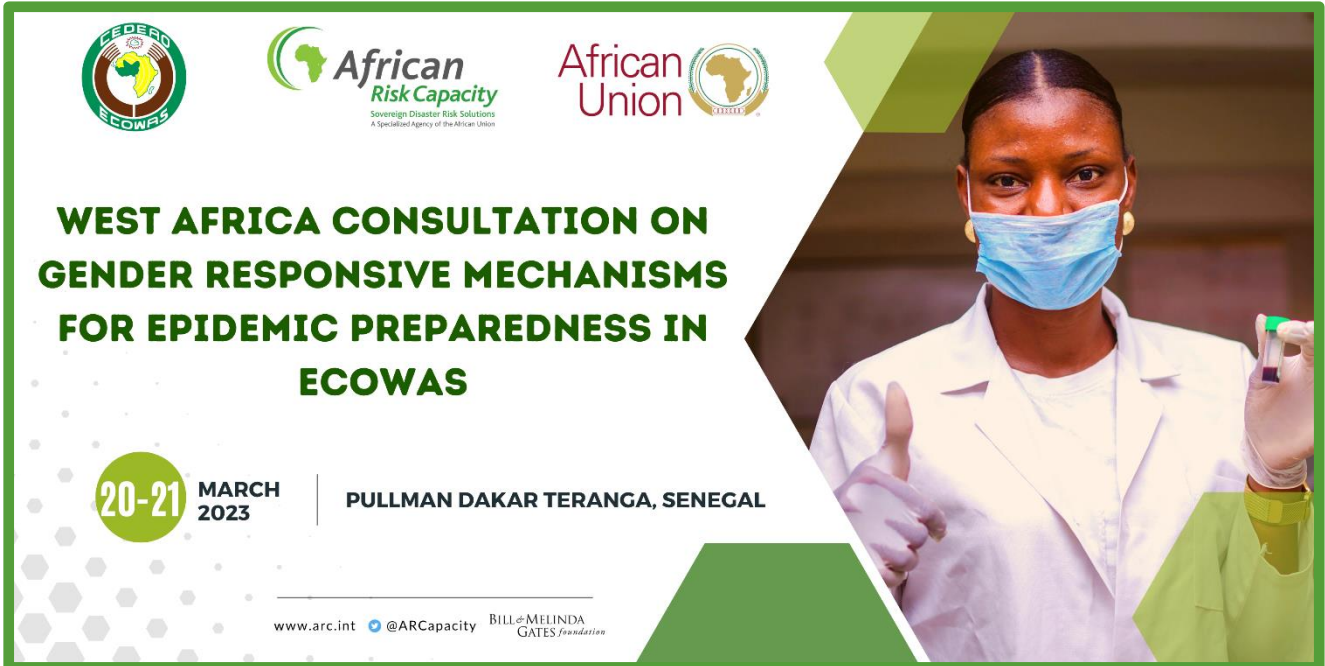





REPORT


WEST AFRICA REGIONAL CONSULTATION



**WEST AFRICA CONSULTATION ON
GENDER RESPONSIVE MECHANISMS
FOR EPIDEMIC PREPAREDNESS IN
ECOWAS**

**20-21 MARCH
2023** | **PULLMAN DAKAR TERANGA, SENEGAL**

www.arc.int @ARCapacity 



20 - 21 March 2023

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1 Background

On 20 and 21 March 2023, the ARC Group’s Gender and Outbreaks & Epidemics (O&E) teams and the West & Central Africa Office, with the support of the Bill and Melinda Gates Foundations (BMGF), convened the West Africa Regional Consultation on gender-responsive mechanisms for epidemic preparedness in the Economic Community of West African States (ECOWAS) in Dakar, Senegal. The Regional Consultation followed the December 2022 launch of the ARC Group’s O&E product, where the Government of Senegal became the first country to take out the sovereign parametric insurance policy for protecting its populations against high-impact disease outbreaks. The ARC O&E Programme’s risk-transfer solution is the first African epidemic risk insurance mechanism designed to enable rapid country-led responses to disease outbreaks and epidemics and prevent the further spread of such threats.

The ARC O&E Programme, born in the wake of the devastating 2014-2016 West African Ebola crisis, and developed in response to a request from African Ministers of Finance under the auspices of the African Union (AU), uses a comprehensive multi-pronged approach to country preparedness and response to O&E: in-country capacity-building work on epidemic preparedness; contingency planning to enable timely and effective response when an outbreak occurs; outbreak modelling to compute risk analytics from realistically simulated outbreaks events; and a risk transfer parametric product that covers early response costs of an outbreak. The O&E risk transfer product initially covers three diseases of epidemic potential, Ebola, Marburg, and meningitis, with a view to expanding based on assessed needs in member states.

On 28 November 2022, ARC Agency and the BMGF signed an investment grant agreement on “Gender Responsive Mechanisms for Epidemic Preparedness in ECOWAS” to support six priority member countries of the ECOWAS to provide rapid and appropriate gender-sensitive responses to disease outbreaks and epidemics in the region. The six ECOWAS countries have been prioritised to benefit from this project: Côte d’Ivoire, Ghana, Guinea-Bissau, Nigeria, Senegal, and Sierra Leone. Towards the fulfilment of this agreement, this Regional Consultation was the start of the ARC-BMGF project, with key objectives being:

- i. Building the capacity of ECOWAS member states to better respond to disease outbreaks and epidemics;
- ii. Promoting gender-sensitive mechanisms for disease outbreaks and epidemics management;
- iii. Providing technical support and outreach activities on the Polio virus in West Africa; and
- iv. Strengthening innovative partnerships in promoting Pan-African and sub-regional collaboration.

Responding to outbreaks and epidemics must be inclusive to achieve true resilience. As part of the ARC’s goal to mainstream gender in all its programmes and the Disaster Risk Management (DRM) environment at large, this project will be intentional in driving for gender equality to ensure that no one is left behind, starting with understanding the gender considerations of each participating country through a gender analysis.

1.1 Objective of Regional Consultation

The overarching purpose of the meeting was to sensitise and create regional and country-level ownership of the objectives of the ARC-BMGF Project, as well as create regional consensus and ownership of the objectives and activities of the project. In addition, the engagement focused on epidemic preparedness, surveillance and response in ECOWAS and identifying multi-level opportunities for gender-sensitive public health systems.

The Regional Consultation had the following objectives:

- Presentation and launch of the ARC-BMGF Project and work plan;
- Sensitisation on the African Risk Capacity, the ARC O&E Programme, and parametric risk transfer mechanisms as an innovative financing instrument for public health emergency response;
- Introduction to the ARC Gender Strategy and gender transformative strategies for effectively managing public health emergencies;
- Presentation on acute health emergencies affecting the ECOWAS region and gendered impacts; and
- Identification of potential post-project actions.

1.2 Expected Outcomes from Consultation

The Regional Consultation sought to enable the following:

- i. Knowledge and understanding of the ARC-BMGF Project, its goals, expected outcomes and implementation methodology;
- ii. Understanding the African Risk Capacity, the ARC O&E Programme, and ARC's parametric risk transfer mechanism against high-impact epidemic risks;
- iii. Understanding the ARC Gender Strategy and gender transformative strategies for effectively managing public health emergencies;
- iv. Awareness of the risks of acute health emergencies in the ECOWAS region and the gendered impacts; and
- v. Buy-in and support from stakeholders and partners on the ARC-BMGF Project, its proposed work plan (milestones and timeline), and potential post-project actions.

2 Introduction

The West Africa Regional Consultation on gender-responsive mechanisms for epidemic preparedness in the Economic Community of West African States (ECOWAS), was attended by government experts representing ministries of gender, public health, disaster risk management, and finance from the six ECOWAS member states prioritised by the ARC-BMGF project, namely Côte d'Ivoire, Ghana, Guinea-Bissau, Nigeria, Senegal, and Sierra Leone; as well as regional partners – the West African Health Organization (WAHO/OOAS), the WHO Health Emergencies Programme Dakar Hub, and the World Food Programme Regional Bureau Dakar; the policy and advocacy action tank Speak Up Africa; the facilitator, AfriCatalyst; and media, with the shared vision to safeguard the gendered health security in the African region.

The Regional Consultation was an excellent opportunity to bring stakeholders together to debate critical issues that affect countries' resilience to epidemic-prone diseases, particularly the interaction between disease outbreaks and pre-existing gender inequalities, which tend to compound the vulnerability of communities. It sought to align stakeholders' thinking and provide a platform to deliberate on the issues on the ground towards developing an understanding and an appropriate action plan to support the roll-out of gender-responsive mechanisms for epidemic preparedness in the region.

In addition to presenting and launching the implementation work plan, the Regional Consultation sought to sensitise delegates on ARC's model, particularly its Outbreaks & Epidemics (O&E) programme; introduce the ARC Gender Strategy and gender transformative strategies for effectively managing public health emergencies; and highlight acute health emergencies affecting the ECOWAS region and gendered impacts. Notably, the findings from these discussions will feed into identifying potential post-project actions.

The environment in which the Regional Consultation was held allowed all delegates to interact and give their opinions on pertinent topics freely. The various programmes of the Regional Consultation were facilitated to ensure the objectives of this engagement were met. Interactions gave perspective to the realities in the different countries, the challenges to be overcome and the possible solutions to feed into the action plan.

3 Summary of the Regional Consultation

3.1 Day One of the Regional Consultation

In addition to introducing each delegate, the first day was important in setting the scene and explaining the ARC-BGMF project. ARC Chief Operating Officer, Ms Eva Kavuma, emphasized the vision to create regional resilience to infectious disease outbreaks and ARC's objective to create synergies across national ministries, government departments/agencies, and member states harnessing the power of partnerships. Further, the workshop was intended to lay the foundations for the successful implementation of the project ARC-BGMF project.

The host country, Senegal, on behalf of the Minister of Interior, welcomed delegates and opened the Regional Consultation. Last December 2022, Senegal was the first country to participate in the ARC sovereign parametric insurance product against high-impact disease outbreaks, and Mr Abdoulaye Noba, Supervisor of the ARC Programme in Senegal, encouraged ARC to carry out its activities to build resilience to outbreaks and epidemics in ECOWAS and beyond.

3.1.1 Laying the foundations

Towards this goal, the following introductory presentations were made:

Understanding ARC and the ARC-BMGF project

To benefit all participants, stakeholders needed to understand the background to developing the ARC O&E Programme as part of its mandate to help member states plan, prepare and respond to increasing threats from extreme weather events and disease outbreaks. This was also an opportunity to explain the reasoning behind the ARC-BMGF project for the ECOWAS region in light of the recently launched ARC O&E solution to improve the health and DRM capacities in prioritised vulnerable ECOWAS member states to manage outbreaks of epidemic and pandemic potential effectively.

Introduction to ARC Gender Strategy and Gender Transformative Strategies

For effective management of public health emergencies, the role of ensuring gender equality in all processes cannot be understated. Therefore, this project will have a strong gender focus, and the consultation highlighted the importance of inclusive and gender-balanced approaches. To this end, the ARC Gender Strategy was presented, and participants were introduced to the Strategy's three objectives.

- i. **Institutionalising gender and DRM for innovative knowledge development** – establishing a think-tank on Gender & DRM; sharing best practices and lessons learnt; and publishing research, studies, and publications.
- ii. **Building institutional and individual capacity and tools for mainstreaming gender in DRM** – building enhanced gender analysis methodologies; developing training modules, tools and guidelines; and training of trainers networks.
- iii. **Engagement in sustained policy dialogue and advocacy for a gender-transformative DRM policy environment** – Conducting studies on gender-responsive financing/social protection programmes; publication of policy briefs and advocacy materials; and undertaking advocacy & sensitisation actions.

During the discussions, it was agreed that infectious disease outbreaks deepen pre-existing inequalities, exposing vulnerabilities in social, political, and economic systems and amplifying their impacts. Women and girls were recognised as disproportionately affected by such impacts, becoming more time-poor, economically poor or disenfranchised. They further experience higher levels of gender-based violence and sexual exploitation, and abuse, as well as an unnecessary loss of life and illness due to over-representation in care work (paid and unpaid).

It was highlighted that the rapid containment of outbreaks is central to ARC's O&E programme. This is instrumental in alleviating many negative impacts caused by prolonged and unpredictable containment measures (lockdowns, quarantines, and school and market closures). In addition, collaborative and end-to-end Gender-responsive approaches to Disaster Risk Management were identified as integral to effectively mitigating the negative impacts of infectious disease outbreaks.

The five key intervention areas in the ARC Gender Strategy, which are also components of the ARC-BMGF project work plan, were highlighted, namely: (i) Platform on Gender and DRM; (ii) Gender Analysis; Advocacy; (iii) Human Resource investment; and (iv) Gender Transformative Financing.

A panel discussion on the topic "the importance of including gender-responsive strategies in the management of high-impact public health emergencies and disasters" was held to gain insights from the point of view of a diverse panel of experts. This session was moderated by Mr Daouda Sembene, the Chief Executive Officer of AfriCatalyst, an independent global development advisory firm facilitating the tripartite Alliance formed between ARC, WAHO and Institut Pasteur de Dakar (IPD).

To set the scene, Dr Amadou Baïlo Diallo, Regional Advisor Health Risk Management and Country Preparedness – WHO AFRO Emergencies Preparedness and Response Dakar Hub, provided a keynote address titled "*Intégration de l'approche genre dans le programme de l'OMS de gestion des situations d'urgence*" detailing ways in which WHO has integrated gender in its emergency management programmes. The presentation highlighted which diseases of epidemic potential affect the West Africa region; examples of gender-sensitive interventions in response to an epidemic; and the strategies in place for integrating the gender dimension in its programmes and preparedness and response activities to outbreaks,

including examples of successful initiatives. Panellists were allowed to respond to the keynote presentation and answer questions on how their work intersects with the topic.

The panellists for this session were:

- Mrs Ramatoulaye Dieye: Gender Advisor – WFP Regional Bureau Dakar
- Dr Yves Mongbo: PO Maternal and Child Health – West African Health Organization (WAHO/OOAS)
- Dr Astou Fall: Director of Programs – Speak Up Africa
- Mr Mbagnick Diouf: Journalist – Vice President of the Senegalese Network of Journalists on Health and Environment

Amongst other things, the panellists highlighted the following:

Mrs Ramatoulaye Dieye highlighted how emergencies exacerbate the vulnerability of those already at risk of hunger, disease, and poverty. She further highlighted the various actions the WFP takes to prepare for these, and the support provided to vulnerable populations, particularly in the context of disease outbreaks.

Dr Yves Mongbo addressed how WAHO, the regional political and technical institution responsible for health matters in ECOWAS member states, mainstreams gender across its programs and operations. He further provided key recommendations to consider the gendered impact of health emergencies in ECOWAS member states, better.

Dr Astou Fall provided insights from a policy and advocacy perspective, highlighting ways in which doing so can strengthen health systems and influence decision-making to reduce gender inequality. She further detailed conditions enabling gender mainstreaming in national and regional policies and strategies.

Mr Mbagnick Diouf addressed the impact of mainstream and social media during health emergencies, especially concerning the spread of misinformation. Drawing on his experience during COVID-19 and past health emergencies, he detailed the approaches and tools used to reduce gender inequalities and improve risk communication and community engagement to increase trust and build partnerships.

3.2 Day Two of the Regional Consultation

The second day of the workshop was essential in getting the perspectives of all participating stakeholders on the status of healthcare in their respective countries and prompt suggestions on possible solutions. This session consolidated the work done over the two days and drew clear recommendations.

3.2.1 Summary of the Group Work

Group discussions were organised, giving each delegate a voice by providing a platform through which they could share insights on the situations in their particular context. Delegates were organised into groups as follows:

- Group 1: Côte d'Ivoire, Senegal, Guinea-Bissau
- Group 2: Ghana, Nigeria, Sierra Leone, Guinea-Bissau
- Group 3: Regional partners

Specifically, the groups were asked to use their experience and identify gaps/challenges to mitigate the gendered impact of health emergencies and provide examples of best practices from two of the following perspectives:

- Health system service delivery:** access and delivery of routine and emergency health care services in health emergency settings
- Institutional:** structures, committees, ministries, task forces, agencies...
- Policies:** bills, laws...
- Partnerships & resource mobilisation at country and regional levels**

The following tables summarise the outcomes from each group discussion. Most importantly, it provides best practices implemented in their respective countries and other recommendations to overcome the challenges identified. Each group was allowed to present their findings to the forum:

Table 1: Summary outcomes from the group discussions

	Situation and challenges on the ground	Best Practices / Recommendations
Group 1: Côte d’Ivoire, Senegal, Guinea-Bissau	<ul style="list-style-type: none"> • Access to routine health care by affected geographic dispersion of populations; • There is the existence of health huts at the lowest level that offer community health services; • Staff availability: concentration of qualified medical staff more in urban and peri-urban areas; • The frequency of visits to health centres by populations affects delivery; • Service impacted by health emergency situations such as COVID-19; • There is limited access to large urban areas, especially for pregnant women, girls, and children; • Limited access due to confinement (socio-economic limit); • Limited information for women/girls (lack of orientation, lack of denunciation of gender-based violence). 	<ul style="list-style-type: none"> • Establishment of support systems for women and children, poor households through facilities such as cash transfer; • Setting up of mobile units for vaccination and care of infected people; • Establishment of a hotline for Civil Society Organisations to contribute to the prevention and care of victims of Gender-based Violence; • Create community awareness of measures against barriers to health services. <p>Resource mobilisation; national level</p> <ul style="list-style-type: none"> • Establish funds that victims of GBV and people with disabilities can access; • Provide finance to female-owned SMMEs and support to women in micro-enterprises in the informal economy; • Provide grants to poor households. <p>Resource mobilisation; regional level</p> <ul style="list-style-type: none"> • Implement a contingency plan supported by bodies such as WFP, FAO, UNICEF; • Ensure support for response strategies; • Provision of vaccines from international partners.
	Situation and challenges on the ground	Best Practices / Recommendations
Group 2 Ghana, Nigeria, Sierra Leone, Guinea-Bissau	<ul style="list-style-type: none"> • Disruption in the provision of sexual reproductive health services, resulting in maternal deaths unwanted pregnancies, GBV etc.; • Non-communication on the continued provision of SRH services, in spite of outbreaks; • Inadequate supplies of SRH commodities - funds diverted to provision of COVID – related supplies; • Inadequate supplies of PPEs - mostly female nurses affected; • Most response committees and structures (taskforces) have limited female representation; • Issues of gender not considered in the design of emergency response strategies / plans (gender mainstreaming); • Inter-ministerial coordination mechanisms weak and in most cases ad-hoc. 	<ul style="list-style-type: none"> • Develop, disseminate and monitor Guidelines for provision of routine services (sexual, reproductive health services); • Make use of mobile calls instead of routine home visits conducted pre-COVID (Ghana); • Opportunities for women empowerment – women produced face masks and other IPC materials locally; • Avail PPEs for frontline workers, especially nurses, who are mostly women; • Offer financial incentives/ hazard allowances – more women benefitted as front-line health services providers; • Position gender as a standalone pillar in emergency response teams; • Appoint a Gender Specialist to ensure gender mainstreaming; • Conduct continuous simulation exercises for disaster preparedness.

	Situation and challenges on the ground	Best Practices / Recommendations
Group 3 Regional partners	<ul style="list-style-type: none"> • Scarcity of resources in national development sectors; • Lack of synergy between technical and financial partners; • Lack of systems for collecting, analysing and disseminating data on gender (indicators, qualitative and quantitative); • Different priorities/agenda by partners; • Alignment of financing national priorities (Paris agreement); • Inadequate governance and leadership. 	<ul style="list-style-type: none"> • Establishment and operationalisation of UN organisations for gender equality and empowerment of women (UN Women); • Multi-sectoral consultation framework for partners on gender and creation of digital platforms; • Development and implementation of strategies for integrating the gender approach into programmes; • Establishment of fund to promote gender integration into policies and existing programmes of partners; • Development of briefs on successes achieved • Supporting resource mobilisation by NGOs for the implementation of gender approach at community level.

4 Conclusion and the way forward

The West African Consultation proved to be a great introduction to the ARC Outbreaks and Epidemics Programme, ARC Gender Strategy, and the ARC-BGMF project in the ECOWAS region. In addition to acknowledging that infectious disease outbreaks are a growing threat to the continent, it confirmed the interest of the six prioritised countries in strengthening the member states' response capacities to disease outbreaks and ensuring a gendered approach to this response. It also emphasised the importance of providing solid collaborations among critical players, regional authorities, public health institutions and gender organisations to build resilience against these threats. Significantly, the engagement highlighted pre-existing gender inequality as a challenge to be addressed through gender mainstreaming towards building true resilience. This project, therefore, drives for a collaborative gendered approach to O&E response as key to ensuring resilience in the ECOWAS region.

Way forward

Post the Regional Consultation, ARC is now consolidating the outcomes of this engagement, and the findings will be incorporated into the work plan to guide workstreams on this project. Going forward, the next steps in the work plan are outlined in the table below:

Table 2: Workplan going forward

Outcomes	Activities	Expected Outcomes
Empowering ECOWAS Member States	<ul style="list-style-type: none"> • Consultant to conduct the Gender analysis and collection of age and sex-disaggregated data of member state's DRMF strategies and policies; • Training on Gender and O&E for Public Health Practitioners; • Incorporate gender-responsive strategies in technical assistance and support to member states experiencing outbreaks. 	<ul style="list-style-type: none"> • Empower member countries with capacity-building skills and tools to manage outbreaks and epidemics by incorporating gender-responsive strategies to outbreak preparedness and response activities; • Ensure a gendered approach to capacity building; • Build and work with Technical Working Groups (TWG) ensuring a gender-balanced composition of the TWG;

		<ul style="list-style-type: none"> • Help each country develop a gender-sensitive contingency plan for priority pathogens and Polio;
Outcomes	Activities	Expected Outcomes
Health outcomes for populations	<ul style="list-style-type: none"> • Epidemic risk profiling and assessments on preparedness and capacity; • Epidemic risk modelling; • Contingency planning to ensure rapid and adequate responses to reported outbreaks; • Simulation exercise to test the capability of a country to respond to a simulated event (e.g. Ebola). 	<ul style="list-style-type: none"> • Improve governments' ability to manage and contain outbreaks and epidemics; • Minimise disruptions to routine healthcare services during an outbreaks event; • Strengthen and improve in-country healthcare services, especially for women and children; • Ensure ongoing collection of gender-responsive data and stats in participating countries to record the management of new threats; • Build the capacities for gender transformative surveillance, disease prevention, response and resilience to epidemics and other health emergencies.
Outcomes	Activities	Expected Outcomes
Economic impact of the project	<ul style="list-style-type: none"> • National Policy Dialogue to disseminate results and recommendations of the gender analysis to policy makers. Basis for creation of Gender Transformative Fund (GTF); • Donors Round Table for the GTF; • Support advocacy initiatives in favour of women representation in decision-making and an increase of national budgets for women and O&E; 	<ul style="list-style-type: none"> • Creation of a GTF to ensure there is direct impact at the micro and meso levels through support to communities; • Encourage Investment into O&E insurance as it is significantly cheaper than managing disease outbreaks from ad hoc funding sources; • Strengthening women's economic empowerment and resilience building through the GTF as a micro-meso financing mechanism;
Outcomes	Activities	Expected Outcomes
Building gender awareness and facilitating transformation	<ul style="list-style-type: none"> • Establish a national network of trainer of trainers on gender and O&E; • Training and capacity building on mainstreaming gender in O&E; • Advocacy and sensitisation sessions at national level – Roadshow and Community Meetings. 	<ul style="list-style-type: none"> • Sensitisation of member states on the importance of gender inclusion in managing disease outbreaks; • Awareness raising at all levels (community, government) to influence behavioural change in regards to harmful practices against women; • Reduction of the disproportionate adverse effects of containment measures on women; • Inclusion of women in all interventions and processes by supporting women's representation and participation; • Promote continued access to healthcare services and resources (sexual and reproductive health, maternal healthcare and immunisations) during an outbreak.

Outcomes	Activities	Expected Outcomes
Evaluation and Learning	<ul style="list-style-type: none"> • Special studies to share best practices and lessons learnt of gender mainstreaming in O&E among the ECOWAS countries to strengthen regional collaboration; • Regional workshop to share lessons learnt and best practices; • Through the Gender and DRM Platform established by ARC and AU, publicize case studies and policy briefs emanating from the regional lessons learnt. 	<ul style="list-style-type: none"> • Influence regional and continental approaches and mechanisms of gender in DRM in the perspective of O&E.

Annex 1: Agenda

The workshop brought together a diverse and strategic group of participants on the theme, “Gender Responsive Mechanisms for Epidemic Preparedness in the Economic Community of West African States (ECOWAS) region”. The agenda is as follows:

West Africa Regional Consultation on Gender Responsive Mechanisms for Epidemic Preparedness in ECOWAS – 20-21 March 2023 | Pullman Dakar Teranga, Senegal

DAY 1 – Monday 20 March 2023		
CHAIR: West African Health Organisation (WAHO / OOAS)		
Time	Activity / Session	Responsible
08:30 - 09:30	Arrival and registration of participants – Room KEUR DAMEL	ARC
09:30 - 09:45	Participants introduction	ALL
09:45 - 10:00	Statement by the African Risk Capacity and meeting objectives	ARC COO
10:00 - 10:15	Welcome address and opening remarks by host country	Director of Civil Protection, Ministry of Interior
10:15 - 11:00	GROUP PHOTO AND COFFEE BREAK	ALL
11:00 - 11:30	<ul style="list-style-type: none"> African Risk Capacity video Introduction to the African Risk Capacity (ARC), its Outbreaks and Epidemics (O&E) Programme and innovative risk financing mechanism Q&A 	ARC Lead Advisor Outbreaks & Epidemics
11:30 - 12:00	<ul style="list-style-type: none"> Introduction to ARC Gender Strategy and gender transformative strategies for effective management of public health emergencies Q&A 	ARC Head of Gender Unit

12:00 - 13:15	<p style="text-align: center;">PANEL DISCUSSION</p> <p>The importance of including gender responsive strategies in the management of high-impact public health emergencies and disasters</p> <p style="text-align: center;"><u>Moderated by:</u> Mr. Daouda SEMBENE AfriCatalyst CEO</p> <p style="text-align: center;"><u>Keynote:</u> Dr. Amadou BAÏLO DIALLO Regional Advisor Health Risk Management and Country Preparedness – WHO AFRO Emergencies Preparedness and Response, Dakar Hub</p> <p style="text-align: center;"><u>Panelists:</u></p> <ul style="list-style-type: none"> Mrs. Ramatoulaye DIEYE Gender Advisor – WFP Regional Bureau Dakar Dr. Yves MONGBO PO Maternal and Child Health – West African Health Organization (WAHO/OOAS) Dr. Astou FALL Director of Programs – Speak Up Africa Mr. Mbagnick DIOUF Journalist – Vice President of the Senegalese Network of Journalists on Health and Environment 	ARC
13:15 - 14:30	LUNCH	ALL

14:30 - 15:00	Plenary session: Icebreaker Questions	ARC
15:00 - 15:30	Overview of the ARC-BMGF Project	ARC
15:30 - 16:00	Q&A session	ARC
16:00	Wrap up of Day 1	ARC

DAY 2 – Tuesday 21 March 2023
CHAIR: WFP Regional Bureau Dakar

Time	Activity / Session	Responsible
09:00 - 09:30	Welcome and recap of DAY 1 – Room KEUR DAMEL	ARC
09:30 - 09:45	<ul style="list-style-type: none"> • Presentation of DAY 2 objectives • ARC Gender and DRM video 	ARC
09:45 - 10:45	Presentation of the ARC-BMGF workplan	ARC
10:45 - 11:00	Coffee break	ALL
11:00 - 12:00	<p style="text-align: center;">GROUP WORK</p> <p style="text-align: center;"><u>QUESTION</u></p> <p>From your experience, identify gaps/challenges to mitigate the gendered impact of health emergencies, and provide examples of best practices from the following perspectives:</p> <ol style="list-style-type: none"> Health system service delivery: access and delivery of routine and emergency health care services in health emergency settings Institutional: structures, committees, ministries, task force, agencies... Policies: bills, laws... Partnerships & resource mobilization at country and regional levels <p style="text-align: center;"><u>GROUPS</u></p> <p>GROUP N° 1: Côte d'Ivoire + Senegal + Guinea-Bissau GROUP N° 2: Ghana + Nigeria + Sierra Leone + Guinea-Bissau GROUP N° 3: Partners</p>	ARC

12:00 – 13:00	Plenary	ARC
13:00 – 13:10	Summary of the recommendations from the Group Work	ARC
13:10 – 13:20	Way forward for the ARC-BMGF project and next steps	ARC
13:20 – 13:30	Closing remarks	ARC COO
13:30	End of the West Africa Regional Consultation and LUNCH	

Annex 2: List of Participants

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