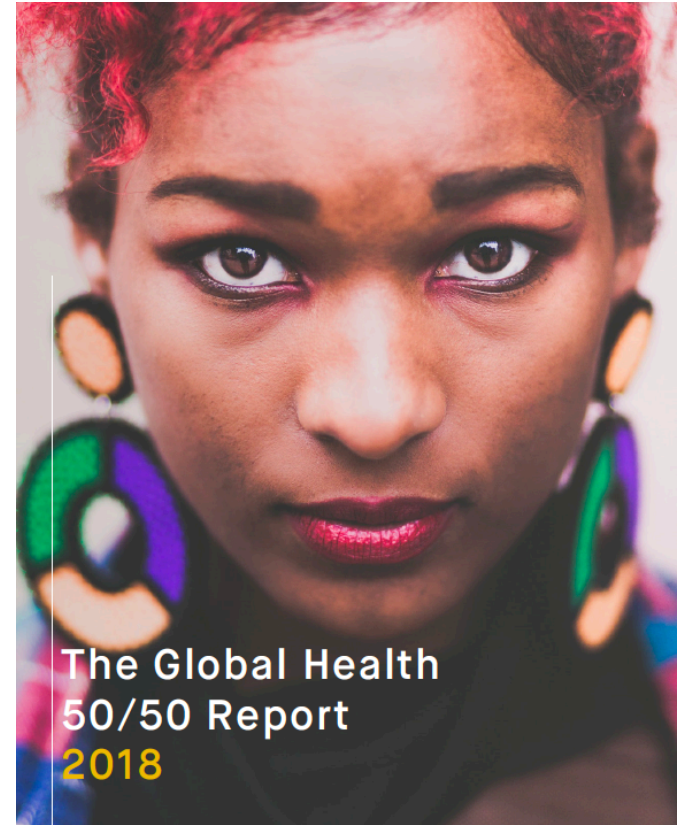


# The Global Health 50/50 Report 2018

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<https://globalhealth5050.org/>



## Gender and global health: evidence, policy, and inconvenient truths

Sarah Hawkes, Kent Buse



“Gender is probably the most restricting force in American life”

*Gloria Steinem (American journalist, social activist and feminist), 2008*

“But let me tell you, this gender thing is history.”

*George HW Bush (former President of the United States of America)*

Gender is missing from, misunderstood in, and only sometimes mainstreamed into global health policies and programmes. In this Viewpoint, we survey the evidence for the role of gender in health status, analyse responses to gender by key global health actors, and

more males than females were recorded across all age groups in the 2010 Chinese census.<sup>8</sup> Sen<sup>9</sup> estimated that more than 100 million women are missing globally; however, women comprise 49·6% of the global population<sup>10</sup> and have 45% of the overall DALY burden. Parity in life expectancy—used for the first time in the GBD 2010—might overestimate the burden on men, but is justified on the grounds that “there is no reason that society should have lower aspirations for health for males than females”.<sup>5</sup> Higher DALY burdens in men were also recorded in earlier global DALY estimates based on a higher life expectancy for women than men.

GBD life expectancy tables for 1970–2010<sup>11</sup> show that, at all timepoints, women have a longer life expectancy

*Lancet* 2013; 381: 1783–87

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# WHY GENDER MATTERS

**Gender equality is a  
human right**

**Equality in the workplace  
is inherently just and  
good**

**Gender among the most  
significant determinants of health**

**Gender equitable workplaces are  
more innovative and delivering  
better results**

## These countries have the largest life expectancy gender gap

2015 life expectancy at birth in years.

Country	Male	Female	Difference
Russia	64.7	76.3	11.6
Belarus	66.5	78.0	11.5
Lithuania	68.1	79.1	11.0
Rwanda	60.9	71.1	10.2
Syria	59.9	69.9	10.0
Ukraine	66.3	76.1	9.8
Latvia	69.6	79.2	9.6
Vietnam	71.3	80.7	9.4
Estonia	72.7	82.0	9.3
El Salvador	68.8	77.9	9.1

Source: World Health Organisation

## The economic benefits of gender parity

By Anu Madgavkar, Kweilin Ellingrud, and Mekala Krishnan



If women were to participate in the economy identically to men, they could add as much as \$28 trillion or 26 percent to annual global GDP in 2025, write Anu Madgavkar, Kweilin Ellingrud, & Mekala Krishnan in the *Stanford Social Innovation Review*.

The idea that persistent gender inequality has very large economic costs is increasingly accepted. In fact, new research from the McKinsey Global Institute (MGI) finds that if women were to participate in the economy identically to men, they could add as much as \$28 trillion or 26 percent to annual global GDP in 2025. This is roughly the combined size of the economies

# Parameters of the Global Health 50/50 Report

## 1 QUESTION

**How gender-responsive are the world's most influential global health organisations?**

## 2 DIMENSIONS

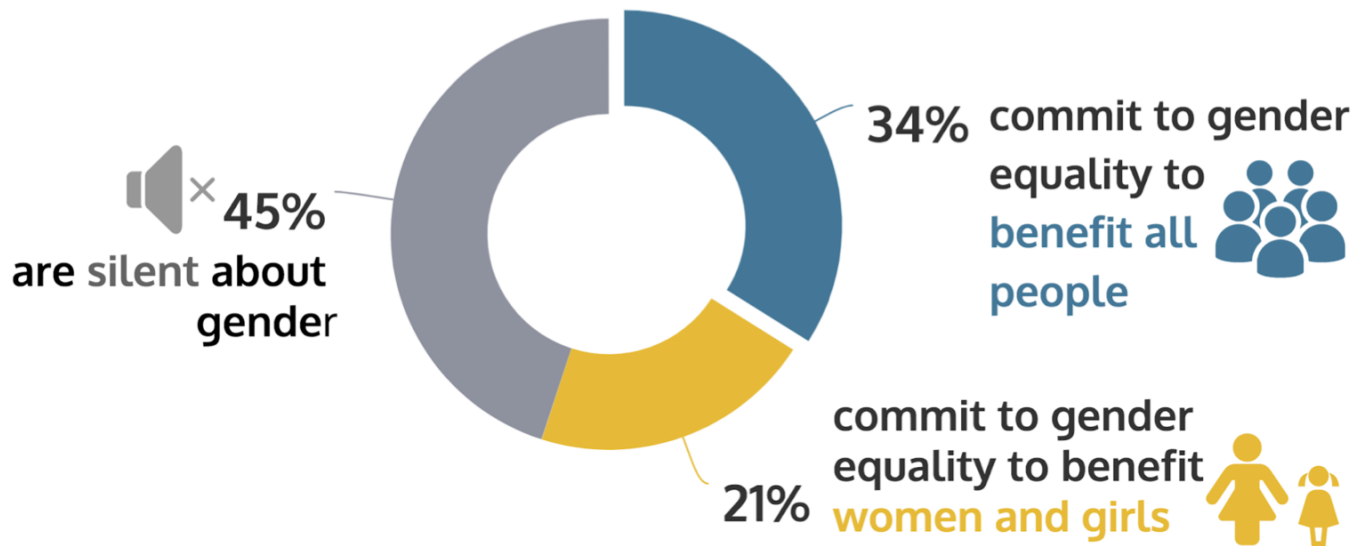
Gender-responsive  
programmes and policies

Gender equality in the  
workplace

## 7 DOMAINS

1. Public statement of commitment to gender equality
2. Gender defined in institutional policies and consistent with global norms
3. Programmatic policies in place to guide gender-responsive action
4. Sex-disaggregated data collected and reported
5. Workplace policies and practices with specific measures to promote gender equality
6. Gender parity in governing bodies and senior management
7. Gender of the head of the organisation and of the governing body

# 1 Do organisations make a public statement of commitment to gender equality?



1

Just over half of global health organisations have explicitly committed to gender equality.

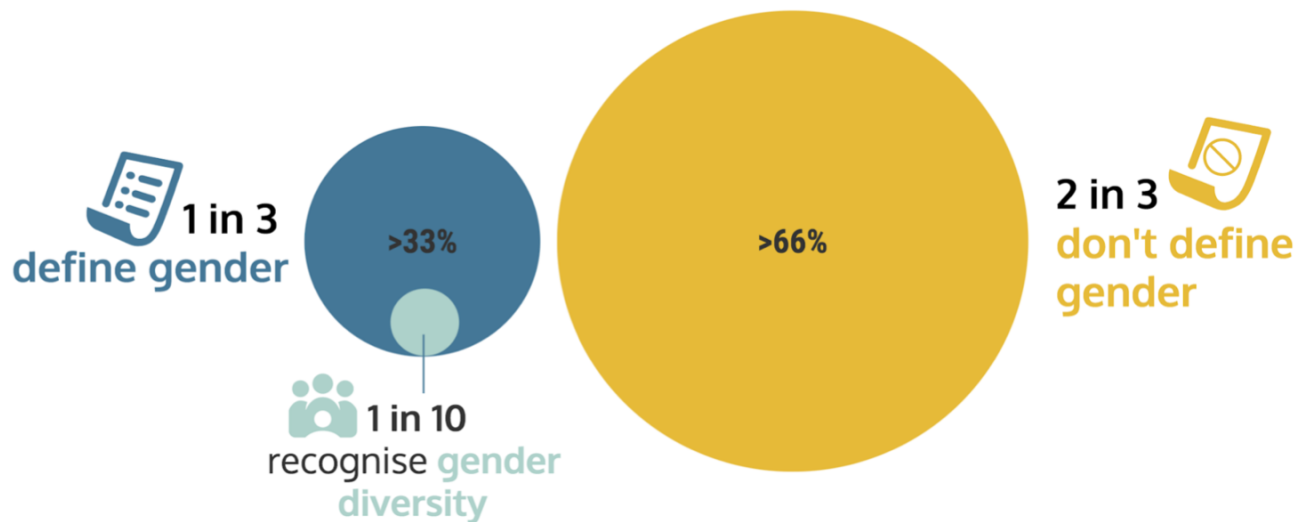
## Recommendations:

1.1 Global health organisations should make an explicit commitment to gender equality.

1.2 Having made this commitment, leaders of global health organisations should adopt policies and incentivise practices that respond to evidence on the impact of gender on the health, wellbeing and careers of all people.

2

## Is gender defined in institutional policies?





2

For most global health organisations, the meaning of gender remains ill-defined or undefined.

### **Recommendations:**

2.1 Organisations should adopt a definition of gender and gender equality that is consistent with global norms.

2.2 Organisations should put in place policies and processes to ensure a common organisational understanding and ownership of the definition of gender, and the practices required to achieve gender equality.

3

## Do organisations address gender in their programmatic policies?



3

A majority of organisations lack strategies to guide gender-responsive programming.

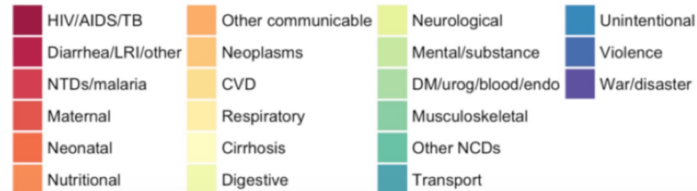
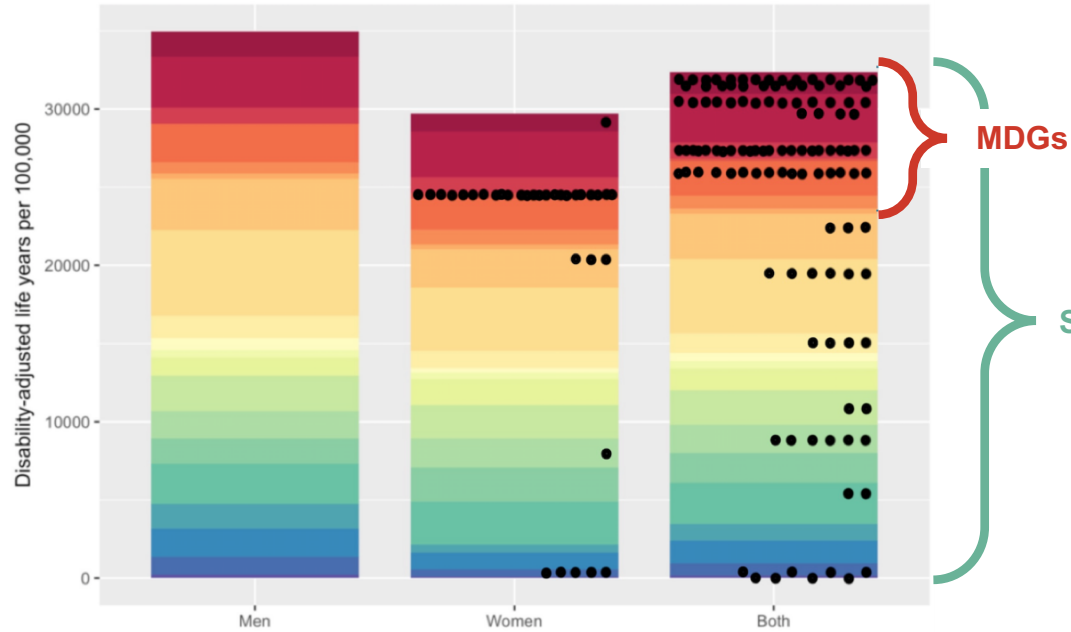
### **Recommendations:**

3.1 Organisations should include gender as a critical domain for analysis in programme design, implementation, monitoring and evaluation (M&E).

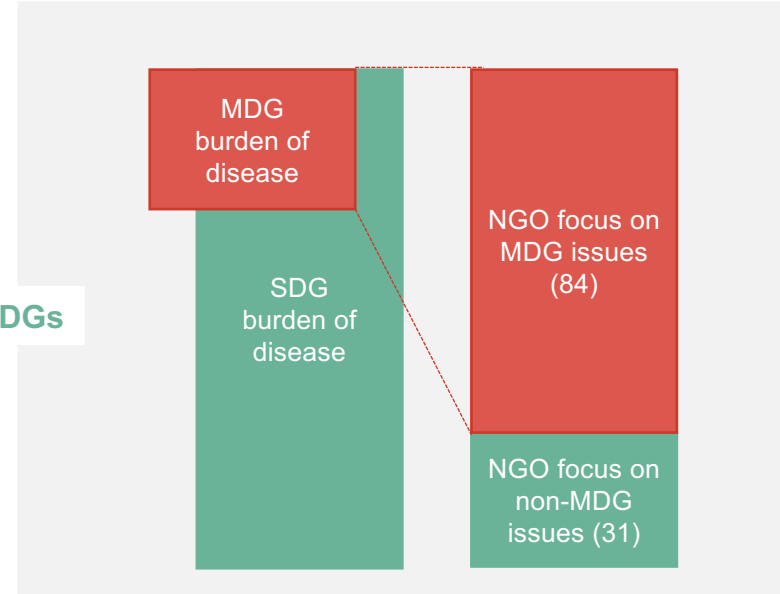
3.2 Organisations should move beyond the tendency to conflate gender with women so as to appreciate the gender-related determinants of everyone's health.

3.3 Organisations should conduct gender-based analyses to inform the development, implementation and M&E of programmes, in order to better understand and address how gender affects health outcomes for everyone—girls, boys, women, men, and people with non-binary gender identities—and respond to differences among them.

# NGOs' stated area of health focus, by disease burden and gender, 2016

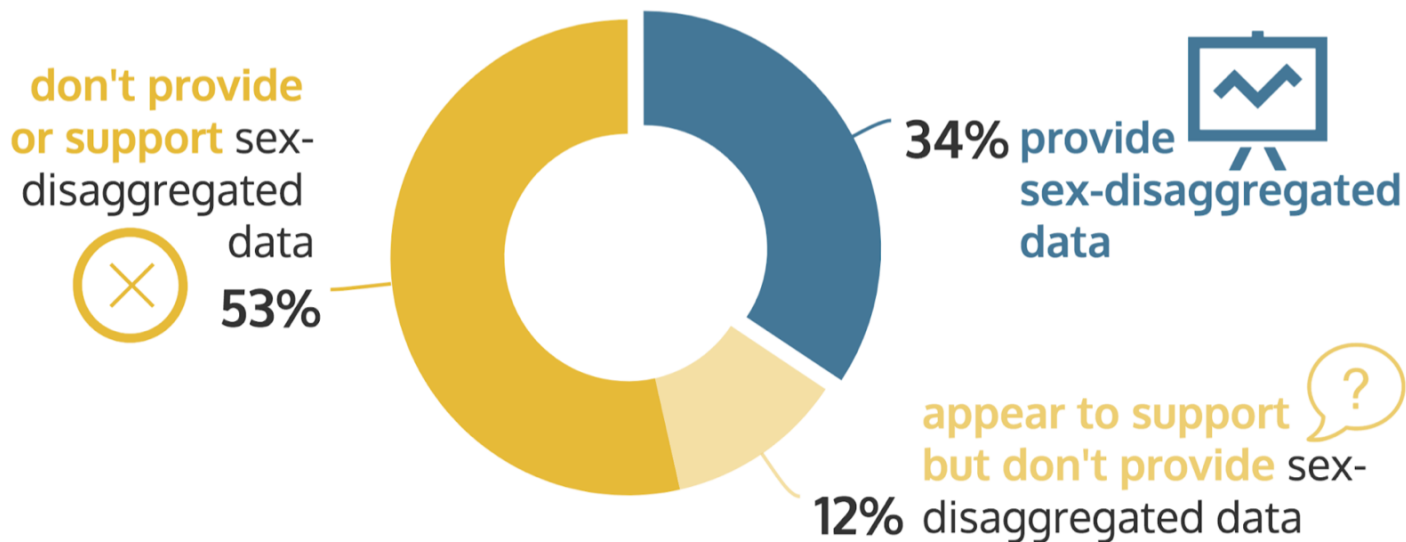


- Stated area of attention for an NGO



## 4

# Do organisations report sex-disaggregated data?



# 4

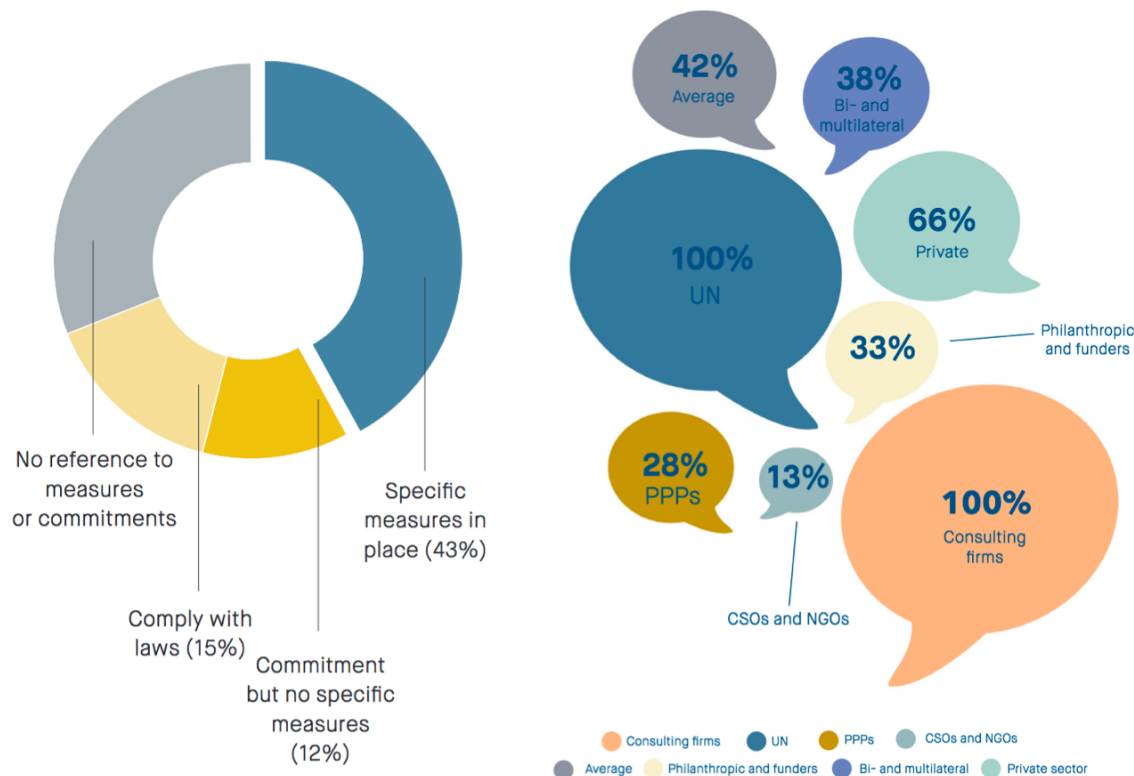
Organisations generally fail to present sex-disaggregated programmatic data.

## Recommendations:

- 4.1 Organisations should ensure relevant programmatic data is sex-disaggregated.
- 4.2 Organisations should conduct gender analyses to understand sex-disaggregated findings, and calibrate programmes and strategies based on this evidence.
- 4.3 Organisations should commit to collecting data on other markers of inequality and analysing the interaction among them, as well as with sex and gender, as the basis for assessing the equitable impact of their work.
- 4.4 Funders should ensure they monitor and act to ensure gender equality at all stages of their funding and implementation processes.
- 4.5 Global health journals should commit to only publishing articles that report sex-disaggregated and analysed data (where appropriate).

5

# Do organisations have workplace gender policies?



# 5

Organisations aren't doing nearly enough to support gender equality in the workplace.

## Recommendations:

5.1 Organisations should undertake assessments of whether and how gender equality is embedded in their institutions.

5.2 Organisations should implement a range of interventions to address the complexity of gender-responsive change, including paid parental leave, equal pay for equal work and zero tolerance for sexual harassment (expanded list in report).

5.3 Funders should define and attach gender diversity and gender workplace policy requirements to the funding eligibility of organisations.

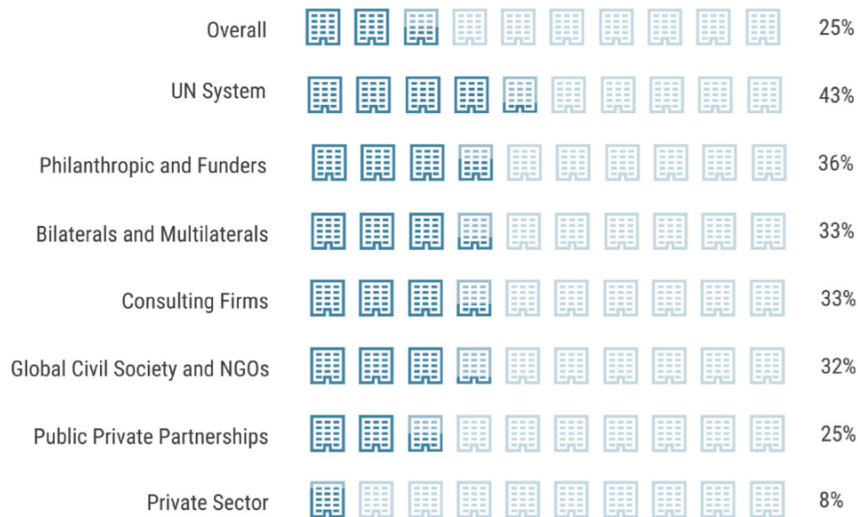
5.4 Organisations should publish and act on their gender pay gaps, even in the absence of statutory requirements.



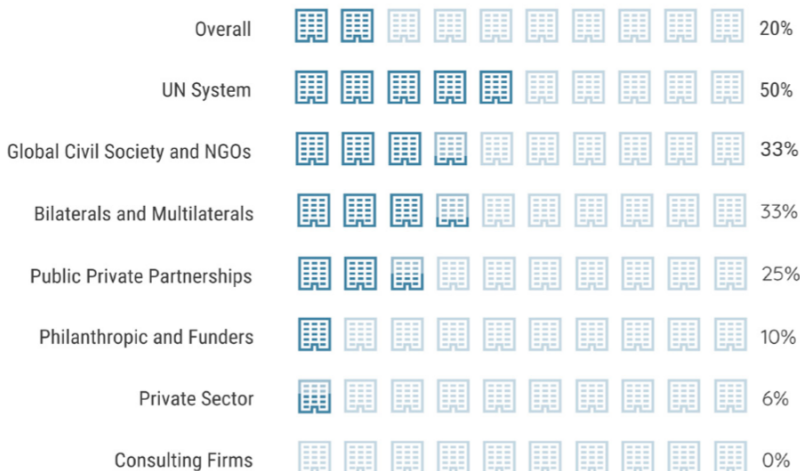


# Have organisations achieved gender parity in leadership?

## Proportion of organisations with gender parity at senior management



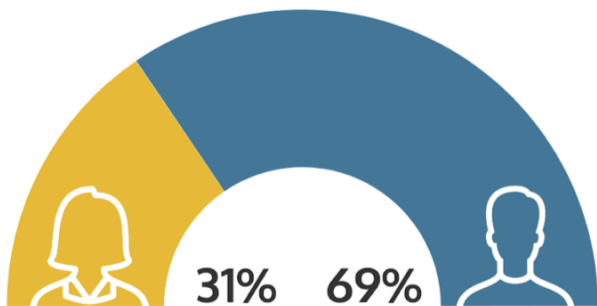
## Proportion of organisations with gender parity in governing bodies



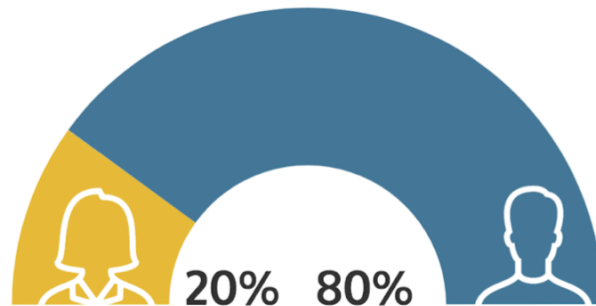
## 7

## Who leads global health organisations?

Executive Directors



Board Chairs



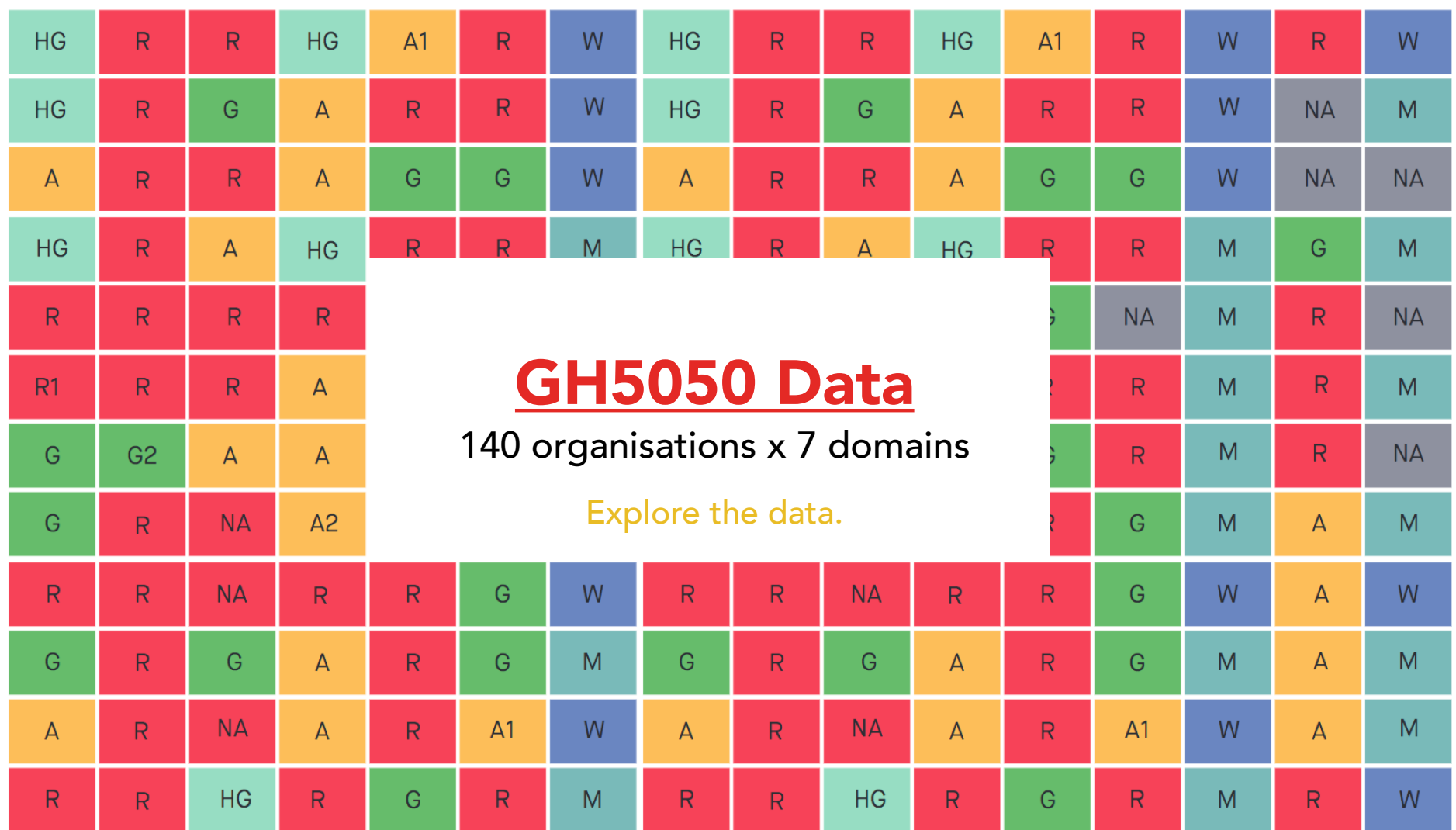
6 Decision-making power remains in the hands of men.

7 Global health is led by men.

### Recommendations:

Organisations should adopt specific affirmative measures to achieve gender equality among staff and governing bodies, which include those mentioned in Recommendation 5.2, as well as:

- Undertaking quantitative and qualitative analysis to identify gender-related barriers at each step in the professional pathway;
- Setting time-bound targets for gender parity, particularly at senior levels;
- Establishing regular and transparent monitoring and reporting of progress with clear lines of accountability.



# Summary recommendations

## Gender-responsive programmes and policies

Commit to gender equality, as defined by global norms, in policies, programmes and practices

Recognise and act on gender as a social determinant of everyone's health

Insist on sex-disaggregated and gender-analysed data

## Gender equality in the workplace

Adopt time-bound goals with specific strategies to support women's careers

Not just parity in numbers: abolish gender pay gaps

Remember: gender equality does not just happen in workplace



"Global Health 50/50 offers an accountability mechanism that has been sorely lacking."

Helen Clark, GH5050 Advisor

"I urge the global health community to reflect on the findings presented and to act to improve practice. I hope, too, that other sectors will follow suit and undertake similar analysis. It is only by embedding gender analysis and action deep in the global structures of development cooperation that we will achieve sustainable and inclusive development that leaves no one behind."

Amina Mohammed, United Nations Deputy Secretary-General

