GENDER

Harmful gender norms inhibit women, girls, men and boys from accessing and using health information and services. Gender inequality contributes to preventable deaths and illness in women and men throughout the life course.

Gender inequality also hinders the use of contraceptive methods and women’s ability to decide if, when and how often to become pregnant; the ability to deliver safely in a facility or with a skilled birth attendant; and the ability to take a child to health services. Additionally, health services often exclude men, unmarried clients, adolescents and lesbian, gay, bisexual, transgender and intersex clients due to discriminatory gender attitudes among providers. Survivors of gender-based violence (GBV) lack access to timely, appropriate care, particularly HIV and pregnancy prevention, as well as empathetic counseling and referrals.

When women are empowered to make decisions about their bodies and their futures, studies show they and their families are healthier, happier and more prosperous. USAID’s flagship Maternal and Child Survival Program (MCSP) works to mitigate gender inequalities that act as barriers to optimal health outcomes for women and girls: lack of women’s knowledge, choice and decision-making power; GBV and other discriminatory treatment; limited male engagement in reproductive, maternal, newborn, child and adolescent health (RMNCAH); mistreatment during services; and negative gender attitudes faced by health workers themselves that impact service quality.

KEY FACTS

- 214 million women of reproductive age in developing countries who want to avoid pregnancy are not using a modern contraceptive method. (WHO)
- Research shows that women’s empowerment has strong associations with maternal and child health outcomes such as antenatal care, skilled attendance at birth, contraceptive use, child mortality, full vaccination, nutritional status and exposure to violence. (Pratley, P.)
- Girls ages 10-14 are five times more likely to die in pregnancy or childbirth than women aged 20-24. (UNICEF)
- Pregnancy-related deaths are the leading cause of mortality for 15-19 year-old girls worldwide. (WHO)
MCSP works with health providers and facilities to ensure that all people can avail of health care services that guarantee equal access to respectful care for clients of any gender and age, ensuring accessibility, privacy and confidentiality, respectful and informative provider-client interaction, and appropriate infrastructure and commodities. Gender-sensitive services ensure that clients receive the highest quality of care, where they can access services equally; be empowered to make full, free, and informed choices about their health care; participate fully in decision-making about their own health; and be given the opportunity to include their partners and families if they choose to do so.

MCSP addresses gender through four technical approaches:

1. **Addressing GBV:**
   MCSP works to prevent GBV, identify survivors and link them to care, and strengthen post-GBV services.

2. **Male Engagement and Couples’ Decision-Making:**
   MCSP is actively engaging men and promoting healthy decision-making among couples in RMNCAH services.

3. **Ensuring Gender-Sensitive, Respectful Services:**
   The Program works to ensure equal access to high-quality services for clients of any gender.

4. **Promoting Gender-Equity in the Health Workforce:**
   MCSP empowers female health students and workers to overcome gender discrimination in the workplace and educational settings.