The Global Financing Facility for Women, Children and Adolescents

Roadmap for Advancing Gender Equality



Rationale

Every year, over five million women and children die from preventable or treatable diseases. More than 800 women and adolescent girls die every day from preventable reasons associated with pregnancy, childbirth, and lack of access to reproductive health care. This reflects the profound gender inequality that undermines the health and wellbeing of women, adolescents and children.

Research has shown that inequalities in decision-making, mobility, access to resources, legal rights to inheritance and property and caretaking responsibilities reduce women's opportunities of receiving the information, health services and care they need. Women and girls' limited access to education and economic assets, restrictions on voice and political participation, and the prevalence of discriminatory laws and social norms all combine to create a disadvantage that is reflected in the health outcomes of women, children and adolescents. These limitations further intersect with additional factors such as race, class, age and sexual orientation to widen existing gaps even further.

As countries battle the COVID-19 pandemic, emerging evidence also shows that women and girls are paying the highest price, through an increase in gender-based violence during lockdown, a reduction in access to needed sexual and reproductive health services, job losses and a lack of social protection, school closures and increases in unpaid care. Stepped up efforts on gender equality have never been more urgent.

The Roadmap outlined below aims to strengthen global efforts and support a systematized country-led process that addresses gender inequality. The Roadmap also aims to make explicit how the Global Financing Facility for Women, Children and Adolescents (GFF) will double down and deepen its engagement to support governments to close gender gaps.

Guiding Principles

The GFF is fully committed and uniquely positioned to help support gender equality and the empowerment of women, children and adolescents. In the world's poorest countries, the GFF plays an important role to promote universal access to sexual and reproductive health and rights as well as to create more equitable health and social systems that shift norms toward women's and girls' choice, access and power. From the start, advancing gender equality has been implicit in all of GFF's investments and its support to partner countries. The GFF Roadmap for Advancing Gender Equality is not about one single program policy or intervention. Instead, it aims to be an approach for analyzing, prioritizing and learning through gender responsive and transformative actions that can be applied across all of GFF's channels of influence and throughout all stages of a partner countries engagement with GFF.

The GFF's guiding principles, which will lead future GFF-supported activities and investments on gender equality, include: equitable; efficient, results-oriented; and complementary. As a partnership that convenes national governments, global development partners, private sector and civil society, the GFF recognizes that achieving gender equality will require the efforts and contributions of all stakeholders. The principles that will guide GFF's way forward are not just a compass for GFF but are also well-aligned with partners as well as with the Global Strategy for Women's, Children's and Adolescents' Health.

Evidence on Linking Gender Equality and Health Outcomes

Evidence on the strong relationship between gender equality and health and nutrition outcomes for women, children and adolescents points to two areas of particular relevance for the GFF: i) gender inequality undermines health outcomes and ii) investments to improve gender equality can improve health and nutrition outcomes.

Country-Led

The GFF supports countries to work in strategic and system-wide partnerships to address structural and socio-cultural barriers to and drivers of gender equality in health outcomes.

Equitable

The GFF ensures that health systems aim to reach all women, children and adolescents across the lifecycle, by being cognizant of and working to address gendered and other differences in access, quality, rights and outcomes through measuring and accounting for inequalities.

Efficient

The GFF prioritizes investments in high impact, evidence-based health services that are affordable, of quality and available to all women, children and adolescents.

Results-oriented

The GFF prioritizes a results-based approach through mechanisms that prioritises policy and financing reforms for transformational change for women, children, and adolescents.

Complementary

The GFF builds sustainable improvements in women, children's and adolescents' health by ensuring complementarity and leveraging existing investments in health systems and across sectors to address gender inequality.

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How Gender Inequality Undermines Health Outcomes for Women, Children and Adolescents:

- Reproductive health: Gender inequality can affect women's access to reproductive health care through several factors: social power structures; gender norms and values that determine a woman's status in communities and households¹; a woman's relationship to her partner and other family members (e.g., exposure to gender-based violence); individual factors such as age at marriage; and through demographic factors such as age or education.²
- Maternal health: Research from multiple GFF-supported countries, including Ghana, Tanzania and Uganda, found that women who live in areas where gender-based violence is accepted are less likely to use skilled birth attendants, attend a full course of antenatal visits or to seek antenatal care in a timely way.³
- Newborn health: Differences in the burden of neonatal mortality are compounded by gender. A study of admissions in special newborn care units in India shows that about three percent fewer female newborns were admitted than males at the district level.⁴ A Government of India assessment found that in Uttar Pradesh, households with male newborns spend nearly four times as much on healthcare during the neonatal period than those with female newborns.⁵
- **Child health:** An analysis of comparative data from 96 countries shows that the Gender Inequality Index⁶ explains 36 percent of the variance in child malnutrition and mortality and offers a strong alternative to GDP as a predictor of these outcomes.⁷
- Adolescent health: Gender inequality and restrictive gender norms harm the health of adolescent girls and boys. Negative consequences for girls in much of the world include increases in child marriage, early school dropout, pregnancy, risk of HIV and sexually transmitted infections, exposure to violence and depression, while boys are far more likely to engage in, and be the victims of, physical violence, die from unintentional injuries and engage in substance abuse and suicide. Gender norms begin in early adolescence and can sharply limit their options, prospects, and aspirations.⁸
- **Nutrition:** An analysis of 10 Demographic and Health Surveys conducted in sub-Saharan Africa found that meeting child feeding criteria was positively associated with economic dimensions of women's empowerment (measured by economic, socio-familial and legal empowerment). Research in Mozambique has shown that mothers' nutritional knowledge improves growth among deprived children, and that mothers' formal education and household wealth have greater impact for better-off children.

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Equity and Equality

Equity: Equity refers to fairness of treatment for different groups according to their respective needs, which include treatment that is considered equivalent in terms of rights, benefits, obligations and opportunities. It is obvious how inequity is manifested in health systems and access to services; the GFF has strongly emphasized increasing equity, especially through investments in neglected geographies, priority populations, and neglected groups that are hard to reach.

Equality: Gender inequality and restrictive gender norms contribute to inequity in access to health services, as extensive research has shown. Gender reflects the culturally defined roles, responsibilities, attributes, and entitlements associated with being male or female in a given setting, along with the power relations between and among women and men, and boys and girls and people of all gender identities. Gender equality implies that all human beings are free to develop their personal abilities and make choices without the limitations set by stereotypical views, rigid gender roles, definitions, and prejudices that shape their rights, responsibilities, and opportunities as a result of whether they are born male or female.

How Addressing Gender Inequality Can Improve Health & Nutrition Outcomes

A growing body of evidence shows that promoting gender inequality helps catalyze change and improve health outcomes by addressing the underlying structural barriers to health.^{11,12,13} It is well understood that mortality in children under five can be improved by investments in non-health sectors that target gender inequality.¹⁴ Research has documented that gender equality-related efforts to improve female education, reduce fertility rates and increase women's access to resources can reduce maternal mortality.¹⁵ Working with men and boys to challenge restrictive gender norms and promote more gender equitable attitudes has been linked to numerous improvements in health and other aspects of wellbeing.^{16,17}

Empowerment approaches that mobilize communities to improve maternal and child health, increase women's educational and economic resources, and shift cultural and societal norms to reduce child marriage have been shown to improve health and nutrition outcomes.¹⁸

Investments in gender equality have been slowed by a lack of inclusion of women's perspectives, gender-specific expertise and prioritization within national health ministries and global health organizations. Globally, 70 percent of leadership in health is male. ¹⁹ Gender-blind laws and policies can have unfortunate consequences for girls due to the combination of discrimination based on gender and age, the added health burden of gender-based violence, and social taboos about girls' health and sexuality. ²⁰ Engaging women in shaping investment at the national level brings a more nuanced understanding of the barriers women and girls face, makes women visible, and sets an example of the need to respect their perspectives.

GFF's Contributions to Advancing Gender Equality to Date: A Comparative Advantage

The GFF can leverage its partnership to advance gender equality. The GFF's relationship with the World Bank allows it to make direct investments towards gender equality while also influencing a much larger pool of financing mechanisms (IDA, IBRD, and IFC). It engages in policy dialogue with countries to influence domestic resource use and mobilization. And it can leverage complementary investments and capacities from its multilateral, bilateral, technical, civil society, and private-sector partners.

The GFF is well placed to support realization of the global goals on health and gender and the SDG commitment of leaving no one behind. SDG 3 calls for ensuring healthy lives and promoting well-being for all at all ages. SDG 5, to achieve gender equality and empower all women and girls, includes target 5.6 to improve sexual and reproductive health and reproductive rights; and target 5.3 to reduce harmful traditional practices. The GFF's focus on neglected areas of investment in women's, children's, and adolescents' health with equity as its core. Examples of equity-focused GFF investments have included increasing financing to underserved districts in Mozambique; focusing on high-burden regions in Cameroon; and providing scholarships for community health nurses coming from historically marginalized communities in Kenya.

The GFF's role as convener and catalyst for improving health outcomes for women, children and adolescents enables it to work synergistically across health and gender equality and contributing sectors. Investing in gender equality can have numerous effects downstream on health and other development outcomes that contributes to human capital. An excessively narrow focus on the health sector misses out on the opportunity to remove some of the obstacles to the wellbeing of women and girls. GFF therefore promotes the contribution of other sectors outside the health sector to improved RMCAH-N results, e.g. through investments in girls' education in Bangladesh.

The GFF supports countries to develop data systems that call attention to persistent gender inequalities and identify areas for improvement for increased results. For example, progress in girls' and women's sexual health and reproductive rights requires advancement in national data systems that underpin public health and social service delivery. The GFF supports a prioritization process that uses equity as a guiding principle and uses data to shine light on geographies and the most vulnerable and marginalized women and girls that bear disproportionate health burden or receive too small a share of health investment. GFF-supported investments in civil registration and vital statistics (CRVS), such as birth and marriage registration systems¹, contribute to efforts to combat child marriage - a critical gender equality issue that is directly linked to early pregnancies and childbearing and a host of poor maternal and child health and nutrition outcomes.

GFF's Six Action Areas for Advancing Gender Equality:

- **1. Prioritize** analytical and technical support demonstrating the relationship between gender inequality and poor health outcomes, and gender equality and improvements in health and wellbeing
- 2. Increase country investments in gender-responsive monitoring and data systems.
- **3. Support** the foundations for reforms that enable the integration of sexual and reproductive health and rights into universal health coverage policies and programs.
- **4. Intensify** engagement with local women's organizations, youth groups and other national gender equality actors to inform and support GFF country platforms.
- **5. Create** a supportive environment to empower women and girls as leaders in the GFF process at country and global levels.
- **6. Strengthen** country-level engagement beyond the health sector.

Six Action Areas for Increased Impact

The GFF Roadmap for advancing gender equality suggests six action areas for impact building on the results to-date with the aim to increase efforts, support the global goals for gender equality and support a systematized country-led process that prioritizes closing gender gaps.

Action 1: Prioritize analytical and technical support demonstrating the relationship between gender inequality and poor health outcomes, and gender equality and improvements in health and wellbeing.

As part of its support for the development of country-led investment cases, the GFF will provide technical support for evidence generation on how gender equality is linked to maternal, child and adolescent health outcomes. For countries already implementing their investment cases, GFF will support the identification of areas where gender inequality is likely to affect reforms in the health sector and identify actions to address these. For countries developing their investment cases, this analytical support will help identify structural barriers and social norms that hinder progress on improving health outcomes for women, children and adolescents. The GFF will also generate evidence on addressing gender norms by working with adolescent boys and young men. The GFF's technical support can provide targeted country-specific gender analysis and technical assistance in collaboration with GFF partners.

Action 2: Increase country investments in gender-responsive monitoring and data systems. As it continues to invest in civil registration and vital statistics (CRVS) and health management information systems, the GFF will also increase efforts to ensure that these systems are gender-responsive. The GFF will work with countries to integrate gender equality indicators and measurable objectives into their Investment Cases. Expanding community-level inputs and feed-back into a strengthened M&E approach will be important to allow tracking progress for improved health outcomes for women and adolescents and their experience as users.

Action 3: Support the foundations for reforms that enable the integration of sexual and reproductive health and rights into universal health coverage policies and programs. Sexual and reproductive health and rights are foundational for improving health outcomes. GFF implementation support will bring a gender lens to the design of policy reforms including health service package design, workforce reforms, and in particular legal reforms that removes barriers to access sexual and reproductive health and rights for women and adolescents and addresses harmful norms. With GFF support, countries developing their investment cases will be able to undertake analysis of the legal and policy environment to address inequalities and propose effective actions. Countries already in the implementation phase will have the opportunity to establish action plans to address gender blind policies during mid-terms reviews. Through its relationship with the World Bank, the GFF will be able leverage additional opportunities and financing instruments such as development policy operations for these policy reforms.

Action 4: Intensify engagement with local women's organizations, youth groups and other national gender equality actors to inform and support GFF country platforms. In many GFF countries, women's and youth networks are already leading work on community engagement and health promotion, and national gender experts possess in-depth knowledge of the social norms and barriers. The GFF will strengthen representation from women's and youth groups across the design, implementation, and monitoring of their investment cases as a key component of an effective country platform. GFF partners can join forces to ensure that a lack of financing isn't a barrier to these organizations constructively engaging in the GFF process. The GFF partnership will strengthen its dialogue with global health funders to build civil society capacity including expanding women's roles in national health sector decision-making and increase community and youth-led accountability for health service delivery and quality of care.

Action 5: Create a supportive environment to empower women and adolescents as leaders in the GFF process at country and global levels. Women as both users and providers are key to ensuring equitable health services, and their voices should play a more prominent role in policy setting, program design and delivery. A focus on gender equality at leadership level can foster a more gender responsive health sector, particularly for setting spending priorities and policy reforms that improve women, children and adolescent health outcomes. The investment case process is an entry point for the GFF to use its convening role to analyze policies and advocate for changes that cultivates and mentors female leaders as change agents in health ministries, human development sectors and other health leadership positions. Through its new Knowledge & Learning strategy, GFF will contribute to address and advance this area.

Action 6: Strengthen country-level engagement beyond the health sector. Social determinants are critical to health outcomes. Yet taking them on requires engaging with ministries and stakeholders beyond the health sector. The GFF model is a multi-sectoral approach and many country investment cases include activities in sectors beyond health. This will be further expanded to reinforce a core set of health services and contribute to driving demand. Girls' education and school health are key areas where the GFF partnership and process will support efforts to remove the barriers and norms that gender inequality poses to improving health outcomes for children and adolescents (e.g., by promoting access to comprehensive sexuality education, improved health and nutrition and a gender-responsive and safe learning environment for girls and boys). Engaging in prevention efforts of gender inequality and norm change among boys and men across sectors could have a large and lasting effect on the health and wellbeing of their partners and other family members. The GFF will also identify ways to further harness the Human Capital Project to help countries connect the dots between interventions to advance gender equality, health and nutrition outcomes, education and broader economic growth.

Way Forward and Review of Progress

- The results of the Roadmap for advancing Gender Equality will be a partnership-wide responsibility. Its success is contingent to the commitments and efforts of all stakeholders involved in the GFF processes at both at global and national level. Discussions will be undertaken with GFF partners on how to join efforts on the Roadmap.
- The Roadmap is part of the GFF strategy refresh and will be further translated into programmatic and technical guidelines for implementation. A costing of the Roadmap will help the GFF assess the additional resources needed for a successful roll-out.
- At global level, the GFF tools for results and monitoring will be adapted to capture increased efforts and at country level, strengthened monitoring of these aspects in the results framework will be undertaken.
- An annual progress update on the Roadmap will be presented to the GFF Investors Group.

Endnotes

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- ¹ Keats, EC, Ngugi, A, Macharia, W, Akseer, N, Khaemba, EN, Bhatti, Z, ... & Bhutta, ZA. 2017. "Progress and priorities for reproductive, maternal, newborn, and child health in Kenya: a Countdown to 2015 country case study." The Lancet Global Health 5(8): e782-e795.
- ² Namasivayam, A., Osuorah, D. C., Syed, R., & Antai, D. (2012). The role of gender inequities in women's access to reproductive health care: a population-level study of Namibia, Kenya, Nepal, and India. International journal of women's health, 4, 351.
- ³ Adjiwanou, V., & LeGrand, T. (2014). Gender inequality and the use of maternal healthcare services in rural sub-Saharan Africa. Health & place, 29, 67-78.
- ⁴ Sankar, M. J., Neogi, S. B., Sharma, J., Chauhan, M., Srivastava, R., Prabhakar, P. K., ... & Paul, V. K. (2016). State of newborn health in India. Journal of Perinatology, 36(3), S3-S8.
- ⁵ Government of India. Ministry of Health & Family Welfare (MOHFW). Two-year progress of special newborn care units in India: a brief report 2013.
- ⁶ http://hdr.undp.org/en/content/gender-inequality-index-gii
- Marphatia, A. A., Cole, T. J., Grijalva-Eternod, C., & Wells, J. C. (2016). Associations of gender inequality with child malnutrition and mortality across 96 countries. Global health, epidemiology and genomics, 1.
- ⁸ Blum, R. W., Mmari, K., & Moreau, C. (2017). It begins at 10: How gender expectations shape early adolescence around the world. Journal of Adolescent Health, 61(4), S3-S4.
- ⁹ Na, M., Jennings, L., Talegawkar, S. A., & Ahmed, S. (2015). Association between women's empowerment and infant and child feeding practices in sub-Saharan Africa: an analysis of Demographic and Health Surveys. Public health nutrition, 18(17), 3155-3165.
- ¹⁰ Burchi, F. (2010). Child nutrition in Mozambique in 2003: the role of mother's schooling and nutrition knowledge. Economics & Human Biology, 8(3), 331-345.
- ¹¹ Levy, JK, Darmstadt, GL, Ashby, C, Quandt, M, Halsey, E, Nagar, A, and Greene, ME. 2019. "Programmes targeting gender inequality and restrictive gender norms for the health and well-being of children, adolescents, and youth: A systematic review." Lancet Global Health December: e225-e236.

- ¹² Malhotra, A, Amin, A, & Nanda, P. 2019. "Catalyzing gender norm change for adolescent sexual and reproductive health: Investing in interventions for structural change." Journal of Adolescent Health 64(4): S13-S15.
- ¹³ Black, RE, Levin, C, Walker, N, Chou, D, Liu, L, Temmerman, M, & Group, DRA. 2016. "Reproductive, maternal, newborn, and child health: key messages from disease control priorities 3rd edition." The Lancet, 388: 2811-2824.
- ¹⁴ Wang H, Liddell CA, Coates MM, et al. Global, regional, and national levels of neonatal, infant, and under-5 mortality during 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. Lancet 2014; 384:957-79
- ¹⁵ Cohen RL, Alfonso YN, Adam T, et al. Country progress towards the millennium development goals: adjusting for socioeconomic factors reveals greater progress and new challenges. Glob Health 2014;10:67
- ¹⁶ Doyle, K., Levtov, R. G., Barker, G., Bastian, G. G., Bingenheimer, J. B., Kazimbaya, S., ... & Shattuck, D. (2018). "Gendertransformative Bandebereho couples' intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: findings from a randomized controlled trial." PLoS One, 13(4).
- ¹⁷ Levy, J. K., Darmstadt, G. L., Ashby, C., Quandt, M., Halsey, E., Nagar, A., & Greene, M. E. (2020). Characteristics of successful programmes targeting gender inequality and restrictive gender norms for the health and wellbeing of children, adolescents, and young adults: a systematic review. The Lancet Global Health, 8(2), e225-e236.
- ¹⁸ Kraft, J. M., Wilkins, K. G., Morales, G. J., Widyono, M., & Middlestadt, S. E. (2014). An evidence review of gender-integrated interventions in reproductive and maternal-child health. Journal of health communication, 19(sup1), 122-141
- ¹⁹ Global Health 50/50. 2019. The Global Health 50/50 Report 2020: Power, Privilege, and Priorities. London, UK: GH5050
- ²⁰ Harper, C, Jones, N, & Watson, C. 2012. Gender Justice for Adolescent Girls: Tackling social institutions. London: Overseas Development Institute.

