**Identify Evidence Base and Gender Context in:**
- Lack of guidelines on engaging men in GBV response
- Lack of laws and policies on GBV/gender in health sector
- Laws that support early marriage
- Men less likely to be educated about RMNCH due to gender roles and norms
- Women lack decision-making power to access or utilize services
- Women lack leadership in the community
- Disrespectful, gender discriminatory, and abusive attitudes of health workers
- Laws that support equal rights, choice, access, participation and non-discrimination.

**Analyze the impact of gender constraints and opportunities on program objectives**
- Men may hinder RMNCH prevention and treatment practices
- Women are not able to access RMNCH services
- Women's RMNCH needs are not prioritized in the community
- Women's/mother's care groups
- Women may not want to seek services at the health facility, e.g., for labor and delivery
- Women's rights are not protected
- Women lack leadership in the community
- Men's participation in RMNCH
- Women as caretakers and men not
- Women's/mother's care groups
- Women lack decision-making power to access or utilize services
- Women lack leadership in the community
- Disrespectful, gender discriminatory, and abusive attitudes of health workers
- Laws that support equal rights, choice, access, participation and non-discrimination.

**Gender Integration in Program Design and Implementation**
- Activities are designed to:
  - Reduce/overcome gender-based constraints
  - Increase gender equality
  - Promoting gender equality through social and behavior change communication to facilitate healthy practices and uptake of services
  - Educating men and families about effects of gender-based mistreatment and violence on maternal and child health outcomes
  - Offering parenting courses for mothers and fathers that promote positive fatherhood, joint birth planning, and delaying and spacing pregnancy

**Monitoring, Evaluation and Learning**
- Sex-disaggregated data where relevant
- Gender-based constraints are reduced:
  - Number of countries where the program supported a gender analysis
  - Number of districts with a gender strategy
  - Number of people who have completed gender norms changing activities
- Percentage of women allowed a companion at birth
- Percentage of women who experienced disrespectful care or abuse during their most recent delivery in MCSP-supported areas
- Number of countries that have integrated GBV screening/services into ANC services with MCSP support
- Gender equality has improved:
  - Percentage of currently married women who participate in decisions about their own health care in the program supported areas
  - Increased knowledge of effective gender integrated programming

**Changes in Behavior**
- Men and women identify equitable responsibilities in RMNCH
- Equal education about RMNCH in men and women
- Increased use of FP
- Adult and adolescent women and men freely access services
- Reduced gender-based mistreatment and violence
- Men's participation in fatherhood and caregiving

**Normative and Structural Changes**
- Improved RMNCH outcomes measured by:
  - Reduction in:
    - Maternal mortality ratio
    - Neonatal mortality ratio
    - Under 5 mortality rate
    - Unmet need for FP
    - Total fertility rate
    - Adolescent birth rate
    - Stunting
    - Anemia increase in:
      - Proportion of births attended by skilled health personnel
      - Contraceptive prevalence rate
      - ANC coverage
      - Proportion of children fully immunized
      - Increased gender equality:
        - Education
        - Opportunities
        - Access to assets
        - Decision making and power

**Health System**
- Assessments and Analysis
- Input
- Output
- Outcomes
- Impact

**Individual**
- Health System
- Household
- Community
- Health Facility
- Laws and Policies

**Health Sector**
- Access to assets
- Knowledge, beliefs and perceptions
- Practices, roles, participation
- Legal rights and status

**Gender**
- Male
- Female

**Health**
- Facility
- Community
- Household

**Implementation**
- Support the development and/or implementation of gender-sensitive policies and guidelines into service delivery guidelines and quality improvement tools

**Evaluation**
- Learning
- Monitoring, Evaluation and Learning

**Outcome**
- Accessible
- High quality
- Efficient
- Non-discriminatory
- Promote gender equity