



Evidence from the field: Findings on issues related to planning, implementing and evaluating gender-based programs



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ARTICLE INFO

Article history:

Available online 9 December 2014

Keywords:

Gender-based approaches
Evaluations
Women and girls' health
Systematic literature review

ABSTRACT

An Initiative of the United States Department of Health and Human Services' Office on Women's Health (OWH), Coalition for a Healthier Community (CHC), supports ten grantees across the U.S. in the implementation of gender-based health interventions targeting women and girls. A national evaluation is assessing whether gender-focused public health systems approaches are sustainable and cost effective in addressing health disparities in women and girls. To inform the evaluation, a systematic examination was conducted of literature in both the public and private sector designed to track, assess, understand, and improve women's health, public health systems approaches, and the cost-effectiveness and sustainability of gender-based programs. A two-person team assured the quality of the results following the review of abstracts and full-text articles. Of 123 articles meeting eligibility criteria (See inclusion criteria described in Section 2.2 below), only 18 met inclusion criteria specific to a focus on a systems approach, cost-effectiveness and/or sustainability. Studies assessing systems approaches suggested their effectiveness in changing perceptions and increasing knowledge within a community; increasing involvement of local decision-makers and other community leaders in women's health issues; and increasing community capacity to address women and girls' health. Further evaluation of the cost-effectiveness and sustainability of gender-based approaches is needed.

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1. Introduction

Gender is acknowledged as an essential determinant of health for both women and men. Beyond biological differences (i.e., sex), gender roles, norms, and behaviors, and the social and political constructs that define gender, influence how women and men access health services and how health systems respond to their different needs (World Health Organization, 2011). The World Health Organization (2011) (WHO) recognizes that addressing gender norms and roles leads to a better understanding of how the social constructs and unbalanced power and opportunities between women and men affect their health risks, health-seeking behavior, and health outcomes.

Gender equity in health refers to the elimination of avoidable or preventable differences between women and men, ensuring equal access to health resources for equal need, and enhancing resources

for unequal need (Diaz-Granados et al., 2011). We know that inequities in health between women and men are often shaped by social, political, and economic factors and that consequently, these factors contribute to gender differences in morbidity and mortality. Furthermore, these predisposing factors along with logistical aspects of obtaining care and perception of need, affect a person's access to and utilization of appropriate healthcare services (Andersen, 1995). In essence, gender inequities within health systems result in a lack of access to services and resources, and a lack of decision-making power over one's own health. It is, therefore, vital that gender equity be integrated and monitored in our health systems.

There is a need for sex-disaggregated data and health indicators that are sensitive enough to track gender-related changes over time to provide evidence in support of programs, policies, and systems aimed at improving the health status of women and men and to inform the development of new approaches to address gender inequities. Gender-based approaches need to be evaluated in terms of their benefits and effectiveness in reducing inequities, the cost of such approaches, and barriers that might make introducing change difficult (WHO, 2009). The use of well-defined, operational, gender-sensitive health indicators would allow for

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comparisons across communities, states, and public health systems (Diaz-Granados et al., 2011).

1.1. Background to the Initiative

The CHC Initiative is a multi-site program that aims to determine whether gender-focused public health systems approaches are sustainable and cost effective ways to address health disparities in women and girls. The Initiative supports ten grantees across the United States in the implementation of gender-based health interventions targeting women and girls. This systematic review was conducted to inform evaluation planning and logic model development for that Initiative. The original research questions guiding this evaluation included the following:

- To what extent are public health systems approaches utilized in communities effective in identifying and addressing health disparities?
- To what extent are gender-based approaches more effective in decreasing health disparities among women/girls than non-gender-based or sex-based health approaches?
- To what extent are public health systems and gender-based approaches in health programming more cost effective and sustainable than traditional approaches?
- What gender-specific indicators can be used to track progress in utilizing a gender-based approach in women's health programs?
- To what extent can a public health system/collaborative partnership deliver quality and cost-effective gender-based initiatives?
- To what extent can a community health system initiative be sustained?
- What lessons have been learned that may contribute to the achievement of Healthy People 2020 targets?
- What is the process for successfully integrating grass roots organizations into established coalitions?

The national evaluation will document the extent to which the CHC initiative is achieving its programmatic goals and objectives, and determine to what extent the grantees are making progress towards Healthy People 2020 objectives related to OWH's mission². The national evaluation will also examine contextual factors found to influence program outcomes by serving as barriers or facilitators to program implementation. The findings from the national evaluation will guide funding and programmatic decision-making and, ultimately, inform the field of women's health³.

1.2. Overview of systematic literature review

This systematic literature review was conducted in order to examine evaluation studies, assessments, activities, and projects in both the public and private sector designed to track, coordinate, assess, understand, and improve women's health, public health systems approaches, and the cost-effectiveness and sustainability

² <http://www.womenshealth.gov/about-us/mission-history-goals/index.html#-mission>.

³ Note: These research questions were framed globally and not specifically about the work of the grantees; therefore, at a mid-year grantee meeting, the questions were re-organized based upon discussion with the grantees and Federal program staff, so that they would be specific to the projects of the grantees. However, for the purposes of the literature review, we used the questions as originally framed to ensure a broad canvassing of the existing literature (e.g., articles were sought that were specific to these U.S.-based grantees' public health areas of focus as well as articles that were focused on other public health conditions nationally or internationally).

of gender-based programs. The purpose of the review was to use findings to refine evaluation questions, inform the evaluation plan, identify elements for components of the logic model, and refine the performance measurement plan for the CHC Initiative. Due to the expected heterogeneity of the studies with regard to their foci, target populations, study designs, conceptual models and theories, methods and measures, a qualitative approach was utilized to review the identified literature.

2. Methodology

At the onset of the literature review, a guidance document was developed, identifying key search questions, parameters, search terms/phrases and sources of information to guide the implementation of this review. The following is a description of each of these topics.

2.1. Key search questions

The following search questions were established in order to guide the selection and review of appropriate studies:

- (1) Does this study assess the effects of a systems approach to improving women's health?
- (2) Does this study assess the cost-effectiveness of gender-based programs/approaches?
- (3) Does this study assess the sustainability of gender-based programs/approaches?
- (4) Does this study provide evidence to support the implementation of gender-based programs/approaches?

2.2. Search strategy

The key words/phrases in Table 1 were used in this search for relevant literature on gender-based approaches to improving health. We established a list of primary as well as secondary key words/phrases for our search.

2.2.1. Search engines/databases and other sources

The major search engines/databases used to conduct the literature review were PubMed, ScienceDirect, Google Scholar, and Gender Watch. In addition, selected journals were identified in which gender-based literature regularly appears. During the initial search process, these included *Women's Health*, *BMC Women's Health*, *Journal of Women's Health*, *Journal of International Women's Health Studies*, and *Journal of Evidence-Based Women's Health Society*. U.S. Government and international Web sites searched included those of the following agencies and organizations: the Centers for Disease Control and Prevention (CDC), the Health Resources and Services Administration (HRSA), the Office on Women's Health (OWH), the President's Emergency Plan For AIDS Relief (PEPFAR), the Joint United Nations (UN) Programme on HIV/AIDS (UNAIDS), the United States Agency for International Development (USAID), UN Women (the United Nations Entity for Gender Equality and the Empowerment of Women), and the World Health Organization (WHO).

Table 1
Primary and secondary key words/phrases for the search strategy.

| Primary words/phrases | | Secondary words/phrases | |
|-----------------------|--------------------|-------------------------|------------------|
| Gender analysis | Gender based | Assessment | Evaluation |
| Gender difference | Gender integration | Cost effective | Evidence based |
| Gender | Gender norms | Health | Intervention |
| mainstreaming | | outcome | |
| Gender responsive | Gender sensitive | Program | Research |
| Gender specific | Sex Difference | Sustain | Systems approach |

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