

MEETING REPORT

2021 Interagency Gender Working Group Plenary

Exploring Gender Transformative Approaches: Lessons Learned and New Opportunities in Health Programming

October 28, 2021



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Event Overview

Background

Nearly 20 years after the Interagency Gender Working Group (IGWG) adapted the Gender Integration Continuum framework to depict and explain a range of approaches for gender integration in programming, the use of the term *gender transformative* by policymakers, donors, implementing agencies, and civil society actors has increased dramatically. The IGWG defines gender transformative policies and programs as:

Transformative policies and programs seek to transform gender relations to promote equality and achieve program objectives. This approach attempts to promote gender equality by 1) fostering critical examination of inequalities and gender roles, norms, and dynamics; 2) recognizing and strengthening positive norms that support equality and an enabling environment; 3) promoting the relative position of women, girls, and marginalized groups; and 4) transforming the underlying social structures, policies, and broadly held social norms that perpetuate gender inequalities.¹

Many donors and implementing agencies have endorsed gender transformative programming as a tool to advance gender equality, and evaluations of health programs using gender transformative interventions show promising results, with a significant number of programs improving outcomes related to gender equality, and some enhancing health outcomes.²

At the same time, new questions, tensions, and critiques about the implementation of gender transformative programming have emerged. While donors and implementers have a strong motivation to incorporate gender transformative programming, many programmers face challenges—including lack of tools, resources, time, and/or skills—that may limit their ability to implement these approaches and measure the complex nature of gender transformative outcomes. Furthermore, the definitions, program elements, and measurement of gender transformative programming vary across institutions.

Additionally, debate continues among gender practitioners and advocates about whether gender transformative programming is mainly defined by its approach, its outcomes, or both. These variations indicate that, as a community, gender advocates and experts are still exploring and developing evidence and consensus about the core elements of gender transformative programming, while valuing the ways it has contributed to advancing gender equality.

On Oct. 28, 2021, more than 200 participants from 40 countries joined the IGWG 2021 Plenary: [“Exploring Gender Transformative Approaches: Lessons Learned and New Opportunities in Health Programming.”](#) The IGWG 2021 Plenary served as a springboard for stakeholder dialogue in exploring gender experts’ and advocates’ collective understanding of gender transformative programming, with the goal of coalescing on key findings and areas for future action.

This meeting report synthesizes the key discussion points that emerged during the event and provides actionable recommendations for donors, decisionmakers, researchers, and program implementers to advance the utilization and integration of gender transformative programming.

Event Objectives

The 2021 IGWG Plenary explored the current state of gender transformative programming in global health, with a focus on family planning and reproductive health. The event aimed to:

- Advance debate and consensus on definitions of and criteria for gender transformative programming, as well as highlight the potential definitional gaps or limitations.
- Share insights into factors for success in applying this type of programming.
- Identify ways that gender transformative approaches can be better applied to policies and institutional practices and strengthen government health systems.

Format

The event began with a panel discussion focused on: critically examining the limitations of how gender transformative interventions are defined; highlighting challenges in the measurement of gender transformative outcomes, as well as in the integration of this programming within health systems; and sharing factors for successful implementation of gender transformative programming, as well as lessons learned from the field.

Panelists included:

- **Jessica Backman-Levy (moderator)**, Ph.D., Associate Professor of Practice, Brown School, Washington University in St. Louis and Senior Associate, Iris Group.
- **Prabu Deepan**, Head of Asia Region, Tearfund.
- **Archana Dwivedi**, Director, Nirantar India.
- **Katherine Hay**, Distinguished Fellow in Gender Equity and Health and Senior Strategy Advisor, University of California, San Diego.
- **Rosemary Morgan**, Ph.D., Associate Scientist, Johns Hopkins Bloomberg School of Public Health.

In breakout room sessions, participants shared lessons learned (including implementation challenges) from, best practices for, and future opportunities in applying and incorporating gender transformative programming in global health, including family planning and reproductive health. Discussions focused on integrating gender transformative programming at community, health systems, and public or institutional policy levels. Breakout room discussion questions are included in the annex.

Key Takeaways

Over the course of the convening, a rich discussion ensued on the event themes. The discussion addressed ongoing gaps and challenges related to gender transformative programming, as well as lessons learned and insights based on participants' collective experiences. These key takeaways are summarized below and each is accompanied with a set of recommendations.

Inconsistencies in how the term gender transformative is defined can lead to confusion about how these programs are implemented, approaches are applied, and outcomes are measured.

A lack of consistency in defining and applying the term gender transformative by donors, policymakers, implementers, and researchers persists.

Some implementers and donors utilize the term gender transformative to describe their programmatic intentions, without designing programs that meet existing definitions, applying transformative approaches, or measuring program outcomes related to shifting norms and/or promoting gender equality. For example, some program designs focus solely on the individual level of change but lack attention to any of the system-wide outcomes implied by the definition.

Lack of clarity about these definitions further means that gender transformative approaches (how programs are designed and implemented) and gender transformative outcomes (how program achievements and results are measured) are often conflated. Implementers, donors, policymakers, and researchers must go beyond thinking solely about gender transformative approaches but consider outcomes as well. Additionally, gender transformative programming, gender integration, and gender mainstreaming are, at times, referred to interchangeably, with the nuances between these terms being overlooked.

Greater clarity about these definitions could lead to wider consistency of application of terminology across contexts and institutions, stronger rationale for allocation of adequate resources and approaches, and greater accountability of donors and implementers to monitor and report gender transformative outcomes.

Recommendations from the discussion for improving the clarity of definitions for gender transformative programming include:

- Programmers and researchers should **consider both gender transformative approaches and outcomes** in programming, and the theory of change between the two. In addition, the nuance, overlap, and differences between the terms gender transformative, gender integration, and gender mainstreaming need clarification.
- As the use of the term gender transformative grows in popularity, implementers and researchers should **work with donors and decisionmakers, including policymakers, to improve their understanding of how the term is defined.** Furthermore, proponents of gender transformative programming should examine its ultimate goals and, if the goal is to *truly* shift restrictive gender norms and increase gender equality, update the definition to explicitly reflect this aim.
- Gender equality champions must **clarify how to measure the success of gender transformative programming**, recognizing that programs—to be considered truly transformative—should aim to meet all definitional criteria.

Implementers and donors should improve the measurement of gender transformative outcomes to promote the adoption and scale-up of successful approaches and mobilize donor support.

Greater investment in measuring the effect of gender transformative approaches on health and gender equality outcomes can enhance learning and generate greater commitment to gender transformative programming. Participants highlighted several key measurement challenges, including: assessing the impact of unintended harms (for example, reinforcing gender stereotypes or power dynamics that benefit one group over another, excluding certain groups from services or benefits), incorporating community-generated priorities in program outcomes, determining what transformative outcomes for institutions (and individuals and communities) look like, and conceptualizing and applying measures for context-specific power dynamics and gender norms. Participants sought more guidance on how to better measure disparities and shifts in gender transformative norms and outcomes.

Recommendations from the discussion for improving the measurement of gender transformative outcomes include:

- **Determine how to best target multiple levels of society and power relations** (such as individual, community, and institutional) when designing gender transformative programs. Implementers should be specific about the norms their programs are aiming to shift during program design and implementation stages.

- **Adopt indicators that measure the impact of gender transformative programming on development outcomes beyond health** to demonstrate the added value of gender transformative programs.
- **Develop indicators and establish desired outcomes in collaboration with communities**—given that they are most familiar with their own needs and challenges—to ensure that outcomes are context-specific and reflect community goals. To maximize the impact of gender transformative programming, researchers, donors, and implementers should better collaborate with each other to learn what kind of changes communities want and respond to the expressed desires of stakeholders.
- **Document the specific processes that lead to successful implementation.** For example, an implementer supporting community mobilization activities might document process-oriented details such as the number and size of community dialogue sessions and the selection criteria and training approach for community mobilizers. Process-oriented details may be critical to the replicability or scale-up of successful approaches.

Community leadership in the design and implementation of gender transformative programs is critical.

Speakers and participants alike advocated for greater community engagement and leadership in designing and implementing gender transformative programs. Participants also pointed out that better coordination is needed between donors and community stakeholders in discussions on gender transformative programming, in addition to recognizing that gender transformative programs should not operate independently from broader community contexts and norms.

Recommendations from the discussion for promoting community leadership in the design and implementation of gender transformative programming include:

- **Collaborate with community stakeholders when designing and implementing gender transformative programming to improve context-specific implementation—particularly for conflict, post-conflict, and humanitarian settings—and measurement** by working together to determine program goals and to define and co-create gender transformative outcomes and indicators.
- **Identify and maintain strong partnerships with gender champions and allies** in civil society, donor institutions, and governments to secure adequate investments in gender transformative programming.
- **Coordinate and share data and information with leaders of ongoing gender equality social movements** that may be happening outside of programming and interventions.
- **Explore the nuances of gender transformative approaches for specific populations**, such as nonbinary persons, as well as **incorporate intersectional and inclusive approaches** that examine power, privilege, and the overlapping barriers, including discrimination, people face across social identities.
- **Recognize the influence of and improve collaboration with religious and community leaders** to shift gender norms.
- Regarding male engagement, **frame gender issues as relevant to men and boys**—not only to women, girls, and non-conforming gender identities—and as personal issues in which they should have a stake; men and boys should be encouraged to recognize gender equality's shared benefits.

Implementers and donors generally recognize the importance of gender transformative programs that address the broader power structures that enable gender norm change, yet programs often focus on individuals, their behavior, and community-level approaches.

Many programs focus on a single dimension or level of change, but fewer analyze and address the power dynamics in broader systems, structures, and institutions. Participants wanted greater clarity and attention to institutional and policy-level changes during the implementation of gender transformative programming.

“It’s easy for us to...design programs to work with individuals one-on-one, but power relations don’t operate in a vacuum and gender is relational and structural...You may be successful in increasing a person’s sense of self-worth or capacities but without also changing those relational structural aspects, that person will likely not be able to act on that increased agency.”

—Rosemary Morgan, Johns Hopkins Bloomberg School of Public Health

Panelists noted the need for systemic change to shift power dynamics and create new norms at the individual, community, and systems levels in ways that empower women, girls, and marginalized communities. They also noted the importance of creating new norms, such as ones that promote autonomy, rights, and women’s leadership.

“[Tearfund] work[s] with religious institutions who...run education systems, health services, clinics, etc. And we’ve started seeing shifts in this programming. Not only at the individual level but also...[in]...power dynamics and how these spaces [can shift] the normative environment for women...but also [considering] this added layer of religious leaders...[so] that we are not reinforcing another layer of power as well...What we are seeing through these programs and the evaluations...is...not only reduction of partner violence and uptake in family planning services, but also...more alternative movements and...mobilization...where we are seeing women’s leadership increase.”

—Prabu Deepan, Tearfund

Recommendations from the discussion for how gender transformative programs can better address broader power structures to shift gender norms include:

- To achieve gender equality and promote positive masculinity, implementers integrating gender transformative programming must **emphasize shifting harmful gender norms and power structures**, in addition to creating new, positive norms.
- Programmers and researchers should **think intentionally about the specific gender and social norms these programs aim to address and shift.**
- To target the roots of gender inequality, **gender transformative programming should incorporate gender analysis and, to respond to identified gender inequities, incorporate interventions that address these inequities in institutional practices and policies.** Implementers should recognize that gender inequality is manifested within patriarchal institutional policies, practices, and culture, as well as in government policies and in norms. For example, implementers can seek to change health or educational institutional policies or practices that exclude specific groups because of gender discrimination or bias.

Policy advocates and donors should increase attention to and investments in gender transformative policies.

Policy change can influence and shift the gender norms that impact communities and health systems, and vice versa. Both policy change and norms should be considered as key to gender transformative programming.

Participants expressed a need for clarity on what gender transformative policies look like, recognizing the need for more policies that incorporate gender transformative elements. Additionally, participants noted that gender and health advocates should be strategic in supporting critical, gender transformative multisectoral policies (for example, in health, education, workplace protections) in their efforts to promote gender equality, as they can contribute to improving health outcomes. Policy advocates must also consider local power dynamics and how power can be re-distributed to challenge harmful norms that perpetuate societal inequalities and re-define norms. This recognition is important so that gender transformative policies, including multisectoral ones, can maximize their impact and meet intended outcomes.

“In our study where we looked at microcredit as a women’s empowerment strategy... we saw that...access to microcredit...absen[t] of other enabling interventions...led to more burden on women because women were responsible for the re-payment, and this resulted in more violence against them because [of] the expectation of the families that women will make sure that the credit comes to the home further increased their vulnerability in increasing their negotiating power. So...understanding these relations... in our everyday life...and different age, class categories...is at the very core of...looking at [an] intervention from [a] gender...transformative lens.”

–Archana Dwivedi, Nirantar India

Panelists also discussed the importance of elevating opportunities for gender transformative outcomes resulting from policy change and the need to understand the context in which issues and policies related to gender equality can gain traction and support from donors and governments.

“How do you make gender transformation an electoral issue as well as a policy issue? ...if governments are not ready to work on those issues...your funder’s not going to go ahead and work there. They’re not going to be allowed by those governments...If [a] government starts demanding that multilateral donors...work on these issues...they will prioritize them.

Context matters in terms of the strategy and tactics like whether your best course of action is at the central or at the federal level or at the subnational level, provincial, state-level. Where can you get traction? Where are you in an electoral cycle? Is there freedom? A free media?...[The] bottom line is how do you get governments to start putting their dollars and their priorities and their people focused on gender and social equity?”

–Katherine Hay, University of California, San Diego

More investment in advocacy and accountability for national and subnational policies that prioritize gender equality is needed.

Recommended approaches for increasing these investments include:

- **Increase community mobilization activities to support citizens to elevate gender transformative policies as electoral issues** with the goal of encouraging governments and donors to prioritize and advance gender equality.
- If governments have a strong mandate to address gender equality and promote gender transformative programs, gender advocates should **leverage agreements and national policies that host governments have signed.**
- Implementers **should target gender champions in positions of power in organizations, donor institutions, and governments** to push gender issues forward and shape gender transformative policies.

Efforts to integrate gender transformative policies within health systems must go beyond strengthening the capacity of health providers.

Health systems reflect and reinforce cultural and societal characteristics and inequities, and these systems need gender transformative change. To achieve long-lasting change, inequities within all the interrelated components of the health system must be addressed. To date, most efforts in applying gender transformative approaches to the health system have focused on strengthening the capacity of health care providers to better understand gender dynamics in their jobs. These efforts are important, but other aspects of the health system need increased focus.

For example, implementers, advocates, and donors should better prioritize building stronger health management information systems (HMIS) that include indicators and tracking of gender-specific health disparities. Many national HMIS and program data focus on (quantitative) health data but lack measures that highlight the influence of specific gender norms (for example, son preference, women's mobility) on health outcomes, or lack capacity to collect and analyze relevant qualitative data. Implementers and donors should also pay greater attention to enabling more equitable health system human resource policies and practices that focus on equitable pay, career advancement, and safety protocols.

Other areas of the health system that require attention from donors, implementers, advocates, and health managers include the governance and decision-making models that are commonly used in health systems, health budgeting and resource allocations, and accountability mechanisms. Many health systems lack accountability platforms or mechanisms that communities can use to share feedback and input—about gender and other issues affecting them—with health decisionmakers.

Recommendations for advancing gender transformative change in health systems include:

- Donors, implementers, researchers, and health system managers should **focus more attention on improving HMIS systems** to collect, analyze, and track gender-specific data relevant to health.
- Health managers and implementers should **devote more attention to health workforce issues**. These include: the workplace challenges female health care workers face (for example, pay gaps, workplace sexual harassment), barriers to women's leadership and decision-making, and the additional time women in the health workforce spend in caregiving roles in addition to their work. Resources shared during the event include:
 - [Advancing Provider Behavior Change Programming](#) research and learning agenda (Breakthrough RESEARCH).
 - [Provider Behavior Change Ecosystem Map](#) (Breakthrough ACTION + RESEARCH).
 - [Defining and Advancing Gender-Competent Family Planning Service Providers: A Competency Framework and Technical Brief, 2nd edition](#) (Human Resources for Health 2030).
- **Explore better accountability mechanisms and feedback loops within health systems** that provide platforms for community members and advocates, especially those that are part of marginalized groups, to provide key information about how the health system can best serve them.

More dialogue between implementers and funders may enhance commitments to gender transformative programs.

While the use of the term gender transformative has increased among donors and policymakers, resources supporting gender transformative programming are scarce and more financial and political commitments to gender equality—across global, subnational, and local levels—are needed from donors, governments, and institutions.

The ability of gender transformative programming to advance the achievement of health and development outcomes can be an important strategy to make the case for these programs to donors. However, programmers and researchers should also assess the intrinsic value policymakers, donor institutions, and governments assign to gender equality. Too often, leaders of governments, donor institutions, and implementing organizations primarily value gender equality as instrumental to other health and development outcomes, rather than as intrinsically valuable. This reality contributes to gender transformative approaches being undervalued and underutilized in program design and measurement, particularly in resource-constrained environments. Furthermore, if donors and governments do not truly value advancing gender equality, this undervaluation will ultimately be a barrier to securing sustained financial and political support for gender transformative programming.

Additionally, the fixed-funding structures mandated by many donors—particularly short-term project cycles—can constrain gender transformative programming implementation, posing significant challenges to effectively measuring and achieving gender transformative outcomes.

Recommendations for improving dialogue and cooperation between funders and implementers to strengthen gender transformative programming include:

- Using evidence-based practices, programmers and communities should **consult local models for gender transformative programming and work to improve donors' understanding of realistic, context-specific gender transformative outcomes**.

- Donors should **support increased financial and political investments in gender transformative programs** and allow implementers more flexibility with the timing and structuring of project cycles (across stages: from design to implementation to completion) and more targeted listening to community inputs at all stages.
- Donors should also **work to better understand what gender transformative programming looks like in practice and implementers' needs** for effectively implementing these programs in partnership with communities.

Next Steps

Following discussions from the 2021 Plenary, the IGWG has identified the following areas for further exploration by gender experts, researchers, and advocates:

- Build consensus among implementers, advocates, researchers, and donors on how the term gender transformative should be defined, applied, and measured.
- Seek guidance on the measurement of and pathways to gender transformative outcomes—in partnership with communities—when designing and implementing gender transformative programs.
- Promote and engage in learning and exchange on theories of change and interventions that tackle systems and policies to address power dynamics and shift gender and other social norms.
- Strengthen partnerships with communities to ensure that interventions are context-specific and realistic.
- Improve collaboration with donors and governments to secure increased and sustained investment in gender transformative programming that is responsive to community needs, inclusive, and feasible.

Conclusion

This meeting report highlights the key discussion points and areas of consensus and debate regarding gender transformative programming captured at the 2021 IGWG Plenary. Clearly outstanding questions persist regarding how gender transformative programs should be designed, implemented, and measured. Gender advocates and experts should continue these conversations—with donors, governments, and communities—as they continue to push for support for gender transformative programming and to advance gender equality.

Annex

Breakout room discussion questions:

1. Does anyone have any comments or takeaways on the panel discussion? Have your views changed at all?
2. Should we be re-framing the term gender transformative to focus on program outcomes, rather than approaches and intentions?
3. Reflecting on your own experiences, what do you think is necessary to address and shift norms (at the community, health systems, or policy level)? What are some lessons learned in applying factors for success with gender transformative programming, related to:
 - a. Multisectoral action.
 - b. Multilevel, multistakeholder involvement.
 - c. Diversified programming.
 - d. Critical awareness and participation among affected community members.

Please share specific examples.

4. For the health systems group: Is there anyone who could share their experience incorporating gender transformative programming into the service side of health programming (for example, strengthening government health systems and workforce, clinical service delivery, improving universal health coverage)?

¹Interagency Gender Working Group, [The Gender Integration Continuum Training Session User's Guide](#), 2017.

²For example, the rigorously evaluated programs of Bandebereho and Indashyikirwa in Rwanda. (See: Kate Doyle *et al.*, "Gender-Transformative 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, no. 4 (2018); and Lyndsay McLean *et al.*, "Shifting and Transforming Gender-Inequitable Beliefs, Behaviours, and Norms in Intimate Partnerships: The Indashyikirwa Couples Programme in Rwanda," *Culture, Health & Sexuality* 22 no. 22, sup1 (2020): 13-30.



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