Table 1. Awareness of WHOs Gender Policies and Strategies

Awareness of WHO	N	WHO Ge	nder Policy			Gender ty Policy			Regional er Policy			trategy on ing Gender			ow of Any of ties / Strategy
Policies and Strategy		n %	95% CI	n	%	95% CI	n	%	95% CI	n	%	95% CI	n	%	95% CI
All WHO Staff	2160	1375 63.7	61.6 - 65.7	481	22.3	20.5 - 24.1	166	7.7	6.6 - 8.9	931	43.1	41.0 - 45.2	460	21.3	19.6 - 23.1
By Sex															
Male Staff	888	613 69.0	66.0 - 72.1	200	22.5	19.8 - 25.4	88	9.9	8.0 - 12.1	384	43.2	40.0 - 46.6	168	18.9	16.4 - 21.7
Female Staff	1272	762 59.9	57.2 - 62.6	281	22.1	19.8 - 24.5	78	6.1	4.9 - 7.6	547	43.0	40.3 - 45.8	292	23.0	20.7 - 25.4
p-value		< 0	.0001		0.	8126		0.	0012		0.	9117		0.	0241
By Grade															
D	51	40 78.4	64.7 - 88.7	15	29.4	17.5 - 43.8	5	9.8	3.3 - 21.4	33	64.7	50.1 - 77.6	3	5.9	1.2 - 16.2
Р	1306	888 68.o	65.4 - 70.5	324	24.8	22.5 - 27.2	122	9.3	7.8 - 11.1	648	49.6	46.9 - 52.4	228	17.5	15.4 - 19.6
G	771	430 55.8	52.2 - 59.3	129	16.7	14.2 - 19.6	35	4.5	3.2 - 6.3	238	30.9	27.6 - 34.3	222	28.8	25.6 - 32.1
Other	32	17 53.1	34.7 - 70.9	13	40.6	23.7 - 59.4	4	12.5	3.5 - 29.0	12	37.5	21.1 - 56.3	7	21.9	9.3 - 40.0
p-value		< 0	.0001		< 0	.0001		0.	0007		< 0	.0001		< 0	.0001
By WHO Level															
Headquarters	525	347 66.1	61.9 - 70.1	55	10.5	8.0 - 13.4	8	1.5	0.7 - 3.0	234	44.6	40.3 - 48.9	112	21.3	17.9 - 25.1
Regional Office	763	498 65.3	61.8 - 68.7	196	25.7	22.6 - 28.9	78	10.2	8.2 - 12.6	309	40.5	37.0 - 44.1	153	20.1	17.3 - 23.1
Country Offices	781	486 62.2	58.7 - 65.6	211	27.0	23.9 - 30.3	76	9.7	7.7 - 12.0	366	46.9	43.3 - 50.4	162	20.7	18-0 - 23.8
Other	91	44 48.4	37.7 - 59.1	19	20.9	13.1 - 30.7	4	4.4	1.2 - 10.9	22	24.2	15.8 - 34.3	33	36.3	26.4 - 47.0
p-value		0.	0070		< 0	.0001		< 0	.0001		0.	0001		0.	0046
By WHO Region															
AMRO/PAHO	390	244 62.6	57.6 - 67.4	343	88.0	84.3 - 91.0	33	8.5	5.9 - 11.7	165	42.3	37.4 - 47.4	29	7.4	5.0 - 10.5
WPRO	280	193 68.9	63.2 - 74.3	17	6.1	3.6 - 9.5	34	12.1	8.6 - 16.6	125	44.6	38.7 - 50.7	56	20.0	15.5 - 25.2
SAERO	112	77 68.8	59.3 - 77.2	9	8.0	3.7 - 14.7	10	8.9	4.4 - 15.8	46	41.1	31.9 - 50.8	28	25.0	17.3 - 34.1
AFRO	397	231 58.2	53.2 - 63.1	16	4.0	2.3 - 6.5	34	8.6	6.0 - 11.8	175	44.1	39.1 - 49.1	115	29.0	24.6 - 33.7
EMRO	154	94 61.0	52.9 - 68.8	14	9.1	5.1 - 14.8	17	11.0	6.6 - 17.1	57	37.0	29.4 - 45.2	45	29.2	22.2 - 37.1
EURO	230	149 64.8	58.4 - 71.1	13	5.6	3.0 - 9.4	24	10.4	6.8 - 15.1	107	46.3	39.8 - 53.0	51	22.1	16.9 - 28.0
Headquarters	542	352 64.9	60.8 - 69.0	56	10.3	7.9 - 13.2	8	1.5	0.6 - 2.9	237	43.7	39.5 - 48.0	121	22.3	18.9 - 26.1
Other	54	34 63.0	48.7 - 75.7	13	24.1	13.5 - 37.6	6	11.1	4.2 - 22.6	19	35.2	22.7 - 35.2	15	27.8	16.5 - 41.6
p-value		0.	1397		< 0	.0001		< 0	.0001		0.	6010		< 0	.0001

Table 1 (cont). Awareness of WHOs Gender Policies and Strategies

Awareness of WHO	N	WH	IO Ge	nder Policy			Gender ty Policy			Regional er Policy			trategy on ing Gender			ow of Any of ies / Strategy
Policies and Strategy		n	%	95% CI	n	%	95% CI	n	%	95% CI	n	%	95% CI	n	%	95% CI
By Cluster*																
DGO	33	24	72.7	54.5 - 86.7	3	9.1	1.9 - 24.3	1	3.0	0.8 - 15.8	14	42.4	25.5 - 60.8	6	18.2	7.0 - 35.5
DGO/ODR	10	5	50.0	18.7 - 81.3	2	20.0	2.5 - 55.6	0	0.0		5	50.0	18.7 - 81.3	2	20.0	2.5 - 55.6
FCH	82	57	69.5	58.4 - 79.2	11	13.4	6.9 - 22.7	0	0.0		44	53.7	42.3 - 64.8	9	11.0	5.1 - 19.8
GMG	83	60	72.3	61.4 - 81.6	7	8.4	3.5 - 16.6	1	1.2	<0.1 - 6.5	32	38.6	28.1 - 49.9	18	21.7	13.4 - 32.1
HAC	14	9	64.3	35.1 - 87.2	1	7.1	0.2 - 33.9	2	14.3	1.8 - 42.8	5	35.7	12.8 - 64.9	3	21.4	4.7 - 50.8
HSE	45	27	60.0	44.3 - 74.3	4	8.9	2.5 - 21.2	0	0.0		27	60.0	44.3 - 74.3	10	22.2	11.2 - 37.1
HSS	34	22	64.7	46.5 - 80.3	6	17.7	6.8 - 34.5	1	2.9	<0.1 - 15.3	12	35.3	19.8 - 53.5	7	20.6	8.7 - 37.9
HTM	44	29	65.9	50.1 - 79.5	0	0.0		0	0.0		17	38.6	24.4 - 54.5	11	25.0	13.2 - 40.3
IER	58	35	60.3	46.6 - 73.0	7	12.1	5.0 - 23.3	1	1.7	<0.1 - 9.2	25	43.1	30.2 - 56.8	16	27.6	16.7 - 40.9
NMH	47	28	59.8	44.3 - 73.6	5	10.6	3.6 - 23.1	0	0.0		24	51.1	36.1 - 65.9	11	23.4	12.3 - 38.0
Other	3	2	66.7	9.4 - 99.2	1	33.3	0.8 - 90.6	0	0.0		1	33.3	0.8 - 90.6	1	33.3	0.8 - 90.6
HTP	22	18	81.8	59.7 - 94.8	1	4.6	0.1 - 22.8	0	0.0		9	40.9	20.7 - 63.7	3	13.6	2.9 - 34.9
p-value			0.	6552		0.	3319					0.	3843		0.	6795

^{*} For headquarters only

Table 2. Indicator 1 - Knowledge of Gender Concepts

V		1	No Kn	owledge	S	ome k	Knowledge	G	iood K	nowledge
Knowledge of Gender	N	n	%	95% CI	n	%	95% CI	n	%	95% CI
All WHO Staff	2160	118	5.4	4.5 - 6.5	766	35.5	33.4 - 37.5	1276	59.1	57.0 - 61.2
By Sex										
Male Staff	888	49	5.5	4.1 - 7.2	300	33.8	30.7 - 37.0	539	60.7	57.4 - 63.9
Female Staff	1272	69	5.4	4.2 - 6.8	466	36.6	34.0 - 39.4	737	57.9	55.2 - 60.7
p-value							0.3905			
By Grade										
D	51	1	2.0	<0.1 - 10.5	10	19.6	9.8 - 33.1	40	78.4	64.7 - 88.7
Р	1306	45	3.5	2.5 - 4.6	398	30.5	28.0 - 33.1	863	66.1	63.4 - 68.7
G	771	70	9.1	7.2 - 11.3	345	44.8	41.2 - 48.3	356	46.2	42.6 - 49.8
Other	32	2	6.3	0.8 - 20.8	13	40.6	23.7 - 59.4	17	53.1	34.7 - 70.9
p-value							< 0.001			
By WHO Level										
Headquarters	525	28	5.3	3.6 - 7.6	191	36.4	32.3 - 40.7	306	52.3	53.9 - 62.5
Regional Office	763	49	6.4	4.8 - 8.4	288	37.8	34.3 - 41.3	426	55.8	52.2 - 59.4
Country Offices	781	34	4.3	3.0 - 6.0	249	31.9	28.6 - 35.3	498	63.8	60.3 - 67.1
Other	91	7	7.7	3.2 - 15.2	38	41.8	31.5 - 52.6	46	50.5	39.9 - 61.2
p-value							0.0253			
By WHO Region										
AMRO/PAHO	390	10	2.6	1.2 - 4.7	133	34.1	29.4 - 39.0	247	63.3	58.3 - 68.1
WPRO	280	22	7.9	5.0 - 11.7	101	36.1	30.4 - 42.0	157	56.1	50.0 - 62.0
SAERO	112	12	10.7	5.7 - 18.0	43	38.4	29.4 - 48.1	57	50.9	41.3 - 60.5
AFRO	397	15	3.8	2.1 - 6.2	151	38.0	33.2 - 43.0	231	58.2	53.2 - 63.1
EMRO	154	11	7.1	3.6 - 12.4	52	33.8	26.4 - 41.8	91	59.1	50.9 - 66.9
EURO	231	14	6.1	3.4 - 10.0	66	28.6	22.8 - 34.9	151	65.4	58.9 - 71.5
Headquarters	542	29	5.4	3.6 - 7.6	199	36.7	32.7 - 40.9	314	57.9	53.7 - 62.1
Other	54	5	9.3	3.1 - 20.3	21	38.9	25.9 - 53.1	28	51.9	37.8 - 65.7
p-value							0.0104			

Table 2 (cont). Indicator 1 - Knowledge of Gender Concepts

Knowledge of Gender	N		No Kr	owledge	S	ome l	Knowledge	(Good k	(nowledge
Knowledge of Gender	IN	n	%	95% CI	n	%	95% CI	n	%	95% CI
By Cluster*										
DGO	33	4	12.1	3.4 - 28.2	15	45.5	28.1 - 63.7	14	42.4	25.5 - 60.8
DGO/ODR	10	1	10.0	0.3 - 44.5	2	20.0	2.5 - 55.6	7	70.0	34.8 - 93.3
FCH	82	3	3.7	0.8 - 10.3	20	24.4	15.6 - 35.1	59	72.0	60.9 - 81.3
GMG	83	5	6.0	2.0 - 13.5	40	48.2	37.1 - 59.4	38	45.8	34.8 - 57.1
HAC	14	1	7.1	0.2 - 33.9	5	35.7	12.8 - 64.9	8	57.1	28.9 - 82.3
HSE	45	4	8.9	2.5 - 21.2	11	24.4	12.9 - 39.5	30	66.7	51.1 - 80.0
HSS	34	3	8.8	1.9 - 23.7	16	47.1	29.8 - 64.9	15	44.1	27.2 - 62.1
HTM	44	1	2.3	<0.1 - 12.0	21	36.2	15.0 - 42.8	36	62.1	54.8 - 83.2
IER	58	1	1.7	<0.1 - 9.2	21	36.2	24.0 - 49.9	36	62.1	48.4 - 74.5
NMH	47	0	0.0		17	36.2	22.7 - 51.5	30	63.8	48.5 - 77.3
Other	3	0	0.0		0	0.0		3	100.0	29.2 - 100.0
HTP	22	2	9.1	1.1 - 29.2	12	54.5	32.2 - 75.6	8	36.4	17.2 - 59.3
p-value							**			

^{*} For headquarters only, ** p-value not computed due to many cells with low frequency.

No Knowledge = 0 points in questions 9-12, Some Knowledge = 1-2 points in questions 9-12, Good Knowledge = 3-4 points in questions 9-12.

Table 3. Whether Gender Is Relevant To Their Own Work or Work Of The Unit

		Rele	vance of	Gender to	o the Wor	k of their	Unit	Releva	nce of Ge	nder to tl	heir Own	Work in t	he Unit
Relevance of Gender to Their Work		N	lo	Υ	es	Don't	Know	1	No O	Y	es	Don't	Know
THEII WOLK	N	n	%	n	%	n	%	n	%	n	%	n	%
All WHO Staff	2160	618	28.6	1384	64.1	158	7.3	750	34.7	1292	59.8	118	5.5
By Sex													
Male Staff	888	208	23.4	627	70.6	53	6.0	241	27.1	603	67.9	44	5.0
Female Staff	1272	410	32.2	757	59-5	105	8.3	509	40.0	689	54.2	74	5.8
p-value				< 0.0	0001					< 0.	0001		
By Grade													
D	51	5	9.8	44	86.3	2	3.9	4	7.8	44	86.3	3	5.9
Р	1306	231	17.7	1010	77-3	65	5.0	293	22.4	964	73.8	49	3.8
G	771	372	48.3	310	40.2	89	11.5	44	57.6	263	34.1	64	8.3
Other	32	10	31.3	20	62.5	2	6.2	9	28.1	21	65.6	2	6.3
p-value				< 0.0	0001					< 0.	0001		
By WHO Level													
Headquarters	525	147	28.0	337	64.2	41	7.8	206	39.2	289	55.1	30	5.7
Regional Office	763	239	31.3	472	61.9	52	6.8	281	36.8	441	57.8	41	5.4
Country Offices	781	192	24.6	533	68.3	56	7.2	213	27.3	528	67.6	40	5.1
Other	91	40	44.0	42	46.2	9	9.9	50	54.9	34	37-4	7	7.7
p-value				0.0	010					< 0.	0001		
By WHO Region													
AMRO/PAHO	390	109	28.0	262	67.2	19	4.9	127	32.6	252	64.6	11	2.8
WPRO	280	76	27.1	186	66.4	18	6.4	82	29.3	179	63.9	19	6.8
SAERO	112	28	25.0	81	72.3	3	2.7	39	34.8	69	61.6	4	3.6
AFRO	397	100	25.2	259	65.2	38	9.6	108	27.2	262	66.o	27	6.8
EMRO	154	56	36.4	87	56.5	11	7.1	58	37.7	85	55.2	11	7.1
EURO	231	74	32.0	137	59-3	20	8.7	95	41.1	125	54.1	11	4.8
Headquarters	542	158	29.2	342	63.1	42	7.7	22	40.6	291	53.7	31	5.7
Other	54	17	31.5	30	55.6	7	13.0	21	38.9	29	53.7	4	7.4
p-value				0.0	409					0.0	0005		

Table 3 (cont). Whether Gender Is Relevant To Their Own Work or Work Of The Unit

		Rel	evance of (Gender t	o the Wor	k of their	Unit	Releva	nce of Ge	nder to t	heir Own	Work in t	he Unit
Relevance of Gender to Their Work		Y	'es	1	No OF	Don't	Know	Y	'es	1	No OF	Don't	Know
THEIR WOLK	N	n	%	n	%	n	%	n	%	n	%	n	%
By Cluster*													
DGO	33	15	45.5	17	51.5	1	3.0	15	45.5	18	54.5	0	0.0
DGO/ODR	10	1	10.0	8	80.0	1	10.0	3	30.0	6	60.0	1	10.0
FCH	82	14	17.1	63	76.8	5	6.1	23	28.1	54	65.8	5	6.1
GMG	83	41	49.4	36	43.4	6	7.2	49	59.0	27	32.5	7	8.4
HAC	14	4	28.6	7	50.0	3	21.4	8	57.1	5	35.7	1	7.1
HSE	45	10	22.2	29	64.4	6	13.3	14	31.1	27	60.0	4	8.9
HSS	34	5	14.7	23	67.7	6	17.6	11	32.4	20	58.8	3	8.8
HTM	44	7	15.9	35	79.6	2	4.5	13	29.5	30	68.2	1	2.3
IER	58	16	27.6	39	67.2	3	5.2	19	32.8	36	62.1	3	5.2
NMH	47	4	8.5	40	85.1	3	6.4	11	23.4	34	72.3	2	4.3
Other	3	3	100.0	0	0.0	0	0.0	3	100.0	0	0.0	0	0.0
HTP	22	9	40.9	12	54.6	1	4.5	12	54.5	9	40.9	1	4.5
p-value				< 0.	0001				'	0.0	0019	1	

^{*} For headquarters only

Table 4. Indicator 2 - Application of Gender Concepts To Their Work

Application of Gender	N		Not A	pplying	S	ome A	pplication	М		tely Strong lication	St	trong A	pplication
Concepts to Their Work		n	%	95% CI	n	%	95% CI	n	%	95% CI	n	%	95% CI
All WHO Staff	2158	558	25.9	24.0 - 27.8	887	41.1	39.0 - 43.2	370	17.2	15.6 - 18.8	343	15.9	14.4 - 17.5
By Sex													
Male Staff	887	173	19.5	16.9 - 22.3	323	36.4	33.2 - 39.7	200	22.6	19.8 - 25.4	191	21.5	18.9 - 24.4
Female Staff	1271	385	30.3	27.8 - 32.9	564	44.4	41.6 - 47.2	170	13.4	11.6 - 15.4	152	12.0	10.2 - 13.9
p-value							<	0.000	1				
By Grade													
D	50	3	6.0	1.3 - 16.6	10	20.0	10.0 - 33.7	15	30.0	17.9 - 44.6	22	44.0	30.0 - 58.8
Р	1305	162	12.4	10.7 - 14.3	580	44.4	41.7 - 47.2	311	23.8	21.5 - 26.2	252	19.3	17.2 - 21.6
G	771	388	50.3	46.7 - 53.9	285	37.0	33.6 - 40.5	40	5.2	3.7 - 7.0	58	7.5	5.8 - 9.6
Other	32	5	15.6	5.3 - 32.8	12	37.5	21.1 - 56.3	4	12.5	3.5 - 29.0	11	34.4	18.6 - 53.2
p-value							<	0.000	1		•		
By WHO Level													
Headquarters	525	135	25.7	22.0 - 29.7	253	48.2	43.8 - 52.6	86	16.4	13.3 - 19.8	51	9.7	7.3 - 12.6
Regional Office	761	208	27.3	24.2 - 30.7	322	42.3	38.8 - 45.9	120	15.8	13.3 - 18.6	111	14.6	12.2 - 17.3
Country Offices	781	181	23.2	20.3 - 26.3	276	35.3	32.0 - 38.8	155	19.8	17.1 - 22.8	169	21.6	18.8 - 24.7
Other	91	34	37.4	27.4 - 48.1	36	39.6	29.5 - 50.4	9	9.9	4.6 - 18.0	12	13.2	7.0 - 21.9
p-value					1		<	0.000	1		•		
By WHO Region													
AMRO/PAHO	390	79	20.3	16.4 - 24.6	147	37.7	32.9 - 42.7	85	21.8	17.8 - 26.2	79	20.3	16.4 - 24.6
WPRO	279	85	30.5	25.1 - 36.2	98	35.1	29.5 - 41.0	46	16.5	12.3 - 21.4	50	17.9	13.6 - 22.9
SAERO	112	28	25.0	17.3 - 34.1	38	33.9	25.3 - 43.5	22	19.6	12.7 - 28.2	24	21.4	14.2 - 30.2
AFRO	396	110	27.8	23.4 - 32.5	142	35.9	31.1 - 40.8	66	16.7	13.1 - 20.7	78	19.7	15.9 - 24.0
EMRO	154	54	35.1	27.6 - 43.2	50	32.5	25.2 - 40.5	24	15.6	10.3 - 22.3	26	16.9	11.3 - 23.8
EURO	231	40	17.3	12.7 - 22.8	134	58.0	51.4 - 64.5	34	14.7	10.4 - 20.0	23	10.0	6.4 - 14.6
Headquarters	542	144	26.6	22.9 - 30.5	259	47.8	43.5 - 52.1	87	16.1	13.1 - 19.4	52	9.6	7.3 - 12.4
Other	54	18	33.3	21.1 - 47.5	19	35.2	22.7 - 49.4	6	11.1	4.2 - 22.6	11	20.4	10.6 - 33.5
p-value					•		<	0.000	1		•		

Table 4 (cont). Indicator 2 - Application of Gender Concepts To Their Work

Application of Gender	N		Not A	pplying	S	ome A	pplication	M		tely Strong lication	S	trong A	Application
Concepts to Their Work		n	%	95% CI	n	%	95% CI	n	%	95% CI	n	%	95% CI
By Cluster*													
DGO	33	8	24.2	11.1 - 42.3	17	51.5	33.5 - 69.2	6	18.2	7.0 - 35.5	2	6.1	0.7 - 20.2
DGO/ODR	10	2	20.0	2.5 - 55.6	5	50.0	18.7 - 81.3	3	30.0	6.7 - 65.3	0	0.0	
FCH	82	22	26.8	17.6 - 37.8	32	39.0	28.4 - 50.4	16	19.5	11.6 - 29.7	12	14.6	7.8 - 24.2
GMG	83	33	39.8	29.2 - 51.1	36	43.4	32.5 - 54.7	6	7.2	2.7 - 15.1	8	9.6	4.3 - 18.1
HAC	14	4	28.6	8.4 - 58.1	7	50.0	23.0 - 77.0	2	14.3	1.8 - 42.8	1	7.1	0.2 - 33.9
HSE	45	8	17.8	8.0 - 32.1	28	62.2	46.5 - 76.2	5	11.1	3.7 - 24.1	4	8.9	2.5 - 21.2
HSS	34	9	26.5	12.9 - 44.4	15	44.1	27.2 - 62.1	6	17.7	6.8 - 34.5	4	11.8	3.3 - 27.5
HTM	44	7	15.9	6.6 - 30.1	20	45.4	30.4 - 61.2	13	29.6	16.8 - 45.2	4	9.1	2.5 - 21.7
IER	58	14	24.1	13.9 - 37.2	31	53.5	39.9 - 66.7	12	20.7	11.2 - 33.4	1	1.7	<0.1 - 9.2
NMH	47	5	10.6	3.6 - 23.1	25	53.2	38.1 - 67.9	8	17.0	7.7 - 30.8	9	19.1	9.2 - 33.3
Other	3	0	0.0		3	100.0	29.2 - 100.0	0	0.0		О	0.0	
HTP	22	5	22.7	7.8 - 45.4	13	59.1	36.4 - 79.3	4	18.2	5.2 - 40.3	0	0.0	
p-value								**					

^{*} For headquarters only, , ** p-value not computed due to many cells with low frequency.

Not Applying = 0 points in questions 21a-21k, Some Application = 1-5 points in questions 21a-21k, Moderately Strong Application = 6-8 points in questions 21a-21k, Strong Application = 9-11 points in questions 21a-21k.

Table 5. Indicator 3 - Current Institutional Support for Gender Integration in Work

Level of Institutional		No S	Support		Some	Support		Good	Support
Support for Gencer Integration	N	n %	95% CI	n	%	95% CI	n	%	95% CI
All WHO Staff	2153	1465 68.0	66.0 - 70.0	489	22.7	21.0 - 24.5	199	9.2	8.1 - 10.6
By Sex									
Male Staff	887	557 62.8	59.5 - 66.0	226	25.5	22.6 - 28.5	104	11.7	9.7 - 14.0
Female Staff	1266	908 71.7	69.2 - 74.2	263	20.8	18.6 - 23.1	95	7.5	6.1 - 9.1
p-value					<	0.0001			
By Grade									
D	50	23 46.0	31.8 - 60.7	16	32.0	19.5 - 46.7	11	22.0	11.5 - 36.0
Р	1301	776 59.7	56.9 - 62.3	377	29.0	26.5 - 31.5	148	11.4	9.7 - 13.2
G	770	647 84.0	81.2 - 86.5	89	11.6	9.4 - 14.0	34	4.4	3.1 - 6.1
Other	32	19 59.4	40.6 - 76.3	7	21.9	9.3 - 40.0	6	18.7	7.2 - 36.4
p-value					<	0.0001			
By WHO Level									
Headquarters	522	375 71.8	67.8 - 75.7	108	20.7	17.3 - 24.4	39	7.5	5.4 - 10.1
Regional Office	759	535 70.5	67.1 - 73.7	162	21.3	18.5 - 24.4	62	8.2	6.3 - 10.4
Country Offices	781	487 62.4	58.9 - 65.8	204	26.1	23.1 - 29.4	90	11.5	10.0 - 14.0
Other	91	68 74.7	64.5 - 83.3	15	16.5	9.5 - 25.7	8	8.8	3.9 - 16.6
p-value					(0.0024			
By WHO Region									
AMRO/PAHO	389	222 57.1	62.0 - 62.1	107	27.5	23.1 - 32.2	60	15.4	12.0 - 19.4
WPRO	279	194 69.5	63.8 - 74.9	66	23.7	18.8 - 29.1	19	6.8	4.2 - 10.4
SAERO	112	68 60.7	51.0 - 69.8	33	29.5	21.2 - 38.8	11	9.8	5.0 - 16.9
AFRO	396	277 70.0	65.2 - 74.4	81	20.4	16.6 - 24.8	38	9.6	6.9 - 12.9
EMRO	153	99 64.7	56.6 - 72.3	38	24.8	18.2 - 32.5	16	10.5	6.1 - 16.4
EURO	231	178 77.1	71.1 - 82.3	42	18.2	13.4 - 23.8	11	4.8	2.4 - 8.4
Headquarters	539	391 72.5	68.6 - 76.3	109	20.2	16.9 - 23.9	39	7.2	5.2 - 9.8
Other	54	36 66.7	52.5 - 78.9	13	24.1	13.5 - 37.6	5	9.2	3.1 - 20.3
p-value					<	0.0001			

Table 5 (cont). Indicator 3 - Current Institutional Support for Gender Integration in Work

Level of Institutional	N.		No S	Support		Some	Support		Good	l Support
Support for Gencer Integration	Z	n	%	95% CI	n	%	95% CI	n	%	95% CI
By Cluster*										
DGO	33	27	81.8	64.5 - 93.0	4	12.1	3.4 - 28.2	2	6.1	0.7 - 20.2
DGO/ODR	10	9	90.0	55.5 - 99.8	1	10.0	0.3 - 44.5	0	0.0	
FCH	82	52	63.4	52.1 - 73.8	14	17.1	9.7 - 27.0	16	19.5	11.6 - 29.7
GMG	81	70	86.4	77.0 - 93.0	10	12.4	6.1 - 21.5	1	1.2	<0.1 - 7.0
HAC	14	10	71.4	41.9 - 91.6	2	14.3	1.8 - 42.8	2	14.3	1.8 - 42.8
HSE	45	31	68.9	53.4 - 81.8	13	28.9	16.4 - 44.3	1	2.2	<0.1 - 11.8
HSS	34	25	73.5	55.6 - 87.1	6	17.7	6.8 - 34.5	3	8.8	1.9 - 23.7
НТМ	44	25	56.8	41.0 - 71.7	15	34.1	20.5 - 49.9	4	9.1	2.5 - 21.7
IER	58	45	77.6	64.7 - 87.5	11	19.0	9.9 - 31.4	2	3.4	0.4 - 11.9
NMH	46	25	54.3	39.0 - 69.1	16	34.8	21.4 - 50.3	5	10.9	3.6 - 23.6
Other	3	3	100.0	29.2 - 100.0	0	0.0	29.2 - 100.0	0	0.0	
НТР	22	18	81.8	59.7 - 94.8	4	18.2	5.2 - 40.3	0	0.0	
p-value	_	0.0004								

^{*} For headquarters only

No Support = 0 points in questions 23a-23d, Some Support = 1-2 points in questions 23a-23d, Good Support = 3-4 points in questions 23a-23d.

Table 6. Indicator 3 - Facilitating Factors for Gender Integration by WHO Region

Facilitating Factors or Opportunities	Ove	erall	AMRO	/PAHO	WF	PRO	SAE	ERO	AF	RO	ΕM	1RO	EU	RO	Н	Q	Ot	her
Facilitating Factors or Opportunities	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Designated Gender Focal Point	466	21.6	114	29.2	85	30.4	30	26.8	95	23.9	37	24.0	42	18.2	52	9.6	11	20.4
Linkages with Countries/Regional/HQ Gendr Focal Points/Units	339	15.7	89	22.8	49	17.5	23	20.5	74	18.6	22	14.3	39	16.9	37	6.8	6	11.1
Discussions on Gender in Your Area of Work in Department/Unit Staff Meeting	551	25.5	120	30.8	77	27.5	31	27.7	121	30.5	36	23.4	47	20.3	111	20.5	8	14.8
Colleagues with Gender Expertise to Collaborate With	610	28.2	151	38.7	90	32.1	26	23.2	111	28.0	40	26.0	67	29.0	117	21.6	8	14.8
Information Sharing on Gender in Your Area of Work	630	29.2	125	32.1	96	64.3	36	32.1	138	34.8	39	25.3	65	28.1	120	22.1	11	20.4
Information Sharing on Gender Training Opportunities	320	14.8	64	16.4	45	16.1	19	17.0	100	25.2	19	12.3	25	10.8	44	8.1	4	7-4
Information Sharing on Upcoming Seminars/Meeting on Gender	351	16.3	85	21.8	59	21.1	22	19.6	82	20.7	22	14.3	32	13.9	46	8.5	3	5.6
Interdepartmental Task Force on Gender	161	7.5	38	9.7	17	6.1	8	7.1	45	11.3	13	8.4	11	4.8	25	4.6	4	7.4
All Of The Above	151	7.0	34	8.7	25	8.9	6	5.4	32	8.1	25	16.2	7	3.0	20	3.7	2	3.7
Other	70	3.2	13	3.3	8	2.9	7	6.3	6	1.5	3	2.0	3	1.3	26	4.8	4	7.4
None	469	21.7	53	13.6	46	16.4	26	23.2	92	23.2	31	20.1	50	21.7	161	29.7	10	18.5
Don't Know	383	17.7	40	10.3	38	13.6	20	17.9	59	14.9	34	22.1	55	23.8	123	22.7	14	25.9

Table 7. Indicator 3 - Facilitating Factors for Gender Integration (Other Categories) — Question 24b

Answer	Frequency
	1
A basic proper training for staff. The traing alleat aim at staff capability to analyse how much their current work support gender development and how they can contribute to	1
that need.	
As I work in DAFO, the gender issue is often discussed in relation to recruitment. Guidelines on security of women is available. But my work is not directely related.	1
As a technical officer working on tobacco use, I produce statistical information by sex as consumption patterns differ for males and for females. In this sense, the data are	1
gender sensitive	
Close collaboration with other UN agencies, namely UNIFEM and UNFPA	1
Discussions on gender, not in my area of work but in other circumstances like meetings related to my social life	1
Does not apply	1
Does not apply to my functions	1
Enabling factors in place are overshadowed by other powerful elements related to old engrained assumptions and behaviors.	1
Frankly, my profession in general is sexist, which is why there aren't many women in IT, BUT my colleagues (both male and female) are ok to work with.	1
Function not part of work	1
Gender is a non-issue in my role in the Organization.	1
Gender is not an issue.	1
I am responsible for women and community empowerment so I have to address it in my area of work	1
I do not see where the problem with gender or women is in WHO. Men and women are treated equally, get the same pay, where is the problem? This is a politically-motivated	1
agenda, distracting us from out work in public health.	_
INWAT network	1
Main stimulus comes from collaborating centres in the area of health impact assessment	1
Meetings with other stake-holders with interests in gender and basic human rights	1
My own background, experience and strong interest in gender	1
My work does not depend on gender	1
NA	1
Networking with others; related publication/ journal/ text book; personal relationship/ common interest with other gender focal points	1
Not applicable in my case	1
Not applicable to my work (also, I belive the question should readaddress gender IN your work)"	1
Not involved in gender issues and not part of my current job responsibilies at WHO	1
Not involved in policy decisions or defining policy	1
Not my responsibility	1
Not part of my official responsibilities	1
Not relevant to my work	1
Official policies on gender equality in hiring.	1
Part of LisServ GENSALUD - also in past worked in Women's Health Bureau and considered a gender specialist by Canada	1
Participation in a inter-agency Partnership Regional Directors Teams" which is divided into clusters and one of them addresses Gender."	1
Persinal interest	1
Policy on sexual harassement	1
SDL activities on gender	1
Seldomly gender-related issues are mentioned as part of a informal discussion.	1
Self internet searches; continuos learning magazines	1
Self-promotion of gender mainstreaming in our technical work (with no formal training but with supervisor's support)	1
Sen-promotion of gender mainstreaming in our technical work (with no formal training but with supervisor's support)	1

Answer	Frequency
Style guidelines	1
Support from UN System	1
The scientif articles usually address sex and gender as part of the objetives, methods, results, analysis and conclusions.	1
This function is not part of my current job responsibilities at WHO	1
This function is not part of my current job responsibilities at WHO.	1
This function is not part of my current responsibilities	1
Training I undertook while doing my post graduate course at the University	1
UN Theme Group on Gender	1
WHO Publications on Gender	1
common sense for eg. makes sense to empower female nurses in a male dominated health care team since they are at the forefront of patient care	1
discussion of gender issues on a case specific basis in designing/ managing or reporting on certain activities/ as relevant	1
existen faltas de planificaci?n para capacitaci?n del personal en general, no se capacit?n m?s al personal antiguo (seguramente se presume que lo saben todo) solamente a los	1
nuevos, personal t?cnico que est? trabajando en las ?reas espec?ficas.	
inforcement of training about gender balance	1
lack of interest from male staff and overt sexism in all areas of the organisation	1
my former experience	1
n/a	1
n/a to my work	1
networking within the organization would be helpful	1
not applicable	1
not applicable to my purpose (and 23 neither)	1
not really applicable	1
not relevant to my job	1
other agencies working on gender related to my area of work	1
personal interest	1
seems there is a gender hype. has never been of any relevance in work environment. has allways been distinguished in data	1
self motivation	1
support from the women's health and gender department	1
this is not what i'm thinking of - and i'm really apart this issue	1
we have a gender focal point who is inexperienced and not helpful.	1

Table 8. Indicator 3 - Factors Inhibiting Gender Integration or Institutional Barriers to Gender by WHO Region

Factors	Ove	Overall		AMRO/PAHO		WPRO		SAERO		AFRO		EMRO		EURO		НО		Other	
Factors	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	
Insufficient Knowledge or Skills on Gender to Apply It to My Work	618	28.6	100	25.6	88	31.4	37	33.0	178	44.8	40	26.0	61	26.4	95	17.5	19	35.2	
Work Schedule is Too Busy ro Accommodate Work on Gender	310	14.4	44	11.3	61	21.8	27	24.1	65	16.4	30	19.5	37	16.0	40	7.4	6	11.1	
Not Interest in Gender / Not Relevant to my Work / Not A Priority	348	16.1	42	10.8	38	13.6	13	11.6	48	12.1	33	21.4	58	25.1	109	20.1	7	13.0	
Lack of Appropriate Data / Evidence on Gender in my Area of Work	507	23.5	94	24.1	72	25.7	29	25.9	116	29.2	36	23.4	43	18.6	101	18.6	16	29.6	
Lack of Appropiate Tools to Help Me Address Gender in my Work	538	24.9	94	24.1	77	27.5	36	32.1	138	34.8	34	22.1	54	23.4	86	15.9	19	35.2	
No Budgetary Resources Available for Work on Gender	367	17.0	71	18.2	48	17.1	22	19.6	84	21.2	28	18.2	39	16.9	68	12.6	7	13.0	
No Human Resources Available for Work on Gender	302	14.0	56	14.4	45	16.1	24	21.4	66	16.6	21	13.6	30	13.0	56	10.3	4	7.4	
Insufficient Technical Follow-Up After Training To Address Gender in my Work	262	12.1	69	17.7	45	16.1	21	18.8	62	15.6	16	10.4	13	5.6	29	5.4	7	13.0	
All of the Above	86	4.0	17	4.4	18	6.4	5	4.5	17	4.3	10	6.5	5	2.2	12	2.2	2	3.7	
Other	140	6.5	22	5.6	12	4.3	13	11.6	17	4.3	7	4.6	13	5.6	54	10.0	2	3.7	
None	438	20.3	108	27.7	50	17.9	14	12.5	47	11.8	24	15.6	47	20.4	140	25.8	8	14.8	
Don't Know	178	8.2	25	6.4	19	6.8	5	4.5	36	9.1	17	11.0	14	6.1	55	10.2	7	13.0	

Table 9. Indicator 3 - Factors Inhibiting Gender Integration or Institutional Barriers to Gender (Other Categories) — Question 22b

Answer	Frequency
Not relevant to my work	2
n/a	2
not relevant to my work	2
A very clear sense of how WHO defines women's health issues and topics	1
Admistration is at a higher level than my current role	1
Adressing gender equality is still often regarded as a minority issue.	1
Are we referring to staff or work with the countries? If related to staff, not sure what would be the objective	1
As G staff there is little I can to to influence this area. The HR processes in WHO are such that men will hire men and women will hire women.	1
At my level of responsibility I address and push for gender mainstreaming when applicable	1
Current job activities does not include gender assessing.	1
Doesn't come up as an issue. One time in the long-distant past we were asked to provide list of consultants/APW recipients by sex.	1
Either N/A or we are addressing gender issues.	1
Even if I do understand (or few other colleagues understand) the concept and application of gender mainstreaming; most of the colleague in WHO do not have clear concept	1
and therefore are not inclined to work towards gender mainstreaming	
Female health workers & profesionals continue to constitute the savings" in the health system no interest in advancing their status & conditions	1
Function not part of work	1
G4 level do not make decisions. Depending on supervisor, suggestions/discussions are possible	1
Gender is a non-issue in my work in the Organization	1
Gender is not part of my current job	1
Gender is still treated as an 'additional' unit in the department and not important.	1
Gender issues get dropped off due to lack of fundding and Human resources to follow them through from planning to implemention & evaluation of programs.	1
Gender mainstreaming not a priority of mid-level management	1
Gender not an issue	1
Gender should be concidered as normal part of any work and I hope it is in most cases. I do not follow-up systematically my work in the field of gender. Females are in the	1
focus most of the time, but we should also think about males, as health indicators	
I am a fundraiser, so am not involved in the technical issues.	1
I certainly address gender in my work essentially in terms of work relations and giving equal opportunities. For the rest, it is because I am at a very low level of policy making	1
and that what makes the scope of my action on gender very limited.	
I do not think I am not addressing gender in my work.	1
I don't believe it to be an issue nor is it a problem within our unit. I have not heard of any gender descrimination of hints of descrimination in the Regional Office. I am not	1
prevented" from addressing gender in the work and the way the question is pre	
I don?t see how gender can affect my work	1
I havent any responsibility that requires addressing gender issues.	1
I presume the AO did include gender in the selection of participant but I did not have to address directly with that aspect. And the material used was developped prior to my	1
involvement in the project.	
In house resistance from colleagues or sometimes from supervisors.	1
It is my belief that AFRO management is doing a lot to address this issue	1
It is not included in my current job responsibility	1
It is not part of my job	1
It is not something that is part of my current job responsibilities.	1
Just only women are working in the CO, issues address gender to my work are not relevant.	1

Answer	Frequency
Lack of leadership on this issue from within my department/cluster	1
Lack of senior management committment, lack of country focal points to work on gender and health (both in WHO and MoH)	1
Less people who understand gender and many of them think that gender is female issue even the advocate of gender issue this surprise me lot	1
Limited decision-making power	1
More specific training on how to monitor publications would be helpful	1
My position as a G-staff	1
My work does not depend on gender	1
My work is confined to advice on technical issues while gender issues originate from policy level	1
My work is for the Organization and benefits everyone equally.	1
My work is not related to gender/sex. My work world" is chemistry and biological products."	1
My work responsibilities do not incompass making such decisions and influences.	1
NOT APPLICABLE IN MY WORK	1
NOT PART OF MY SCHEDULE	1
No applicable	1
No information about WHO Gender policy	1
No interest from supervisor	1
No need in administrative work - decisions taken at P level	1
No real interest - understanding - by my (female) supervisor to generate discussion on gender and consequent implementation of gender policy	1
No requirement to include gender; partly because there is gender equity in my sector	1
Not a great interest from management levels (which tend to be dominated by men).	1
Not applicable in my case	1
Not applicable to my area of work	1
Not being made an organizational priority	1
Not in a decision taking position - cannot promote gender equity, but would spontaneously note to my supervisor if I felt gender inequity in his work	1
Not in my job responsibilities. If it comes up in correspondence I always address it by using the plural.	1
Not institutionalized as part of the working process, so it is often forgotten or omitted, even if it is important	1
Not involved and not part of my current job responsibilities at WHO	1
Not my responsibility	1
Not really an issue	1
Not really in the nature of my function	1
Not relevant in my work	1
Not relevant to my area of work (which is different from not being interested, by the way!)	1
Not relevant to my work (to clarify, I do have interest in gende issues; if it was relevant to my work then it would not not be a priority")"	
Not responsible for development and production of WHO materials	1 1
Not within my area of responsibilities	
Nothing prevents me from addressing gender - equity in all areas is the intention whether it be gender, ethnicity or anything else. The important thing is that when I see	<u> </u>
imbalance (eg in the membership of an advisory group) I raise it as a problem and wo	1
On a daily basis we are too busy trying to meet program objectives that gender issues do not even arise.	
Only appropriate when attempting to keep a gender balance for meetings	1 1
Resource mobilization work (funding raising) is not gender specific or sensitive.	
Secretaries are invariably female and at WHO we know our place	1
Senior management not understanding the need for gender mainstreaming	1
Since I work in public information and communication gender is not that relevant both male and females's need equally the information	1
Since I work in poolic information and communication gender is not that relevant both male and remales's need equally the information	1

Answer	Frequency
Sofar not specifically addressed in development of training material but for the next phase when developing operational aspects gender aspects will be part of the training	1
package	
Some managers still need more knowledge on gender issues	1
Supervisors not interested in issue	1
The budget is not controlled by WHO, it is controlled by MoH	1
The current glass ceiling in WHO management for women to go above a P5	1
The functions of an AA does not include or relate to decision making processes involving gendere issues.	1
The question presumes that something prevents me from addressing gender in my work.	1
The reduction of gender inequities is present in my work as a general principle; however, I do not work specifically in this issue.	1
There doesn't seem to be gender bias in health services for children.	1
There is no certain scope of work for addressing gender in my work	1
There is no interest by senior management in SEAR to address gender inequalities, in fact, it would be the opposite and discouraged.	1
There is no interest on the part of managers (all male) in talking about gender, much less to do anything about gender inequalities.	1
This function is not part of my current job responsibilities at WHO	1
This function is not part of my current job responsibilities at WHO.	1
This function is not part of my current job responsibilities.	1
This is not part of the scope of my job	1
Variable knowledge and understanding among national staff, Relatively low priority by MOPH to gender issues, No focal point with in MOPH to discuss gender issues,	1
reportedly high ranking of the country on gender index, relative priority to women's issues	-
We have just started on this work, so hopefully it will be considered in the future projects we undertake.	1
We have just started working, maybe in near future we might venture into this issue.	1
complexity of issues/country-specific nature of work/major push for gender-sensitivity (non-measurable) promoted inside WHO in MTSP but without guidance on how to	1
create realistic indicators and put gender issue in perspective of other top equity concerns	-
confusion (or lip service) at WHO on what gender vs. sex means, including by the Health Statistics and Informatics department	1
does not apply in my area of work	1
does not apply to my individual work plan	1
don't care	1
gender is not an issue in the country - there is an equal balance, mutual respect	1
has not been programmed by management	1
highly male environment where it is difficult to call attention to it	1
in many cases WHO policy is not gender focused therefore difficult to apply gender equality	1
insufficient political support for work on gender mainstreaming	
just not always a conscious thought to specifically look at gender	1
lack of formal trainning in gender issues	1
	1
lack of interest from bosses	1
lack of true consideration of gender apart from specific gender related programme issues	1
my work is IT (technical), in the IT world gender and sex issues are subliminal	1
my work is related to broader aspects of health services and policy that by nature cannot be gender specific.	1
no clear cut function intended to mainstream gender	1
no opportunity to do so	1
not able to establish better links with gender and women's health department; they have their agenda and seperate work plan and we have ours. Time and planning in WHO	1
dos not allow for more.	
not applicable	1

Answer	Frequency
not part of my job responsibilities	1
not part of my work	1
not relevant to admin.work	1
not seen as a priority given that we are very short of staff, although it should be a priority	1
not understanding of the relevanc eof gender among country counterparts	1
nothing prevents	1
once the focus is on gender instead of professionalism, things go wrong	1
organizational interest in addressing gender, meaning seeing gender as separate program altogether detached from programs.	1
policy recruitement	1
see above, these are not part of my current responsibilities	1
specifically to my work gender differences were always an issue. for work gender does not matter. Only expertise is important.	1
the main issue is isolation; lack of networking on gender within a setting of an extreme and challenging workload.	1
there is mis-understanging with some colleagues in WHO and other UN agencies as well. that is: they some how think that gender is women.	1
to further addressing gender at work we need clear, practical, reproducible and feasible guidelines.	1
work in finance dept. specificall with insurance	1

Table 10. Indicator 3 - Institutional Support Needed in the Future To Be Able to Address Gender in Your Work by WHO Region

Support	Overall		AMRO/PAHO		WPRO		SAERO		AFRO		EMRO		EURO		НО		Other	
Support	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Opportunities To Learn or Further Develop Skills in Gender	1116	51.7	191	49.0	157	56.1	68	60.7	276	69.5	98	63.6	92	39.8	204	37.6	30	55.6
Regular Discussions With My Supervisor on Addressing Gender in my Work	420	19.4	82	21.0	54	19.3	30	26.8	117	29.5	38	24.7	34	14.7	57	10.5	8	14.8
Funds to be Allocated for Work on Addressing Gender	565	26.2	110	28.2	79	28.2	35	31.3	136	34-3	46	29.9	54	23.4	96	17.7	9	16.7
Technical Support from Gender Focal Point(s)/Unit(s)	756	35.0	137	35.1	105	37.5	55	49.1	178	44.8	56	36.4	78	33.8	126	23.3	21	38.9
Data/Evidence on Gender in my Area of Work	801	37.1	163	41.8	108	38.6	41	36.6	154	38.8	57	37.0	84	36.4	178	32.8	16	29.6
Adjustments in my Other Responsabilities so that I Can Give More Time to Work on Gender	325	15.1	62	15.9	41	14.6	23	20.5	68	17.1	28	18.2	39	16.9	58	10.7	6	11.1
Resource Materials	759	35.1	126	32.3	117	41.8	54	48.2	181	45.6	55	35.7	77	33.3	132	24.4	17	31.5
Additional Human Resources to Work on Gender	394	18.2	70	18.0	60	21.4	27	24.1	80	20.2	35	22.7	31	13.4	82	15.1	9	16.7
All of the Above	243	11.3	47	12.1	44	15.7	17	15.2	49	12.3	23	14.9	21	9.1	38	7.0	4	7.4
Other	41	1.9	5	1.3	1	0.4	4	3.6	4	1.0	1	0.7	3	1.3	23	4.2	0	0.0
No Support Needed	190	8.8	28	7.2	19	6.8	5	4.5	16	4.0	9	5.8	28	12.1	79	14.6	6	11.1
Don't Know	211	9.8	26	6.7	22	7.9	8	7.1	26	6.6	14	9.1	31	13.4	80	14.8	4	7.4

Table 11. Indicator 3 - Institutional Support Needed in the Future To Be Able to Address Gender in Your Work (Other Categories) — Question 26b

Answer	Frequency
As long as senior management doesn't support it, it will never happen. They don't support it really even if they give lip service to it.	1
Departmental reports which include gender information and points out existing shortcomings/challenges in my area of work.	1
Dept. Management awareness and interest	1
Encouraging support from supervisor	1
Explaing your gender specialist that gender is not only womenthats why now i always say Gender is in danger" Gender is all about men and women not explicitly women.	1
Gender people need to advocate this on right time other wise again Gender is in danger"	
Gender equality seems to have been hindered from many senior colleagues although we publish brochures on the subject	1
Gender issues are culture based.	1
Greater commitment, other than political slogans, by upper echelons of WHO Management to gender. Where is the Special Adviser on gender in the D-G's Office? Why is	1
gender work within a cluster (FCH) and not at DGO level?	
I am not in a position to take any action and therefore this question is not applicable to me	1
I would like to be part of the team in order to be able to learn more about gender in my work.	1
I'm not sure in my field how much the focus of the work involves gender issues, but as a profession, not just at WHO, a lot of work on gender needs to occur to get and keep	1
qualified (not quota-ed) women in the field.	
It is a matter of mind set	1
It is not part of my functions	1
Let's see how the new WHO strategy to ingegrate gender analysis and actions will work	1
Lets not make this artificial.	1
More willingness/resources from supervisors and management. This issue is not recognized as priority	1
My assignment to WHO is temporary	1
NA	1
Not appropriate	1
Not currently applicable in my work	1
Not sure it is needed for my work, but would be interested in learning regardless.	1
Proper breifing and training	1
Senior management to learn about and integrate gender dimension at all levels	1
Shift in description of Unit's work or my job description to make explicit focus on gender.	1
So far my work has not called for the need to address gender issues.	1
That gender is consider a relevant isuue/topic within our Organization and some publications are disseminated regularly for the workers to start treating gender as important	1
and essential to adequate development	
This function is not part of my current job responsibilities at WHO	1
This function is not part of my current job responsibilities at WHO.	1
This is a stupid questionnaire where main objective" is asked for and then "all of the above" is given as an option. What is the objective? It aims to educate staff and also assess	1
the the information the staff have. Design a better questionnaire and I wi	
change in management staff	1
gender is not an issue in the nomenclature field for pharmaceutical substances""	1
gender should make sure there is real equity, preventing quota, and time consuming sociologist briefings	1
i would like to get an idea why this should be needed by me	1
more specific emphasis on gender-neutral language in the workplace and equitable hiring practices	1

Answer	Frequency
n/a	1
n/a to administrative issues	1
not relavent to my area of work - however WHO employment policy is not in general very woman or family friendly though progress is being made	1
review of levels of middle-management, almost exclusively women with professional qualifications but classified as G	1
work/training to address latent/passive sexism in male colleagues	1