







Call for Submissions

What works? Integrating gender into government health programmes across Africa, South Asia and Southeast Asia

Summary

United Nations University International Institute on Global Health (UNU-IIGH), Public Health Foundation of India (PHFI), and the School of Public Health at University of Western Cape (UWC) in South Africa, invite organisations and professionals to submit information on government health programmes in Africa, South Asia, or Southeast Asia that have successfully integrated gender. To participate, complete the online submission form or submit it to whatworks.regional@gmail.com with the subject: "What works Call". **Deadline for submissions is 15 May 2022**.

Submissions will be reviewed by PHFI, UNU-IIGH, and UWC. The selected case studies will be further explored and documented in the project 'What works Africa, South Asia and Southeast Asia'.

Background

To further advance on the gains made in improving health outcomes and gender equality, particularly given the setbacks due to COVID-19, it is critical to take stock of how gender has been integrated into large scale health programs to generate learning supporting policy transfer across regional contexts. Yet, there is limited documentation and information sharing in global, regional, and national spaces on good practices that promote effective gender integration in health programmes and health systems at scale.

As part of efforts to address this gap, The United Nations University International Institute for Global Health (UNU-IIGH) in partnership with PHFI through the Ramalingaswami Centre on Equity and Social Determinants of Health in India, and the School of Public Health at UWC in South Africa are working together to identify and analyse successful cases of gender integration in government health programmes in Africa, South Asia, and Southeast Asia to understand what worked, where, for whom, why, and how. Through this work, the project aims to distil commonalities and lessons learned to constructively inform existing and future health programmes to improve gender integration with the ultimate goal of advancing gender equality. This call is part of the effort to identify promising cases of government health programmes that have successfully integrated gender and responded to the different needs and situations of women, men and non-binary people or successfully addressed harmful gender-based social norms or power inequalities.

Who can nominate?

Anyone who has been involved with or knows of a government health programme that meets eligibility criteria.









What are the eligibility criteria?

Health programmes¹ that meet all of the following criteria are eligible:

- Implemented in Africa or South Asia or Southeast Asia².
- Involved at least one government body either at national or subnational level, including Ministries of Health or other Ministries, in programme design, implementation, or monitoring & evaluation.
- Successfully addressed a health issue (as defined by the programme and can include but is not limited to changes in service utilisation, access to health services and resources, service provision, outreach, health knowledge, issues related to health workforce, health financing, etc)³.
- Successfully responded to the needs and/or situations of particular gender groups (women, men, or non-binary people) <u>and</u> addressed power inequalities or harmful gender norms (e.g., transforming gender norms to abandon and end female genital mutilation, transforming power relations within the health workforce).
- Have been active for at least 3 years.

Submission process and deadlines

To participate and make a submission as part of this call either complete the google form which can be accessed via this link or complete the form attached and submit it via email to whatworks.regional@gmail.com.

Multiple submissions by the same individual or organisation are allowed if there are several programmes that meet the eligibility criteria. In this case, please submit one entry per health programme. The form is available in English, should you need the form translated into another language please contact the team directly to make this request. **All submissions must be received by 15 May 2022.** Please contact the team via whatworks.regional@gmail.com if you have any questions.

What happens after the submission?

After the call has been closed, all submissions will be reviewed by a team of partners and other relevant stakeholders. A shortlist of programmes will be created based on criteria including, sustainability, how gender was integrated into the design and implementation, the impact the programme had from a health and gender perspective, and any unintended consequences. Contacts of shortlisted programmes will be approached to provide further information about the programme which will be used to determine whether the programme will be selected for the final deep-dive analysis of what works, for whom, where, why and how.

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¹ Health programmes can include initiatives implemented by Ministries of Health, as well as other Ministries, that contribute to improved health outcomes, which relate to and are not limited to community mobilisation, water and sanitation, nutrition, regulation of food, tobacco and alcohol, as well as health service delivery, health information systems, access to essential medicines, health workforce, health financing, leadership and governance.

² Countries in Africa: North Africa: Algeria, Egypt, Libya, Morocco, Tunisa, Islamic Republic of Mauritania, Sahrawi Arab Democratic Republic. West Africa: Benin, Burkina Faso, Cape Verde, Côte d'Ivoire (Ivory Coast), Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone, Togo. Central Africa: Burundi, Cameroon, Central African Republic, Chad, Congo Democratic Republic (Kinshasa), Congo Republic (Brazzaville), Equatorial Guinea, Gabon, São Tomé & Príncipe. East Africa: Comoros, Djibouti, Ethiopia, Eritrea, Kenya, Madagascar, Mauritius, Rwanda, Seychelles, Somalia, South Sudan, Sudan Tanzania, Uganda. South Africa: Angola, Botswana, Eswatini, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, South Africa, Zambia, and Zimbabwe; Countries in South Asia: Bangladesh, Bhutan, India, Pakistan, Maldives, Nepal, and Sri Lanka; Countries in South-East Asia: Brunei, Cambodia, Timor-Leste, Indonesia, Laos, Malaysia, Myanmar, the Philippines, Singapore, Thailand, and Vietnam.

³ Success in addressing gender and health outcomes will be based on the programmes self-defined goals (health and gender outcomes)