Call for submissions

The regional inter-agency movement Every Woman Every Child Latin America and the Caribbean (EWEC-LAC) invites submissions to the Regional Competition on Good Practices that Promote Health Equity for Women, Children and Adolescents.

Registration

Submissions for good practices that promote health equity for women, children and adolescents will be accepted until Friday, August 14th, 2020.

Application instructions and submission forms are available HERE.

Contact Information

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Background

Health equity refers to the idea that everyone should have a fair opportunity to attain their full health potential and that no one should be disadvantaged from achieving this potential. In reaching health equity, avoidable, unfair and unjust differences in health that stem from broader social and economic inequalities are eliminated.

Latin America and the Caribbean (LAC) is a region marked by vast health inequalities between individuals of varying economic and educational backgrounds, urban/rural settings, and ethnicities. Throughout the Region, women, children and adolescents who are poor, lower educated, living in rural areas or of indigenous or other minority ethnic groups, are particularly vulnerable to have poorer health outcomes. The recent COVID-19 pandemic has made inequities and vulnerabilities even more visible, including those related to access to quality health services for all.

The Sustainable Development Goals (SDGs) and the Global Strategy for Women’s, Children’s, and Adolescents’ Health call all stakeholders to ensure that no one is left behind, in the achievement of the SDG targets. The regional inter-agency movement Every Woman Every Child Latin America and the Caribbean (EWEC-LAC) advocates for the use of equity and evidence-based interventions to accelerate health progress for women, children and adolescents in the Region.

The LAC Region has produced successful initiatives to increase health equity that can serve as important examples to be adapted and replicated by other countries. In an effort to identify such impactful
interventions, EWEC-LAC is leading a competition to identify interventions that have proven effective in promoting health equity for women, children and/or adolescents in the Region.

**Objective:**
This competition aims to identify, highlight and share good practices in Latin America and the Caribbean that have proven effective in promoting health equity for women, and/or children, and/or adolescents.

**Thematic topics:**
The competition welcomes the submission of good practices that respond to one or more of the following thematic topics:

1. *Promoting multisectoral dialogue and/or action* to improve the health of women, children and/or adolescents living in vulnerable situations.
2. *Identifying or addressing supply-side bottlenecks and/or access and demand-side barriers to health* disproportionally affecting women, children and/or adolescents living in vulnerable situations.
3. *Strengthening planning and Monitoring & Evaluation processes* to better integrate health equity and social determinants of health, gender sensitivity, and/or human rights into efforts targeting women, children and/or adolescents living in vulnerable situations.
4. *Reporting the results of health inequality monitoring* for women, children and/or adolescent health living in vulnerable situations.
5. *Establishing accountability mechanisms* to ensure that the health needs of women, children and/or adolescents living in vulnerable situations are met.

**Good Practice Criteria:**
For consideration in the competition, the good practice, for all thematic areas related to health equity, must meet the following criteria:

- The good practice identifies and/or responds to a specific health challenge disproportionately affecting women, children and/or adolescents living in vulnerable situations.
- The good practice incorporates and/or addresses the intermediary or structural determinants of health and health inequities affecting women, children and/or adolescents living in vulnerable situations.
- The good practice includes specific government buy-in to ensure long-term sustainability and support.
- The good practice has a model that can be implemented on a larger scale or replicated in other contexts.
- The good practice has a monitoring and evaluation mechanism to track quantitative and/or qualitative indicators demonstrating positive (or negative) results and/or impact in relation to practice objectives or goals.
Competition Rules

The following are the eligibility criteria to qualify for submission:

• The good practice must be submitted by not for profit organizations, groups, associations, or agencies of governments, non-governmental organizations, or academic entities. Private-sector for profit organizations and individuals are not eligible to apply.
• The good practice must be submitted by the organization, group or association that designed and/or implemented them.
• The good practice must have been implemented for at least two years. Those programs that have operated for less than two years will not be considered.
• Good practices implemented in any Latin American and/or Caribbean country, or regionally in LAC, will be eligible to apply.
• The documentation of the good practice can be presented in English, French, Portuguese or Spanish.

Selection and Awards

The Regional Competition on Good Practices that Promote Health Equity for Women, Children and Adolescents aims to honor and promote promising approaches that promote health equity for women, children and adolescents in Latin America and the Caribbean.

• One winner from each of the five thematic topic areas will be selected by a committee consisting of representatives from EWEC-LAC partners and other regional experts.
• All selections must be in conformity with the rules, regulations and policies of each EWEC-LAC member organization.
• The five winning submissions will receive EWEC-LAC support to produce a publication of the selected good practices in an agreed format.
• EWEC-LAC will edit, design, and disseminate the publications in English and Spanish through EWEC-LAC channels.
• The winning submissions will also be featured in an EWEC-LAC publication.
• There is no direct financial (cash) award.
• Competition winners will be announced in the same media used to issue the call for submissions.

Information management and copyrights

The winning submissions will be published as open access documents carrying the EWEC LAC and submitting authors or organization’s names and logos. EWEC LAC and the submitting authors shall be designed as publishing parties and copyright shall be jointly vested in EWEC LAC and the submitting authors or organization. Towards that effect, the parties (EWEC LAC and the submitting authors (organization)) will enter into a co-publishing agreement.
EWEC LAC retains the right to include illustrative (segments of) non-winning submissions in future publications, with due acknowledgement and informing of submitting authors.

Key Concepts

**Accountability:** The obligation to be answerable for all decisions made and actions taken, and to be responsible for honoring commitments, without qualification or exception. Accountability includes achieving objectives and high-quality results in a timely and cost-effective manner. Accountability frameworks can be applied to commitments made by governments in ensuring health for every woman and every child.

**Barriers to health:** Factors that prevent an individual from achieving their full health potential. Barriers to health include, but are not limited to, high cost of care, lack of availability of or access to services, and lack of culturally competent care.

**Gender sensitivity:** A key criterion that considers the determinants in health and identifies the differences in the health of men and women of divergent ages and population groups. It also takes into account health results that are influenced by gender norms, roles and relationships, such as gender-based violence. It encompasses the structural issues, processes or health results that lead to increased gender equality in health.

**Health equity:** Health equity is achieved when every person has the opportunity to attain his or her full health potential and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances. Health inequities are reflected in differences in length of life; quality of life; rates of disease, disability, and death; severity of disease; and access to treatment.

**Health inequalities:** Differences in health status or in the distribution of health determinants between different population groups. Some health inequalities are attributable to biological variations or free choice and others are attributable to the external environment and conditions mainly outside the control of the individuals concerned.

**Human rights:** Rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion, or any other status. Everyone is entitled to these rights, without discrimination. Human rights include the right to health.

**Interculturalism in health:** This is understood as the capacity to act in an environment with different cultural knowledge, beliefs and practices in regard to health, illness, life, death and other biological, social and relationship-based factors, such as spiritual and cosmic dimensions of health. It is way of organizing services to achieve respect for all cultures and recognition of cultural diversity.
**Multisectoral action:** A recognized relationship between part or parts of different sectors of society which has been formed to take action on an issue to achieve health outcomes or intermediate health outcomes in a way which is more effective, efficient or sustainable than might be achieved by the health sector acting alone.

**Multisectoral dialogue:** Aims to bring relevant stakeholders together to enhance levels of trust between different actors, share information and institutional knowledge, and to generate solutions and relevant good practices.

**Social determinants of health:** Conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities.

**Vulnerable situation:** A state in which a population or individual is unable to anticipate, cope with, resist and recover from health challenges that arise. Those in vulnerable situations are at a social, economic and/or environmental disadvantage.

**Recommended references**


