



AFGHANISTAN RECONSTRUCTION TRUST FUND (ARTF)

Gender Working Group Meeting

Tuesday, March 6, 2018

Summary of Discussions

An ARTF Gender Working Group (GWG) Meeting was held on March 6, 2018, and was attended by 9 donor country representatives¹, the Ministry of Public Health (MOPH), the Ministry of Women's Affairs (MOWA), and the ARTF Administrator (the World Bank). The meeting was co-chaired by the World Bank, and Canada.

Discussion

1. **Remarks by World Bank (WB) Social Development (SD) Practice Manager for South Asia.** The meeting opened with remarks from Mr. David Warren, the SD Practice Manager. Main points: the areas that the SD Unit covers including gender, safeguards, citizen's engagement, community driven development (CDD), and displacement. The SD Unit's focus on gender is to help the entire WB portfolio to better bring in gender dimensions through instruments such as regional gender action plans, and integration of the WB Group gender strategy into country gender action plans. Each country unit, including Afghanistan has a team of specialists to work with WB technical teams to bring a deeper focus on gender, and undertake analytic work on certain aspects through country Gender and Social Inclusion Platforms. Clarified that analytic work done in each country under these platforms could be shared with external partners, for instance on female labour participation, and in some cases, could be done in conjunction with external partners.
2. **Briefing on gender aspects of the proposed Sehatmandi Project.** The Senior Technical Advisor for the SEHAT Coordination Unit at the MOPH presented the main aspects of the proposed Sehatmandi Project, the successor to the current SEHAT Project. The Sehatmandi Project is expected to be approved later this month, with implementation to start in July.
 - Main aspects presented: progress made on health indicators especially on the maternal child health, and nutrition indicators- significant decline in the under-five mortality rate, decline in the maternal mortality rate; increase in health facility utilization, and increase in number of health facilities with at least one female health worker. Noted that ensuring adequate number of female health workers remains a challenge for the MOPH, and is an area that requires support from development partners. Issues highlighted in the 2015 Demographic and Health Survey include low female literacy at 15%, and 49% of females aged 15-49 reporting experiencing gender-based violence.

¹ Australia, Canada, Denmark, EU, Finland, Italy, Sweden, UK, and US.



- Major health sector development challenges that were highlighted at the 2017 Presidential Summit on Health: (i) inefficient use of resources; (ii) inequities in access to services (gender and geographical); (iii) quality of care; and (iv) low community engagement. The Sehatmandi project is designed to address these challenges, with its main objective being to increase the utilization and quality of health, nutrition and family planning services. The project has 3 components- improving service delivery, strengthening the health system and its performance; strengthening demand and community accountability for key health services.
- The Sehatmandi Project will: (i) include a greater focus on service delivery innovations, and on performance management of the service providers and not just contract management; (ii) combine the Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS) in one contract for efficiency gains; (iii) pay increased attention to family planning and nutrition services through community engagement (close collaboration with the Citizens Charter Afghanistan Program[CCAP]); (iv) aim to address tertiary health care governance challenges; and (v) increase the focus on the independent third party monitoring and verification.
- Project interventions to address gender challenges include: expanded coverage through establishment of additional primary health care facilities in remote areas; ensuring health facilities are functional and results/quality of services provided; better coordination of various programs to improve the response to gender based violence. The project would also aim to scale up demand side interventions such as conditional cash transfers, provide more mini ambulances to improve patient referrals, and to make better use of the existing 25,000 community health workers in service provision.
- The MOPH will take advantage of Afghanistan joining the Global Financing Facility to improve reproductive/adolescent health services. The project will also work on improving the distribution and availability of health workers, especially females, and mainstreaming the health sector's response to gender based violence (GBV) in its BPHS and EPHS packages. Key results indicators of the project include: (i) outpatient visits per capita to public facilities by gender; (ii) skilled birth attendance of deliveries; (iii) Penta3 vaccination coverage; (iv) contraceptive prevalence rate; exclusive breastfeeding among children under 6.
- To enhance the effectiveness of project implementation, analytic work looking at various aspects of the health sector will also be done in conjunction with the World Bank health team.
- Discussion: how does the MOPH see the coordination with the private sector in service delivery; how will the program refer GBV cases to the formal legal system. The MOPH responded that the Sehatmandi project would not directly support the private sector, however the planned analytic work would consider the question of how to better work with private providers to improve service delivery.
- GBV: The MOPH plans to work closely with communities/other providers working on GBV to ensure that victims of violence get care, including working closely with the Ministry of Women Affairs. The MOPH provided details of their ongoing programs to respond to GBV. The MOPH is currently trying to integrate the health response to GBV services into the BPHS and EPHS packages. The exposure visit to Sri Lanka organized by the Bank provided them with an opportunity to share knowledge and experiences on



GBV with Sri Lankan health counterparts and realize that the family protection centres established in provincial hospitals and in Kabul are offering advanced services to GBV survivors. The MOPH will share the report from their recent exposure visit to Sri Lanka on the health sector response to GBV if requested by the GWG.

- Question on how the issue of access to services will be addressed in the project. MOPH noted that the introduction of interventions to minimise demand side barriers to care will be piloted, and there will be communication and awareness raising efforts to increase community knowledge on health services, as well as establishment of small primary health clinics in remote areas. The EU noted the importance of ensuring close coordination between the Sehatmandi Project and other national priority programs. MOPH commented that they are closely working with the CCAP team including on citizen community scorecards, and on the health sector balanced scorecard, and that they are a member of the Women's Economic Empowerment (WEE) NPP steering committee.
- Some concerns were raised on the potentially negative repercussions on GBV survivors if their cases are referred to the legal system. The MOPH confirmed that they take these issues into account by fully ensuring the confidentiality of documents and identity of the survivors. Their priority is providing adequate health response to the survivors, with legal referral done only if the survivor wants to and they sign a consent form.

3. **Brainstorming about topics for the GWG meetings in the first half of the year.**

Topics for discussion at the GWG meetings until June were discussed. Canada requested for the GWG meeting plans to be synchronised with the calendar for implementation support visits, and for project documents to be shared early in the project preparation cycle. Finland requested to include the ARTF Steering Committee as a point for discussion in April. It was agreed that the CCAP and gender would be the topic of discussion for May, and that the GWG members would plan to join consultations that will be held in the next few weeks on the new Incentive Program Plus (IP Plus); the EZ-K Project (addressing migration and returnees) would be discussed in July; and that a discussion of the WEE-rural development program would be a priority topic in the next few months. The agreed discussion topics are attached to these minutes.

- ### 4. **Points to be raised at the March ARTF Strategy Group Meeting.** It was agreed that the following points would be raised at the March 21st ARTF Strategy Group meeting: (i) update on the agreed GWG meeting schedule for the next 6 months; (ii) inform the SG that GWG members have been encouraged to attend the IP Plus discussions over the next few weeks, and to ensure there is coordination among the donor partner teams in participating in the discussions.

5. **AOB**

- The GWG was reminded to: (i) confirm current contact information for their agencies with the World Bank; (ii) share their comments on the draft IP Plus Matrix with the Bank team; (iii) send comments on the TAGHIR concept note by March 15th; (iv) attend the CCAP donor briefing session planned for March 10.



- It was agreed that the minutes of the previous GWG meeting would be circulated with the meeting invitation for each month.



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Gender Working Group Meeting Schedule

January - July 2018²

Timing	Topic	Format
9 January 2018	<ul style="list-style-type: none"> Strengthening the Role of the GWG 	2-hour meeting
6 February 2018	<ul style="list-style-type: none"> World Bank Gender Tagging Gender in EQRA Project 	2-hour meeting
6 March 2018	<ul style="list-style-type: none"> Gender in the Sehatmandi Project Discussion Topics for 2018 GWG Meetings 	2-hour meeting
3 April 2018	<ul style="list-style-type: none"> ARTF Steering Committee Inputs Afghanistan Human Resource Management & Institutional Reform (TAGHIR) Program Extractives for Development Project 	2-hour meeting
1 May 2018	<ul style="list-style-type: none"> Gender in Citizens Charter Afghanistan Program 	2-hour meeting
5 June 2018	<ul style="list-style-type: none"> Dissemination of analytical work: jobs in Agriculture-Gender Note WEE-RDP Preparation WEE-NPP Implementation 	2-hour meeting
3 July 2018	<ul style="list-style-type: none"> Update from the government on operationalization of the anti-harassment policy 	2-hour meeting

² The ARTF GWG meets on the first Tuesday of every month.