

# WomenLift Health

INVESTING IN  
WOMEN'S  
LEADERSHIP  
TO IMPROVE  
HEALTH  
OUTCOMES



**WomenLift Health exists because leadership matters. Having worked over three decades in the health sector, I've been struck at how our sector thinks – or doesn't think – about leadership.**

*I've watched, analyzed, and been part of investing billions of dollars in health technologies, health workforce, and health delivery. And yet, it wasn't until I began analyzing gender inequalities that I realized how rarely our sector studies and intentionally invests in health leadership. All too often, we simply assume it.*

*Our goal is to re-imagine leadership to include talented leaders who are women and represent diverse identities, so their expertise, experiences, and leadership styles contribute to improved health for all. We are taking concrete actions in partnership with leaders and organizations around the world to give women leaders the tools to navigate their own pathways to leadership and to use their power to lift others. We are also building the awareness and commitment of institutional leaders to take action to establish more inclusive work environments and contributing to the worldwide movement toward gender equity to help ensure these women leaders will thrive.*

*What we do — and how we do it — are equally important to WomenLift Health. We strive to put our values of DEI, learning and collaborative leadership at the heart of everything we do. We are exploring new models of governance and power to be nimble, cross-regional, and ensure decision-making is decentralized and resides with the leaders who have the knowledge to know what to do and the ability to do it.*

**I hope you  
will join us in  
re-imagining  
leadership.**

**Amie  
Batson**  
PRESIDENT

**I strongly  
believe investing  
in women's  
leadership will  
lead to change.**

*WomenLift Health's approach resonates because it's about DOING. It provides mid-level women leaders with the opportunity to strengthen their leadership skills to lift themselves — and importantly to lift other women — to fully contribute their expertise and skills to improve health. WomenLift Health also engages with leaders of health institutions to transform their organizations to be more inclusive and gender equitable. I value investing in women leaders because I've seen the impact of women in the health sector.*

***It is the women at the front-lines, at the national level, and globally who comprise the majority of the health workforce. And although often overlooked, it is they who have improved the health and well-being of millions of people around the world. It's time for those women to be recognized for the leaders they are and given their rightful place at decision-making tables.***

**Geeta  
Rao Gupta**

**CHAIR, WOMENLIFT HEALTH  
GLOBAL ADVISORY BOARD**

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# Introduction

A participant in the WomenLift Health Leadership Journey in India decided to focus her Leadership Project on putting a stop to the unequal, disrespectful treatment of women seeking care at health facilities. This exceptional leader is partnering with World Health Organization (WHO) and other organizations to transform the culture within healthcare to respect women so they can comfortably and confidently get the care they need. While the leaders of these facilities have not previously prioritized this work, a single woman leader with the tools and network developed over her career and through her Leadership Journey, is moving mountains to turn the tide on this problem.



## LEADERSHIP MATTERS

It matters in the fight against all global health crises and the everyday lives of women and girls everywhere.

## LEADERSHIP MATTERS

Navigating all the cultural, technical, political, and financial complexities related to improving global health requires not only diverse leadership but also the most talented and tenacious leadership possible. Yet current data confirm that those making critical policies, technical, financial, and scientific decisions on health around the world — including how health resources are allocated — are disproportionately men. Despite women comprising 70% of the health workforce, they are an untapped and under-utilized talent pool — filling only 25% of senior and 5% of top health organization positions.

Organizations reap resounding benefits from having more women in leadership roles, from greater diversity of thought, innovation, resilience, and morale to higher financial returns. In comparison to men, women in leadership positions are more likely to prioritize the needs of women, children, and marginalized groups; directly respond to the community's concerns; allocate funds toward education, health, and nutrition; and increase research on women's health issues. In the political arena, women are also more likely to support policies that increase standards of living and decrease government corruption and are more likely to work collaboratively with others in power. Additionally, the visible presence of women in leadership positions has the potential to empower other women to participate in health initiatives and decision-making processes.

## STRATEGY EXECUTIVE SUMMARY

# WomenLift Health focuses simultaneously on three inextricable spheres of change

WomenLift Health's vision is a world where diverse, accomplished leaders collectively transform global health outcomes. To realize that vision, we seek to expand the power and influence of talented women in health and catalyze system change to achieve gender equality in leadership.



### Individual

Investing in women's leadership to improve health outcomes.



### Institutional

Influencing institutions to better support women leaders.



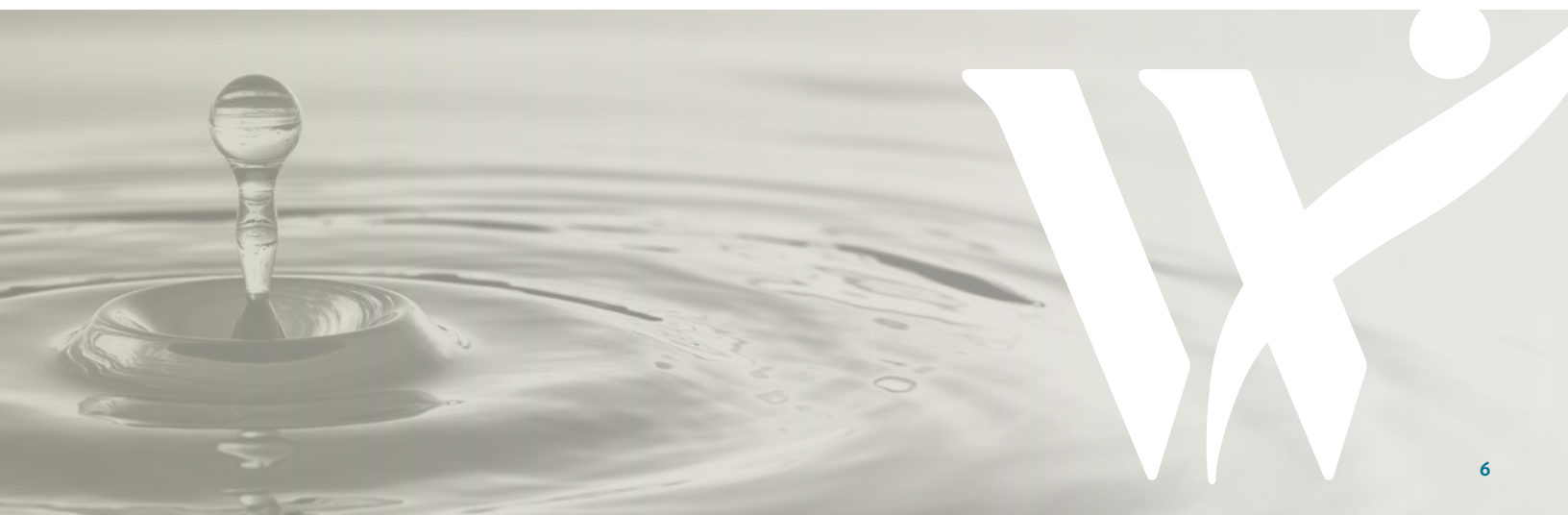
### Societal

Building a movement of change agents to evolve our communities and healthcare ecosystems to respect and care for all people equally.

BUT WHERE WILL THEY LEAD?

YET HOW WILL IT TAKE ROOT AND SPREAD?

ONLY THEN WILL WE TRANSFORM GLOBAL HEALTH.



# The WomenLift Journey

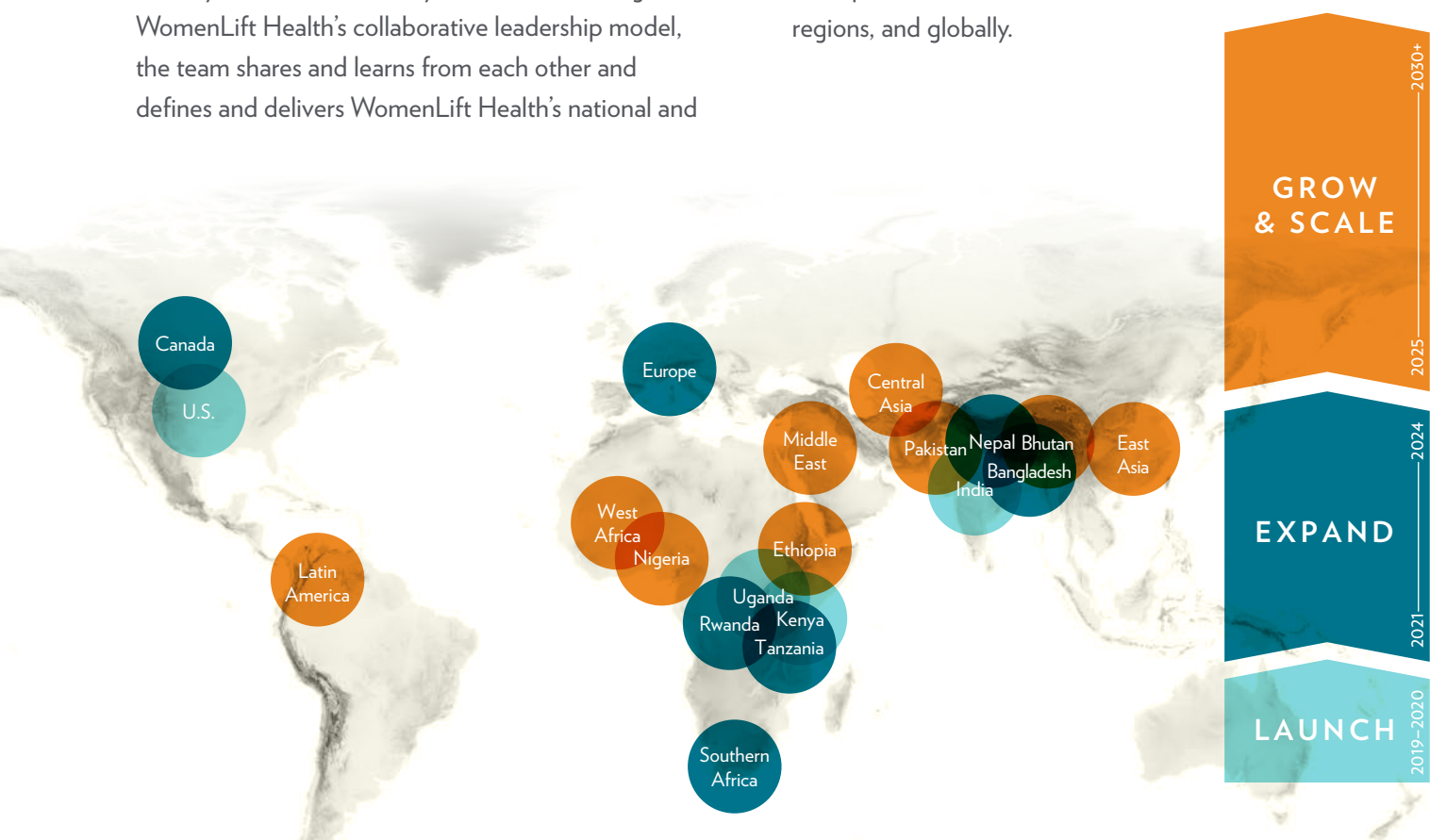
## WOMENLIFT HEALTH'S THEORY OF CHANGE

has shaped our strategy and growth plan. We believe and continually observe that individual action galvanizes change at the institutional and societal levels for better health. This is why we started our journey with more focus at the individual level, knowing action taken at this level will ripple out to the institutional and societal spheres of change.

Also key to our strategy and growth plan is our belief that transformative, at-scale change depends on thinking and working locally, sharing cross-country, and collectively contributing to global transformation in health. Investments in empowered local leaders and partners are critical for shaping country-relevant, country-owned, and country-led efforts. Through WomenLift Health's collaborative leadership model, the team shares and learns from each other and defines and delivers WomenLift Health's national and

global outcomes and impact. It is, however, the combined commitments, expertise, insights, and resources not only within countries but also across countries that will fuel transformation and be the engine that will power success.

Regional Hubs are a critical element of WomenLift Health's structure, with responsibility for contextualizing WomenLift Health's approaches and interventions to be relevant to the needs of women leaders in their own countries and cultures. The Hubs are also responsible for building strong coalitions of partners in each country to foster learning, collaboration, and sustainable implementation. WomenLift Health is prioritizing working with and through partners for both programmatic and operational services in countries, regions, and globally.



To date, WomenLift has established Hubs in East Africa (serving Kenya, Rwanda, South Sudan, Tanzania, and Uganda), South Asia (initially focused on India), North America (serving U.S. and Canada), and soon Southern Africa (serving Botswana, Lesotho, Malawi, Namibia, South Africa, the Kingdom of Eswatini, Zambia, and Zimbabwe). WomenLift Health leaders are developing country-based strategies and implementation plans, and customized materials to build partnerships and establish scalable platforms and implement specific interventions that support our goals of Individual Development, Institutional Influence, and Societal Movement.

Looking forward, WomenLift is committed to continue our global and local growth as we expand the scope and scale of activities and countries served by Hubs in Africa and South Asia and establish our presence in new regions including West and Central Europe, East Asia, Latin America and Caribbean (LAC), and Middle East and North Africa (MENA).

OUR GOAL IS TO SERVE

30+

COUNTRIES BY 2029



# Individual Leadership Development

## LEADERSHIP JOURNEY

WomenLift Health's Leadership Journey provides mid-career women leaders the tools to navigate their path toward more prominent leadership roles and responsibilities. It is a fully-funded year-long experience that is regionally based and driven. It is designed to provide exceptional women leaders with confidence, networks, and understanding of barriers, along with peer, mentor, and coaching support to successfully use their voice, expertise, and leadership skills for health impact.

Leadership Journey participants engage in:

### **MONTHLY LEARNING TOUCHPOINTS**

covering a robust, contextualized curriculum that supports women in building key leadership styles of Authentic, Inclusive, Strategic, and Impactful Leadership

### **MENTORING AND COACHING SESSIONS**

to help individual women develop their unique leadership style and advance their careers

### **A SELF-DIRECTED LEADERSHIP PROJECT**

in which participants apply their leadership skills to lead changes that advance equality in healthcare and women's leadership and improve health



## **LEADERSHIP PROJECTS**

Each woman in the Leadership Journey is responsible for designing and implementing a Leadership Project focused on actions that can improve community health or help transform institutions or society. Through Leadership Projects, women internalize their expanding leadership skills and contribute back to global, national, or sub-national health goals, leveraging their local and global networks, innovative ideas, and passion for change. The projects also provide a unique opportunity for these women leaders to influence their organizations' mindsets, policies, and practices.

## **LEADERSHIP CAPACITY PROGRAMS**

WomenLift Health designs contextualized leadership content and curricula that can be delivered to target audiences of women leaders and male allies through existing regional and national channels and programs.

## **LEADERSHIP WORKSHOPS**

WomenLift Health conducts contextualized workshops that provide an opportunity for many more women sharing a common culture to come together to learn and share about a particular aspect of authentic, inclusive, strategic, and impactful leadership.

## **LEADERSHIP JOURNEY ALUMNAE NETWORK**

At the end of the 12 months, Alumnae join a lifelong network of women leaders in health from around the world who continue to grow, learn from one another, assist incoming cohort members, and promote women's leadership in the health sector.



## STORIES OF IMPACT

“At the core of the East Africa Leadership Journey is the understanding that good leadership involves influence that has a positive and unifying impact. Through this journey, I have come to understand my own influencing style, which is “Inspiring.” I have also been challenged to develop styles that are not as natural to me, including “Assertion,” which can be effective in specific situations. I am naturally not an assertive person. At the end of last year, I was faced with some tough and difficult decisions requiring quick resolution. I started this year by applying some of these learnings and influencing styles, and it has worked!

**JOYCE WANDERI**

Chief Program Officer, Girl Effect  
Kenya

“The WomenLift Health Leadership Journey has exposed me to new concepts and perspectives in leadership that I never knew existed. It is this leadership journey that has revealed my flaws and strengths in leadership. I have met amazing ladies in my cohort and beyond — coaches, mentors, facilitators, and staff — who have supported me and continue to provide tools and techniques to optimize my leadership skills, competencies, traits, and experience. This newfound understanding is enabling me to redefine and build my resilience as I seek to leverage collaborative leadership to increase access to diabetes and hypertension treatment in primary healthcare platforms in Kenya.

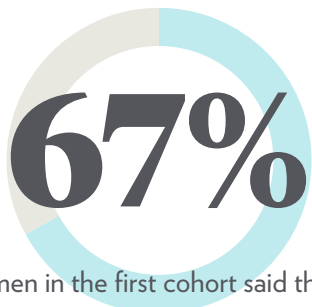
**DR. ELIZABETH ONYANGO,**

Dental Surgeon & Public Health Specialist  
BDS (UoN), MPH (UoN), MBA — Strategic Management (UoN)  
Head: Division of NCD Prevention and Control Ministry of Health, Kenya

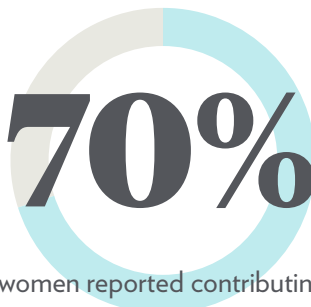
# MEASURING SUCCESS

WomenLift Regional Hubs have launched Leadership Journey cohorts in India, East Africa, North America, and soon Southern Africa. By 2024, there will be 400+ cohort participants, each with their own Leadership Projects, another 400+ women leaders reached through existing channels, and 1000+ women leaders who joined workshops. And as each leader takes action with their Leadership Project and beyond, they help galvanize change at the institutional and societal levels for better health. It's the WomenLift Health's Theory of Change, and we're seeing it happen around the world.

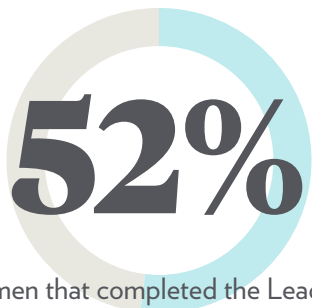
## INDICATOR OF GROWING INFLUENCE OF WOMEN LEADERS



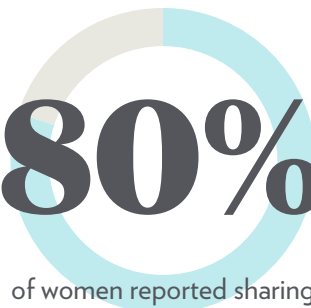
of women in the first cohort said they had a high ability to influence decisions made within their organizations, one year after the Leadership Journey.



of women reported contributing to changes in organizational policy or practice in the past year.



of women that completed the Leadership Journey said their institutional influence had increased in the past year.



of women reported sharing Leadership Journey content at work.



of Alumnae said they continued to interact with women in their cohort.



# Institutional Influence

WomenLift Health influences institutional partners by engaging senior leaders to understand the value of women's leadership, raise awareness about women leaders' challenges, and motivate action toward change. This includes action that directly addresses women's leadership needs and skills gaps within their health institutions. We are building on our unique connections to leaders in health organizations through the women leaders in the Leadership Journey, our network of partners in countries and globally, and through champions and advisors, including the Global Advisory Board.

## WE FOCUS ON THE FOLLOWING KEY LINES OF EFFORT

### **ENGAGING INSTITUTIONAL LEADERS WHILE BUILDING MALE ALLYSHIP**

WomenLift is building Communities of Practice among supervisors and C-suite leaders from interested health institutions to share learnings and discuss current Diversity, Equity, and Inclusion (DEI) challenges in a safe space. We are working with partners in East Africa, South Asia, and North America to create a package of activities to address their needs and demands.

### **INSTITUTIONAL LEADERSHIP JOURNEY**

We are designing Institutional Leadership Journeys comprised of cohorts of women leaders within a single partner institution. These cohorts must be sponsored by senior management. They also become a resource to drive internal change, such as assessing, designing, and implementing gender-equal change to the institution's policies, practices, and culture.



## INSTITUTIONAL CHANGE-FOCUSED LEADERSHIP PROJECTS

Individual or institutional Leadership Journey participants choosing to focus their Leadership Project on catalyzing institutional change have a unique opportunity to influence mindsets, policies, and practices within their own organization. We support women leaders who feel comfortable and safe investing in change in their organizations within their scope of control. This can include establishing informal mentoring systems and peer networks, working with management to assess gender equity within the organization, and supporting formal process and systems change with the sponsorship of senior leadership.

## INDIVIDUAL WOMEN LEADERS PAYING IT FORWARD

Leadership Journey participants are already choosing to “pay forward” the leadership learning and support they received through the Leadership Journey by:

- Sharing knowledge with their peers, informally and through peer networks
- Modeling collaborative leadership within their own teams
- Volunteering for sponsored opportunities to address DEI and gender equality
- Actively speaking out on toxic and unfair behaviors and processes
- Directly engaging and influencing senior leadership to better support women leaders and DEI



## STORIES OF IMPACT

“My whole life, the picture in my mind of a leader was a white male CEO who is assertive and visionary; in other words, not someone who looks, sounds like, or acts like me. The WomenLift Health program finally shifted that picture in my mind to a much broader and inclusive set of traits and skills that include women of color at all levels of an organization. With this newfound recognition, I dialed up my leadership at PATH to take on a new challenge: to hold ourselves accountable to centering equity in all of our work. In the past year, I worked with teams across the organization to develop and launch PATH’s equity in programming benchmarks. I am so proud that we are sharing this tool with our partners! And I welcome hearing from colleagues who have feedback, want to learn more, or share the tool even further.

**BINDIYA PATEL**

Managing Director, Programs and Innovation Division, PATH,  
North America

Learn more about PATH’s journey to equity with Bindaya via her [article](#) and [LinkedIn post](#).

“The Leadership Journey and project have been an incredible boost to my passion for working for respectful maternal care. Having taken this up as my leadership project, I have had the opportunity to discuss the institutional implementation challenges with my mentor and coach. These conversations have been immensely helpful in expanding my vision and contributing different perspectives. I truly believe that the journey started today is just the beginning of seminal work in the field of respectful maternal care. The bonds made along this journey will always remain vital and contribute significantly along the way.

**DR. K APARNA SHARMA**

Professor, Department of Obstetrics & Gynecology,  
All India Institute of Medical Sciences, New Delhi

# Societal Movement-Making

Alongside other partners, WomenLift Health contributes to building movements within and across countries to advance gender equality and women's leadership in health. Our primary contribution is to spotlight diverse women leaders and male allies to be credible champions and inspiring role models and to share their important messages on DEI and leadership. Currently, we are doing this through the following efforts.

## WOMENLIFT HEALTH CONFERENCE

(formerly known as Women Leaders in Global Health Conferences)

### WOMENLIFT HEALTH CONFERENCE

WomenLift Health hosts this convening alternating global and regional conferences with the goal of reimagining leadership and creating a platform for highlighting diverse and effective leadership. This is an annual gathering of both established and emerging leaders from across the health community to meet and work together to advance gender equality in health leadership around the world.

### SPEAKING EVENTS

WomenLift Health works in and across countries to support speakers and panels in existing conferences and stand-alone events that explore the challenges faced by women leaders in health, the value of women's leadership and immediate and long-term actions that can be taken to elevate women to positions of influence.

### AMPLIFYING VOICES

From our extraordinary Global Advisory Board to Leadership Councils that are being established in Africa, India, and South Asia, to our network of women leaders, male allies, and partner organizations — we work with these leaders to share their insights, commitments, expertise, and resources. We support them with positioning, speaking opportunities, and messaging and also call on them for everything from ideas to introductions to action in their organizations to sponsorship of women leaders. These partners are the engine that powers WomenLift Health's mission.

### DIGITAL PLATFORM

The WomenLift Health digital platform, [womenlifthealth.org](https://womenlifthealth.org), amplifies evidence and stories on women's leadership in health, highlights best practices and organizational case studies, and shares materials, tools, events, opportunities, and information to women leaders and male allies as they continue to learn and grow.



## STORIES OF IMPACT

The **Women Leading Change in Health and Science** conference took place on 6 December in New Delhi, India, organized by WomenLift Health and with partners Department of Biotechnology, Ministry of Science and Technology, Government of India and Biotechnology Industry Research Assistance Council (BIRAC), and Grand Challenges India (GCI-BIRAC). With over 250 people in attendance, it was remarkable for bringing together notable dignitaries across multiple sectors in India to promote women's leadership in health and science.

Among the speakers was the co-chair and founder of the Bill and Melinda Gates Foundation, Melinda French Gates.

“

It's going to require advocates like the those in union ministries, the Department of Biotechnology, and WomenLift Health to keep building leadership opportunities and support networks for women in health. It's going to take government, businesses, and NGOs [Non-Governmental Organizations] to make sure that they include women in their leadership ranks. And it's going to require society — all of us — to value women's work, women's ideas, and women's power.

**MELINDA FRENCH GATES**

Founder of the Bill and Melinda Gates Foundation

Ms. French Gates also authored related pieces in the [Hindustan Times](#) and the [Times of India](#).

“

We often talk about gender equality and women-centric policies at the institutional level, but we also need a conducive environment that helps women exercise their full potential at their workplace. Women aren't demanding opportunities; they are asking not to be denied or deprived of them. All we need is a level playing field for women.

**DR. RENU SWARUP**

Former Secretary, Department of Biotechnology



The conference also focused on the crucial role of male allies in progressing towards gender parity.

“Able mentorship is key to ensuring women exercise their full potential. We must acknowledge that most rules in the professional world are made for men, and women are, somehow, expected to follow them.

**DR. RAJIV BAHL**

Director General of the Indian Council of Medical Research  
Secretary, Department of Health Research

“We must be cognizant of the unconscious bias that manifests in the denial of everyday opportunities for women — in travel, training, and availing an education. It's therefore critical that we bring into the spotlight female frontline workers and male allies who are talking about such important things and correcting the course while they are at it.

**DR. NEERAJ JAIN**

Country Director India, PATH

While the conference addressed COVID-19's impact that was exacerbated for women and girls, it also acknowledged and celebrated women in India's pandemic response strategy. Colourfully captured films that played between discussions focused and portrayed Accredited Social Health Activist (ASHA) workers, women scientists, and WomenLift health mentors.

“We need to create equal opportunities for both boys and girls and help them develop leadership skills and build confidence.

**DR. SOUMYA SWAMINATHAN**

Chief Scientist, WHO

The event also paved the way to encourage progress on  
**Sustainable Development Goal 5:**

### **ACHIEVING GENDER EQUALITY AND EMPOWERING ALL WOMEN AND GIRLS**

that requires institutions to provide the opportunity to women to assume leadership roles and equip them with the tools they need to overcome challenges and be effective.



# Measuring, Learning, and Adapting the Path Forward

WomenLift Health is committed to continuous learning and adaptation to ensure we leverage best practices to advance women's leadership and gender equality. Therefore, we have adopted a "learning by doing" approach, translating into a dynamic Monitor, Evaluate, and Learn (MEL) plan. This includes regular reflection on the evidence we gather and discussing how to integrate our learnings into our programming and a robust impact evaluation plan.

## KEY OUTCOMES OF THE WOMENLIFT HEALTH INITIATIVE

### **AN INCREASED NUMBER OF DIVERSE WOMEN LEADERS**

at decision-making tables at the global, regional, and organizational level that can affect health policy, practice, research, and health outcomes at scale.

Measuring progress on these outcomes is complex yet essential so that our partners and we can continually learn and adapt our strategies and tactics. Therefore, we are building baselines, investing in studies, and establishing mechanisms for regular feedback and intentional learning to inform all our work and engage country partners.

We have developed a robust Monitoring, Evaluation, and Learning Plan to assess short-, medium-, and long-term outputs and outcomes that measure the success of WomenLift Health's program execution at the individual, organizational, and societal level.

### **A CRITICAL MASS OF CHANGE AGENTS**

at the individual, institutional, and societal level spark a country-owned and country-led movement that supports women's leadership and results in improved gender equality.

Measuring our Theory of Change is also complex; we work with independent global, regional, and national partners. They track women leaders' outcomes over time and across geographies. This includes following cohorts of women leaders, assessing their professional advancement, and increasing decision-making over budgets, policies, science, innovation, and implementation. They also track Leadership Projects and their impact on institutional change, the health of women and girls, health system integration and strengthening, and other priorities. They will pair these results with outcomes from organizational and societal analyses to understand how the interventions that comprise our strategy reinforce each other for greater impact.



## TOWARD A BRIGHT FUTURE

In her recent keynote address at a WomenLift conference in India, Melinda French Gates said,

“...when given the opportunity, women can be so much more than afterthoughts in a broken world. They can and should be the architects of a better one.

Architecting the way to gender equality and improved global health is complex. WomenLift Health's strategy reflects our deeply held belief that transformative, at-scale change to advance talented women leaders in health depends on action by people. These actions include individuals navigating their own career paths, institutional leaders shaping their institutional culture and structure, and leaders and change agents shaping societal expectations and norms. We are committed to working at all three levels: providing individual women with leadership tools and support, influencing leaders within health institutions to value and invest in women leaders and gender-friendly work environments, and engaging partners and champions to contribute to the gender equality movement.

With each woman leader deciding to join a Leadership Journey cohort, each participant launching their leadership project, each institution willing to change, and every partner engaged in the work of gender equality, the effect ripples out to help influence change in the world. The work has begun, and it is all of our job to take the actions necessary to carry it forward.



The logo features a stylized figure in a light blue color, composed of a circle for the head and a curved line for the body, positioned behind the word "Women".

# WomenLift Health

Women Leaders in Health