### Gender Analysis Domains

**What constitutes gendered power relations/inequities?**

- Access to resources
- Social norms, beliefs and values
- Distribution of labour/roles
- Decision-making/autonomy
- Laws and policies

**How do gendered power relations manifest at the individual/community level to affect health and healthcare access?**

- Lack of access to resources (education, information, skills, income, employment, services, time)
- Lack of value placed on women’s health
- Norms related to who should be sexually active and when
- Norms related to who should become a mother and when
- Norms related to who does what type of work and when
- Lack of women’s decision-making power/autonomy/agency
- Lack of male engagement
- Male partner’s disapproval and control
- Gender-based violence

### Creating Gender Sensitive Indicators for Coverage, Implementation Strength, Quality of Care

**Domains for Coverage Surveys**

- Policies, Guidelines, Procedures
  - Non-discrimination policy for providers and clients
  - Sexual harassment policy and protocols
  - Gender-sensitive protocols for counselling
  - No need for approval or consent to receive services
  - No policy preferencing women accompanied by men
  - Gender-based violence screening and referral system
  - Vouchers or cash transfers for women without user fees
  - Supervisory system that includes providers’ responsibilities for providing non-discriminatory and non-stigmatizing care

- Availability of Services
  - Availability of services to adolescents, single women, widows, LGBTQ, etc.
  - Availability of full range of family planning services despite sex of provider

**Domains for Implementation Strength Surveys**

- Policies, Guidelines, Procedures
  - Non-discrimination policy for providers and clients
  - Sexual harassment policy and protocols
  - Gender-sensitive protocols for counselling
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- Availability of Services
  - Availability of services to adolescents, single women, widows, LGBTQ, etc.
  - Availability of full range of family planning services despite sex of provider

**Domains for Quality of Care Surveys**

- Policies, Guidelines, Procedures
  - Non-discrimination policy for providers and clients
  - Sexual harassment policy and protocols
  - Gender-sensitive protocols for counselling
  - No need for approval or consent to receive services
  - No policy preferencing women accompanied by men
  - Gender-based violence screening and referral system
  - Vouchers or cash transfers for women without user fees
  - Supervisory system that includes providers’ responsibilities for providing non-discriminatory and non-stigmatizing care

- Availability of Services
  - Availability of services to adolescents, single women, widows, LGBTQ, etc.
  - Availability of full range of family planning services despite sex of provider

### RADAR – Gender Analysis Domains for Coverage, Implementation Strength, and Quality of Care Surveys

This model provides examples of the ways in which gender power relations manifest at the individual/community level to affect health and healthcare access and what is needed at the health service delivery level to address gender power relations and ensure better quality and more equitable service delivery.

The domains outlined provide examples of the types of indicators that can be measured within coverage, implementation strength and quality of care surveys using a gender lens.

### Structural Characteristics

- Hours of operation (including 24 hour maternal health services)
- Location safe for men and women
- Separate waiting rooms and toilets
- Auditory and visual privacy for consultations
- Labor wards in a private location
- ‘Male-friendly’ facilities (e.g., operating hours, welcoming environment)