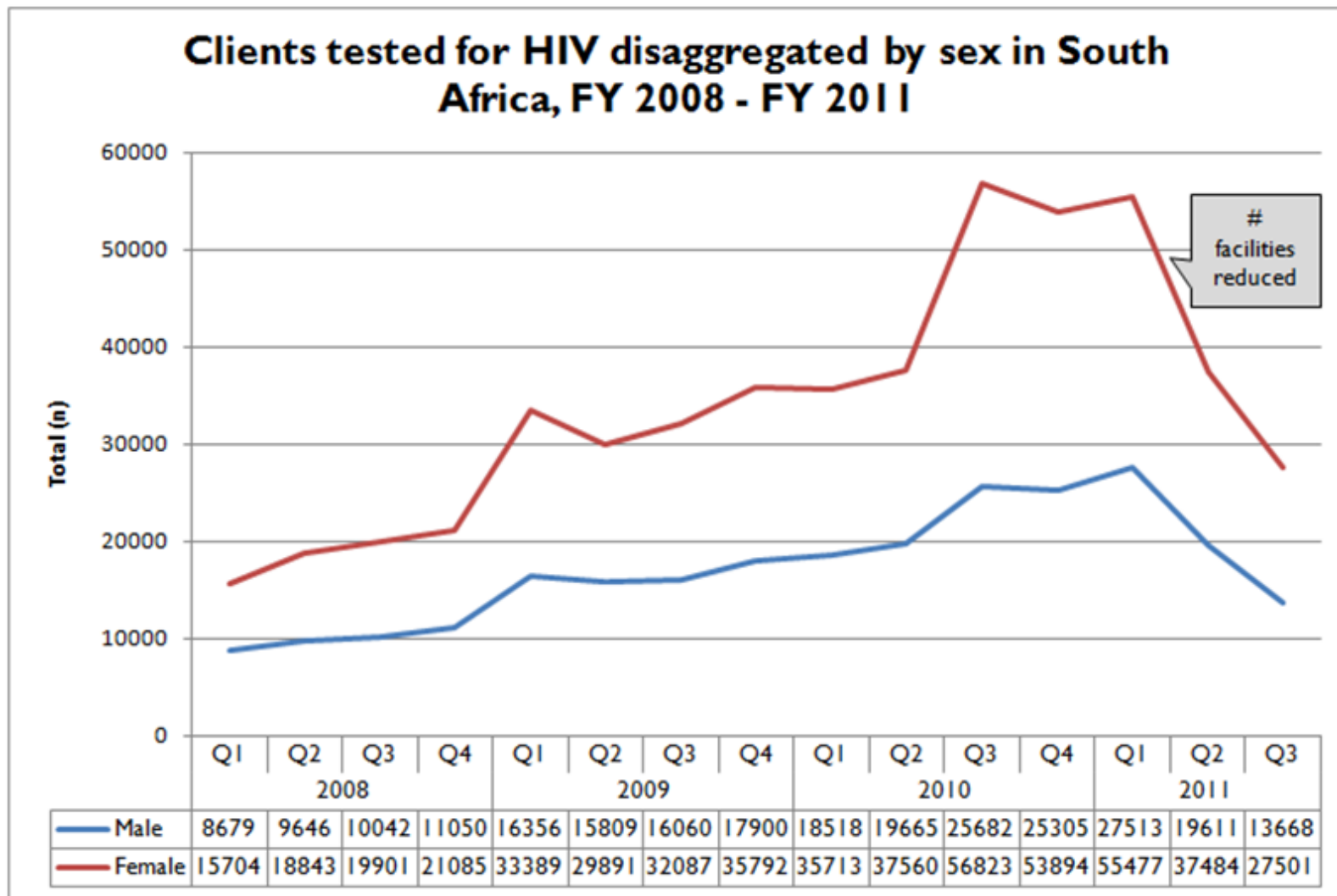
- Treatment supporter training
- Supportive



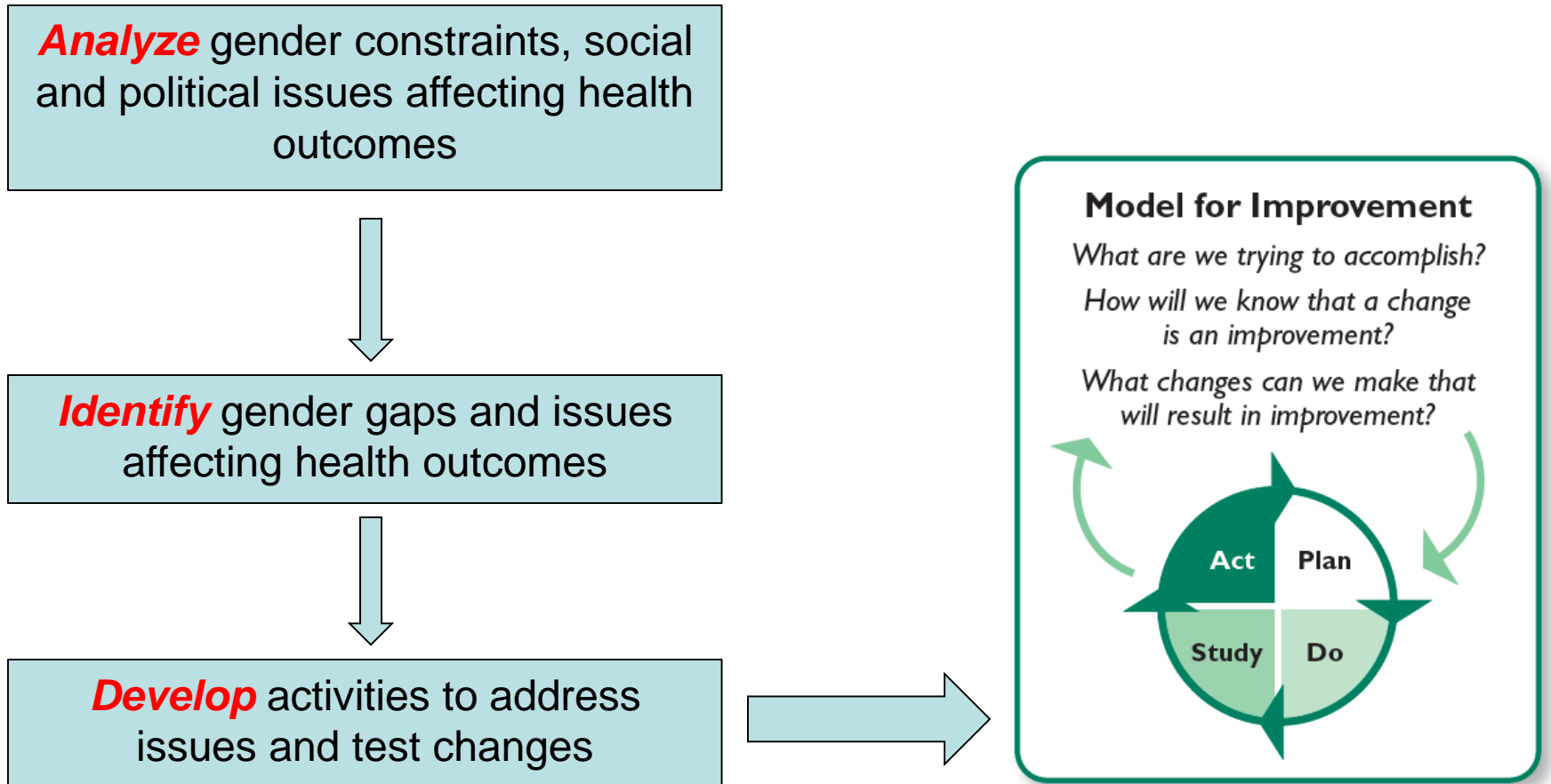
Example: Improvement Results, South Africa



Example: Improvement Results- Disaggregated by Sex, South Africa



Our approach to gender integration



Steps to integrate gender into improvement

- 1. Conduct a gender analysis to inform program design and implementation**
- 2. Collect and analyze sex-disaggregated and gender-sensitive data, where appropriate**
- 3. Identify gender-related gaps and issues and develop changes to test**
- 4. Implement and monitor gender-related changes over time to determine whether desired results are achieved**
- 5. If effective, scale to other facilities**
- 6. Document and share learning**

“Do No Harm” Approach

- **Must ensure changes tested do not create/increase risk for women, men, girls or boys**
 - Ongoing monitoring of shifts in the local context
- **Examples of negative unintended consequences:**
 - Pressuring women to disclose their status to their partners
 - Women could be subjected to violence
 - Prioritizing couples in PMTCT services
 - Leaves single women disadvantaged
 - Prioritizing couples for VMMC services
 - Leaves single men disadvantaged

What is gender analysis?

Gender analysis is a systematic way of examining relational differences between men women, girls and boys related to:

- Practices, roles, and participation
- Knowledge, beliefs, and perceptions
- Legal rights and status
- Access to assets and services
- Access to and exercise of power

...and the impact of these differences in their lives and health

Two fundamental questions to consider

- **How will gender relations affect the achievement of sustainable results?**
- **How will these proposed results affect the relative status of men and women?**
 - Will it exacerbate inequalities, accommodate inequalities, or transform gender relations?

Remember the principle of “Do No Harm”!

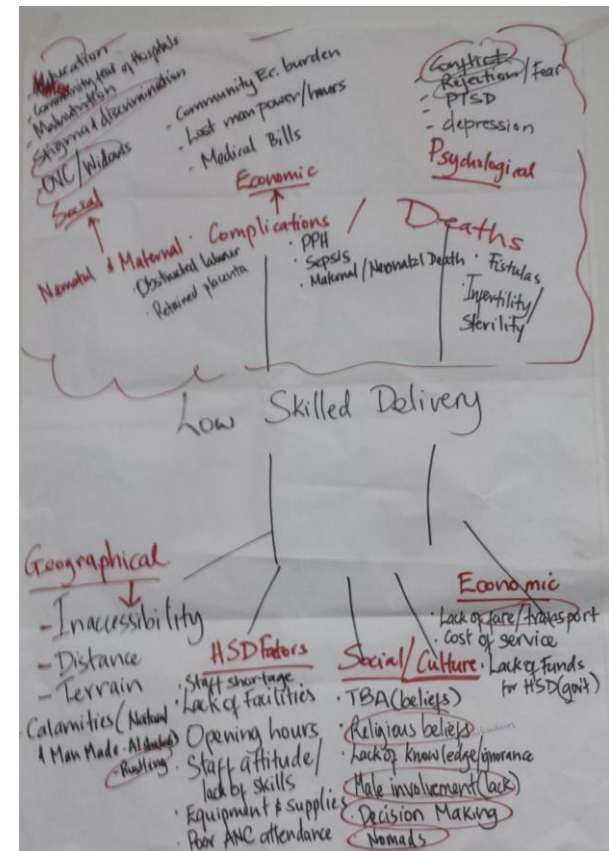
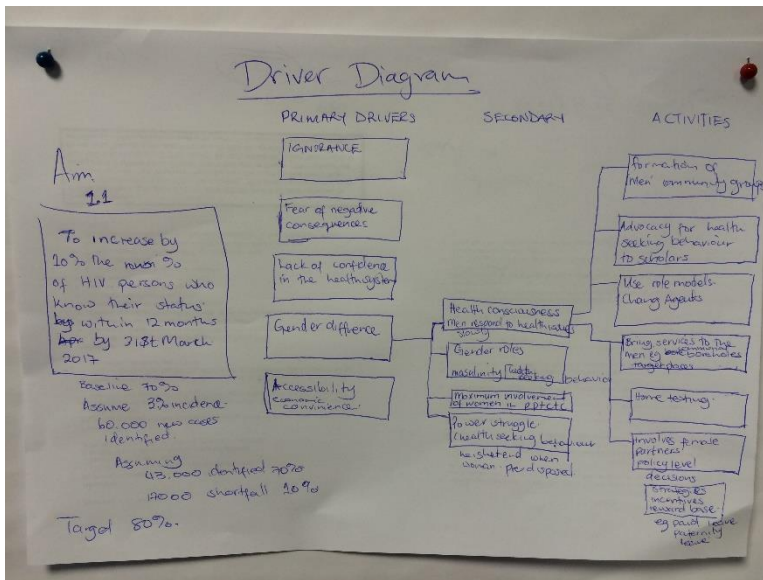
Sources of data

- **Experiences of those most affected and their advocates**
- **Primary**
 - Interviews—individual and group
 - Participatory research
 - Surveys
- **Secondary**
 - Gender assessments—country or topic
 - Local organizations and partners
 - International grey literature
 - Published articles

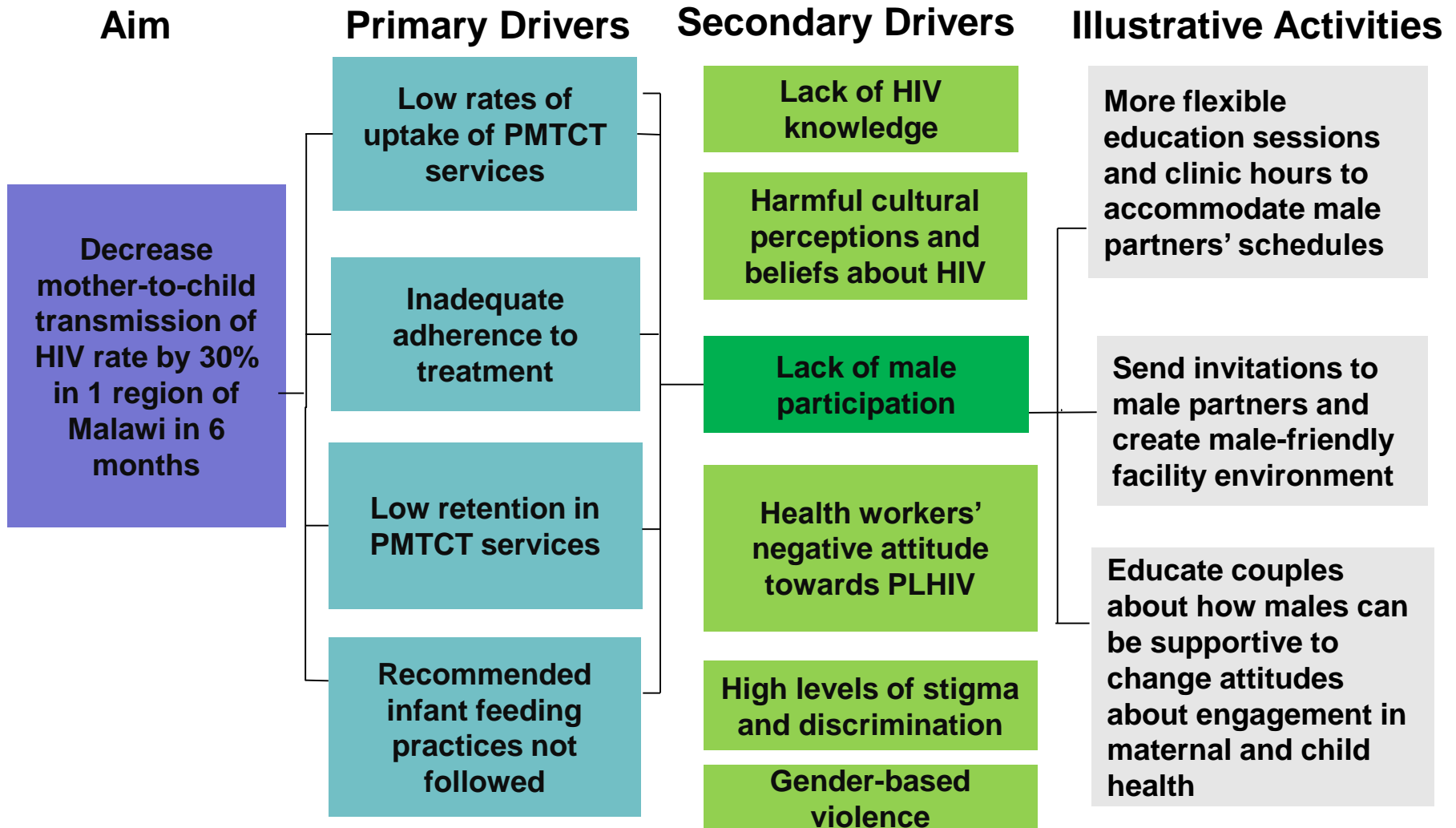
IDENTIFYING GENDER ISSUES AND GAPS

Tools to use

- Problem tree
- Driver diagram
- Fishbone diagram
- Root cause analysis
- Cause and effect analysis



Example: Driver Diagram



ADDRESSING ISSUES AND GAPS

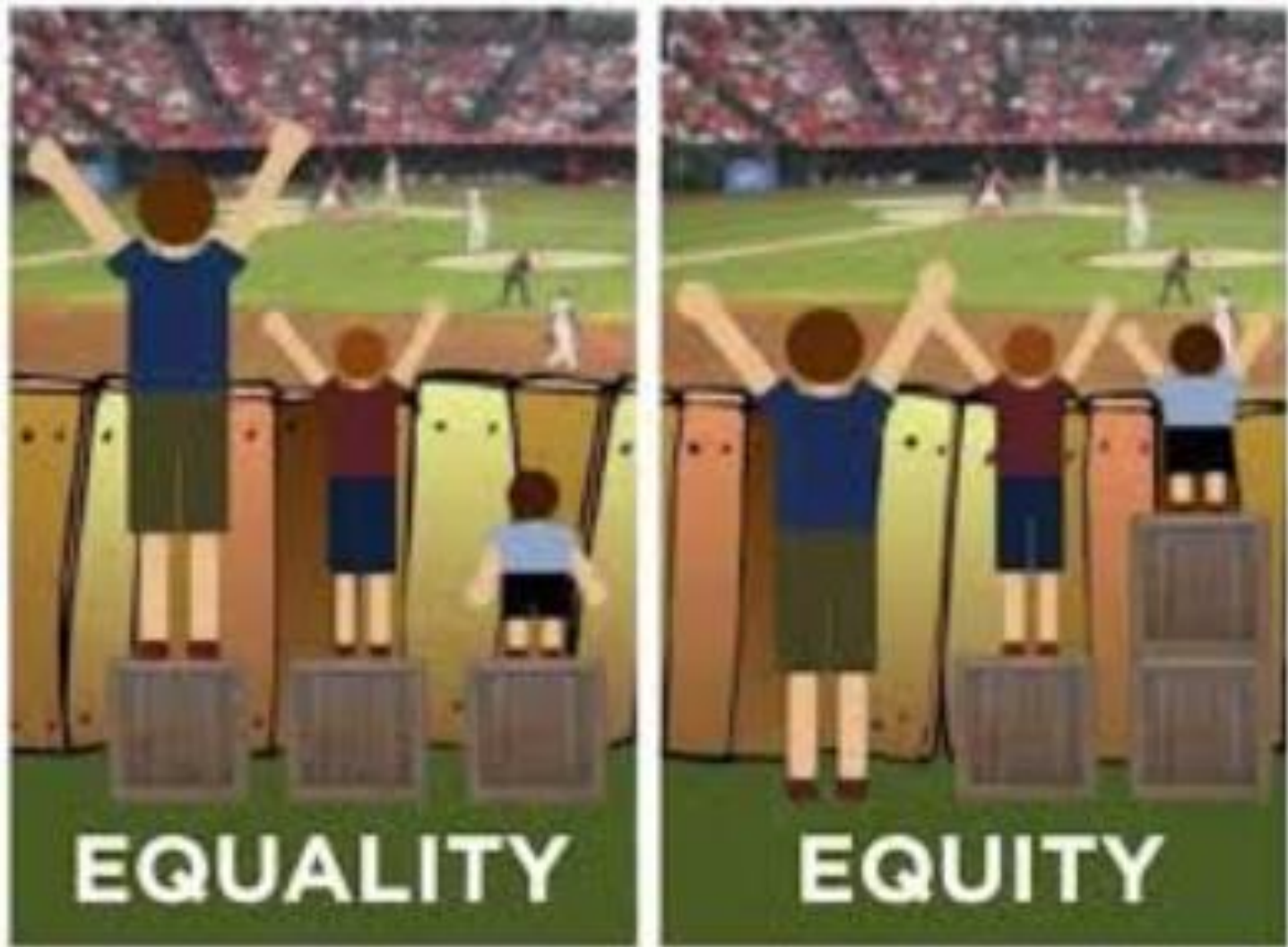
Designing a change to address gender inequity

- **Consider the barriers you've identified and think through direct changes that alleviate those barriers**
- **Where do we get ideas for changes?**
 - Literature
 - Guidelines
 - Normative documents
 - Team problem solving
 - Benchmarking
 - Knowledge management

Before you start

- **Understand culture and gender issues very well**
 - If you still have doubts, ask more questions
- **Be sensitive to local issues and personal issues**
 - Be true to yourself
- **Be respectful**
- **Be open to ideas and points of view**
- **Do not make assumptions or judgments**
- **Remember every group you talk to is different**
- **Tailor the discussion to local needs**

Gender equality and equity



Examining data:

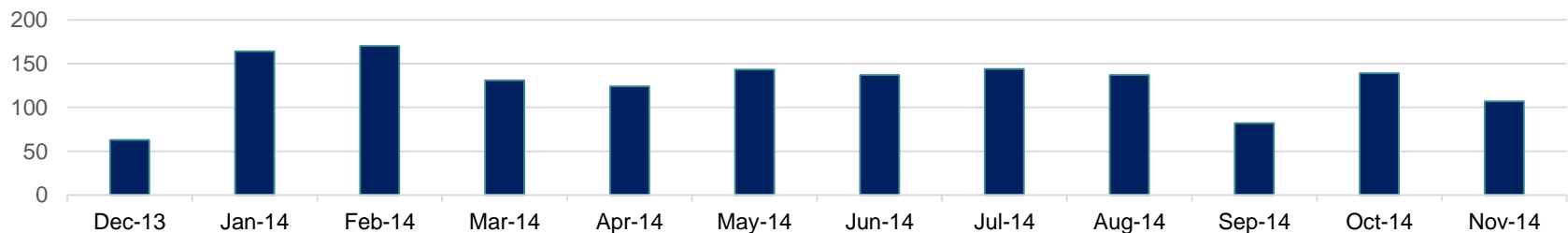
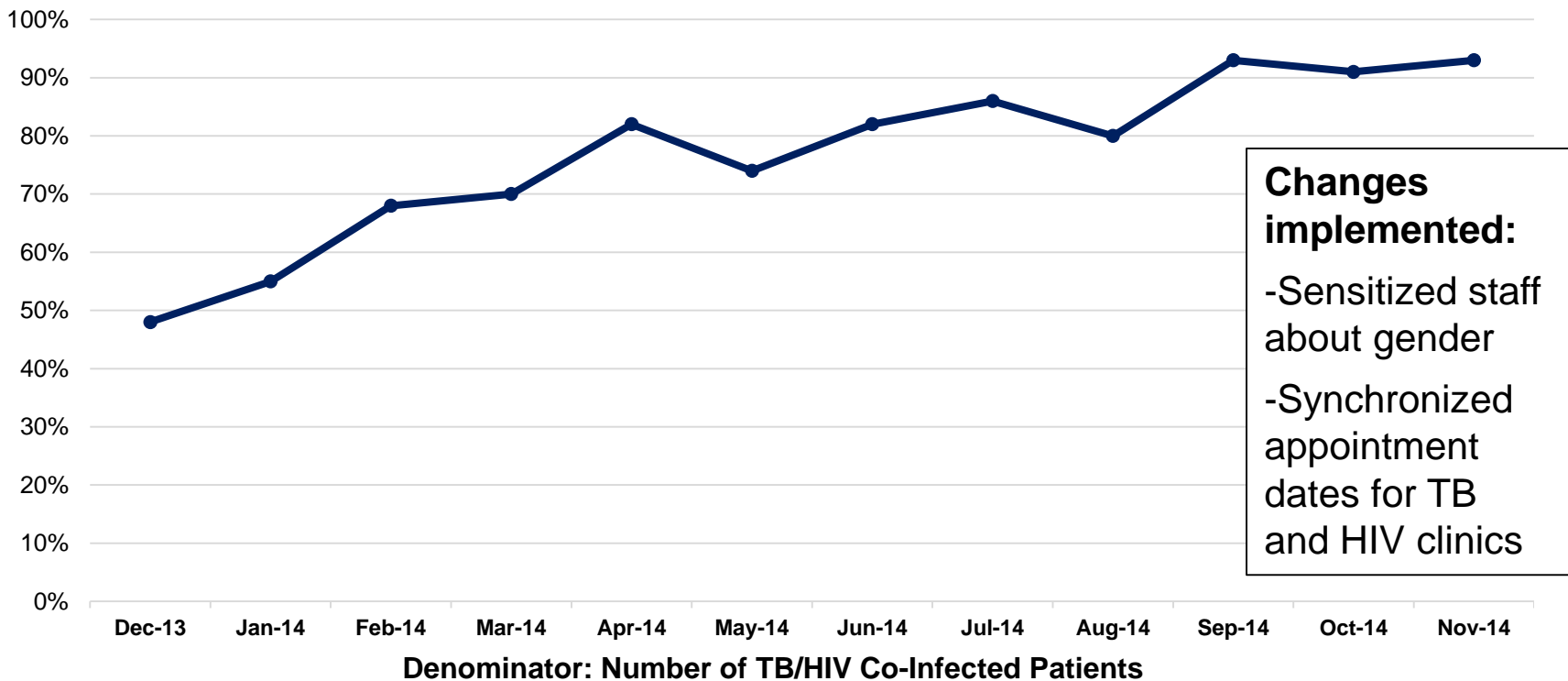
- **Collect sex- and age-disaggregated data**
 - E.g., access services, retention in care, health outcomes
- **Analyze results among males and females**
 - Identify notable issues and patterns
 - Does it reflect national- and community-level data?
 - Consider:
 - Epidemiology
 - The principal practices that are producing the issues
 - The gender relations that shape those practices
- **Monitor to identify gaps and trends and how they change over time**

Examples of indicators that should always be disaggregated by sex

- **People living with HIV identified in the community**
 - Females and males living with HIV identified in the community
- **Clients on antiretroviral therapy (ART)**
 - Females and males on ART
- **Orphans and vulnerable children accessing children's centers for psychosocial wellbeing**
 - Vulnerable girls and vulnerable boys accessing children's centers
- **HIV-positive people assessed for nutritional status**
 - HIV-positive women and HIV-positive men assessed for nutritional status

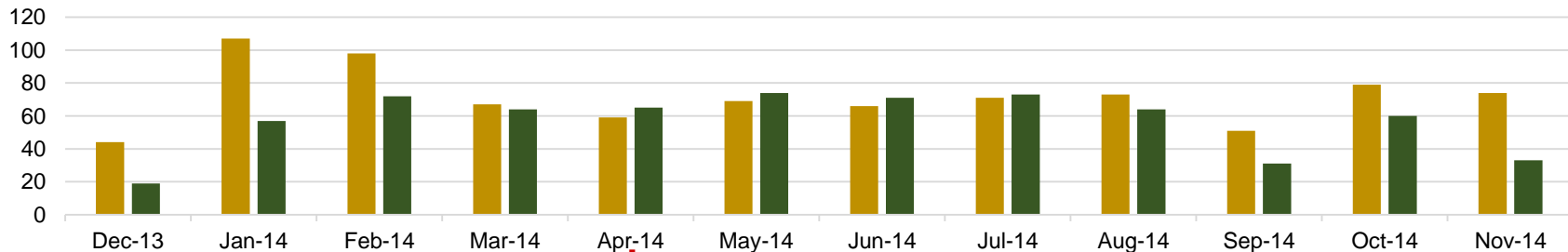
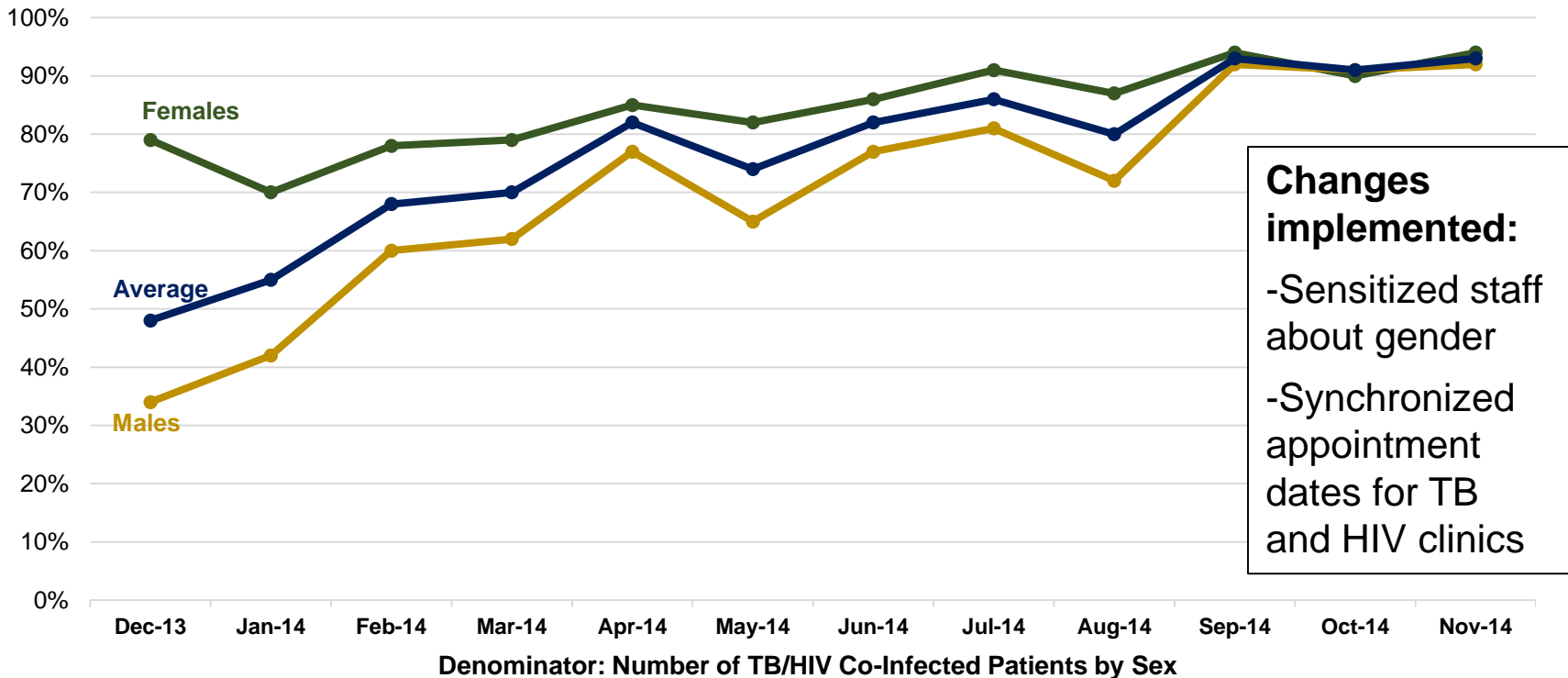
Results: Gender integration and improved outcomes, Uganda (TB/HIV, 1 of 2)

TB/HIV Co-Infected Clients on ART in 42 sites, Dec '13 - Nov '14



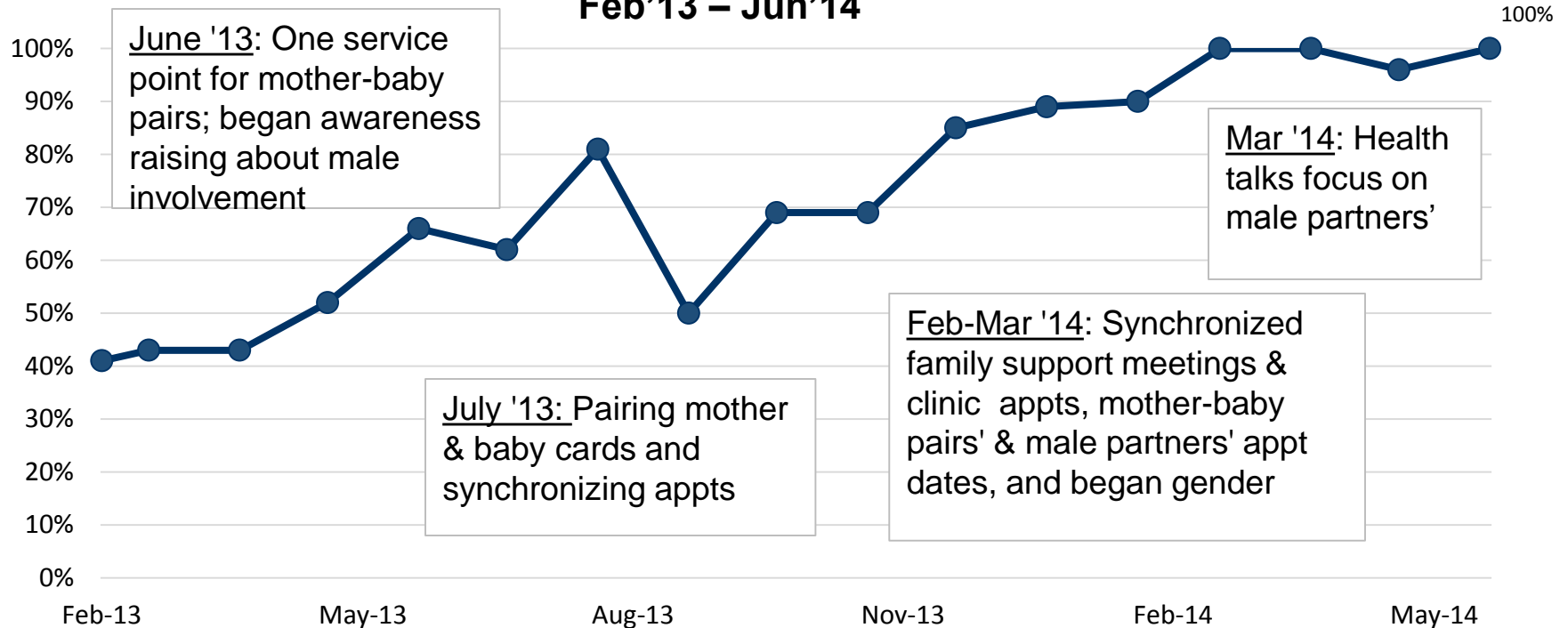
Results: Gender integration and improved outcomes, Uganda (TB/HIV, 2 of 2)

TB/HIV Co-Infected Clients on ART in 42 sites, Dec '13 - Nov '14

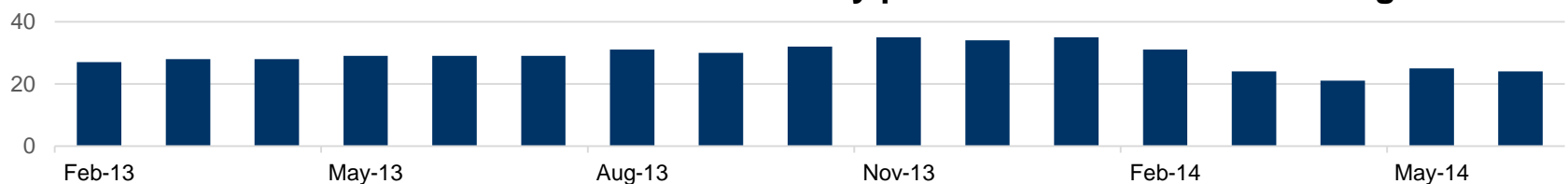


Results: Retention of mother-baby pairs in treatment in PHFS program in Uganda

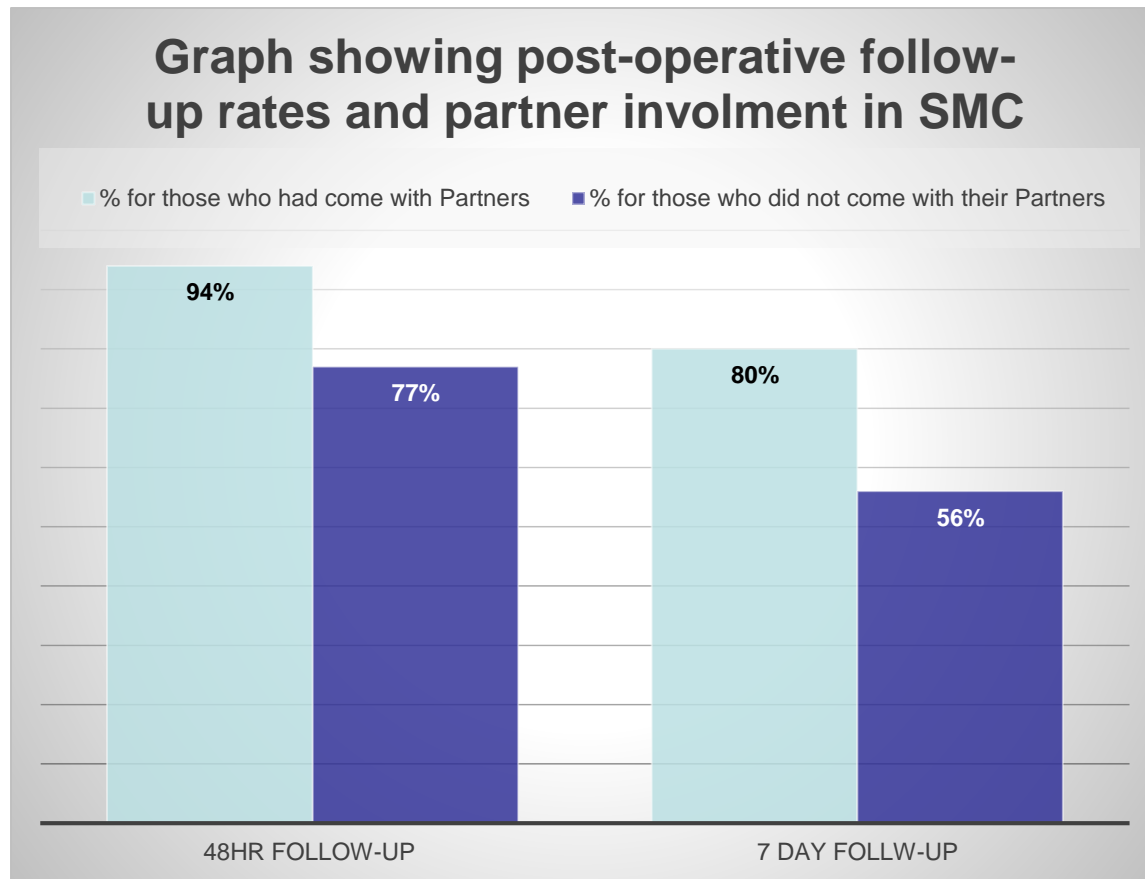
**Mother-Baby Pairs retained in care at Ivukula HC III
Feb'13 – Jun'14**



Denominator: Number of mother-baby pairs who should be accessing care



Results: VMHC, Uganda



Results: Changes in risky sexual behavior among adolescent girls and young women

| Sexual behavior | Baseline n=409 | Sept n=409 | Sig | Sept n=409 | Dec n=409 | Sig | Dec n=409 | March n = 394 | Sig |
|---|-------------------|-----------------|-------|-----------------|-----------------|-------|-----------------|------------------|-------|
| Had multiple sexual partners | 16.6% (n=66) | 8.1% (n=33) | 0.002 | 8.1% (N=33) | 4.2 (n=17) | 0.000 | 4.2% (n=17) | 3.2% (12) | 0.364 |
| In transactional sex | 13.2% (n=54) | 5.1% (n=21) | 0.000 | 5.1% (n=21) | 2.5% (n=10) | 0.000 | 2.5% (n=10) | 3.6% (14) | 0.364 |
| Used condoms consistently with multiple sexual partners | 23.5 %(n=16) | 60.6% (n=20) | 0.015 | 60.6% (n=20) | 69.2% (n=12) | 0.054 | 69.2% (n=12) | 75% (9) | 0.225 |
| Used condoms consistently in transactional sex | 29.6 %(n=16) | 71.4% (n=15) | 0.007 | 71.4% (n=15) | 70% (n=7) | 0.013 | 70% (n=7) | 57.1% (8) | 0.330 |

Round 1: May-Sept 2016

- Stepping Stones
- Service delivery camps
- Community QI teams

Round 2: Oct-December 2016

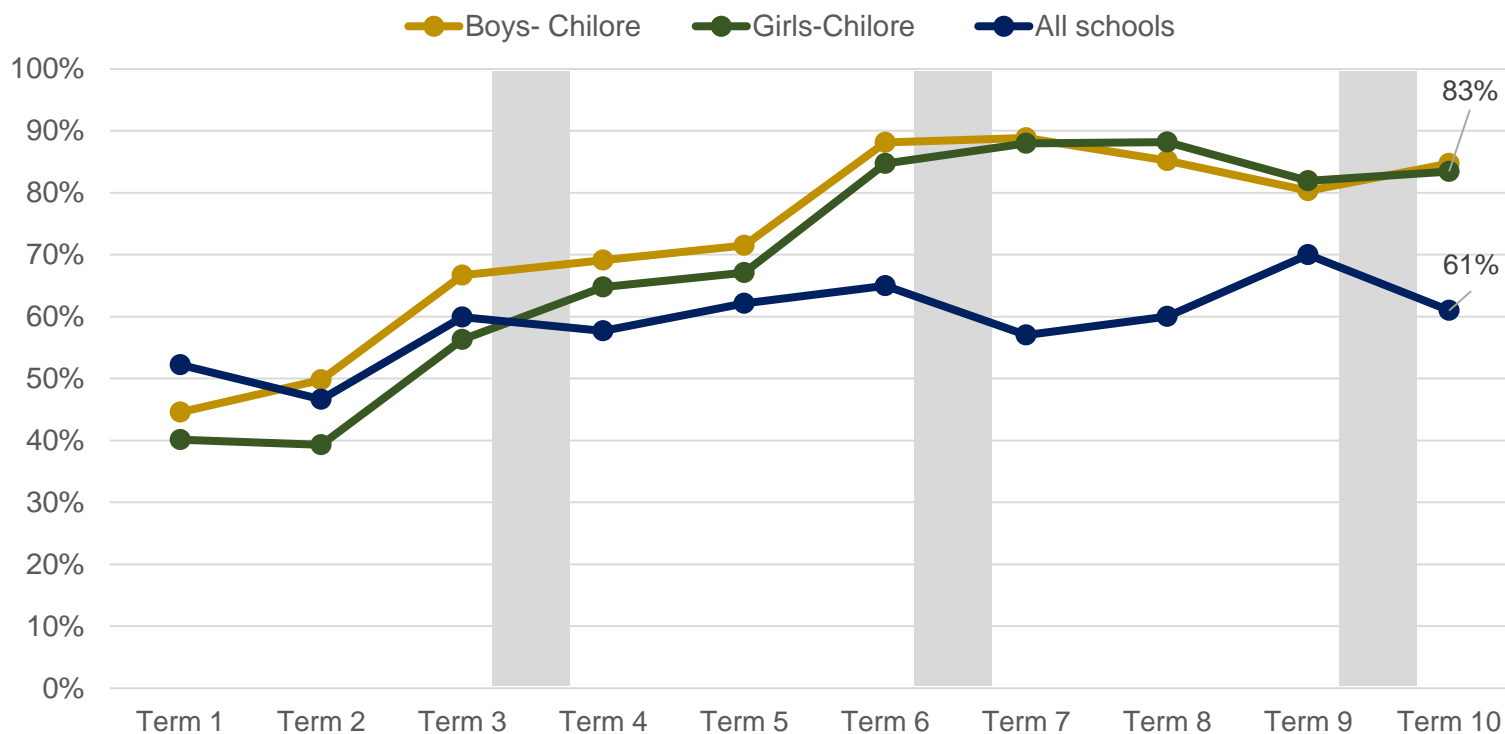
- Round 1 interventions plus
- Savings groups
- Gender trainings

Round 3: Jan-March 2017

- Round 2 interventions plus
- Parent engagement
- Partner engagement

Improved education outcomes: Malawi OVC

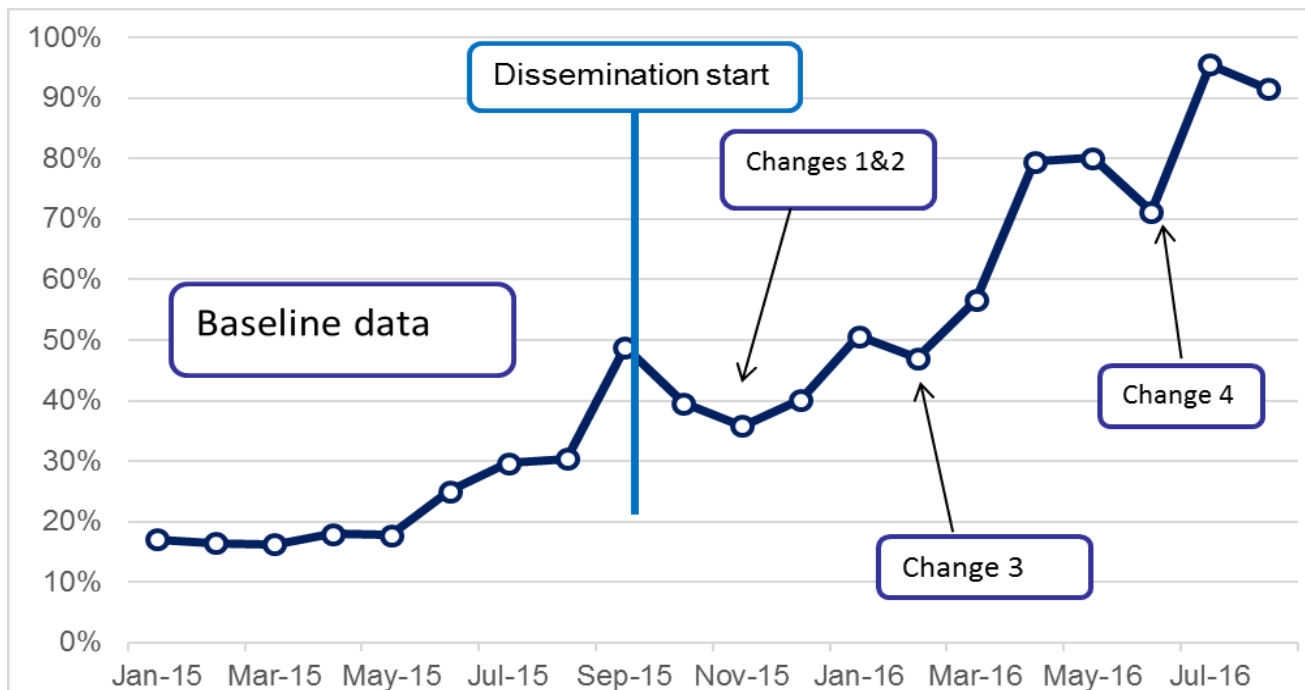
Percent of boys and girls who pass termly exams at Chilore Primary School terms 1-10, compared with the average of 16 primary schools in Mangochi, Malawi (Sept 2013-Dec 2016)



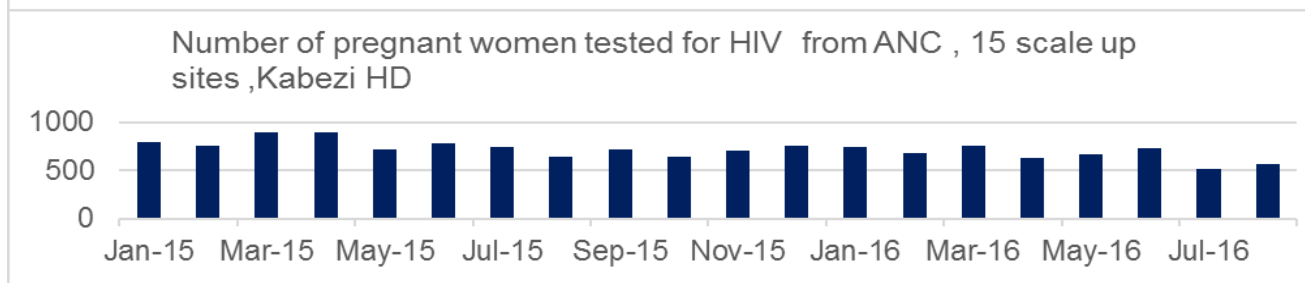
- Improved education performance
- Changes tested included weekly assessments and early classes for standard 6 and 7
- Performance gap between boys and girls
- To close the gap, teachers paid more attention to the girls' performance and encouraged them to improve their grades

Improved male partner involvement: Burundi PMTCT

Percentage of pregnant women tested for HIV from ANC whose male partners are also tested for HIV, 15 scale-up sites, Kabezi Health District, Burundi (Jan 2015-Aug 2016)



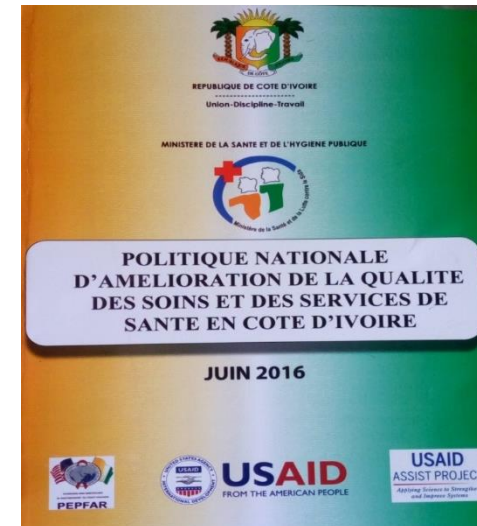
- Changes introduced**
1. Announcements made in churches and other venues on advantages of accompanying women in ANC visit and HIV testing for couples
 2. Health education session once a week on the advantages of HIV testing for couples
 3. Mobilization of men on PMTCT (importance of accompanying pregnant women in ANC visit and HIV testing for couples) by CHW and community leaders in each sub-colline
 4. Invitation letters for partners given to unaccompanied women in ANC visit



Institutionalizing gender integration

- Cote d'Ivoire

- Worked with MOH and others to develop a National QI Policy
- QI strategy document (training) and operational plan will include disaggregating data by sex, collecting gender-sensitive indicators, and considering gender issues in improving quality of care



- Uganda

- Gender integration in National Standards of Care for OVC
- Gender in assessment tools
- QI training and coaching materials, and learning sessions address gender, including at the national level, which contributes to institutionalization
- Built staff capacity

Institutionalizing community improvement



National Plan of Action for Vulnerable Children in Malawi



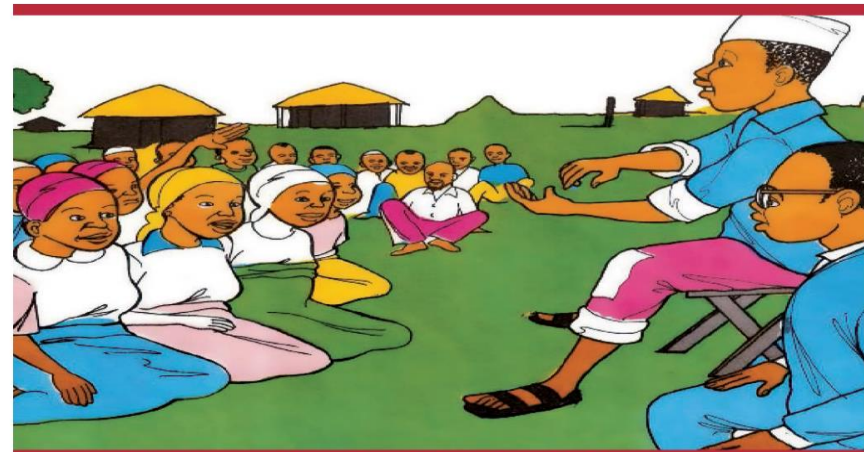
unite for
children

unicef

**Malawi National Plan of Action for
vulnerable children from 2015-2018**



Malawi Government
Ministry of Gender, Children and Social Welfare



Minimum Service Standards for Quality Improvement of Vulnerable Children Programs Malawi

30th April 2014



**Malawi OVC standards for quality improvement for
Vulnerable Children programs in Malawi**

For more information about gender integration in quality improvement

- Dr. Taroub Faramand tfaramand@wi-her.org
- Visit www.usaidassist.org/topics/gender
 - Technical briefs and additional resources (English, French, Spanish)
 - Sex-disaggregated data collection tools
 - Videos (English, French, Spanish)

