UGHE's 2020 Gender and Diversity Audit Report

August 2021

Table of Contents

List of figures and tables

List of Abbreviations

Abbreviations	Full Description
AQP	Academic Quality Policy
CGE	Center for Gender Equity
COVID	Coronavirus disease (COVID-19)
DAT	Diversity Audit Tool
DVC	Deputy Vice Chancellor
ELT	Executive Leadership Team
FY	Financial Year
HIV	Human Immunodeficiency Virus
HR	Human Resources
HRM	Human Resource Management
ILO	International Labour Organization
INT	Institutional Policy
IT	Information Technology
LGBTQIA+	Lesbian, Gay, Bisexual, Transsexual, Queer, Intersex, Asexual...
M&E	Monitoring & Evaluation
MBBS	Bachelor of Medicine, Bachelor of Surgery
MGHD	Masters in Global Health Delivery
OAP	Operations and Administration Policy
PD	Professional Development
PIH	Partners in Health
RAG	Research and Grants
SAS	Student Affairs and Services
SPSS	Statistical Product and Service Solutions
UGHE	University of Global Health Equity
VC	Vice Chancellor

Forward from Prof Agnes Binagwaho

In early 2020, the University of Global Health Equity (UGHE) launched its Center for Gender Equity, which, later that year, led the first Gender and Diversity Audit at UGHE.

An extensive report of the process and findings, this audit document is a testament of UGHE's commitment and willingness to examine its practices for gender and diversity sensitivity; to help guide its future strategies and actions. It will also serve as a critical reference for future similar audits at UGHE.

The Gender and Diversity Task Force composed of staff and students from different departments made this an inclusive and participatory process, and UGHE is pleased with the level of response from staff and students on the study tools.

My thanks goes out to the Center for Gender Equity which led this process, and to all staff and students who actively participated in the study, the report write up, and the validation processes.

Having conducted this first-of-its-kind audit, UGHE is pleased to announce that it is in a position to provide support and consultancy to other academic and non-academic institutions who are interested in undertaking this process.

Best,

Prof Agnes Bingwaho
MD, M(Ped), Ph.D

Executive Summary

The Center for Gender Equity (CGE) together with the University of Global Health Equity (UGHE)'s Gender and Diversity Inclusion Task Force studied UGHE's organizational practices, academic activities, student and community engagement projects and overall organizational culture for gender and diversity sensitivity through an internal audit.

The objective of this gender and diversity inclusion audit was to examine and influence UGHE's institutional policies, budget, programs and practices by gathering evidence on UGHE's strategies towards addressing gender and diversity issues. For this purpose, the audit used staff and students survey tools, in-depth staff interviews and consultations with the gender and diversity inclusion task force and UGHE Leadership. The final report was also prepared through engagement of the task force and included staff's input through the validation process.

This first gender and diversity inclusion audit was also intended to inform an upcoming gender and diversity mainstreaming strategy for 2021. Subsequent gender and diversity inclusion audits will be undertaken to determine changes in perception, knowledge and practices. This audit, being the first of its kind, is instrumental not only in finding gaps and areas of improvement, it is also an important document in guiding different units' future plans, by serving as a reference <u>for all departments</u> at UGHE.

For this audit, a policy review tool consisting of 20 quantitative questions was used to measure gender and diversity considerations in UGHE's policies. A total of 90 UGHE staff (56% males, 37% females and 7% unspecified) and 44 UGHE students (64% females and 36% males) also participated in the audit by filling out the online surveys. A total of 22 in-depth interviews were also undertaken with representatives from all but two departments (one being the CGE and the other, the Institute of Global Health Equity Research, who were represented in the task force). A summary of the most important findings is presented below:

<u>Knowledge and experience of staff on gender and diversity:</u> 41% of the staff agreed that they had the necessary knowledge, skills and attitude to carry out their work with gender awareness/sensitivity, while 46% stated a moderate level of knowledge. On the issue of diversity inclusion, again the largest group (54%) stated that they only had moderate level knowledge, while 37% affirmed that they had sufficient knowledge to carry out their work with diversity inclusion awareness/sensitivity. Only 6% reported not having the skills. Interviewed staff were in agreement on the need to train staff to have a common and contextualized understanding and application of these concepts.

Similarly, 55% of the students who took part in the audit stated moderate level knowledge, skills and attitude to exercise gender awareness and sensitivity, while 35% expressed that they had a very good understanding of the concept. A similar response was obtained on awareness and knowledge on inclusiveness and diversity, hence calling for more attention on these concepts in courses and training.

Access to training is crucial in ensuring proper mainstreaming of gender, diversity and equity in general; 63% of UGHE staff who took part in this audit confirmed that they had not previously received some form of training on diversity inclusion, and integration of rights of people with different needs; while training on gender sensitive planning or gender mainstreaming was received by only 38% of the staff who filled out the online audit tool, indicating the need for relevant trainings and supportive materials on these two concepts.

The audit also invited staff and students to define minorities in the context of UGHE. Different responses included: Rwandan female faculty, women in academia, women in leadership positions, students from marginalized social and economic backgrounds, people from marginalized ethnic groups, foreign students, people living with disabilities, LGBTQIA+ community members, and different religious groups. This information is important for various programs at UGHE, to ensure consultations with these groups in project design, programs, research, policies, opportunities and plans, as relevant.

Reflection of gender and diversity in organizational vision, strategy and policies: From all the interviews, staff unanimously agreed on two things; that although not mandated, there was "a sense of equity" at UGHE, and that there was a dire need to structure and formalize this focus on equity. On the issue of whether the integration of gender and minority equity in programs or projects was mandated at UGHE, 14 of the 22 staff interviewed responded that they were not aware of policies dictating this, but had witnessed UGHE's focus on gender equity. As a member of the Executive Leadership Team (ELT) elaborated "there was the intention to mainstream gender [and diversity inclusion] and that was one of the reasons for the establishment of the Center for Gender Equity".

Review of 89 organizational documents at UGHE also indicated that 87.8% of reviews had adequate use of gender-sensitive or gender-neutral language, while the focus on diversity sensitive language was visible in only 33.9% of the reviews, showing the need to refine policies to reflect diversity sensitivity and inclusiveness. The audit also affirmed the need to work on creating awareness about existing policy documents, as well as preparing new ones such as one on "Gender and Diversity", to guide practices and implementations. While there are no specific gender and diversity policies in place at UGHE at the time of the audit (2020), PIH was in the process of finalizing a gender policy to guide its sites. The undertaking of this gender and diversity audit is timely in preparing a policy that is relevant to UGHE, based on identified challenges and needs.

Planning and implementation mechanisms: Pertaining to whether staff's roles contribute to the empowerment of women as well as to changing unequal gender relations, 24% of the staff who took part in this audit believed they did to a full extent, while 45% noted that their contribution was moderate. The remaining 22% reported not having a role, while 9% reported that they did not know if their roles contribute towards changing gender relations. Various mechanisms employed by some departments in changing unequal gender relations are mentioned in this audit, to serve as a reference and guidance for others.

In general, some of the major challenges identified through this audit include limited availability of gender and sex disaggregated data, and gender sensitive activity indicators across different departments: 40% of the staff who took part in the audit noted that their implementation reports did not include sex-disaggregated data. The need for planning and reporting formats to allow for the collection of sex-disaggregated data to a full extent was emphasized.

Regarding UGHE's implementation mechanisms, interviewed staff indicated that integrating gender and diversity goals in the university's planning and implementation mechanisms would require the support of the CGE, and would mean appointing a person to specifically oversee gender and diversity mainstreaming across all departments. With proper mainstreaming, this could also be achieved through enhancing staff awareness about mainstreaming and engaging the Monitoring and Evaluation (M&E) department in monitoring and supervision of gender and diversity equity goals, indicators and actions across all plans.

Staff's limited awareness about the different reporting mechanisms - for example, for sexual harassment - is another area of required improvement identified through this audit. Another challenge is the reporting channel for harassment through the Student Services coordinator or the campus nurse, who at the time of this audit were both male. The need for a well-stocked documentation center with resources on gender and diversity are among the recommendations made in this audit.

Organizational resources: In terms of availability of human, financial or technical resources to mainstream gender and diversity inclusion, majority of staff (72%) noted not knowing if UGHE had such resources and where they could be accessed, 8% believed they were available while 20% believe they were not. When it comes to financial resources, the Center for Gender Equity had been able to secure operational and personnel budget for FY20-21, however given its many plans to mainstream gender, the need for additional technical and financial resources were pointed out.

Reporting, monitoring and evaluation (M&E) mechanisms: Majority of staff respondents (40%) reported that their implementation reports did not include sex and/or gender disaggregated data while the next biggest group (26%) reported that it was not applicable. Regarding implementation of gender and diversity objectives, majority of staff (75% and 77% respectively) did not know whether these efforts were documents, and 16% and 15% thought it was to a 'moderate extent' in both cases.

Pertaining to the collection of gender or sex-disaggregated data in evaluation reports, 51% of participants did not know whether this was done, while 23% thought it was done at a moderate level and 15% confirmed that it wasn't done yet. Similarly, 66% of staff fif not know if reports and plans showed minority disaggregated data.

An area where this was being done at an extensive level was with students' admissions and services where sex disaggregated data was collected at every level of the recruitment process (online application, entry exam, interview…). The Center for Gender Equity along with the M&E department plan to institutionalize this type of data disaggregation and develop other indicators to map out equitable and inclusive goals and accurately measure their impact. Addressing these issues in awareness, resource, planning, implementation and supervision is expected to pave the way for properly mainstreaming gender and diversity in UGHE's plans, policies and operations.

Detailed findings and recommendations are presented in the narrative report below.

1. Introduction/Background

1.1. UGHE's demographic profile

The University of Global Health Equity was established in 2014, and since 2015 has provided a Master of Science In Global Health Delivery (MGHD). The university also provides a Bachelor of Medicine, Bachelor of Surgery (MBBS), which is a six and a half-year, bachelor's level medical degree coupled with the MGHD degree. UGHE's Executive Education Certificate Courses also offer a variety of programs in management, leadership, and high-impact delivery on quality health care. UGHE is also boosting development in the region by engaging, hiring and training local labor and launching community engagement projects in Burera District in Rwanda, where the university's campus is located.

At the time of the audit (2020), UGHE employed 115 full-time staff and faculty, 89.5% of whom were originally from Africa, 4.3% from Europe, 1% from Australia, and 5.2% from North America. Altogether, they represented 13 countries: Nigeria, Uganda, Australia, Belgium, Canada, Zambia, Kenya, United States, Burundi, Zimbabwe, the United Kingdom, Ethiopia and Rwanda. The majority of staff would be considered part of the youth (18-35 years), as the graph below with the sex-disaggregated age groups of UGHE's employees shows.

Sex-disaggregated age groups at UGHE, 2020
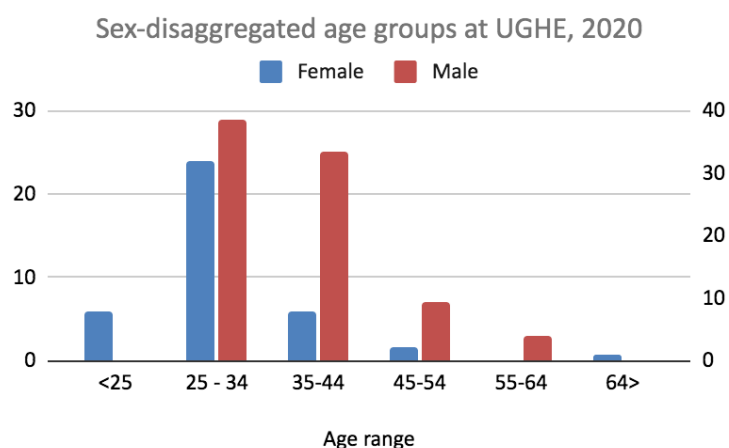
UGHE's staff and faculty's roles can be categorized into 12 job categories: supporting staff (such as drivers, cleaners, technicians, gardeners etc.), assistants, associates, accountants, coordinators, lecturers and faculty, managers, specialists, head of departments, directors and chairs, deputy vice chancellors, and the vice chancellor. The graph below of the sex-disaggregated job categorization of all employees present at the time of the audit indicates that male employees outnumbered females ones in all but three categories.

Sex-disaggregated Job Categories
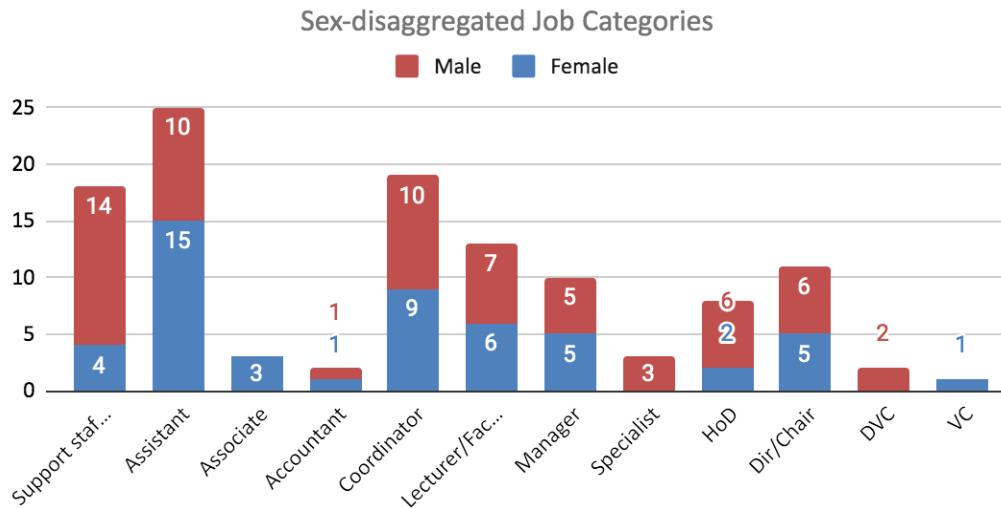
The students who took part in this audit were from the 5th cohort of the MGHD program (Class of 2020) and the first cohort of the MBBS program (Class of 2025). Comprised of 15 female, and 12 male students, the MGHD'20 cohort represented 12 countries; 85.2% from the African continent, from North America and Europe - 3.7% each, and 7.4% from Asia. All 30 of the MBBS'25 students were from Rwanda, Africa.

1.2. Rationale of the audit

One of the objectives of UGHE is to promote equity in global health education, with gender equity, diversity and inclusiveness among its core principles. Therefore, the Center for Gender Equity (CGE) was established in early 2020 with the purpose of mainstreaming gender in the overall operation of UGHE, specifically the academic, research and community development engagements and organizational practices. In line with UGHE's vision, that of the CGE is to "become a center of excellence in gender equity, through implementation of gender sensitive standards of practice, in providing accessible, practical and delivery-based education to the next generation of global health leaders, through improving health outcomes and social systems."

Even though UGHE is a young organization, the importance of assessing organizational practices, challenges and successes in gender and diversity mainstreaming was valued and done through this audit. The CGE together with UGHE's Gender and Diversity Inclusion Task Force (See Annex) studied UGHE's organizational practices, academic activities, research activities and student and community engagement projects for gender and diversity sensitivity.

Addressing equity entails examining the extent to which the needs and priorities of diverse groups are explored and integrated into programs, policies, plans, projects, structures and budgets. The literature on diversity audits showed the tools that have been used to examine

minority reach and disability inclusion[1,2] and how minority needs' and priorities are considered, or not, in the provision of access to services and decisions. Such kinds of assessments take individual needs, cultural and religious requirements, levels of knowledge by minority groups on provided services, if issues like discrimination, and racial harassment and disadvantage are thoroughly examined, and whether they are fitting to the context under which the projects operate. It also means considering the intersectionalities within gender and minority groups, and the challenges and opportunities specific to each 'subgroup'.

1.3.   Scope and objectives of the gender and diversity audit

The objective of this gender and diversity inclusion audit is to study and influence UGHE's institutional policies, budget, programs and practices by gathering evidence on the UGHE strategies towards addressing gender and minority issues in academic, research, and organizational management activities.

The results of this audit show the challenges, gaps, successes and lessons to learn, which will serve as input for the development of UGHE's first gender and diversity mainstreaming strategy.

This audit had three-stages which were crucial for the success of the mainstreaming process. These are:
  -   Participatory data collection,
  -   Analysis, and
  -   Gender and Diversity Mainstreaming Strategy development

This first gender and diversity inclusion audit is intended to inform the upcoming gender and diversity mainstreaming strategy for 2021. Subsequent gender and diversity inclusion audits will be undertaken to determine changes in perception, knowledge and practices. Implementation of the mainstreaming strategy will be monitored and evaluated through future audits.

1.4.   Limitations of the audit

The fact that this audit was conducted by the Center for Gender Equity together with the task force was instrumental in addressing some of the challenges encountered while undertaking it, such as lack of access to quantitative data analysis tools, like SPSS. However, this limitation was mitigated through engagement of a task force member that had access to, and knowledge on the use of this tool. In subsequent gender and diversity audits, it is recommended for the CGE to have SPSS or other qualitative analysis tools at its disposal.

---

[1] Netto et al, Audit of Research on Minority Ethnic Issues in Scotland from a 'Race' Perspective, Scottish Executive Central Research Unit, Gina Netto, Rowena Arshad, Philomena de Lima, Fernando Almeida Diniz, Martin macewen, Vijay Patel & Rana Syed

[2] Halder and Argyropoulos (Ed), 2019, Inclusion, equity and access for individuals with disabilities: Insights from educators across the world,

For the policy reviews, the audit looked at policies, regardless of whether they were first drafts, pending Executive Leadership Team (ELT) approval, or finalized. Due to the different stages many of the policies were at, the task force chose to review and provide feedback on all that were available. It is important to note that some policies might have been modified or updated since the audit, and so the recommendations from policy reviews might no longer be relevant, or might already be in place.

Another limitation was the COVID-19 situation, which restrained access to communities in the Butaro area who benefit from UGHE's community engagement services, and contract workers who are not directly hired by UGHE, but could have provided insight into what UGHE can do to ensure gender and diversity sensitivity in its approach with contractors. In the efforts to address this gap, the audit team conducted relevant interviews with department chairs and other staff who are in direct contact with community members and contract workers. Subsequent audits will however ensure engagement of these groups, through surveys and interviews, to identify any challenges and needs in gender equity and diversity.

2. Data collection and analysis processes

This audit used qualitative and quantitative information from key informant interviews, a desk review and online staff and student surveys to review successes, challenges and gaps.

2.1. Online survey

Online surveys were shared with all technical and administrative staff and students of UGHE at the time in an effort to gather qualitative and quantitative information about capacity, planning and implementation practices and needs at different levels. A total of 90 UGHE staff (37% females, 56% males, 7% unspecified) and 44 students (64% females, 36% males) who consented to take part in the audit filled out the online survey; following which the data was collected into an excel spreadsheet, anonymized, and later organized into categories and sub-categories.

The online student and staff surveys employed 50 and 59 questions, respectively, which collected information on the demography, knowledge and awareness on gender and diversity inclusion and UGHE's implementation practices and organizational culture. This tool was developed following review of four documents: the Diversity Audit Tool (DAT)[3], the ILO

---

[3] Diversity Assessment Tools: A Comparison, The International Journal of Knowledge, Culture and Change Management,

Gender Audit Tool[4], the InterAction Approach[5] and a Gender Audit Tool developed for Higher Education Institutions in Africa by the University of Pretoria[6].

2.2. In-depth interviews

In addition to the online survey, individual interviews were carried out with UGHE staff representing all departments, to explore practices and gaps in relation to gender equity, as well as their recommendations for the Center. Other departments were represented in this audit through engagement in the Gender and Diversity Task Force, which oversaw this audit.

A total of 22 in-depth interviews were undertaken with representatives from all but two departments (one being the CGE, and the other, the Institute of Global Health Equity Research, represented in the task force). The departments represented included: the Vice Chancellor's (VC) Office, Office of the Deputy Vice Chancellor (DVC) for Academic and Research Affairs, Office of DVC Administrative & Financial Affairs, Partnership and Development, Communication, Institute of Global Health, Center of Nursing and Midwifery, Community Health & Social Medicine, One Health, Educational Development & Quality Center, Executive Education, Safety & Security, Student Services, Campus Operations & Community Engagement/Health Services, Infrastructure, Contracting & Procurement, Finance, Human Resources, and Monitoring & Evaluation (M&E) departments.

Selection of interviewees was based on their leadership roles and the length of service in those departments, in order to obtain relevant information on previous practices, policies and challenges. The in-depth interviewees were made up of 13 female and 9 male staff at UGHE.

2.3. Document reviews

2.3.1. Measures and Data Management

The quantitative policy review survey measured five key grouped variables, adapted from the ILO gender and diversity tool[7]: (1) conceptual clarity of gender equality and diversity inclusion, (2) usage of sex or gender data, gender and diversity sensitive language, (3) account of needs or objectives of all genders, diversity and minority groups, (4) outline of interest, commitment and contribution of gender, diversity and minority groups and (5) indication of gender, diversity and minority capacity building, meeting inclusion and involvement.

---

[4] ILO (2012), A Manual for Gender Audit Facilitators: The ILO Participatory Gender Audit Methodology, 2nd Edition

[5] Inter Action The Gender Audit Handbook: A Tool for Organizational Self-assessment and Transformation 2010

[6] Gender Equality at Higher Education Institutions in Africa: A Gender Audit Tool, Center for Human Rights, Faculty of Law, University of Pretoria

[7] ILO (2012), A Manual for Gender Audit Facilitators: The ILO Participatory Gender Audit Methodology, 2nd Edition

The policy review questionnaire contained 20 quantitative questions, to be answered on a scale ranging from 0 to 4.

> The value "0" was considered "No or nothing at all", for those documents for which the question was relevant but not addressed,
>
> "1" was considered "Moderate or not enough" information about a particular concept,
>
> "2" was considered "adequate information" about a particular concept,
>
> "3" denoted that the question was not applicable to the document, and
>
> "4" indicated that information was not available in the policy document.

For analysis, these responses were categorized based on each variable concept on gender, diversity and minority inclusion to be measured, for example "No clarity", "Moderate clarity", "Adequate clarity", "Not applicable" and "Information not available.

Data was collected via Google forms and each policy had a minimum of two reviewers who reviewed the policy in a sequential manner. Therefore, reviewers were independent of each other`s opinion on the policy to be reviewed. The information from the Google form was downloaded into Excel, cleaned and exported into SPSS version 23.0 for analysis. Since the policy review exercise was not categorized as "human subject research", ethical approval was not obtained.

2.3.2. Document review analysis

Descriptive statistics (Grieve, 2009) were used to summarize all policies reviewed. Frequencies were reported in relation to all the questions under each variable concept on gender, diversity and minority inclusion.

To evaluate inter-rater reliability - "the extent to which two or more raters (or observers, coders, examiners) agree[8]" -, Cohen's kappa test was used. It determined an agreement level with the value of 0 to 0.2 as "no agreement", value of 0.21 to 0.4 as "minimal agreement", 0.41 to 0.6 as "moderate agreement", 0.61 to 0.8 as "substantial agreement", 08 to 0.9 as "strong agreement" and 0.91 to 1 as "almost perfect agreement" (McHugh, 2012).

3. Analysis and discussion of findings

3.1. Demography

A total of 90 UGHE staff participated in the Gender & Diversity Audit survey. The majority of participants (56%) were males, (37%) were females and (7%) did not disclose their gender. In terms of representation of different departments, 8% of those who took part in the survey stated they work in the Office of the Vice Chancellor, 34% were from the Academic and Research Affairs, and 44% were from Administrative and Financial Affairs. Infrastructure and Transport Units had 2 % and 1% survey respondents respectively. Out of the 90 participants, 10% did not indicate their respective departments.

---

[8] Lange R.T. (2011) Inter-rater Reliability. In: Kreutzer J.S., DeLuca J., Caplan B. (eds) Encyclopedia of Clinical Neuropsychology. Springer, New York, NY. https://doi.org/10.1007/978-0-387-79948-3_1203

With regard to student representation, 44 UGHE students, of whom (64%) were females and (36%) were males filled out the online survey tool. Of these, 59% were from the Bachelor of Medicine, Bachelor of Surgery (MBBS) program, while 41% were from the Master of Science in Global Health Delivery (MGHD) program.

3.2.   Knowledge and Experience of Staff on Gender and Diversity

Knowledge and understanding of gender and diversity concepts and tools is important in mainstreaming these into organizational plans, policies and practices. In terms of knowledge on gender issues, 41% of the staff agreed that they have the necessary knowledge, skills and attitude to carry out their work with gender awareness/sensitivity, while 46% mentioned having moderate level knowledge. 4% did not feel that they possessed those skills, while 2% did not know whether they had those skills or not. On the issue of diversity inclusion or equity, again the largest group (54%) stated that they only had moderate level knowledge, while 37% affirmed that they had sufficient knowledge and information on the issue to carry out their work with diversity inclusion awareness/sensitivity. Only 6% reported not having the skills, and 2% did not know whether they possessed those skills or not. Nonetheless, interviewees echoed the need to train staff in order to have a common and contextualized understanding of these concepts, and share the tools available. They emphasized the role of HR and the CGE in coordinating this internally; one department head recalled having had to rely on a partner organization's knowledge of gender concepts in the development of proposals.

Similarly, in the survey with students, 55% mentioned that they had a moderate level knowledge, skills and attitude to exercise gender awareness and sensitivity as students, while 35% felt that they had a very good understanding of the concept. Only 5% of the students reported having neither the knowledge nor the skills, and 5% didn't know if they possessed the knowledge and skills to exercise gender awareness. On the issue of inclusiveness and diversity, students were asked if they had the necessary knowledge, skills and attitude to exercise diversity inclusion awareness and sensitivity. Most students (61%) agreed that they had moderate level knowledge and skills to practice this, while 34% reported being fully confident in their knowledge and skills. A small number (5%) did not know if they had the knowledge or skills to exercise diversity inclusion awareness.

Access to training is crucial in ensuring proper mainstreaming of gender, diversity and equity in general. Of the UGHE staff that took part in this audit, 37% confirmed that they had previously received some form of training on diversity inclusion, identification, and integration of rights of people with different needs; while 63% (48% female, and 52% male) mentioned that they had not received such training in the past. The level of training among those who had taken such programs, ranged from advanced training (29% - 70% male, 30% female), basic level training (66% - 30% female, 70% male), and Training of Trainers (ToT, 6% - 50/50 male and female). 58% (55% male, and 45% female) said they had not received specific training on gender sensitive planning or gender mainstreaming, and 1% did not know or remember. Of the 38% participants who had taken such training, 19% (43% female, 57%

male) completed advanced level training, and 75% (37% female, 63% male) completed basic training, while 6 % (50/50 male-female) had completed a training of trainers (ToT) program.

This audit also aimed to create an understanding of how well the needs and priorities of different groups were integrated, and which ones were deemed as minority groups at UGHE in terms of access to services and opportunities. When asked to list different minority groups - defined as "various groups who hold few or no positions of power or who experience relative disadvantage as compared to members of a dominant social group in a given society" - respondents to the staff survey mentioned:

- Students and staff from a less privileged or low income background,
- Staff with limited qualifications,
- Staff in some posts such as drivers, cleaners, kitchen staff, gardeners, and landscapers,
- Women from a low income background,
- Young black women,
- Rwandan female faculty,
- Women in academia,
- Women in leadership positions,
- Religious minorities, such as Muslims,
- People with 'basic' academic background,
- People living with disabilities,
- Refugees,
- LGBTQIA+ or people with different sexual orientations,
- People with a language barrier,
- Junior faculty,
- African faculty members,

One recurring answer was that UGHE has no minority groups, while some UGHE staff noted that students and youth are in the minority groups. Two respondents in the staff survey also mentioned that male students could be considered as a minority at UGHE given that female ones outnumbered them in both the Masters and Bachelor of Medicine, Bachelor of Surgery programs. However, given that such a program is designed to address existing gender disparity in the representations of females in medical education in Rwanda, the lower numbers of males in these programs are justified. (See table 1)

Table 1: Sex-disaggregated yearly intake/hire of students & staff/faculty

	Staff		MGHD		MBBS	
Year	Female	Male	Female	Male	Female	Male
2015	1	2	10	15	0	0
2016	2	1	10	13	0	0
2017	2	4	10	13	0	0
2018	10	12	14	10	0	0

| 2019 | 19 | 30 | 15 | 12 | 20 | 10 |
| 2020 | 17 | 15 | 14 | 11 | 24 | 12 |

Figure 1: Sex-disaggregated hires and departures per year
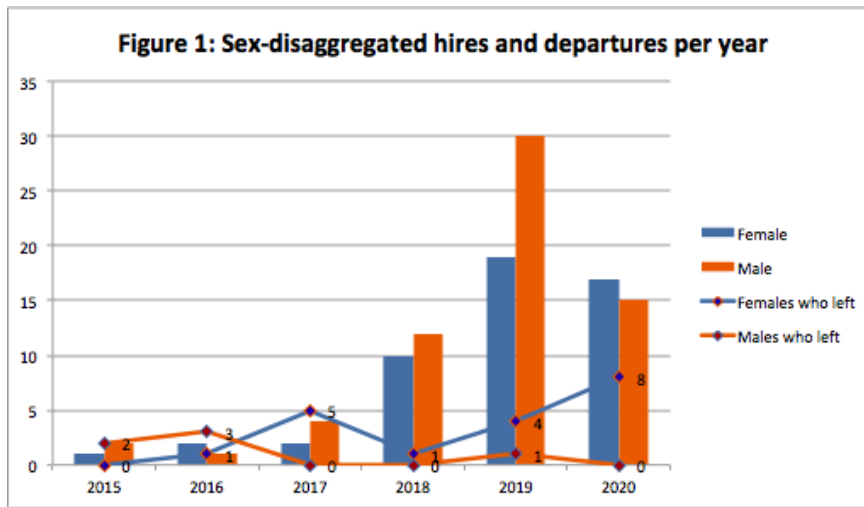
HR figures (Fig. 1), as of November 2020, show that of the 115 full-time UGHE employees, 64 were male (56%), 12.5% of them holding leadership roles as chairs, directors, and above; while from the 51 female employees (44%), 12% were part of the leadership team. Another staff member commented on the lower retention rate of women over the years, suggesting they might be a minority group, or face specific challenges.

In the students' online survey, poor people, disadvantaged ethnic groups, people with a language barrier, people living with HIV and those with mental health disorders were specifically mentioned as minority groups. They were also asked to list down groups that they consider as minorities, within UGHE's target communities, staff and students population. Some students mentioned the following groups as minorities:
- Students from marginalized social and economic backgrounds,
- Those from a marginalized ethnic groups,
- Foreign students,
- Targeted communities in Butaro,
- Marginalized communities like the Twa's of Rwanda,
- People living with disabilities,
- LGBTQIA+ community, and
- Religious groups.

In the context of UGHE, an understanding of minority groups is very important, given the University's focus on equity, and programs to teach as well as practice equity. It is also critical to consider the intersectionalities within the identified minority groups, i.e. how a young, black, female faculty's challenges might differ from an older, non-black female faculty. This information is necessary in ensuring that these groups are properly consulted and represented across various programs, opportunities and plans, as relevant.

3.3. Reflection of gender and diversity in the organizational vision and strategy

UGHE's 5-year strategic plan (FY18-FY22) has five major priorities, namely 1) Health and implementation science education, 2) Research, policy, advocacy in delivery science, 3) services for global health professions, 4) maximizing community benefit, and 5) building an enduring institution.

The term equity, *AEQUITAS*, is central to UGHE and that was indicated in the vision of UGHE, which is "a world where every individual - no matter who they are or where they live can lead a healthy and productive life." Equity, which "recognizes that each person has different circumstances and allocates the exact resources and opportunities needed to reach an equal outcome", differs from equality, which means, "each individual or group of people is given the same resources or opportunities."[9] Seeing equity as "the process and equality an outcome"[10] is central to what UGHE does in improving health outcomes and social systems. However, the fact that specific reference is not made to gender equity, or the need to ensure diversity in the Strategic document, which guides overall operation of staff, is a disadvantage. It is imperative to outline the kind of distinct measures that should be taken to address the needs of different groups, through recognition of different needs of communities, outlining the need for gender sensitivity and special attention to minorities facing poor health outcomes due to different forms of discrimination and inequity.

This audit measured UGHE staff's knowledge on the vision, goals and principles of UGHE, and whether it has an explicit commitment to promoting or achieving Gender equality. While 66% of the staff that took part in this audit agreed that such commitment is shown to a full extent in the vision, goals and principles, 31% mentioned that it was reflected to a moderate extent, while 6% said it is not, and 3% did not know. Similarly, on the issue of diversity inclusion and consideration for minorities, 57% of the staff indicated that such a commitment is reflected to a full extent in the vision, mission and strategies; while 34% said it was to a moderate degree, 6% thought there was no commitment, and 3% did not know. This again shows the need to explicitly state gender equity, diversity and inclusiveness in the principles and strategies of UGHE, as well as educating staff on how to apply UGHE's principles through implementation mechanisms.

The same question was asked of students on the vision, goals or principles of UGHE and its explicit commitment to promoting or achieving gender equity, to which 57% reported that this was being done at UGHE to a full extent, while 32% said that it occurred to a moderate

---

[9] The George Washington University (2020). Equity vs. Equality: What's the Difference? https://onlinepublichealth.gwu.edu/resources/equity-vs-equality/

[10] JustHealthAction (2020). http://justhealthaction.org/wp-content/uploads/2010/05/JHA-Lesson-Plan-3-How-are-equity-and-equality-different-final.pdf

extent. A small group (2%) indicated that such explicit commitments were not visible in the vision statement, goals and principles, while 7% didn't know if UGHE had that commitment; and 2% of the participants preferred to not answer. On the issue of diversity promotion, again 59% said that UGHE commitment to promoting diversity inclusion was visible of the vision, goals and principles to a full extent, while 36% mentioned that it is visible to a moderate level. Again, a small number (2%) did not know, and 2% responded in the negative.

From all the interviews, staff unanimously agreed on two things; that although not mandated, there was "a sense of equity" at UGHE, and that secondly, there was a dire need to structure and formalize this focus on equity. Some staff (14) answered "no" when they were asked whether the integration of gender and minority equity in programs or projects was mandated at UGHE, explaining that they were not aware of policies dictating this, but had witnessed UGHE's focus on gender. Preferential treatment given to female student applicants was the most common example provided, and other examples ranged from the provision of free sanitary pads, to a workforce that, up until recently, was majority female, to the name of the university itself. Concurrently, they all agreed that despite all being done to encourage a gender-sensitive culture, there was still more to do, starting with the creation and dissemination of policies, procedures and practices that address institutional inequities. A member of the ELT further elaborated by saying: "there was the intention to mainstream gender [and diversity inclusion] and that was one of the reasons for the establishment of the Center for Gender Equity".

3.4. Staff knowledge on organizational policies

Gender and diversity policies are critical in guiding implementers on what to plan, who to consult, what agendas to raise, and how to ensure a gender and diversity sensitive implementation in their programmatic and organizational areas. At UGHE, while there were no specific gender and diversity policies in place at the time of the audit (2020), its parent organization, Partners in Health (PIH), was in the process of finalizing a gender policy to guide its sites. The undertaking of this gender and diversity audit is therefore timely in preparing a policy that is relevant to UGHE and identifies and suggests measures to fill gaps.

This section of the audit explored whether UGHE's staff and students had knowledge about the absence of such an institutional policy, and what they felt should be considered in preparation of such a policy. Of the staff that took part in this audit survey, 41% believed that UGHE already had such a gender policy, while 21% believed there was a policy for ensuring diversity and minority inclusivity. Of the students who took part in this audit, 64% also believed that UGHE already had a gender policy in place, while 20% also believed there was a diversity inclusion policy.

This misconception can mostly be attributed to the fact that UGHE has programs, which prioritize some groups over others in the efforts to ensure equity. 13% of the participants who took part in this audit noted that UGHE had activities that specifically targeted one gender. Examples included:

- Recruitment of more female students than males;
- Mentorship initiative for junior professionals;
- Establishment of a Center for Gender Equity;
- Activities like subsidies for sanitary products;
- Community engagement programs and sports activities that target minorities on the campus;
- The presence of a mother's room for breastfeeding, pumping breast milk…
- UGHE community outreach, where different communities are visited outside the campus or brought to the campus, mainly for advocacy and raising awareness for marginalized communities,
- Umuganda (community service) and other fundraising activities, which UGHE engages in, to support the vulnerable by constructing houses for the poor in Butaro.

With regard to the above discussion, some participants expressed concerns about alienation of other groups. One was the issue of alienating non-Rwandan students from the sports field, the Zumba class dress code that seems to favor women more than men, and the hiring of more men over women especially in MBBS and Health Services that appears to have favored men. In one way or another, these practices tend to include one group, while limiting the participation of others intentionally or not.

Interviewed staff also acknowledged the need for a gender and diversity policy as well as the integration of those issues across different policies. Most agreed that there was not only a need for gender equity and diversity goals and policies, but also a guideline on how to maintain a gender-lens when developing policies and processes, or designing strategies and curricula. One staff noted that though they did not understand what gender-awareness in policy development looked like, they made sure to use 'gender-neutral language', while another noted having difficulty using 'gender-sensitive' language. Indeed, as shown in the section on Policy Documents Reviews, 87.8% of reviews stated there was adequate use of gender-sensitive or gender-neutral language, with the answer dropping to 33.9% for use of diversity and minority sensitive language.

3.5. Organizational culture

An assessment of the organizational culture entails examining UGHE's environment as a workplace and campus for people of different needs, genders, backgrounds; organizational practices, such as availability of grievance mechanisms; staff behaviour and attitude towards gender and diversity issues/ agenda; harassment etc.

In terms of the working environment, UGHE's staff were asked if the working environment had improved for women and men, other genders and diversity groups, including youth, people living with disabilities, racial, religious minorities, etc. in the past two years. 38% of those who took part in the online survey reported that it had improved, while 8% said it had not. However, the larger portion (54%) did not know whether it had improved or not. The majority echoed that UGHE promotes an inclusive working environment, where everyone feels welcomed regardless of their race, religion, nationality or any other background.

Others highlighted the support given to people with living disabilities, in terms of infrastructure and other resources to ease their stay at the campus. *"I am grateful that our campus has ramps, handicapped bathrooms and specific rooms that are handicap accessible. I like that religion is not a factor in the hiring process, and we have people from all over the world."* stated one participant.

Staff who noted that the working environment has not changed made recommendations, such as providing a prayer room, gender balance in the hiring process to ensure that all departments are equally represented, encouraging constructive feedback between junior staff and their supervisors; and conducting a needs assessment to figure out the gaps and provide appropriate measures, which this gender and diversity audit is aiming to do.

With regard to the infrastructure of the campus and head offices to enable different genders to carry out their work (e.g. in relation to safe working environment, toilet facilities, transports arrangement, working hours etc.), 80% of staff who took part in the survey reported that both the campus and head offices have adequate infrastructure, while 8% responded in the negative, 11% didn't know and 1% preferred to not answer the question. Those who answered "no" suggested including additional services such as mental health therapy on campus, family friendly services and policies on childcare and virtual work. They also suggested that the campus should have more accessible infrastructures for various types of disabilities, and the need to avail transportation for all.

One of the limitations in the responses was the question stem where we asked the staff about the improvement of the working environment. The question required that there was a baseline assessment to document such environmental processes. Perhaps this could have caused the high number of responders reporting that they didn't know whether it had improved or not especially since many staff were likely to be new.

Pertaining to the issue of whether the institutional culture at UGHE provided an environment that accommodates various needs of minority groups, such as people living with disabilities, religious participants who may require prayer areas, child care needs, etc., 44% of the staff who took part in this audit responded affirmatively, 22% reported that such an environment is not provided, 31% mentioned that they don't know, and 2% preferred to not answer the question. Participants whose answers were yes, mentioned the availability of infrastructure that support different needs for minority groups such as a prayer room, mother's room and special pathways that accommodate people living with disabilities (e.g. those with wheelchairs). "Infrastructure somewhat accommodates people with diversity" said one participant, "For example, a lift in Butaro was handy for a visitor with mobility impairment.*"*

Although wheelchair-friendly, the campus and its learning environment still have many gaps to fill for other groups living with visible disabilities, such as vision or hearing impairments. A faculty member in charge of e-learning emphasized the need for digital equity, and making sure that all online activities are accessible to everyone living with disabilities, as a way to

bridge that gap. A long-standing staff hoped to see "UGHE eventually adapt to include students and staff living with non-visible disabilities, like ADHD, autism or mental illnesses."

Concerning the provision of a prayer room, one respondent confirmed its availability on campus, another stated that students can use classrooms for prayer, if needed, and an ELT member wondered about the feasibility of providing a prayer room for all denominations. Based on these responses, the question of whether there is a prayer room in UGHE or not, seemed to be an issue that calls for awareness creation about the kinds of available spaces, and services at UGHE, and innovative ways they can be used to cater to different groups.

As indicated above, 22% of the staff that took part in this survey also felt the need for more efforts to provide an environment, which accommodates the needs of diverse groups. Of the participants, 16% also did not feel that UGHE provides the space to staff and students who want to organize and meet based on other aspects of their identity (such as gender and other interests). However, a larger percentage (30%) believed it did, while 52% said they did not know, and 2% preferred not to answer. In the in-depth interviews, some respondents noted that UGHE provides a sense of equity and equality to both staff members and students in terms of resources provided to them and opportunities.

One of the questions raised to assess the organizational culture is whether sexual orientation is a prohibited ground of discrimination at UGHE. Of the staff that took part in this audit, 32% reported that it is prohibited, 24% mentioned it is not, and 40% said that they don't know; while a small group (3%) preferred not to answer these questions. From searching the keywords "sexuality", and "sexual orientation" in all 89 reviewed organizational documents, only 7 explicitly prohibited discrimination based on sexual orientation, and none outlined any accountability process in case of discrimination.

On the issues of whether UGHE has rules and regulations that reinforced gender sensitive behavior such as discouraging insensitive jokes or comments on sexual harassment, 78% of the staff who took part in the audit reported that such regulations were reinforced at UGHE while 7% stated they were not, and 17% did not know if such rules were reinforced at UGHE or not. Those who answered yes reported that UGHE had policies and disciplinary sanctions that were reinforced by the Human Resource Department. In line with this, participants mentioned that those who were involved in such misconduct could be warned or could even face termination of employment at UGHE. One participant said, "Inappropriate sexist jokes may lead to punishments that might include dismissal according to UGHE HR policy."

Staff also mentioned that UGHE offers training on gender sensitive issues that tackles different topics such as sexual harassment. Every employee is encouraged to read the Partners in Health (PIH) code of conduct provided upon starting their job, according to an interviewee. Others mentioned that reporting such cases could be done by talking to staff representatives or by using the suggestion box put to make such complaints.

On the other hand, some respondents mentioned that although policies and disciplinary actions were put in place, they had not been put into practice, as they ought to have been, thereby discouraging reporting habits among staff. Participants suggested that such policies should be put into practice more rigorously. One staff shared that: *"It is more theoretical rather than practical, so while there is a sexual harassment policy in the HR manual, it is not clear how sexist behaviour is dealt with, or how one can report sexist behaviour."* Although the UGHE Policy on Sexual Harassment (Feb. 2020) mentions 3 groups for students and employees to report sexual harassment: the Admissions, Records & Student Affairs office, the HR office or the Rwanda National Police, neither this policy nor others outlined the process for how sexist behavior, microaggressions or discrimination based on gender or other identifiers were reported or dealt with.

With regard to whether UGHE has rules and regulations that reinforce diversity inclusive behaviour (e.g. comments that are insensitive to religious, social, ethnic, economic, racial minorities, etc.), 48% of the staff in this audit responded in the affirmative, while 11% said "no", 40% reported that they do not know and a small percentage (1%) decided to not answer this question.

The large majority (66%) of the staff in this audit believed that there were disciplinary measures in place to deal with individuals found to be engaged in bullying, harassment or discrimination; while 7% said there were no such measures, 24% did not know and a small group (3%) preferred not to answer. However, pertaining to application of any disciplinary measures against people found with such misconduct, 32% of the staff in this audit reported that the measures were enforced, while 9% said "no", and the larger proportion (57%) didn't know if disciplinary measures were being applied, calling for the need to create further awareness about existing measures and mechanisms for reporting such incidences.

Bearing in mind the crucial role policies play in defining an organizational culture, it is imperative these are used to create an equitable and inclusive environment, through the creation and language used in policies, and their implementation. Many staff requested regular HR meetings to disseminate available policies, and training to increase awareness on these topics.

3.6. Planning and implementation mechanisms and practices

This section of the audit explores UGHE's organizational policies and frameworks to address gender and diversity mainstreaming, as well as successes and gaps in the planning and implementation mechanisms to ensure gender and diversity sensitivity.

3.6.1. Organizational Policies at UGHE

I. Policy Review Characteristics

Review of policy documents was undertaken to measure the extent to which gender and diversity considerations were integrated in the policy design process and policy statements. A

total of 89 UGHE policies under seven different categories were reviewed. These included: Institutional policies (INT); Academic Quality (AQP); Student Affairs and Services (SAS) policies; Operations and Administration Policy (OAP); IT and Infrastructure policies; Safety and Security (SSP); Human Resource Management (HRM); and Research and Grants (RAG). Overall, there were 182 reviews, with a minimum of 2 reviewers and a maximum of 4 reviewers per policy document. The agreement between pairs of policy reviewers was high (Cohen's kappa = 0.7).

II.   Review of Conceptual Clarity on Gender, Diversity and Minority Inclusion

In response to the question, "The document has conceptual clarity on what gender equity means", a majority of reviews (n=114, 63.7%) of the 89 policy documents indicated the question did not apply to those policies, while some reviews (n=21, 11.5%) suggested that there was adequate clarity for some policies. In terms of conceptual clarity of diversity inclusion, approximately half of reviews (n=91, 51.1%) indicated that the policy documents had no conceptual clarity, while a smaller number (n=42, 23.1%) indicated that some documents had adequate clarity and fewer still (8.9%, n=16) indicated there was moderate clarity (see Table 2).

Table 2: Conceptual clarity on gender equity and diversity inclusion

	No clarity	Moderate clarity	Adequate clarity	Not applicable	Information not available
The document has conceptual clarity on what gender equity means	15 (8.2%)	12 (6.6%)	21 (11.5%)	114 (63.7%)	18 (9.9%)
The document has conceptual clarity on diversity inclusion	17 (9.3%)	16 (8.8%)	42 (23.1%)	93(51.1%)	14 (7.7%)

III.   Review of Gender and Diversity Disaggregated Data and Sensitive Language

Gender sensitive or gender-neutral language is a way to avoid bias or stereotypes by using all encompassing pronouns - like 'they' - that addresses all sexes and gender identities. In response "The document uses sex and/or gender disaggregated data", the majority of reviews (n=140, 76.9%) suggested that the statement was not applicable for most of the 89 policies. Fewer (n=42, 23.3%) indicated adequate use of gender-disaggregated data for some policies. Conversely, a majority of reviews (n=160, 87.9%) indicated that most policies used gender sensitive or gender-neutral language while a smaller number (n=63, 34.6%) indicated that some policy documents used diversity and minority sensitive language (see Table 3).

Table 3: Usage of sex/gender data, gender and diversity sensitive language

	No use	Moderate use	Adequate use	Not applicable	Information not available
The document uses sex and/or gender disaggregated data	8 (9.9%)	5 (2.7%)	42 (23.3%)	140 (76.9%)	10 (5.5%)
The document uses gender sensitive or gender-neutral	5 (2.7%)	3 (1.6%)	160(87.9%)	11 (6.0%)	3 (1.6%)

language					
The document uses diversity and minority sensitive language	11 (6.0%)	8 (4.4%)	63 (34.6%)	83 (45.6%)	17 (9.3%)

IV.   Review of Needs and Objectives of Gender, Diversity and Minority Groups in Implementation, Monitoring and Evaluation

In response to the statement, "The document takes into account the different needs of females, males and other gender", the majority (n=99, 54.4%) of the reviews on 89 policies indicated that the statement was not applicable. However, only 12.6% (n=23) of the reviews indicated an adequate account of the needs of all genders and 15.4% (n=28) indicated a moderate account of the 89 policies reviewed. Over half of the reviews (n=96, 52.7%) were of the opinion that the statement, "The document takes into account minority groups including youth, people living with disabilities, people from underrepresented gender identity, racial, ethnic, religious backgrounds", was not applicable to most of the 89 policy documents reviewed. Similarly, in response to the statement, "The document incorporates gender equality and minority inclusion objectives for implementation, monitoring and measuring outcomes", the majority of the reviews (n =132, 72.5%) indicated that this statement was not applicable to most policies. However, a small number (n=8, 4.4%) indicated that some policies adequately incorporated the gender equity and minority inclusion objectives (see Table 4)

Table 4: Account of needs or objectives of all genders, diversity and minority groups

	No account	Moderate account	Adequate account	Not applicable	Information not available
The document takes into account the different needs of females and males, and other genders	18 (9.9%)	28 (15 .4%)	23 (12.6%)	99 (54.4%)	14 (7.7%)
The document takes into account minority groups including youth, people [living] with disabilities, people from underrepresented gender identity, racial, ethnic, religious backgrounds	25 (13.7%)	26 (14.3%)	26 (14.3%)	96 (52.7%)	9 (4.9%)
The document incorporates gender equity, equality and minority inclusion objectives for implementation, monitoring and measuring outcomes, etc.	21 (11.5%)	10 (5.5%)	8 (4.4%)	132(72.5%)	11 (6%)

From the 182 reviews, there were a total of 77 responses to the two questions on where considerations of different needs of females, males, and other genders, and considerations of

minority groups are lacking. These responses can be summarized to: the exclusive use of binary pronouns (he/his/him and she/her/hers), lack of awareness of, consultation with, commitment to, or structures that protect all genders and minority groups.

V.   Review of Interests, Commitment and Contribution of Gender, Diversity and Minority Groups

In response to the statement, "The document outlines key activities that serve the interest of females and males", over half of the reviews (n=100, 54.9%) indicated that this statement was not applicable to most of the 89 policies reviewed. Less than one in five (n=31, 17%) indicated that some policies adequately outlined these activities. Similarly only 23.1% (n=42) of all 182 reviews from the 89 policies indicated that some documents had an adequate outline of activities that served the interest of diverse groups including minorities. In relation to the statement, "The document outlines commitment to time and resources for gender mainstream", very few reviews (n=8, 4.4%) indicated that some policies had an adequate outline, although the majority (n=128, 70.3%) indicated that the statement was not applicable to the policies. Correspondingly, only 9.3% (n=17) of all 182 reviews from the policies had indicated that some policies had an adequate outline of the commitment of time and resources for diversity inclusion. Only 6.1% (n=11) indicated an adequate outline in response to the statement, "The document addresses diverse group's contribution, benefits and behaviour in relation to policy". See Table 5.

Table 5: Outline of interest, commitment and contribution of gender, diversity and minority groups

	No outline	Moderate outline	Adequate outline	Not applicable	Information not available
The document outlines key activities that serve the interests of females and males	22 (12.1%)	18(9.9%)	31 (17.0%)	100 (54.9%)	11 (6.0%)
The document outlines key activities that serve the interests of diverse groups, including minorities	24 (13.2%)	17 (9.3%)	42 (23.1%)	85 (46.7%)	14 (7.7%)
The document outlines commitment of time and resources for gender mainstreaming	24 (13.2%)	3 (1.6%)	8 (4.4%)	128 (70.3%)	19 (10.4%)
The document outlines commitment of time and resources for diversity inclusions	28 (15.4%)	8 (4.4%)	17 (9.3%)	109 (59.9%)	20 (11%)
The document addresses diverse groups' contribution, benefits and behavior in relation to the policy (e.g.	23 (12.6%)	16 (8.8%)	11 (6%)	97 (53.3%)	35 (19.2%)

youth, people [living] with disabilities, people from underrepresented gender identity, racial, religious background)					

VI. Review of the Indication of Gender Diversity and Minority Stakeholders` Capacity Building, Meeting Inclusion and Involvement

In response to the statement, "The document indicates capacity building for stakeholders (e.g. beneficiaries, project staff, partner organizations and implementing partners) on gender concepts", a majority (n=136, 74.7%) of the 182 reviews from 89 policies, were of the opinion that this statement was not applicable and four (2.2%) suggested that it was adequately indicated while another 2.2% noted moderate indication of capacity building on gender concepts. "Information was not available" according to the remaining reviews. Furthermore, on the statement, "The document indicates capacity building for stakeholders (e.g. beneficiaries, project staff, partner organizations and implementing partners) on diversity inclusion", a majority of the reviews (n=134, 73,6%) suggested that the statement was not applicable and fewer (n=4, 2.2%) suggested some policies adequately indicated capacity building on diversity inclusion. In relation to meeting participation, a majority of reviews (n=140, 76.9) had equally indicated that the statements: "The document lists of participants at meetings held by the project show availability of sex and/or gender disaggregated data" and "Meeting reports show minority representation at the events" were not applicable to most of the 89 policies. However, in response to the statement "Women and men actively took part in the deliberations and preparations of the policy or the document", the majority of reviews (n=156, 85.7%) were of the opinion that the statement was relevant, but this information was not available in the policy documents. Similarly, 87.4% (n=159) of the reviews suggested that the information was not available that "Diverse groups, including minorities took part in the deliberations and preparations of the policy or the document". About half of the 182 reviews (n=92, 50.5%) on the 89 policies were also of the opinion that information was not available in response to the statement "Gender and diversity issues were on the agenda and were considered of importance to the topic being discussed". See Table 6.

Table 6: Indication of gender, diversity and minority capacity building, meeting inclusion and involvement

	Not indicated	Moderately indicated	Adequately indicated	Not applicable	Information not available
The document indicates capacity buildings for stakeholders (e.g. beneficiaries, project staff, partner organizations and implementing partners) on gender concepts	13 (7.1%)	4 (2.2%)	4 (2.2%)	136 (74.7%)	25 (13.7%)

The document indicates capacity buildings for stakeholders (e.g. beneficiaries, project staff, partner organizations and implementing partners) on diversity inclusion	16(8.8)	2 (1.1%)	4 (2.2%)	134 (73.6%)	26 (14.3%)
The document lists of participants at meetings held by the project show availability of sex and/or gender disaggregated data (or the breakdown of female and male participant) (Note that this question is specific to meeting reports)	6 (3.3%)	0 (0%)	0 (0%)	140 (76.9%)	36 (19.8%)
Meeting reports show minority representation at the events. (Note that this question is specific to meeting reports)	6 (3.3%)	0 (0%)	0 (0%)	140 (76.9%)	36 (19.8%)
Women and men actively took part in the deliberations and preparations of the policy or the document	6 (3.3%)	0 (0%)	3 (1.67%)	17 (9.3%)	156(85.7%)
Diverse groups, including minorities took part in the deliberations and preparations of the policy or the document	6 (3.3%)	0 (0%)	0 (0%)	17 (9.3%)	159 (87.4%)
Gender and diversity issues were on the agenda and were considered of importance to the topic being discussed (for review of important meetings, minutes, proceedings, organizational videos etc.)	7 (3.8%)	0 (0%)	0 (0%)	83 (45.6%)	92 (50.5%)

In general, 87.8% reviews indicated that policies had adequate use of gender-sensitive or gender-neutral language, while the focus on diversity sensitive language was limited with 33.9% of the reviews indicating the need to review and refine policies to reflect equity. Of the reviews, 11.5% indicated adequate clarity on gender in the reviewed policies, while 23.1% indicated that some documents had adequate clarity on the issue of diversity and minority inclusion. Use of sex and/or gender disaggregated data was not applicable in the majority (76.9%) of the policies reviewed, while adequate use for gender-disaggregated data was visible in 23.3% of the reviews.

Some staff found the non-applicability of most gender and diversity concepts in policies to be a concern in and of itself, wishing for more clarity on why that was the case, and why it shouldn't be considered an issue. They also suggested that beyond a review of policy documents, the audit should also undertake a holistic assessment of organizational plans, strategies, budgets, etc. for a more holistic assessment of the gender and diversity sensitivity and inclusiveness in the existing implementation mechanisms.

In general, the findings revealed that gender and diversity mainstreaming is visible in UGHE's policy documents to some extent, through some level of conceptual clarity on gender and diversity concepts, some level of gender sensitive or gender neutral language use, considerations for the needs of different groups and genders to a certain level, and key activity to address these needs. However, given that this is not mainstreamed across all the applicable policies, some revisions should be undertaken based on relevant recommendations. For this purpose, recommendations and reflections on each policy-reviewed were compiled and are accessible for departments responsible for the policies on this link.

3.6.2. Planning and implementation mechanisms: at UGHE and within the community

It is important to examine how well plans consider community needs and priorities, and employ proper indicators to measure progress when assessing the extent of gender and diversity mainstreaming into planning and implementation mechanisms. Identification of the needs and priorities of different groups is relevant in establishing plans, budgets and human resources.

This audit examined how well staff at UGHE considered these issues in their planning and implementation mechanisms through the strategic plan, departmental program plans, objectives, indicators and reports.

This audit also assessed staff's perception on their roles in integrating gender and diversity; and the mechanisms employed. The online survey revealed that only 24% of the staff that took part in this audit believed that their role contributed to the empowerment of women and changing unequal gender relations to a full extent; while 45% said it contributed to a moderate extent. The rest (22%) reported that they did not have a role while 9% did not know if their roles contributed towards changing gender relations. With regard to diversity inclusion, a higher proportion (42% of staff) affirmed that they contributed towards diversity inclusion at UGHE, and 28% stated they contributed to a moderate extent. The remaining 17% reported not playing any role, while 13% mentioned a lack of knowledge on whether they contributed towards diversity inclusion at UGHE.

When participants who agreed that they contributed towards the empowerment of women and changing gender relations, were asked to elaborate on this, some mentioned empowering women through academic programs' educational training, and activities focusing on leadership skills. Others stated that through their roles, they promoted gender equity and equality in their workspace, provided access to information that relates to gender equity, and elevated women's voices through different platforms. Additional roles mentioned were: advocacy for women's rights; ensuring their representation in the workplace; and mentorship. Others stated that their contribution was done through ensuring equity in recruitment processes in the MBBS and MGHD programs, considering gender balance while working with contractors, by advising and supervising female students in the MBBS program, etc.

Of the UGHE staff who took part in the survey, 78% said the University could not do more than what it was currently doing to institutionalize gender equity; 17% mentioned that they didn't know and 7% said nothing more could be done. Those who answered "yes" noted that this could be achieved through the creation of better gender equity policies, reinforcing existing ones, ensuring policies' accessibility, and putting in place a better reporting system. These policies should be inclusive and tackle issues that minority groups face in their workplace. As one staff stated, "*It could be done by [creating and] implementing gender equity policies or if there are, they could be made available to all the students, staff, contractors*"; another added "*UGHE should ensure that all staff are first of all aware of the necessary policies/documents regarding gender. Ensure documents/policies are readily accessible and available. Train staff on gender equity and equality so they are then able to walk the talk.*"

On whether gender equity is reflected in the goals and objectives of programs, projects and activities; a review of the Strategic Plan Document of UGHE (FY17-FY22) revealed that gender equity and diversity inclusion, although implicitly acknowledged, were not clearly stated in the strategic document, with clear objectives and indicators to measure changes.

In-depth interviews with staff on the planning and implementation mechanisms at UGHE also made it clear that guiding tools could play a significant role in mainstreaming gender and tackling systemic inequities. When asked if gender and minority equity goals and objectives were included in their program/project designs, most staff found that they were not; some explaining that it was difficult to know what 'implementation/application of gender' looks like, or that they found the term "gender and diversity inclusion" too broad of a concept in program design/planning, especially for newly established departments and centers.

Further elaborating on their roles in contributing to gender equity and diversity inclusiveness at UGHE, examples of explicitly stated gender and diversity goals were given, such as the carpentry workshop for the Burera community, or the students' recruitment policy, both requiring 70% female representation. Aware of the difficulties faced by high school girls in sciences, especially for girls in rural Rwanda, representatives from the Admissions, Records and Student Services, accompanied by MGHD female graduates and doctors, visit different all-girls schools ahead of admissions opening, to encourage more girls to apply for Bachelor of Medicine, Bachelor of Surgery. To facilitate access and remove economic barriers, entry exams are held in different provinces, and students who did not do well in the first round of exams can still be considered if they do well in subsequent recruitment stages. Although there is a committee to review such cases, there are still challenges in decision-making in the absence of an institutional 'Affirmative Action' type of policies or strategic goals. However, the formation of such a committee is considered as a step towards ensuring equity by giving opportunities for girls in provinces and areas that do not usually get representation.

Such formal frameworks guarantee not only the representation of women and minorities, but their full participation as well. Staff working in community engagement activities noted the difficulty of doing this in the informal settings their meetings are usually held. In these

settings, men generally speak up more, and women have to be singled out in order to have the floor, which depending on the culture could be more of a deterrent to their participation. In addition to all meetings having a Kinyarwanda – English translator, UGHE plans to make the meetings more inclusive through a partnership with the Rwandan National Community of the Deaf, to ensure the participation of all community members.

In the case of community engagement activities, UGHE was undertaking some needs assessment to ensure their plans were in line with community needs. In Burera, PIH and government partners usually help guide where UGHE's support - formal and informal - in the community should be directed due to their previous work with the community. A 2020 grant for the Nyamicucu community mandates the creation of a community advisory board, including a gender balance and minority inclusion clause, which would decide the priority needs of their community. All future UGHE community engagement activities plan to be based on community needs and priorities.

The audit also posed similar questions to students (MGHD2020 and MBBS2025) on whether they had roles in empowering women and changing unequal gender relations. Of the students who took part in the audit, 39% reported they contributed to a full extent, 32% to a moderate level, and 18% did not know if their roles contributed to the empowerment of women and changing unequal gender relations at UGHE, while 7% reported that it did not, and 5% preferred to not answer this question. Of those who responded that they did contribute, one stated, *"The knowledge gained from class has equipped me with skills that I can utilize in my community to advance gender equity in health care access."* Another one mentioned that they contributed towards women empowerment by using opportunities and platforms given to them at UGHE. A student also said *"My presence on this campus allows me to take leadership positions that empower me to realise that I am capable of becoming a leader".* In general, students who responded in the affirmative also mentioned that UGHE has provided them with space to learn, share their views and participate in decision-making.

On the question of whether UGHE could do more than what it is currently doing to institutionalize gender equity: 57% of responses were affirmative, 16% were negative, 25% stated that they didn't know, and 2% did not respond.

In a similar manner, 48% of the students who took part in the audit said UGHE could do much more than it is currently doing to institutionalize diversity inclusion and responsiveness, while 20% said no, and 27% reported that they didn't know and a small percentage (5%) did not answer the question.

Students suggested different ways in which minority inclusion and responsiveness could be mainstreamed in their curricula and learning experiences. Among these suggestions were:
- *"A separate course on minority inclusion and responsiveness"*
- *"Ensuring that minority groups are involved through community outreach activities"*
- *" Involvement of the unit working on equity, diversity and inclusion in curriculum"*

- *"Hiring those considered as minorities and providing them with career development opportunities, such as Rwandan/ African faculty, and people living with disabilities who fit the jobs."*

Pertaining to implementation mechanisms, interviewed staff noted that integrating gender and diversity goals in the university's planning and implementation mechanisms would require the support of the Center for Gender Equity. This would require: boosting the Center for Gender Equity's human capacity to ensure its cross-cutting role and appointing a person to specifically oversee gender and diversity mainstreaming across all departments. This could also be achieved through engaging the M&E department in the monitoring and supervision of gender and diversity equity goals and actions.

When it comes to implementation mechanisms for gender and diversity inclusion goals, a particular area, which is a pressing issue, is the implementation of the sexual harassment policy, which according to an interviewee, was prepared and shared after a sexual harassment incident had occurred. Interviewed staff had different opinions, where one noted that there were no proper reporting lines/mechanisms in place in cases of sexual harassment, while another thought the issue was that victims did not feeling empowered enough to speak up. Some staff also noted that the Sexual Harassment policy did not include contractors and skilled or unskilled laborers, leaving them vulnerable to exploitation and abuse of power. Accounting for the difficulty of following up on cases for contractors who are project-based and typically not hired by UGHE, there could be a need to instill a policy that protects contract workers and holds the service providers or vendors accountable. However, given that it is not the mandate of UGHE to address these issues, UGHE would need to put an accountability mechanism for the contractors into its contractual agreements.

In the case of students, reporting mechanisms for sexual harassment were found to be 'limiting and discouraging'. Although students receive a pre-arrival package that contains all the policies, and review it again during orientation, harassment is expected to be reported to either the Student Services coordinator or the campus nurse, who at the time of this audit were both male. Female students who were uncomfortable or unable to take such issues to them, would have to turn to faculty they felt they could trust, however faculty themselves did not feel skilled or knowledgeable enough to take this on, as was stated by one female faculty member. The same faculty member recalled an incident where the university decided to take care of and cover the fees for the MBBS students' health check-ups, usually administered and paid at a hospital or clinic. Unfortunately, there was an attempt to carry out pregnancy tests on all female students, which altered the considerate provision of free health check-ups into something intrusive, because it lacked a gender-lens in its implementation – and highlighting the need for this in UGHE initiatives, projects or programs moving forward.

A clear gap in this analysis is the lack of adequate community engagement during the audit, due to the Covid-19 situation. Contractors, daily laborers and recipients of UGHE services from the community need to be an integral part of subsequent audits.

3.7. Organizational resources

Under this section, the audit discusses availability of sufficient resources at UGHE, including human, financial, and technical to mainstream gender and diversity inclusion.

The majority of UGHE staff who took part in the online audit (72%) noted that they do not know if UGHE had a well-stocked operational documentation center that had audio/visual electronic materials on gender equity and diversity inclusion, while 8% responded in the affirmative and 20% stated those resources were not available. Of those who stated that these resources were not sufficient, 8% said information was lacking mostly on minority inclusion issues, 9% reported that it was on gender equity issues while 44% mentioned that the documentation was missing in both diversity and gender equity issues. One interviewed staff member maintained that the current model used for information storing, accessing and sharing, such as the library, might not be sustainable as the resources available were only available to students and staff, and were attained through partnerships and not UGHE-owned.

There was a gender and social justice course for MBBS students, which was expected to provide students with information, materials, skills and knowledge on gender and social justice. However, there was no internal pool of resources that UGHE staff could use to guide their work, other than online browsing tools.

Pertaining to financial resources, the Center for Gender Equity had been able to secure the required operational budget and staff salary for the FY20-FY21 financial year; and was not facing any constraints in terms of financial needs. However, given the plans to mainstream gender throughout UGHE and to launch a Gender, Sexual and Reproductive Health track in the MGHD program, the need for additional technical and financial resources had arisen. This called for further actions by relevant stakeholders at UGHE to work on fundraising activities. The Center for Gender Equity together with all concerned (MGHD and DVC for Academic and Research Affairs) were working on this aspect of building organizational resources; and expected these challenges in human resources would be met shortly to fulfill the Center's roles in organizational, academic, research and student engagement activities.

3.8. Reporting, Monitoring and Evaluation mechanisms

One of the mechanisms through which an organization can ensure proper mainstreaming of gender and diversity is by instilling proper mechanisms to monitor implementation, and through evaluation of progress and gaps. At UGHE, while only 15% of the participants reported that their implementation reports included a sex and/or gender disaggregated data at a moderate extent, 7% said that they did that to a full extent. However, 40% reported that their implementation reports did not include a sex and/or gender disaggregated data, and 11.4% mentioned that they did not know of this practice and 26% reported that it was not applicable for them. This emphasized the need for enhancing awareness about the concepts of

sex and gender disaggregation, gender sensitive reporting, M&E frameworks that indicate how well the concept of equity is addressed through implementation mechanisms, etc.

Regarding documentation, out of UGHE's staff that took part in this survey, only 2% reported that their implementation of specific gender equity objectives were achieved to a full extent, while 16% chose 'to moderate extent'. On the other hand, about 75% of the staff in the survey mentioned that they did not know about this and 7% reported that they did not document it. Similarly, lessons regarding implementation of specific diversity inclusion objectives were not properly documented, as only 15% of the respondents reported that this was being done to a moderate extent, while only 2% said that it was to a full extent. Approximately 77% percent mentioned that they did not know if that was being documented; while 6% reported that they did not document it.

Pertaining to the planning and reporting forms used at UGHE, and how well these forms provided an opportunity for the collection of gender and sex-disaggregated data; 7% of the staff who took part in the survey reported that the planning and reporting formats allowed for the collection of gender and sex-disaggregated data to a full extent, while 23% said it was to a moderate extent. However, 51% of the respondents mentioned that they did not know of this practice, while 15% confirmed that their reporting forms did not collect gender and sex-disaggregated data and 3.4% reported that this practice was not applicable for them. Similarly, 66% of the staff that took part in the audit noted that their reports and plans did not show minority disaggregated data to reflect social and economic status, such as how well minority groups were benefitting from different activities.

Some of the staff that use disaggregated data, such as student and employee reports, noted that these reports included data broken down by gender. On the other hand, some of the respondents mentioned that this type of reporting was not applicable for them and others did not understand what the question meant and thus couldn't answer.

While UGHE was using a range of mechanisms that took into consideration the needs of different groups, as inferred from in-depth interviews, the responses from the survey indicated that the reporting systems across different departments and the M&E framework in the past did not capture disaggregated information to reflect those changes, and the gender and diversity inclusive focus of UGHE.

Monitoring and evaluation mechanisms provide important data that guide the strategic plan, and the planning and implementation of programmes, projects, policies, etc. Developing indicators to monitor the existence, and usage of services, is a key step in evaluating whether gender and diversity inclusive goals are having the intended impact. Staff reported that their programmes or projects lack inclusivity and gender sensitive indicators but wished to work with CGE to develop them. The M&E department expressed interest in collaborating with the CGE to develop tools to monitor, track and report mainstreaming efforts. Refining reporting mechanisms would fill a big gap, as the structure at the time of the audit did not facilitate

sharing of disaggregated data, on access and participation – which often made a lot of good work done go unreported.

As stated above, indicators help monitor the participation of female and minority groups. In-depth interviews indicated that collecting or reporting disaggregated information hadn't been done in the past, an exception being with students, where gender and sex-disaggregated data were collected at each stage of the recruitment process (how many women and men applied, took the exam, were interviewed, etc.) The M&E department reported working with the Communications team to develop a centralized library where relevant information on all past projects/programs would be stored.

In terms of evaluating impact, the Community Health & Social Medicine department stated that there was usually data on the intended impact but no concrete way of collecting the community's feedback on the actual impact, and what had and hadn't worked. Efforts to rectify this included a group of MGHD20 students conducting a practicum project on the impact of the PIH Agricultural income-generating programme on the community. Similarly, the Campus Operations and Community Engagement department was planning to carry out an assessment on the impact and difficulties experienced by contractors while working at UGHE, and how the job opportunities had impacted them, their families and communities. Planning processes at the community level should be based on an understanding of different community groups' needs and available assets through participatory processes. These exercises were expected to provide a better picture of UGHE's gender and diversity sensitive culture and practices.

Other efforts by different departments included collection of sex-disaggregated information on student representation, panel and audience make up of UGHE-hosted webinars, engagement of audience on social media posts etc. to analyze that groups were attracted to what events and what UGHE should do more of.

Staff suggested using simple measures like going beyond the binary 'Male' and 'Female' gender identification, and further than that, including other minority groups' identification like, age, race, educational or social background… in reporting mechanisms, as deemed relevant for inclusion purposes.

Monitoring and evaluation mechanisms help gauge whether inclusive and gender-sensitive goals are having the intended and desired impact, and if not, where the gaps lie. As a new institution, which focuses on equity, these assessments are needed on a regular basis to keep UGHE accountable in the way it operates with partners, students, staff, and other institutions.

4. Summary of good practices

UGHE has various academic and non-academic practices, which were cited as good examples in addressing gender equity and diversity. Staff and students who took part in the

online survey and in-depth interviews shared some lessons that contributed to building an inclusive and equitable space, and recommendations on what could be done better.

Equity-based Student Intake: A defining characteristic of UGHE, this includes preferential treatment of female and rural students during recruitment, having entry exam sites in all provinces, financial aid upon admission, the "Umusanzu" program for MBBS students, etc. Beyond that are the visits by the admissions team to rural schools, with the goal of encouraging more girls to enroll in the MBBS program.

Equal Representation: One of the practices praised by staff is the requirement for contractors and service providers to have a 50% female representation in their labor force. This was appreciated and its implementation in UGHE's overall staff composition was further encouraged.

Inclusive workspaces: In addition to the nationally mandated maternity leave, working breastfeeding mothers have access to a 'mother's room', where they can pump and store their breast milk. During UGHE's hosting of the 2019 Women Leaders in Global Health (WLGH19), the institution had the novel idea of providing a daycare for parents attending the conference.

Pay equity: Efforts to rectify existing pay inequities began with a 2018-2019 Job Evaluation exercise, led by a consultancy firm, in order to create an equitable salary structure. A strategy was then developed with the goal of decreasing that gap over the next few years.

Professional development efforts: A highlighted equitable practice within UGHE is the provision of the $400 Professional Development Fund (PD Fund) available to any staff that has completed their 3-months probation, with a new policy being drafted for requests going beyond that allocated amount.

Up skilling the Local Community: Contractors, who are mandated to hire 70% locally, had complained about the lack of trained locals. The Campus Operations team then set out to organize a carpentry workshop with the objective of increasing the local and female workforce for contractors. UGHE also partnered with Vatel Hospitality to begin a local training program, which was unfortunately halted due to Covid-19. Other initiatives took its place, such as one to support small businesses in Butaro that were affected by the pandemic, with grants and funding. All the above initiatives and grants mandated female representation, for most up to 70%.

UGHE Staff Direct Support: Different fundraising efforts by staff provide many opportunities to contribute to the community, with 2020 alone seeing 10 houses built in Butaro, and health insurance provided for 556 people. These fundraising exercises should be built upon to become continuous and sustainable, and not just linked to acute needs or emergencies.

5.   Conclusion

UGHE, as evidenced by its vision and mission, recognizes the need for equity and diversity inclusion within its institution. It has practices in line with this, and took the important step of formalizing these values through this first gender and diversity inclusion audit that will guide the creation of a gender mainstreaming strategy. CGE working with a task force collected qualitative and quantitative data from staff and students through online surveys, in-depth interviews, and 182 organizational documents reviews. The recommendations received throughout this process on UGHE policies, practices, strategies, systems and mechanisms are discussed in the section that follows.

The audit highlighted occasions and practices in line with UGHE's equity agenda, as well as gaps or challenges in their planning, implementation monitoring and evaluation, and reporting. Despite the fact that the process of gender and diversity mainstreaming at UGHE was not fully achieved, it was encouraging to see that important steps had begun taking place to ensure this.

Staff shared their need for training and more awareness in gender equity and diversity concepts, and knowledge and skills on mainstreaming within UGHE and the Burera community. To ensure the success of these efforts, it is imperative to regularly consult and engage the intended groups, and, decisively identify these minority groups, and the intersectionalities within them, and thereafter their needs and priorities.

Relevant departments supervising UGHE's overall strategy and departmental plans, and M&E tools also need to ensure that gender and diversity equity goals are sufficiently reflected in plans, policies, indicators and across all reporting formats.

For the objectives and goals of this audit to be successful, it is crucial to conduct this process every 2-3 years to make sure the gender mainstreaming strategy has been adequately put into effect, and to review how targeted institutional inequities are being tackled through change in perception, knowledge and practices. As an ELT member pointed out, as more voices are platformed, new light will be shone on other existing inequities. Conducting audits every few years will also ensure that an equitable and inclusive mainstreaming strategy is regularly updated to reflect new knowledge.

6.   Recommendations

Policies & Practices: When it comes to policies, all staff interviewed agreed that policies needed to be centralized, better communicated, and better integrated into organizational practices. In line with this, a few staff members recommended having refresher meetings where staff could be introduced to new policies or reminded of existing ones, and including policies in the welcome/orientation packet. In addition, one staff member raised the importance of having a central place to house all policies, with a system that allowed staff to

ask questions about them, or find out how far along in the approval process policies were, or if they had been finalized.

Considering how vital policies are in driving the equity agenda, it was recommended to: (1) include at least a few lines or paragraph in all policies on gender and diversity inclusion, (2) include a representative from the CGE in the Policies Review Committee, and (3) use policies for active recruitment of women, and mandate equal representation in all departments, programs, or with partners or contractors. Specific training and workshops, for UGHE and other service beneficiaries at UGHE, would complement this practice and guide staff on how to draft gender-sensitive and minority inclusive official documentation.

Training: Almost all interviewees noted the need to hold regular training, some mandatory and others optional, with the goal of raising awareness and increasing knowledge on topics such as empowerment, gender-related issues, race, organizational culture, discriminatory practices, etc. One staff member hoped to see discussions around gender issues "go beyond the regular male-female relationships/dynamics and include LGBTQIA+ issues, and other gender-related issues", while another reiterated the need to create awareness on complex and covert issues, like the many ways microaggressions are experienced, and in that respect, teach men how to be allies and speak up for women and minorities. Along with this, discussions on obstacles and challenges women face at an academic institution in all the different aspects of womanhood: as mothers, non-academic staff, etc., and tools on how to handle the various difficult situations that arise.

In line with this, one suggestion from a staff member was to build a course on Canvas around different topics, which would serve the purpose of keeping these important conversations going, with the added bonus of providing staff with a certification once a course is completed.

From these trainings, leadership hoped junior staff would be empowered to speak up for themselves, while junior staff expressed the desire to see leadership become more receptive to, and action-oriented towards issues brought forward. Respondents also recommended that the Center of Gender Equity should conduct more training on gender and diversity on a more regular basis. From this recommendation, UGHE began holding town hall meetings to discuss issues such as gender equity, racism, and emotional intelligence. The same was recommended for students in order to regularize these discussions among them.

One staff member based in Butaro noted that in order for UGHE's empowerment goals in the community to be successful, there needed to be sensitization of the local population in Butaro on gender equity, to support UGHE's initiatives. This would give UGHE members a chance to understand more deeply the community that welcomed them, as more efforts also went into exploring and understanding each other's cultures as colleagues.

In incorporating gender mainstreaming and inclusion in the mechanisms and systems used, it was suggested to have some basic training on things like how to include gender options

beyond 'Male' and 'Female' in institutional forms, or using context-specific curricula, examples and practices that are relevant to black patients, instead of white centric curricula, etc. Along with training, gender and diversity guidelines were requested to inform the development of equitable and inclusive practices, policies, curricula, manuals, or guide how to engage with partners, institutions or donors. Staff recognized the need for implementation guidelines for projects and programmes, or the option to consult with the Center or a gender specialist. For those working in community engagement, they realized the need for specific guidelines on how to respectfully interact with members of the community in an inclusive and non-exploitative manner.

This called for the need to build an online operational documentation center at UGHE, either through the CGE or UGHE's Library, with audio-visual materials that cater to the specific knowledge needs on gender, diversity and global health discussions, which staff could easily access to guide their work. Following on these inputs, the Center for Gender Equity started a process of online building resources on a Google folder that will be shared with all UGHE staff at a later stage.

Strengthening Systems/Mechanisms: In developing the planning and implementation mechanisms of the gender mainstreaming strategy, it's necessary to include definitions of 'gender equity' and 'minority inclusion', clear goals and guidelines for developing policies, strategies, and curricula, along with supporting M&E indicators and reporting systems. Clearly stating and including this equity agenda in the institution's 5-year strategic plan - a defining organizational resource where these goals were currently lacking - is also an important step in ensuring their prioritization from the planning stages.

Throughout the audit, there was an emphasis on the urgency of strengthening the sexual harassment reporting systems, and implementing safe and effective systems and procedures of accountability, wherein all staff could share honest and productive feedback. For the female contractors and day laborers, a staff member recommended allocating a safe space, and time when this group could come together, and discuss specific issues. The group should also have a dedicated reporting system with a trained staff member from outside their departments that they could report sensitive issues to. Having acknowledged the lack of adequate systems in the past, and to better understand the inequities/gaps, an interviewee encouraged speaking with the cleaning, kitchen or other contractors on campus, and looking at the sex-disaggregated data on retention in the last years.

To ensure the activities for and in the Butaro community met the needs and interests of, and are properly implemented in the community, it was recommended to maintain and build on the practicum research conducted by MGHD students on the impact of UGHE in the region. To further that effort, a framework should be developed to guarantee representation and full participation of women and minorities on all levels of community activity.

As discussed in the 'Monitoring & Evaluation Mechanisms' section, relevant indicators for gender and diversity inclusion need to be incorporated in the department work plans. M&E

department representatives requested support from the CGE in developing these indicators and auditing other M&E tools that the department could use to measure gender mainstreaming efforts, e.g. requesting sex-disaggregated, minority inclusive data in report formats. The M&E department also suggested being included in the next gender and diversity inclusion task force and following that, having review meetings with the Center to advise on and build better reporting structures/systems together. Another M&E recommendation was to have mid-term reviews of UGHE's 5-year strategic plan to ensure its continued alignment with the institution's goals and values.

This would be in line with another staff's recommendation to create an 'Equity Committee' to follow up with department heads and be part of different committees such as research, academic, procurement, etc. to make sure gender and inclusion were being prioritized and incorporated, consequently, increasing inter-departmental communication and cooperation.

Finally, staff encouraged UGHE to continue being "innovative" in the way gender and inclusion were mainstreamed, by making practices in line with that, such as the student recruitment process, accessible to other institutions. Another suggestion was to have a gender day where different departments would share the ways in which they have integrated inclusive practices in their departments, and engendered facts about their programs, policies or resources' access and use. One staff member encouraged having women in different positions act as role models for prospective or current students, junior staff, interns, contractors, etc. Staff should also be involved in identifying key issues to prioritize, and developing solutions for them. To overcome the challenge of finding trained or skilled female candidates for male-dominated fields, specifically technical jobs, one staff suggested sourcing apprentices or students directly from technical schools, which could empower other girls to pursue these careers.

Student Recommendations: A suggestion collected from the student survey was to include district variety and representation in the student body. An example of a challenge that was reported to have emerged from the diverse student body, is the division between Rwandan and non-Rwandan students on usage of the basketball court. To rectify this, student services need to invest in more culturally integrating practices and activities, which would bring students from all backgrounds together.

Students recommended that UGHE policies on gender equity and diversity inclusion should be made known to them, as they are not always aware of them. They suggested that this could be done during orientation and training on different policies and reporting tools used at UGHE. They also recommended that more discussions, seminars and topics related to gender equity and diversity inclusion should be introduced to help both students and staff to have a better understanding around the subjects. They were also keen to put into practice the concepts they learned, so as to "walk the talk" and advance the equity agenda.

Many students and staff mentioned the lack of female representation for students in the faculty and student services/health department as a hindrance in many ways. Students wished

to see more courses, curriculum integration and other instructional materials/activities on gender equity, and minority inclusion and responsiveness. Given that UGHE already has such a course for the first year of the MBBS program, more deliberations will be made on integrating this into the MGHD program. Along with the community outreach activities and career development goals offered, students hoped to see these opportunities made available for other minorities such as Rwandan and African faculty, and people living with disabilities.

7.   Annex

List of Gender and Diversity Inclusion Task Force members and coordinators

1. Evergiste Singizwa (MBBS student representative for the Task Force)
2. Dr. Florence Akiiki Bitalabeho, Adjunct Faculty, UGHE
3. Gloria Hategekimana, Administrative Assistant to the VC, UGHE
4. Janet Kaviiko, Director of Human Resources, UGHE
5. Jessy Uchindami Gondwe, MGHD student representative for the Task Force
6. Dr. Joshua Owolabi, Assistant Professor, Head of Anatomy, Division of Basic Medical Sciences, UGHE
7. Dr. Patrick Orikiriza, Assistant Professor, Head of Microbiology Department, Division of Basic Sciences, UGHE
8. Professor Timothy Carey, Director of Institute of Global Health Equity Research, Andrew Weiss Chair of Research in Global Health, UGHE
9. Tsion Yohannes (Chair, Center for Gender Equity)
10. Deborah Umucyo (Coordinator, Center for Gender Equity)

Reference List

1. Cukier, W., Smarz S., (2012). Diversity Assessment Tools: A Comparison, *The International Journal of Knowledge, Culture and Change Management*. https://www.researchgate.net/publication/286710839_Diversity_assessment_tools_A_comparison

2. Halder, S., Argyropoulos, V. (Eds), 2019. *Inclusion, Equity and Access for Individuals with Disabilities: Insights from Educators across the World.* Palgrave Macmillan

3. *InterAction (2010).* The Gender Audit Handbook: A Tool for Organizational Self-assessment and Transformation. *InterAction.* https://www.interaction.org/wp-content/uploads/2019/03/Gender-Audit-Handbook-2010-Copy.pdf

4. International Labour Organization, (2012). A Manual for Gender Audit Facilitators: The ILO Participatory Gender Audit Methodology, 2nd Edition. *Geneva, International Labour Office.* https://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms_187411.pdf

5. Netto, G., Arshad, R., Lima, P.d., Diniz, F.A., MacEwen, M., Patel.,V. & Syed, R. (2001). Audit of Research on Minority Ethnic Issues in Scotland from a 'Race' Perspective. *Scottish Executive Central Research Unit.* https://www2.gov.scot/resource/doc/156758/0042145.pdf

6. University of Pretoria (2014). Gender Equality at Higher Education Institutions in Africa: A Gender Audit Tool. *Center for Human Rights, Faculty of Law, University of Pretoria.* https://www.chr.up.ac.za/images/centrenews/2014/files/Gender_Audit_Tool_Web_version.pdf