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THE LANCET COMMISSION ON
GENDER AND GLOBAL HEALTH

In Conversation With... Nina Schwalbe

Vaccines to vaccinations: Gender in promoting immunization

Background

24-30 April is the celebration of World Immunization Week, commemorating the collective action needed and promoting the use of vaccines to protect people of all ages against disease. The theme for 2022 is 'long life for all'. But the achievement will be hampered without significant effort to tackle the challenges of the inequities inherent in the development and production of vaccines, the distribution and supply, and access and uptake.

In this context, the [Lancet Commission on Gender and Global Health](#) in partnership with the [UNU Gender and Health Hub](#) present the '*In Conversation With...*' webinar series. The first session in the series, 'Vaccines to vaccinations: Gender in promoting immunization' will be chaired by Nina Schwalbe, Commissioner and Principal Visiting Fellow at the United Nations University – International Institute for Global Health.

Session description

The COVID-19 pandemic provides a stark illustration of the disparities. In this session, we will review the cost of gender inequity in the COVID-19 response, focusing on vaccination. More than a year into COVID-19 vaccine deployment, less than 50 countries are regularly reporting gender-disaggregated data. In this panel, we will hear from vaccination experts who discuss issues ranging from policy to practice. We will focus on the issues related to data reporting and collection, why international agencies are not mandating gender-disaggregated data, and what strategies could be used to change that.

We will also unpack some of the reasons for gender disparities in coverage. Where there is a limited supply of vaccines, the picture can differ depending on which groups were prioritized for vaccination. For example, in some countries, prioritizing health care workers meant that women were more likely to receive vaccines. Men were more likely to receive a shot in others, where the military was prioritized. Where supply is adequate, fears may explain disparity – for example, rumours of effects on fertility or breastfeeding have hampered uptake. Or, as with routine childhood vaccines, the main gender barriers could relate to the inability to get to the clinic, fear of illness after the vaccine (which would require the person to take time off), and other opportunity costs.

Objective:

- Addressing context-specific gender-related barriers to access and uptake of vaccines and highlighting promising approaches and tactical strategies for more gender-equitable production, distribution, reporting, and monitoring of vaccine deployment.

Format

The 60-minute *In Conversation With...* series is structured to be forward-looking, solutions-focused, and conversational. The Commissioner will begin with a short 5-minute presentation to set the scene. In the following conversation, speakers are encouraged to highlight promising approaches with concrete examples. The final 10 minutes will be allocated for interventions and questions from diverse stakeholders within the audience. The Commissioner will bring the session to a close with a concise summary of the key issues raised and the way forward.

Outcomes

- Strengthen, grow, and connect the Commission and the UNU Gender and Health Hub's online and offline communities for increased knowledge sharing and synergised action towards more evidence-based and better-resourced integration of gender in health policies and programmes.
- Engage with external voices to enable the Commission to include new perspectives – particularly those who can challenge, enrich, and help develop the Commission's work.
- Create broader buy-in, seek feedback, and ensure the relevance of the Commission's work to diverse stakeholders, including the network of policymakers, academics, and implementers involved in the UNU Gender and Health Hub.
- Amplify existing efforts and support evidence-based policy action to catalyse system-wide change in gender and health.

Potential speakers

- Sarah Goulding (Global Development and Partnerships, DFAT)
- Jeanine Condo (University of Rwanda)
- Anita Zaidi (BMGF)
- Jamille Bigio (USAID)
- Mira Johri (University of Montreal)
- Ayoade Alakija (WHO Ambassador)
- Sofia Gruskin (University of Southern California)

Provisional programme

Time (GMT)	Programme	Speakers
13:00-13:10	Welcome Scene setting and panel introduction	Nina Schwalbe , Principal Visiting Fellow, UNU-IIGH Commissioner, LCGGH
Panel conversation		
13:10-13:25	Identifying the gaps <i>(For shortlisting)</i> <ul style="list-style-type: none"> • At the outset of the COVID-19 pandemic, did you anticipate the impact it would have on gender-based inequities? Can you explain how reality differed from or met your expectations, and what lessons we should take away from that? • With examples, could you highlight the gendered dynamics and barriers have you observed in vaccine deployment? What has worked or could work to address these? • Did the COVID-19 pandemic reinforce existing gender inequities in some contexts and not others? How do we prevent the next pandemic from exacerbating existing vulnerabilities? • What will it take to make gender-disaggregated data a norm in policy and in practice? What has limited progress so far? • What has been the country level experience in programming, and research needs in the broad areas of addressing the gendered dynamics is vaccine trust, hesitancy and uptake, science communication? 	<i>Moderated by Nina Schwalbe</i>

13:25-13:40	<p>Towards Solutions</p> <p>In your experience, what has worked effectively to address gendered barriers to COVID-19 vaccine uptake? Are there effective approaches that could be implemented more widely?</p> <p>How can evidence, data and programmatic learning shape the way forward?</p>	
13:40-13:45	<p>Closing</p> <p>What one thing do you want vaccines deployment strategies to do differently/ stop doing/ do more of?</p>	
13:45-13:55	<p>Audience interaction</p> <p>Audience questions from live chat</p>	<i>Moderated by Nina Schwalbe</i>
13:55-14:00	<p>Closing</p> <p>Closing remarks</p>	Nina Schwalbe , Principal Visiting Fellow, UNU-IIGH Commissioner, LCGGH

This is a joint event hosted by The Lancet Commission on Gender and Global Health (LCGGH), and the Gender and Health Hub (GHH), both of which are housed within the United Nations University – International Institute for Global Health (UNU-IIGH).

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The Lancet Commission on Gender and Global Health responds to the pressing need for substantial, structural, and system-wide change if we are to see considerable progress on gender equality and health equity by 2030. Learn more at genderandhealthcommission.org.

The Gender and Health Hub is here to bridge the gap between knowledge, policy and action. The GHH is a unique global platform established to consolidate the best, policy-relevant evidence on gender integration in health policies and programmes, generated through research and practice at the global, regional, and country level. Learn more at genderhealthhub.org.

The United Nations University – International Institute for Global Health is the designated UN think tank on global health, serving as a policy translation hub for UN member states, agencies and programmes. It was established by a statute adopted by the Council of the United Nations University in December 2005. Learn more at iigh.unu.edu.