

Gender equality and Plan



Adam Hinton



Caroline Irby

Our journey so far



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Plan's Vision

Plan's Vision is of a world in which all children realise their full potential in societies which respect people's rights and dignity.

Plan's Mission

Plan strives to achieve lasting improvements in the quality of life of deprived children in developing countries through a process that unites people across cultures and adds meaning and value to their lives by:

- enabling deprived children, their families and their communities to meet their basic needs and to increase their ability to participate in and benefit from their societies
- building relationships to increase understanding and unity among peoples of different cultures and countries
- promoting the rights and interests of the world's children

Foreword

Plan is an international, child centred community development organisation with no religious, political or governmental affiliations. We work together with more than 1.3 million children, their families and communities in 45 countries all over the world, facilitating and supporting programs and projects at the grassroots level in health, education, water and sanitation, livelihoods and cross-cultural communication. We work together with government at different levels, with national non-governmental organisations and international development organisations.

For more than 60 years we have stood for the rights of children, and supported millions of children to have the opportunity to contribute to their societies in a positive way. We have long recognised that children are not passive recipients of aid. We believe that long-term improvements and change can only be sustained if girls and boys are 'development actors': they participate, voice their opinions, are listened to and taken seriously because their opinions count.

Children in communities we work with are often involved directly in planning, implementing and monitoring projects which benefit themselves, their families and their communities.

Over the past decade we have worked to address gender inequality as a key obstacle to the achievement of child rights. This publication, timed to coincide with two key events in 2005, the Beijing+10 Review and the Millennium Summit, reflects on our progress, celebrates our successes and identifies some remaining challenges. It draws on numerous Plan reports and project evaluations as well as discussions with staff across the organisation.



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Introduction

Plan believes that gender equality is central to achieving its Vision and Mission. Boys and girls have the same rights but face many different obstacles in accessing these rights as a result of their gender. Through our daily work, we see the negative impacts on boys and girls of gender-based discrimination, gender power relations and the denial of women's rights.

Like many other international development organisations, Plan was inspired by the activities surrounding the Fourth World Conference on Women, held in Beijing in 1995, to take a closer look at the impact of gender inequality on its work with children. Ten years on, the Beijing+10 Review has encouraged us to reflect on our progress so far and to re-assess our strategies for promoting gender equality.

This document outlines Plan's journey over the past 10 years to institutionalise gender. It provides examples of institutional strategies that have been put in place as well as case studies from our program work to address gender-based inequalities. It describes our efforts to think about child poverty in relation to rights and to make the linkages between child rights and women's rights. It should be clear that Plan has recognised the cross-cutting nature of gender and has made progress towards reducing gender-based discrimination through its projects. Still, there is much more that could be done. This document highlights some of the recently launched initiatives to improve Plan's performance on gender, not least our protocol on gender equality.

“As a person I am striving to have a gender balanced perspective in my everyday life and demonstrate it in my relationship with my spouse, children and professional colleagues.”

Plan staff, 2003



Victor Brott

Gender equality in Plan

Gender equality and child poverty

While some progress has been made in recent decades, in no region of the world are women and girls equal to men and boys in legal, social and economic rights. Gender gaps continue to exist in access to and control of resources and services, in economic opportunities, in power and political voice. Often, women and girls have no or a lack of inheritance rights, lack of access to credit or markets. They have less bodily safety and integrity. Plan works to address gender equality in relation to many of these issues, in ways that we explore throughout this publication.

Plan recognises that gender-based discrimination is an underlying cause of child poverty. Children throughout the world face various types of adversity. Boys in many developing countries face a number of hardships but life for girls is often harder still. Girls are not only subject to the same challenges as those faced by boys but have to contend with a wider range of social and cultural prejudices that deny their rights and stifle their ability to participate in society on an equal footing. Girls are subjected to multiple forms of oppression, exploitation and discrimination solely because of their gender.

Very often, however, gender interventions are assumed to benefit women or girls or to address the concerns of women and girls only. This is not a correct assumption. For Plan, gender is not a woman-only or girl-only issue. It is a developmental issue, a social justice issue and a human rights issue.

Plan also recognises that, despite common misconceptions, inequality and discrimination on the basis of gender do not only occur in the cases of women and girls, but that men and boys can also be limited and excluded on the basis of their gender. We recognise that gender-sensitive development means taking into consideration that girls and boys, women and men have different realities, constraints, potentials, and aspirations and that we must work with them to design and develop programs that more accurately address their particular needs in ways that will improve their quality of life.

So far, the male role in family life and in child development has not been well understood and has often been marginalised. Providing benefits to, or tackling only the problems of, women will too often alienate men and be counterproductive, making ultimate achievement of the gender equality goal impossible. The importance of men in achieving gender equality is critical to the achievement of child and women's rights and their involvement needs to be enhanced. This is central to Plan's approach to promoting gender equality.

While recognising that girls and women often face discrimination, it is also important that we move away from the perception of girls or women as victims or members of a 'vulnerable group' towards a more positive view of girls and boys as constructive members of, and contributors to, a society where their rights are recognised. Plan is working towards this vision through its child centred community development approach.

Gender equality and child centred community development

The Convention on the Rights of the Child has been ratified by more countries than any other treaty and represents the detailed description of all children's fundamental rights. Most of its Articles are specifically relevant to gender equality and the commitments made to it by governments across the world must be met. In following a rights-based child centred community development (CCCD) approach,

Plan is working for the realisation of those rights within the broader context of human rights, including women's rights.

Plan is putting children at the centre because of its belief that children are active actors in development processes rather than being passive recipients of projects. Child centred programming empowers children to take part and make decisions about their own lives.

The CCCD approach (see Annex 1) reflects the expectations raised in Plan's internal consultation process:

- a desire to challenge power structures and to break the 'culture of silence' that causes gender inequality and other forms of discrimination
- a wish to address structural causes of child poverty, address underlying causes of inequity and exclusion
- a willingness to encourage social mobilisation of children, families, communities and other stakeholders (civil society) in promoting children's and women's rights
- an expectation to create/facilitate an enabling environment for girls and boys to participate and voice their concerns and discuss their vision, and for adults to respect their ideas and decisions

Plan is aware that to address the structural causes and consequences of child poverty we must tackle gender inequalities head on. This means bringing a gender analysis to the core of our analysis of child poverty. The evidence of the impact of gender-based discrimination on children, particularly on girls, can leave us in no doubt that gender inequality is a major obstacle in the way of achieving our organisational vision and mission. By understanding the causes of gender discrimination we are better equipped to help women and children to realise their human rights. The case studies included in this document provide some concrete examples of how Plan is addressing gender discrimination as an underlying cause of child poverty.



Victor Brott



Liba Taylor

Gender equality and child rights

Plan recognises that the achievement of gender equality and child rights are interlinked, and that women's rights and child rights are mutually reinforcing.

For Plan gender equality and child rights are linked in two distinct but inter-related ways:

First, unless efforts to promote child rights are attentive to the specific experiences and needs of boys and girls, and particularly to gender-based discrimination, their impact will be limited. For example, it is now accepted in the area of education that the standard approach to achieving universal education has fallen short because it assumed that generic efforts to enrol more children would benefit all children equally. This approach did not examine or address the specific barriers faced by girls, which, when addressed, can significantly increase girls' enrolment and, with this, equal rights to education.

Second, equality for women and women's rights, which are important goals in themselves, are also central to improving the situation of children and achieving child rights. Staying with the theme of education, recent surveys of over 40 developing countries show that the mortality rate of children under five is lower in households where mothers have some primary schooling than in households where they have no schooling, and much lower in households where mothers have had secondary schooling. Studies have also indicated that women's education does more to reduce malnutrition than anything else, including increased food availability. Educated women are more likely to ensure that their own children, both boys and girls, complete school.

Simply put, gender equality is relevant to child rights because:

- children are boys and girls, with specific needs, interests and perspectives
- the realisation of gender equality and women's rights will have a profound impact on our work to promote child rights

In recent years, the development community has tried to highlight the complementary and mutually reinforcing nature of the Convention on the Rights of the Child (CRC)¹ and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)². Together they form an essential framework for a forward-looking strategy to promote and protect the rights of girls and women and decisively eradicate inequality and discrimination.

In addition to CRC and CEDAW, other important tools for promoting child rights are the Beijing Platform for Action (BPfA), where there are specific recommendations regarding the girl child, and the Millennium Development Goals (MDGs)³ both of which have implications for the areas in which Plan works.

Plan is aware of the growing body of evidence showing that there can be no progress toward the achievement of any of the MDGs without progress on equality for women. Like many other international agencies, Plan is beginning to pay closer attention to identifying the most critical gender equality concerns for its work around the MDGs as a strategy for achieving the broader goals. Through our networks, we are also beginning to explore the synergies among CRC, CEDAW, the BPfA, and the MDGs. It is widely known that because many aspects of gender inequality influence different dimensions of poverty it is crucial that interventions to promote gender equality are part of the design of strategies and actions to meet the MDG on poverty eradication – a goal towards which much of Plan's work is devoted. It is also well known that investment in girls' and women's education and health raises productivity, as does increased access to productive assets and resources, which in turn can have a positive impact on reducing poverty, including child poverty. Such insights are already influencing the way Plan works, as the case studies below demonstrate.

“After gender workshops and discussion, I could notice positive changes in the attitudes of my students' parents.”

Teacher, Paraguay

1. www.crin.org

2. www.un.org/womenwatch/daw/cedaw

3. www.mdgender.net/

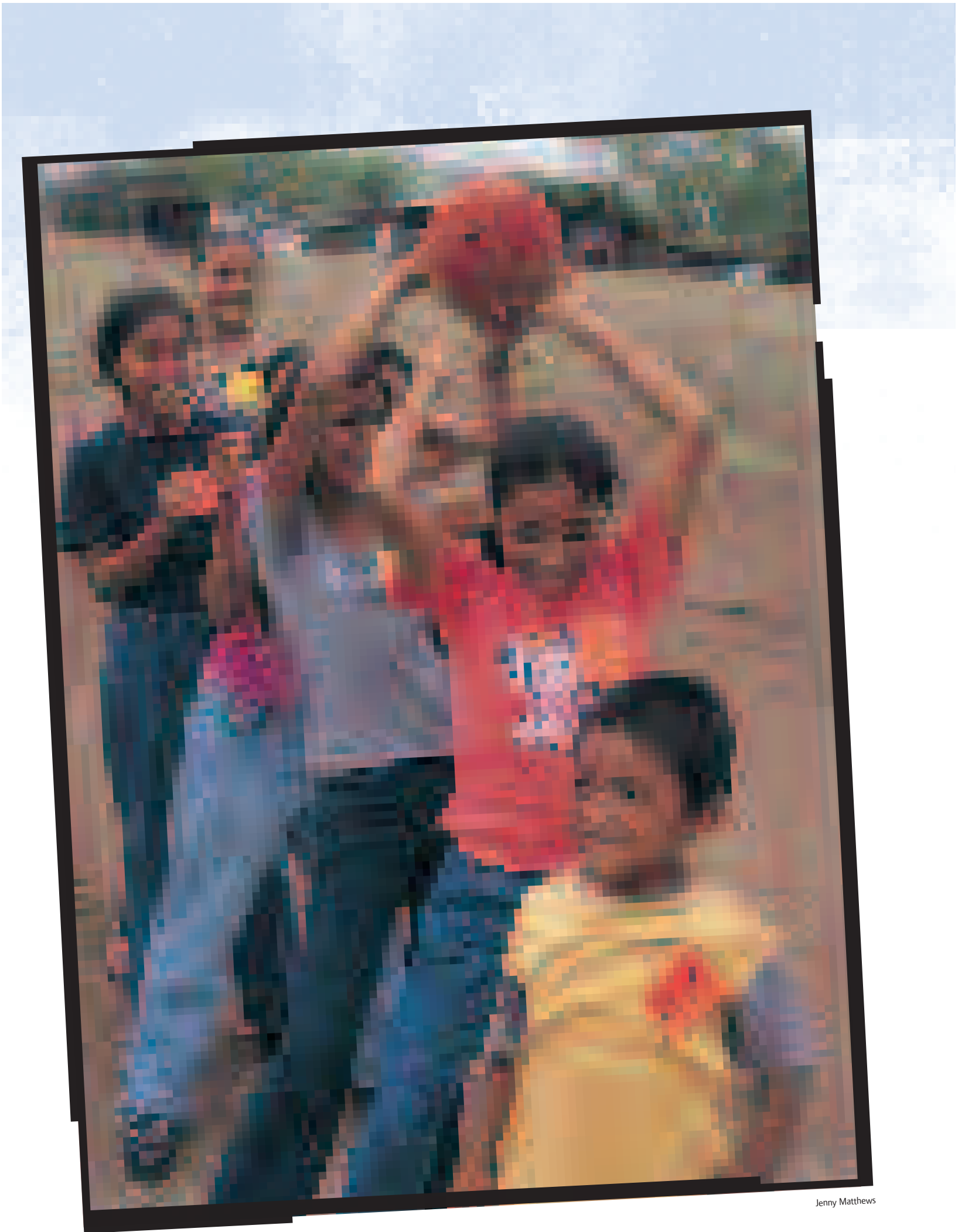
Plan's vision of 'gender equality'

Plan's vision of gender equality in society:

- women's and men's equal participation in decision-making processes in public and private arenas
- women's and men's equal access to and control over resources (natural and economic) and access to basic social services (health, education and so on) according to their gender-specific needs
- absence of gender stereotypes and positive changes in understanding and commitment of men to supporting women and girl empowerment
- women have improved negotiating power in relation to men in economic decisions (use of resources, money, time) and other family decisions (number of children to bear, children's education and so on) at household level
- men share the workload (reproductive roles) more equally with women
- girls enjoy equal access to schools with boys. The school environment becomes safer for girls and the curriculum less/not gender stereotyped. Greater value is attached to girls' education
- the community understands that unequal power relations between women/girls and men/boys keep them in poverty



Caroline Irby



Jenny Matthews

Our journey so far

Institutionalising gender

Plan's vision of gender equality is far from being realised. But over the past decade the organisation has worked hard to put in place the institutional structures and systems to support Plan in its work with communities towards realising that vision. This section provides an overview of Plan's journey so far in institutionalising gender.

Plan's official approach to gender equity began in November 1994. At that time, Plan was engaged in a process of strategic planning to identify programming priorities for the next decade. From this process emerged the Gender Equity Principle; across its program interventions, Plan will actively work towards the eradication of gender-based inequities in opportunity and access to and control over resources.

A steering committee including senior management staff was established and, in 1995, Plan staff participated in the fourth United Nations World Conference for Women in Beijing. A network of champions was set up, a gender and development training manual was produced and training was organised at country, regional and international levels.

In 1997, Plan senior management endorsed a strategic plan on gender equity. This aimed to raise awareness within Plan of how gender inequities affect children and build the expertise of staff to address these inequities in programs. The impact of this strategic plan and training was seen in the subsequent years as countries across the world began looking specifically at addressing gender inequalities and raising gender-related issues. A global gender adviser to support developments was recruited in 2002 and regional and global gender networks were established the same year.

In 2004, a global gender workshop to review progress towards achieving the Gender Equity Principle and strategic plan acknowledged that while some progress had been made, there was much more that can be done to promote gender equality in Plan. The workshop highlighted the importance of making the linkages between the commitment to gender equality in programming and the internal organisational profile, behaviours and practices. It also highlighted the need to have a stronger protocol for gender equality within Plan.

The gender equality protocol is set out in Annex 2. The goal of this is:

Plan actively promotes and practices gender equality in order for children to realise their full potential.



Adam Hinton

The protocol includes strategies both for implementing this goal at the programmatic level as well as at the internal organisational level. In many ways, it consolidates and reinforces ongoing work. The case study on Plan's Americas Region provides one example of how work is being taken forward at that region. Following the case study, some further examples are given of current initiatives in the area of organisational culture, project/program cycle management and the gender audit.

Plan's Americas Region gender workshop

Plan Americas Region held its first gender forum in Colombia in September 2004. Attended by representatives of staff from all countries in the Americas where Plan is working, the forum aimed to promote, sensitise and position gender issues and to develop a united approach in identifying gaps and challenges towards achieving gender equality in the region. Specifically, the forum succeeded:

- in motivating staff to address gender issues within the countries where they work
- discussing the global gender framework and mapping out the regional strategy for its implementation and adaptation
- discussing and sharing experiences, lessons learned, blockages and gaps in the implementation of gender equality
- drafting plans of action for each country in the region
- establishing a steering committee to work on gender issues and a contact person in each country to support this work

A similar workshop has been conducted twice in the Region of Eastern and Southern Africa (RESA) as has a global gender workshop attended by representatives of Plan's national organisations, country offices, regional offices and International Headquarters.

Working from the inside out: organisational culture

Recent years have seen Plan offices across the world attempting to reinforce the principle of gender equality among staff and volunteers. Plan recognises that we are all subject to the prejudices and cultural norms of our own societies, wherever we live. It is clearly vital that there is a real understanding of what gender equality means, what are the constraints to achieving it and why achieving it is important.

Plan's gender equality protocol outlines the changes needed to foster a supportive internal organisational culture. This is not just about skills and tools for gender analysis, although these are important; it challenges individuals to look closely at their professional and personal attitudes, values and ways of working. Power relations, cultural and social norms influence individual's own thinking about their identities, how they interact with colleagues and how they implement programs. Rather than adopting a culture and habit of silence around these issues, Plan is finding ways of working together to address them. The gender equality protocol commits Plan to beginning the process of internal reflection and learning. Some of the strategies for supporting an organisational culture that promotes and practices gender equality are included.

Proposed internal organisational strategies:

- ensuring that all reviews of human resources policies and procedures include a gender perspective
- agreeing minimum standards for 'common understanding' on gender issues to be achieved through orientation, induction and training
- designing and developing competencies by job-holders to identify skills, knowledge and behaviour required
- undertaking a global gender (and diversity) profile of staff at all levels
- setting targets for gender equality (and diversity) in staffing based on benchmarking and minimum standards
- communicating clearly that numbers of women staff is a separate, though related, issue from gender-sensitive internal policies and procedures
- in accordance with national legislation, setting clear guidelines for affirmative action in support of recruitment, training and development of women
- making better use of global staff turnover analyses and exit interviews for gender equality monitoring

Guidelines are also being planned to ensure a gender perspective in Plan's work with partner organisations, networking, advocacy, sponsorship, marketing and communications.

Advocacy on universal birth registration

Every child should be registered at birth. Article 7 of the United Nations' Convention on the Rights of the Child (CRC) states that, "The child shall be registered immediately after birth and shall have the right from birth to a name [and] the right to acquire a nationality". Yet recent statistics estimate that the births of 36 per cent or over 48 million children are not annually registered.

The possession of a birth certificate provides a child with permanent proof of identity. Without a birth certificate, children have difficulty proving to officials they are eligible for assistance at times of personal and national crisis. They have problems accessing human rights such as health care and education. They are vulnerable to exploitation such as child trafficking. They are at risk of exclusion and not fulfilling their potential by operating at a disadvantage within social, cultural, economic and political spheres.

Gender discrimination is a factor that negatively impacts levels of birth registration. For example, in some countries, the birth registration process requires the identification of the father. In others, evidence of a child's 'legitimacy' is required, therefore excluding single women. Women are disempowered in some birth registration systems because the law does not allow them to register their child. Furthermore, even in countries that allow a woman to register a child, social attitudes mean that civil registry staff may still refuse to handle a registration unless a male is present. Through its work with governments and communities in Asia, Africa and the Americas, Plan advocates for birth registration systems that are not prejudiced in terms of gender and which allow the mother, father or other adult to register the child.

"I was brought up in a very conservative male dominated family. It has been very difficult for me to a) recognise my gender biases; b) overcome them; c) deal with my family. Even today I cannot talk about my viewpoints about gender with my brothers and sister. I have been told that I have disgraced and dishonored the family traditions and values. I have worked out these feelings professionally yet sometimes this situation haunts me."

Plan staff, 2002

Gender analysis in the program and project cycle

In order that gender discrimination, its causes and consequences are addressed in Plan's work, detailed guidelines on including the gender perspective at every stage of the program/project cycle have been prepared and distributed to all country offices. This reinforces that addressing discrimination requires action at all levels from interventions at family and community level to policy change to ensure a favourable political, social and economic environment.

Some of the key strategies for designing participatory, gender-sensitive projects include:

- ensuring early consultation with men as well as women, particularly community leaders
- improving women's participation in committees, skills training and projects
- developing the self-confidence, assertiveness and communication skills necessary for dealing with village authorities by women and men
- raising awareness on the necessity and gains of involving women and girls in decision-making processes and the importance of gender-balanced relations
- educating children on their basic, social and gender rights and ensuring dialogue with adults to prevent misunderstanding of rights issues
- talking to boys and girls to find out how they perceive and define discrimination and what they believe should be done to prevent and combat discrimination and unequal power structures

To support both the rights of women and the rights of children, staff undertake comprehensive analyses of all needs, concerns, priorities, perceptions and other social and economic relations and dynamics that affect child development and survival. The contextual analyses the following areas:

- culture (what disparities exist, whether they are a matter of concern and how they might be addressed; who might be an 'ally' for change and how to gain their support)
- an analysis of the national situation regarding international agreements (UNCRC, CEDAW and MDGs), its impact at local level, the level of official resources made available and the legal situation
- an analysis of the situation at community level: roles and responsibilities; problems, needs, rights, priorities and interests; power relations; gender roles and relationships; education and learning; health, nutrition and HIV/AIDS; customs, traditions and harmful practices against women and girls; child labour; juvenile justice

The results of these analyses are then used in planning the next stage to address the issues identified, to guide the implementation of projects and in the monitoring and evaluation of impact.

A gender audit tool

A gender audit tool for Plan has been developed which is adapted from the InterAction Gender Audit (GA), well-known among international development agencies and non-governmental organisations. The GA is a self-assessment tool and process for organisations to use in identifying staff perceptions of how gender issues are addressed in their organisation and to what extent gender equality is mainstreamed or integrated within the organisation's programming and structure. It identifies key indicators of progress towards achieving gender equality in these two dimensions, based on the experience of many international non-governmental organisations (INGOs) and of research on gender and organisational change. The survey asks respondents to indicate to what extent, intensity or frequency, they perceive their organisational unit addresses gender issues and makes progress towards the key indicators.

The responses to certain questions in the survey also can be grouped to measure other aspects of gender responsiveness in an organisation. These include political will or the extent to which leaders use their power to communicate their leadership, support and commitment toward gender equality; technical capacity or the level of ability, qualifications and skills individuals need to carry out the practical aspects of gender integration; accountability or the mechanisms to determine the extent to which an organisation walks the talk of gender equality; and, organisational culture or the norms, customs, beliefs and codes of behaviour that support or undermine gender equality.

Plan's gender audit is a three-stage process:

- the questionnaire: focusing on five areas of programming (planning and design, implementation, technical expertise, monitoring and evaluation, and partner organisations) and six areas of organisational processes (gender protocol, staffing, advocacy, marketing and communications, financial resources and organisational culture)
- the analysis: focus group discussions with staff where the questionnaire results are explored in depth and recommendations for moving forward are proposed
- the final output: a detailed gender action plan that builds on the organisational strengths and outlines initiatives, strategies, processes and guidelines for the integration of gender equality in Plan's work

Following the workshop, of 18 Plan staff in Washington, USA, there has been much in the way of follow-up and action across Plan regions and national organisations. The Regional Office of the Americas has had a discussion on gender audit and currently it is in progress in five countries. Plan Egypt and Plan Zambia are currently conducting the audit. Plan's West Africa Regional Office is planning to conduct its own audit based on some of the lessons learnt from Asia Regional Office (ARO). The case study below summaries the audit carried out recently in ARO.

Gender audit: Asia region

In 2004, while the protocol on gender equality (GE) was being considered, the Regional Director of Plan Asia recognised the necessity to conduct a baseline survey to determine the current status of gender-related policy and practice in the region, building on previous exercises to assess performance on gender. One goal of the survey would be to gather information that will serve to frame a regional gender policy and strategy in alignment with the GE protocol. A Regional Gender Survey (RGS) of Plan Asia gender activities and programs was commissioned for this purpose and was conducted in the second and third quarters of financial year 2004.

The survey aimed to assess the status and trends in promoting (mainstreaming / integrating) gender equality in the region and had specific objectives to:

- identify good practices in gender programing and make an inventory of them for the use of all country offices in the region
- measure the consistency of guidelines, policies and practices with the gender equity principle
- gather information and opinions that will provide a basis for the development of a draft gender protocol and strategy for the region
- provide awareness to the Regional Management Team, Country Management Team and partners of the strengths and weaknesses of their particular gender activities and programs

A regional Gender Task Force (GTF) was convened to provide leadership and oversight to the administration of the RGS and to build ownership of gender equality in the region.



Michelle Gilbert

It is envisioned that it will function beyond the period of administration of the RGS to provide ongoing championing and support to the implementation of the gender protocol and strategy of Plan Asia.

The questionnaire that constitutes the GA was reviewed by the GTF at a Plan Asia RGS planning meeting held in Bangkok in October 2004. The survey questionnaire was distributed to a sample of Plan staff in each of the 12 countries in the region (Bangladesh, Thailand, Vietnam, Timor-Leste, Cambodia, China, India, Indonesia, Nepal, Pakistan, Philippines and Sri Lanka) and the Asia Regional Office. Both international and national staff was included in the sample regardless of staff position. It was self-administered with the members of the GTF for each country overseeing the translation, where appropriate, and the administration of the survey. In China and India there was significant partner participation in the administration of the RGS.

The GA was supplemented with information gathered through a desk review of gender, program, and administrative policies and practices in the regional office and participating country offices. The purpose of the desk review was to examine actual policies and practices to see if they confirmed the conclusions of the survey. It also served to identify the policies and practices that block gender equality in the country office as well as the gaps in policies that need to be filled to address the issue. The RGS questions were used in a review of the manuals and other materials that contain Plan's policies and practices. The desk review also aimed to identify and inventory good practices in promoting gender equality in each country and the region.

Focus groups discussions were also conducted in program countries and the regional office to check the validity of the information gained from the RGS and the desk reviews.

In addition to reflecting the status of gender equality within an organisation and providing a baseline for collective analysis and discussion as the RGS will in Plan Asia, the GA is also a participatory process that builds organisational ownership for the organisations gender initiatives.

The final report and finding will be ready by the end of February 2004. However, some initial findings emerging from the RGS suggest that staff surveyed identified some key areas for further work to strengthen performance across the region: gender training: technical skills and gender analysis tools: working to strengthen gender-related approaches and skills of partner organisations.

Regarding issues related to internal organisational structure and practices, the survey results suggest that there is more to be done to communicate the organisation's position and practical commitments to gender equality across the region.

Putting it into practice

As we have seen above, Plan is hard at work trying to ensure that the appropriate organisational structures and practices are in place to support gender equality. But more important still is the work that Plan has already done or is currently engaged in to promote gender equality through its programs around the world. There are many examples of ways Plan is putting into practice its commitment to gender equality in the communities with which it works. This section highlights examples drawn from a range of Plan's thematic areas. The case studies shared below provide some concrete examples of the connections Plan is making between gender equality and the achievement of child rights.



Adam Hinton

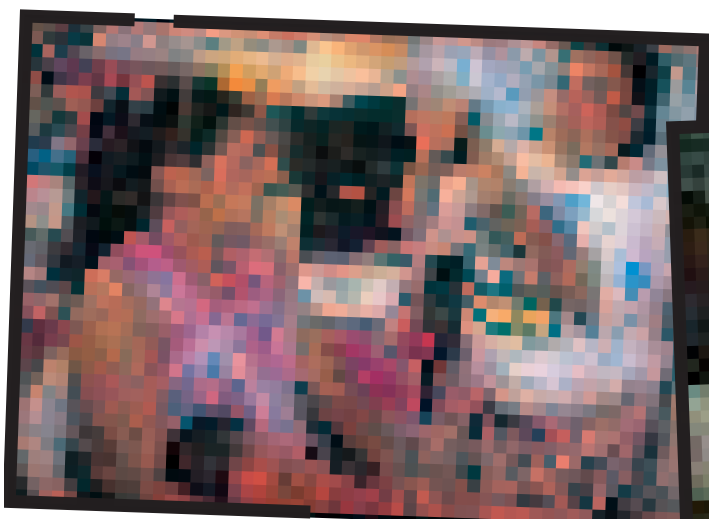
Child mortality

Each year, approximately 11 million children under five in developing countries die, mostly from preventable diseases. Plan understands that gender inequalities are a major underlying cause of child mortality. For example, low levels of maternal schooling and high illiteracy rates among women contribute to high child mortality rates. By contrast, greater control of income by women tends to lower child mortality rates, as does improved education levels.

Child mortality rates are also linked to gender-related norms and customs. Rigid social norms about mobility often restrict women's ability to take children to health care providers. In countries where parents regard the health and survival of sons as more critical to their well-being than that of their daughters, sons may receive preferential treatment in nutrition and health care, so reducing the survival chances of girls.

Female infanticide is believed to account for distorted male-female sex ratios in some developing countries. According to calculations by the United Nations, 'there would be 120 million more women alive today' if it were not for socio-cultural and economic discrimination against girls and women. Female infanticide is a brutal method of family planning that is practiced in societies where boys are valued economically and socially above girls. It usually occurs in regions where there is significant poverty and overpopulation. Although officially outlawed, it is still practiced in several countries in Asia.

Plan works in many ways to challenge some of the underlying causes of child mortality. In addition to micro finance, literacy and gender awareness-raising programs that have positive impacts on the status of women and girls, specific work is being carried out to challenge social and cultural norms that perpetuate gender discrimination through practices such as female infanticide, female genital cutting and dowry. Below is a case study from India on Plan's work in connection with the campaign against female infanticide.



Jenny Matthews



Victor Brott

India

Over the past decade in India, the number of girls born per 1,000 boys born has dropped to an alarming level. A study of 700 pregnant women who received genetic amniocentesis showed that only 20 of 450 women who were told they were carrying a daughter actually continued with the pregnancy. All of the predicted 250 male infants were carried to full term, even where a genetic disorder was likely. Although baby girls are biologically stronger than boys, there is a disturbingly low girl:boy ratio in the 0 to 6 age group. Gender-based discrimination has meant that only 927 girls are born for every 1,000 boys. In wealthier states like the Punjab, where many parents can afford to use science to determine the sex of their unborn child, the figures are even more alarming: only 793 girls are born for every 1,000 boys.

Female foeticide is not only an issue in itself, but also revolves around many other issues such as gender inequality, low status of women, early age at marriage, perception of female adolescent as a burden, etc. Increasing incidence of violence against women in the form of rape, sexual harassment and child abuse are factors leading to sex selective abortions at the time of pregnancy. Easy availability and affordability of sex determination techniques coupled with the absence of proper enforcement of legislation against sex determination have created an environment where there is no stigma attached to violence against women and girls.

Plan India and The Population Foundation of India have planned a national-level advocacy campaign against sex selection and pre-birth elimination of females. The objective is to create an enabling environment for increased public and private responsibility; to curb sex selection and pre-birth elimination of females; through effective implementation of existing legislation to ban the use of sex selection techniques before and after conception and sex selective abortions; to sensitise society at large on the issue regarding the declining child sex ratio; and create a positive attitude towards the rights of the girl child for survival and development.

As part of this strategy Plan has been communicating the dangers of sex selective abortion to the general public. Information was distributed through numerous media outlets and letters were sent to 20,000 medical professionals and politicians. With the cooperation of the Indian government, Plan also made a film, *Atmajaa*, which explored and challenged the reasons behind the continued preference for sons over daughters. Among the reasons why boys are more highly valued are that families want to preserve lineage and that girls sometimes require an expensive dowry on marriage and, once married, become the 'property' of their new husband and therefore perceived to be of little value to her parents and unlikely to be able to care for them when they are elderly. The film has been translated into numerous languages and shown on national and regional television.

Atmajaa has become an icon for the campaign against female foeticide and is regularly played at a variety of organisations' workshops and meetings across the country. As a result, there has been wide television, radio and newspaper coverage of the issue, and it has been estimated that the film itself has reached up to 86 per cent of the population. The impact on behaviour change will be difficult to assess for many years, but Plan, together with its partners is working hard to ensure that change happens.

Health and nutrition

Globally, girls are three times more likely to suffer malnutrition than boys. Inadequate nutrition and insufficient paediatric care are often the result of pervasive cultural attitudes, including those mentioned above, that lead girls to be less valued than boys. Related to this, studies have shown that the status of women in a community is clearly reflected in the nutritional status of their children. Policies to eradicate gender discrimination can benefit children's short- and longer-term nutritional status. Plan works to promote gender equality as a key factor in achieving lasting improvements in children's health and nutrition. Plan's programs that are designed to improve the status of women and girls through awareness raising on gender equality have an indirect impact on child nutrition (see Country Case Studies from Paraguay and Egypt pages 42-44). At the same time, programs that focus specifically on primary health care and prevention, such as the Ecuador case study below, are attentive to women's participation and empowerment as a key to community development.

Ecuador

Margarita Bitá is chairwoman of the Association of Community Health Volunteers in Guasmo. She works from a large, clean room decorated with health posters and where community members give talks on health prevention and the management of diarrhoea. "Yesterday, I was a nobody," she says. "Today, thanks to support from Plan, politicians from all creeds and parties in Guayaquil want to talk to me."

What the politicians want to talk to her about is the highly successful 'Camino a la salud' (Road to health) program. This is a series of integrated community-based interventions in health managed by women with primary education. Its sole aim is to reduce morbidity and mortality among children under five. These interventions are designed to improve the quality of nutrition of underweight children, reduce the incidence of diarrhoea among malnourished children, control the damage caused by respiratory infections and ensure that all children under the age of five are fully immunised.

The focus is on prevention rather than cure. It is from this perspective that community mothers are trained and invited to identify new ways to keep their children in good health. "Mothers take advantage of every opportunity to detect early any sign of disease in their children," explains Mrs Bitá. "They are fully equipped to take appropriate steps to prevent the occurrence of these diseases and, when and if they occur, they are capable of making the right decisions to save their children's lives and keep them healthy."

All this work takes place within the community without the assistance of health specialists or service providers. This is why the politicians are interested in talking to women like Mrs Bitá: their leadership and capacity to mobilise others to promote and defend what they consider to be an inalienable right – free access to decent health care. Not long ago, for example, the municipality of Guayaquil needed to boost its vaccination campaign for children under five. A telephone call to Mrs Bitá was enough and within 24 hours, 1,200 families brought their children to be vaccinated. Even with all its resources, the municipality admitted that it could not have achieved so much in such a short time.



Adam Hinton

BASIC, an international private voluntary organisation specialising in health, conducted an evaluation of the program. This indicated that 'the prevention strategy used in Guasmo has saved lives' and that 'the role of the community health volunteers has been crucial in the process of integral promotion and protection of the health of children under five'.

Two years ago, Plan staff in Guasmo began the process of transferring the knowledge associated with this program to the municipality through the Association of Community Health Volunteers. The municipality was interested in learning how to train people, particularly women, with very little education to become effective in taking care of their children and maintaining good health. It approached Plan because the quality of health among residents of Guasmo was found to be far better than that of the other communities that similarly do not have health posts or receive health services from the local government. As social budgets have been cut by 10 per cent each year for the last three years, the municipality also wanted to learn how to keep a large population of children under five in good health without spending huge amounts of precious financial resources.

The small group of women running the 25 'Road to health' houses in Guasmo were chosen to lead the transfer of knowledge. Plan has been retraining these women to ensure that they are capable of undertaking this role. The trained mothers from Guasmo will demonstrate to and train mothers in other communities. The whole process is fulfilling one of Margarita Bitá's dreams: to share her knowledge with other women who are still struggling to be heard.



Caroline Irby

Reproductive health and maternal mortality

Plan is aware of the profound impact of gender inequality on reproductive health and maternal mortality. Because it is women and girls who get pregnant and give birth, the risk factors and exposures to ill health are gender-differentiated from the outset, with the burden being much greater for women. Many of the health issues related to sex and sexuality depend on the nature of men's and women's relationships with each other. Often, for economic, political and social reasons, women and girls have less power in relationships and are therefore not in a position to protect themselves against unwanted sex, from transmission of infections or from violence, or even to gain information about reproductive health and rights.

A woman dies in pregnancy or childbirth every minute, leaving an estimated one million or more children motherless each year. These children are up to 10 times more likely to die before their second birthday than children with both parents alive. Among the contributing reasons for poor maternal health are:

- inequality of control of household economic resources
- inequality in the right to make decisions
- inequality in freedom of movement outside the household
- poor quality or non-existent health services

There are many programs facilitated by Plan over the years that seek to improve community reproductive health services for women and girls. More recently, Plan has focused attention on strengthening community understanding of men's and boys' roles in enhancing women's and girls' sexual and reproductive health and rights. The Uganda case study below demonstrates Plan's efforts to look more holistically at the underlying causes of women's and girls' reproductive ill-health, moving away from a medical focus alone to explore the impact of gender power relations and discrimination. Another example is the 'male motivation' project in Zimbabwe which describes Plan's efforts to engage men and boys to promote the equality and rights of women and girls.

Uganda

Through its three-year community-based reproductive health services project, Plan in Uganda is providing sexual and reproductive health care (SRH) to young people and adults in the Kamuli, Luwero, Tororo and Kampala districts. Now in its final year, the project covers HIV/AIDS information and prevention, safe motherhood, family planning and immunisation. It is run in partnership with the Ministry of Health and the Uganda Family Planning Association.

Throughout the implementation of this project, attention is given to addressing gender concerns holistically and therefore avoiding the practice of addressing women's concerns in isolation or ignoring that broader gender dynamics influence unequal control of and responsibility for reproductive health issues. Reproductive health is traditionally viewed as a women's issue and most elements of SRH typically address the situation of women with very little attention to male issues. While the majority of clients for the project continue to be female and the project has successfully reached women and adolescent girls and reduced their vulnerability to sexual and reproductive health problems, the role and responsibilities of men and boys has also been emphasised. This has been done through their involvement in SRH, with special attention paid to changing the cultural practices that leave women vulnerable to SRH concerns. The project has therefore improved the sexual and reproductive health knowledge of women, girls, men and boys.

Through targeting all members of a community, the project has increased the participation of men and boys, who previously thought that family planning was a 'woman's issue'. At the same time, targeting male nurses and clinical officers in life-saving skills training has changed the community attitude that only women should be midwives.

By, for example, organising workshops exclusively for men, specific interventions have targeted male involvement in reproductive health services. Male involvement workshops focus on discussions around issues that concern the men, their partners and children. As a result, increasing numbers of men are accompanying their wives to outreach clinics for SRH services and information. Men who come to the clinics receive protection from sexually transmitted diseases and improve their knowledge about family planning. These activities have positive indirect impacts on women's sexual and reproductive health.

Sensitisation for men and women on sexual and reproductive rights and roles has resulted in women feeling more supported by their husbands and partners. At the same time, while adolescent girls are encouraged to delay sexual activity, they also feel that, rather than just focusing on a girl's response, boys should be discouraged from proposing sex prematurely and should be knowledgeable about sexually transmitted diseases. This demonstrates that adolescent girls are questioning the gender inequalities that potentially harm their reproductive health.

Zimbabwe

The ‘male motivation’ project undertaken by Plan Zimbabwe in partnership with the Zimbabwe National Family Planning Council (ZNFPC) and others proved the positive impact male involvement can have on improving women’s lives and health.

A ZNFPC assessment in the Chiredzi area in 1992 showed that almost three-quarters (72 per cent) of men did not approve of family planning because they knew little about it and the methods available. Over half believed that family planning was a woman’s business because programs were targeted at them and women were trained as service providers. “Men are pushed aside and made to feel like strangers,” was a common reaction. At the same time, two-thirds (64 per cent) of the women said that the husbands decided on whether or not his wife used contraception and three-quarters of men and women said that they never discussed family planning with their spouses.

The aim of the ‘male motivation’ project, therefore, was to educate men and women about family planning and so increase the use of family planning methods. It deliberately set out to include men as well as women, not just to encourage more use of condoms or vasectomies but also in the wider sense of persuading them to encourage and support their partners and peers to use family planning.

Under the campaign theme ‘Endhla wanuna – longa ndangu wawena (Be a man – plan your family)’, the project employed a wide range of awareness-raising tools to get the messages across and promote joint family planning decision-making between men and women. These included talks for men, home visits, community theatre, awareness raising in schools and condom distribution. Posters and leaflets were produced, some aimed at men, some at women and some at couples. Campaign messages also appeared on banners, t-shirts and stickers, and a local music group even wrote a song reinforcing the theme of male involvement in family planning.

Equally important was to gain the support of community leaders, religious leaders and influential government figures, some of whom participated at some of the project activities, drawing large crowds and media attention. The campaign activities were led by a group of 30 specially trained male motivators chosen by the community.

An evaluation of the impact of the project on behaviour, knowledge and attitude among community members was conducted at the end. Among the main findings were that:

- up to 78 per cent of the targeted population had been reached
- contraceptive use, particularly of the pill and condom, had increased
- 80 per cent of men and 93 per cent of women discussed family planning issues and saw family planning decisions as a joint couple responsibility
- 84 per cent of married women said that their partners approved of their use of contraception
- 77 per cent of men and women said that they had made an informed choice on their current contraceptive method and 88 per cent were recommending their relatives and friends to use contraception
- 75 per cent of women believed that contraceptive use had improved their lifestyle

HIV/AIDS

In developing countries, girls' infection is rising at an alarming rate. It is reaching and surpassing that of boys in some regions. Of the 40 million people worldwide living with HIV/AIDS, over 50 per cent are women, and 50 per cent of all new HIV infections and among young people aged 15 to 24, almost two-thirds of whom are girls. In some countries in sub-Saharan Africa, new infections are five times higher for girls than for boys. Also, a survey of six rural communities in India found 730 girls and 513 boys ill with HIV/AIDS-related illnesses. Of these, 50 per cent of boys compared to just 25 per cent of girls gained access to a doctor. Research shows that the practices of wife inheritance and age mixing, or girls having sex with older men, including in marriage, hugely increases the girls' risk of HIV infection.

How is Plan working to reduce the rate of HIV infection? The case studies from Zimbabwe and Uganda on previous pages explored some of the innovative ways Plan is working with men and boys to raise awareness of their roles in promoting women and girls' sexual and reproductive health. These projects can have a strong positive impact on the choices that women and girls' are able to make about their sexual health and well-being, with particular relevance for the spread of sexually transmitted diseases and HIV/AIDS. The case study from Nicaragua, below, gives another example of how Plan is working with young people through a 'peer group' reproductive training initiative.

Nicaragua

In Nicaragua, half of all women have been pregnant by the time they reach 19. This high incidence of adolescent pregnancies shows that young people begin their sexual life at an early age, and when their intellectual and emotional maturity does not match their physical development. The risks associated with this include infection with sexually transmitted diseases, including HIV/AIDS.

Plan Nicaragua and its non-governmental organisations counterpart, PROFAMILIA, decided to address this situation with a 'do-it-yourself' approach: training adolescents to provide counselling to their peers about reproductive health. Besides covering some very serious yet delicate issues, training in group dynamics skills was provided, as were some excellent visual materials. Meetings with parents and local authorities explained the program and its approach: mixed groups of about 20 adolescents would meet weekly to run through one of the 20 modules in the program. Parent monitors were identified for each group, health authorities were also trained and special 'counselling areas' were set up in many of the health posts or centres.

The peer groups address concepts of self-esteem, making choices, setting life goals and exploring existing attitudes towards sex before turning to the themes of sexuality, the anatomy of reproduction and the various means of contraception. The take-up has been superb and initial embarrassment was quickly overcome. A recent evaluation shows that attitudes among attendees have begun to change.

Gender-based violence

Gender-based violence against women and girls is universal and takes different forms, including incest, rape, genital cutting and sexual harassment, not to mention its manifestation in the forms of domestic violence, honour killings and trafficking. Plan understands that gender-based violence is one of the most atrocious symptoms of gender inequality and discrimination. This section explores a few examples of Plan's work to address different forms of gender-based violence.

Female genital cutting

An estimated 130 million women and girls worldwide have endured some form of female genital cutting and these figures do not include the estimated two million girls at risk of this each year. Most commonly, girls undergo such practices between the ages of seven and 10. This amputation of vital organs has serious consequences for the physical and psychological well-being of women. Pain during menstruation or urination is just a minor example of the consequences, which can be infection, complications during labour and even death. Psychologically, the practice can result in life-long trauma with little support as discussion about it, even among women, is taboo. Culturally, however, any woman not excised is treated as an outcast by men and women alike. In some areas, it is considered a prerequisite for marriage. Besides causing huge health complications, female genital cutting is against child rights, as listed in the Convention on the Rights of the Child, and the Human Rights Declaration.

The case study from Mali, below, illustrates how Plan is working with local communities to lift the taboo that surrounds female genital cutting and to initiate public debate on its causes and consequences. One of the innovative strategies adopted by Plan, in relation to female genital cutting as well as on other culturally sensitive issues, is to engage local religious groups and leaders. If they can become allies, it is much easier to promote positive change around issues of gender inequality at the community level.



Victor Brott

Mali

Female genital cutting is widespread in Mali, with more than 90 per cent of women being excised. Plan has been working in Mali since 1970. Plan staff have worked to raise awareness about the dangers and consequences of female genital cutting, lobbying at all levels from local communities to government officials. In a specific program to address the widespread use of female genital cutting, Plan is aiming initially to reduce the rate of the practice by 25 per cent in the areas where it works.

The social and cultural norms in Mali mean that it is extremely difficult to tackle excision from a human rights perspective. Instead, one of the program's early aims was to encourage discussion and debate, bringing excision, its causes and consequences into the open public arena. This has involved group discussions, home and school visits, film showings, radio broadcasts and popular theatre performances. The extent to which the taboo has been lifted can be seen by the fact that where Plan or its partner staff wanting to discuss the issue were not welcome in villages in 2000, the topic is now openly discussed by men and women, boys and girls.

Equally important in bringing the subject into the open was the significant debate that began among government officials. This ranged from those in favour of adopting a law against excision to those against any such law and those who felt Mali needed more time to learn the lessons of neighbouring countries. Even the country's president helped to bring the risks of female genital cutting to public attention. Similarly, there has been open discussion between and within religious groups. Plan was particularly encouraged to receive the support of younger Muslim leaders, who promoted a more open interpretation of Islam's position on the issue. This was significant in that older imams have always declared excision to be inherent to the Koran.

Plan has also helped former practitioners of female genital cutting to find alternative professions. "I agree that it (female genital cutting) has negative effects on young girls' reproductive health, for I used to encounter serious problems during operations," explained one former practitioner from south-west Mali. "With the information I received from Plan, I have decided to join others in vigorously condemning this practice. I got support from Plan to change my occupation and I hope I won't have to circumcise any more girls."

Plan has also been instrumental in organising what is now a thriving network of 46 organisations active in this area, which are now cooperating and sharing lessons learned with each other. This network, which is recognised by the Ministry of Territorial Administration, is provided with technical, financial and material support. Plan is also working with the international organisations ENDA and Groupe Pivot to ensure that the aims of the program reach areas where Plan is not represented. The involvement of local partners has been particularly important in ensuring that the program reflected the social and cultural norms in Mali and in ensuring its sustainability through community participation and ownership.

As a result of this four-year program, discussions about female genital cutting became more public and Plan was able to emphasise and highlight the health risks associated with it to a wide audience. Although most girls in Mali are still excised, the overall results have been encouraging. The campaign has already gained significant momentum and the government is now taking clearer steps towards the abolition of the practice.

Trafficking and forced prostitution

Each year, roughly two million girls between the ages of five and 15 are trafficked, sold or coerced into prostitution. Determining the scale of trafficking in young women and children is extremely difficult because of the underground and illicit nature of the activity. Estimates range from 700,000 to four million worldwide every year; UNICEF estimates that around 1.2 million children alone are trafficked. The trade is lucrative and fuelled by the levels of poverty among target families. Ignorance about the dangers involved is another problem: many families believe the sales talk of recruiters who offer well-paid decent work and often a better life for the child. Too often, the reality is very different. Many children and young women find themselves totally dependent on the traffickers and forced into labour or sexual exploitation. For example, children as young as 13 are trafficked as mail-order brides; thousands of children and young women are thought to be working as prostitutes in Japan; more are being prostituted around the US military bases in Korea.

The case study from the Philippines is just one example of Plan's work to support victims of trafficking. At the same time, Plan is working with communities in different parts of the country to improve education and livelihood opportunities for women and girls, so as to lessen the likelihood that they become victims of trafficking.

Philippines

Filipino girls experience gender discrimination within the family and society which impacts on their ability to live healthy lives and to achieve their full potential. The country is seeing increased rates of both teenage pregnancy and reproductive health problems among adolescent girls. There are, for example, more induced abortions among pregnant teenagers than spontaneous abortions of normal deliveries. Some mothers are as young as 15 years, which may partly be explained by the cultural factors that impinge on the female role/status particularly in Muslim areas. At the same time, there is a lack of services and facilities for pre-adolescent and adolescent girls. Girl street children are more vulnerable to HIV/AIDS, sexually transmitted diseases and teenage pregnancy. More girl-children are victims of the commercial sexual exploitation of children and those living in rural areas are victims of illegal recruitment. The number of girl child abuse cases is increasing, even though the vast majority are believed to go unreported. At the same time, the school curriculum and textbooks are not gender-sensitive and many teachers are still gender-biased.

The picture painted above helps to set the scene for this story about Roselyn. Roselyn is 16: not yet old enough to vote or drive a car but, according to Ramil, old enough to be taught to drink alcohol, put on make up and entertain male customers. The eldest of five children from the Southern Philippines, Roselyn jumped at the chance to contribute to her family's meagre income when Ramil offered her work as a model in Japan. Along with nine other under-age 'models', she travelled by van and ferry to Matnog Port. Sometimes the group was told to split up to avoid detection. Despite Ramil's careful planning, the girls were intercepted by security guards at Matnog on suspicion that they were minors and possible victims of trafficking.

Roselyn was just one of the 295 young women and children who have found safety and support at the Port Matnog halfway house between March and June 2004. The youngest

resident was just 10 years old. Supported through a grant from Plan, the halfway house is one of four operated and managed in a joint initiative between the Visayan Forum Foundation and the Philippine Ports Authority.

With its poverty levels and myriad of islands and ports, the Philippines is not only a source of children and young women but also a transit country for organisations moving them across borders. Internal trafficking where victims are recruited to work in the cities is also a problem. Some protection has been provided by the anti-trafficking in persons act passed by the Philippines government in 2003, which made trafficking illegal and imposed increased penalties. In its Trafficking in Persons Report, the US State Department placed the Philippines in tier 2: countries that do not fully comply with the minimum standards but are making significant efforts to bring themselves into compliance.

“Matnog is considered to be a strategic location for traffickers attempting to move their human cargo across land routes,” explained Cathy Seco from Plan. “Some 5,000 people disembark at the port every day, providing useful cover for the illegitimate trade. The halfway house here represents another line of defence against the people and organisations who exploit the very young and underage for profit.”

Once at the halfway house, Roselyn revealed that she had no idea what being a model entailed, only that her travel expenses to Japan would be deducted from her monthly salary once she started work. Staff provided food, shelter and essential counselling before she went to stay with an aunt in Manila. Today, she is safely back with her family.

Early marriage

Early marriage is a form of sexual violence, since young girls are often forced into marriage and into sexual relations. For young girls, marriage usually means an end to their education, social isolation from peer networks and complicated pregnancies. Pregnancy is the leading cause of death for women aged between 15 and 19 worldwide. Half a million die in pregnancy or childbirth every year.

Early marriage is a violation of the rights of girls. Plan is working to challenge attitudes and cultural practices that perpetuate this rights violation. The case study from Niger provides one example of Plan’s work with communities, as well as government and civil society groups, to develop a more holistic approach to understanding the causes and consequences of early marriage.

**“The community school will help me
achieve my dream of being a doctor.
When I become a doctor I will help and
support the poor people in my
community”**

12 year-old girl, Egypt

Niger

Early marriage in Niger is just one component of a wider female-hostile environment. Niger has the world's highest maternal mortality, the lowest female literacy and the highest fertility rate. Women have little voice in the decision-making processes of the country and there is no legal framework for protecting them and their children.

It was imperative, therefore, for Plan to gain a better understanding of this complex situation in order to devise the best means to address it. A working group including government officials and religious leaders was established and a local partner, PECDI (Protection de l'enfance en circonstance difficile), was selected to work with Plan.

An in-depth survey of the causes and consequences of early marriage was undertaken in 36 villages in the rural Dosso area of Niger. This found that 68 per cent of girls were married before their first menstruation, 52 per cent had a child before they reached the age of 16 and 49 per cent experienced complications during their first pregnancy.

Despite this, those interviewed (women, men and girls) regarded early marriage as socially, economically and traditionally acceptable. Early marriage was seen as a means to protect a girl's virginity and ensuring social acceptance. The girls interviewed saw it as a way of emancipating from their family.

Early marriage was also linked to the economic necessity of young males migrating to neighbouring countries for work. Popularly known as Exodes, these young men return to Dosso for the rainy season to help their families with the crops. Early marriage was seen by the families as a way to guarantee their regular return and by the girls as a way of ensuring a better economic future.

Equally, while some of those interviewed did not believe tradition played as important a role as it once had, the men considered early marriage as a way of ensuring the honourable image of their family. It was also considered a way of ensuring control over girls and was mentioned as a means to punish rebel daughters. Some of the women, too, adhered to the traditional belief that a child born to a very young woman would be stronger, fiercer and more resilient.

Plan is therefore working with prominent religious leaders to sensitise the communities to the dangers of early pregnancy. At the same time, Plan works with government and civil society groups towards establishing a code to protect the legal rights of children, including the right of girls to remain in school and resist early marriage.



Education

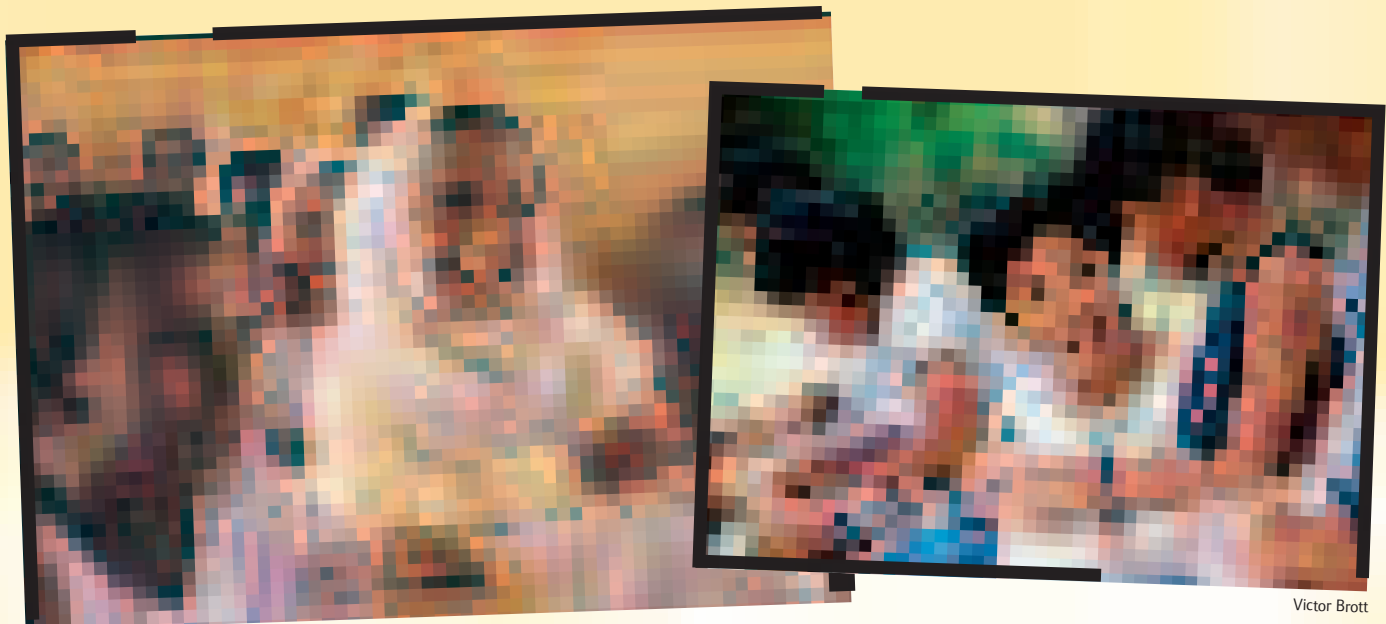
Of the 150 million children aged between six and 11 not in school, over 90 million are girls. On current trends, girls' enrolment levels in primary and secondary school will not catch up with boys until 2025, well beyond the 2015 target. This has profound implications for the achievement of the other Millennium Development Goals because girls' education has been singled out as a key factor for jump-starting progress on the entire development agenda for 2015, particularly in relation to reducing poverty, child mortality, HIV/AIDS and other diseases.

Why is it so hard to get and keep girls in school? In many countries, parents are unwilling to spend as much on a girl's education as on a boy's. As income falls, parents' willingness to educate daughters falls faster than their willingness to educate sons, particularly as many see little need for it when the daughter's role is perceived as wife and mother in the narrowest sense. Parents living in poverty rely more on girls for help at home, so schooling carries a cost in lost chore time. Parents are also more concerned about daughters' safety and adherence to traditions of seclusion and therefore pay more attention to the conditions under which their daughters are educated: the gender of the teacher, the distance to the school and the sanitation, security and seclusion of school buildings. As a result, demand for girls' education is relatively more fragile than that demand for boys' education.

As the case studies below illustrate, Plan is working to address the underlying causes of gender inequalities in education. This means taking a holistic approach to identifying and addressing attitudes and cultural practices that impact on girls' right to education. The case study from Sudan shows Plan's efforts to address early marriage as one practice that keeps girls from continuing their schooling. The example also demonstrates how Plan is working with the community to improve school environments in ways that address parent's concerns about girls' safety and modesty. Plan has recognised that the participation of parents in decisions about the education of their daughters is essential in building their confidence in its quality and acceptability. The Country Profile on Burkina Faso explores in greater detail Plan's efforts to engage communities in dialogue about attitudes and traditional practices that stand in the way of children's right to education.



Adam Hinton



Adam Hinton

Victor Brott

Sudan

Although enrolment rates in basic education improved during the mid-1990s, these have now fallen to 48 per cent, indicating that at least half the primary school-age children of Northern Sudan are not in school. Retention rates, too, are low. The Education for All survey of 2000 indicated that only half of those enrolled in primary school actually complete it. Both enrolment and retention are affected by low levels of educational achievement caused by poor quality basic education. There is a lack of trained teachers, learning materials and clean, healthy learning environments. In the vast majority of areas, more boys than girls are enrolled in school.

Boy children are traditionally selected over girls to attend school, particularly in rural areas where girls are needed for domestic duties. Girls were also the first victims of the government education policy by which, in 1993, free basic schooling was replaced by a school fee system. At the same time, the prevalence of early marriage, involving girls as young as 12 or 13, means that girls are missing out on an education. Early marriage is one of the main reasons for the high drop-out rate among primary school girls, which is as high as 82 per cent of girls dropping out by 5th grade in Kassala. The literacy rate for girls over the age of 15 in Northern Sudan is just 37 per cent, against 62 per cent for boys.

Plan has been working to raise awareness among communities of the importance of, and basic right to, an education for girls while at the same time working to improve the education available. Training pre-school and primary school teachers, improving the school environments and supplying learning materials have therefore been balanced by awareness-raising campaigns within communities. Equally important is Plan's work to advocate against early marriage by raising awareness of its consequences among community leaders, who make the decisions about marriage.

In partnership with the Ministry of Education, Plan has also worked with children, supporting them in their efforts to raise awareness of their right to an education through plays, radio and television broadcasts and messages from tribal leaders. "I was proud when [Plan] asked me to address my tribe about the importance of girls' education on the radio," said one tribal leader. "I felt empowered and my people have started talking about this important issue."



Victor Brott

Burkina Faso

In Burkina Faso, there are significant gender disparities in areas like health, education, participation in economic and political processes. Girls are also suffering from harmful traditional practices such as early/forced marriage and female genital cutting. Between 1985 and 2002, it was estimated that the maternal mortality rate was 480 per 100,000 live births. This is partly contributed to by certain dietary taboos that prevent pregnant women from having a nutritious diet. In December 2003, the CEDAW committee expressed concerns about the prevalence of discriminatory traditions and customs that emphasise stereotypes and resist all change. These practices and beliefs derive from an overwhelmingly rural population with low levels of literacy (only 12.8 per cent of adults are literate) and contributing to the delay in the advancement of girls and women.

The implementation of the rights of the child is still hampered by meagre national and international financial resources and by shortcomings in legislation. The major obstacles are poverty, social and cultural inertia and insufficient awareness and behaviour change campaigns on the Convention on the Rights of the Child. The latter is also affected by the fact that near 60 languages are spoken in Burkina Faso. Only limited efforts have been made to register all newborn children and there are difficulties in obtaining a birth certificate. In 1997, the government established a Children's Parliament with the aim of greater involvement of children in matters affecting them, lobbying and advocacy for children's rights and building democratic values and competencies. In particular, they focus their efforts on awareness-raising and advocacy on issues like HIV/AIDS, child trafficking, female genital cutting, girls' education and achieving universal birth registration.

The government has also established a permanent body to follow-up and evaluate progress in the National Plan of Action for Children, although there remain concerns about the lack of human and financial resources to implement it. A new Penal Code prohibits female genital cutting.

There are still incompatibilities between the achievement of women's rights and statutory law. There are no legal provisions to protect women from domestic violence and the Act on agrarian and land reform is yet to be fully implemented. This means that women are still not able to own land.

While school enrolment is increasing, there remain substantial disparities between boys and girls. Equally, a high number of girls drop out of school, particularly at the primary stage.

Plan has concentrated its efforts on ensuring that all children have access to and receive quality education. This not only includes activities for formal and non-formal education but also seeks to address health issues (malaria, diarrhoea, immunisation, maternal health and so on), water and sanitation, children affected by HIV/AIDS and, to some extent, food security – all of which impact on children's ability to attend school.

Among a range of initiatives to promote child rights have been the 'I am a child but I have my rights too' radio campaign and the teaching of child rights in school. Both these projects have focused on issues such as education for all, gender, girls' education, freedom of expression and association, protection against early/forced marriage, HIV/AIDS, female genital cutting, protection against violence and protection against economic exploitation. Children exposed to both projects now have a high level of knowledge about their rights and obligations, and why knowledge of this is important. Many are discussing what they know with parents and family elders.

According to a mid-term evaluation of the program, there has been a considerable increase in primary school continuation/retention, particularly for girls. Completion rates for primary school have also increased. The increase for girls was more modest than for boys but the overall rates still remain higher than the average national level. Boys in general still have a better knowledge of participation issues and are more involved in Plan's activities. As a result, more emphasis will be put on sensitising parents, awareness raising and the empowerment of communities.

The process of changing attitudes and traditional beliefs takes time and commitment but Plan is already seeing positive developments. Policy guidelines specific to Burkina Faso on child rights and gender are currently being developed to move this work forward.

“When we are in our mother's womb, you nurture us and pray for our well being. Yet, once we are born you forget that we need our childhood to develop to our full potential. You force us into the world of work even before we have stopped growing. What kind of parental love is that nurtures the seed only to destroy it while it is still a bud?”

India, 2004

Microfinance

Many societies have institutions and practices that limit women's access to land, financial services and employment in the formal sector. Women are often denied rights to land, even when they are its primary users, and therefore are often unable to use land as collateral for credit, which has profound implications for their livelihood strategies. In some countries, they are also denied the right to inherit, which has implications for their ability to support their children. At the same time, mobility issues and access to information and training limit the chances for women and girls to improve their livelihoods.

One way Plan is working to address these issues is through the support of microfinance programs. After nine years working in microfinance Plan has developed a considerable base of knowledge about delivering sustainable microfinance through partnerships. The positive impacts of microfinance on women's economic and social empowerment are well known, as are the benefits to their children's health and education. Microfinance initiatives in Plan are increasingly supporting more integrative approaches to programing, for example including education, reproductive health, HIV/AIDs, and empowerment components.



Adam Hinton

Togo

In Togo, 51 per cent of the poor and extremely poor people are women in both rural and urban areas. Significantly, women produce 90 per cent of the foodstuff needed for subsistence. In Plan intervention areas, the per capita income is lower than the extreme poverty line (US\$71). Women play a crucial role in the socioeconomic life. Local markets remain the privileged spots for their trade. They are exposed to various weather conditions including scorching heat, storm, rain, fire, dust. These conditions significantly undermine the trading activities in the communities.

Plan's livelihood microfinance and credit initiatives project in Togo in partnership with FUCEC-Togo (a microfinance institution) are designed to assist this community to improve their standard of living. Major interventions in this sector are:

- support in designing and implementing a tailor-made loan scheme for poor rural women
- integrating a health and management skills training component into the loan scheme to enable rural women and communities to effectively deal with key nutrition, health, reproductive health issues
- providing institutional support to the local counterparts

The communities involved in Plan initiatives supplied local materials, labour and participated in monitoring the project. The program has reached more than 8,000 rural women. What has the impact been? Most important is that women report strengthened self-esteem and increased economic power within their communities. At the same time, they have developed capacity for working collectively with other women to increase their incomes. The education component of this program helped rural women acquire small business management skills and helped improve health practices. Microfinance has also contributed to preventing thousands of women from abandoning their households to go abroad in search of other subsistence opportunities. It has also had a positive impact on the situation of children, as women used part of their income for their children's education, health and improved housing. In future Plan Togo will develop additional models to integrate education in HIV awareness and prevention, as well as malaria prevention and management, rehabilitation of victimised children, social reintegration and vocational training.

Water and environmental sanitation

Over two million children die each year from diseases that result from poor quality drinking water and inadequate sanitary facilities. In many communities, women are the primary managers and users of water for domestic consumption and are responsible for family health and hygiene. Women and girls often walk long distances to collect water, which limits the time they have to engage in income-earning strategies for family survival, and keeps girls out of school. While women and girls have a vested interest in the accessible safe water and hygienic sanitation systems, existing power relations, social norms and mobility mean that women and girls are often not consulted in planning community water systems and sanitation.

Plan is aware that much can be done to improve the gender-sensitivity of its water and sanitation programs. The case study from Tanzania illustrates the importance Plan attaches to improving the representation of women and children in decision-making processes and other activities connected with its water and sanitation projects. Plan has recently developed a set of gender guidelines for water and sanitation which will support staff in working with communities to ensure that gender issues are addressed throughout the planning cycle.

Tanzania

While Tanzanian women and girls are expected to undertake the majority of the direct roles related to water and sanitation, such as fetching water supplies and cleaning water/sanitation facilities, they are not included in the community decision-making processes for areas such as the location of boreholes, latrines and other facilities. At the same time, any related income-generating activities like caretaking or guarding the facilities, are assigned only to male members of the community. The situation is made worse by the fact that vulnerable groups such as children, elderly people and people with disabilities are also excluded.

Plan is encouraging a more equal distribution of roles. Communities, for example, have been supplied with handcarts, which men are comfortable using to fetch water rather than carrying containers on their shoulders or heads. “Women can now participate in other activities as the workload of collecting water has been reduced,” said one mother from Ifakara. “We now have an opportunity to attend community meetings and participate in development projects.”

Plan has been working to redress the unequal or inadequate representation of different groups in the community by ensuring that all water committees have an equal representation of men and women. Children are also consulted and encouraged to participate either individually or in groups, and women are encouraged to compete for leading committee roles, such as treasurer, secretary or chair. Communities are also being encouraged to include an equal representation of women and men in any training activities. The participation of different groups in a community helps to ensure that project benefits are maximised and that projects are more efficient and sustainable.

Community awareness raising on gender equality

Many of the case studies have illustrated the importance Plan attaches to working with communities to raise awareness about child rights and gender equality. This means working closely with the community through participatory processes to identify what the key gender issues are in that local context, to identify the key stakeholders and allies in promoting changes in attitudes and practices, and to put in place appropriate systems and networks to support ongoing change processes. The country profiles on Paraguay and Egypt provide two further examples of the way Plan engages communities in processes that support changes in attitudes and cultural practices that are seen to be obstacles to gender equality and women's rights.

Paraguay

Education systems within the country continue to perpetuate discrimination against women and girls, and illiteracy rates for women are noticeably higher than for men. When broken down by reason, drop-out rates also reflect the traditional assignment of role between girls and boys. Almost two-thirds of boys leave for 'economic reasons' compared to half of girls, reflecting the male role as 'provider', but the rates change to four per cent and 12 per cent respectively 'to take care of household jobs'.

While increasing numbers of women are incorporated in the labour market, women's unemployment is still double that of men's and women continue to earn about a third less than their male counterparts. Paraguay also has one of the highest maternal mortality rates in Latin America.

Poverty and the depletion of natural resources mean that many men are migrating to find work, leaving the women in charge of the family and its subsistence. The number of female-headed households, for example, rose from 19 per cent in 1986 to over 25 per cent in 2001.



Adam Hinton



Adam Hinton

In 2000, Plan began an awareness-raising campaign among its own staff and the communities where it works to reduce negative discrimination against women. The initiatives aim to reduce inequities by empowering people to become active citizens with rights and responsibilities. Plan's approach in Paraguay is in five stages, three of which have already been undertaken:

1. Workshops, focus groups and interviews involving community leaders, teachers, women, men, girls and boys are used to identify the situation in a community and the motivation for change. To date, these have shown a real interest in seeking ways of sharing and establishing relationships based on solidarity, cooperation and affection, and an excellent predisposition to acquiring new knowledge. Participants recognise that the family transmits values, beliefs and prejudices, which are then reproduced in schools.
2. Workshops are held to raise awareness of the importance of gender equality in relationships, following which participants put together an action plan of what can be done within the family and wider community. Over 100 communities have taken part to date and 188 workshops have been held with teachers and community leaders, who even requested more training in order to gain a deeper understanding of the topics addressed. "The first inequalities occur in the bosom of the family," said one male community leader following a workshop. "This is why we should encourage change in our own family and teach our neighbourhoods by our own example." Teachers have proved more resistant in terms of challenging their ingrained prejudices but some success is being achieved. "At first I told my colleagues this is a silly thing and I even tried to make the realisation of workshops difficult," explained one teacher. "Now I recognise that it is important and it has generated changes in me that I did not expect."
3. Action plans aimed at promoting behaviour change among community members of all ages and levels are implemented. This phase is closely monitored and reinforcing workshops are held to share experiences and raise issues that have emerged.
4. The establishment of formal gender equality groups within communities, districts and departments to promote a major overview of gender equality at community leadership level. Each organisation will determine its operation, scope, objectives and timescales.
5. Impact evaluation, the results of which will be used by the community to keep moving towards achieving gender equality within the cultural context of the country.

Positive changes can already be seen in different areas. For example:

- more school government presidents are girls
- school snacks are now distributed equally to boys and girls where previously boys were favoured
- within classrooms, boys and girls are now placed at their desks at random where it used to be boys at the front and girls at the back
- women are included in project design and implementation and have the opportunity to express their needs, to be listened to, to be valued and to develop their potential
- parents are more committed to change practices and behaviours that discriminate against their daughters or sons

Egypt

Gender inequality is an important problem facing Egyptian society, especially in rural areas, a problem that is rooted in the male-dominated culture. The socialisation process and how young boys and girls are brought up exacerbate the problem and make any solution more difficult. Many children are raised to believe that women are inferior to men and should not have the same rights. Gender stereotyping and the gender division of labour are often supported through the family, the school and the media. Some films still portray women as inferior to men and emphasise that their role in life is to give birth and to be housewives.

Some families in Egypt give their sons more food, better health care, more education, more attention and even more affection. They might deprive their daughters of both these and sometimes of their inheritance and their right to accept or refuse their future husbands. Girls are also burdened with a lot of household chores even from an early age, and are expected to serve their brothers.

The result is that fewer girls enrol in school and too many of those fail to complete it, especially in rural areas. Early marriage and early motherhood result in poor reproductive health, particularly as many women do not receive quality pre- and post-natal care. The practice of female genital cutting remains a significant problem, as is the fact that sexually transmitted diseases are considered a taboo subject and are rarely discussed. Equally important is the fact that the discrimination against women leaves little opportunity for them to participate in the decision-making processes at any level. Most mothers and female care-givers in the areas where Plan is working are housewives who do not have any economic resources of their own. Their representation on the boards of local community-based organisations is very limited and they do not effectively participate in the development of their communities.

Plan's approach to confront gender inequality is increasingly moving from being a stand-alone project to one that is integrated within all programs undertaken with communities. Plan has worked hard to raise awareness of gender issues in the country. Many orientation sessions were held in communities and had a real impact on the participants, including young people. "Before attending the training on gender, I did not used to help my sister with the house chores," said one 14 year-old boy. "She had to make food, fix tea and clean the house. But now, my awareness is raised. I give a hand. I have learned that there is no difference between girls and boys except from the biological perspective."

Five community schools have been established to support out-of-school girls to return to mainstream education, while literacy classes were also supported. The community schools are now fully managed by the community and some of the girls have returned to mainstream school. Health-related projects have included those to ensure that women receive the necessary pre- and post-natal care, and that traditional birth attendants are trained in safe deliveries. Women have also been given the opportunity to undergo vocational training and offered loans to start small-scale income-generating projects.

Concluding remarks

It is clear from this publication that there is a growing understanding within Plan that gender discrimination is an underlying cause of child poverty and that it cannot achieve its Vision and Mission unless this problem is addressed.

Plan recognises that until gender equality is achieved, girls will continue to have unequal life chances and be denied basic human rights, access to resources and decision-making power. By working to promote gender equality and women's rights, Plan can have a profound impact on the survival, development and empowerment of girls and boys at every stage of the life-cycle. At the same time, Plan acknowledges that efforts to promote equality and rights for women by involving men and boys will have positive benefits for children and their communities.

The last few years have seen Plan put considerable effort into integrating gender equality across the organisation, both internally, through raising awareness of staff, encouraging debate and addressing issues related to organisational culture and externally, through guiding staff in analysing the causes and effects of gender discrimination as part of all program/project planning. The Gender Audit will support the identification of gaps that need to be filled.

We believe that the many initiatives described in this publication will help Plan build on its achievements so far, and generate momentum for taking the organisation further in implementing its commitments to gender equality.



Adam Hinton



Adam Hinton

“Children don’t even know that they have rights here, in every child there is a sleeping capacity to express him or herself – they just need help to get it out.”

Senegalese girl, 14 years old

Annexes

Annex 1

Child centred community development approach

Plan works in close cooperation with communities to make lasting improvements in the quality of life of children. Plan's approach to development is based on strengthening the capacity of communities, families and children so that they can become more active citizens, capable of meeting their own development needs through social participation. This rights-based approach is called child centred community development.

Child centred community development enables Plan to assist children, their families and communities to work together to address the structural causes of child poverty that affect them at local, national and international levels. Through this approach, Plan's role is as facilitator and ownership of programs belongs to the communities. Therefore, it is the communities rather than Plan that identify, design, implement and monitor programs.

The foundations of child centred community development are:

- rights and principles: all people have equal rights to participate in society and to access opportunities that strengthen their capacity to reach their potential. Plan's program principles (gender equity, empowerment and sustainability, integration, environmental sustainability, cooperation, institutional learning) are central to child centred community development
- civil society: children, families and communities living in poverty can mobilise their resources and capacity to raise their issues with local and national governments. Participatory democracy can promote public good at the community level and can limit abuses of concentrated power by promoting accountability
- scaling up: while the symptoms of poverty are felt most strongly at the local level, the causes are often at the national and global levels. Poverty alleviation can work only if problems are addressed at all levels. Scaling up is about creating an enabling environment where innovative activities in one community serve as a model for wider replication. The success of scaling up depends on its acceptance by mainstream institutions

The fundamental components of child centred community development are:

- child centred programing: children are active participants in the development process rather than passive recipients of assistance. Failing to work with children risks misunderstanding their key issues, concerns, needs and demands and therefore implementing programs that fail to tackle the root causes of child poverty. Children must play an active role in all stages of the program cycle with due respect to local cultural and social norms and their capacity and abilities
- facilitating participatory processes: children, their families and communities must work together throughout the program cycle with development agencies that facilitate their access to social services, such as health and educational facilities, to find sustainable solutions to the problems they face. Development programs need to be established on local knowledge and practices to ensure that they are culturally acceptable and should concentrate on building the capacity of communities to ensure that they can become sustainable
- partnership and networking: child centred community development provides a framework for establishing partnerships and creating networks. It is based on the assumption that relationships between institutions can create a more powerful platform to influence policy and transform institutional structures to be more pro-poor, participatory and child-friendly. Institutions can combine their resources, experience and knowledge to work together to address concerns expressed at a community level
- supporting groups and organisations: the voices and concerns of people living in poverty are not normally heard in decision-making processes. The capacity of children and adults living in poverty to influence decisions and improve their circumstances is enhanced by forming their own organisations in which they can work together and speak with a common voice. One of Plan's key roles is to strengthen collective action and community solidarity by strengthening the capacity of the community-based organisations (CBOs) to operate at all levels. In this way, Plan facilitates the promotion of democratic civil society to increase a community's influence on service provision

“Although I am 12 years old now, I was able to join the community school, the school is near my home, I have a female teacher, and the school is free of charge, so my father did not have any excuse to prevent me from continuing my education.”

Maroa, 12 years old, Egypt

Annex 2

Gender equality protocol

Rationale

Plan believes that gender equality is central to achieving its Vision and Mission. Boys and girls have the same rights but face many different obstacles in accessing these rights as a result of their gender. Through our daily work, we see the negative impacts on boys and girls of gender-based discrimination, gender power relations and the denial of women's rights. The protocol on gender equality reflects Plan's awareness that, more than ten years on from our first attempts to address gender-based inequalities through Gender Equity Principle (1995), we must reaffirm and strengthen our efforts to promote gender equality.

The Goal

Plan actively promotes and practices gender equality in order for children to realise their full potential.

Definition of gender equity and gender equality

Gender equity is the process of being fair to women and men, girls and boys. To ensure fairness, measures must often be available to compensate for historical and social disadvantages that prevent women and men, girls and boys, from otherwise operating on a level playing field. Equity leads to equality.

Gender equality means that women and men, girls and boys, enjoy the same status. Gender equality means that women and men, girls and boys, have equal conditions for realising their full human rights and potential to contribute to national, political, economic, social and cultural development, and to benefit from the results. Gender equality is therefore the equal valuing by society of both the similarities and differences between women and men, girls and boys, and the varying roles that they play.

Adapted from Gender-Based Analysis: A Guide for Policy-Makers, Status of Women Canada, 1996.

Objectives

- All programs address gender discrimination
- Equal participation of women and men, girls and boys, in activities and decision-making processes that affect their lives
- An organisational culture that promotes and practices gender equality



Principles

- Our work at all levels in the organisation will be based on a common understanding that there is a strong linkage between gender equality and child rights
- We will be sensitive to cultural differences but will neither tolerate nor perpetuate practices that result in gender-based discrimination
- We will engage men and boys as well as women and girls to challenge gender power relations and promote gender equality
- We will challenge all forms of gender-based violence wherever they occur
- We will treat other organisations' commitment to gender equality as a major consideration when exploring and forming partnerships and alliances

Strategies

- We will provide guidance, tools and indicators to shape the way we analyse, plan, implement and evaluate our work from a gender perspective
- We will build skills, knowledge and behaviours that facilitate gender-sensitive participatory programming and practice
- We will partner, ally and build relationships with groups that share our commitment to gender equality, and influence change in groups that do not yet share our commitment
- We will emphasise the link between gender equality and child rights in our campaigning, advocacy and communications work
- We will develop and implement human resources policies, procedures and practices that set examples of gender equality
- We will commit appropriate human and financial resources to implement the gender equality protocol

Accountability

- The Chief Executive Officer (CEO) is responsible for the implementation of the gender equality protocol across the organisation
- The CEO should report annually to the Board on progress towards implementation of the gender equality protocol
- Regional Directors, National Directors, Country Directors and Departmental Directors at International Headquarters will ensure the implementation of the gender equality protocol within their areas of responsibility

Annex 3

Abbreviations and glossary of terms

Abbreviations

ARO: Asia Regional Office	ROA: Region of America
CMT: Country Management Team	RGS: Regional Group Survey
GE: Gender Equality	RMT: Regional Management Team
GTF: Gender Task Force	SRH: Sexual Reproductive Health
IMT: International Management Team	WARO: West Africa Regional Office
RESA: Region of East and South Africa	

Glossary of terms

Empowerment: is about people – both women (girls) and men (boys) – taking control over their lives: setting their own agendas, gaining skills, building self-confidence, solving problems and developing self-reliance. No one can empower another: only the individual can empower herself or himself to make choices or to speak out. Plan can support processes that can nurture self-empowerment of individuals and groups.

Gender: the roles and responsibilities of women (girls) and men (boys) that are created in families, societies and cultures. It includes the expectations held about the characteristics, aptitudes and behaviours of both women and men (femininity and masculinity).

Gender discrimination: any distinction, exclusion or preference based on sex that has the effect of nullifying or impairing equality of opportunity and treatment.

Gender equity: is the process of being fair to women and men, girls and boys. To ensure fairness, measures must often be available to compensate for historical and social disadvantages that prevent women and men, boys and girls from otherwise operating on a level playing field. Equity leads to equality.

Gender equality: means that women and men, girls and boys enjoy the same status. Gender equality means that women and men, girls and boys have equal conditions for realising their full human rights and potential to contribute to national, political, economic, social and cultural development, and to benefit from the results. Gender equality is therefore the equal valuing by society of both the similarities and differences between women and men, girls and boys, and the varying roles that they play.

Gender mainstreaming: the process of assessing the implications for women/men and girls/boys of any planned action, including legislation, making women/men/girls/boys concerns and experiences integral dimensions in the design, implementation, monitoring and evaluation of policies and program in all political, economic and social spheres so that women/men/girls/boys benefit equally and inequality is not perpetuated.



Adam Hinton

Gender

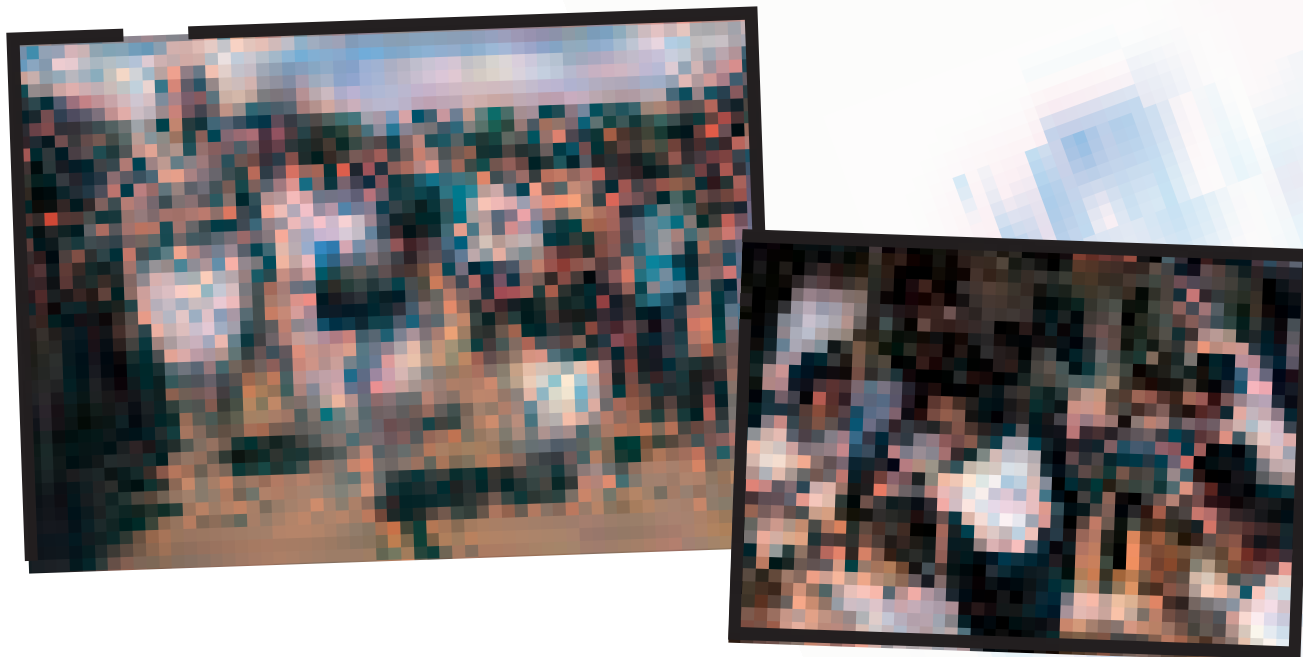
relations: ways in which a culture or society defines rights, responsibilities and identities of men/boys/women/girls in relation to one another.

Annex 4

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“We often use politically correct language but many do not understand the issues and the implications to our work. This contributes to a high level of resistance/ambivalence/denial and weak follow-through. It is our challenge to help people understand what gender equality is, why it is important, provide guidance on how to put it into practice and insist that as an organisation and individuals we become accountable.”

Plan staff, 2004

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