

GENDER ACTION PLAN

Gender Objectives	Activities / Targets	Responsibilities	Timeframe
Outcome: Priority populations vaccinated against COVID-19 in congruence with routine immunization services and other health services.			
Human capital and social protection enhanced for all (OP 1.1)	By 2024 a. Additional 10.12 million people in target populations vaccinated or boosted against COVID-19, disaggregated by sex (2022 baseline: 17 million people boosted and vaccinated) (OP 1.1) DMF a.	MOH, executing and implementing agencies	Q4 2023
	b. At least 80% of respondents from marginalized groups, and at least 80% women surveyed by MOH (including findings collected through UNICEF and WHO activities) express satisfaction with COVID-19 vaccine access (1.1.4 below). (2022 baseline: not applicable)	MOH	Q4 2023
Output 1: COVID-19 vaccines deployed			
1.1 Gender equality in human development enhanced (OP 2.2)	1.1.1 Gender- and socially- inclusive guidelines on the deployment and administration of COVID-19 booster vaccines in the context of routine immunization, addressing the specific needs of women and girls, children, and other hard to reach groups, approved, budgeted and implemented ^a (2022 baseline: not applicable) (OP 2.2.2, 2.3.2) DMF 1b.	NIP	Q3 2022–Q4 2023
	1.1.2 Train the trainer curriculum developed and delivered (in line with 1.1.1 above) to key MOH staff, of whom at least 50% of trainers are women, to ensure equitable and inclusive vaccine delivery. (2022 baseline: not applicable)	NIP	Q3 2022–Q3 2022
	1.1.3 Develop and deliver at least one annual training program on equitable and inclusive routine immunization delivery with participation of at least 80% of key health personnel at the national level, provincial health departments and vaccination delivery facilities (implementing agencies). (2022 baseline: not applicable)	NIP	Q1 2023
	1.1.4 Develop a set of questions that support the MOH to assess and measure the breadth and inclusivity of the COVID-19 vaccine delivery through technical assistance to the Post Introduction Evaluation (PIE) and planned surveys on vaccine attitudes and perceptions by UNICEF and/or the Sub-commission Vaccine Safety and Risk Communication. (2022 baseline: not applicable)	MOH, NIP, UNICEF, WHO	Q2 2022–Q4 2023

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	1.1.5 Updated communications guidelines, plans, and messages with strategies and messages to increase COVID-19 booster vaccination uptake among marginalized and hard to reach groups, including women and girls. (2022 baseline: not applicable)	NIP, UNICEF	Q3–Q4 2022
	1.1.6 Develop and deploy an online module on self-care, mental health, and stress management for frontline healthcare workers involved in COVID-19 vaccination.	ADB, NIP	Q3–Q4 2022
Project Management and Gender-Specific Activities:			
2.1. A Gender and Social Inclusion Specialist hired by the Project Management Unit early in project design and implementation. 2.2. Project reports include details on GAP implementation (good practices, lessons learnt, etc.) 2.3. Sex-disaggregated and gender-related information relevant to the DMF and GAP integrated in overall project performance monitoring system.			

COVID-19 = coronavirus disease, DMF = design and monitoring framework, GAP = gender action plan, MOH = Ministry of Health, NIP = National Immunization Program, OP = operational priority, Q = quarter, UNICEF = United Nations Children’s Fund, WHO = World Health Organization.

^a Guidelines will address barriers such as cost, time poverty, lack of awareness, quality of service, or others to be prioritized based on lessons learned from the roll-out to date.

Source: Asian Development Bank.