



Mongolia:
Enhancing Resource
Management through
Institutional Transformation

Gender in the Results Based
Management (RBM) Approach

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Purpose

The purpose of this training module is to introduce basic concepts of **gender** and **gender equality** as they relate to and integrate into the Results Based Management approach.

Expected Module Results

- Participants will acquire a **better understanding** of gender and sex.
- Gender **equality** and gender **relations** will have been covered.
- The **Mongolian context** will be discussed.
- The important elements of a **gender-based analysis** will be presented,
- They will establish a **link** between gender and the results based management processes and tools.
- A gendered **results chain** will become familiar
- They will have looked at **gender sensitive indicators**.

Definitions: Gender and Sex

A **perception** of the roles, responsibilities and statuses which a man or a woman is expected to fulfill in political, economic, social cultural and family spheres, that establishes itself and evolves in the course of history.

| Sex | Gender |
|--------------------------------|--|
| Biologically determined | Constructed by society |
| Universal for all human beings | Multi-faceted: differed within and between culture and across geography, climate, etc. |
| In most cases unchanging | Dynamic, changes over time |

Definitions: Gender Equality and Relations

When women and men, girls and boys enjoy equal rights, **responsibilities and opportunities**.

The **gender relations** between men and women, including how power, access to and control over resources are distributed between the sexes.

Mongolia and Gender: Law and Action

Principles found in Law of Mongolia on Enforcement of the Law on Promotion of Gender Equality:

Principle of equality

Principle of non-discrimination

Principle of government responsibility

Principle of gender mainstreaming

Principle of gender sensitive data and information

An RBM focused Action Plan on the Implementation of the National Program on Gender Equality would make sure these principles are **implemented**.

Gender: National Assessment 1

IRIM Gender Overview Report 2014:

Mongolia's regulatory framework for gender equality is relatively **strong**.

Pronounced gender bias exists in the **division of labour** between men and women, and the labour market is highly occupationally segmented by gender.

There are gender **remuneration gaps** in Mongolia.

Political empowerment remains one of the **weakest indices** of Mongolia in terms of gender equality.

There is an inverse gender gap in the **education sector** in Mongolia, particularly in tertiary education.

There are a number of concerns associated with the **deteriorating health condition** of men.

Domestic violence is a serious problem for women in Mongolia.

There is **insufficient** gender-disaggregated data at the national level in various sectors.

Gender: National Assessment 2

IRIM Gender Analysis in Environment and Forestry, 2017:

General: Although women have necessary endowments (in education and health), **application of endowments and opportunities** to take actions, or agency are not sufficient in Mongolia in the forestry sector.

1. There is a **differential treatment** of women and men in labour market.
2. **Enforcement of the legislation** related to gender and environment remains weak.
3. The role of local level government organisations in mainstreaming gender in forestry sector is **insufficient**.
4. The different roles played by women and men are related to factors such as **perceptions** of physical and social characteristics and responsibilities.
5. Stakeholders regard forestry business in Mongolia as a **male-dominant sector**.
6. Employment in forestry sector has gender, educational and age **divisions**.
7. **Participation** of women in environmental decision-making is **lower** than that of men.
8. The **gender statistical** data related to the forestry sector are limited in Mongolia.

Mongolia and Gender: External View

UNDP Report:

A large share of women participate in **unpaid** family work, especially in rural areas.

Concern about **urban-rural divide** and the challenges Mongolia faces in relation to urbanization and migration and providing equal opportunities to geographically dispersed populations, including young people

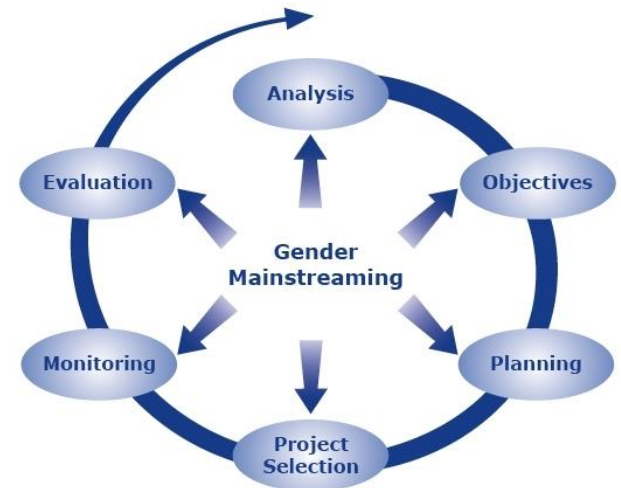
Social stereotypes and traditional family roles are seen as limiting factors in female participation within the workforce

Source: UNDP Human Development in Mongolia Report of 2016

What is Gender Mainstreaming?

Strategy for building gender equality and women's empowerment

Means of achieving: **Assess** how gender affects and/or is affected by every component of the project management cycle. **Gender analysis** is central this process.



Gender-based Analysis (GBA)

Gender-based analysis examines **relationships** between women and men. It identifies the **varied roles** played by women and men, girls and boys in the household, community, workplace, political processes, and economy. These different roles usually result in women having **less access** than men to resources and decision-making processes, and **less control** over them.

To be effective gender-based analysis must be carried out at the **earliest stages** of the project or program cycle and the findings are integrated into project or program planning. It must then be performed **throughout** the project or program cycle.

Steps in a GBA



Step 1: Identify the Issue

A **gender perspective** in identifying, defining and refining the issue involves:

- **defining** issues and target groups so that the diverse and different experiences of women and men are taken into account;
- assessing the **impact** on both women and men;
- **involving** both women and men in identifying the issue;
- age and other factors modify the different **experiences** of males and females;
- **factors** (cultural, economic, political, legal, socio-economic, etc.) may affect gender equity within this issue.

Step 2: Challenge Assumptions

Assumptions (personal, social or political) can affect the analysis.

By challenging personal or organizational assumptions about whether the projects or programs have gender and other diversity implications, the analysis may become more **context sensitive**, robust, and better grounded in facts if questions such as: Is your team making assumptions about the uniformity of population groups?

Step 3: Gather the Facts

You need data to assess whether your initiative will have a more significant impact on a **particular group** of people, or whether barriers exist.

The data you use should be **gender-disaggregated** then identify gaps in existing data and consider making data collection part of your initiative's objectives and evaluation measures, as an action.

Consult stakeholders to test your data and hypotheses.

Step 4: Develop Options

The results of your consultation and research should **inform** your options and recommendations at all stages of initiative development and implementation.

Using the data you have gathered, indicate how the options you propose **respond** to the specific issues you identified.

If you have found that your initiative could have differential impacts or unintended barriers, **suggest strategies** to strengthen the proposal. And be sure to highlight your plan to fill any data gaps that your GBA identified.

Step 5: Monitor and Evaluate

The design of your **evaluation framework** and **approach to monitoring** can help address inequality and build capacity.

Make sure your evaluation identifies groups who are **positively or negatively** affected by the initiative.

Highlight **data gaps** and address **unintended outcomes** for diverse groups. Incorporate them into strategy renewals or management responses.

Step 6: Communicate

To ensure a gender perspective in communicating policy, consider:

- that the message should address **both** women and men;
- designing **communication strategies** that reach both women and men and how information will be communicated to women and men, and highlight gender implications of the policy;
- how the **participation and contributions** of both women and men in the policy development and analysis process will be acknowledged and communicated.

Finally, remember to **share or discuss** your GBA results within your organization. This will demonstrate due diligence, foster buy-in with stakeholders, and identify areas for further action.

Step 7: Document

It is essential to document your analysis and findings throughout the cycle of the initiative because:

- The data and analysis that guided your recommendations provide **meaningful background** information.
- You may be asked to **provide evidence** that a GBA was conducted and to explain the process that guided your recommendations.
- This information could inform a **future proposals**.

Gender Analysis and Results Chains

Results chain: **Rehabilitation of clinics in rural villages.**

Planning

| Results chain | Inputs: Funds, material and experts | Activities: Deployment plan and rehabilitation work |
|---------------|---|--|
| Issue | Gender balanced expertise mobilized | Gender balanced sensitization of communities. Training of staff (both sexes) |
| Assumptions | Need to integrate gender in budget determination | Trained women staff more receptive. Community members open to different needs. |
| Research | Specific needs of men/women; boy/girl | Gender sensitive training curriculum. Enhanced knowledge of architectural requirements |
| Options | Effects on reach of project: more clinics or more gender-sensitive clinics? | Modifying the original plans in light of community concerns. |

Gender Analysis and Results Chains

Results chain: Rehabilitation of clinics in rural villages.

Short-term Results

| | | |
|---------------|---|--|
| Results chain | Outputs: Rehabilitated clinics according to specifications and concerns | Immediate outcome: Increased attendance and expanded reach |
| Issue | Operation hours meet needs of men <u>and</u> women. Staff welcomes equally | Average distance from clinics of mothers of small children |
| Assumptions | Clients' relations may determine the success or failure of clinics. | More peripheral villages will less benefit in the short term. |
| Research | Analysis of preliminary attendance statistics by gender: days, weeks, months. | Research using GPS database of where users come from. |
| Options | Flexible opening hours; rotation of specialized staff. | Increase reach of specific clinics with below average attendance by seeking transport options. |

Gender Analysis and Results Chains

Results chain: Rehabilitation of clinics in rural villages.

Long-term Results

| | | |
|---------------|--|--|
| Results chain | Intermediate outcome: Improved quality of services to increased number. | Ultimate outcome: Improved health of members of communities |
| Issue | Variation of number and quality of services according to gender. | Did villages involved in project benefit more than villages not in project? |
| Assumptions | Men have more control over services offered in clinics | The project produced measurable impacts on both genders equally. |
| Research | Research based on gender balanced report cards of clinics | Disaggregated and analyzed longer term data |
| Options | Revisions of service delivery protocols with results of analyses. | Organize an impact evaluation using randomized controlled trial methodology. |

Gender Sensitive Indicators

Gender-sensitive indicators point out how far and in what ways development programs and projects have met their **gender objectives** and achieved results related to **gender equity**.

Gender-sensitive indicators measure gender-related changes in society over time.

Managers have to choose indicators for **each stage** of the project cycle, always setting them against **project objectives**, i.e., the broad objectives of the project and the particular objectives of each stage, always keeping in mind that gender may be an important factor.

GS Indicators: good and bad?

Clinics project: **Immediate outcome**

1. Number of patients treated during June
2. Percentage of boys and girls vaccinated
3. Total number of participants in contraceptive information sessions
4. Average distance covered by patients from January to May
5. Number of consultations for influenza by gender.

“Баярлалаа”