Gender Integration into Monitoring, Evaluation and Learning

According to the UN: "Gender integration (or mainstreaming) is the process of assessing the implications for women, men and people with diverse gender identities of any planned action—including legislation, policies or programmes—in all areas and at all levels."

In practice, this means identifying and addressing gender differences and inequities during the design, implementation, monitoring, and evaluation of our programs. Even in programs primarily focused on women, VillageReach should aim to involve men to address and reshape harmful societal expectations and norms.

Rigorous monitoring and evaluation are essential to understanding both the process and outcomes of gender dimensions within VillageReach projects. This encompasses the differential impacts on male and female users and allows for informed course correction and ongoing learning. It's not just about disaggregating data by sex, but fully integrating gender considerations into every stage of monitoring, evaluation, and impact assessment. This includes analyzing gender-related outcomes in tandem with health or developmental results. The cornerstone of comprehensive gender integration is ensuring that both the process and the program's theory of change embed baseline gender dynamics right from the design phase.

This also includes measuring changes in gender norms, access to resources, and women's and men's status and power. This can be done by monitoring gender-related activities regularly to assess their effectiveness and make necessary modifications to ensure both gender equity and successful health outcomes. This is crucial to identify and mitigate any unintended negative gender-related impacts of our programs.

Gender-Integrated M&E definition

According to the UN Women Evaluation Handbook, *'Gender-sensitive monitoring and evaluation (M&E)'* is a powerful tool for learning, decision-making, budgeting, and accountability that supports the achievement of gender equity and the empowerment of women, girls, and other minority groups.

A gender-sensitive M&E system is essential for all VillageReach programs, regardless of their primary focus group. This continuous monitoring process assesses targeted parameters to determine if a project is on track, scrutinizes how program outputs address the issues pertinent to both men and women, and recommends adjustments to address any noted inequities. Evaluations, conducted periodically based on specific indicators, measure how effectively the roles of men and women have been incorporated in the program and the impact of program outputs on both genders.

Key questions include:

- Does the introduction of the solution have differing impacts on male and female health workers or implementers?
- Are VillageReach programs adequately addressing gender disparities in the use of our programs and in their impacts?
- Are gender-integrated programs positively influencing gender-related health outcomes?

- What strategies have been successful or unsuccessful, and why?

To answer these questions:

- Multiple indicators are utilized to measure progress over time, revealing changes in intermediate gender outcomes and in improved equity in health outcomes.
- At a minimum, data are collected, analyzed, and reported by sex and age (i.e., sex disaggregation and age disaggregation). This information highlights potential differences in program influences and health outcomes between the sexes as the data are presented for both men and women and/or boys and girls. It can also draw attention to differences in the use of services and in the outcomes of program interventions by age. Sex- and age-disaggregated data are essential to monitor whether gaps between the sexes are closing, such as differences related to health behaviors, access to and use of services, and health outcomes in VillageReach initiatives like Electronic Immunization Registry (EIR) including, M-Vaccin, and Health Center by Phone (HCBP).
- Gender-sensitive indicators should be used across all programs. *A gender-sensitive indicator is simply an indicator that measures gender-related changes in society over time. By identifying the changes in the status and roles of women and men that we want to achieve and knowing how we will measure them, we can analyze VillageReach programs outcomes to see whether they are contributing to gender equity.* Moreover, indicators should also be used for more complex constructs (gender norms, power differences between men and women, female autonomy, etc.). These indicators aim to directly measure changes in gender relations in the context of VillageReach's work.

Examples of gender-related M&E questions and illustrative indicators:

Program	Gender-related M&E Question	Illustrative Quantitative Indicator	Illustrative Qualitative Indicator
Drones for Health	How does the introduction of drone technology affect the distribution of roles and responsibilities among males and females in health service delivery?	Change in number and roles of male vs. female staff involved in health supply chain after the introduction of drones	Differences in perceptions and experiences - by gender- of health workers interacting with drones
Electronic Immunization Registry (EIR) including, M-Vaccin	Are both males and females health workers able to access and use the EIR? What role does the gender digital divide play in the use of EIR and reaching children in communities?	Number and percentage of male vs. female health workers trained to use EIR; Number and percentage of boys vs. girls whose immunization records are accurately kept in the EIR; indicators of training effectiveness in male vs female health workers	Perceptions and receipt of vaccination reminders on male and female caregivers (who receives reminders, who acts on them, etc)
Health Center by Phone (HCBP)	Are the HCBP services equally accessible and	Number and percentage of calls received from men vs. women; Nature	Difference in barriers and facilitators of access,

Program	Gender-related M&E Question	Illustrative Quantitative Indicator	Illustrative Qualitative Indicator
	utilized by men and women?	of calls (type of queries, health issues discussed) differentiated by gender	disaggregated by gender, with users and non-users
Polio Lab Sample Transport	How does gender impact the transportation of polio lab samples?	Change in the role and participation of males vs. females in the sample transportation after the implementation of the project	In-depth interviews with stakeholders to explore gender-based challenges and opportunities in the lab sample transport process. e.g. difference in access experienced by both genders
Nouvelle Génération des Chaînes d'Approvisionnement (NGCA)	How does the NGCA program ensure equitable access to Maternal, Newborn, and Child Health (MNCH) products and services, considering gender-specific needs and barriers?	Percentage of female supply chain managers (this could be in comparison to men or compared over time)	Gender-specific challenges and success stories related to product access, as reported through focus group discussions or interviews with female beneficiaries and healthcare workers/supply chain managers?
OpenLMIS	How does OpenLMIS ensure gender equity in the management of health commodity supply chains?	If data being received is gender disaggregated in terms of use/access	Participation of women in decision-making processes related to OpenLMIS system implementation and management.

Research	Gender-related M&E Question	Illustrative Quantitative Indicator	Illustrative Qualitative Indicator
Vaccine Dropout Study (Bate-Papo Vacina! or Let's Talk about Vaccines!)	How does the role of women as primary caregivers influence vaccine dropout rates? What barriers do female caregivers face in accessing and utilizing vaccination services, and how do these barriers contribute to vaccine dropouts?	Number and percentage of male vs. female participants in Bate-Papo Vacina discussions	Insights from focus group discussions exploring the role of women as primary caregivers in vaccine continuation or dropout. e.g. difference in experiences by genders when they take children for vaccination such as

			vaccinator behavior, ability to travel alone etc
The Supply Chain Gender Research	How does gender impact roles, responsibilities and outcomes in the health supply chain?	Proportion of male to female employees in various roles and responsibilities within the health supply chain.	In-depth interviews with supply chain personnel to gather insights into gender-based perceptions, experiences, and any potential biases in roles and responsibilities.

Applying A Gender Lens To Develop a M&E Plan

This table presents a comprehensive view of how a gender lens can be applied to different components of an M&E plan within the context of VillageReach programs, based on the Guidelines for Integrating Gender into an M&E Framework and System Assessment

M&E Plan Component	VillageReach Gender Lens Application	Program Examples
Program Overview, Description	Description of VillageReach's program aims and its consideration of gender norms and known gender differentials that influence the specific health outcomes it seeks to address.	For the Bate-Papo Vacina! initiative aimed at reducing vaccine dropouts, the plan incorporates a gender-sensitive approach recognizing that most caregivers are women. The program strives to engage these women through community conversations and information channels they commonly use, empowering them with the knowledge and resources needed for consistent vaccination in their communities, thus fostering improved health outcomes.
Problem Statement	Demonstrate the effect and influence resulting from addressing gender norms and differentials on health outcomes in the context of VillageReach programs.	M-Vaccin, for example, should consider gender differentials in phone ownership and literacy that could influence the effectiveness of mobile vaccination reminders.
Conceptual Framework, Theory of Change	Explain how VillageReach programs integrate gender norms and	The Supply Chain for Community Health Workers (SC4CHWs) could

M&E Plan Component	VillageReach Gender Lens Application	Program Examples
	differentials into their theories of change, illustrating how addressing these factors can improve health outcomes.	showcase how incorporating gender-balanced training and equal opportunity hiring practices for health workers can ensure a more comprehensive community outreach and improved health service delivery in diverse communities.
Goals and Objectives	State VillageReach program goals and objectives, articulating expected results from integrating gender considerations.	For the SC4CHWs program, one objective could be increasing female CHWs' access to training and resources to improve product availability for better service delivery.
Description of Interventions	Describe how VillageReach programs will address gender norms or known gender differentials in their interventions.	In HCBP, design the service to ensure it is accessible and relevant to both men and women, addressing known gender differentials in technology use and health-seeking behaviors. Ensuring HCBP is staffed sufficiently by women, especially at times when women are most likely to call.
Monitoring Plan, Performance Indicators	Include data disaggregation by sex and age for all VillageReach program indicators. List specific gender performance indicators for each program.	For the SC4CHW, indicators could include the gender distribution of CHWs trained and active, the sex and age of patients served by CHWs, and specific indicators addressing gender-related barriers faced by CHWs in their roles.
Data Sources and Reporting Systems	Identify data sources for gender indicators and set up data reporting systems to collect this information for all VillageReach programs.	For the HCBP program, data sources could be call logs and user feedback surveys. This would capture information on gender distribution of callers, reasons for calling (to see if there are gender-specific health queries), and any gender-based challenges faced when accessing or using the service.
Data Quality Checks and Audits	Ensure all data quality checks and audits include a review of gender	Similar to above, for the Health Center by Phone (HCBP) program,

M&E Plan Component	VillageReach Gender Lens Application	Program Examples
	indicators and data disaggregated by gender.	data sources could be call logs and user feedback surveys.
Data Analysis	Ensure the data analysis plan for each VillageReach program explains the process for analyzing gender data.	In the EIR program, the plan could involve analyzing the gender disparities in vaccination rates and identifying the causes of these disparities to tailor interventions accordingly. Gender analysis in data management roles can help to ensure gender equity in the workforce.
Data Use and Dissemination Plan	Identify stakeholders for each VillageReach program and describe the plan for disseminating gender data to these stakeholders.	For the SC4CHWs program, stakeholders might include local health authorities and NGOs, who would be interested in gender data about community health worker training, and effectiveness.
Evaluation Plan, Evaluation Questions	Include gender-specific questions in the evaluation plan for each VillageReach program.	For the EIR, evaluation questions could explore whether the platform is equally user-friendly for male and female health workers or caregivers and whether any gender-specific barriers exist in data entry or data retrieval processes.
Planned Evaluations	Describe how each VillageReach program's evaluations will incorporate gender considerations.	In M-Vaccin evaluations, explore how gender differentials in phone ownership and literacy have impacted the program's success.
Sharing and Disseminating Evaluation Results	Ensure the evaluation dissemination plan identifies key gender stakeholders and explains how the findings will be used.	In the M-Vaccin program, the plan could involve sharing the findings of gender analysis with stakeholders, such as governmental health departments and NGOs, to facilitate discussions on gender inclusivity in mobile health initiatives and shape policies that bridge gender gaps in phone ownership and literacy.

M&E Plan Component	VillageReach Gender Lens Application	Program Examples
M&E Plan Implementation, Detailed Implementation Plan	Describe gender-specific data collection, analysis, reporting, and dissemination tasks for each VillageReach program.	For the HCBP program, detail a plan that describes how data on male and female callers will be collected, how patterns of health inquiries differ by gender, how feedback is analyzed for gender-specific insights, and how findings are reported to ensure both genders benefit equally from the service.
Roles and Responsibilities	Identify key VillageReach personnel who will collect, compile, analyze, report, use, and disseminate gender data.	The program manager for Bate-Papo Vacina! could be responsible for ensuring the collection and use of gender data in the program.
Ensure Data Quality	Outline procedures to validate that gender-related data across all VillageReach programs are accurate, unbiased, and reliable. Establish protocols for data quality checks and timely reporting.	In the Health Center by Phone (HCBP) program, implement data quality checks at multiple stages of data collection to validate the gender-disaggregated information on the nature and volume of calls.
Assess Your Progress	Determine how the gender-related outcomes and impacts will be assessed at different time intervals across VillageReach programs. Explain how this assessment feeds into program improvements.	In the Electronic Immunization Registry (EIR) program, carry out quarterly reviews to assess whether the gender digital divide is closing, and adjust the program's approach accordingly.
Adapt To Improve	Lay out the framework for incorporating learning and adaptive practices that focus on gender issues. Highlight how lessons learned and feedback loops will inform changes in the program.	For the EIR program, implement quarterly review sessions with health care providers to understand the gender dynamics in data entry and vaccine administration. Utilize feedback to enhance gender inclusivity in the EIR system's interface and user training modules.

Illustrative Data Collection Tools

Reference: Integrating Gender in the Monitoring and Evaluation of Health Programs: A Toolkit

Title	Purpose	Available URL
Demographic and Health Survey	To collect gender-sensitive health data	www.measuredhs.com/What-We-Do/Survey-Types/DHS.cfm
International Men and Gender Equality Survey Questionnaire	To collect household data on men's attitudes and practices, and women's opinions and reports of men's practices on topics related to gender equality	www.icrw.org/publications/international-men-and-gender-equality-survey-images
The Gender Equitable Men Scale	To measure attitudes toward "gender-equitable" norms, and the effectiveness of any program that hopes to influence those norms	https://www.advancingnutrition.org/resources/caregiver-toolkit/equitable-gender-attitudes/gender-equitable-men-gem-scale
Compendium of Gender Scales	To provide tools to assess gender-related attitudes and beliefs and evaluate their interventions	http://gender.careinternationalwikis.org/_media/c-change_gender_scales_compendium.pdf
Guidelines For Developing A Population-Based Gender And Health Profile	This guide provides information and guidelines on how to incorporate health-related data into a gender and health profile using gender-based analysis. The guide provides a detailed, step by step process for developing a gender and health profile and includes tools such as profile examples, flow charts, and templates.	https://www.igwg.org/wp-content/uploads/igwg/files/Guidelines%20for%20developing%20Pop%20based%20Gender Health%20Profile.pdf
Guidelines for the Analysis of Gender and Health	To increase practitioners' understanding and build skills to respond to gender issues in planning, implementation, and evaluation of health care provision and health research	https://www.lstmed.ac.uk/sites/default/files/pictures/Guidelines%20for%20the%20Analysis%20of%20Gender%20and%20Health.pdf
Gender Indicator Data	To collect gender specific health data	https://dhsprogram.com/topics/gender/index.cfm
Gender & Qualitative Interpretation of Data	To assist users to reach a more qualitative	file:///C:/Users/lmonzer/Downloads/resource_en_209855.pdf

	understanding in their reading and interpretation of quantitative data from a gender perspective	
International Men and Gender Equality Survey (IMAGES) Questionnaire	To collect household data on men's attitudes and practices—along with women's opinions and reports of men's practices—on a wide variety of topics related to gender equality	https://www.icrw.org/publications/international-men-and-gender-equality-survey-images/
Making Women Workers Count	A Framework for Conducting Gender-Responsive Due Diligence in Supply Chains	https://www.bsr.org/en/reports/making-women-workers-count-gender-responsive-due-diligence-report
Updating the Tanzania immunization registry to capture immunization equity indicators	This report shares the experiences of using the electronic immunization registry to accommodate assessment of immunization inequities, and the process used to develop the socioeconomic status assessment tool in Tanzania.	https://www.path.org/resources/updating-the-tanzania-immunization-registry-to-capture-immunization-equity-indicators/
Electronic immunization data collection systems: application of an evaluation framework	Evaluation framework in order to assess electronic immunization data collection systems	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3898919/

Others

How to Conduct a Situation Analysis of Health Services for Survivors of Sexual Assault	To provide tools to conduct a national situational analysis of sexual assault services	http://www.svri.org/sites/default/files/attachments/2016-04-13/SituationalAna.pdf
Reproductive Health Assessment Toolkit for Conflict-Affected Women	To provide tools for collecting data on safe motherhood, Family Planning, sexual history, sexually transmitted infections, HIV/AIDS, Gender based violence (GBV), and female genital circumcision/mutilation (FGC/M)	https://reliefweb.int/report/world/reproductive-health-assessment-toolkit-conflict-affected-women

Researching Violence Against Women: A Practical Guide for Researchers and Activists	To suggest innovative techniques that have been used to address methodological and ethical challenges of conducting research on violence against women	https://apps.who.int/iris/handle/10665/42966/
Women's Empowerment in Agriculture Index	To measure the empowerment, agency, and inclusion of women in the agriculture sector and identify ways to overcome obstacles and constraints	www.ifpri.org/publication/womens-empowerment-agriculture-index

Learning

Incorporating gender considerations into your ongoing learning process is more than just a matter of data collection and analysis. It's about understanding the intricate ways in which gender roles, relationships, and identities influence health outcomes. Monitoring, Evaluation, and Learning (MEL) framework doesn't merely aim to dissect the gender-related aspects of health programs; it also strives to evolve these programs based on what we learn, thus serving dual goals: enhancing healthcare efficiency and promoting gender equity.

LEARNING OBJECTIVES

- Assess how gender-focused strategies either advance or impede gender equity goals.
- Investigate which components of VillageReach programs most effectively address gender imbalances.
- Pinpoint limitations in current gender-centric MEL activities and suggest avenues for refinement.

GUIDING QUESTIONS FOR LEARNING

- What insights have we gained regarding the inclusion of gender in VillageReach initiatives?
- Have there been any unanticipated consequences—either positive or negative—relating to gender?
- Was an analysis undertaken to understand the gender disparities and causes for unanticipated consequences?
- Based on these learnings, what modifications or adaptations are necessary?
- Which strategies have proven successful, and which have faced challenges?
- How is our work impacting various stakeholders—from individuals and communities to systems and practices?
- What notable changes related to gender have been observed over the last quarter? Are these changes aligning with our objectives?
- If certain activities are falling short, can they be reimagined entirely to be more effective? If so, what changes would add value?

IMPLEMENTING LEARNED INSIGHTS

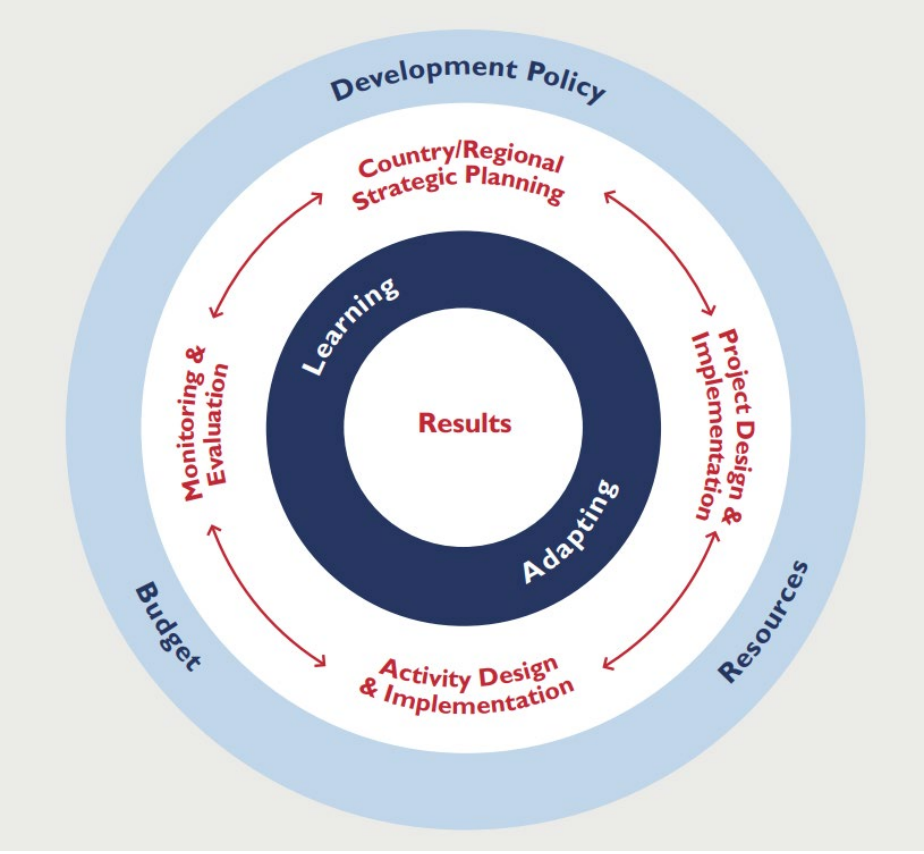
The lessons learned should be applied to:

- Optimize operational procedures.

- Enhance the efficiency of data collection, analysis, and utilization.
- Collaborate with local stakeholders for context-specific understanding of results.
- Refine reporting mechanisms.
- Adapt program strategies to increase their impact.

ENSURING ACCOUNTABILITY

The data from your M&E can confirm that you are following best practices and using resources as intended. It's also an effective system of gathering and responding to feedback from those benefiting from our programs.



Incorporating gender integration into the MEL framework is pivotal for the success of VillageReach programs. This comprehensive approach ensures a holistic understanding of gender roles and dynamics, facilitating informed decision-making and adaptive course correction. Gender considerations extend beyond mere data disaggregation by sex, requiring in-depth analysis at every MEL stage. The guidelines accentuate the importance of a gender-sensitive MEL system. The inclusion of key questions and utilization of multiple indicators offers a well-rounded picture, enabling VillageReach to track changes over time and discern nuances in gender relations. The importance of such an approach cannot be overstated. Beyond enhancing the efficiency of health programs, gender-integrated MEL seeks to foster an environment that champions gender equity. It's not just about data but about understanding and acting upon the nuanced ways gender intersects with health outcomes.