AMREF
Better Health for Africa

Gender Policy and Guidelines

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Michael Smalley
Director General

Glossary of Terms

Affirmative Action: Deliberate and usually short-term measures to discriminate in order to create a gender balance, e.g. employment of only women in senior positions until parity is achieved.

Empowerment: Process and result of gaining attitudes, knowledge and skills that position one to compete equally with others for available opportunities and resources and to exercise autonomy.

Gender: Culturally and socially based expectations of the roles and behaviour of men and women. Gender is socially constructed and is related to how we are perceived and expected to think and act as men or women because of the way society is organised. For instance, women cook, wash and take care of babies. Men head families, inherit land and provide leadership. These roles can, however, be played by either sex as they are not biologically pre-determined.

Gender Analysis: Systematic scrutiny of contexts to reveal differences in the conditions and positions of men and women, boys and girls, the factors behind the differences and their implications.

Gender Awareness: Recognition that there is inequality in the conditions and positions of men and women, boys and girls, and that these inequalities are systemically caused and perpetuated.

Gender Balance: Equal representation and participation of women and men in all structures, e.g. a committee of 10 people will have five men and five women. But gender balance must not only be looked at in terms of absolute numbers but also at each level in a structure. For example, there must be parity at management, middle staff and auxiliary staff level for an organisation to be considered gender balanced.

Gender Based Discrimination: Systematic bias in which a person is denied his or her rights because of being a woman, girl, boy or man.

Gender Bias: Prejudiced actions against women or men, boys or girls in the belief that the other sex is inferior or less deserving. Qualitative and quantitative information, broken down to show the different conditions and positions of women, men, boys and girls.

Gender Equality: Similarity in the treatment of women and men based on human rights provisions (all born equal) as enshrined in the Universal

Declaration of Human Rights (1948) and the Convention on the Elimination of All Forms of Discrimination Against Women (1979). It means that women and men have equal conditions for realising their full human rights and potential to contribute to national, political, economic, social and cultural development and to benefit equally from the results. Given the current situation of inequality, gender equality cannot be achieved without the empowerment of women. There are two types of equality. First is equality of opportunity, which means access for girls and boys, women and men, e.g. enrolment in school. Second is equality of outcome, which means proximate results for women and men, girls and boys, e.g. completion rates for girls and boys in primary school and their levels of performance. The second is also called substantive equality. Equality of opportunity alone is not enough given the historical and systemic causes of gender disparities. Gender equality is not a women's issue, it is a vital societal issue.

Gender Equity: This is the process of being fair to women and men in the sharing of resources, opportunities and benefits, depending on a prevailing situation, to attain justice. To ensure fairness, measures must often be available to compensate for historical and social disadvantages that prevent women and men from otherwise operating on a level playing field. Provisions for equal opportunities may not take into account the unique challenges that different individuals and groups face. That is why equity measures are necessary. Equity leads to equality: equity is the means and equality is the end.

Gender Gap : Quantitatively measurable differences in the situations of men and women, girls and boys, e.g. school enrolment.

Gender Mainstreaming: A strategy for ensuring that gender is taken into account in organisational policy, structures, practices and programmes. It is the process of assessing the implications for women and men of any planned action including legislation, policies or programmes, in all areas and at all levels. It is an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that women and men benefit equally and inequality is not perpetuated. The ultimate goal is to achieve gender equality.

Gender Roles: Activities assigned to men or women by each community/society over and above their biological roles. They can be classified as productive (to generate income and wealth), reproductive (to care for and maintain human life) and community management (to make decisions and establish and maintain order, structures and systems in a community).

Gender Sensitivity: Awareness of and respect for the needs, interests and sensibilities of women as women and men as men, e.g. not using derogatory language, avoiding stereotypes, avoiding patronising language, providing facilities for both in public places in recognition of different needs etc.

Sex: Biological distinction between males and females, e.g. males sire children, females bear and breastfeed children etc. Sexual differences are the same across the world and are natural.

Sexual Exploitation: Any abuse of a position of vulnerability, differential power or trust for sexual purposes.

Sexual Harassment: Any covert or overt act of a sexual nature that is unwelcome, uninvited and unrequited and which makes its target uncomfortable, offended, demeaned, humiliated, coerced and undignified. The act could be physical, verbal, pictorial, electronic, or carried out in any form and could be targeted at and coming from a person of the same or opposite sex.

1.0 | AMREF Historical Background

The African Medical and Research Foundation (AMREF) was founded in 1957 at the foot of Mt Kilimanjaro by three reconstructive surgeons based in Kenya, who were concerned that rural Africans did not have access to the surgical care they needed. The surgeons concluded that if the patients could not go to them, then they would go to the patients: and so the 'Flying Doctors' were born. Continuing the tradition of innovative solutions to health care, AMREF today carries out pioneering interventions that provoke significant impro vements in health care in Kenya and beyond.

In 2007, as AMREF marked 50 years of service in Africa, we concluded a period of two years of refining our strategy. We added a strong component of community empowerment, so that we could use the current programmes to better advantage over the next 10 years. The rationale for this shift was that AMREF has become acutely aware of the gap between the vulnerable communities and the formal health system. The gap exists in spite of increased expenditure on health by governments and donors and despite successes in the prevention and treatment of common diseases. It is at this critical time of review and reflection that we identified the need for a gender policy to make explicit what AMREF has implicitly done to ensure gender equity, equality and social justice.

In our new strategy we have committed to being proactive by identifying issues that contribute to the gap between communities and the formal health system, and providing the evidence that will contribute to closing that gap. Over the 50 years AMREF has been in existence, in the area of health, as in all the other areas of development, evidence has built up to the level of consensus that gender is one of the key factors that has caused major gaps in access to health, education, poverty reduction, and in full participation and sustaining gains in development. This policy aims to map out ways in which being conscious of the gender dimension of health can contribute to achieving the goals of the new AMREF Strategy in the immediate, short and medium term, and to achieving even higher goals in the long term.

2.0 | *Vision, Mission and Core Values*

The goal of this gender policy is to contribute to the accomplishment of the vision, mission and core values of AMREF, recognising and acknowledging the global consensus that gender equality is a prerequisite for achieving development goals. Gender inequality is a root cause as well as a consequence of all human disadvantages, including poverty and disease.

2.1. Vision and Mission

AMREF's vision is
Better Health for Africa.

Mission
AMREF is committed to improving health and health care in Africa. We aim to ensure that every African can enjoy the right to good health by helping to create vibrant networks of informed and empowered communities and health care providers working together in strong health systems. Addressing gender issues and concerns is key to understanding the factors that hinder access to health care and sustenance of gains in health.

2.2 | The Gender Dimension of AMREF's Core Values and Beliefs

The gender factor overarches all core values and beliefs that guide AMREF's work:

Health as a Human Right

Recognising health as a basic human right, AMREF will use the rights-based approach in all its programme operations. *Gender equality is a key principle in the achievement of human rights.*

Pro-poor

AMREF identifies priorities and allocates resources on a pro-poor basis, giving priority to people and communities that we believe to be the most vulnerable. *Gender analysis will be key to understanding and addressing the root causes of poverty and vulnerability.*

Empowered Communities

AMREF believes that communities are resourceful and that empowered communities are a prerequisite for improving individual and community health. We work with and through communities, putting their interests and opinions first. *The empowerment approach demands a progression from addressing the practical needs to the differentiated strategic interests of females and males of diverse ages.*

Strategic Partnerships

AMREF believes in strategic partnerships as a means to conducting successful and sustainable interventions. AMREF develops and nurtures partnerships with like-minded organisations that share our core values and strategic focus. *Promoting gender equality is a core value of key partners and is an important criterion for assessing an organisation's commitment to the rights based approach.*

Gender Equity

AMREF is committed to mainstreaming gender considerations in all of its interventions. As AMREF strives to abolish gender inequalities, we make a conscious effort to remove unfair practices and promote the well-being of both genders. *Gender equity is a step towards gender equality, which is the ultimate goal of all development initiatives and the full achievement of human rights.*

Non-discrimination

Adhering to international conventions, AMREF does not condone discrimination based on sex, religion, race or culture, internally or in its programmes and interventions. *This places gender justice and equality at the core of all AMREF operations.*

Professional Standards

AMREF sets high professional, ethical and medical standards and monitors these closely within our projects, among ourselves and among those with whom we partner. *Building the capacities of all staff and development partners to integrate gender in all operations is a prerequisite for achieving ethical and professional standards and social justice.*

Transparency and Accountability

AMREF believes in honest communication, absolute openness, and the transparent use of influence, power and resources. AMREF has zero tolerance for corruption, both within the Foundation and in our dealings with outside agencies. *Power relations are at the bottom of most problems and gender analysis will contribute to unearthing the prevailing power patterns and therefore the possible solutions to inequalities and injustices.*

Sustainability

Through advocacy and empowerment, AMREF aims to enable communities and the formal health system to sustain mutually designed and implemented interventions. *Gender mainstreaming is key to sustaining gains in health, education, economic development and the empowerment of women, men, girls and boys.*

Evidence-based Policy and Practice

AMREF uses its grassroots work with African communities to generate and document evidence aimed at influencing donor/government policies and practices that bring about lasting benefits to the most vulnerable groups and communities. *AMREF will play a key role in generating evidence that addressing gender dimensions makes a difference in the effectiveness of programme interventions and the transformation of societies.*

Innovation

AMREF upholds a commitment to innovation in our work and the work of our partners. We constantly develop and encourage new, effective methods and tools for improving the health of communities. *Gender mainstreaming empowers females and males of different ages to transform their lives and promotes social innovation.*

Environmental Protection

AMREF is committed to developing and maintaining sound, robust environmental protection policies in all of its activities. *Addressing gender inequalities and injustices in the distribution of resources is a key strategy for environmental protection and preservation.*

2.3 Gender: The Common Denominator

Gender is the common denominator without which AMREF's core values and beliefs cannot be fully realised. Gender equality involves ensuring that all human beings—women, men, girls and boys—are considered equal and treated equally in terms of dignity and rights. Gender discrimination is one of the main causes of poverty, and a major obstacle to equitable and sustainable global human development. This policy and the accompanying guidelines outline ways in which to address the gender dimension as an integral consideration in all AMREF operations. AMREF will go a step further than equity to make gender equality the ultimate core value overarching all the other values.

3.0 | Rationale for the AMREF Gender Policy

3.1 | AMREF Commitments

AMREF commitment to gender equality has been implicit in our operations, including the work of our pioneers, current and past institutional leadership, our human resources policy and in the choice of the beneficiaries of our programmes. The latest commitments are laid out in our programme strategy which, guided by our mission and vision statements and our core values, is designed to create a broad-based culture of health promotion, prevention and care in the African health arena. As duty holders, we will work closely with partners at all stages, and especially with poor and marginalised communities, to bring them into an integral and vibrant relationship with the formal health system. This will ensure that actors in the health system respect the position of the community as right holders.

We will orient our staff and partners to be duty holders in keeping with the rights-based approach. At the same time, we will orient our capacity building and research efforts towards developing and testing models that help make health systems more responsive to communities. We will endeavour to disaggregate communities in order to fully understand the differentiated needs of females and males in the life course (from infancy to adulthood). Knowledge will be a core product which will be used to inform and influence policy and practice. To achieve these commitments, we are committing to addressing issues of gender in all our programme interventions. We will do this by seeking to identify, analyse, understand and meet the differentiated health and development needs of females and males of varying ages.

3.2 | Global Commitments to Gender Equality Goals

Gender equality is a key element of the human rights system established by the United Nations Universal Declaration of Human Rights (UDHR) in 1948. The Declaration states that rights and freedoms shall not be limited by a person's sex. It establishes that: "All human beings are born free and equal in dignity and rights". Since the UDHR, global efforts at promoting gender equality have resulted in other important milestones, through which strategies for achieving gender equality were elaborated. These include:

- The adoption of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in 1979.
- The Convention on the Rights of the Child (CRC) in 1990.
- The outcome documents from the International Conference on Population and Development (ICPD) in Cairo in 1994.
- The Maputo Declaration on gender mainstreaming 2003
- The United Nations Fourth World Conference on Women in 1995, resulting in the adoption of the Beijing Declaration and Platform for Action.
- The adoption of the Millennium Development Goals in 2000.

Our international, regional and national partners embrace these commitments and have translated them into policy and criteria for assessing compliance to the culture of gender equality. We will seek to learn from the lessons and experiences of partners who have longer, tested and documented experiences in gender mainstreaming.

3.3 | Regional Commitments

At the regional level, African governments and non-governmental organisations (NGOs) contributed to the formulation and adoption of the above global commitments. In addition, African governments reaffirmed their commitments by signing the following instruments:

- African Charter on Humans and People's Rights (Banjul) 1981.
- African Charter on the Rights and Welfare of the Child 1990.
- The Protocol to the Charter on Human and People's Rights on the Rights of Women in Africa 2003.
- The Maputo Declaration on gender mainstreaming in 2003.

These commitments are important tools for advocacy and lobby with governments and other agencies, besides providing detailed information on actions to be taken by different players. AMREF, as a key player in African development and a trendsetter in the area of health, will use its vantage position to contribute to the achievement of the commitments to the African people as set out in these and other treaties to promote human rights.

3.4 | National Commitments

Gender equality is ingrained in the Constitutions of most African countries. These Constitutions prohibit discrimination on account of sex, race, ethnicity and other variables. In addition, most countries have signed and ratified the global Conventions listed above, thereby committing to review, amend or abolish national laws to bring them to conformity with these Conventions. All African countries where AMREF operates have national gender policies, in addition to sectoral policies in key areas such as health and education, which give more specific guidelines on critical gender issues that must be addressed. AMREF will take cognisance of these commitments in all its operations.

4.0 | Gender as a Key Variable

4.1 | The Gender Factor

Gender is an overarching and fundamental variable which can also be applied to all other cross-cutting variables such as race, class, age, ethnicity, sexual orientation, religion, disability and locality. Gender systems are rooted in different socio-cultural contexts which determine what is expected, allowed and valued in a woman, man, girl and boy in these specific contexts. Gender roles are learned through socialisation processes; they are not fixed but are changeable. Gender systems are institutionalised through child-rearing ideologies, practices, education, political and economic systems, legislation, culture, religion and traditions. Gender is about relationships between females and males in any given society. Understanding these relationships and particularly how power is exercised, the factors that influence behaviour patterns, attitudes and social values is critical for AMREF interventions. This is particularly critical because our programmes and activities deal with areas of health and sexuality that are at the core of human relationships.

Gender has become an increasingly important development issue, not only because of the human rights aspect, but also from the economic efficiency and sustainability point of view. Increased gender equality improves preconditions for both economic and socially sustainable development and for increased growth. Gender analysis will be crucial in determining the distribution of resources and ensuring justice in the sharing of benefits. Addressing the gender issue will benefit the entire society, particularly men, who have often been sidelined in health programmes.

4.2 | Gender Mainstreaming Approach

The main concern of gender equality is how power and resources are divided between females and males of different ages. The overarching nature of gender demands that it be addressed by all players at different levels of AMREF's operations, including organisational policy, structures, practices and programmes. One of the approaches recommended to effectively deal with this is gender mainstreaming. This approach has been widely adopted as a strategy to ensure that gender perspectives are addressed at all levels and in all sectors of development. Gender mainstreaming is the process of assessing the relative implications for females and males of different ages, of any planned action including legislation, policies or programmes. Gender mainstreaming ensures that the differentiated needs and perspectives of females and males of different ages are identified and considered in the design, implementation, monitoring and evaluation of all interventions. A key gender concern is that females and males benefit equally and that inequality is not perpetuated. The ultimate goal of gender mainstreaming is to achieve gender equality.

4.3 Critical Gender Concerns in Health and Community Empowerment

Gender mainstreaming requires a clear understanding of key concepts, issues and concerns, and the internalisation of gender responsiveness. The understanding of sectoral gender concerns is also critical as programme and project planners must deliberately identify, prioritise and address these issues at all levels of policy, programme and project development. Some gender issues and concerns are overarching at every sector, level and facet of individual, societal and institutional domains. These issues and concerns include:

Gender and Sex: Understanding the differences and relationship between sex and gender is one of the basic requirements for understanding the importance of gender as a factor that influences the achievement of development goals in all sectors and levels of development. AMREF programmes deal with both sex and gender aspects in the lives of females and males; this understanding is therefore critical to the Foundation's work.

Equality and Equity: Equality is the ultimate goal of gender mainstreaming and of all development. Equality means similarity in the treatment of females and males based on human rights provisions that all are born equal and are of the same value, as enshrined in UDHR (1948) and in CEDAW of 1979. Equity, which is about fairness and justice, is only one step towards equality.

Gender Analysis: This is the systematic scrutiny and unearthing of the root causes of inequalities between females and males of different ages. Gender analysis is about disaggregating 'people' into females and males of different ages (female and male elders, adults, youth, children and infants) to understand their differentiated needs, problems, perspectives and possible impact of development interventions on each category. It is particularly important in unearthing and understanding the factors that cause the differences and their implications for development. These factors form part of the agenda for intervention and engagement.

Empowerment: This is the process and end result of improvement in autonomy through various means such as access to knowledge, skills and training. The word 'empowerment' is derived from the word 'power'. There are different forms of power. Development interventions aim to enhance and increase the different types of power, including: the 'power to', which means the power that comes from ability, skill and knowledge; 'power with', which is the power that comes from collective action, grouping and teamwork; and 'power within' the person, which can be spiritual, psychological or mental. The ultimate goal of empowerment is the transformation of people. The empowerment of women and men, and boys and girls is a precondition for achieving gender equality, which is in turn a precondition for achieving growth and social justice.

Sex Disaggregated Data: The generation of data which is disaggregated by sex, age, geographic, social, economic and other variables is critical to the mainstreaming of gender perspectives. Health and development practitioners

must train their minds to see 'people' through a gender lens, which means recognising, acknowledging and documenting the differences between females and males of different ages. This facilitates gathering and documenting qualitative and quantitative information, broken down to show the differentiated or relative conditions and positions of women, men, boys and girls.

Practical Needs: Women, men and children share the basic needs for food, shelter, water, health and security. Meeting practical needs is usually the first line of action, especially when working with the poor and disadvantaged. Meeting practical needs is a much more attractive option because such interventions are quantifiable and not controversial as they can be met within the framework of traditionally accepted roles of females and males in society. Development projects which are designed to meet practical needs do not necessarily address the issues of inequality, the subordinate positions of females or the division of work between females and males.

Strategic Interests: Conversely, strategic interests aim to strengthen the position of women and girls in relation to men and boys, with the objective of obtaining a society where females are not discriminated against. Strategic interests have to do with acquiring the power to do, power with and power within. Development interventions should aim to meet both practical and strategic interests. Experience shows that it is difficult to sustain the provision of practical needs if strategic interests are not attended to, especially with regard to women's participation and decision making. Hence, women should be included in leadership and decision making so that they become partners with men in sustained development. An important principle would therefore be to focus on both women and men and the relationship between them, rather than focus on either women or men.

4.4 | The Role of Men in Health

There is increasing recognition of the need to focus on the role of men and boys in the achievement of gender equality. The growing HIV/AIDS (human immunodeficiency virus/acquired immune deficiency syndrome) pandemic, fuelled by inequalities between women and men, has brought into focus the need for power imbalances to be addressed. Both the immediate needs and the root causes of the underlying structures and institutions on which inequality is based must be urgently addressed. In most African societies men hold the power over resources and decision making from the family to the highest political and policy levels. Recognising this, the ICPD and the Beijing Conference emphasised the need for male involvement in the promotion of gender equality, particularly in programmes on sexual and reproductive health and rights. In the period since these conferences, great strides have been made in this direction and there are some experiences for AMREF and its partners to tap from Africa and elsewhere.

Men have a central and critical role to play in the promotion of gender equality in all areas of health. Indeed, in some areas, such as the HIV/AIDS pandemic, men's involvement as responsible partners is a matter of urgency. The role of men and boys in this regard will be publicly acknowledged and reflected in AMREF policy and programming. The gender equality policy also speaks to men, presenting gender equality in health as a positive for them. Identifying key areas in which men can take action and build coalitions that address the concerns of men and women alike will be vital. The significant health benefits that men and boys have to gain with the advent of gender equality will be highlighted in health and sexual reproductive rights interventions. Men and boys are likely to support change towards gender equality where they can see benefits to themselves and their families.

This policy recognises that despite the increasing awareness of the importance of involving men in sexual and reproductive health, they are still often excluded from issues, strategies and programmes relating to childbirth, family health and nutrition, family planning, sexual and reproductive health. This consolidates male absence in the reproductive process and reinforces the notion that these are women's issues.

5.0 | AMREF Policy Commitment

Gender equality will overarch all the AMREF core values. Our programmes will use the gender mainstreaming approach focusing on females and males of different ages to transform their socially inherited gender roles, attitudes and behaviour in order to achieve sustainable change. We would like t o see more women in decision-making positions, affording them increased influence. We will support activities aimed at altering legislation to ensure that women's rights are respected. In addition, we will closely follow how our collaborating organisations guarantee equal opportunities to men and women as concerns influence and resources. We are committed to mainstreaming of the issues of gender equality in all our interventions, complemented with focused activities or separate projects addressing the practical needs and strategic interests of females and males of different ages in our efforts to empower communities. We will also focus on the role of men in health, nutrition, prevention of HIV/AIDS, sexual and gender-based violence and other critical areas where male power and control is critical to finding lasting solutions to the problem of gender inequality.

The following key gender concerns will be addressed within the policy, institutional, programme, project and community level activities as relevant:
- Promoting gender equality between females and males of different ages and ensuring that all interventions are designed to promote equality and justice.
- Understanding and meeting the differentiated health, social and economic needs of females and males within the life course framework in all AMREF interventions.
- Gathering and using sex- and age-disaggregated qualitative and quantitative information to build the evidence required for gender responsive policy and programme decision making.
- Gender responsive allocation of resources and opportunities, especially at community level to promote equality and social justice.
- Equal representation of women and men in decision-making structures within health programmes and projects, taking into account not only numbers but also the quality of representation.
- Supporting actions oriented towards men's roles and understanding of masculinity as a means of strengthening and promoting gender equality.
- Strengthening institutional frameworks such as formal policies, legislation, regulations or norms that will help staff and partners to develop capacity to promote gender equality.
- Ensuring equal opportunities for women and men to participate in technical fields of expertise and decision making at all levels

regarding all matters of health, protection, prevention and access to services
- Equal access by females and males to opportunities, control of resources and benefits at institutional, programme, community and family levels.
- Ensuring that women, men, boys and girls are involved in activities to build their capacities to participate fully in health   and development initiatives at family and community level.
- Ensuring both women and men are equally involved in, contribute to, control and benefit from health and other development initiatives.
- Empowerment of women and men, on a progression from a focus on practical needs to the higher levels of strategic interests including participation, decision making and control of resources.

The AMREF programme will take advantage of its positioning in Africa to advocate for gender-sensitive policies and programmes all levels (global, regional, national and community). Using existing regional declarations on gender, such as the 2003 Maputo Declaration, AMREF will use its breadth and profile to advocate for actions that will further both operational and programmatic gender equality.

6.0 | *Institutional Arrangements for Implementation*

The overall responsibility for the implementation of AMREF's gender policy is vested in the management. However, the mainstreaming approach proposed devolves the responsibility to all those involved in the work of AMREF, from the Board to the beneficiaries at individual level. This requires building the commitment, conviction, confidence and capacities of management, staff, partners and beneficiaries. Building the necessary capacities for gender mainstreaming will require considerable resources; generating the necessary resources will be a mark of commitment to the process. Understanding, identifying and addressing gender issues is a continuous process, which requires a consciousness that is sharpened through sensitisation, application and internalisation. AMREF will use the following framework for the implementation:

- The Board will provide the overall authority and approval. It will also receive updates on progress through the mainstream reporting.
- Gender will be mainstreamed in all processes of programme development including situation analysis, planning, design, resource allocation, implementation, monitoring and evaluation at all levels. The process will involve management, staff, beneficiaries and partners. Programme development and institutional frameworks will be reviewed for their gender responsiveness and revised as appropriate.
- Gender equality has been embraced as a core value and therefore the responsibility for building a gender equality institutional culture will be the responsibility of every person. Human resource and other institutional policies, provisions, regulations and practices will be reviewed and aligned to meet the requirements for gender equality.
- The disaggregation of information by sex, age and other key variables will be critical to ensuring the setting up of gender-based targets, indicators and yardsticks for continuous assessment of gender responsiveness. Monitoring and evaluation tools, frameworks and processes will be reviewed and engendered to conform to gender mainstreaming principles and standards.

The programme and project planning process will be an important framework for mainstreaming gender. Some examples already exist within AMREF that could provide much needed guidance to newer projects and programmes. Within this process, programme priorities and content will be reviewed to ensure they meet the needs of men, women, boys and girls.

6.1 | Developing Gender Mainstreaming Capacities

Detailed guidelines have been developed in line with this policy to ensure all sectors of AMREF are guided and ultimately transformed to become totally gender responsive. In addition, developing knowledge on and competence in gender mainstreaming within AMREF and its partners and collaborators will be crucial to the implementation of this gender equality policy. The transformation into a gender responsive institution requires that everyone is sensitised, convinced and equipped according to their needs and positions of operation. Building such capacity requires policy and management level commitment and allocation of the necessary resources to undertake capacity building. Interventions will include sensitisation, gender dialogues, training, training of trainers, and adaptation of programme and institutional tools and frameworks to conform to gender mainstreaming requirements.

7.0 | Gender Mainstreaming Guidelines and Indicators

7.1 | The Guidelines

The strategic decision to adopt the gender mainstreaming approach to pursue the goal of gender equality to which AMREF and its key development partners are committed demands detailed guidelines to assist every actor in the partnership to identify the actions they must take to conform to the standards. These guidelines provide a road map for gender responsiveness at personal, programme, institutional and policy levels. The guidelines are accompanied by detailed indicators to assess compliance with the policy in different functions and at different levels.

The following actions and indicators will provide further help in monitoring and assessing how well different functions are doing in mainstreaming:

7.1.1. Actions at Policy Level	Indicators
1. Ensure that gender is recognised as an overarching factor in all the core values and affirm that achieving gender equality is a prerequisite for the achievement of the AMREF vision of better health for the people of Africa.	- Explicit mention of gender equality as a core value, measure of effectiveness and criterion for assessing programme effectiveness in all interventions - Reference to gender in all policy, advocacy and promotional materials
2. Address gender perspectives in organisational policies, administrative structures, programmes and operations to achieve gender balance at all levels and thereby continue the AMREF tradition of innovative solutions.	- Gender disaggregated data - Gender sensitive language in all documents - Measures taken to ensure gender responsiveness - Existence of gender policy and implementation mechanisms
3. Generate and allocate the resources necessary to build the capacity of all staff and partners to mainstream gender in their programmes and institutional operations.	- Resources allocated to gender programming capacity building activities - Number, positions and sex of staff and partners trained - Gender training materials and programming guidelines - Inclusion of gender responsiveness in recruitment and other assessment criteria
4. Demonstrate commitment to gender equality through appointments to the Board and to senior positions, and support affirmative action at all levels in the organisation.	- Ratio of females relative to males in the Board and senior positions - Gender responsive selection criteria - Affirmative action to correct historical and other imbalances
5. State its commitment to gender equality in branding, all publicity and advocacy documents, and packages.	- Gender aware publications - Requirement of gender awareness in branding guidelines, advocacy materials, advertisements, illustrations and graphic representations
6. Review and update this policy periodically to realign it to new experiences and knowledge on gender mainstreaming.	- Gender policy updates and supplements - Additional gender responsive programming guidelines - Gender dimension reflected in reports, case studies and other documents

7.1.2. Actions at Programme Level	Indicators
1. Undertake gender analysis as part of all situation analyses, articulate the gender dimensions of programmes and mainstream gender at all stages of the programme/project cycle.	- Gender analysis frameworks in use - Sex and age disaggregated data in plans, reports and other documents - Gender based targets and project indicators - Gender responsive programming framework - Gender sensitive language in documents and plans
2. Insist on the disaggregation of all data by sex, age and other variables in order to expose gender disparities between females and males and identify their differentiated needs within the life course.	- Sex and age disaggregated data - Highlights of gender differences between females and males of different ages in all programming and reporting - Inclusion of sex disaggregation as a mandatory requirement in research, projects and activity guidelines and reports
3. Sensitise all staff and partners on the importance of disaggregating data and information by sex in all programme documents and enforce it as a mandatory programming requirement.	- Gender based targets, data and indicators in documents - Gender responsive guidelines and reporting requirements
4. Design programmes that target both women and men and ensure their full participation in health and other development activities designed to benefit them.	- Sex disaggregated targets in plans and reports - Criteria for ensuring participation, involvement and leadership of both females and males - Gender and age based targets - Balanced representation of women and men in programme activities -Clear programme proposals on targeting women and men
5. Ensure that all programmes and projects are designed to address both practical needs and strategic gender interests, especially of women and girls.	- Project designs that target practical needs and strategic interests - Interventions to address practical and strategic needs articulated and implemented - Criteria for assessing levels of empowerment in project activities - Reports of project activities reflecting levels of empowerment of beneficiaries
6. Organise gender specific activities for women, men, girls and boys whenever there is need and undertake affirmative action to correct historical gender imbalances.	- Single gender activities meeting special needs - Affirmative action to bridge identified gaps - Gender disaggregated data and indicators
7. Recognise heroines along with heroes when telling success stories and highlighting innovations and good practices.	- Balanced coverage of female and male participants - Success stories of females and males - Gender balanced representation in illustrations and case studies
8. Systematically create gender balance among programme staff and encourage women and men to participate in non-traditional roles, for example men participating in community health, nutrition, home based care and women participating in decision-making structures.	- Ratio of females relative to males in various functions and levels - Ratio of females relative to males in non-traditional female and male roles and functions - Strategies for encouraging females and males to participate in non-traditional roles and functions
9. Include gender responsiveness as a criterion for assessing good practices, innovation and case studies.	- Gender based criteria in assessment, appraisal and evaluation guidelines - Gender balance in the choice of case studies, success stories, role models and illustrations

10. Highlight gender issues in all reporting and particularly the differential responses, perceptions, participation and impact between females and males of different ages.	- Data disaggregated by sex and age in reports - Gender based impact analysis - Strategies for tackling identified gaps
11. Closely monitor and evaluate the programmes and projects that are gender mainstreamed and use them as case studies for training, practical application and further gender advocacy within AMREF and with partners.	- Projects that are gender responsive being used as case studies - Number of staff with gender programming capability - Evidence on the value of gender mainstreaming
12. Make provision and conduct regular gender training for all staff members and require AMREF partner organisations to do the same. - Number of gender training courses held	- Number and sex of trainees and trainers - Gender training modules and materials - Number and identities of partners involved in gender training
13. Integrate gender components and modules in the technical training programmes of health practitioners, e-learners and researchers at different levels.	- Gender equality entrenched as a principle in all documentation including guidelines and learning materials
14. Develop an internal capacity for gender training and use gender specialists to support its gender mainstreaming efforts.	- Number of women and men trained in gender issues - Directory of gender programming resources including trainers - Gender sensitivity reflected in materials, documents and sectoral policies
15. Set criteria, guidelines and opportunities to enable women and girls to participate alongside men and boys in decision-making structures within the health programmes and in other relevant community activities.	-Ratio of females and males in programme and project activities - Gender balance included as criterion in guidelines for selection of participants and leaders
16. Require programmes supported to ensure that women and men have equal access to training sessions and information. This will include putting in place measures to address obstacles that usually hinder women's participation in programme activities, e.g. allowing lactating mothers to attend workshops with their babies and making the necessary arrangements for their accommodation.	- Ratio of females and males in programme and project activities - Gender balance included as criterion in guidelines for selection of participants and leaders - Regulations to help women combine motherhood with other roles
17. Take affirmative action to rectify gender imbalances in programmes except when programmes specifically target women or girls alone or men or boys alone for reasons that will have been explained at the conceptual stage of the programme.	- Policy commitment to affirmative action - Ratio of females and males participating and benefiting from programmes, projects, services and activities - Gender specific activities to bridge disparities
18. Develop and use qualitative and quantitative indicators to monitor and evaluate the gender responsiveness of programmes.	- Gender based targets in projects and activities - Programming, and monitoring and evaluation tools and frameworks demanding collection of sex and age disaggregated data
19. Evaluate the extent and impact of gender mainstreaming in its programmes during all monitoring and evaluation exercises.	- Gender analysis at the beginning of projects - Use of gender disaggregated data and indicators in planning activities - Use of gender disaggregated data in the implementation, and monitoring and evaluation of projects and activities

7.1.3 | Actions at Institutional Level

7.1.4 Management Responsiblility	Indicators
1. Foster and facilitate gender responsive and empowering management practices such as regular consultation, team work, shared decision making, rotational leadership and mentoring.	- Gender sensitive human resources policy and management manuals
2. Hold staff responsible and accountable for mainstreaming gender in their work and recognise exemplary performance with regard to the same.	- Gender awareness included as criterion for assessment of staff performance - Gender training courses offered to all staff - Number of opportunities for advanced gender training offered to staff
3. Encourage and support female and male staff to participate in learning forums on gender issues.	- Number of gender seminars, dialogues and courses organised
4. Ensure that administrative resources are equally accessible to female and male members of staff.	- Regulations and procedures that forbid and outlaw gender discrimination - Gender sensitivity in human resource and other policies and procedures
5. Allocate adequate resources for gender mainstreaming activities.	- Financial resources and opportunities offered for gender sensitisation and training
6. Establish gender resource centres (physical and/or virtual) for staff to use in updating their skills and knowledge on gender mainstreaming.	- Gender resource centres established at headquarters and in all country offices - Gender space in the AMREF website
7. Ensure that the organisation's documents (policies, reports, publications, manuals etc.) use gender sensitive language, illustrations and photographs.	- Gender highlights in reports, policies and all documents - Women, men, girls and boys recognised as distinct and different and disaggregated from "people"
8. Ensure that gender mainstreaming experiences within the organisation are monitored, evaluated, documented and disseminated to contribute to the AMREF goal of evidence based knowledge development.	- Gender mainstreaming case studies - References in studies and reports
9. Project the image of AMREF as a gender sensitive organisation and use the contributions of the pioneers to encourage young women and men to strive to become trailblazers in their time.	- Inclusion of gender responsiveness as AMREF institutional culture - Highlight of the work of the AMREF women pioneers as partners with men in trailblazing
10. Cause the revision of all existing organisational policy and procedures documents to harmonise them with this gender policy.	- Gender responsiveness in all documents - Gender policy known and in use as guideline for programmes and institutional functions
11. Cause this policy to be updated from time to time to reflect new and relevant knowledge and practices.	- Revised versions of the gender policy

7.1.5 Structure and Decesion Making	Indicators
1. Strive to create gender balance at all levels of the organisation.	- Ratio of females and males in all functions
2. Avoid gender stereotyping when allocating responsibilities to staff.	- Number of females and males in non-traditional roles in service delivery, project activities and in departments, e.g. female pilots, male nurses, men in home care giving, female drivers
3. Undertake affirmative action to correct existing job stereotypes in the organisation.	- Measures taken to correct historical disadvantages and gender role stereotyping

7.1.6 Staff Recruitment, Induction and Separation	Indicators
1. Advertise vacancies using all available media internally and externally to reach both females and males.	- Gender responsive advertisements, language, recruitment criteria and methods of advertisement
2. In advertising vacancies indicate that AMREF is an equal opportunity employer and occasionally, as the case may demand, indicate the gender preferred for a particular position in line with the commitment to create gender balance and break stereotypes using affirmative action where two members qualify for the same opportunity.	- Advertisements, language, recruitment criteria and methods of advertisement - Policy commitments and recruitment procedures that affirm gender equality as a core value
3. Include awareness of gender issues as a qualification requirement in vacancy advertisements.	- Gender responsive qualification and selection criteria in all functions
4. Endeavour to have recruitment panels that are gender-balanced and gender-sensitive to the extent possible.	- Gender based composition of interview panels - Gender responsive interview guidelines
5. Require interviewing panels to include questions that test gender sensitivity of interviewees.	- Gender responsive interview guidelines
6. Standardise questions for interviews to eliminate gender bias and intimidation from the interviewing panel.	- Gender responsive interview guidelines
7. Brief all successful applicants of this gender policy during the induction period and require them to sign it as part of their employment contracts.	- Gender policy used as a key document in orientation and induction packages
8. Make gender responsiveness a criterion for staff performance appraisal and for assessing their contribution towards gender mainstreaming in the programmes and in the organisation as a whole.	- Gender sensitive staff appraisal tools
9. Organise and conduct gender sensitisation for new staff members.	- Gender sensitisation materials and modules for new staff - Number of staff oriented on gender - Strategy for in-house and work place gender sensitisation

7.1.7 Staff Salaries and Benefits	Indicators
1. Have a standard salary scale specifying the pay and benefits commensurate with each position regardless of the sex of the holder in accordance with the principle of equal pay for work of equal value even if the actual tasks are different.	- Explicit statement of the principle of non-discrimination on account of sex or age and commitment to equal pay for equal work - System of monitoring and countering discrimination
2. Provide all staff with medical cover recognising the differentiated needs of females and males.	- Gender and sex role differences recognised and addressed in the Human Resources Policy and Guidelines
3. Provide female staff with maternity leave and male staff with paternity leave according to the national labour laws prevailing in the country of operation. This leave will not be prejudicial to annual leave.	- Differentiated needs of females and males addressed in the Human Resources Policy and Guidelines - Circulars and other communication to staff - Policy provision included in induction packages
4. Allow breastfeeding staff members two hours off duty daily for one month after maternity leave. The time off will be taken at a time convenient to the staff in agreement with the immediate supervisor.	- The mothering responsibilities of female staff appreciated and addressed in the Human Resources Policy and Guidelines - Policy provision included in induction packages
5. Allow staff members (both male and female) who have to nurse an invalid spouse or biological or legally adopted child time off on a case by case basis as agreed with the immediate supervisor.	- Provisions in the Human Resources Policy and Guidelines - Policy provision included in induction packages

7.1.8 Training and Career Development	Indicators
1. Accord both male and female staff members equal access to training and career development opportunities without allowing sex and gender roles to be used as deterrents.	- Ratio and numbers of females and males sent to training - Gender responsive strategies for encouraging female and male staff to pursue opportunities for career development
2. Promote staff members based purely on merit and include contribution to gender mainstreaming in programmes and in the organisation as criteria for merit.	- Gender responsive staff appraisal and promotion criteria
3. Encourage female and male staff to take advantage of training opportunities and facilities that prepare them for senior positions and are value adding to their work.	- Gender responsive strategies for building the capacities of female and male staff to pursue opportunities for promotion and professional development

7.1.9 Staff Performance Appraisal	Indicators
3.6 Staff Performance Appraisal 1. Apply a standardised performance appraisal tool for female and male staff performing similar roles or tasks of equal value.	- Gender sensitive performance appraisal tools
2. Appraise staff performance on their contribution to gender mainstreaming in the programmes and in the organisation.	- Gender awareness and responsiveness included in staff appraisal forms

7.1.10 Working Environment	Indicators
1. Ensure that office premises have adequate sanitary facilities for both male and female staff.	- Adequate and high standards of hygiene in female and male sanitary facilities
2. Insist on a working environment devoid of sexual harassment, exploitation and abuse of the staff, partners and programme communities.	- Sexual harassment policy in place and included in induction package - Structure for receiving and dealing with complaints - Fora for orienting and discussing issues of sexual harassment
3. Insist on the use of gender sensitive and respectful language in verbal, written and other communication by its staff in the work place and socially.	- Provision in the Human Resources, Code of Conduct and other policies
4. Carry out periodic gender audits of organisational materials for gender sensitivity and take appropriate remedial action.	- Report of gender audits of materials - Actions taken to maintain a gender responsive institutional culture
5. Use gender sensitive language and gender disaggregated data and information in its publications and organisational communication.	- Gender sensitivity in all documents and organisational communication

8.1.0 Partnership Level	Indicators
1. Utilise the policies of international, regional and national partners to strengthen the advocacy and generate resources for gender mainstreaming within AMREF.	- Directory of gender policies, materials and training opportunities in partner organisations such as CIDA, the Netherlands, Sida, NORAD, national governments and the relevant sectors
2. Seek and establish working relations with international partners, community based organisations, NGOs, regional networks, organisations and individuals who are committed to gender mainstreaming.	- Directory of collaborating gender offices, networks and individuals - Gender policies and other materials from partner agencies
3. Use gender mainstreaming success stories to generate lessons for internal and external sharing of innovation, transformation and good practices.	- Profiles of gender responsive projects - Documentation of success stories
4. Deliberately promote and build capacity for gender mainstreaming among its partners.	- Gender based criteria for project proposal appraisal - Gender mainstreaming capacity or explicit strategy required as a criterion for project assistance
5. Share its gender mainstreaming experiences with network partners and seek to learn from them through reciprocal arrangements.	- Network of collaborating gender programming agencies, institutions and specialists - Documentation of gender mainstreaming case studies and good practices
6. Encourage partners to develop their own gender policies and to borrow from this policy any relevant provisions.	- Gender policies of partner organisations - Distribution list of this and other useful gender responsive policies
7. Work with partners to support gender equality campaigns and to mainstream gender perspectives in all activities. -	Reports of gender campaigns - Calendar of involvement in national and global gender equality campaigns

8.2 | Conclusion

As the world begins to focus attention to the social determinants of health and the centrality of gender in determining and shaping health perceptions as well as access to resources for health, AMREF will include the gender dimension in all aspects of the Foundations work in order to fully realise our core values and beliefs. This policy and the accompanying guidelines outline ways in which to address the gender dimension as an integral consideration in all AMREF operations. AMREF will go a step further than equity to make gender equality an overarching core value.

In mainstreaming this gender policy, AMREF will go beyond the commitment to gender equity that has been implicit in all her operations over the years to a focussed and deliberate action to ensure that gender issues in implementation have been identified and responded to in all its programme interventions. To achieve this, AMREF is making a commitment to put in place an M&E framework that will enable us to identify, analyse, understand and meet the differentiated health and development needs of females and males of varying ages.

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8.3 | Abbreviations and Acronyms

AMREF	African Medical and Research Foundation
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CIDA	Canadian International Development Agency
CRC	Convention on the Rights of the Child
HIV/AIDS	Human immunodeficiency virus/acquired immune deficiency syndrome
ICPD	International Conference on Population and Development
NGO	Non-governmental organisation
NORAD	Norwegian Agency for Development Cooperation
Sida	Swedish International Development Agency
SCC/Vi	Swedish Cooperative Agency/Vi Agroforestry
UDHR	Universal Declaration of Human Rights
UN	United Nations