



CENTRE OF EXCELLENCE IN REPRODUCTIVE HEALTH INNOVATION (CERHI)

GENDER POLICY

OCTOBER, 2014

Table of Contents

1. CERHI: An introduction
2. The context: Women's Position in Nigeria
3. Rational for Gender Policy in CERHI
4. Gender Policy:
 - Goal/Objectives
 - Components
5. Gender Strategies
 - 5.1. Organizational Level
 - 5.2. Programs and Stake Holders Level
 - 5.3. Mechanism to ensure Gender Equity both at the Internal and External Level.

BRIEF NARRATIVE SUMMARY OF UNIBEN CERHI

Background

Reproductive health (RH) has been defined as: “a state of complete physical, mental and social well-being and not merely the absence of diseases or infirmity of the reproductive system”. RH addresses the reproductive processes, functions and systems at all stages of life, and includes fertility regulation, safe motherhood, infant and child survival, sexually transmitted disease including HIV/AIDS, and the prevention of unsafe abortion. The World Health Organization (WHO) estimates that RH accounts for about 20% of the global burden of disease. As a result of its effects on population dynamics, its practice is a central consideration in global development. It was therefore not surprising that five of the eight Millennium Development Goals agreed to by world leaders for promoting global development at the turn of the new Millennium were founded on the principles of RH.

A major development challenge in West Africa is the poor state of reproductive health as evidenced by high rates of fertility, maternal mortality, and unsafe abortion in the region. All of the 15 countries in West Africa have some of the lowest contraceptive prevalence rates and highest population growth rates in the world, a situation which presents huge economic and social burden with adverse consequences for the region’s growth and development. Nigeria as an example currently has the second highest number of maternal deaths, the highest number of infant deaths and the second highest burden of HIV/AIDs in the world. The country also has the highest number of under-aged marriages, gender-based violence, and sex trafficking in Africa. Despite this high burden of reproductive ill-health, Nigeria has yet to integrate RH into its health and educational system due to a deficit of qualified human resources to address this developmental challenge. There are currently limited educational programs that build the capacity of undergraduate and post-graduate students to undertake service delivery and research for the purpose of improving key indicators of RH in the region. There is a need to raise an adequate number of human resources to develop and implement appropriate policies and programs for reducing rapid population growth and advancing growth and development in the region. It is only through such efforts that the region will witness genuine growth and planned comprehensive development anytime soon.

Programme Goal: The Centre of Excellence in Reproductive Health Innovation (CERHI) will build capacity within West Africa’s tertiary educational system for implementing high quality training and applied research for reproductive health professions to tackle policies and programs for reducing the region’s high burden of fertility, unsafe abortion, maternal mortality and HIV/AIDS.

CERHI’S Mission: To implement high quality training and applied research for reproductive health professionals needed to build a new cohort of human resource for reducing the region’s high burden of fertility, unsafe abortion, maternal mortality and HIV/AIDS.

CERHI’S Vision: To be a leading institution providing innovative and transformational changes on matters relating to population and development and the improvement of the living standards of citizens in Africa.

Specific Objectives of the Centre include the

- 1) Training of students and technical experts/policymakers through short courses on relevant fertility, maternal mortality, HIV/AIDS and reproductive health policy topics in the

region.

- 2) Training of Masters in reproductive health, public health, health economics and nursing.
- 3) Training of PhDs in reproductive health, public health, and nursing.
- 4) Development of regional laboratory capacity to support HIV/AIDS and other reproductive health related problems.

Methodology: Under CERHI, short term courses, Masters and PhD courses of study in RH, public health, nursing, health economics, and reproductive health law will be re-designed and reviewed at 3 levels: first by the individual departments, followed by a curriculum review workshop involving regional, selected international partners and industry stakeholders and sector planners which is a novel approach to curriculum development. Finally, the Departments will team up with identified international partner institutions to finalize the curricula and the Center will then be responsible for coordinating the execution of these novel programs. The idea is to ensure that the curricular meet specific regional development needs, and that they are relevant globally to resource limited settings and are of sufficient quality they can be accredited by international accreditation bodies. Through CERHI's regional and international collaborations the best of the region's resources will be brought together making it a true Centre of excellence in the discipline of reproductive health. New applied research methodologies will also be developed and staff will be trained to use both the curricular as well as these methodologies. Faculty and students will be recruited from the West African region to build regional capacity and collaboration.

Partnerships: The center will seek national, regional and international partnerships that will enhance the learning environment for students, promote faculty development, collaborative applied research and new knowledge in the field of reproductive health. The project Departments at UNIBEN and in regional partner institutions are: Public Health, Health Economics, Reproductive Health and Nursing. The national university partner institutions are the University of Ibadan (UI) (coordinated by Prof A. Oladokun) contributing faculty in public health, health economics, nursing faculty and co-supervision of masters and PhD students and the Ahmadu Bello University (ABU) (coordinated by Dr Nana Madugu) which will provide a relevant site for short term courses especially on high fertility as well as co-supervision of masters and PhD students. The national public partner the National Institute for Medical Research (NIMR) (coordinated by Dr AG Ohihoin) provides a site for outreach periods for faculty and students, laboratory capacity for HIV/AIDS research and location for short courses in laboratory medicine. We will also involve private industry partners including General Electric Healthcare, Phillips International, Thomson Reuters, EMZOR and Fidson Pharmaceuticals which provide opportunity for outreach periods in new reproductive health technology field that impact on the provision of family planning and reduction of maternal mortality. In Nigeria, the non-governmental and civil society organizations provide the majority of reproductive healthcare. Outreach periods for students with these groups will provide opportunity for thesis project sites and for practical experience working in the RH sector.

Regional partners include the University of Benin in Cotonou (UBC) which would co-supervise thesis students and provide faculty for exchange in the area of public health. The University of Ghana (UG) (coordinated by Professor Richard Adanu) would provide for faculty exchange in public and reproductive health, undertake joint research projects and co-supervision of thesis

students as well as share research facilities. The University of Niger would provide a site for collaborative research for student and faculty projects and faculty exchange. The regional research lab the Navrongo Institute will be a partner for outreach periods for faculty and students to strength laboratory skills.

The key international partner institutions whose faculty would be engaged in the project include:

The Queens University, Belfast, United Kingdom (Coordinator - Professor Yun Yun, Professor of Toxicology) will collaborate in the area of advanced nursing degrees, Harvard School of Public Health in public health and reproductive health, the University of Toronto in reproductive health law and the University of Maryland reproductive health applied research.

University of California, Berkeley, USA, (Coordinator - Professor Malcolm Potts, Emeritus Professor of Obstetrics and Gynaecology), University of Alabama at Birmingham, USA (Coordinator - Prof Andrzej Kulczycki, Professor of Health Care Organization and Management) and the African Academy of Public Health, Dar es Salaam, Tanzania (Coordinator - Dr. Mary Mwanyika-Sando, Deputy CEO)

The international partner institutions will work with specific Departments within CERHI to review and develop new curricula, conduct trainings and collaborate in running short courses and provide additional mentorship to PhD and Masters Students, and participate in students/faculty exchange and visits.

Important Changes Made: The University of Benin strongly believes that CERHI will make significant contributions to improving the quality of training of reproductive health professionals in West Africa through improving training, applied research and research infrastructure. This center will implement new short courses, masters degrees and PhD degrees in public health, nursing, reproductive health and health economics. Within the university, the academic approval system has fast tracked the center processes by designating individuals devoted to center related tasks allowing rapid development of the center. A key strategy to this is pooling resources from partner institutions for sensible and cost-effective use of faculty for teaching and student thesis mentorship. These partnerships between national, regional and international institutions will distinguish the Centre ensuring that it makes a sustainable contribution to reducing the present high rates of fertility, maternal mortality, unsafe abortion and HIV/AIDS in the region.

Key Outputs for CERHI's activities

The Key Outputs for CERHI's activities include the following:

1. New Masters and PhDs programmes in reproductive health, public health, nursing and health economics
2. Staff and students participating in outreach experience into the private sector and other regional partners
3. Delivery of short courses on reproductive health related topics.
4. Formation of regional partnerships to increase regional faculty and students at the center
5. Increased academic productivity by center student and faculty through academic paper output and research grant applications

2. The context: Women's Position in Nigeria

The women in Nigeria are extremely disadvantaged in terms of social and economic development indicators. Their low status in the society is due to low literacy rates, life expectancy, and most importantly lack of access to economic and informational resources. In Nigeria patriarchy finds expression in the perceived notions of female dependence and subordination. The practice of patriarchy creates in the minds of woman, whether mother, wife or daughter, a feeling of worthlessness, servitude and dependence within the family. The role of women is characterized by lack of freedom and limit individual development. The existing inequality is deemed to be the outcome of specific social institutions designed to restrain their power: namely, segregation and legal subordination in the family and social structure.

The biological or physical difference between man and woman is often interpreted in accordance with the patriarchal notion that men are superior to women. Patriarchal ideology influences and shapes the sexual division of labor where work is allocated on the basis of sex, within both the home and the workplace. The son is viewed as the sole supporter of his parents in their old age. A daughter on the other hand, merits an altogether different treatment. As a result of the prevailing negative attitude towards the female sex, it is common for mothers -to-be in Nigeria to suffer from the anxiety over the sex of the unborn child. The desire for sons is so intense that the birth of a daughter can have serious consequences on the marriage itself.

The UNDP Gender-related development index (GDI) ranks Nigeria at 139th position out of 157 countries (UNDP 2008). This poor ranking is the result of the relatively low index value arising from the low literacy rates and the low share of earned income of women compared to men.

Although, in recent years some attempts were made to bring women into the mainstream of events in Nigeria, they are yet to be incorporated in any significant numbers in the decision-making structures of the country. Women hold less than thirty five percent of senior positions in the civil service and their representation at the senior levels of the executive, legislature and judiciary is marginal. In terms of ownership of land and assets, men at all levels of society are better off than women, a significant portion of the people living in absolute poverty being women. Households headed by women are among the poorest in the country with 45 percent of female-headed households living below the poverty line.

Gender based violence, which often stems from existing socio-cultural attitudes that regard women as inferior to men, take place in various forms that include wife beating, rape, acid-throwing, trafficking, sexual coercion and harassment, as well as verbal and psychological abuse.

Despite some progress made in recent years, women in Nigeria continue to suffer severe forms of discrimination. In a culture that places greater value on boys than on girls, women experience discrimination and relative deprivation at every stage of their life cycle. They enjoy fewer rights and have access to fewer opportunities compared to their male counterparts. Women consequently have lower literacy rates, lower incomes, fewer assets and less access to productive resources. Women also experience higher levels of malnutrition and morbidity, female morbidity

being 14 percent higher than male. This difference is most pronounced during women's reproductive age (15- 49 years), when morbidity for women is 38 percent higher than for men. (UN, Nigeria, 2000)

3. Rational for Gender policy in CERHI

CERHI considers women as the gateway of bringing any change within the family and community level and so has taken efforts to direct resources and services to them. CERHI's focus on women is also based on the assumption that women are the main change agents both at the family and community level. Therefore, CERHI has to address their basic needs and upgrade their economic condition to improve their overall status in the family and community they live in. CERHI realized that women's mobility, decision-making power, access to resources are all controlled by men in their households and therefore redistribution of power through economic, social and political empowerment of women is essential to bring changes in the status of women.

CERHI strongly believes that the vital force of every organization is its people who engage in a collective effort to achieve a specific set of objectives. It is they who make the organization a living entity. Keeping this in mind, CERHI is constantly trying to increase the number of women at all levels of its projects. It was found in a research that once a critical mass of about 30-35% women in the organization, including at decision-making levels, has been achieved the organization as a whole becomes more accountable to the specific needs and interests of women.

CERHI, University of Benin Reaffirmation of Commitment to Equal Educational & Employment Opportunity

The Centre of Excellence in Reproductive Health Innovation (CERHI), University of Benin is committed to and will provide equality of educational and employment opportunity for all persons regardless of race, sex, age, color, national origin, ethnicity, creed, religion, disability, genetic information, sexual orientation, gender, gender identity and expression, marital status, pregnancy, or veteran status – except where sex, age, or ability represent bona fide educational or employment qualifications or where marital or veteran status are statutorily defined eligibility criteria for Federal or State benefit programs.

This affirmation is published in accordance with Article 17: Equality and Protection from Discrimination in the 1999 Constitution of the Federal Republic of Nigeria. The centre aims to achieve, within all areas of the university community, a diverse student body, faculty, and staff capable of providing for excellence in the education of its students and for the enrichment of the university community.

Statement on Diversity in the Centre

The Centre strives to foster and sustain an environment of inclusiveness that empowers us all to achieve our highest potential without fear of prejudice or bias. We commit ourselves to building an exemplary educational community that offers a nurturing and challenging intellectual climate,

a respect for the spectrum of human diversity, and a genuine understanding of the many differences-including race, ethnicity, gender, age, socioeconomic status, disability, religion or national origin -that enrich a vibrant metropolitan research centre. We expect every member of our academic family to embrace the underlying values of this vision and to demonstrate a strong commitment to attracting, retaining and supporting students, faculty and staff who reflect the diversity of our larger society.

Unlawful Harassment, Personal Discrimination, and Retaliation

The Centre's Discriminatory Harassment Policy reflects the commitment to maintain a community that is free from harassment of any kind. Harassment of any kind is not acceptable. It is inconsistent with the university's commitment to excellence and respect for all individuals. The university is also committed to protecting the academic freedom and freedom of expression of all members of the university community. Academic freedom and freedom of expression includes, but is not limited to, the expression of ideas, however controversial, in the classroom, residence hall, and in keeping with different responsibilities, in work places elsewhere in the university community. The Centre strives to provide equal employment opportunity on the basis of merit and without unlawful discrimination in terms of race, sex, age, color, national origin, ethnicity, creed, religion, genetic information, sexual orientation, gender, gender identity or expression, marital status, pregnancy, or disability of an otherwise qualified individual. The Centre shall make every reasonable effort to select all staff from applicant pools which are representative of the labor market in terms of sex, disability and tribe. Furthermore, the centre shall not subject employees to unlawful discrimination in terms of compensation, benefits, and/or working conditions.

For more information concerning ways in which our multicultural learning community may be nurtured and protected or complaint resolution procedures, contact the Dean of Student Affairs.

Some Guiding Principles followed in formulating CERHI's Gender Policy

- A focus on gender rather than women implies not looking at 'women' and women's issues in isolation but recognizing the different needs and interests of women and men in the context of power relations between them.
- A gender analysis of an organization examines the processes and interventions in and by the organization in terms of their effects on women, men and the relationships between women and men. It explicitly recognizes the unequal gender relations between men and women in society.
- Gender equality means equality between women and men at various levels: equal material welfare, equal access to resources and opportunities, a value system based on

the belief in equality, equal participation in decision-making, and equal control over resources and benefits.

4. Gender Policy:

4.1. Gender Policy Goal/Objectives:

- To ensure a Gender friendly environment within CERHI
- CERHI's Programs and Projects will be based on clear understanding on gender relations, roles and identities.
- Incorporating the concept of gender relations, roles and identities in designing and implementing program and project.

4.2. Gender Policy Components

4.2.1 Organizational Level

4.2.2 Program Level

4.2.3. Stakeholders Level

5.1. Organizational Level:

5.1.1 Governance (General Council and Governing Board)

5.1.2 Recruitment

5.2.3 Structure

5.1.4 Work Load

5.1.5 Staff Development

5.1.6 Staff Promotion and Transfer

5.1.7 Leave

5.1.8 Compensation Package

5.1.9 Transport Facilities

5.1.10 Child Care

5.1.11 Staff Counseling

5.1.12 Staff Safety

5.1.13 others

5. Gender Strategies and Approaches:

5.1 Organizational Level:

5.1.1 Governance

5.1.1.1 In the General Council and the Governing Board of CERHI there should be representation of women and men at least at 3:7 ratios.

5.1.1.2 There will be a gender advisor from Governing Board who will be responsible to see organizational gender issues. Gender core team is reportable to him/her about the practice of organizational gender policy. A yearly gender audit report will be prepared and submitted to the Advisor.

5.1.2 Management Position:

- To Encourage and creating scope to bring women at every level of management.
- A 3-member core team heading by a convener will be formed to ensure the practice of organizational gender policy. This committee will look after organizational gender needs and other related needs of all staff.
- A gender Audit will be done by this team every year and report will be submitted to CERHI governing board via advisor.

5.1.3 Recruitment:

- Using flexible terms and conditions for recruiting women staff.
- Special preference will be given to women candidates in the coming five years.
- Recruitment board will be constituted taking both women and men.
- Providing preference to a woman candidate over a male candidate when both of them are found equally competent.
- Recruit women candidate having lower education in some specific cases
- Recruiting advertisement will be made encouraging of women to apply.

5.1.4 Work Load:

- Same workload will be applicable for both male and female staff.
- Nature of job will be similar for the same position of the male and female staff.
- Workload will be reduced for female staff for their special time.
- Working distance in the specific field will be considered for female staff where the working field is scattered by consultation of other field staffs.

5.1.5 Staff Development:

- Equal opportunity for career development for male and female staff.
- Provide awareness to all staff about CERHI's gender policy.
- Provide awareness on recent gender issues to all staff.
- Provide special training for enhancing their skills.
- Facilitate dialogue among staffs in every branch office on gender related issues through workshops and seminars.
- Introduce a Gender Audit Committee (GAC) to address the special needs/problems of women staff in CERHI as well as organize gender workshops for them.

5.1.6 Staff promotion and Transfer:

- Preference will be given to a woman staff, if found competent, to promote in the next higher position.
- Transfer is applicable for both male and female staff. However, practical needs of women staff will be considered while transferring them.
- Organizational staff will be given privilege to apply to the higher position of the org. while a new recruitment will be made.

5.1.7 Leave:

- All staff will have equal access to general leave and benefits. However, the women staff will have maternity leave (91 days) and male staff will have paternity leave (twenty one days).
- Breast Feeding: Female staff will have one hour leave from her office duty during the first year of childbearing period. This facility will be applicable up to two children.

5.1.8. Compensation Package:

- All staff will have same level of salary structure at the same grade.

5.1.9 Transport Facilities:

- Women staff will be allowed to use taxi instead of riding motorcycle in culture sensitive rural areas.
- Both male and female staff at the field level will have access to taxi loan or motorcycle loan. Once 50% of the paid loan is realized then the staff can become owner of the transport.

5.1.10 Child-Care:

- Develop a child-care center for the children of the staff (if there is need)
- Children of CERHI staff who will occupy First, Second or third position in their final examinations, will be awarded prizes annually.

5.1.11 Staff Counseling:

- Encourages an open and participatory environment.
- Women's voice will be given due importance in meeting and decision making process.
- Ensure an environment, free from sexual harassment (which includes physical, verbal and non-verbal).
- CERHI will maintain a strict defined principle to deal with the cases of sexual harassment.
- CERHI will follow an open door policy to ensure access to the management by the staff at any level.
- Incorporate gender sensitivity as one component of staff performance evaluation.

- Primarily Unit In charge will be responsible to see gender issues of all staff especially sexual harassment and other safety issues. Moreover, there will be one person with whom the staff can openly talk and share about gender issues. Selected staff should be widely acceptable to other project staff. She/he will work as the gender focal point. He/She will be reportable to the convener of the gender core team.

5.1.12 Staff Safety:

- Provide required support/assistance to women staff in work especially during night travel and evening work.
- Allow flexibility for female staff during pregnancy and lactation period.
- There will be a provision for every staff to inform about his/her sexual harassment issue in a written form directly to the convener of gender core team.
- At the field level Unit In charge will be responsible to ensure the security of every staff.

5.1.13 Respectful Treatment:

CERHI Management believes that all individuals in the workplace have the right to be treated in a respectful and courteous manner. While new recognized that everyone is human and may have an occasional lapse, a patter of disrespectful behaviour will not be tolerated. Examples of behaviour that might be construed as disrespectful are:

- Shouting
- Swearing
- Reprimanding someone in front of others
- Using a Condescending or derogatory tone with someone.
- Intentionally hurtful and unprofessional emails

The ability to effectively and respectfully work with colleagues is a requirement of all positions; therefore, violations of this policy will be treated as serious performance deficiencies.

Harassment Policy: It is the policy of CERHI to ensure that all employees work in a positive and productive work environment free of harassment. All individuals should be treated with dignity and respect, and actions that may be viewed as harassment are unacceptable. It is in conflict with this policy for any employee, male or female, to harass another employee by:

1. Making unwelcome sexual advances or requests for sexual favors or other verbal or physical conduct of a sexual nature, a basis or condition for employment or continued employment, or
2. Making submission, or rejections of, such conduct the basis for employment decisions (vacations, promotions, schedules, etc) affecting the employee, or
3. Creating an intimidating, hostile, humiliating or sexually offensive work environment by such conduct, or
4. Making such advances, requests or conduct having the purpose or effect of unreasonably interfering with an individual's work performance.
5. Harassment does not have to be sexual in nature to be prohibited by this policy. CERHI prohibits harassment of any kind. Harassment may be defined as visual, verbal, or

physical conduct designed to threaten, intimidate, or coerce. Verbal taunting (including racial and ethnic slurs) which, in the affected employee's opinion impairs his or her ability to perform his or her job is included in this definition.

An employee who believes he or she has been subjected to harassment should report this immediately and directly to his/her supervisor. Such matters will be held in the strictest confidence possible, pending further investigation. Any supervisor, employee, or agent for CERHI who has been found, after appropriate investigation, to have harassed another employee, will be subject to appropriate action, which may include discharge.

Substance Abuse Policy and the Drug-Free Workplace Act: CERHI is committed to providing its employees with a safe workplace, and to promoting high standards of employee health. Consistent with the spirit and intent of this commitment, a formal policy has been established regarding drug and alcohol abuse.

While CERHI has no intention of intruding into the private lives of its employees, it is recognized that off-the-job as well as on-the-job involvement with drugs and alcohol has an impact on the work place. Consequently, our policy is as follows:

Employees are expected and required to work in appropriate mental and physical condition for work. It is our intent and obligation to provide a drug-free, healthful, safe and secure work environment.

The unlawful manufacture, distribution, dispensation, possession or use of a controlled substance on company premises or while conducting the organization's business off its premises is absolutely prohibited. Violations of this policy will result in disciplinary action, up to and including termination, and may have legal consequences.

The organization recognizes dependency as an illness and a major health problem. The organization also recognizes drug abuse as a potential health, safety and security problem. Conscientious efforts to seek such help will not jeopardize any employee's job and will not be noted in any personnel record.

Employees must, as a condition of employment, abide by the terms of the above policy and report to management any conviction under a State or Federal criminal drug statute for violations occurring on organization's premises or off its premises while conducting its business. A report of a conviction must be made within five (five) days after the conviction.

5.1.13 Others:

- Gender practical needs will be considered. For example, female staff during their menstruation period will be allowed to do deskwork for 3 days.

5.2 Programs and Stakeholders Level:

- Screen all programs/projects through genders lenses.
- Improve women's access to information by using various media.
- Address the special needs of women and children during emergency relief operations.
- Empower women through capacity building.
- Impart education on democracy and encourage women to participate in local elections. Therefore, consciousness will be given to the program stakeholders in the socio-economic and political issues.
- Provide legal aid support in partnership with other relevant organizations working on women's legal rights.
- Promote women's control over credit and income utilization and participation in family decision-making.
- Enhance women's confident and social dignity.
- Ensure women's access to safe health practice and services.
- Organize women through instituting.

5.3. Internal and External Strategy to ensure Gender Equity:

- Conduct internal gender audit of all its programs and projects.
- Support movements, which uphold women interest.
- Protest any anti-women declarations and actions.
- Maintains strategic alliance with key actors in the field of gender, such as women's organization or other organizations with gender expertise.

6.0 Other

- Promote exchange, dialogue and openness regarding gender issues
- Records of organizational work in the field of gender and making them accessible for the staff.
- Accommodate organizational learning on gender issues.