A360'S GENDER STRATEGY 2024 - 2025A360





NTRODUCTION

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BACKGROUND & RATIONALE

In 2021, A360 launched its first gender strategy and has since rolled out a series of ambitious activities to move the needle on gender equality in A360's programs and operations.

In recognition of the evolving context, new trends in the sector, and lessons learned from three years of strategy implementation, a participatory process was carried out to refresh the gender strategy. A rapid mid-term strategy assessment was conducted and a series of co- design workshops were held with A360 staff and country gender consultants to identify priorities for the next two years of strategy implementation (2024-2026).



The purpose of the gender strategy is to:

- 1. Establish a conceptual framework that outlines A360's contribution to girls' agency and gender equality.
- 2. Provide a roadmap for A360 to strategically integrate gender equality in its programmatic work, operations, monitoring and evaluation.

VISION AND GOALS



PRINCIPLES



We will keep girls' voices at the centre.

A360 will ensure that girls' voices, perspectives and views are central to program design decisions.

We will use and build the global evidence base.

Sharing evidence and best practices will support replication and cross-country learning.





We will focus on girls' agency and empowerment.

The vision of A360 is a focus on supporting girls to be the center of decision making to effectively plan their futures.

We will form and sustain collaborative partnerships.

A collaborative approach with the government helps health system workers to build empathy for and insights into adolescent girls' experiences.



We will remain sustainabilityminded.

A key objective of A360 is to embed approaches into government systems for scalability and longer-term sustainability.

We will promote and prioritize localized strategies.

In alignment with PSI's broader approach, country level priorities and implementation plans will be developed to contextualize the strategy to each country.



We will seek to continuously increase and deepen our impact.

Adaptive implementation allows the program to respond to emerging learning and contextual changes.

We will ensure feminist leadership approaches are adopted.

Collaborative and inclusive ways of working enable open and honest discussions among team members.







SUPPORTING GIRLS' AGENCY: THE SOCIO-ECOLOGICAL FRAMEWORK

CONCEPTUAL FRAMEWORK



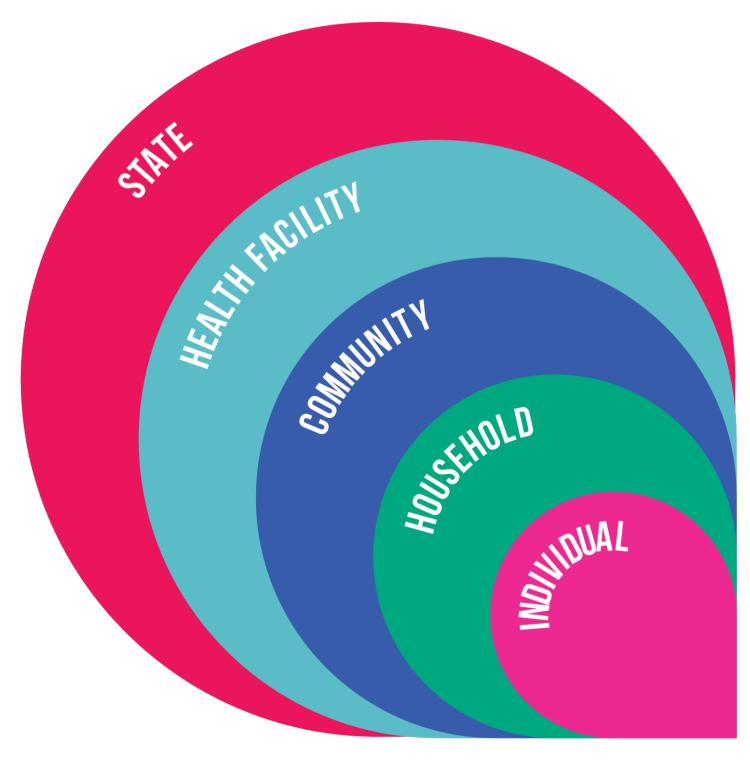
The socio-ecological framework (SEF) presents the multiple levels of a social system and interactions between individuals and environment within this system. There are five nested, hierarchical levels of the SEF: individual, household, community, health facility, and state. The SEF helps us to understand what outcomes should look like, what barriers and enablers exist at different levels, and the interplay between the different levels. This model allows us to understand the range of factors that impact gender equality.

CENTERING GIRLS' AGENCY

Girls' agency is at the center of A360's programming. Agency at A360 is defined as a girl's ability to act in line with her choices. The existence and exercise of a girl's agency are dependent on each level of the SEF, including that she has the necessary knowledge, attitude, and skills, that she is supported by her family and community, and that there are adequate services and an enabling environment to achieve her goals. Agency is an important component of empowerment and plays a role in increasing gender equality.

STRATEGY AT A GLANCE

Strategies to advance gender equality at each level of the SEF are described in the following slides.



STATE

Government prioritizes and implements genderresponsive ASRH policies.

HEALTH FACILITY

Public health facilities deliver adolescent-friendly, gender-responsive SRH services.

COMMUNITY

Communities provide a supportive enabling environment for girls' agency.

HOUSEHOLD

Adolescent girls' choice, voice, and agency are supported by their partners, parents, and family.

INDIVIDUAL

Adolescent girls have the agency to define and act on their goals.

INDIVIDUAL LEVEL

Adolescent girls have the agency to define and act on their goals.



Providing girls with Sexu Reproductive Health (SRH) and resources to support voluntarily take up and co use contraceptior

Increasing Maternal, New Child Health (MNCH) aware utilization of antenatal ca services.

> Enhancing girls' access to quality gender-based violence (GBV) response services, including psychosocial, legal, financial and health services, through the provision of safe referrals.

xual and) knowledge rt them to continue to on.	Training girls in life skills to build their communication, decision- making, negotiation and goal setting skills and increase girls' understanding of their rights and agency.
wborn, and areness and care (ANC)	Supporting economic empowerment through vocational skills training, mentorship, group-based savings, and linkages to financial services.

INDIVIDUAL LEVEL

Focus of country activities



In Ethiopia, Smart Start **builds married adolescent girls' SRH knowledge** and supports them through contraceptive counseling to access, voluntarily take up, and continue to use contraception.

To support **economic strengthening**, Smart Steps supports married girls to form savings groups which receive a curriculum to build their soft and business skills. Girls can access low interest loans to start and build their businesses and are supported to gain access to formal financial services.

Smart Pathways supports married girls to build selfefficacy around pursuing their goals during the **preconception, pregnancy, and post-partum** periods. Girls build their knowledge of MNCH related services, and gain confidence to ask for support to pursue their care seeking preferences during pregnancy.

An approach to enhancing girls' access to quality GBV response services will be explored and piloted.



In Kenya, at Binti Shupavu clinic sessions health workers and A360 youth staff support girls to **identify their goals** and chart a path towards achieving those goals. Comprehensive **SRH knowledge** and the provision of voluntary **contraceptive services** during these clinic sessions becomes a tool for girls in service of pursuing their aspirations. Local Adolescent Forums (LAF) enable girls to become peer facilitators.

In Binti Shupavu **skills sessions**, girls receive a curriculum to build their soft skills, financial literacy, and vocational skills. After graduating from these skills sessions, girls are then **linked to internships and market opportunities** and are organized into **self help groups**, where they can save and potentially start joint businesses. Organized groups also receive small start up kits comprised of assets, equipments and materials to start up a business.

In order to enhance access to GBV services, a priority going forward will be providing girls with information on where to report incidents and where to access support services at GBV referral centers.



In Nigeria, the Matasa Matan Arewa (MMA) program facilitates Life Family Health (LFH) classes for married adolescent girls. These sessions focus on building **SRH knowledge, soft skills, and financial literacy.** MMA forges linkages with vocational training centres so these girls can be referred to expanded training after graduating from LFH.

MMA+ expands the offering from LFH, so that girls can receive additional **business skills training, vocational training, and mentorship** to pursue their goals through a 3-month long program.

MMA's MNCH-related component works with pregnant married girls to identify the ways that they can **pursue healthy pregnancies**, particularly through accessing ANC care.

As part of the LFH intervention, content on reporting **GBV and accessing services** will be delivered through an updated manual.

HOUSEHOLD LEVEL

Adolescent girls' choice, voice and agency are supported by their partners, parents and families.



Engaging male partners to build SRH knowledge, address myths and misconceptions about contraception, and build support for girls' contraceptive decision making. Within MNCH components, male partner engagement also builds support for girls to make choices regarding care seeking behavior during pregnancy.

Engaging parents (particularly mothers and fathers, and inlaws in some cases) with messaging that builds SRH knowledge, addresses myths and misconceptions about contraception, and builds support for girls' contraceptive decisionmaking.

HOUSEHOLD LEVEL

Focus of country activities

In Ethiopia, Smart Start's financial and family planning counseling can be used both for individual counseling and counseling as a couple. Couples **counseling** supports girls and their husbands to jointly identify their goals and promotes equitable decision-making around contraceptive use.

ETHIOPIA

An additional male partner engagement component facilitates weekend sessions for husbands to build SRH knowledge and support for girls' contraceptive use. These weekend sessions are facilitated by kebele leaders who have been identified as champions for the program.



Binti Shupavu Stories sessions engage and educate influencers in the community and those closest to adolescent girls. Utilizing compelling stories directly from adolescent girls, these sessions address common myths and misconceptions about contraceptive use and work to shift influencer attitudes to support the decisions girls make about their bodies and futures.

These sessions reach male partners (in areas where adolescent girls are more likely to be married) and parents (in areas with mainly unmarried girls) along with key community leaders.



Nigeria's MMA program engages male partners through a two-pronged approach. Male interpersonal communication agents (MIPCAs) moderate group or one-on-one sessions with husbands using a visually compelling session facilitator guide that addresses common myths and misconceptions about contraception and builds support for girls' contraceptive use and autonomy. Husbands receive referral cards that they can share with their wives to seek counseling and services from a nearby health facility.

In MMA's MNCH component, health experts facilitate an 'ANC Gallery' session for husbands that supports them to understand the relevance of ANC and know how they can support their wives to pursue healthy pregnancies.

COMMUNITY LEVEL

Communities provide a supportive enabling environment for girls' agency.



Engaging religious and community leaders to mobilize girls and their husbands to participate in program activities and support girls' contraception uptake. Organizing community events to increase awareness of girls' agency, celebrate the unique contributions and achievements of girls, and provide clear actions for key influencers to support girls.

COMMUNITY LEVEL

Focus of country activities

Religious and community leaders are engaged through existing government channels during kick-off sessions for Smart Start in a community. Influential female members of the community who are part of the Women's Development Army (WDA) - a volunteer government cadre that supports health service provision - are trained to mobilize adolescent girls to receive services under Smart Start.

ETHIOPIA

In pastoralist communities, traditional birth attendants are also engaged as program champions to mobilize and refer adolescent girls for services.



Binti Shupavu Stories sessions engage community leaders and gatekeepers to build support for girls' contraceptive use. This also includes religious leaders and chiefs in counties like Narok where religion plays an influential role in daily life. They then hold meetings called Chief Baraza where community members are mobilized to discuss girls' rights.

After participating in skills classes, Binti Shupavu holds a community-wide graduation celebration, called the Binti Shupavu Fest. This event showcases girls' accomplishments and leadership through dance, spoken word, marketing of goods, and awarding of graduation certificates and is often attended by girls' influencers, government officials, and community members.

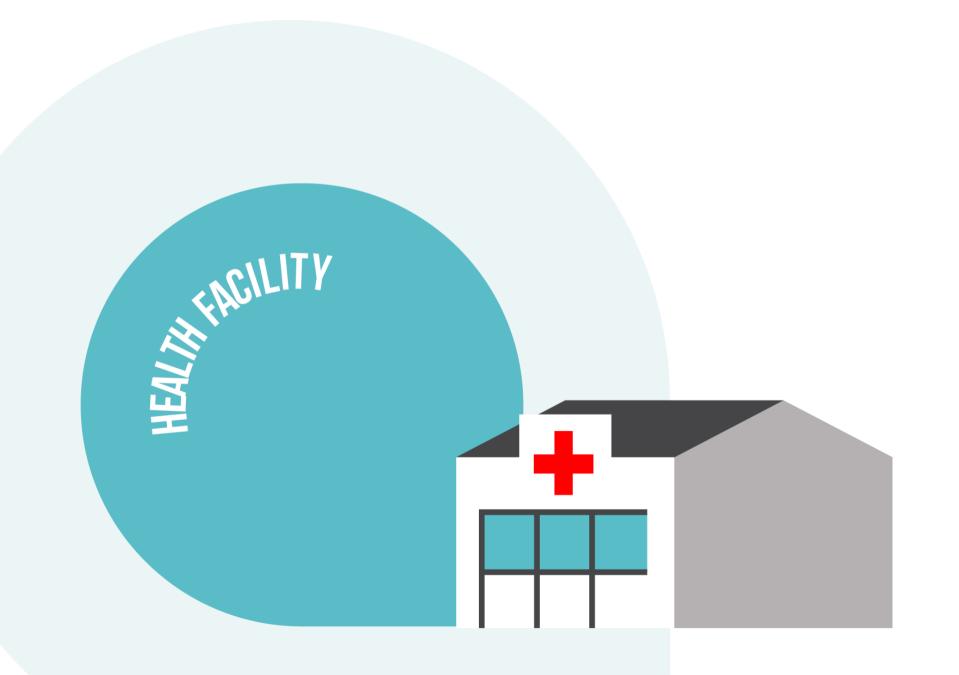


Within Nigeria's male engagement approach, religious and traditional leaders are brought into the process. They are empowered to advocate for contraceptive use among married girls and mobilize husbands for engagement with MIPCAs. In some cases they also co-facilitate these sessions or agree to host sessions in religious sites (for example after prayers).

In order to increase girls' access to contraception, satisfied clients (Big Sistas) are trained to provide community based distribution of short term contraceptive methods, particularly self-injectable methods.

HEALTH FACILITY LEVEL

Public health facilities deliver adolescent-friendlygender-responsive ASRH services.



Supporting capacity development of providers on gender responsive and adolescentfriendly service delivery through training, supportive supervision, and mentorship.

Strengthening GBV referral pathways through capacity building for health service staff on survivor-centered approaches to GBV response.

HEALTH FACILITY LEVEL

Focus of country activities

Smart Start is institutionalized within the national Health Extension Program and rolled out through the Integrated Refresher Training (IRT) to all health extension workers (HEWs). Through this, **HEWs receive training** which

ETHIOPIA

Through this, **HEWs receive training** which supports them to provide quality services to adolescent girls that is sensitive to their unique needs based on their age, gender, and marital status. This training is followed up by supportive supervision activities which assess how well HEWs are delivering adolescentresponsive services to married girls and create action plans for further improvement.

The Ethiopia team will explore an approach to enhancing the capacity of health service staff on survivor-centered GBV response.



Binti Shupavu prioritizes training for providers on **client-led counseling approaches**. These approaches, such as **Counseling for Choice (C4C)** take into account clients' unique preferences by virtue of their age, gender, marital status, etc. and aim to improve quality of contraceptive counseling. Kenya facilitates a Whatsapp-based C4C training for providers. A360 in Kenya also supports training on youth-friendly services for providers along with **supportive supervision and mentorship** to strengthen adolescent-responsive service delivery.

A priority going forward is the capacity building of health care workers on access to **GBV referrals.**The program will conduct a mapping of operational GBV centers.



Like in Kenya, A360 Nigeria facilitates training for providers on **C4C**, improving quality of services and taking a client-led, genderresponsive approach. The program also supports training on youth-friendly services and **supportive supervision and mentorship** to strengthen adolescent-responsive service delivery.

To increase access to referral services for girl survivors of violence, the program provides step down training on **GBV referral pathways** for government healthcare providers in two states with plans to expand to other states.

STATE LEVEL

Government prioritizes and implements gender-responsive ASRH policies and programs.



Institutionalizing A360 intervention approaches into government policy and procedures through revision of policy, operational procedures, training curricula, and other government documents.

Supporting governments with gender capacity development through regular engagement with gender focal points in ministries and gender technical working groups.

STATE LEVEL

Focus of country activities

Smart Start has been institutionalized within five key national level policy documents, providing a roadmap for how to operationalize tailored service delivery approaches for married adolescent girls.

ETHIOPIA



To support **government gender capacity,** A360 helped to set up the county-level technical working groups (TWG) on gender and provides ongoing support.

A priority going forward is to provide more **capacity building support** to the Ministry of Health to improve gender knowledge and to support the government with gender policy development, e.g. Female Genital Mutilation (FGM) policy.



Government institutionalization of A360 is a key priority across all states where the program operates. The program engages with gender focal points at the state and federal levels, e.g. Department of Women's Affairs.

To enhance **government gender capacity**, A360 supports the GBV technical working group (TWG) and engages with the Gender in ehealth TWG at the federal level.

ALIGNMENT WITH A360'S GLOBAL TECHNICAL STRATEGY

A360's Global Technical Strategy (2020-2025) is built on three pillars of i) adaptation, ii) institutionalization and government-led expansion and iii) research and learning.

A360's Gender Strategy and its Global Technical Strategy are aligned in the following ways:

PILLAR 1: ADAPTATION

In an effort to increase girls' agency and enhance gender transformative impact, program adaptation is informed by i) gender analysis and ii) the gender in design continuum. Adaptation is one of the supporting strategies of the Gender Strategy (see slide 24).

PILLAR 2: INSTITUTIONALIZATION & GOVERNMENT-LED EXPANSION

A360's institutionalization of its gender- transformative ASRH interventions into government systems, and TA for governments to implement these interventions with quality and fidelity, promotes sustained changes in the public health system towards gender and adolescent-responsive services. See slides 17 and 18 for more details. PILLAR 3: RESEARCH & LEARNING

As A360 enters its next phase of work on gender equality, there are exciting opportunities for A360 to carve out a role as a thought leader on gender transformative adolescent girls' programming and human centered design (HCD). Sharing knowledge and best practice both internally and externally is a priority of the revised gender strategy (see slide 26).



ENABLERS



STRATEGIC ENABLERS

There are a number of cross cutting themes that support the implementation of the gender strategy and which are described in the following slides.



MONITORING, **EVALUATION & RESEARCH**

GOVERNANCE & ACCOUNTABILITY

KNOWLEDGE DISSEMINATION & THOUGHT LEADERSHIP

PEOPLE & CULTURE



2

Gender integration in Human Resources (HR) processes

- the global PSI gender framework. A checklist is developed to provide minimum standards.
- are adequately budgeted.

Staff gender capacity

- and launched.
- Countries develop annual capacity strengthening plans and implement ongoing capacity development activities on key thematic areas, aligned with needs identified through regular capacity needs assessments.
- A global repository of gender learning modules is developed and regularly updated.
- staff participate.

Gender integration in HR processes is standardized across all A360 geographies and is linked to Gender reviews of key HR policies and procedures are conducted regularly at country level and

Gender-related responsibilities are integrated into all staff job descriptions and management by objectives (MBO) processes. Global guidance on integration of gender into MBOs is developed

A self-paced training module on introduction to A360's gender strategy is launched and all new

PEOPLE & CULTURE



Gender Champions Network

- Meetings are held on a quarterly basis.
- Country-level gender champions networks are established.
- A global orientation package for gender champions is developed and rolled out.
- expert sessions' are organized across geographies.

Gender-based violence (GBV)

- launched.
- Staff roles and responsibilities on GBV are outlined and staff capacity is strengthened on survivor-centered GBV approaches.
- and PSI.

Global gender champions network is thriving and drives sharing of best practice and resources.

Gender champions receive mentorship through country gender consultants. Regular 'ask the

Project positioning statement on A360's approach to survivor-centered GBV is developed and

A standardized survivor-centered GBV learning module is developed and rolled out across A360

ADAPTATION



Integration of gender in design and adaptation processes

- Consistent use of the gender continuum to facilitate adaptation for more gender transformative program approaches.
- Close working relationship between gender champions and adaptive implementation leads in each country during adaptation processes.
- Learning module developed on how to use the gender continuum in design and adaptation.

2

Adaptive Implementation Manual

Gender-focused questions are used in all adaptation processes.

Inclusion of gender focused questions (as a separate annex) in Adaptive Implementation Manual.



2

3

Global level implementation and monitoring

- Gender Champions meetings.
- A 'pause and reflect' session held annually to review progress on the gender strategy and update, as required.

Budget

roadmap implementation are budgeted and allocated appropriately.

Country level implementation and monitoring

and quarterly Gender Champions meetings.

Shared responsibility and accountability

- captured in job descriptions and MBOs.

Annual gender strategy implementation plan developed and monitored regularly. Progress is reported during quarterly

Annual budget for gender strategy implementation is approved at global level. Associated resources required for country

Annual country roadmaps are developed and implemented. Progress is shared during monthly consultant network calls

Responsibility for implementation of the gender strategy is shared at multiple levels and across geographies and explicitly Gender strategy progress is reported on an annual basis to PSI's Senior Advisor for Global Inclusion and Belonging.

MONITORING, EVALUATION & RESEARCH



Monitoring and evaluation of gender outcomes of A360

indicators.

Gender in research and learning agenda

what works to promote girls' agency and empowerment.

3

Improving government gender performance data

integration of gender-responsive indicators.

M&E framework includes measurement of improvements in girls' agency and gender-responsive

Research agenda and learning questions have clear objectives around gender equality, including

Advocate for more gender responsive government monitoring systems and advise government on

J KNOWLEDGE DISSEMINATION THOUGHT LEADERSHIP



2

Gender integration in Knowledge Translation Working Group

- Regular meetings to identify areas where A360 can contribute to the global evidence base on gender transformative approaches to adolescent girls' programming.
- Identify 2-3 annual opportunities for external dissemination of gender-related learning (e.g. through a conference, publication).

Learning from Practice Series on gender integration

practitioners and the wider sector and featuring learning from A360 programs.

Roll out a 'learning from practice' series, publishing papers on key gender-related learning for



THANK YOU!

QUESTIONS?

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