## GENDER ACTION PLAN (GAP) (as revised at mid-term review)

Reform Areas	Activities and targets
Health sector reform process improved	1. Support the Ministry of Health SubCAW to finalize a detailed Road Map that lays out the core elements of a gender strategy for the health sector (which will align with the NCAW 3 <sup>rd</sup> National Strategy).
	Activity 1
	2. Ensure the Health Sector Annual Operational Plan 2019 is gender responsive.
	Activity 2
Implementation of free health care for the poor, mothers and children improved	3. Undertake an assessment of impacts and gaps in access to the HEF and FMNCH schemes, and use the lessons learnt to inform the implementation of the NHI scheme, and make recommendations to address possible issues, including eligibility criteria and range of health conditions covered, in view of ensuring equitable access for women to NHI.
	Activity 3
	4. By June 2018, at least 131 districts apply NHI policy guidelines.
	Target 1
	5. Ensure HEF roll out is prioritized to areas of greatest need including areas with high maternal mortality ratio and ethnic populations and poverty incidence.
	Activity 4
	6. (i) Develop basic guidelines (1–2 pages) on how to ensure that the NHIB awareness activities on the range of services and benefit packages provided under NHI (previously HEF and FMNCH schemes) are gender responsive; and (ii) assess and document the gender-responsiveness of awareness-raising activities based on the guidelines developed.
	Activity 5
	7. Health facilities' operational procedures include arrangements to ensure outreach activities and information, education and communication meetings are conducted at times and places convenient for women.
	Activity 6
	8. Disaggregate health service utilization data by sex and ethnicity, including in all relevant studies performed under ADB intervention. Activity 7
Health human resources management capacity strengthened	9. Ensure the formulation of provincial workforce development plans include action points on incentives (monetary and social), and appropriate conditions (safety, security) for attracting and sustaining deployment of female and ethnic staff in remote and disadvantaged rural areas.
	Activity 8

Reform Areas	Activities and targets
	10. Undertake gender audit of central and provincial workforce development plans to ensure gender responsive human resource development policies and actions related to supporting women's employment, retention and promotion and capacity development in the health sector.
	Activity 9
	11. Overall, 50% of participants (of all trainings, fellowships, study tours, English language training as part of HR development activities) are women.
	Target 2
	12. By June 2018, 75% of health centers will have at least one midwife, and 80% by June 2019 <sup>a</sup> (2013 baseline: 33%).
	Target 3
	13. 75% of the provincial workforce development plans that are finalized by June 2018, will include the indicator "proportion of women among health facilities heads".
	Target 4
	14. Briefing on project gender requirements are conducted for executing and implementing agencies (to be prepared by International Gender Consultant and Chief Technical Advisor)
	Activity 10
	15. Personnel management information systems collect and reports all data disaggregated by sex and ethnicity.
	Activity 11
Health sector Financial management System strengthened	16. Ensure all female financial management and budgeting staff at provincial health departments are trained under various project and in-house initiatives
	Activity 12
	17. Develop and integrate gender targets in the overall TA project monitoring and evaluation system.
	Activity 13

ADB = Asian development Bank; FMNCH = free maternal, newborn, and child healthcare; HEF = health equity fund; HR = human resource; NHI = National Health Insurance; NHIB = National Health Insurance Bureau; NCAW = National Committee for the Advancement of Women; SubCAW = Sub Committee on the Advancement of Women; TA = technical assistance.

<sup>&</sup>lt;sup>a</sup> In the corresponding policy matrix and corresponding DMF for subprogram 2, the government has achieved 75.1% of health centers with at least one midwife as subprogram 2 target date is 2018 (subprogram policy actions were all completed by March 2018). This figure is verified by 2 sources (the 2016 Annual Report on Deployment of HRH endorsed by the minister or health and a personnel database). Here in the GAP supporting subprogram 2 through the complementary TA loan, the target is 80% as the target date is 2019 (TA loan runs through March 2019). The target will be verifiable through the same sources, updated.