

Progress reports

Report by the Director-General

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J. STRATEGY FOR INTEGRATING GENDER ANALYSIS AND ACTIONS INTO THE WORK OF WHO (Resolution WHA60.25 (2007))

1. This report focuses on advances during 2019–2021 in the implementation of resolution WHA60.25, which drives WHO action towards achieving the health- and gender equality-related targets of the Sustainable Development Goals.

Country progress

2. In 2019, 35 countries implemented at least two WHO-supported activities to integrate equity, gender and human rights in their health policies and programmes; 43 countries did so in 2020 and 58 in 2021.

Support provided to Member States

3. In 2021, WHO provided training on the Health Equity Assessment Toolkit to 29 countries in the African Region and a health inequality monitoring workshop to the Government of Iran. WHO released the first course of an inequality monitoring eLearning series, via the OpenWHO platform, in 2019.

4. WHO's Health Equity Monitor database in 2021 included 36 reproductive, maternal, newborn and child health indicators (30 in 2019) from 115 countries (111 in 2019). The Region of the Americas assessed 32 national health plans in 2019; in 2020, an analysis looked at the health equity focus of those plans. It also analysed regional data on health outcomes of coronavirus disease (COVID-19) by demographic factors including gender, sex, age and ethnicity. The South-East Asia Region published country fact sheets on gender and health in 2021. The European Region published guidance on strengthening gender data and statistics in national health systems. The Western Pacific Region in 2021 produced a guide on strategies for assessing and addressing hesitancy and sustaining vaccination uptake.

Building capacity

5. The NCD Data Finder and the Global Health Observatory began disaggregating by sex the prevalence of noncommunicable diseases and risk factor data in 2019. These data are used to inform the development and implementation of gender-sensitive regulatory and fiscal policy measures. The Secretariat began disaggregating by sex key surveillance indicators for tuberculosis and included a gender perspective in the development of tuberculosis national strategic plans.

6. WHO, in partnership with the Global Fund to Fight AIDS, Tuberculosis and Malaria, published in 2021 the first systematic global analysis of inequality in HIV, tuberculosis and malaria.

7. In 2021, WHO launched the *Health labour market analysis guidebook*, which highlights the importance of mainstreaming gender in analyses of the labour market for health and care workers.

8. The Health Cluster in Ukraine led by WHO published in 2021 *Humanitarian analysis through gender lenses*, which assessed population needs and demographics in conflict-affected regions of the country and how these varied across gender identities.

9. The Secretariat mainstreamed the objectives of the Global Polio Eradication Initiative's Gender Equality Strategy 2019–2023 into the Polio Eradication Strategy 2022–2026.

10. In 2021, the latest edition of the *WHO global report on trends in prevalence of tobacco use 2000–2025* recorded the rate of tobacco use among women and men.

11. The WHO Quality Technical Expert Network serves to ensure technical coherence across WHO in the area of quality of care, focusing on gender, equity and human rights. A health worker safety charter launched in 2020 highlighted how female health workers are at higher risk of violence at work and called for action in health worker safety.

12. Other WHO actions included supporting and improving the health sector's contribution to women's economic empowerment, particularly by promoting decent work opportunities and gender equality in the health and care workforce. Based on national health workforce accounts, several reports highlighted gender differences and inequalities, incorporated sex-disaggregated data and described specific policy options for mainstreaming gender into health systems strategies, including the *State of the World's Nursing 2020* report and *Gender equity in the health workforce: analysis of 104 countries*.

Mainstreaming gender into WHO and establishing accountability

13. In 2020, the Secretariat rolled out the WHO Health Emergencies Programme Gender Working Group, which developed a gender mainstreaming strategy during 2021. This strategy presents an integrated approach to developing gender-responsive assistance to Member States through technical guidance, skills development and accountability systems.

14. The Secretariat provided support to Member States in negotiations of the United Nations General Assembly and United Nations Economic and Social Council on various resolutions to strengthen political commitment to gender equality in health.

15. Investments from donors provided 85 Member States¹ with grants, resulting in increased prioritization of gender, equity and human rights. An Organization-wide evaluation of the integration of gender, equity and human rights into the work of WHO identified five key areas for improvement. The management response outlined actions to be taken by the Secretariat.

16. The Secretariat developed criteria for integrating gender, equity and human rights across the Organization. Training and guidance on how to integrate these into all workplans were implemented during the operational planning of the Programme budget 2020–2021 and the integration was assessed through a dedicated dimension in the output scorecard.

17. At the Generation Equality Forum in 2021, WHO committed to ending gender-based violence, advancing sexual and reproductive health and rights, and supporting health workers as well as feminist movements and leadership.

18. In 2021, WHO began reporting annually on its performance in meeting the requirements of the accountability framework of the United Nations System-wide Action Plan on Gender Equality and the Empowerment of Women.

¹ African Region: 47; Region of the Americas: 6; South-East Asia Region: 5; European Region: 14; Eastern Mediterranean Region: 8; and Western Pacific Region: 5.

19. In 2021, the percentage of women in the Secretariat's professional staff category reached 47.8% and 53.5% in the general service category. The percentage of women at P4 level and above increased from 39.5% in 2017 to 43.8% in 2021. At the ungraded level, the percentage of women was 50.0%. While work is needed in the national professional officer category (41.9% women) and D1 and D2 grades (35.5% women), overall, 48.9% of the WHO workforce were women.

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