

- WOMEN'S HEALTH AND WELLBEING
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WOMEN'S HEALTH AND WELLBEING

ABOUT EXEMPLARS IN GLOBAL HEALTH

The Exemplars in Global Health (EGH) program is a global coalition of partners including researchers, academics, experts, funders, country stakeholders, and implementers. Our mission is to identify positive global health outliers, analyze what makes countries successful, and disseminate core lessons so they can be adapted in comparable settings. We aim to help country-level decision makers, global partners, and funders make strategic decisions, allocate resources, and craft evidence-based policies. A small, core team supporting EGH is based at Gates Ventures, the private office of Bill Gates, and closely collaborates with the Bill & Melinda Gates Foundation.

RESEARCH PARTNERS

Our consortium of research partners includes researchers from the Hospital for Sick Children (SickKids), the Public Health Foundation of India (PHFI), the United Nations Population Fund (UNFPA), the Federal University of Pelotas, and the Milken Institute School of Public Health at George Washington University (GWSPH). We will select an in-country research partner in each Exemplar country.











TOPIC OVERVIEW

Women's health and wellbeing (WHW) refers to the physical, mental, and social wellness of women and their overall quality of life, from birth through old age. The adoption of Sustainable Development Goal 3 (SDG3) on health and wellbeing, in conjunction with SDG5 on achieving gender equality, recognizes that securing health as a human right also requires explicitly addressing gender power as a critical determinant of health.

While many dimensions of physical and mental health have well-established metrics for tracking and measurement, "wellbeing" is not consistently or universally defined. EGH research aims to improve conceptualization of women's health and wellbeing holistically and across the life course and recognizes the various intersecting socioeconomic inequalities than can result in different gendered experiences and disadvantages and advantages for different groups. Our conceptual framework defines women's health and wellbeing across ten dimensions: health, empowerment and agency, safety and security, harmful practices and gender-based violence, poverty, nutrition, access to services, work, education, and climate change and environmental factors.

This conceptual framework enables EGH to identify countries that have outperformed their peers across dimensions and can serve as Exemplars for other countries to emulate. Within each Exemplar country, we will aim to understand how specific countries made progress in improving women's health and wellbeing and distill key lessons that can be used to inform funding streams, policies, and programs.

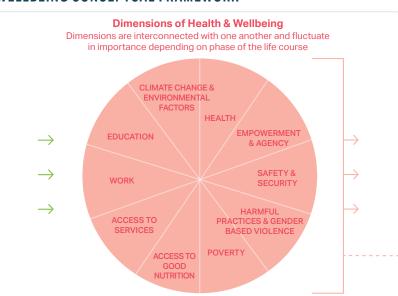
WOMEN'S HEALTH AND WELLBEING CONCEPTUAL FRAMEWORK

Context Macro-level

legal and government systems, laws and policies

Meso-level formal and informal organizations/institutions

Micro-level individuals, families, houesholds, peer networks



32 Indicators

Adolescent fertility | Adults with a bank account | ANC4+ | Breast cancer deaths | Decision-making re: sexual relationships, contraceptive use, RH care | Early organized learning participation | Food insecurity | FP demand satisfied (modern methods) | HIV incidence | Informal employment (non-agricultural) | Interpersonal violence | Labor participation rate (by gender) | Life expectancy | Maternity benefits for those giving birth | MMR | NCD mortality | Older persons receiving pension | Poverty | Reliance on clean fuels/tech | Safe sanitation services | Sexual violence | Stunting | Suicide mortality | U5M | Unemployment | Unpaid domestic and care work | Upper secondary education completion | Women in managerial positions | Youth literacy rate (gender parity) | Youth not in employment, education or training

Women's Health & Wellbeing

Dimensions have cumulative effects across the life course, both positive and negative; these are magnified during critical time windows like childhood and adolescence

Intersecting Inequalities

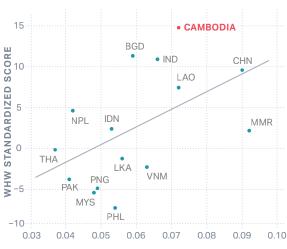
Race, ethnicity, caste, sex, gender identity, sexual orientation, religion, nationality, language disability, geographic location, conflict, refugee/migrant status



INDICATOR SELECTION

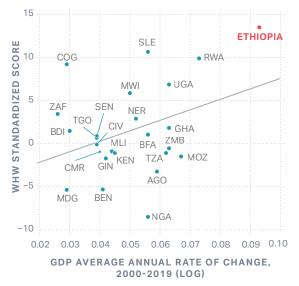
In order to operationalize the conceptual framework, multiple indicators were selected in each dimension based on a rigorous analysis that filtered out indicators with low data quality, lack of data across multiple countries, and high correlation with one another. In total there are 32 indicators representing a range of life course stages.

SOUTH/ SOUTHEAST ASIA & THE PACIFIC



GDP AVERAGE ANNUAL RATE OF CHANGE, 2000-2019 (LOG)

SUB-SAHARAN AFRICA





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COUNTRY SELECTION

We identified positive outliers by assessing countries' progress across indicators. We then conducted additional analyses and applied regional filters to select two Exemplar countries, Cambodia and Ethiopia.

Indicator performance

Average annual rate of change (AARC) between 2000 and 2019 was calculated for all 32 WHW indicators. Then, estimates for each indicator in each country were standardized relative to the mean within its region and summed to determine the composite score for a country, referred to as the WHW Standardized Score. This was used to identify positive outliers that perform well relative to countries in the same region when controlling for GDP AARC over the same period of time.

Additional analyses

Analyses were performed to ensure positive outlier countries (1) demonstrate strong performance across a breadth of dimensions and life course stages, (2) do not have stark sex disparities in outcomes, (3) perform in line with or above current regional averages for a majority of indicators, and (4) have strong potential for impact within country and transferability of lessons learned to other contexts.

Regional representation

For phase I of project, one country was selected from each of two key regions: (1) South / Southeast Asia and the Pacific and (2) Sub-Saharan Africa.





TECHNICAL ADVISORY GROUP

Research for every Exemplars in Global Health topic is guided by a Technical Advisory Group (TAG), consisting of a diverse range of topic-specific experts.

Asha George (Chair, Professor, University of the Western Cape), Emmanuela Gakidou (Professor, Institute for Health Metrics and Evaluation (IHME)), Megan O'Donnell (Policy Fellow and Co-Director of Gender, Center for Global Development), Nana Anyidoho (Director, Centre for Social Policy Studies, University of Ghana), Suzana Cavenaghi (Brazilian Institution of Geography and Statistics), Pascale Allotey (Director, Department of Reproductive Health Research/ World Health Organization), Sameera M. Al Tuwaijri (Lead Health Specialist, World Bank), Sabina Rashid (Director, Centre of Excellence for Gender, Sexual and Reproductive Health and Rights, BRAC University), Divya Matthew (Director of Policy and Advocacy, Women Deliver), Rajani Ved (Director, Health, India Country Office, Bill and Melinda Gates Foundation), Janet Zhou (Director, Strategy Office, Bill and Melinda Gates Foundation)