

Gender Action Plan

The Danish Committee for Health Education



1. Background

A. The Danish context

Gender equity is a fundamental pillar of Danish democracy. It is essential to the human rights agenda, sustainable human development, and economic growth. Denmark is highly committed to all gender-related international and European Union (EU) obligations, such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the 2030 Agenda for Sustainable Development, and EU gender equality action plans and strategies.

Denmark issued its first act on gender equality in 2000 based on the 1999 Amsterdam Treaty 1999 (European Institute, n.d.). At present, there are four key laws which focus on gender equality in Denmark:

- 1) the Law on Gender Equality (first introduced in 2000 and amended in 2006, 2009, 2013; LBK nr 1678 af 19/12/2013)
- 2) the Law on Equal Pay (first introduced in 1976 and amended in 1992, 2000, 2001, 2006, 2007, 2008, 2014, 2016, 2019; LBK nr 156 af 22/02/2019)
- 3) the Law on Equal Treatment (first introduced in 1978 and amended in 2006, 2011; LBK nr 645 af 08/06/2011)
- 4) the Law on Maternity/Paternity/Parental Leave (first introduced in 2006 and amended in 2009, 2012, 2013, 2018, 2019; LBK nr 67 af 25/01/2019).

Since 2002, Denmark has published biannual gender equality action plans in compliance with the Law on Gender Equality. Recent action plans have prioritized the elimination of discrimination based on gender, sexual orientation, or gender identity (European Commission, 2020). They have also focused on improving the utilization of talents and resources, including the promotion of equality in the labor market and in the field of education (European Commission, 2020).

The Law on Gender Equality calls for gender equality in all planning and administration in public institutions and mandates that gender impact assessments be conducted every three years. Large companies are also required by law to adopt a 40 percent quota of women on their boards (European Commission, 2020)

The Danish law also considers violence against women to be a serious gender and public health problem and an infringement of the Danish Criminal Code (Langsted et al., 2014)

Furthermore, the law entitles both mothers and fathers to state-sponsored parental leave. Mothers have 4 weeks of paid leave prior to the birth. Additionally, each parent is entitled to 24 weeks of parental leave with benefits. Of these, 11 weeks are non-transferable for each parent, while the remaining weeks can be transferred between the parents (<https://www.borger.dk/familie-og-boern/Barsel-oversigt>).

B. The European context: The EU Gender Equality Strategy 2020-2025

The main aim of this strategy is to transform the EU into a “Union of Equality” where people are “free to pursue their chosen path in life, have equal opportunities to thrive, and can equally participate in and lead . . . European society” (European Commission, 2020).

The strategy adopts a transformative and intersectional approach to progress toward a gender-equal Europe. The strategy prioritizes the following objectives:

- 1) ending gender-based violence
- 2) challenging gender stereotypes
- 3) closing gender gaps in the labor market
- 4) achieving equal participation across different sectors of the economy
- 5) addressing the gender pay and pension gaps
- 6) closing the gender care gap and achieving gender balance in decision-making and in politics (European Commission, 2020)

The strategy targets the following areas of intervention:

- 1) Ensuring that women have equal opportunities in society and the economy through the provision of equal pay, rules on work-life balance, and access to quality affordable care services.
- 2) Strengthening women's leadership and participation in decision-making positions (i.e., on company boards and in politics).
- 3) Protecting women's freedom to pursue their path in life by combatting gender stereotypes and gender-based violence.

C. The Danish Committee for Health Education (DCHE) is a non-profit, non-governmental organization, which was founded in 1964. More than 40 people are currently employed in DCHE.

DCHE has close working relations with public authorities like the Ministry of Health, the National Board of Health and private organizations in the health field. The membership organizations are primarily professional associations in the health field and the associations of county councils and local authorities. Sponsored by mainly public health authorities, DCHE develops and produces health promotion material on many themes and to many target groups. Themes include child and maternity health, alcohol, tobacco problems, chronic conditions, mental health, infectious diseases etc. DCHE has worked extensively with patient empowerment during the last 10-15 years by gaining specific expertise in developing, implementing and evaluating patient education, where the trainers consist of health professionals as well as volunteers of non-health professionals. DCHE has been implementing the programs in almost all 98 municipalities and at several hospitals in Denmark – using a combination of research, events, engagement activities, and political analysis to create European impetus – e.g. by the founding of ENOPE, the European Network on Patient Empowerment, leading the PiSCE project, participating in the PRO STEP project, and now being the Danish representative in the Joint Action CHRODIS+.

As an additional spin-off to continued dialogue and interest in the support of self-care as a healthcare priority, the Danish Committee for Health Education has led the establishment of Self-Care Initiative Europe – an international network of organisations now approved as the official self-care forum by DG Sante on the EU Health Policy Platform. DCHE was also a founding member of the Danish Council for Better Hygiene - an NGO comprising 800 professionals from almost 200 organisations in Denmark and Sweden working in various ways to break the chain of infections. In patient empowerment and infection prevention, close cooperation with relatively autonomous Danish municipalities and their HCPs have been central in recruiting and engaging citizens.

DCHE has 15 years of experience in running a national programme of municipal peer-to-peer support groups for patients & carers in dealing with chronic conditions, anxiety, and depression in their daily life and work-life balance. Recently DCHE has also added a digital self-management service specifically for youth and adults dealing with anxiety and depression. And since 2016 DCHE has been the national hub for the Danish MoH led partnership platform on mental health in the workplace - www.mentalsundhed.dk - that has gathered more than 400 tools to help managers, workers, and relatives promote,

prevent, and alleviate mental health & its challenges. DCHE has specific expertise in the topic of support to citizens with mental health issues – empowering them to tackle everyday issues through education, advocacy, and counselling.

Creation of networks / multi-stakeholder platforms:

- 1) European Network on Patient Empowerment, 2014
- 2) Self-Care Initiative Europe, 2017
- 3) Danish Council for Better Hygiene, 2009
- 4) The national alliance for mental health in the workplace – Together for Mental Health, 2014 Publications

DCHE has since 1964 produced thousands of books, booklets, leaflets, posters, postcards, and other printed handouts. In recent years websites, apps, data services have been added.

2. Developing the DCHE'S Gender Action Plan

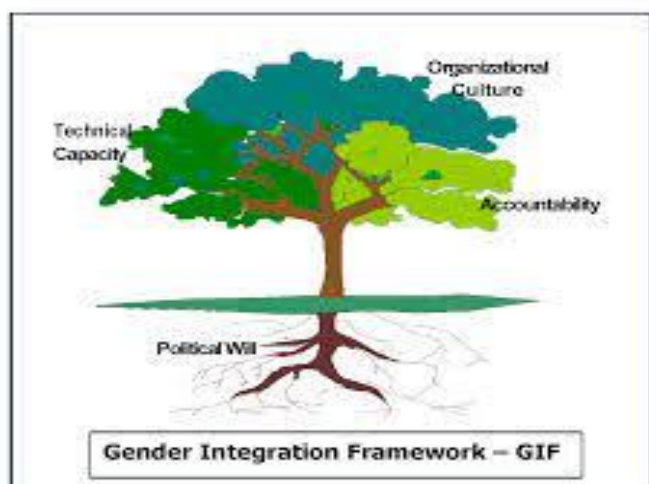
A. Theoretical background

The Gender Integration Framework (GIF) was used as a framework and a theory of change to conduct a gender audit and develop the GAP (InterAction, 2010).

The GIF suggests that transformation can only take place when the following organizational dimensions are gender sensitive:

- 1) political will
- 2) technical capacity
- 3) accountability
- 4) organizational culture

As illustrated in the image below, political will is the foundation for gender transformation in any organization. The other three elements depend upon political will and are also essential to gender integration.



B. The Gender Action Plan's development process

The DHCE's GAP was produced through the following stages:

- 1) Preparation to carry out a gender audit
Several meetings were conducted by the gender consultant with senior management to ensure their commitment to and support of the process. The management was briefed on the key concepts related to the gender audit and the production of the GAP. The consultant also presented a timeline for the process. The organization's staff were subsequently briefed by management on the benefits of the GAP. An email was also sent to the staff requesting their cooperation.
- 2) Survey to assess staff's perception of gender equality in the organization and programs.
- 3) Workshop to develop an organizational vision of gender equality;
- 4) Creation of the Gender Action Plan

C. Gender Action Plan

1) Vision

The Danish Committee for Health Education (DCHE) is a *gender-responsive transformative and diverse organization*. DCHE is effective, efficient, and successful in addressing gender inequalities inside the organization and its programs. DCHE has non-discriminatory recruitment policy based on qualification and best interest of the organization.

2) Priority areas of intervention.



Priority Area 1: Strategic management

Goal: The DCHE's gender action plan (GAP) will promote the understanding and application of gender sensitivity and mainstreaming at the strategic level and strengthen the senior management's political will toward gender issues.

Objectives:

- 1.1. The organizational Strategic Plan includes at least one transformative result on gender equality and women's empowerment.
- 1.2. Improve production and utilization of gender-related indicators.

1.3. Ensure that DCHE's Council and Advisory Boards/Committees have equitable gender representation.

1.4. Implement proactive strategies to recruit or promote women to senior management positions.

1.5. Provide senior managers/directors with trainings on gender sensitivity and gender mainstreaming.

1.6. Allocate adequate financial resources to support gender integration work.

Priority Area 2: Gender mainstreaming in programs and activities

Goal: The DCHE's gender action plan (GAP) will mainstream gender in its projects, research, and activities so that it contributes to a transformation in gender relations and to the improvement of women's status.

Objectives:

2.1. Improve program staff's skills on designing, implementing, and evaluating gender-inclusive projects.

2.2. Increase the visibility of and accountability for the outcomes of gender-responsive projects.

2.3. Promote gender parity on panels, conferences, and events organized by the DCHE, including collaborative projects.

Priority Area 3: Organizational culture

Goal: The DCHE's gender action plan (GAP) will create an inclusive and gender-sensitive working environment for all personnel and visitors.

Objectives:

3.1. Enhance internal career guidance and staff development.

3.2. Increase staff awareness of gender-sensitive policies.

3.3. Promote policies that respect diversity and work-life balance.

Priority Area 4: Capacity development, knowledge sharing, and communication

Goal: The DCHE's gender action plan (GAP) will enhance the understanding and expertise of all personnel on gender-related issues. It will also ensure the efficient internal and public dissemination of relevant gender information.

Objectives:

4.1. Upgrade gender-related skills and knowledge.

4.2. Include gender issues in all DCHE communication plans.

4.3. Promote a gender-sensitive public image of the organization.

Priority Area 5: Human and financial resources

Goal: The DCHE's gender action plan (GAP) will promote gender parity among personnel with appropriate resource allocation.

Objectives:

- 5.1. Ensure gender sensitivity as a core competency in the recruitment of new personnel, particularly at the senior level.
- 5.2. Increase female recruitment at all levels.
- 5.3. Allocate sufficient resources to implement all gender-related policies and activities.

Priority Area 6: Accountability

Goal: The DCHE's gender action plan (GAP) will ensure the continuous measurement of gender integration in the organization and its projects.

Objectives:

- 6.1. Ensure the availability and usage of gender disaggregated data in administrative and programmatic areas of work.
- 6.2. Comply with EU reporting requirements.

Annex-I-Glossary

Accountability refers to the mechanisms by which an organization determines the extent to which it is "walking the talk" in terms of integrating gender equality in its programs and organizational structures.

Affirmative actions or temporary special measures refer to a policy or a program that seeks to address past discrimination through active measures to ensure equal opportunity, as in education or employment.

Concrete walls refer to blocks initiated by superiors or bosses where the person loses opportunities to progress. Other examples could be the restrictions in set policies or guidelines of the institution or due to spouses' insecurities and inhibit the other to progress or be promoted.

Discrimination against women is any gender-based distinction, exclusion, or restriction which has the effect or purpose of impairing or nullifying the recognition of women, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil and any field.

GAD budgeting refers to budget/funds allocated to activities as planned, not just for a GAD plan but also for all plans. This involves allocation of money to ensure that proposed actions toward gender equality are achieved. From the experience of the Philippines, for example, all departments, bureaus, offices and agencies are required to set aside at least 5% allocation of their appropriations for projects designed to address gender issues.

GAD planning is a mechanism to ensure that gender issues are addressed in programs, policies and activities, which are provided with budget so actions to reduce or prevent inequalities are put in place.

GAD policies refer to gender sensitive laws, policies and guidelines that should exist in organizations. Budget could not be used without the policies in place. These are to be institutionalized for gender equality to happen on a day-to-day basis and work to be continued or sustained over time.

Gender refers to socially determined characteristics, modes of behaviour and roles that are taught to men and women through the process of socialization. It consists of roles assigned to people by society because of their being male or female.

Gender analysis is a framework/tool to compare the relative advantages and disadvantages faced by women and men in various spheres of life, including the family, workplace, school, community and political system. It also considers how class, race, ethnicity, cultural, social and other factors interact with gender to produce discriminatory results.

Gender blind approach refers to the failure to identify or acknowledge difference/s on the basis of sex or gender where it is significant.

Gender equality is the condition where men and women should receive equal treatment, and should not be discriminated against based on gender.

Gender equity recognizes differences and accommodates these differences in order to prevent the continuation of inequitable status quo. It emphasizes fairness in process and outcome, and does not presume a hypothetical ideal and undifferentiated individual.

Gender issues are concerns and problems arising from the distinct roles of women and men and the relationships between them. Gender issues also look into inequalities in the aspects of work, social, political, and economic spheres.

Gender mainstreaming is the public policy of assessing the different implications for women and men of any planned policy actions, including legislation and programs, in all areas and levels, with the aim of achieving gender equality.

Gender neutral means not referring or applying specifically to either males or females.

Gender stereotypes are over generalized beliefs about people based on their membership in one of many social categories. Gender stereotypes vary on four dimensions: traits, role behaviors, physical characteristics, and occupations. For example, whereas men are more likely to be perceived as aggressive and competitive, women are more likely to be viewed as passive and cooperative. Traditionally, men have been viewed as financial providers, whereas women have been viewed as caretakers. Physical characteristics and occupations have also been considered consistent or inconsistent with masculine or feminine roles.

Glass ceiling refers to the unseen barriers or blocks that prohibit advancement of minorities and women in career ladder regardless of achievements.

Lesbians, gays, bi-sexual and transgender (LGBT) – consists of female having relations with fellow female; male having relations with male; women who are into a relationship with either women and men; and transgender relating to, or being a person who identifies with or expresses a gender identity that differs from the one which corresponds to the person's sex at birth.

Marginalization is the process of making a group or class of people less important or relegated to a secondary position. For example, by not valuing work.

Men and masculinities approach are the need to correct the “wrong” notion to masculinities, which is usually connected to power. This notion of masculinity starts at early age that is brought about by how parents reared/raised men/boys and passed on from generation to generation.

Multiple burdens in sociological terms are when a woman has the responsibility of unpaid work and paid work.

Multiple discrimination refers to some conditions being set such as in the case of recruitment ads that says preferably male, single, not be over 40 years old, and maybe crosscutting.

Organizational culture - Norms, customs, beliefs and codes of behavior in an organization that support or undermine gender equality - how people relate; what are seen as acceptable ideas; how people are "expected to behave" and what behaviors are rewarded.

Practical gender needs are about basic day-to-day needs of both women/girls and men/boys that are short-term. In evacuation centers, for example, the practical gender needs of women/girls are hygiene kits or sanitary napkins and under pants and hygiene kits for men/boys as well. When the practical needs of women and men are responded to, it is not necessarily a gender equality action as there may be other specific situations about women or men that need to be considered.

Political will - Ways in which leaders use their position of power to communicate and demonstrate their support, leadership, enthusiasm for and commitment to working toward gender equality in the organization.

Productive work refers to activities that are not just home-based but also outside of the home that is paid or rewarded. Traditionally, productive work is attributed to men. While women and men in many countries are already engaged in productive work, women are put at the disadvantaged situation because women are still expected to perform reproductive work.

Reproductive work is associated with the conception of and giving birth to children, thus, has been the women's exclusive domain. It also refers to activities related to taking care or nurturing of the family – the husband, children and other family members. It extends to household chores, which are usually not quantified or valued and taken for granted. However, to date, there are already some countries where the aspects of reproductive work are already being valued or quantified and rewarded. Aside from this, there are countries where shared-parenting is recognized whereby husbands and wives share the responsibility of taking care of the family.

Sex relates to characteristics that women and men are born with, those based on biology or nature. In the Philippines, for example, even if a Filipino has a sex re-assignment or sex change, a man or a woman will still be considered as such based on his/her biological make-up since being male, he is not able to produce ova and being female, she is not able to produce sperm.

Sex-disaggregated data includes representation of the sex of the population whether male and female. Disaggregated data usually involves demographic description that reflects the existing number of female and number of males. For example, some countries have already started to disaggregate data such as in training programs by identifying the number of male or female participants.

Sexual harassment in the workplace refers to an act, or a series of acts, involving any unwelcome sexual advance, request or demand for a sexual favor or other verbal or physical behavior of sexual nature, committed by a government official or employee in a work-related environment of the person complained of. The sexual favor is made a condition in the hiring or in the employment or continued employment, or in granting favourable compensations, terms, conditions, promotion or privileges; or refusal to grant the sexual favour results in limiting, segregating or classifying the employee which in a way would discriminate, deprive or diminish employment opportunities or otherwise adversely affect the employee and could impair employee's rights and privileges under the labor laws or result in an intimidating, hostile or offensive environment of the employee.

Sexual orientation and gender identity expression (SOGIE) - Sexual orientation is the preferred term used when referring to an individual's physical and/or emotional attraction to the same and/or opposite gender. "Gay," "lesbian," "bisexual" and "straight" are all examples of sexual orientations. A person's sexual orientation is distinct from a person's gender identity and expression. The term gender identity refers to a person's innate, deeply felt psychological identification as a man, woman or some other gender, which may or may not correspond to the sex assigned to them at birth. Gender expression refers to all of the external characteristics and behaviors that are socially defined as either masculine or feminine, such as dress, grooming, mannerisms, speech patterns and social interactions. Social or cultural norms can vary widely and some characteristics that may be accepted as masculine, feminine or neutral in one culture may not be assessed similarly in another.

Sticky floors A term for a male-to-female disparity in career advancement, in which female candidates have a distinct disadvantage.

Strategic gender needs are those that address the subordinate situation of women in society and long-term needs of women and men. It has to do with changing women's and men's position and providing access to quality education and income or economic opportunities. Women having economic access/opportunities are able to gain confidence, make wise choices and participate in decision-making processes and in leadership positions.

Subordination refers to the power relations of women and men where the women are out in an inferior class or are made as subservient to men.

Technical capacity - Level of ability, qualifications and skills individuals in an organization need to carry out the practical aspects of gender integration for enhanced program quality, and level of institutionalization of gender equitable organizational processes.

WID-WAD-GAD are development approaches and shows the stages of initiatives to meet the needs of women. It all started on Women in Development (WID) with interventions focused on putting greater attention to women in development policy and practice by providing for women's needs; and later led into Women and Development (WAD) which emphasizes the need to integrate women into the development process. Gender and Development (GAD) emphasizes the need to challenge existing gender roles and relations.

Women empowerment approach refers to building or strengthening women's capacity to be able to participate in decision-making. It also means providing women with access and control to opportunities such as education.

Annex-II- References

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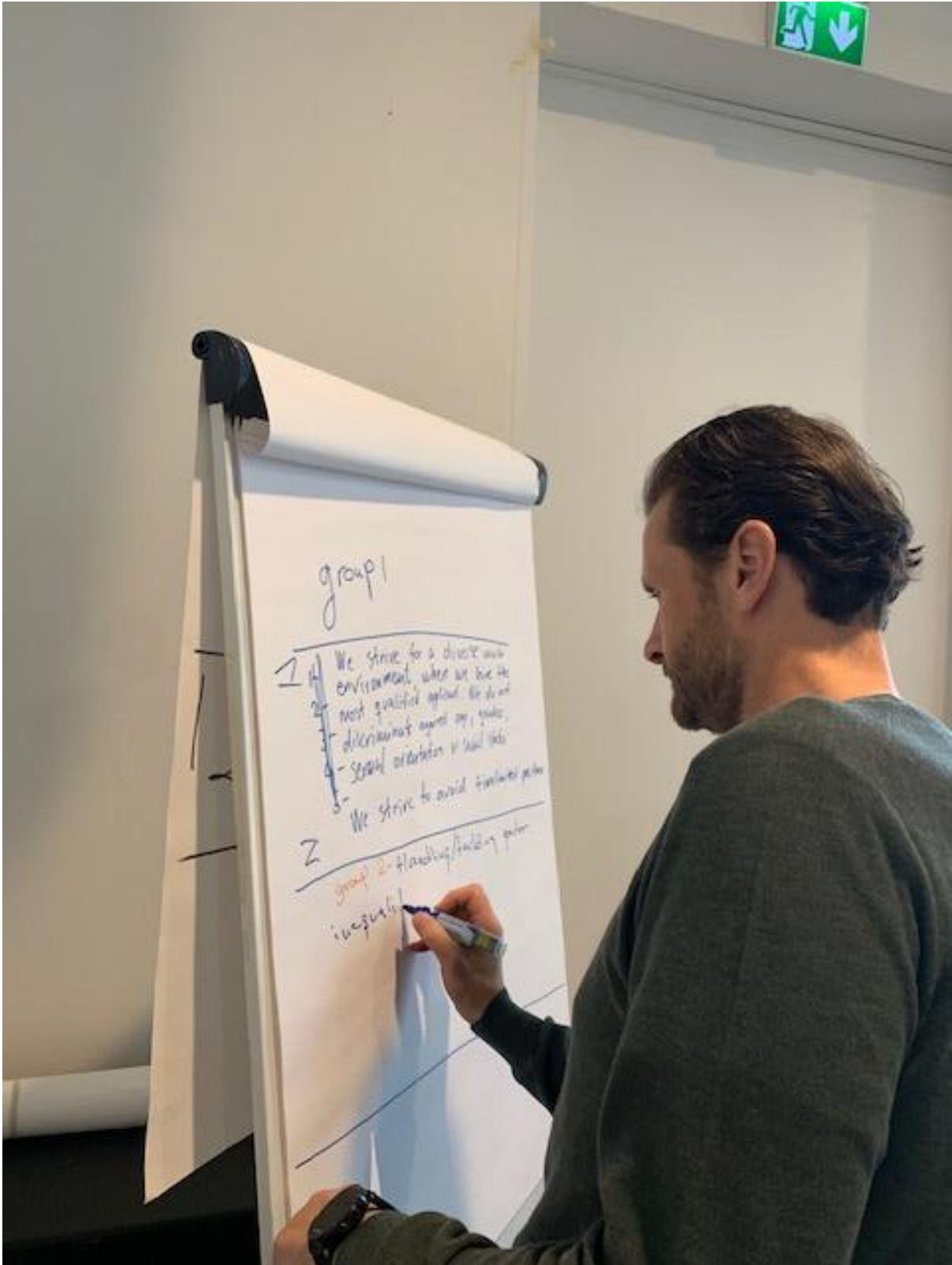
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Annex-III-Photos of the Workshop







group 1

1 We strive for a diverse work environment where we hire the most qualified applicant. We do not discriminate against age, gender, sexual orientation or social status

2 We strive to avoid time-limited positions

1. group 2 - handling/handling gender inequalities in health/health care
2. Gender mobility in social issues
3. Transgender?
4. Future health professional
5. Language?

1. At udvælgelse skal prioriteres sig til køn
2. Tjerner skal fordeles og deltagelse i KFS projekter
3. Internt: hævende sig til hinanden på en ikke-kønnet måde

5. Sparring m. kolleger/peere
• Rummelighed
• Normkritik
• Balance i sparring