

GENDER ACTION PLAN^a

Activity	Performance Targets/Indicators	Responsibility	Time Frame
Outcome: Priority populations vaccinated against COVID-19			
a. Coordinate with government agencies in collecting and monitoring sex-disaggregated data for implementation and monitoring of the vaccination plan	<p>a.1 At least 0.76 million people in priority groups, based on the NVDP, vaccinated (data disaggregated by sex) (2021 baseline: 0)</p> <p>a.2 Sex-disaggregated database on the targeted population groups developed and regularly data collected^b: (i) stage 1 - health workers, social and education sector workers, special group, stage 2 – population with cancer; (ii) stage 2 - population 60+, population with pre-existing conditions; (iii) population aged 16+ not covered in stages 1 and 2 (2021 baseline: 0)</p>	PIU Monitoring Specialist with Gender Specialist	2023
b. Conduct a satisfaction survey ^c among vaccine recipients covering issues such as adequateness of information on short-term discomforts of vaccination and how to care for injection sites, gender sensitivity and cultural appropriateness of vaccination sites, among others	b.1 At least 80% male and 80% female respondents of the survey expressed satisfaction regarding vaccination access and quality of services (2021 baseline: 0)	Gender Specialist with PIU Monitoring Specialist	Q4 2022
Output 2: Capacity to implement the vaccination program strengthened			
2.1 Conduct gender sensitivity training sessions for health workers, vaccinators, and other MOHSD and PIU personnel	2.1.1 Gender sensitivity training module developed, for inclusion in capacity building sessions ^d of trainees from MOHSD and PIU ^e on gender-sensitive administration of COVID-19 vaccine (2020 baseline: N/A)	PIU Gender Specialist	Q1 2022
	2.1.2 At least 80% of all trainees (at least 80% of whom are women) demonstrated gender sensitive skills in implementing the vaccine administration component of the vaccination program (2020 baseline = 0)	Gender Specialist with MOHSD trainers	2022
2.2 Review the extent of gender responsiveness of current guidelines and communication plans on vaccine administration	2.2.1 Budget and guidelines for mobile teams to reach marginalized groups, especially women, updated and approved (2021 Baseline: 0)		Q1 2022

Activity	Performance Targets/Indicators	Responsibility	Time Frame
	2.3.1 Gender sensitive communication plan on the vaccination program included actions to (i) disseminate gender sensitive information to reach poor and vulnerable communities, especially women, elderly, and persons with disabilities in remote villages, and (ii) facilitate people's understanding of the benefits of vaccination, address vaccine hesitancy, as well as understand the procedures to follow before, during, and after vaccination (2020 Baseline: 0)	Gender Specialist with PIU Specialists	Q1 2022
Project Management			
a. Implement gender responsive mechanisms for project implementation	a.1. National Gender Specialist recruited in the PIU	PIU	Q4 2021
	a.2 Project monitoring and reporting system with gender indicators developed and regularly updated with sex-disaggregated data	PIU M&E Specialist with Gender Specialist	Q1 2022–2023

COVID-19 = coronavirus disease, M&E = monitoring and evaluation, MOHSD = Ministry of Health and Social Development, NGO = nongovernment organization, PIU = project implementation unit

^a These are proposed targets and their corresponding activities. Finalization of these targets and activities is subject to the baseline data that will be collected by the gender specialist, and in agreement with the government.

^b Based on the prioritization target of the National Plan for COVID-19 Vaccination

^c Satisfaction survey conducted using digital technologies, and/or on-site recording feedback of men and women right after vaccination, and/or other survey methodologies using randomized sampling techniques

^d Capacity building activities will be based on MOHSD's line up of training to include, among others: (i) immunization safety, (ii) disease surveillance and monitoring, (iii) planning, (iv) communication and community engagement

^e Trainees may include vaccinators, nurses and doctors, primary care providers, public health personnel, and staff assisting the vaccination process at the vaccination centers

^f Media campaign messages may include benefits of vaccination, registration process to access vaccines, access to vaccination sites, feedback mechanisms, vaccine safety and efficacy, and other related topics.

Source: Asian Development Bank.