Integrating Gender

Communication for Health recognizes the importance of addressing the impact of gender inequity on health behaviors. The literature review that informed the project design in the initial stages and the baseline survey both included a gender perspective. The findings of these studies are being used to design interventions that meaningfully address gender-related determinants of health behaviors in Ethiopia pertaining to MNCH, malaria, TB, WASH, nutrition, and PMTCT.

Findings of the literature review highlight gender as a crosscutting determinant of multiple health behaviors in Ethiopia. The baseline survey shows that gender inequitable norms were found to adversely impact 10 out of the 16 health behaviors the project promotes in the four project regions. Inequitable gender norms such as low decision-making power of women in the household, heavy workload, and partner violence continue to affect health behaviors at the household level and beyond. In light of these findings, Communication for Health has been addressing gender issues through its SBCC interventions, developing a step by step guide to integrating gender in SBCC activities, and organizing capacity strengthening training focused on gender.

Within the socio ecological framework, gender issues continue to be mindfully raised and integrated with health messages. For instance, the project’s edutainment radio program is challenging inequitable gender norms by using gender inclusive language, changing the narrative of women, promoting involvement of men and highlighting the health and socio-economic benefits of equitable behaviors to both men and women. Social mobilization activities are being implemented whereby men and religious leaders engage in dialogue around harmful gender norms and their health impact.

The integration approach also provides training and tools for SBCC practitioners, media professionals and program implementers to create an environment where gender inequitable behaviors are continuously identified and challenged. These tools and training are aimed to stimulate personal reflection around gender and how it may impact health and to introduce techniques and practical tools for designing and implementing gender transformative SBCC programs. The first round of training was given at Federal level, and included participants from the Women and Youth Directorate of the FMOH, gender experts from RHBs, Communication for Health regional and central staff and other partner organizations working on SBCC. Communication for Health plans to conduct similar sessions for health practitioners in the regions, emphasizing the need to understand health behaviors through a gender lens and to find practical ways of addressing barriers based on the context and at different levels of a program cycle.

These gender integration strategies strive to make an impact at the household, social, and environmental levels by empowering women, involving men, mobilizing communities, and strengthening organizational capacities for lasting health behavior change in Ethiopia.