

A background image showing five people (one man and four women) seated in a row on a stage, engaged in a panel discussion. The image is overlaid with a semi-transparent dark blue filter. The text is placed over the lower half of the image.

# **GENDER EQUITY IN EYE HEALTH SURVEY REPORT 2022**

Survey conducted by IAPB (on behalf of the Gender Equity Work Group Nov 2022)

# EXECUTIVE SUMMARY

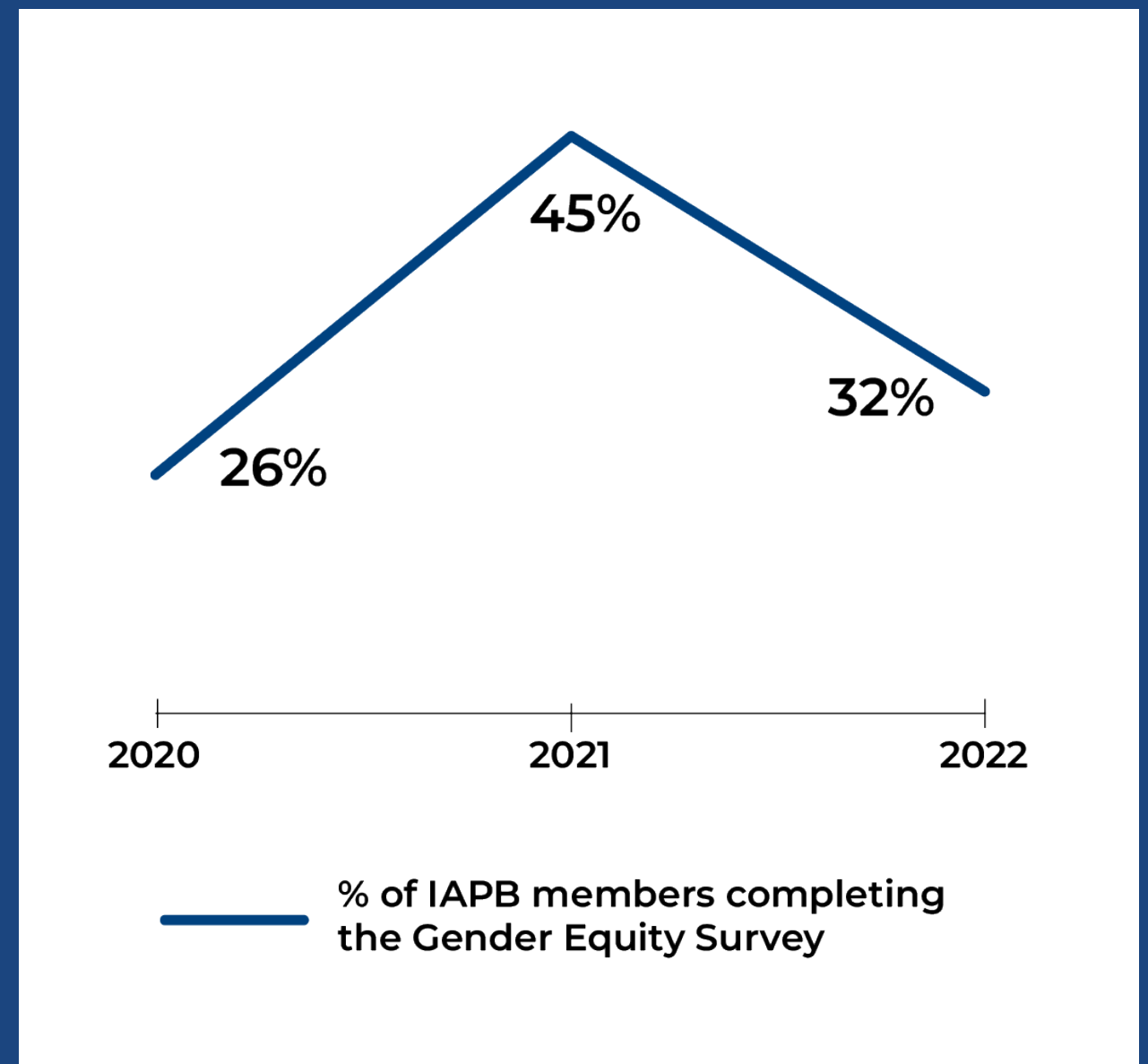
- There was lower than expected participation levels in 2022 and the IAPB Gender Equity Group is taking steps to both understand why and put steps in place to make completing the survey more enticing when it is next run in November 2024.
- The gap is closing in the number of male vs female CEOs in the eye health sector; however, it is not closing when it comes to the role of Chair.
- The number of organisations that disaggregate their data by sex has increased; however, the number of organisations publicly stating a gender equity policy, or a programmatic policy has decreased. Perhaps that is because data disaggregation is now often compulsory.
- There is more to do and the IAPB Gender Equity Work Group will take the learnings from this survey, along with feedback at the recent 2030 In Sight Live conference in Singapore to refocus our gender equity support to IAPB members.
- Any IAPB Member that would like support in their gender equity journey, please do contact IAPB GEWG.

## OUR CAVEAT

The survey response peaked in 2021 with 83 respondents (49% of all IAPB members), dropping in 2022 to 56 respondents (32% of all IAPB members).

Only 17 organisations have responded each year.

Please keep this in mind as we go through the results.



# GENDER PARITY AT LEADERSHIP: I KNOW IT IS IMPORTANT, BUT WHAT CAN I DO?

Gender parity in leadership positions ensures diverse perspectives and experiences, promotes inclusive decision-making, and challenges gender biases.

It leads to better outcomes, fosters innovation, and creates role models, inspiring future generations to pursue their aspirations and contribute to society without gender-based limitations.

## **BOX. REACHING BEYOND TRADITIONAL NETWORKS: DIVERSIFYING THE CANDIDATE COHORT**

The process of identifying potential board candidates often relies heavily on the networks of board members and chief executives. Diversifying board membership will require challenging this paradigm and using non-traditional recruitment methods. The BoardSource 2021 Leading with Intent Report found that alternative networks that have been tapped within charity sector include:

- **Leaders from the communities the organisation serves**
- **Referrals from leaders in the communities the organisation services**
- **Programme participants or former participants**
- **Leaders from peer or partner organisations**
- **Publicly posted or advertised board openings**
- **External headhunter, agency, or board matching services**

*Source: Global Health Report 2021*



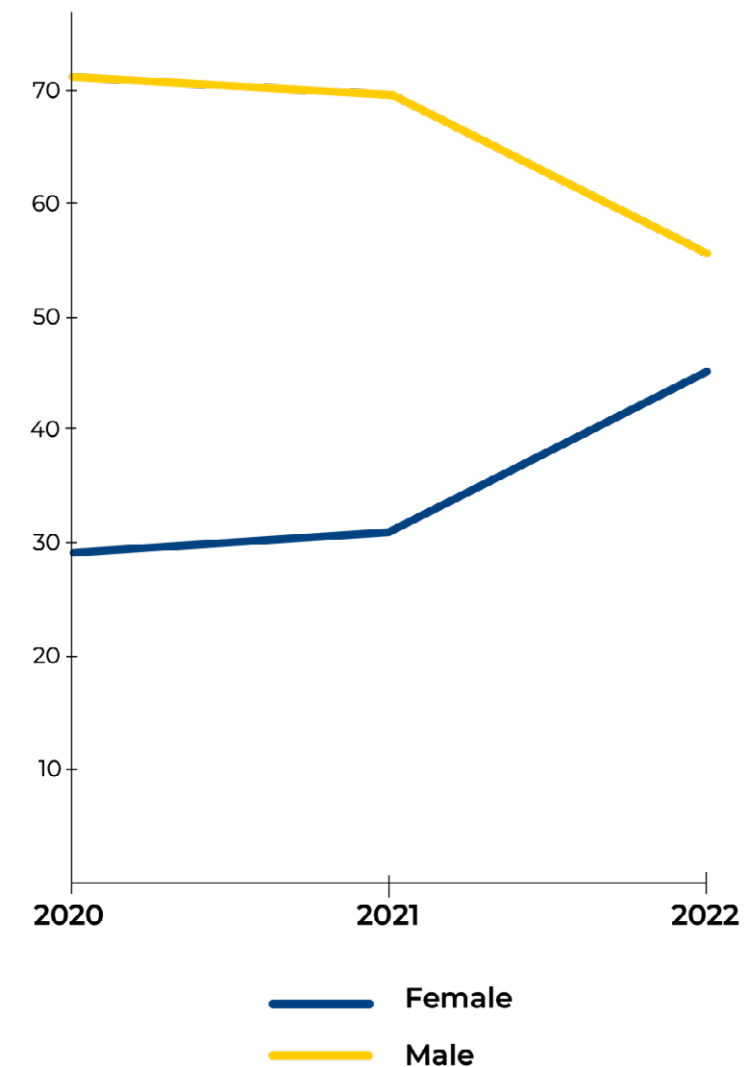
# LEADERSHIP RESULTS

For the purposes of this report, we have defined parity as 45% – 55%

## % GENDER OF CEOs OVER THE PAST THREE YEARS

From the range of organisations that responded:

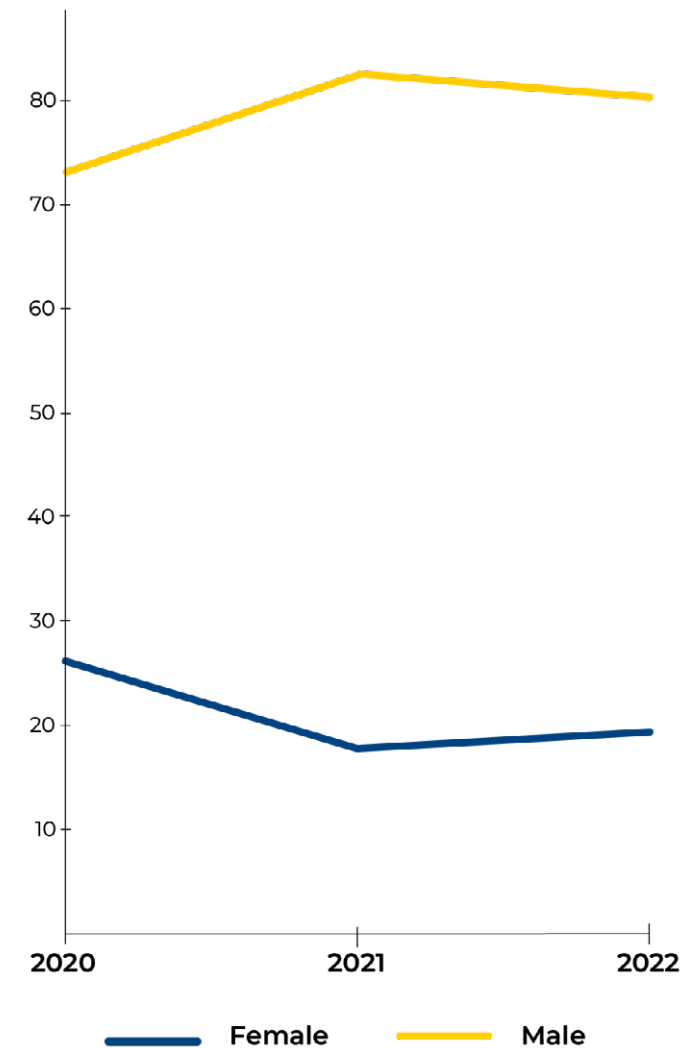
Over the last three years we are closing the gap between the number of female CEOs in eye health (45%)



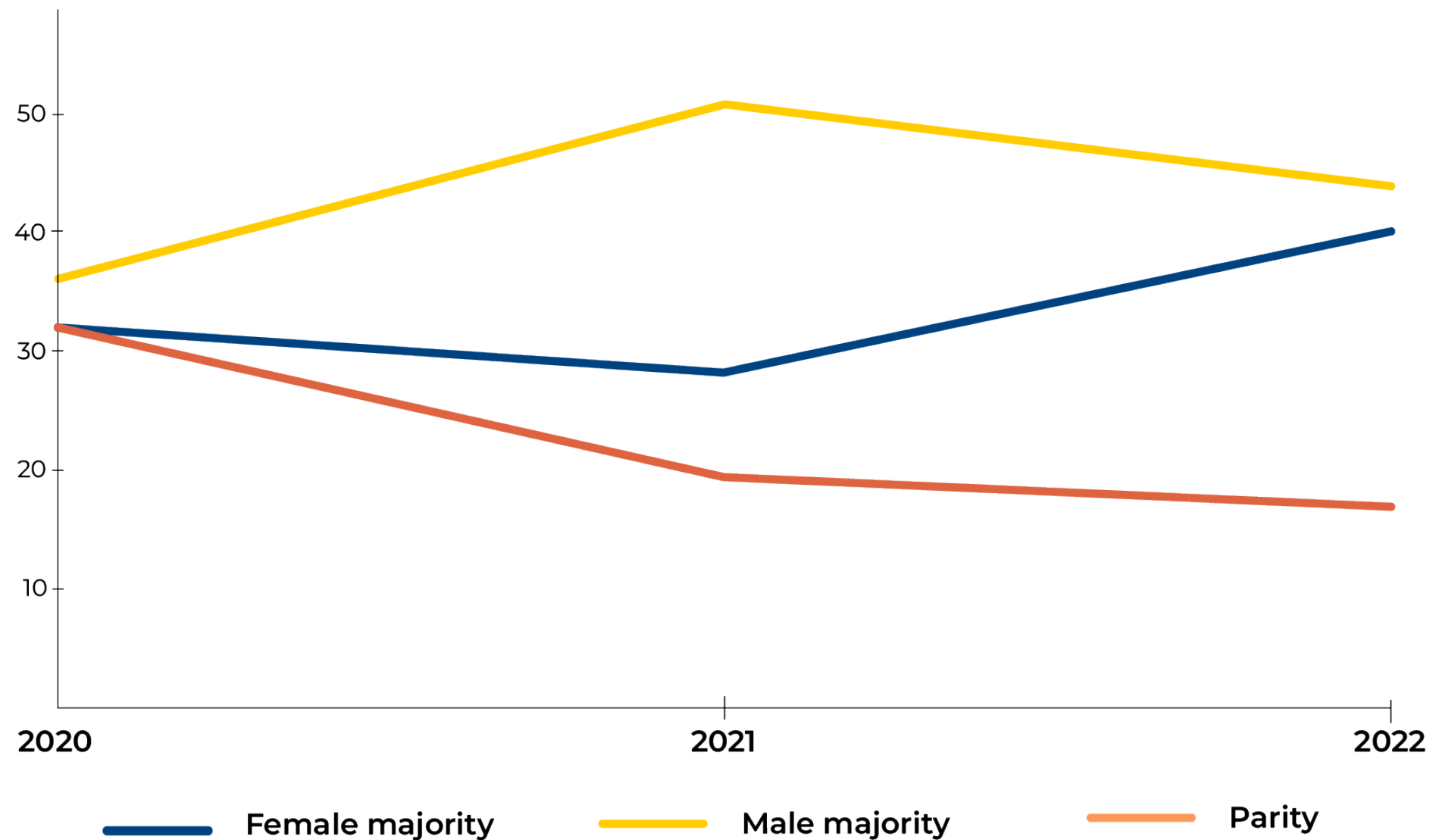
# % GENDER OF BOARD CHAIRS OVER THE PAST THREE YEARS

However, the gap is increasing in the number of female Board Chairs (20%).

In comparison, whilst still a low figure, Global Health 50/50 reported in 2022 that of organisations consistently reviewed since 2018, 32% of Board Chairs were women (up from 20% in 2018).

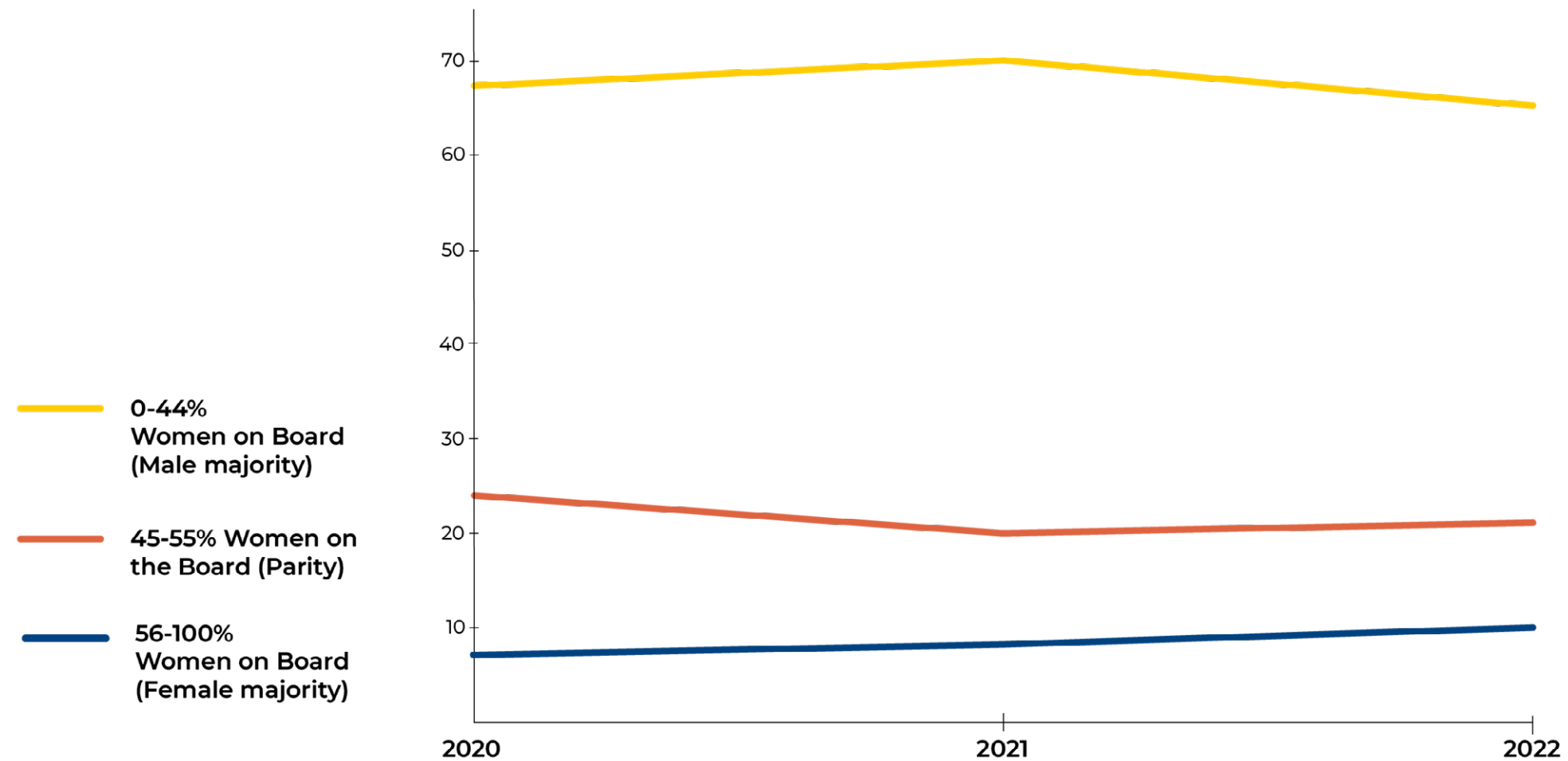


# HOW MANY WOMEN ARE IN YOUR SENIOR MANAGEMENT TEAM?





# HOW MANY WOMEN ARE ON YOUR BOARD?



# WHAT CAN WE DO?

## IDEAS FROM GLOBAL HEALTH 50/50



**People talk about the issue of listening to women, of listening to diverse voices like it is novel. I still worry that it's all talk because I don't believe that organisations truly understand why diversity matters. But if we don't listen to these voices then we can never be as effective as we should be in health."**

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**CATHERINE BERTINI**  
Chair of the board of the  
Global Alliance for Improved  
Nutrition; Distinguished  
Fellow at the Chicago  
Council on Global Affairs



**GAIN has developed a set of targets for its board - at least half of our voting board members have to have grown up in and worked significantly in a lower-income country and at least half must be women. The ambition for diversity has always been there, but these targets are important to make us more disciplined and more accountable to these aspirations."**

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**LAWRENCE HADDAD**  
Executive Director, Global Alliance for Improved Nutrition (GAIN)



**CARE is committed to ensuring gender balance on its board. The board also established a commitment to achieving a 40% ratio of Black, Indigenous, and People of Color among its directors. To ensure accountability, we embedded the commitments into our Board Responsibilities, created lines of communication with staff, established systems to monitor progress and hold an annual board training on gender, equity, and diversity."**

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**CARE U.S.A.**



**The UNAIDS board has a unique set up that includes civil society delegates selected by civil society itself as members of the board.**

**When you have networks of people living with HIV, and those most vulnerable to and affected by HIV in the boardroom, it shifts the dialogue. Other board members have a constant reality check with a human face before them, who will say what works for people in strategies, policies and implementation – and importantly also what does not work. The discussion becomes more focused on doing the right things in the AIDS response, those that have impact for people, those where there is evidence behind – a politically palatable compromise without impact is not an option.”**

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**MORTEN USSING**

Director, Governance and  
Multilateral Affairs, UNAIDS



According to IPPF Regulations, the Board must comprise at least 50% women and at least 20% youth under 25 years of age who meet specific profiles on expertise, skills and experience.

**Organisations have the power to improve their board diversity. Be deliberate. Ask yourselves what is fair, what is just, how inclusive can you be. Otherwise, we keep running headlong without knowing what impact we’re making, and what the people we work with want. We end up speaking at - instead of - with the people whose voices matter most.”**

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**SERI WENDOH**

Global Lead, Gender and Inclusion, International Planned Parenthood Federation



**Since 2010, Gavi has had guiding principles in relation to the gender balance of its Board, Board committees and Board advisory committees. The gender balance is deemed to be within the acceptable range if there is no more than 60% of any one gender represented in each of the separate groups and as an aggregate. As individuals and as an institution, we are committed to building and nurturing a culture in which inclusiveness is a reflex, not an initiative or afterthought.”**

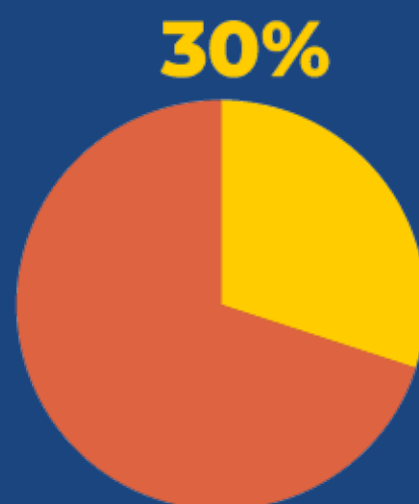
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**GAVI, THE VACCINE ALLIANCE**

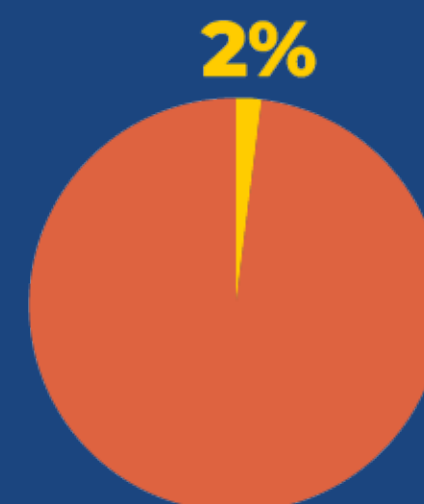
# HOW DO WE COMPARE WITH GLOBAL HEALTH 50/50?

## STARK GENDER INEQUALITIES ON PRIVATE SECTOR BOARDS

Among 43 private companies, women hold 30% (173/576) of board seats.



Women are overwhelmingly from high-income countries – just 11 seats (2%) are occupied by women from middle-income countries (compared with 53 seats (9%) occupied by men from middle-income countries).



**0%** Not a single national (male or female) from a low-income country is represented across 576 seats in the private sector.

## MORE WOMEN SIT ON NON-PROFIT BOARDS THAN FOR-PROFIT BOARDS

**45%**  
**641/1438**

Women occupy 45% (641/1438) of board seats of non-profit organisations (n=103). These include NGOs, faith-based organisations, research organisations, public-private, partnerships, and global health funders

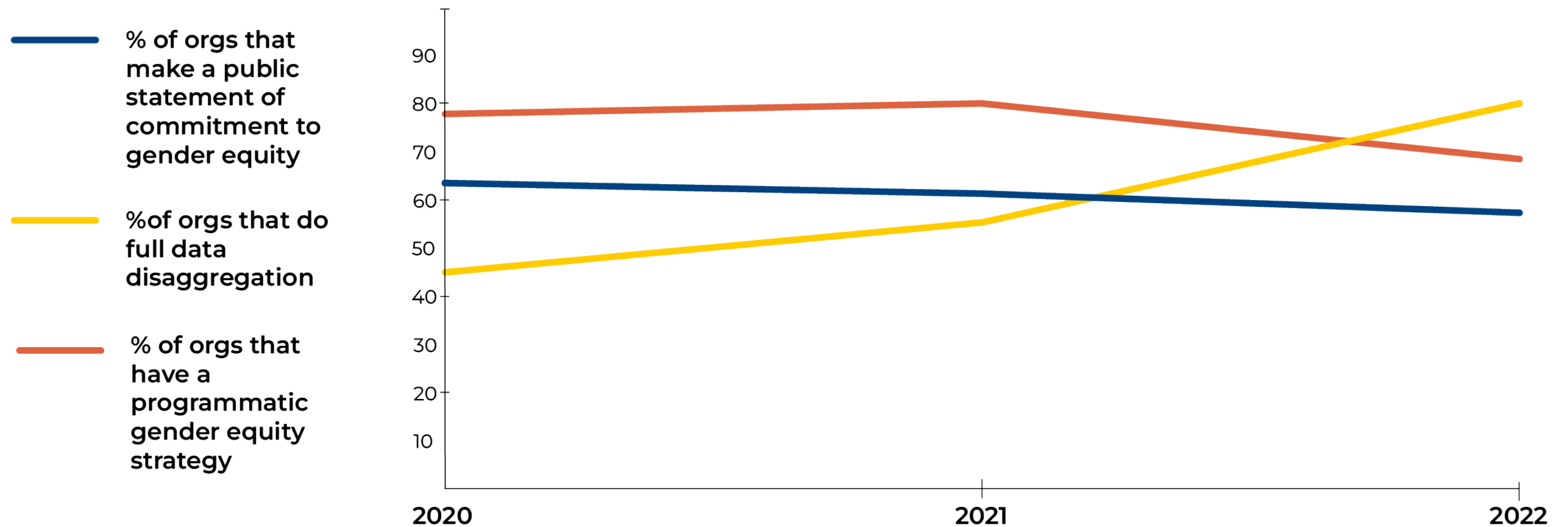
**1%**  
**17/1438**

17 out of 1438 seats are occupied by women from low-income countries (1%). Four women from low-income countries occupy two seats each, bringing the actual number of women board members down to 13.

Source: Global Health 50/50



# POLICIES AND PRACTICES



# HOW DO WE COMPARE WITH GLOBAL HEALTH 50/50?

## HARNESSING THE POWER OF DATA

Sex-disaggregation of data should be ubiquitous within health programmes: it is a means to hold organisations to account for their commitments not only to equity but also to the delivery of effective interventions. Following two years of growing academic and public interest in the roles of sex and gender in driving COVID-19 health outcomes and insights generated from sex-disaggregated data on the pandemic, GH5050 finds that only half of non-profit organisations active in global health have available policies committing to regularly sex-disaggregating health data.

**A failure to collect, report and analyse sex-disaggregated data is a lost opportunity for understanding the distribution of ill-health, who is benefitting from interventions, and who is being left behind.**

# HALF

**of non-profit organisations** publish commitments to regularly sex-disaggregate programmatic monitoring and evaluation data.

This marks a slight improvement over 2021, when commitments were found for

# 44%

**(65/146) Organisations**

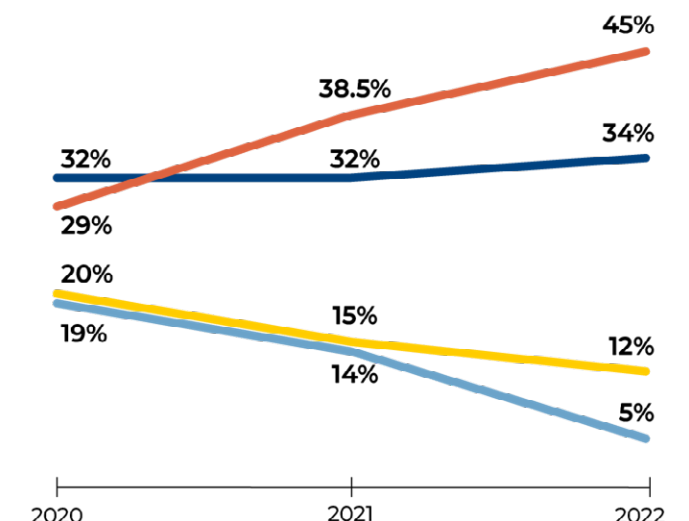
## STEADY PROGRESS IN APPLYING A GENDER LENS TO PROGRAMMATIC APPROACHES

Much of the global health sector agrees that gender plays a crucial role in perpetuating disparities in the distribution of the burden of ill-health across and within populations, and that gender influences how organisations address the problem(s). Our report finds that 81% of organisations have publicly committed to gender equality. But this does not necessarily translate into gender-responsive programmes to reach beneficiaries.

Transformative approaches embedded in the work of global health organisations have been shown to yield more effective outcomes. These include those policies and programmes that seek to address the underlying structural (e.g. economic, legal, political, cultural) drivers of gender inequality. Although progress is being made, more than half of programmes do not yet adopt a fully transformative approach to addressing gender and gender inequalities.

### GENDER-RESPONSIVENESS OF ORGANISATIONAL APPROACHES, 2020-2022

Over the past two years, progress has been made in the reduction of gender-blind health approaches.



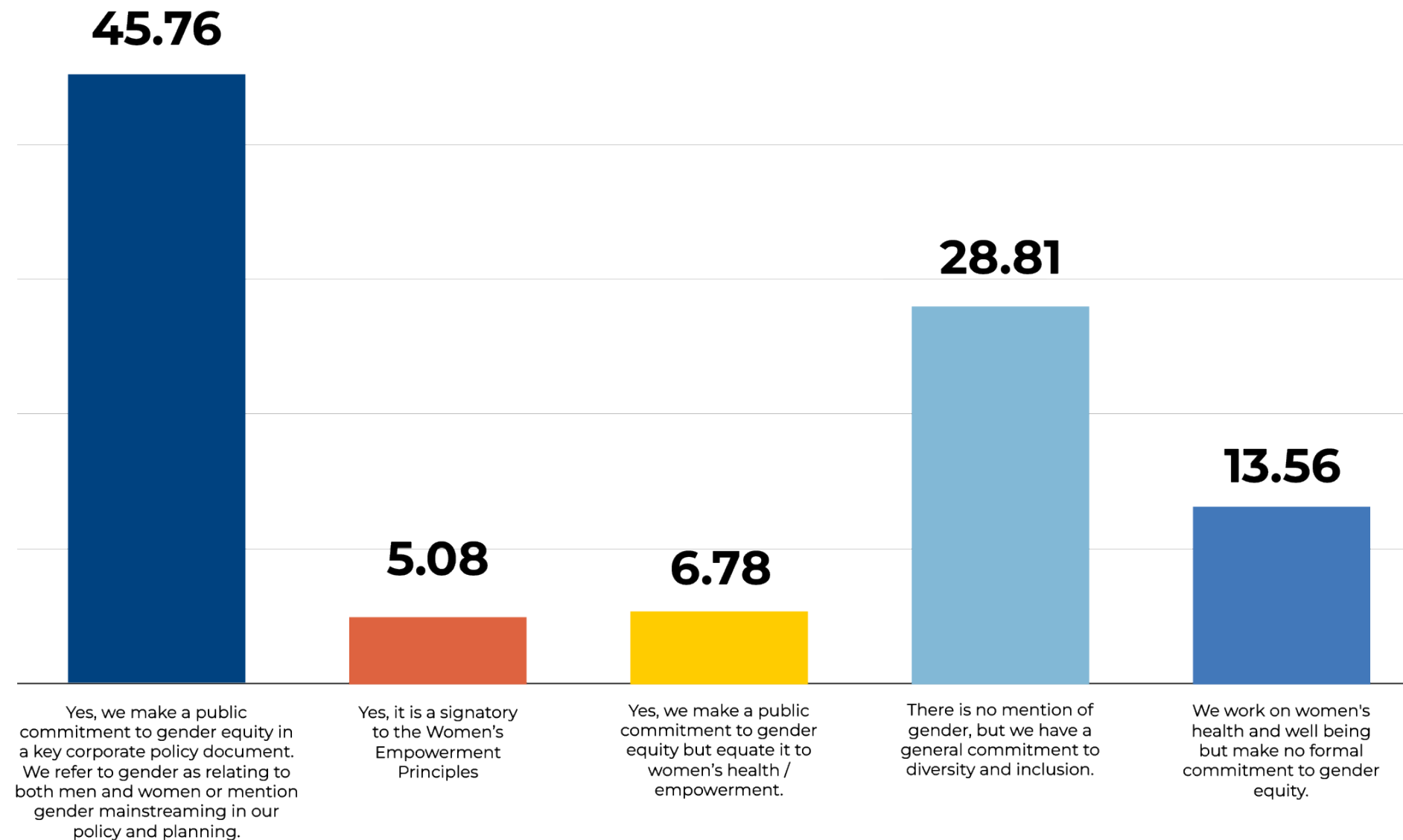
# **FULL RESULTS FOR 2022**

# **POLICIES AND DATA**



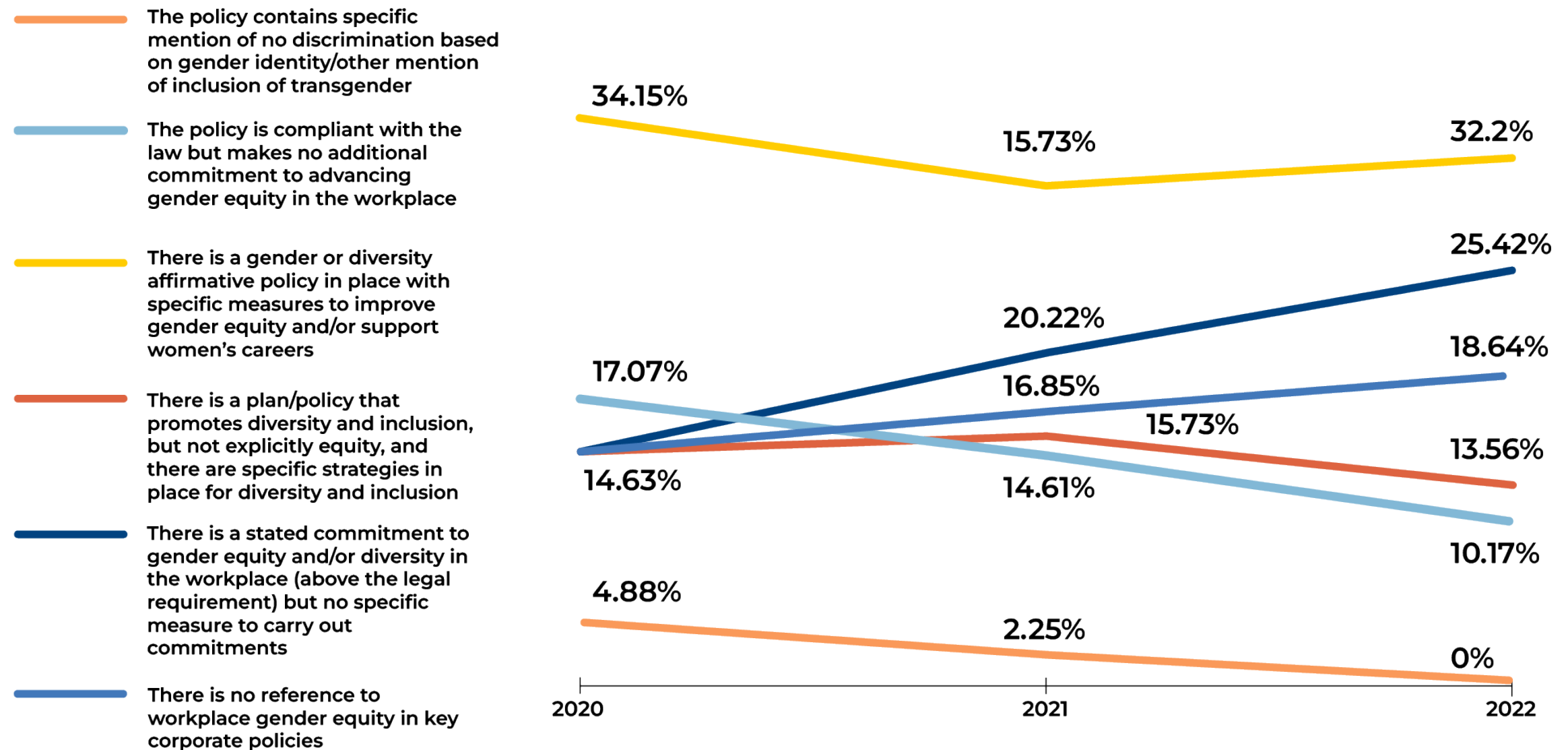
**2022:**

# Has your organisation made a public statement of commitment to gender equity?



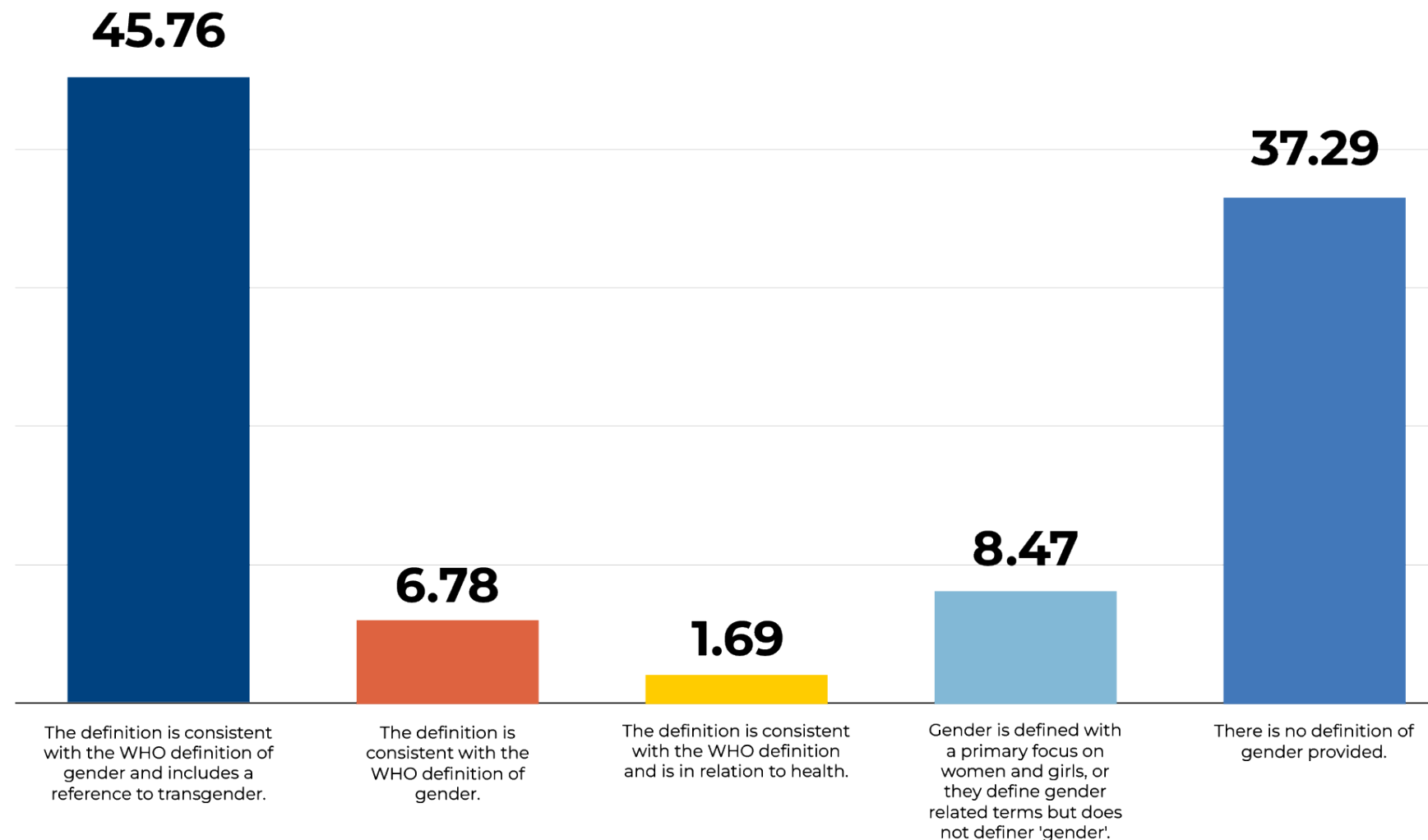
# 2020 – 2022

## Has your organisation made a public statement or commitment to gender equity?



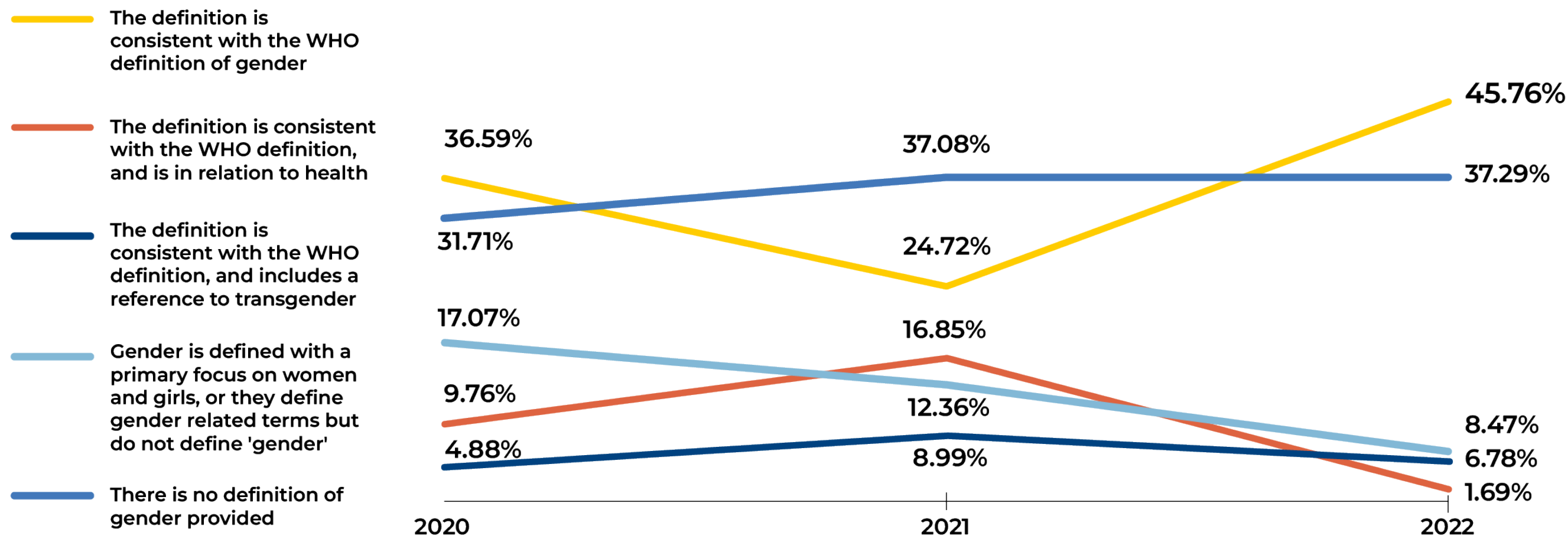
**2022:**

# **Does your organisation define gender in its institutional policies in a way that is consistent with global norms?**



# 2020 – 2022

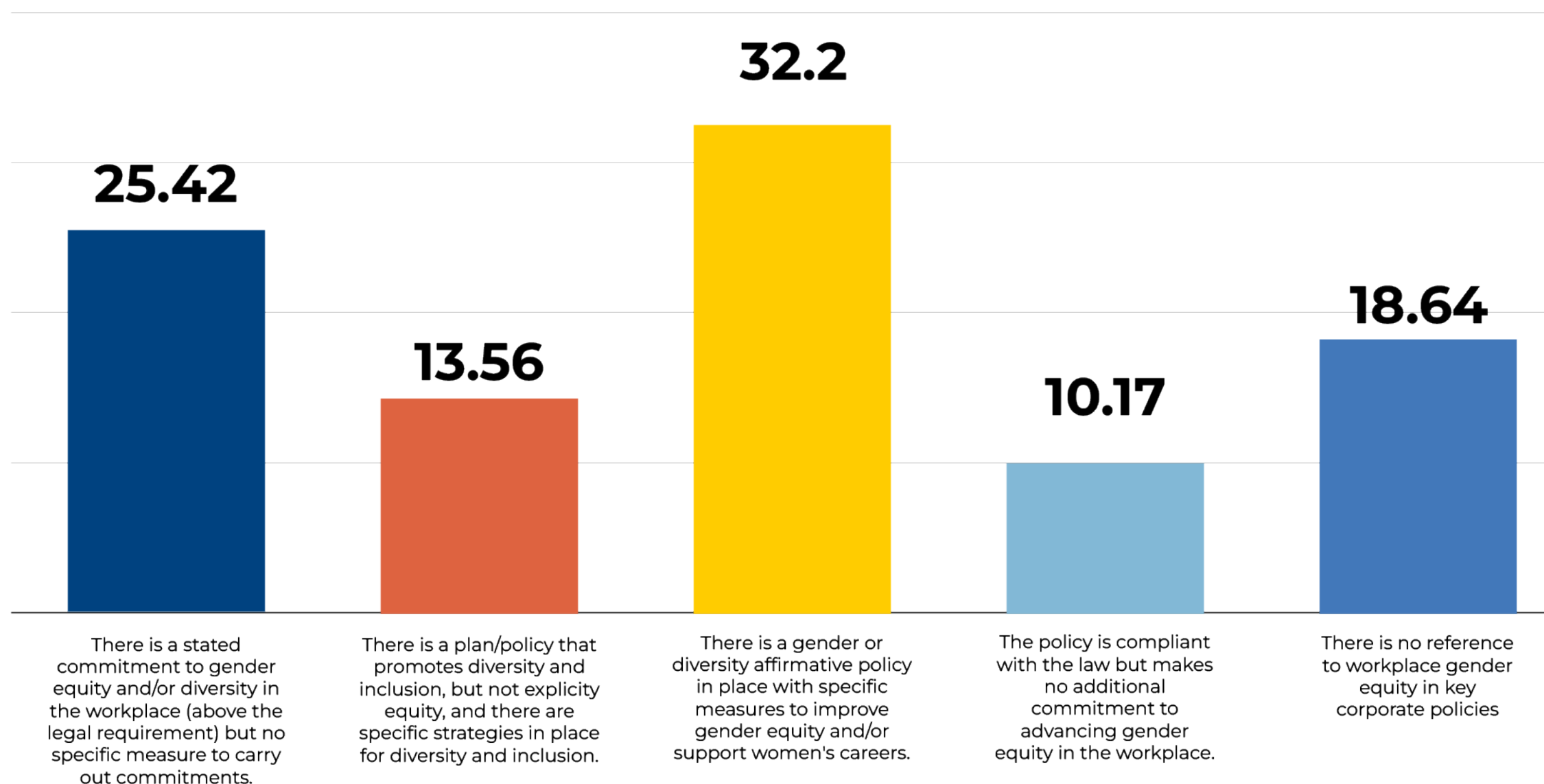
## Does your organisation define gender in its institutional policies in a way that is consistent with global norms?





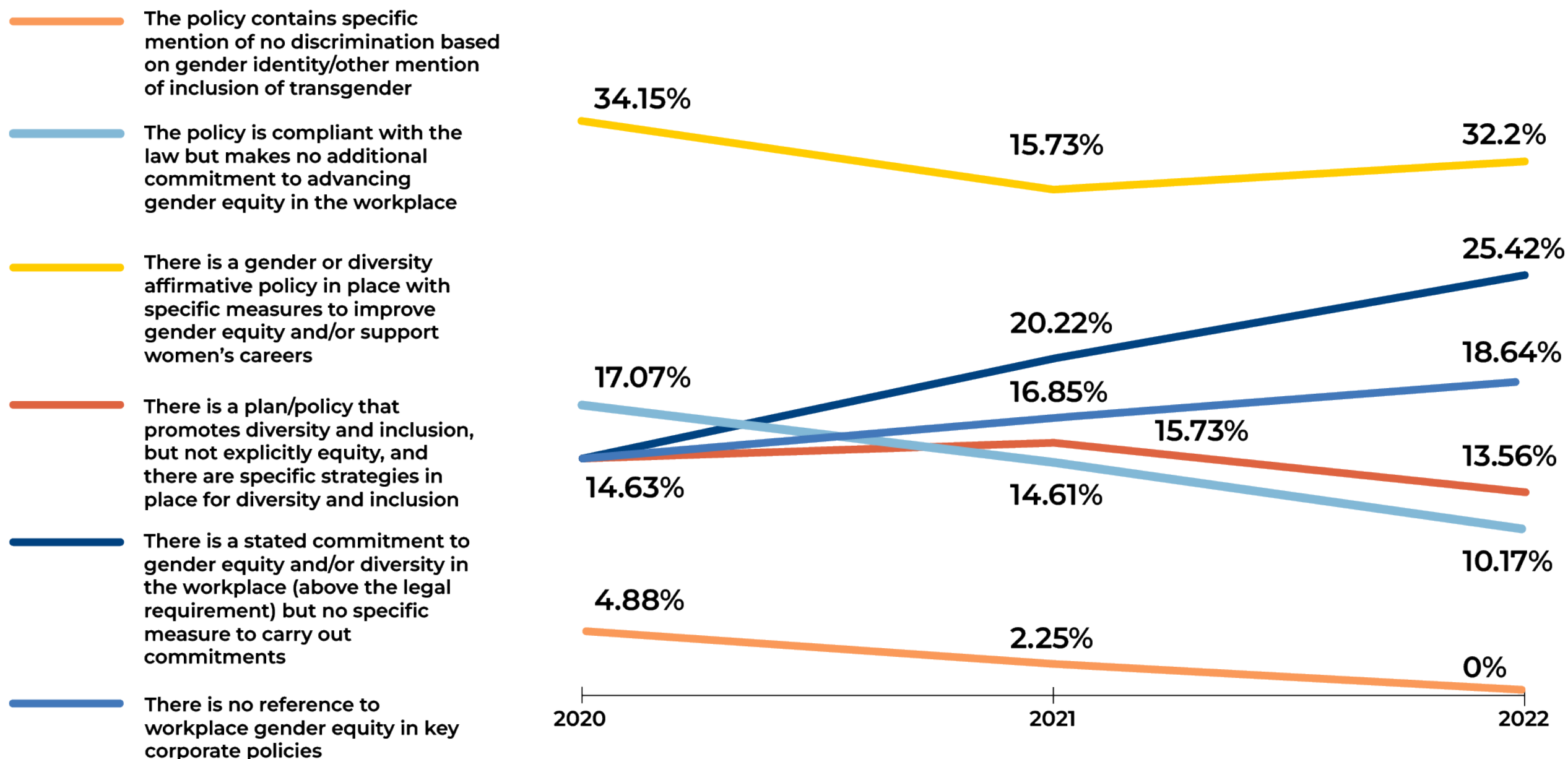
**2022:**

# Does your organisation have a workplace policy on Gender Equity?



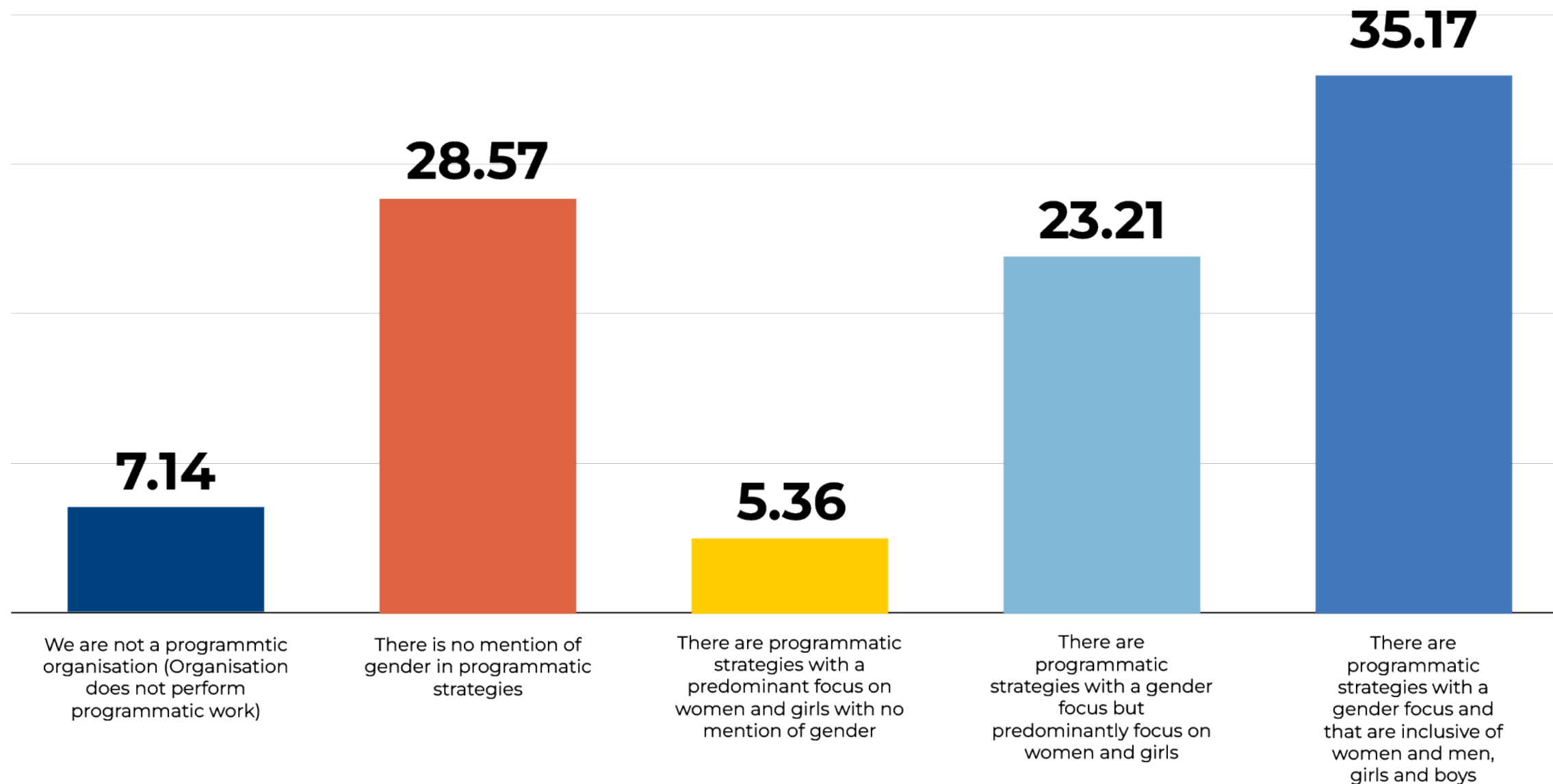
# 2020 – 2022

## Does your organisation have a workplace policy on Gender Equity?



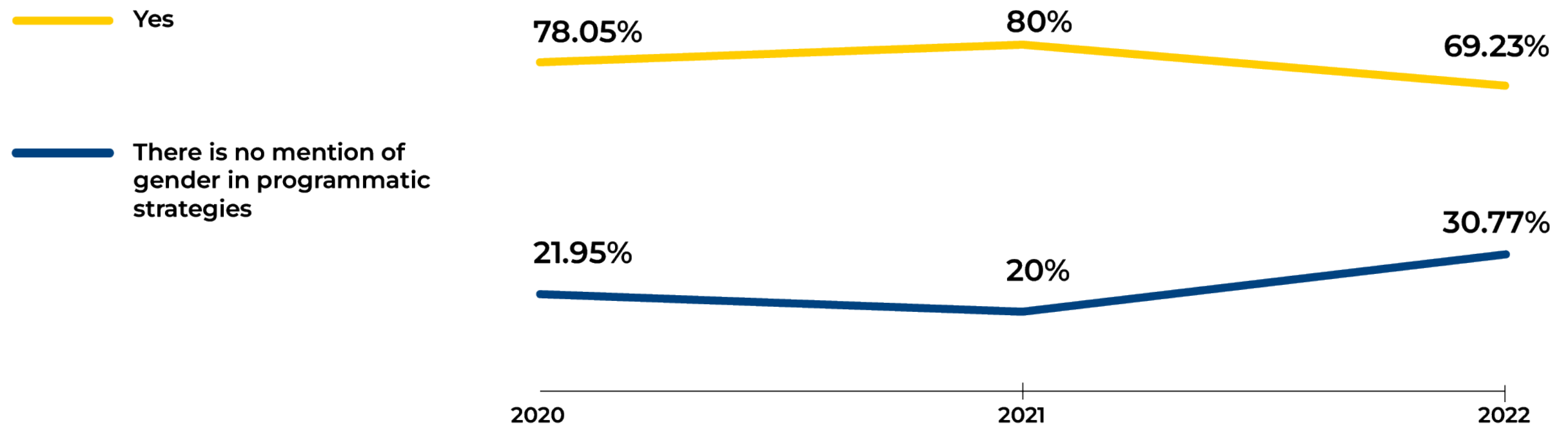
**2022:**

# **Does your organisation have a programmatic strategy on Gender Equity?**



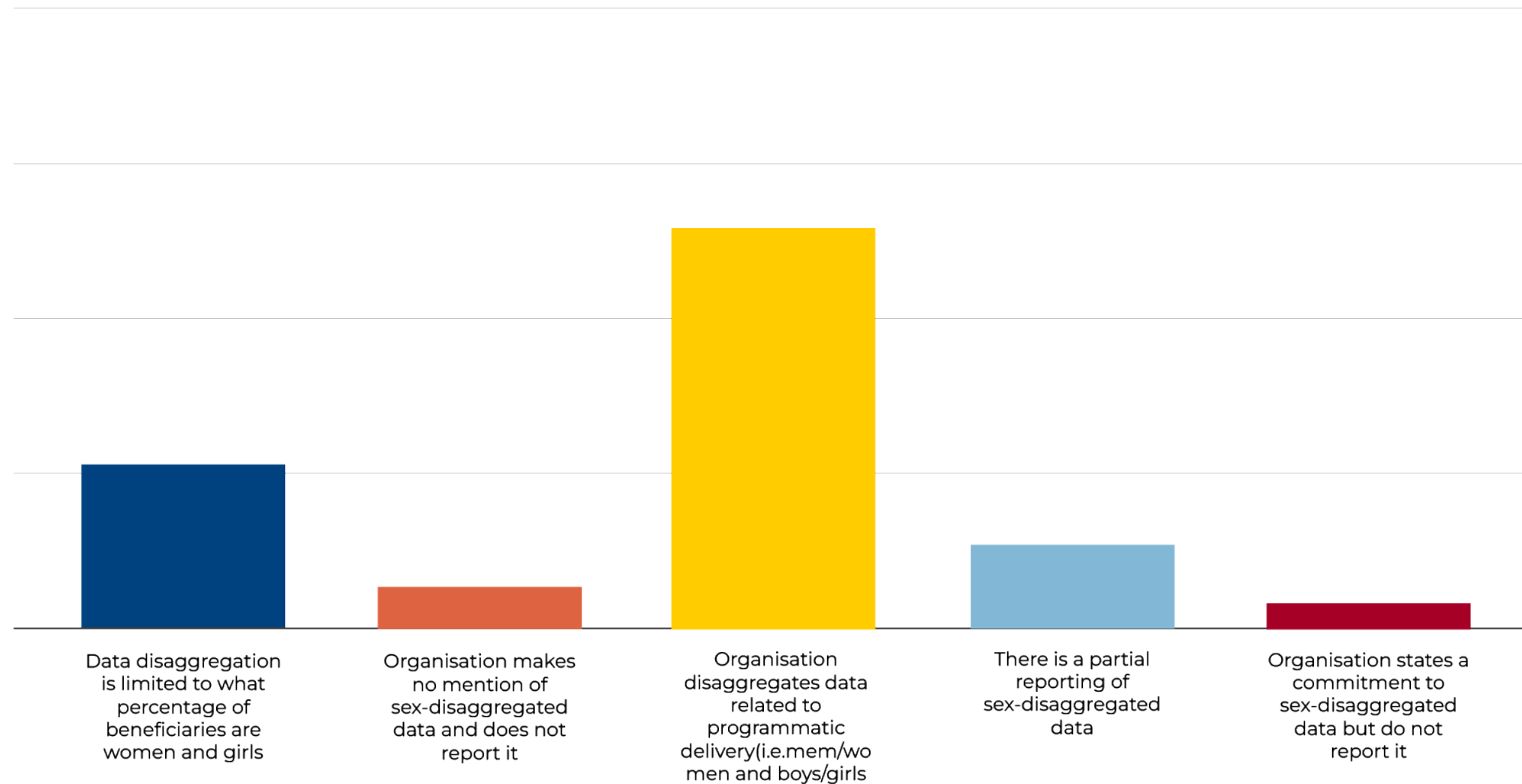
**2020 – 2022**

# **Does your organisation have a programmatic strategy on Gender Equity?**



**2022:**

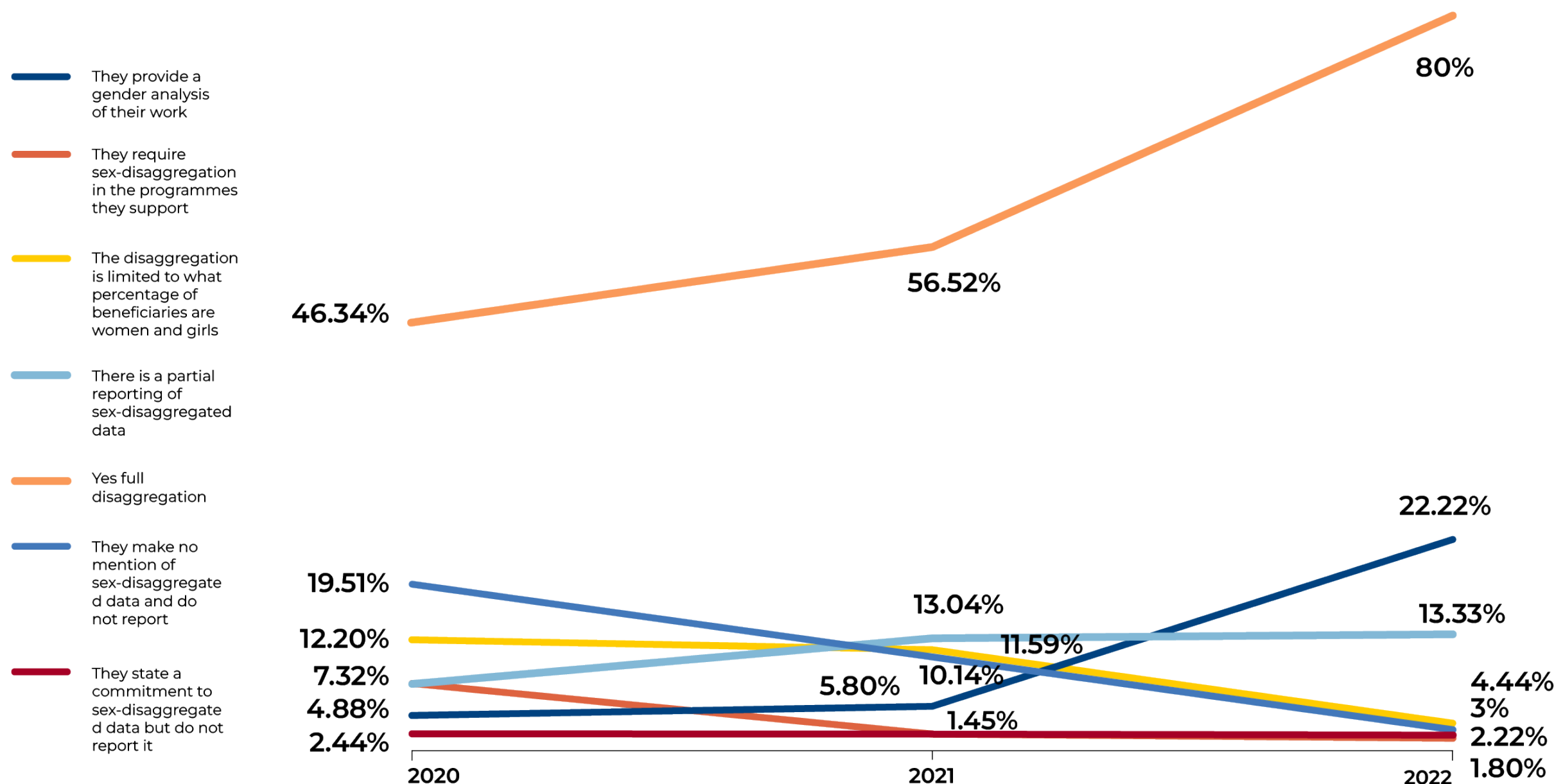
# **Does your organisation disaggregate its monitoring and evaluation data by sex?**





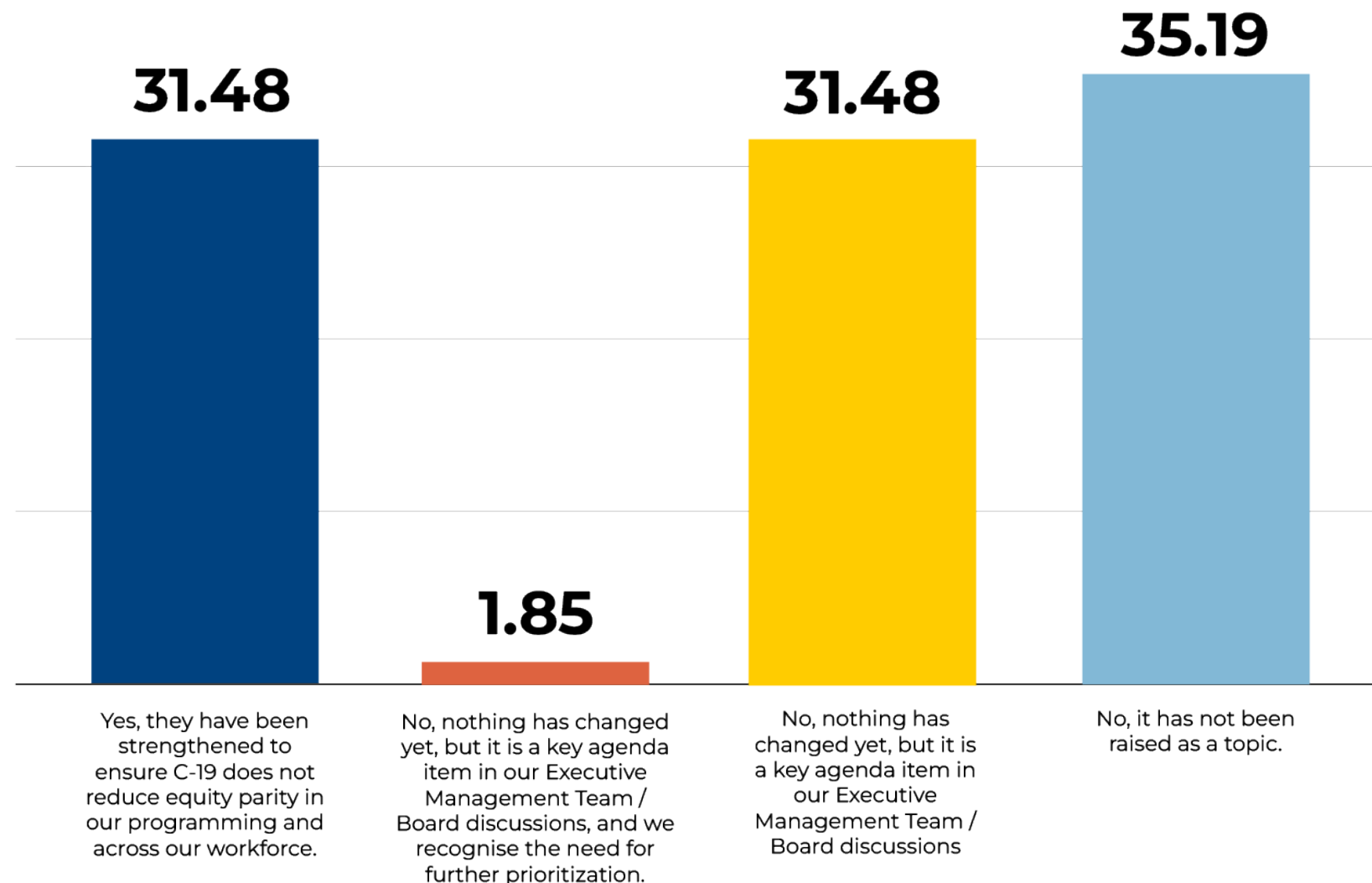
# 2020 – 2022

## Does your organisation disaggregate is monitoring and evaluation by sex?



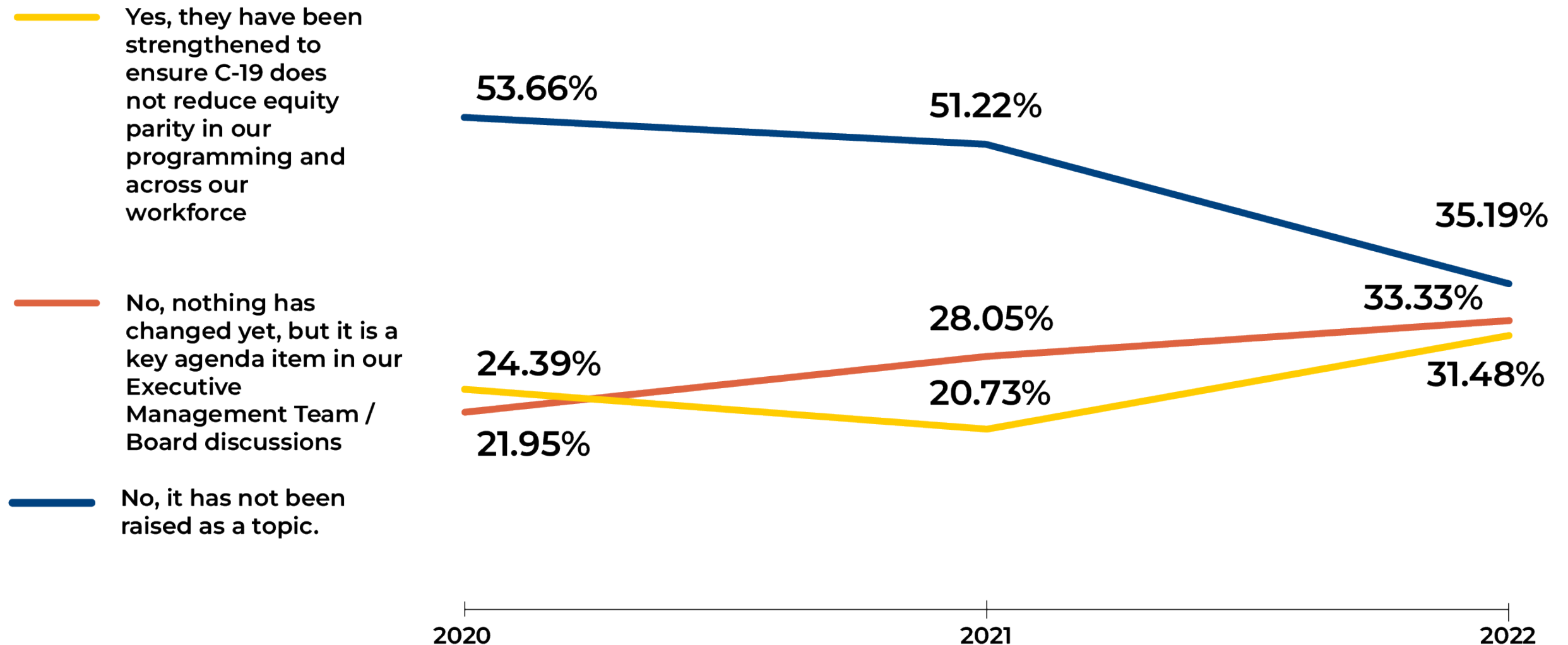
**2022:**

**Has your organisation made any direct changes to its existing policy(ies) that reference gender equity since the Covid-19 pandemic began?**



# 2020 – 2022

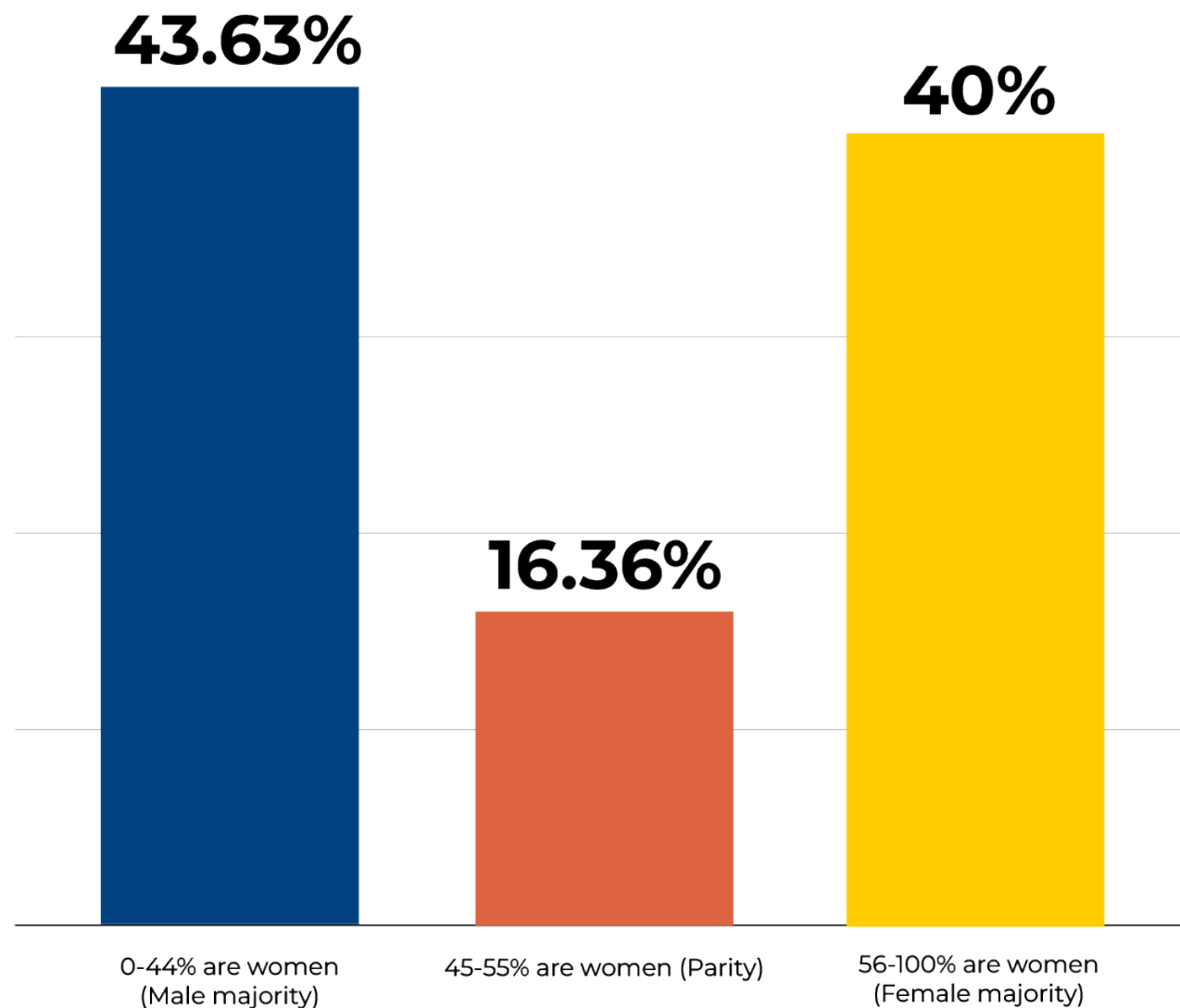
## Has your organisation made any direct changes to its existing policy(ies) as a result of the pandemic?



# LEADERSHIP

**2022**

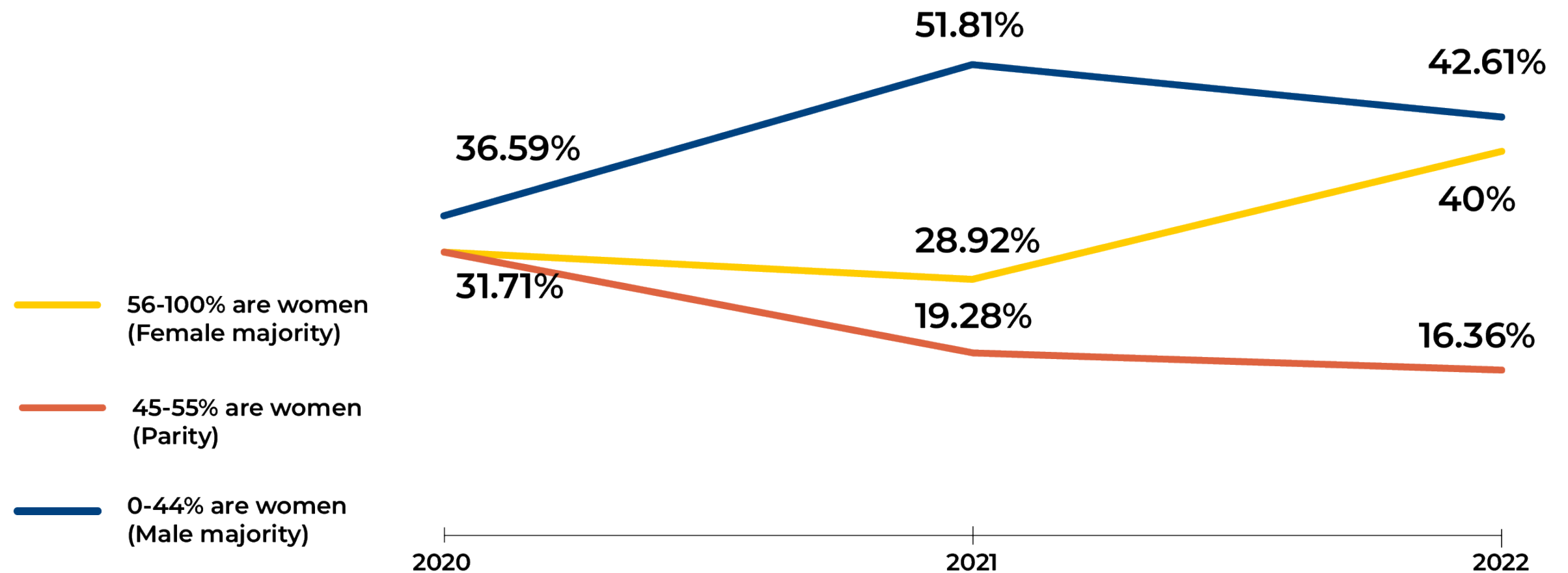
## **How many women are in your Senior Management Team?**





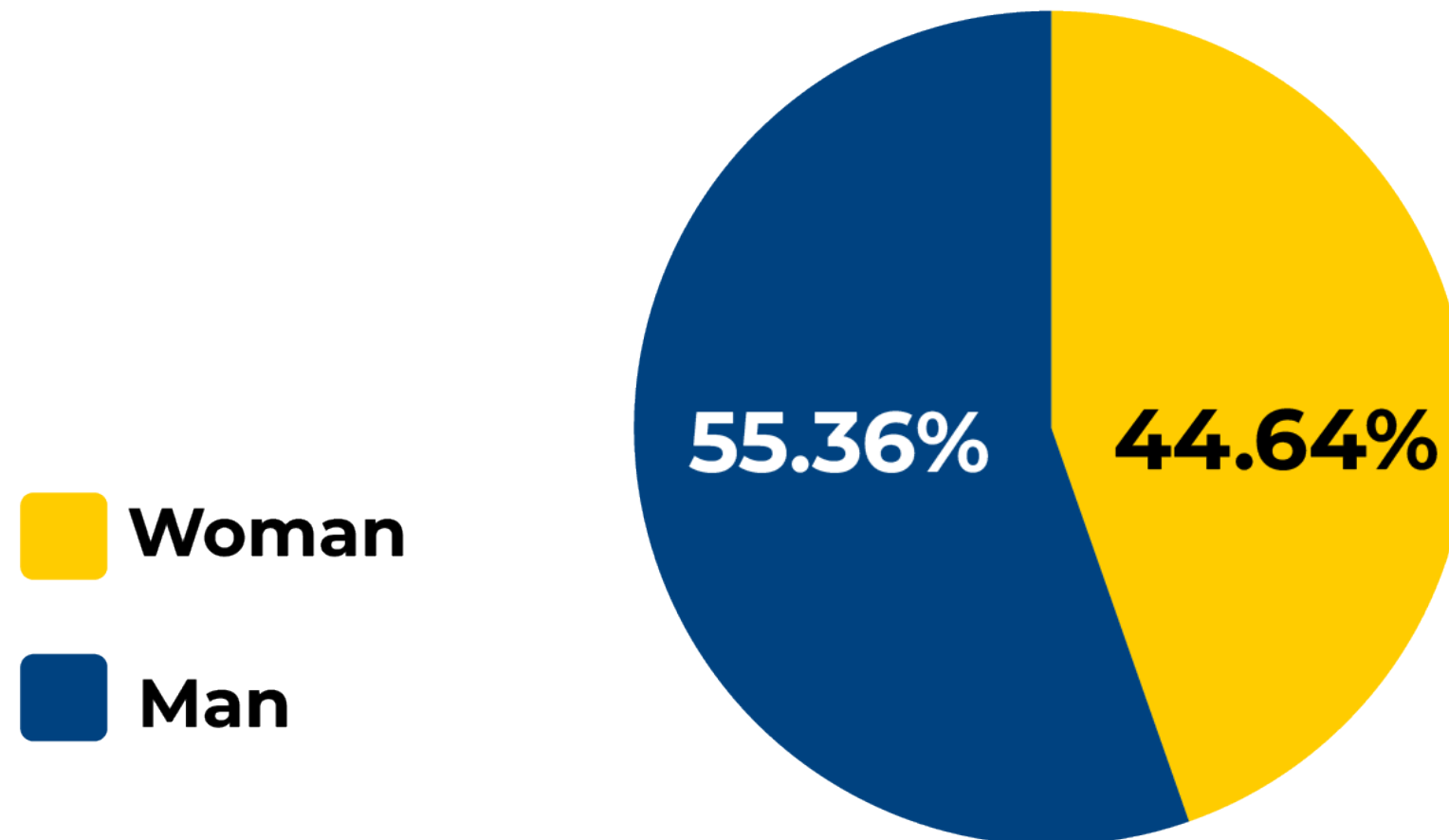
## 2020 – 2022

# How many women are in your Senior Management Team?

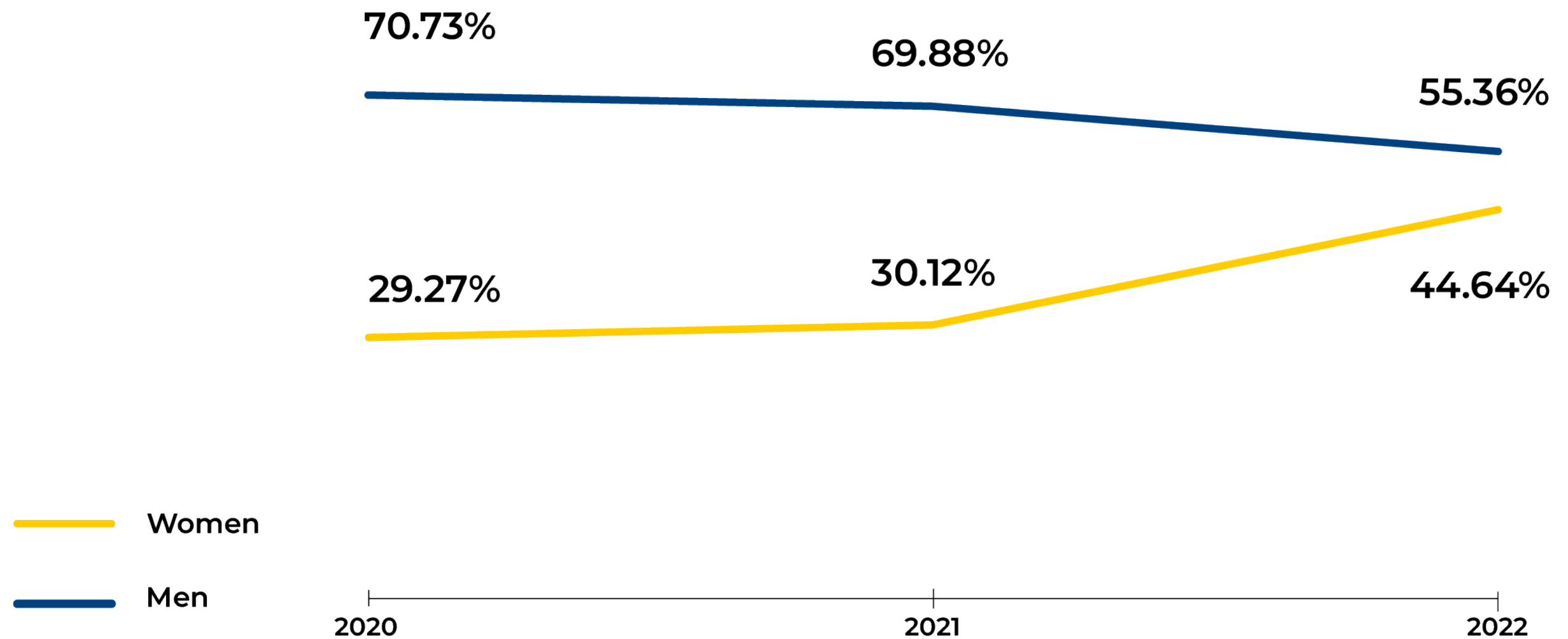


**2022**

## **Gender of Executive Head of Organisation**

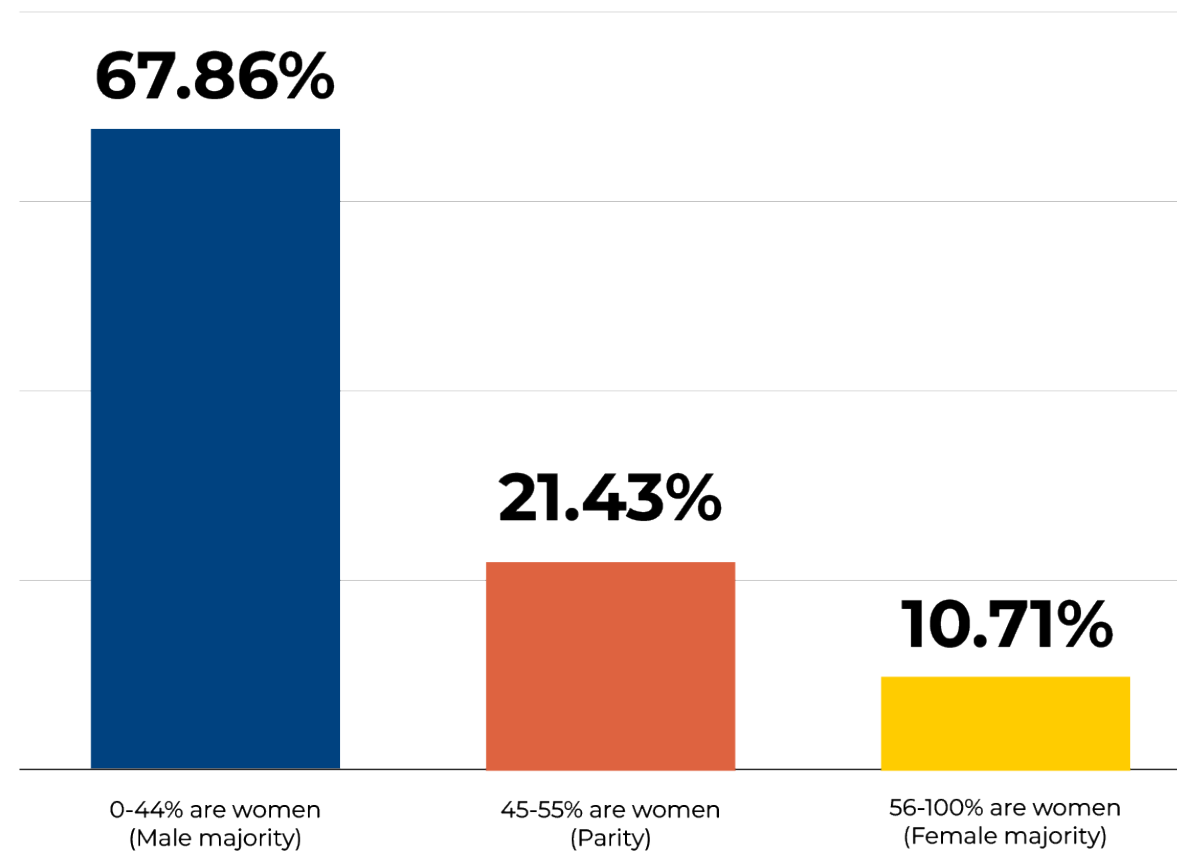


## % Gender of CEOs over the past three years



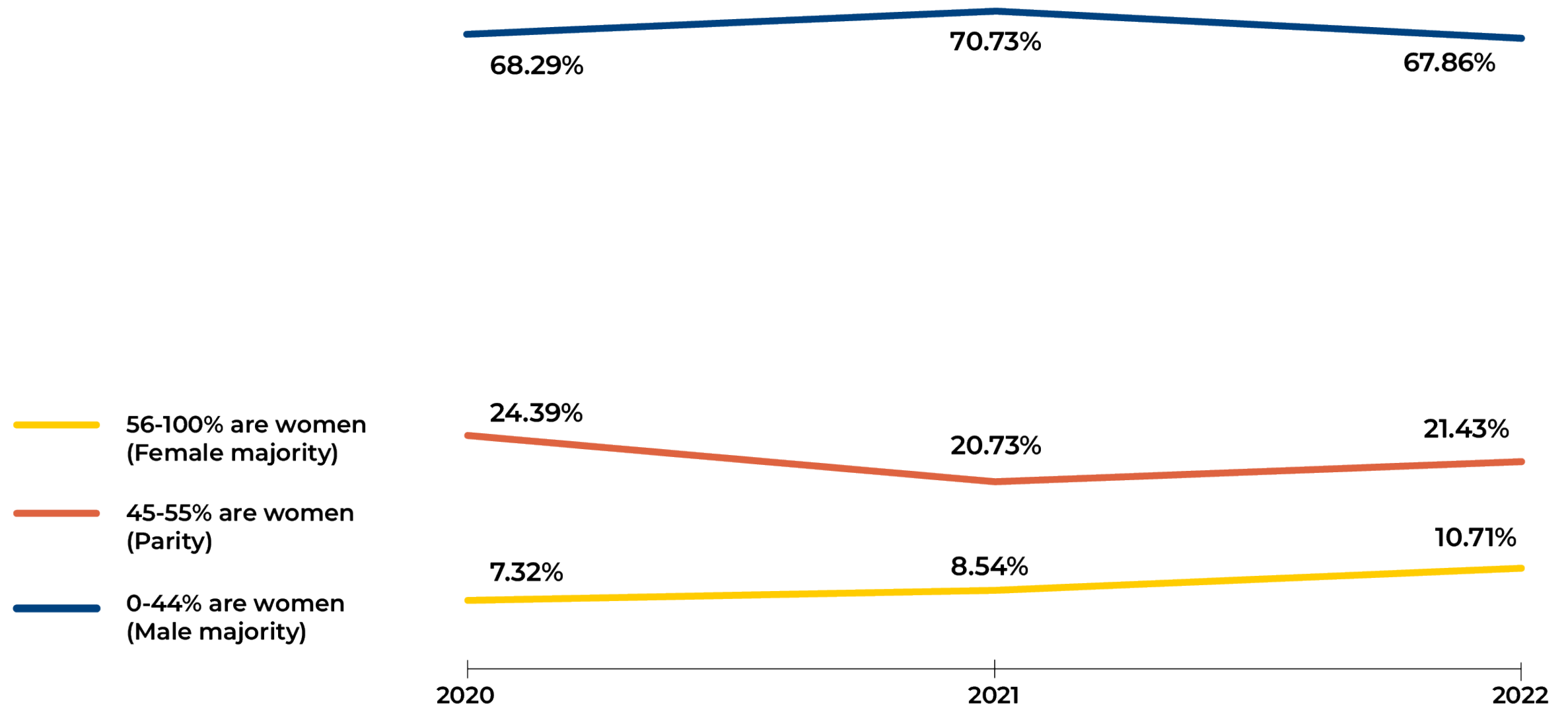
**2022**

## **How many women are on your Board?**



# 2020 – 2022

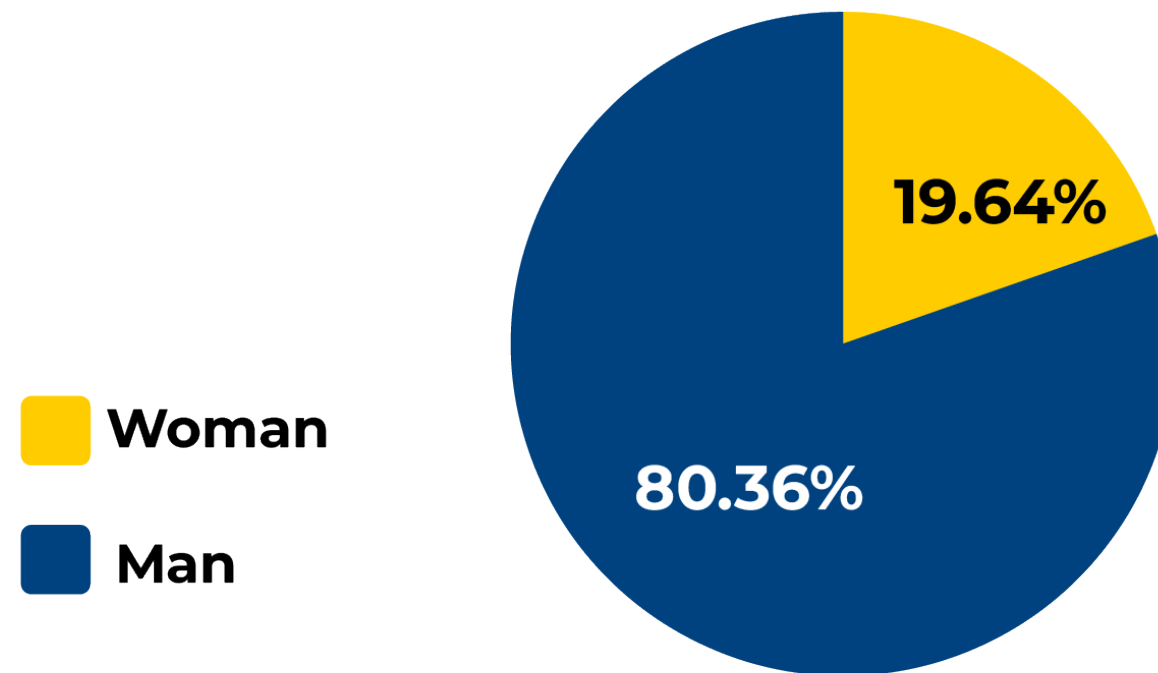
## How many women are on your Board?



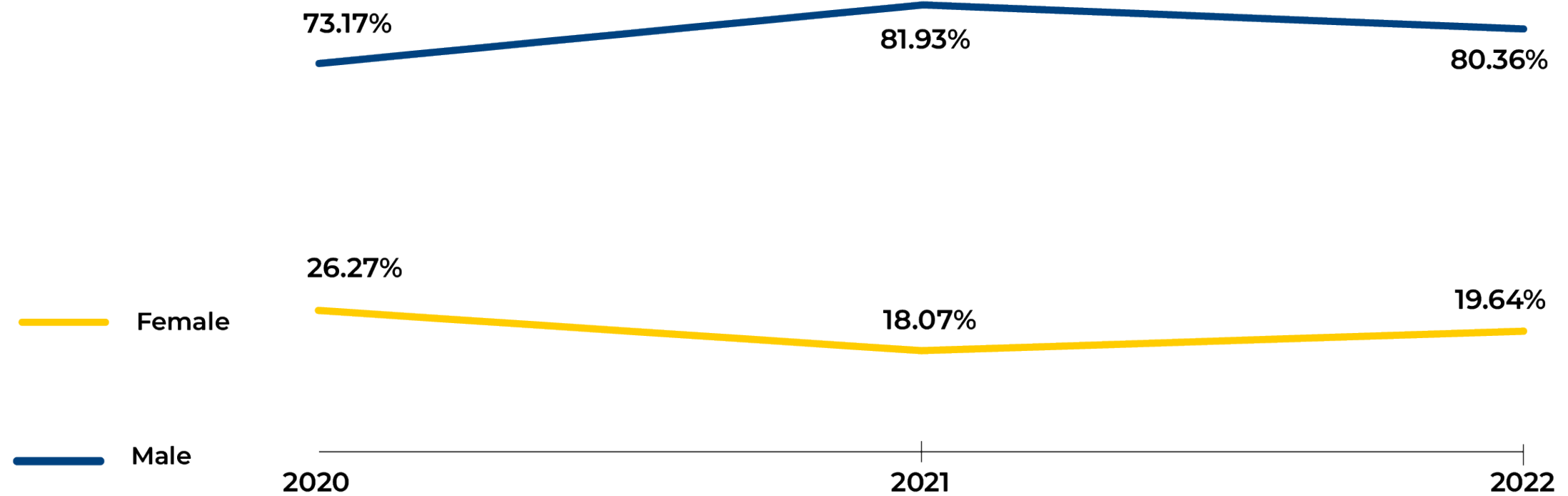


# 2022

## Gender of Board Chair



# % Gender of Board Chairs over the past three years



A photograph of two elderly women sitting on a wooden floor. Both women have white patches covering their eyes. The woman on the left is wearing a dark vest over a light-colored lace-trimmed top and a light-colored skirt. The woman on the right is wearing a dark, ruffled top and a dark skirt with a large floral pattern. The background is slightly out of focus, showing a doorway and some furniture. The entire image has a blue color overlay.

**THANK YOU**

Photo submitted by: Patrick MacGowan to the IAPB World Sight Day Photo Competition