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# Gender Mainstreaming Policy & Equality Plan

## EIT Health

Munich

<https://eithealth.eu/>

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# 1. EXECUTIVE SUMMARY

The health sector is undergoing a transformative period. Access to healthcare, prevention of illness and approaches to treatment have not only followed a regional fragmentation but current practices have also been characterised by a level of difference in equity depending on protected characteristics, including gender. Furthermore, catering to the health needs of an aging population in a digitalised world requires a dedicated, diverse, inclusive and balanced workforce where expertise is pooled, best practice is shared, excellence is maximised and talent is attracted and retained. Involvement, participation and leadership of women in both the utilisation of health care as well as in its planning, delivery and administration is critical for the sustainability of the global health ecosystems. As a network of best-in-class health innovators, EIT Health is well-positioned to promote gender mainstreaming in the health sector, with both the opportunity and the dedication to elicit the necessary change for empowering women to take the driving seat in the shift away from ‘one-size-fits-all’ practices to health care delivery, while retaining and boosting their participation, employment and leadership in the broader health and innovation sectors.

EIT Health recognises that change starts within its own operations. In the EIT Health Gender Mainstreaming Policy, EIT Health describes its principles to promote gender equality and assure the participation and voice of women within EIT Health and its community, in line with the key beliefs and principles underpinning EIT Health’s vision, mission and strategic objectives as an equal opportunity employer. In the complementary Gender Equality Plan, EIT Health pledges concrete steps and actions to translate its Gender Mainstreaming Policy objectives to standard institutional practice at all levels of the organisation.

## 2. BACKGROUND AND RATIONALE

The healthcare and health innovation ecosystems are a complex interlink of different players, stakeholders, perspectives and angles, ranging from measures aimed at preventing the development of disease, through the planning and administration of the health system, the development of new treatment approaches, innovative technologies, services or solutions all the way to the cultivation of the health and innovation workforce itself. Women have traditionally had a significantly different experience when engaging with the health system both as citizens or patients, as health professionals, or as members of the broader talent pool. Dedicated effort is needed to eliminate disparities and bias, and action is necessary across the board to mainstream gender throughout all tiers of the health ecosystem, including at the level of individual actors.

### **Access to and engagement with healthcare and population health**

In a study published by Nature Communications, health data for approximately 7 million men and women in the Danish healthcare system was analysed throughout a 21-year period.<sup>1</sup> The study uncovered and shed light on the disparities in the experience of women when interacting with

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<sup>1</sup> Westergaard D, Moseley P, Sørup F, Baldi P, Brunak S. Population-wide analysis of differences in disease progression patterns in men and women. *Nat Commun.* 2019;10:666. [Accessed from: <https://www.nature.com/articles/s41467-019-08475-9>]

healthcare compared to men. Gender is therefore understood as a key determinant of healthcare access and uptake, and gendered health and risk behaviours emerge early on in adolescence, with the gap between men and women widening with age.<sup>2</sup> Indeed, the study showed that women were diagnosed later than men in more than 700 diseases.<sup>3</sup> Furthermore, among 27 EU member states, 66 % of women and 71 % of men perceive their health to be good or very good, and women score lower on reported mental well-being compared to men, regardless of family composition, age, income level, country of birth or disability.<sup>4</sup> Gender socialisation further manifests in the behaviours and perceptions of men towards their health, so that men tend to be less poised to seek diagnosis and treatment, and are accordingly less likely than women to engage with health professionals.<sup>5</sup> The study and related analyses understand that the main causes of premature mortality are ultimately gendered.

Gender inequalities and gender norms can be juxtaposed with socioeconomic, geographic and cultural factors. In the study, different population groups are demonstrated as being vulnerable to unmet health needs, and within each group, disparities for women stand out in particular.

### Medicines, technologies and services development

The increased understanding of gender inequalities in health care have not been met with supplementary research activities in assuring the development and delivery of effective gender-oriented interventions, tools and resources.<sup>6</sup> Women have been under-represented in clinical trials for the development of new drugs, medications or medical devices.<sup>7</sup> Under-representation of women means limitations in the health community's understanding of the safety, efficacy and applicability of medicines, vaccines and technologies for those who may need them, leading to variations in health outcomes. Indeed, a non-inclusive approach to health innovation yields bias, disparities, and knowledge gaps in the most effective ways to cater for the health needs of women. Work is underway on a European scale to bridge this gap, with the EU Clinical Trial Regulation No 536/2014 aiming to form a conducive environment with assurances that subjects participating in a clinical trial represent the target population groups, including gender groups, identified as the most likely end-users of the product investigated in the trial.<sup>8</sup>

### Healthcare workforce and leadership

Women comprise almost 70% of health and social care workers globally and nearly 90% of the nursing and midwifery workforce.<sup>9</sup> Yet, women only hold 25% of senior roles in the sector, earning 24% less

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<sup>2</sup> EIGE (2021) [Gender Equality Index 2021: Health \(report\)](#)

<sup>3</sup> Westergaard D, Moseley P, Sørup F, Baldi P, Brunak S. Population-wide analysis of differences in disease progression patterns in men and women. *Nat Commun.* 2019;10:666. [Accessed from: <https://www.nature.com/articles/s41467-019-08475-9>]

<sup>4</sup> EIGE (2021) [Gender Equality Index 2021: Health \(report\)](#)

<sup>5</sup> EIGE (2021) [Gender Equality Index 2021: Health \(report\)](#)

<sup>6</sup> Alcalde-Rubio L, Hernández-Aguado I, Parker LA, Bueno-Vergara E, Chilet-Rosell E. Gender disparities in clinical practice: are there any solutions? Scoping review of interventions to overcome or reduce gender bias in clinical practice. *International Journal for Equity in Health.* 2020;19:166. [Accessed from: <https://equityhealth.biomedcentral.com/articles/10.1186/s12939-020-01283-4#ref-CR20>]

<sup>7</sup> European Policy centre (EPC) (2023) [European Gender Equality Week: Isn't it time women's health and well-being were prioritised? EPC flash analysis](#)

<sup>8</sup> The European Parliament and of the Council (2014). [Regulation \(EU\) No 536/2014 of the European Parliament and of the Council of 16 April 2014 on clinical trials on medicinal products for human use, and repealing Directive 2001/20/EC.](#)

<sup>9</sup> Global Health Workforce Network's Gender Equity Hub (GEH) (2021) [Closing the Leadership Gap: Gender Equity and Leadership in the Global Health and Care Workforce – Policy Action Paper](#)

than men.<sup>10</sup> This translates to a larger pay gap than observed in other sectors.<sup>11</sup> Fewer women in leadership is part of the reason for a higher average earning for men compared to women in health, leading to lifetime loss of income for women.<sup>12</sup> In parallel, higher attrition rates have been reported for women leaders in the public sector in the US, highlighting an observed loss of women talent at senior levels in public and social organisations.<sup>13</sup> Furthermore, gender leadership gaps are observed to be driven by factors such as stereotypes, discrimination, power imbalance and privilege.<sup>14</sup> Women face challenges when seeking to attain leadership roles, particularly when confounded with other protected characteristics such as race, ethnicity, class, sexual orientation, gender identity, religion or disability. As a result, women from marginalised groups encounter even more significant hinderances to obtain leadership positions in employers within the health sector.<sup>15</sup> More generally, the availability of data on sexual identity and orientation of health and social workforce leadership is limited, leading to likely under-reporting of cases of discrimination and bias in particular for non-binary genders.<sup>16</sup> On the other hand, gender stereotypes deter men from pursuing invaluable career pathways in high need, such as nursing.<sup>17</sup>

It is without a doubt that global health is improved through the inclusion of women talent, views, perspectives, ideas and knowledge. Women in leadership roles in health can raise visibility, awareness and priority to pressing health challenges, including sexual and reproductive health that, while applying to both genders, affect them disproportionately.

## Investments and entrepreneurship

Underinvestment in women's health research, from the public, social and private sectors in comparison to conditions affecting men has been reported widely.<sup>18</sup> Public funding and grants for women-focused scientific research has been limited. This is also reflected in financing of innovation from private equity or venture capital pots, where start-ups closing the top deals have focused mostly on men's sexual and overall health.<sup>19</sup> Albeit investors' appetite to funnel investments towards start-ups that address women's health or female technology (FemTech) continues to grow as health issues disproportionately impacting women are increasingly recognised, further efforts are needed to truly close the investment gap.

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<sup>10</sup> Global Health Workforce Network's Gender Equity Hub (GEH) (2021) [Closing the Leadership Gap: Gender Equity and Leadership in the Global Health and Care Workforce – Policy Action Paper](#)

<sup>11</sup> World Health Organisation (WHO) (2023) [International Women's Day: gender inequality persists in the health workforce](#)

<sup>12</sup> Global Health Workforce Network's Gender Equity Hub (GEH) (2021) [Closing the Leadership Gap: Gender Equity and Leadership in the Global Health and Care Workforce – Policy Action Paper](#)

<sup>13</sup> McKinsey & Company (2023) [Making government an even better place for women to work](#)

<sup>14</sup> Global Health Workforce Network's Gender Equity Hub (GEH) (2021) [Closing the Leadership Gap: Gender Equity and Leadership in the Global Health and Care Workforce – Policy Action Paper](#)

<sup>15</sup> McKinsey & Company (2023) [Women in the healthcare industry: An update](#)

<sup>16</sup> Global Health Workforce Network's Gender Equity Hub (GEH) (2021) [Closing the Leadership Gap: Gender Equity and Leadership in the Global Health and Care Workforce – Policy Action Paper](#)

<sup>17</sup> Global Health Workforce Network's Gender Equity Hub (GEH) (2021) [Closing the Leadership Gap: Gender Equity and Leadership in the Global Health and Care Workforce – Policy Action Paper](#)

<sup>18</sup> World Economic Forum in collaboration with the McKinsey Health Institute (2024) [Closing the Women's Health Gap: A \\$1 Trillion Opportunity to Improve Lives and Economies – Insight Report](#)

<sup>19</sup> World Economic Forum in collaboration with the McKinsey Health Institute (2024) [Closing the Women's Health Gap: A \\$1 Trillion Opportunity to Improve Lives and Economies – Insight Report](#)

The proportion of women embarking on entrepreneurial journeys compared to men is comparatively higher in health than in some other sectors.<sup>20</sup> EIT Health observes a similar pattern in its reported data of portfolio activities, with a balanced distribution of start-ups and scale-ups created among women and men CEOs (at 50%; see Annex 1 Status Quo Analysis). Yet, figures show that across activities, significantly more start-ups and scale-ups with a male CEO are supported compared to women-led enterprises (Annex 1). Indeed, indicators measuring investment attracted in start-ups and scale-ups, and metrics for in-company investment realised following EIT Health-supported project lead time reflect sectoral trends, underscoring that while increasingly more women pursue entrepreneurship, the investment gap in enterprises with a woman CEO at the helm persist (EUR 151,505,596 cumulative investment across indicators in companies led by women versus EUR 724,566,337 in companies led by men across the Business Plan 2021-2022 reporting period; Annex 1).

## 2.1. Underlying legal and policy framework

The European Commission is committed to promoting gender equality in innovation and technology. This commitment is part of the **European Commission Gender Equality Strategy for 2020-2025**<sup>21</sup> which sets out the Commission's broader commitment to equality across all EU policies.

In addition, the EU has a well-established regulatory framework on gender equality, including binding directives, which apply widely across the labour market including the innovation and technology sector.

In **Horizon Europe**, the Commission reaffirms its commitment to gender equality in innovation, technology and research. The legal base sets gender equality as a crosscutting priority and introduces strengthened provisions.

In particular, integrating the **gender dimension into innovation, technology and research content** is a requirement. **Gender action plans** have also become part of the eligibility criteria for public bodies, research organisations and higher education establishments applying to the programme.<sup>22</sup>

Specific funding will be dedicated to gender and intersectional research, innovation and technology, developing inclusive gender equality policies in support of the new European Research Area, and **empowering women innovators**.<sup>23</sup>

The goal is to improve the European research and innovation system, create gender-equal working environments where all talents can thrive and better integrate the gender dimension in projects to improve the quality of innovation, technology and research as well as the relevance to society of the knowledge, technologies and innovations produced.

The **EIT**, as a body of the European Union and integral part of Horizon Europe, plays a vital role in supporting the EU's objectives of creating sustainable economic growth and jobs by enabling entrepreneurs and innovators to turn their best ideas into products and services for Europe. Consequently, the gender requirements in Horizon Europe are of significant importance for all EIT supported and funded activities, including the EIT Headquarter (HQ) as well as the EIT Knowledge and Innovation Communities (KICs).

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<sup>20</sup> Panteia, European Commission (2014) [Statistical Data on Women Entrepreneurs in Europe – Country Fiche](#)

<sup>21</sup> European Commission (2020) [A Union of Equality: Gender Equality Strategy 2020-2025](#)

<sup>22</sup> European Commission (2021) [Gender equality: a strengthened commitment in Horizon Europe](#)

<sup>23</sup> European Commission (2021) [Gender equality: a strengthened commitment in Horizon Europe](#)

In 2022, the EIT HQ adopted the **EIT Gender Mainstreaming Policy**.<sup>24</sup> The overarching objectives are a gender responsive portfolio (encompassing education, entrepreneurship and innovation activities) and a gender balanced representation in staff and decision-making positions. The EIT Gender Mainstreaming Policy and its overarching objectives are applicable to the HQ, the KICs as well as to EIT Alumni.

## 2.2. Rationale: why change is necessary and needed<sup>25</sup>

There are many benefits to promoting gender equality in innovation and technology which can help build the case for gender equality policies. It is widely acknowledged that promoting gender equality in organizations brings positive impact with respect to: well-being at work, compliance with domestic and EU regulations, attracting and retaining talents, economic benefits, excellence and quality, effectiveness and efficiency of innovations and technology and as a leverage for organisational change.

### Creating better work environments

The EIT KICs are work environments in which all staff should be able to freely develop their skills and fulfil their expectations. Since these work environments are made up of women and men, adopting a gender sensitive perspective in this regard is sensible.

Beyond compliance with existing rules, preventing verbal, psychological and physical gender-based violence and offences is a basic requirement for a safe, gender-friendly work environment.

Enabling work-life balance in the organisation, distribution and planning of work, brings benefits for both sexes. These benefits are relevant both to the individuals, in terms of well-being and motivation, and to the organisation, in terms of effectiveness. Besides, better work environments contribute to retaining and attracting talents. They are part of a more sustainable management of human resources.

### Attracting and retaining talents

Increasing Europe's ability to innovate relies on human capital. Finding and training qualified and creative people is costly, and bringing them up to their full potential takes time. As business, education and research organisations are involved in an intense competition for talent, it is necessary to address the full pool of talents, including women – even when they are under-represented.

It also requires retaining staff over time and giving them the opportunity to achieve their personal and professional objectives and potential. It has been shown that women encounter barriers that keep them in lower positions in the hierarchy and militate against women's access to top decision-making and managerial positions in an organization (so called "sticky floor" and "glass ceiling" phenomena). This can lead to a "leaky pipeline" where women are more likely to abandon their career in an organisation and has a considerable impact: a loss of knowledge, an organisational cost and a reduced and limited perspective in the organisation. Attracting and retaining female staff in a knowledge-based economy can only be reached if the full spectrum of gender bias and inequalities is addressed.

### Economic benefits

The business case for gender equality, diversity, and inclusion is strong and growing stronger. Evidence points to companies being more successful if they are able to harness the innovation and creativity of

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<sup>24</sup> EIT (2022) [EIT Gender Equality Policy 2022-2027](#)

<sup>25</sup> This section is based on EIGE (2016) [Gender Equality in Academia and Research. GEAR Tool](#) and adapted to fit the reality and context of the EIT KICs.

women. As evidenced by multiple recent studies<sup>26</sup>, women's upwards advancement in the private sector brings benefits in terms of business economic results, as companies with higher gender diversity (composition of top management and boards) are more likely to have higher financial returns compared to national industry medians in their sector.

While social justice, legal compliance, or maintaining industry standard employee environment protocols is typically the initial impetus, many successful companies regard gender and diversity as a source of competitive advantage, and specifically as a key enabler of growth.<sup>27</sup>

### **Excellence and quality**

The quest for excellence and quality has become a major issue for business, education and research organisations. It is driven by an intense competition for skills, funding and innovations. Bringing a gender dimension in innovation and technology improves the overall quality of design, protocols and outputs in an ample variety of fields.

As innovation and technology are increasingly framed as working for/with society, reflecting the diversity of final users from the early research stage has become an absolute must.

'Gender blindness' (understood as the lack of consideration for gender-related aspects) often goes with neglecting other relevant social or experiential parameters. Challenging this blindness, on the contrary, creates awareness for a broader set of variables than the sole sex and/or gender.

While 'excellence' is often cited as reason to resist gendering business, education and research organisations, in reality it is the other way round: taking into account the gender dimension is vital for the (societal) relevance and quality of innovation and technology. Integrating sex and gender-based analysis is a matter of producing excellent innovations and technology to the benefit of all European citizens.<sup>28</sup>

### **Effectiveness and efficiency**

Building gender diverse teams helps to secure a broader set of viewpoints, contributing to enhanced creativity and innovation – and thus also enhance the quality of innovation and technology. Such teams promote inclusiveness, experiment more and share and create knowledge.

In addition, teams with a balanced number of women and men tend to perform better and exhibit superior dynamics and productivity. Ensuring diversity in working teams (in terms of gender, race, nationalities, age, etc.) helps creating an inclusive organisation, which improves its reputation, and contributes to retaining and attracting (new) talents.

### **Compliance with domestic and EU regulations**

All KICs are bound to respect legal obligations related to discrimination and gender equality. Even if these may vary across countries, there is a cost for breaching existing regulations. This cost can consist in fines, legal prosecutions and liability, damaged reputation, loss of attractiveness or internal conflicts.

Complying with the rules requires resources and know-how, which are often more easily secured when a gender mainstreaming policy is in place. Investing in gender equality (for instance, by collecting sex-

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<sup>26</sup> McKinsey & Company (2018) [Delivering through Diversity](#); McKinsey & Company (2015) [Diversity Matters](#)

<sup>27</sup> McKinsey & Company (2018) [Delivering through Diversity](#)

<sup>28</sup> European Commission (2020) [Gendered Innovations 2: How Inclusive Analysis Contributes to Research and Innovation](#)



disaggregated data or establishing monitoring instruments) helps organisations to comply with legal provisions more comprehensively and proactively.

### **A leverage for organisational change**

The changes needed to achieve gender equality also bring benefits in terms of transparency and accountability, decision-making, career management and evaluation procedures. These benefit all staff as well as the organisation as a whole. Last but not least, addressing gender (in)equality can be part of a broader strategic process aimed at enhancing the competitive edge and (inter)national profile.

## 2.3. Key concepts

### **Gender mainstreaming**

Gender Mainstreaming is the (re)organisation, improvement, development and evaluation of policy processes, so that a gender equality perspective is incorporated into all policies at all levels and all stages, by the actors normally involved in policymaking<sup>29</sup>.

Mainstreaming a gender perspective is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in all areas and at all levels. It is a way to make women's as well as men's concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that women and men benefit equally, and inequality is not perpetuated. The ultimate goal is to achieve gender equality.

Gender mainstreaming is a complementary strategy and not a substitute for targeted, women-centred policies and programmes, gender equality legislation, institutional mechanisms for gender equality, and specific interventions that aim to close the gender gap.<sup>30</sup>

### **Gender equality**

Equality does not mean that women and men will become the same but that women's and men's rights, responsibilities and opportunities will not depend on whether they are born female or male. Gender equality implies that the interests, needs and priorities of both women and men are taken into consideration, thereby recognising the diversity of different groups of women and men. Gender equality is not a women's issue but should concern and fully engage men as well as women. Equality between women and men is seen both as a human rights issue and as a precondition for, and indicator of, sustainable people-centred development.<sup>31</sup>

### **Gender balance**

In a scenario of gender equality, women and men are expected to participate proportionally to their share of the population. In many areas, however, women participate less than what would be expected based on the sex distribution in the population (underrepresentation of women), while men participate more than expected (overrepresentation of men).<sup>32</sup>

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<sup>29</sup> Council of Europe (1998) [Gender Mainstreaming: Conceptual Framework, Methodology and Presentation of Good Practices. Final Report of Activities of the Group of Specialists on Mainstreaming](#)

<sup>30</sup> EIGE (2021) [Gender Equality Glossary & Thesaurus](#)

<sup>31</sup> EIGE (2021) [Gender Equality Glossary & Thesaurus](#)

<sup>32</sup> EIGE (2021) [Gender Equality Glossary & Thesaurus](#)

## Terminology

Transgender, non-binary and gender-fluid communities experience disparities in engaging with healthcare. This document promotes the need for future research and action to address health issues impacting these communities. The document also highlights the significant differences in the experience of women when accessing or interacting with health services based on protected characteristics such as race, ethnicity, socioeconomic status, disability, age and sexual orientation, as well as when forming part of the workforce. The document acknowledges that not all individuals who identify as women are born biologically female.

## 2.4. EIT Health position

EIT Health has been an attractive employer for diverse and balanced talent, with existing workflows, processes and policies already pioneered in the organisation, assuring a set of best-practices to continue building on with further gender mainstreaming efforts.

EIT Health's diversity and inclusion policy and practice recognise that diversity in the EIT Health workforce contributes to its business success and benefits employees, customers and shareholders. Leveraging diversity in the workplace delivers a strong competitive advantage. The aim is to ensure that business policies, procedures and behaviours promote diversity and inclusion and create an environment where individual differences are valued. EIT Health believes that all deserve the opportunity to work in a safe, supportive and inclusive environment where full potential can be achieved. Therefore, the organisation encourages all its members of staff to address issues that might be inhibiting this in the workplace. This policy applies to all members of EIT Health community, including its partners, suppliers, contractors and clients. Furthermore, this policy applies to all processes relating to employment and training. All employees are responsible for the promotion and advancement of this policy, to build a culture that values meritocracy, openness, fairness and transparency. EIT Health will not discriminate on grounds such as, sex or gender, including sex or gender reassignment.

To prepare the present Gender Mainstreaming Policy, and draw up a corresponding Gender Equality Plan, EIT Health has undertaken a Status Quo Analysis, mapping current best-practices in the organisation and understanding potential areas for further focus. The Status Quo Analysis evaluates both internal, organisational and Human Resources (HR)-related measures, as well as specific metrics linked to projects, activities and initiatives within the EIT Health portfolio, understanding initiatives already underway to mainstream the participation of women in both the organisation and its activities portfolio, drawing lessons learnt from identified gap areas and putting in motion approaches to bridge these gaps. Indeed, the Status Quo Analysis brings to the forefront key observations on the under-representation of women in start-up or scale-up CEO functions, the investment gap into women-led enterprises, or the sustained lack of enrolment of women into clinical trials, among other themes. On the other hand, the analysis also shows existing initiatives that place EIT Health at the forefront of gender inclusive ways of working and equitable operational practices, with a high proportion of internal positions filled by women talent, including in leadership roles, as well as with targeted community action across its education, entrepreneurship and innovation activity lines, such as Summer Schools or Bootcamps designed specifically for women learners and entrepreneurs.

The Status Quo Analysis (Annex 1) therefore paints a comprehensive picture of the EIT Health state-of-play, paving the way for the establishment of this EIT Health Gender Mainstreaming Policy and EIT Health's Gender Equality Plan (Annex 2).

## 3. GOALS, OBJECTIVES AND APPROACH

As an equal opportunities employer, it is in EIT Health's identity to nurture and maintain a diverse talent force. Indeed, EIT Health aims to assure the development of its employee base through equal terms for recruitment, opportunities for flexible work both in terms of time and location, equitable avenues for internal career transfers and unbiased professional growth. EIT Health works to transfer these values to its regional Co-Location Centres (CLCs). As a prominent node in the health ecosystem, EIT Health is well-positioned to raise awareness for the importance of gender mainstreaming in the wider health sector not only in terms of employment opportunities, growth potential to leadership roles and parity in remuneration, but also in terms of advocating for the critical necessity to move away from previous practices in designing healthcare solutions predominantly with male participants towards a more inclusive approach of co-producing innovation through the involvement of both women and men. In this way, EIT Health is well-situated to drive the policy debate and attract the focus onto improving health outcomes through gender mainstreaming in Europe and beyond.

Change and good practice starts at home. Upkeeping current positive practice activities while addressing emerging needs to assure gender parity, EIT Health is committed to undertake the following strategic intervention objectives.

### 3.1. Strengthening the lead role of the KIC in the community

EIT Health is a vast community of approximately 130 world-class Partner organisations, working across borders to connect the three worlds of business, research and education. Through this 'knowledge triangle' meeting point, EIT Health strives to overcome obstacles to innovation to improve healthcare delivery in Europe and making life-changing solutions possible. By working together, EIT Health can remove barriers across borders to create a more resilient and dynamic European healthcare system, inclusive and sensitive to the needs of local populations. Indeed, European citizens and patients sit at the centre of EIT Health. EIT Health engages its community at every stage; raising awareness, sharing knowledge and creating the tools, treatment and breakthrough solutions which will promote healthy living and active ageing regardless of gender and cofounding variables of age, education, ethnicity, economic status, sexual orientation, disability or environmental risk. By building health enterprises and bringing innovative products and services to market, EIT Health can create new jobs to grow and strengthen a sustainable European economy through empowering and encouraging women to enter previously and traditionally male-dominated occupations, and vice versa.

EIT Health will strengthen its community leadership position through, among others (full set of actions in Annex 2 Gender Equality Plan):

- Finding and actively engage with local CLC-appropriate gender equality networks
- Continuing to expand the activities of the 'FutureHealthHERo' initiative under the WorkInHealth Foundation ecosystem and the EIT Health Innovators Community
- Devising an EIT Health gender equality manifesto to support gender action across the EIT Health network

## 3.2. Building capacity and raising awareness in the internal organisation

EIT Health has undertaken efforts to raise awareness among its staff on the importance of gender mainstreaming and gender equality for the well-being and sustainability of its workforce as a whole. Line managers routinely discuss with their reports work underway and forthcoming priorities to assure manageable workloads and a suitable work-life balance that fulfils the expectations of each individual employee. Moreover, EIT Health has adopted flexible working time arrangements, opportunities for remote work, as well as parental leave policies in line with common organisational practice and with national legislation among its Co-Location Centre (CLC) network. Through these regular practices, EIT Health has built capacity to accommodate for individual variations in preferences and approaches to a work pattern, allowing for a maintained diversity in its workforce and making provisions that accommodate for the needs of its talent base. On the other hand, delivering internal training on topics linked to gender mainstreaming have not been practiced commonly in the organisation at the time of the development of this policy documentation and supporting status quo analysis (Annex 1). EIT Health recognises the need for further action accordingly, and will begin implementing gender mainstreaming training for internal staff, including reporting on the percentage (%) of staff and management trained per level of seniority, as well as on the type of training undertaken.

To continue building the momentum, EIT Health accordingly plans to implement awareness campaigns within the organisation, and will set out to put in place among others (full set of actions in Annex 2 Gender Equality Plan):

- Internal workshop(s) or webinar(s) to raise awareness of Gender Mainstreaming Policy and GEP provisions, to be organised yearly in Q2 2024-2026 for all EIT Health staff at all profile levels
- Gender and implicit bias training for all EIT Health staff, including EIT Health leadership, yearly across 2024-2026

## 3.3. Achieving a gender balanced representation in staff and management, including a human resources policy that supports this goal

EIT Health's recruitment policy and practice aims to achieve a gender balanced representation in staff and management. In line with the recruitment policy, EIT Health is committed to providing a work environment that is free from harassment and discrimination. All recruitment and selection procedures and decisions will reflect EIT Health's commitment to providing equal opportunity by assessing all potential candidates according to their skills, knowledge, qualifications and capabilities. No regard is given to the factors such as sex, race, colour, ethnic or social origin, genetic features, language, religion or belief, political or any other opinion, membership of a national minority, property, birth, disability, age or sexual orientation. The Recruitment Policy is supported by other policies, including Diversity and inclusion policy, Bullying and harassment policy, Code of conduct/Conflict of interest and Disciplinary policy.

## 3.4. Promote gender equality and women's participation in education

EIT Health recognises the need to mainstream the participation of women in activities under its education portfolio, with respect to both day-to-day programme management, processes in place to select activities and projects for funding or adoption into the portfolio, as well as the participation of women in the projects themselves. This is done, among others, through concrete education activities run by EIT Health or its Partners, through assuring a gender-diverse selection and evaluation panels, or through the collection of a set of gender metrics under KPIs, including the gender of students enrolled or graduated from EIT-labelled learning programmes who create start-up companies. *Annex 1: Status Quo Analysis of the KIC* outlines a set of good practices implemented in EIT Health to promote gender equality and the participation of women in education, juxtaposed with areas for further growth.

EIT Health will promote gender equality and women's participation in education through, among others (full set of actions in Annex 2 Gender Equality Plan):

- Increasing the involvement of female students in EIT Health-supported education activities
- Scoping the continuation of existing best-practice education initiatives such as the Top Female Founders Summer School
- Monitoring participation of women in applications and selected proposals and assuring focus on gender equality in EIT Health-supported activities through integration into EIT Health calls for proposal

### 3.5. Promote gender equality and women's participation in entrepreneurship

EIT Health voices the critical need for enabling opportunities for aspiring women entrepreneurs to bring their innovation, technology or solution to the healthcare market, while creating an inclusive environment of high expertise that can serve as the conduit for successful entrepreneurial journeys. To achieve this, targeted efforts of EIT Health include maintaining a balanced gender representation in expert evaluator panels assessing entrepreneurship proposals, start-ups applicants or collaborative consortia applying for EIT Health funding, the collection of qualitative and quantitative data on indicators such as the gender of CEOs or owners of start-ups in the EIT Health entrepreneurship portfolio that attract private or public capital, as well as the launch of concrete programmes focused on women entrepreneurship. *Annex 1: Status Quo Analysis of the KIC* outlines a set of good practices implemented in EIT Health to promote gender equality and the participation of women in entrepreneurship, alongside opportunities for further action.

EIT Health will promote gender equality and women's participation in entrepreneurship through, among others (full set of actions in Annex 2 Gender Equality Plan):

- Active outreach to and recruitment of female entrepreneurs into EIT Health programmes
- Increasing awareness of the investment gap between companies led by women compared to men-led enterprises and undertaking action to help bridge this gap
- Showcasing the benefit of women-led investment and the importance of diversity in investment decisions in support of emerging businesses

### 3.6. Promote gender equality and women's participation in innovation

EIT Health celebrates innovation envisaged, built, driven, supported or evaluated by women. Particularly in the health sector, innovative services, technologies or solutions developed by women, for women, or both, ultimately yields a better care offer, experience and improvement outcomes particularly in female citizen, health professional, or patient groups. In support of this, EIT Health mandates a balanced gender representation in expert evaluator panels assessing innovation proposals and innovation consortia applying for EIT Health funding. Further, EIT Health collects a list of KPI metrics such as the number of women taking up jobs created in new businesses as a direct result of EIT Health portfolio projects. Finally, EIT Health's innovation portfolio contains a number of funded and supported activities focusing on women's health. *Annex 1: Status Quo Analysis of the KIC* outlines a set of good practices implemented in EIT Health to promote gender equality and the participation of women in innovation, while identifying gap areas for further attention and focus.

EIT Health will promote gender equality and women's participation in innovation through, among others (full set of actions in Annex 2 Gender Equality Plan):

- Increasing awareness of the historical under-representation of women in innovation processes in health, such as clinical trials for the validation of new solutions
- Reporting on projects addressing health issues or conditions that disproportionately impact women
- Including requirements for applicant innovation project consortia to describe how the gender dimension will be incorporated into the design and implementation of their corresponding project

## 4. ORGANISATIONAL ARRANGEMENTS FOR IMPLEMENTATION

To put the Gender Mainstreaming Policy into practice, EIT Health has devised and adopted a Gender Equality Plan (GEP), spanning a three-year period between 2023-2025. While EIT Health's organisational culture has been a vanguard for balanced gender representation and equality among its staff, dedicated attention, sustained supervision and safeguarding of current good practice will help to future-proof the organisation as an equal opportunity employer. The GEP aims to embed gender mainstreaming into all tiers of EIT Health's operational and management activities accordingly.

The establishment of the GEP was informed by the conduction of a status quo analysis of the EIT Health KIC. The analysis served as an in-depth impact assessment and audit of procedures to identify gender bias, thereby setting the current baseline for gender equality on which to build further activities. In this phase, sex-disaggregated data has been collected and presented to take stock of existing good practice and identify potential areas for further improvement. Analytics have considered the split of staff among

all layers of the organisation, from contributors to leadership roles (individual contributors, senior manager or programme head, director, Management Board and Supervisory Board-level). In a following planning phase, EIT Health has set objectives, targets, actions and measures to remedy identified shortcomings, attributing resource and responsibilities, and securing full-spectrum buy-in across the organisation. EIT Health will subsequently gradually move to implement these actions and monitor and report progress, so that results can be optimised and the GEP can be course-corrected and refined in future iterations. This methodology will assure the GEP's longer-term suitability under a continuously evolving organisation.

## 4.1. 3-Year action plan

The 3-year GEP 2024-2026 (Annex 2) aims to maintain existing good practice within EIT Health both in ensuring an equal opportunity and representation of female staff members across the organisation, as well as in promoting the participation of women in Education, Entrepreneurship and Innovation. The GEP will see specific measures implemented across six themes:

- 1) Strengthening the lead role of EIT Health on gender equality and women's participation in the health ecosystem and community;
- 2) Building capacity and raising awareness in the internal organisation on gender equality issues at the workplace as well as in innovation, technology, entrepreneurship, education and research
- 3) Achieving a gender balanced representation in staff and management
- 4) Education: promote gender equality and women's participation
- 5) Entrepreneurship: promote gender equality and women's participation
- 6) Innovation: promote gender equality and women's participation

Implementation of the GEP will be assured, among others, through the appointment of a Gender Mainstreaming Coordinator, whose work will be aided by a relevant supporting cross-unit EIT Health internal 'people committee'. A dedicated working group has already been active in the development of this EIT Health Gender Mainstreaming Policy and Action Plan.

## 4.2. Monitoring and evaluation

Addressing the six themes with dedicated measures at both operational and technical level requires embedding robust monitoring and evaluation approaches in the GEP and its supporting structures. Taking stock of progress, course-correcting and undertaking the appropriate retrospective assessment iteratively and regularly will enable continued analysis of the successful implementation of key GEP provisions.

The GEP outlines a set of desired end-results, corresponding indicators to measure success, responsible owners and timelines to implementation against each committed action. The GEP accordingly plans for action in a measurable and quantifiable manner, with clear ownership and anticipation for reporting of outcomes at pre-defined timelines, as supported and mandated from EIT Health leadership.

Monitoring and evaluation will take place through a step-wise and iterative approach. The Gender Mainstreaming Coordinator, together with the relevant supporting EIT Health people committee, will assess progress towards the set of actions defined against each six thematic area every six months, ensuring their delivery against the indicated timelines and measurement metrics. An implementation progress brief will be relayed to the EIT Health Management Board, permitting rapid intervention should the need arise. Additionally, the KPI data presented in the Status Quo Analysis (Annex 1) will be revisited



annually during the operational and performance reporting periods of each year 2024-2026. Changes in the data will be presented to the people committee and EIT Health Management Board for discussion and assessment of next steps, including fine-tuning relevant GEP actions to elicit change where necessary. Furthermore, EIT Health will report to the EIT on specific gender-related Deliverables, including ‘Report on strategies and actions/measures implemented to ensure gender balance in KIC’s innovation, business creation, education programmes, including in RIS countries, and results of these actions. Report including information on percentage of KIC staff, disaggregated by level, and by gender, trained on gender equality’. This ensures an additional layer of accountability in streamlining gender across EIT Health programmes, activities and operations. Finally, a public retrospective report on the GEP will be made available at the half-way (mid-2025) and final implementation (end-2026) points, informing the next 3-year plan iteration for subsequent years.

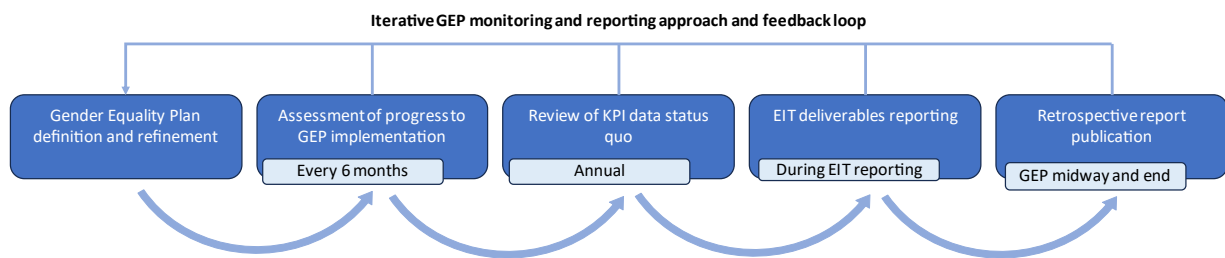


Figure 1: Monitoring and evaluation methodology of the implementation of the EIT Health GEP

### 4.3. Responsibilities

Successful realisation of gender mainstreaming policy requires consistent and active participation by EIT Health staff at all levels. This includes effective linkages across all departments and functional units, assuring an understanding of own responsibilities for executing the GEP, while establishing connections for collaboration, dissemination of good practice and recurrent communication and data flow on progress to GEP implementation. Leadership teams will support the Gender Mainstreaming Coordinator and relevant EIT Health people committee in directly advocating for delivery against the Gender Mainstreaming Policy and its corresponding GEP objectives, and individual members of the organisation will be supported to uphold the core values of gender equality to co-facilitate a gender-minded work environment. The following overview describes the role of EIT Health’s workforce in upholding the Gender Mainstreaming Policy and GEP:

#### The role of the EIT Health Supervisory Board

- High-level oversight, including public support, for the implementation of EIT Health governance structures in line with gender equality principles
- Offer of appropriate escalation routes for non-compliance with EIT Health governance

#### The role of the EIT Health Management Board

- Oversight, including public support, for the implementation of EIT Health GEP provisions, including within the EIT Health governance structures and framework
- Nominate and appoint the Gender Mainstreaming Coordinator and the relevant supporting internal people committee
- Approval of GEP provisions and accountability for the execution of established actions, including appropriate recruitment and HR processes



- Monitoring of progress towards EIT Health GEP objectives together with the Gender Mainstreaming Coordinator and supporting people committee, including review and approval of the relevant KPI metrics and progress reports, and request for revisions to the Gender Mainstreaming Policy to assure it remains fit-for-purpose
- Unlocking human and financial resource where needed to enable the implementation of the GEP
- Commission gender equality training for all staff and undertake said training
- Offer of appropriate escalation routes for non-compliance with GEP and Gender Mainstreaming Policy provisions, EIT Health practices and organisational cultural values, including in cases of HR violations, misbehaviour, bias or discrimination

### **The role of EIT Health senior managers and functional leadership roles**

- Lead by example for both direct reports and the wider organisation
- Monitor day-to-day implementation of the GEP and the Gender Mainstreaming Policy
- Collect, aggregate and report data to support monitoring of GEP metrics and indicators as necessary
- Offer opportunities and training possibilities for staff keen to become ambassadors for gender mainstreaming in the organisation
- Undertake gender equality training
- Create a psychologically safe environment for all workers
- Follow established HR policies, recruitment processes and operating procedures, and offer appropriate escalation routes in cases of non-compliance

### **The role of non-managerial staff, including operational and technical teams**

- Champion GEP and Gender Mainstreaming Policy provisions in all aspects of day-to-day role
- Consider the impact of own contributions, work and behaviours on others
- Collect and report data to support monitoring of GEP metrics and indicators as necessary, including from individual portfolio activities
- Devise and propose operational workflows that uphold EIT Health cultural values, minimise and eliminate gender bias and promote gender equality
- Undertake gender equality training
- Provide practical input, feedback and recommendations for the continued implementation and refinement of the GEP and the Gender Mainstreaming Policy

# ANNEX 1 – STATUS QUO ANALYSIS OF THE EIT HEALTH KIC

The following section presents an analysis of current best practices, policies, measures and initiatives already in place in relation to gender equality within the EIT Health Knowledge and Innovation Community (KIC). In this phase, sex-disaggregated data has been collected, presented and analysed on both the level of organisational arrangements (including HR) and on the activities portfolio. The status quo analysis thereby showcases good practice and highlights potential areas for further improvement.

EIT Health is proud to already be at the forefront of gender inclusive ways of working and equitable operational practices, including through existing efforts, organisational and sectoral awareness outlined in the EIT Health Gender Mainstreaming Policy. The status quo analysis captures areas of excellence already observed in the KIC, reports on Key Performance Indicator (KPI) data already collected across Education, Entrepreneurship and Innovation activities, while shedding light on opportunities to further mainstream the participation and leadership of women in the workplace and in EIT Health programmes.

The status quo analysis is both informed as well as limited by the availability, completeness and quality of the reported data. Insights outlined are to be interpreted accordingly in this context. Nevertheless, the status quo analysis paves way for the establishment of the EIT Health Gender Equality Plan (GEP) as a set of strategic goals, objectives and recommendations for assuring and future-proofing the continued positioning of EIT Health as an equal opportunity employer and lead player.

## Methodology

The status quo analysis was conducted through the participation of a cross-functional internal working group composed of EIT Health staff representing different units and level of seniority with the following profiles:

Working group profile	Gender of representative
Partnership Management Office	W
Human Resources (HR)	W
Governance & Compliance	W
WorkInHealth – TalenForce	W
Project Management Office	W
New Opportunities & Business Development unit	M

*Figure 2: The internal Gender Mainstreaming Policy, Status Quo Analysis and Gender Equality Plan development working group and its composition*

To undertake the status quo analysis, the working group first facilitated desk-based research to draw a picture of broader gender equality challenges in the health sector. This was supplemented by a mapping of existing internal policies on recruitment, diversity and inclusion, or bullying and harassment, among

others. The sectoral analysis, together with the consolidation of existing policies served as the basis for the Gender Mainstreaming Policy, and allowed for the identification of areas for further investigation. Following best-practice shared among the EIT and its KICs, and drawing on the outlines of the Gender Mainstreaming Policy, six thematic areas have been defined for detailed analytics:

- 1) Strengthening the lead role of the KIC in the community
- 2) Building capacity and raising awareness in the internal organisation
- 3) Achieving a gender balanced representation in staff and management, including a human resources policy that supports this goal
- 4) Promote gender equality and women's participation in education
- 5) Promote gender equality and women's participation in entrepreneurship
- 6) Promote gender equality and women's participation in innovation

For thematic area 3, analytics have considered the split of staff among all layers of the organisation, from contributors to leadership roles (individual contributors, senior manager or programme head, director, Management Board and Supervisory Board-level). For areas 1, 2, 4, 5 and 6, the working group captured existing Key Performance Indicator (KPI) data from EIT Health programmes, as reported by Education, Entrepreneurship and Business Creation activities in the programme portfolio for the multi-annual Business Plan reporting period 2021-2022, and managed by EIT Health's Project Management Office (PMO). This dataset provided the most recent snapshot of the status quo available at the time of the analysis. Finally, additional insights were gathered through ad-hoc one-on-one consultation with internal colleagues overseeing specific activities focused on mainstreaming the participation of women in EIT Health or its programmes. Together, the reflections formulated from the status quo analysis and the direction defined in the Gender Mainstreaming Policy informed the development of the Gender Equality Plan for EIT Health (Annex 2).

The following sections present the findings of the status quo analysis, including detailed interrogation of organisational and operational arrangements and KPIs data from the 2021-2022 activities portfolio.

## 1.1. LEAD ROLE OF THE KIC

EIT Health's belief in the promotion of women in leadership is prominent. EIT Health observes a balanced representation of women in the Management Board (67% at 4 out of 6 members and 33% at 1 out of 3 observers, 56% across members and observers), as well as a high participation of women in managerial (67% across seniority levels cumulatively, as presented in Annex 1 Section 1.3) and non-management contributory functions at the time of the status quo analysis. EIT Health's Supervisory Board was chaired by a woman up until September 2023. Streamlining woman participation further receives the strong commitment of all levels of the organisation accordingly, enabling EIT Health to advocate for the role of women in the health sector. EIT Health rolled-out its Diversity & inclusion Policy in 2021, hand-in-hand with its Bullying and Harassment Policy, and made it available to staff internally on the EIT Health Compass intranet page for Human Resources. Its Recruitment Policy was reviewed, revised, updated and made available to staff on Compass in 2022. As a result of with these established workflows, some examples of existing EIT Health best-practices are summarised below:

### Recruitment

EIT Health ensures it targets candidates whose personal values match those of EIT Health. EIT Health recognises the value of recruiting and selecting employees with different backgrounds, knowledge and experience. Recruitment and selection processes identify candidates with the most suitable knowledge, skills, experience and personal values and as an equal opportunity employer, the recruitment processes are designed to promote equality.

## **On-boarding**

EIT Health seeks to ensure all new hires fully understand and support its approach to Diversity and Inclusion.

## **Remuneration**

EIT Health's role grading and remuneration review processes actively consider equity in both grading and remuneration. EIT Health will continue to develop strategies and initiatives to resolve any identified gaps.

## **Promotion and Succession planning**

By actively promoting and advocating internal vacancies as appropriate, EIT Health looks to encourage internal applications from any member of staff with the required competencies and experiences, independently from any irrelevant criteria.

## **Career development and performance**

Employees are encouraged to develop and progress their careers through opportunities that build capability and all employees are supported to participate in career development conversations. Available opportunities for promotion and transfer are advertised to all employees to enable them to apply for roles and develop their career path. EIT Health encourages and rewards excellence, and performance is measured based on agreed goals to promote equity and remove bias.

## **Gender diversity**

Gender equality at all levels of the organization is a key component of the EIT Health Diversity and Inclusion Strategy. Increasing the representation of women at senior levels of management will remain one of the strategic priorities on an ongoing basis.

## **Communication**

EIT Health regularly shares details of its operational performance and plans for the future with employees. To ensure employees are included in the direction of the business and in the decisions that underpin the organisation, regular employee meetings are set up and employees can question supervisors.

## **Management Training**

EIT Health acknowledges that Managers are role models within the company and are important advocates for Diversity and Inclusion. Therefore, Managers will participate in gender equality, diversity, inclusion and implicit bias trainings with yearly refresher sessions. To implement the Gender Mainstreaming Policy and the Gender Equality Plan, these trainings will integrate in them considerations for the gender equality measures committed.

## **Exit interviews**

EIT Health will use the opportunity of exit interviews to understand whether leavers have felt excluded or held back in any way.

## **Development**

EIT Health will create and roll-out gender equality, diversity, inclusion and implicit bias trainings, which will be shared with all members of staff. The training will be made available via recording as needed for newly joining employees whose onboarding timeframes do not align with the training cycle, assuring that all can participate and benefit. Further development interventions, either on team or individual level as required, will ensure that all members of staff are equipped with the right mindset, toolset and skill-set to be effective in their role.

### Best-practice examples in current EIT Health initiatives

Beyond recruitment and inclusion policies, EIT Health advocates for gender equality in its business. The following outlines a set of example measures and initiatives to mainstream the participation of women in both the EIT Health organisation, as well as its activities portfolio, eliciting a broader sectoral impact:

#### Communication

- Gender balanced speaker lists at internal and external events and panels (e.g. EIT Health Summit or Matchmakings)
- Role models and representation of women leaders on external and internal communications, newsletters, websites and intranet
- Gender-sensitive language used in marketing, communication and recruitment
- Presence of FutureHealthHERo with booth at the EIT Health Career pathway event in Barcelona in November 2023

#### Dissemination & network

- 2500+ Alumni community with high diversity, 54 countries, 54% women
- Collaboration with [European Leadership Academy Summer School 2023](#) (Valencia, Spain), as a prominent platform of European women leadership networks
- Launch of the 'FutureHealthHERo' campaign by the EIT Health [WorkInHealth Foundation](#), designed to attract talent from outside the healthcare sector, showcase career opportunities, foster a community of emerging and future leaders in healthcare, create a network of mentorship, support and collaboration, and cultivate a movement with inspirational content, giving voice to younger generations with powerful storytelling and symbolic expressions such as hoodie messages

#### Organisation

- Equal opportunity policies
- Concrete examples of support for aspiring leaders among staff, including cases where promotion to managerial position has been appointed very shortly before departure for maternity leave, demonstrating equal opportunity to progress while building a family

#### Education

EIT Health [Top Female Founders Summer School](#), aimed at students or future entrepreneurs with an innovative idea to tackle healthcare challenges from background in engineering, medicine, business or life sciences, receiving mentoring from industry experts in big pharma, academia and healthcare

#### Entrepreneurship

- Supporting the 'Girls Go Circular' Cross-EIT KIC initiative aimed at equipping 40,000 schoolgirls aged 14-19 across Europe with digital and entrepreneurial skills by 2027, including through showcasing career opportunities in healthcare
- EIT Health Women Entrepreneurship Bootcamp, women (co)led start-ups through intensive business and product training, expert mentors to uncover ambitions for success and shape a compelling value proposition

#### Innovation

Facilitated, through support of EIT Grant and co-funding, collaborative project consortia with a focus on women's health, or clinical conditions disproportionately impacting women:

- SUOG** – 'Smart Ultrasound in Obstetrics and Gynaecology' (artificial intelligence (AI) to provide image recognition and intelligent guidance)
- ADVANCE** – 'Advancing and evaluating a breakthrough diagnostic intervention for acute urinary tract infection' (test to detect UTI in 30 minutes)
- BRIGHT** – 'Be RIGHT with breast cancer risk management' (genetics-based test for breast cancer risk, to identify those who would benefit from targeted breast cancer screening)

Figure 3: Existing gender mainstreaming initiatives and best-practices in EIT Health organisation and its activities portfolio

### Further areas of growth in the lead role of the KIC

EIT Health's strategy is steered by an already diverse and gender-balanced Management Board, with a high representation of woman leaders at functional leadership roles and among non-managerial staff (Annex 1 Section 1.3). Nevertheless, further efforts will help to identify, address and overcome any disparities in the composition of decision-making bodies of the organisation, as well as in the gender balance of implementing teams. For instance, while the EIT Health Supervisory Board has previously been chaired by a woman senior leader, the majority of current Representatives are men. Similarly, senior leadership positions within Co-Location Centres (CLCs) are predominantly held by men. To address this, EIT Health will consider opportunities to attract woman candidates to replace outgoing members and fill emerging Supervisory Board or CLC management vacancies moving forward. Indeed, gender diversity has been specifically addressed during independent Supervisory Board members recruitment. Further, newly composing CLC Local Supervisory Boards will have a target of a minimum of one woman representative out of three members.

## 1.2. CAPACITY AND AWARENESS RAISING

Recognising that change starts from building awareness, EIT Health has previously undertaken work to attract attention to gender topics both internally and within its network. In Autumn 2022, EIT Health has undertaken an internal "In Conversation" employee workshop to celebrate the current work environment and climate, while identifying and discussing potential improvements to company culture in a safe and open manner. With buy-in from leadership teams, the workshop focused on topics such as trust, collaboration, caring, personal and collective growth and sustainability. Discussion panels were composed of a mixture of women and men representatives from all parts of the organisation both in management and in non-managerial roles. Informal discussions, with pledges from EIT Health management, have contributed to the co-refinement of EIT Health values together with all parts of the organisation.

Additionally, an internal working committee has been convened for the development of EIT Health's Gender Mainstreaming Policy and GEP, with diverse and gender inclusive representation from EIT Health top management, Human Resources, gender champions and operational staff, and with allocated time to undertake a robust assessment of the status quo and to co-develop the way forward.

Nevertheless, further training can support awareness raising for critical issues. EIT Health will make available resources and regular training to understand and implement avenues for promoting gender equality, to facilitate gender-sensitive communication, and to build competence in gender mainstreaming among staff. Unconscious bias training will be scoped to all those involved in the recruitment processes and, where possible, interview or selection panels are assured to include both women and men. EIT Health will scope the roll-out of internal gender equality and mainstreaming workshops to enable staff to learn more about topics of gender equality and become allies to mainstreaming efforts.

## 1.3. REPRESENTATION IN STAFF AND MANAGEMENT

EIT Health is proud to be underpinned by a diverse talent force across all parts of the organisation, with high participation of women among leadership, managerial and non-managerial roles. The EIT Health Supervisory Board has previously been chaired by a woman senior leader representative. Key EIT Health Management Board positions are held by women leaders, as well as ad-interim and permanent Director roles, such as the EIT Health Directors of Innovation & Transformation, Business Operations and Sustainable Development, or Business Creation.

The EIT Health Central Office (CO) reports a high ratio of female to male staff at the time of the publication of this document, with 47 female staff members (69%) and 21 male staff members (31%)

(Figure 4). High participation of women is also reflected at the level of senior positions, with a snapshot indication for the split of gender diversity at decision-making, leadership and managerial roles estimated at the time of the status quo analysis (including ad-interim appointments, and with consideration given to ongoing recruitment into some roles) (Figure 4).

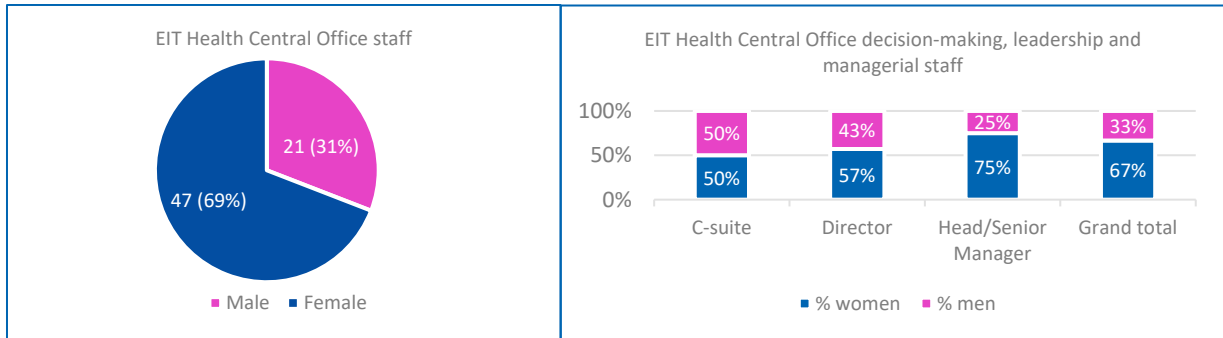


Figure 4: Gender representation across EIT Health Central Office

A fuller view of the split of representation across EIT Health was recorded in April 2023. Understanding that the data remains in flux through onboarding of new talent, departures and internal transfers, the summary will be updated periodically with evolving HR figures to continue monitoring of the gender representation in the organisation.

### Support measures in place to maintain gender balance among the workforce

As an equal opportunity employer, EIT Health has already put in place a set of actions to help maintain a balanced representation among staff, accommodate for individual needs and equip all members of its community with the necessary tools and opportunities to be effective in their role. These include among others:

- Reasonable working hours with limited overtime
- Holiday and vacation policies
- Key meetings take place during core hours to enable attendance by staff with family and caring responsibilities
- Support for adjustments of working hours and part-time engagements, including at management level
- Equal treatment of part-time positions in terms of access to promotion, training and opportunities
- Flexitime/flexible working schedules
- Provision of telework or smartwork, with a significant proportion of the organisation working remotely pan-Europe
- Active support for parental leave, including paternity leave
- Transparency in recruitment and selection procedures, including advertising of roles internally
- Monitoring of hiring processes, including gender balance in hiring and interview committees or panels

### Further areas of growth in representation in staff and management

While EIT Health’s activities have been underpinned by a diverse talent pool and strong women leadership in the organisation’s history, conscious measures are necessary to maintain and, where needed, improve gender balance to future-proof the organisation’s workforce. For instance, a concrete action plan is necessary to profile and mainstream women representatives in the Supervisory Board, for example through attracting women candidates to replace any newly vacating post holders (Annex 1

Section 1.1). Likewise, assuring a broader gender balance across EIT Health's CLC leadership on a longer term as appropriate will help to sustain the high-performance network potential of the organisation. Furthermore, some traditional gender stereotypes can be observed through certain functions within organisation, such as a communications team composed predominantly of women. Similarly, while previously led by women in senior expertise roles, current IT and data units are predominantly composed of men. While such patterns are reflected across the wider industry and are not unique to EIT Health, proactive recruitment strategies for any future vacancies, supplemented by mentorship opportunities, could help mainstream women candidates into traditionally male-dominated roles and vice-versa, thereby bringing fresh perspectives into such functions. Monitoring, understanding and addressing cases of emerging gender pay gap within the organisation will support these objectives, as appropriate. Finally, EIT Health CLCs have been proactive in assuring that inclusive policies are implemented and tailored to fit and serve the needs of the local workforce. Aligning these policies, where possible, under the umbrella of the cross-organisational Gender Mainstreaming Policy will help to further foster coordinated action across the full organisation.

## 1.4. EDUCATION

The EIT Health education portfolio supports activities aimed at, among others, the co-development and offer of training opportunities for a range of students, learners, entrepreneurs and professionals in collaboration with EIT Health Partners, including through the EIT Health Academy learning platform. Gender-disaggregated data is collected at across all levels of education activities, captured across KPIs such as:

- Graduates from EIT labelled MSc/PhD programmes by gender (including data on combination of Regional Innovation Scheme, RIS<sup>33</sup>, areas and gender) [EITHE07]
- Participants in (non-degree) education and training by gender (including data on combination of RIS and gender) [EITHE08]
- Start-ups created of EIT labelled MSc/PhD programmes by gender (including data on combination of RIS and gender) [EITHE05]
- EIT labelled MSc/PhD students and graduates who joined start-ups [EITHE09]

Additionally, under the education programme, EIT Health and its Partners have launched dedicated initiatives aimed at upskilling or reskilling women workers in healthcare. This includes, as an example, the Top Female Founders Summer School, aimed at students or future entrepreneurs with an innovative idea to tackle healthcare challenges from background in engineering, medicine, business or life sciences, receiving mentoring from industry experts in big pharma, academia and healthcare.<sup>34</sup> Furthermore, the work of the EIT Health-initiated WorkInHealth Foundation is foreseen to help plug talent gaps within the healthcare industry through attracting women professionals, including via the FutureHealthHERo initiative.<sup>35, 36</sup>

The status quo analysis of existing KPIs data for the 2021-2022 period found a predominantly even split of female and male learners across the education portfolio, with a larger reported involvement of women in some indicators, such as numbers of graduates from EIT-labelled programmes (76 female and 51 male graduates, translating to 60% and 40%, respectively), or numbers of participants in non-labelled education and training (7,124 women and 5,711 men participants, translating to 46% and 36%

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<sup>33</sup> EIT (2022) [The EIT Regional Innovation Scheme \(RIS\): Closing the Innovation Divide in Europe](#)

<sup>34</sup> EIT Health (2023) [Top Female Founders Summer School](#)

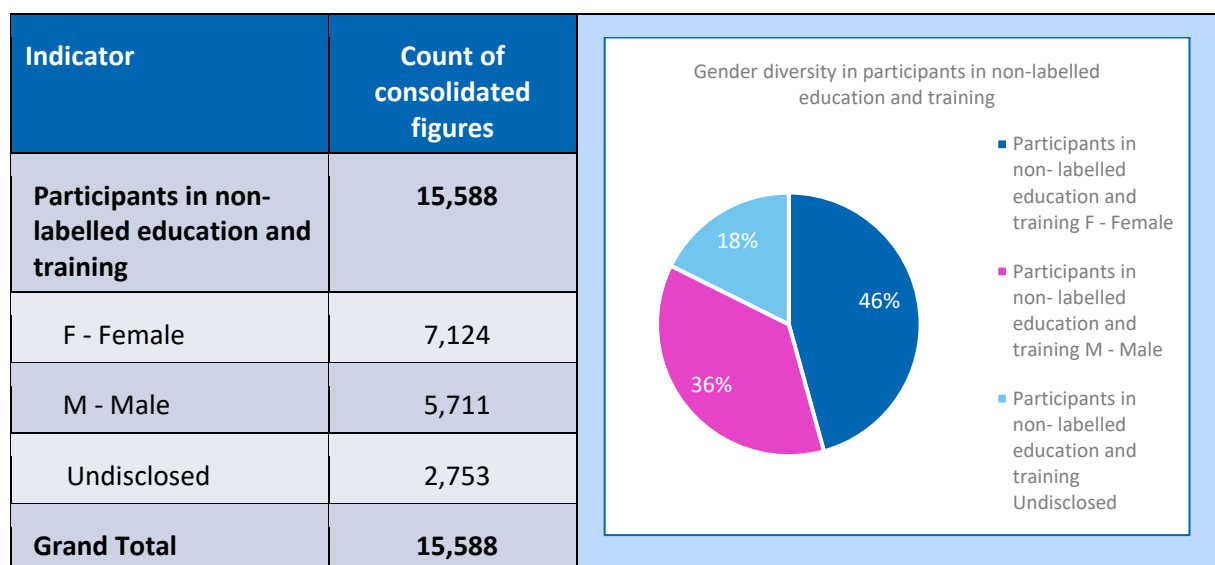
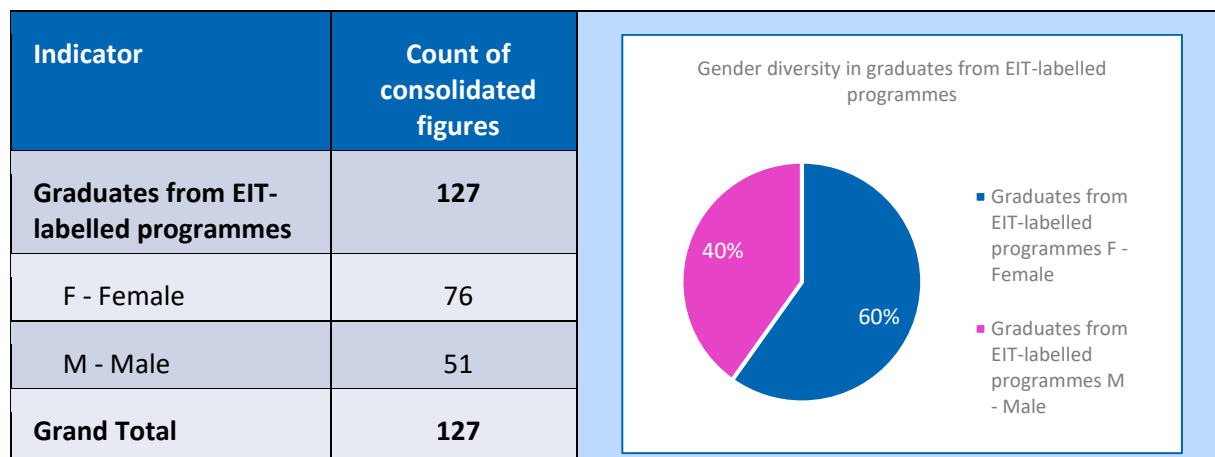
<sup>35</sup> EIT Health (2023) [WorkInHealth Foundation](#)

<sup>36</sup> EIT Health (2023) [FutureHealthHERo](#)



respectively, with an additional 18% not disclosing gender in the KPIs report) (Figures, 5 & 6). This highlights a high participation of women in EIT Health-supported education and training programmes or activities, both across the wider EIT Health ecosystem, as well as within RIS regions (Figures 5-15). Women and men also benefit equally, both directly and indirectly, from solutions developed or implemented in EIT Health education activities (50%; Figure 14). On the other hand, the data show a gap in the number of students trained by EIT Health education programmes, with 938 women (35%) compared to 1,760 men (65%) (Figure 8). While the difference can be partly attributed to issues of data quality and completeness, with other similar indicators showing a more even split, attention must be given to ensuring continued and, where necessary, increased involvement of female students in EIT Health-supported education activities (in line with Annex 2 Gender Equality Plan). Moreover, the data demonstrate that male candidates have benefited disproportionately from employment opportunities and jobs in both existing and new businesses as a result of education activities within the reporting period, attracting attention to the need to engage broader groups of potential women candidates for open positions (Figures 12 & 13).

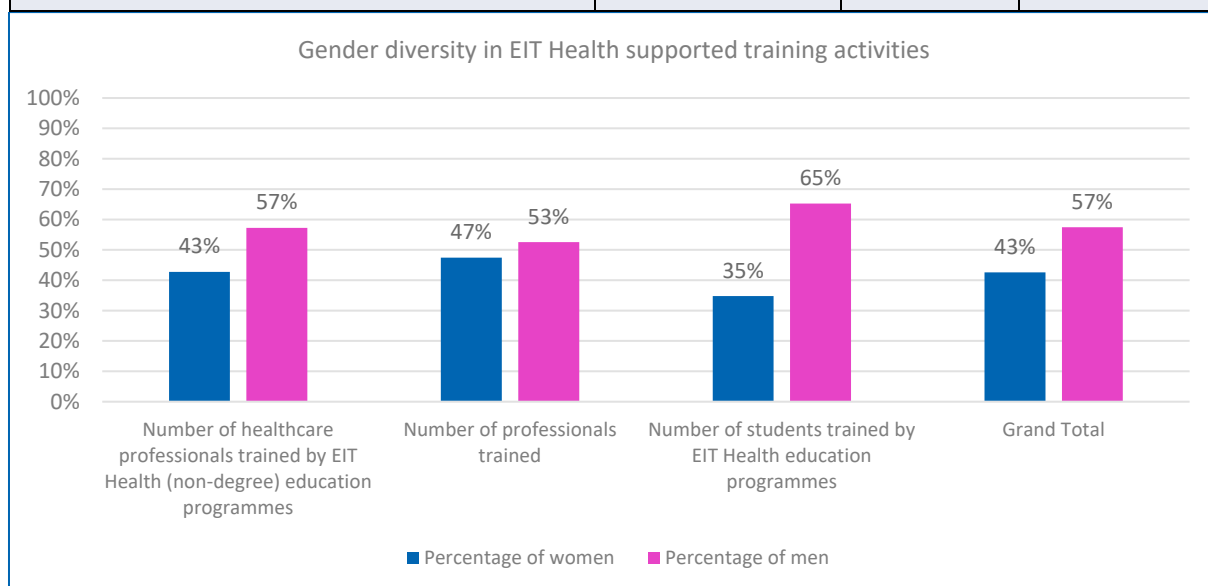
The below data summaries display the status quo of the EIT Health Education portfolio (snapshot data for Business Plan 2021-2022, as analysed at November 2023).



Indicator – RIS countries only (where the country of residence was declared)	Count of consolidated figures
<b>Graduates from EIT-labelled programmes</b>	<b>60</b>
F - Female	35
M - Male	25
<b>Participants in non- labelled education and training</b>	<b>9,802</b>
F - Female	5,120
M - Male	3,861
Undisclosed	821
<b>Grand Total</b>	<b>9,862</b>

Figures 5, 6, 7: Gender diversity reported in EIT-labelled and non-labelled initiatives supported by EIT Health

Indicator	Sum women	Sum men	Sum of Reported Value
Number of healthcare professionals trained by EIT Health (non-degree) education programmes	1,100	1,473	2,573
Number of professionals trained	2,012	2,230	4,242
Number of students trained by EIT Health education programmes	938	1,760	2,698
<b>Grand Total</b>	<b>4,050</b>	<b>5,463</b>	<b>9,513</b>



Indicator – RIS countries only (where the country of residence was declared)	Sum women	Sum of Reported Value
Number of healthcare professionals trained by EIT Health (non-degree) education programmes	75	112
Number of professionals trained	525	976
Number of students trained by EIT Health education programmes	519	1,417
<b>Grand Total</b>	<b>1,119</b>	<b>2,505</b>

Figures 8, 9: Gender diversity reported in EIT Health supported training activities

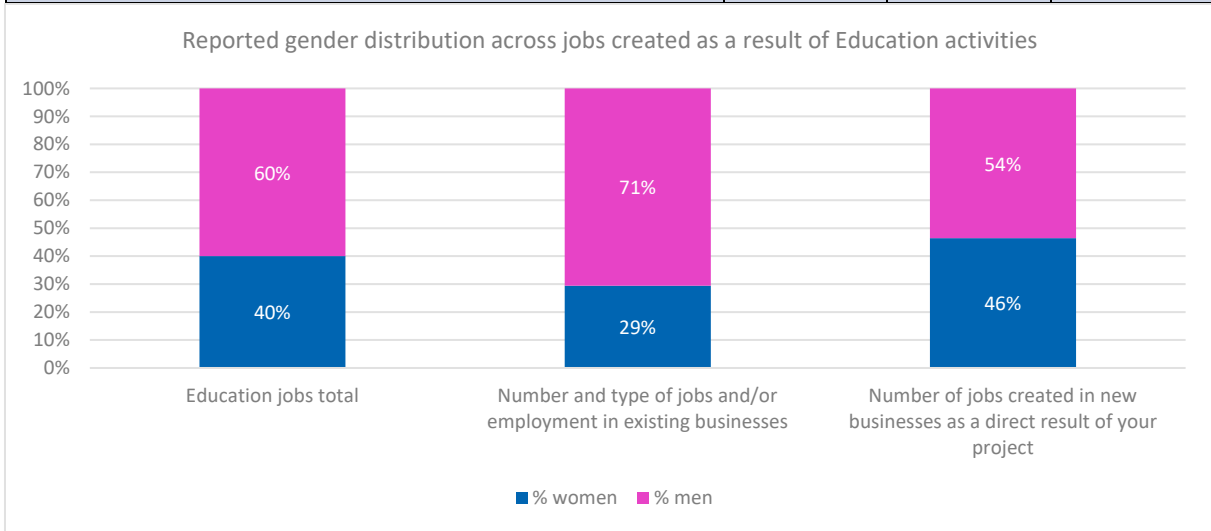
Indicator	Count of consolidated figures	Charts
<b>Start-ups and scale-ups supported by KICs</b>	<b>98</b>	<p>Start-ups and scale-ups supported by KICs</p> <ul style="list-style-type: none"> <li>Start-ups and scale-ups supported by KICs F - Female</li> <li>Start-ups and scale-ups supported by KICs M - Male</li> </ul>
F - Female	21	
M - Male	77	
<b>Start-ups created by students enrolled and graduates from EIT-labelled programmes</b>	<b>1</b>	<p>Start-ups and scale-ups supported by KICs</p> <p>1 0</p> <p>F - Female</p> <p>Start-ups created by students enrolled and graduates from EIT-labelled programmes</p> <ul style="list-style-type: none"> <li>Total</li> </ul>
F - Female	1	
<b>Grand Total</b>	<b>99</b>	

Indicator – RIS countries only (where the country of residence was declared)	Count of consolidated figures
<b>Start-ups and scale-ups supported by KICs</b>	<b>69</b>
F - Female	14
M - Male	55
<b>Start-ups created by students enrolled and graduates from EIT-labelled programmes</b>	<b>1</b>
F - Female	1

<b>Grand Total</b>	<b>70</b>
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Figures 10, 11: Gender diversity reported in start-up-related activities in EIT Health Education programmes

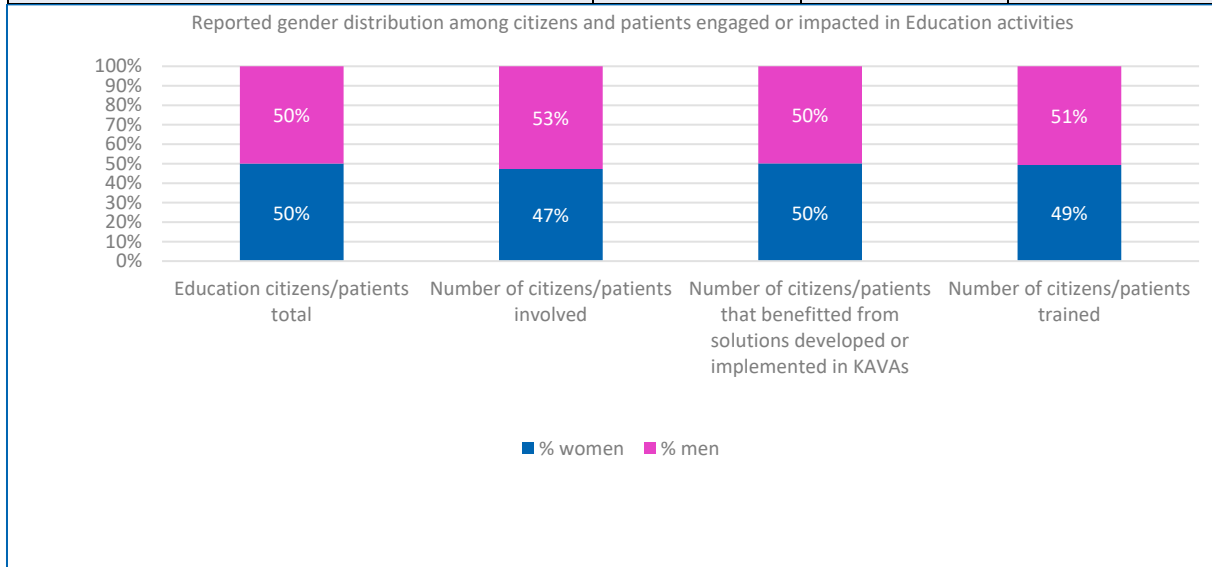
Indicator	Sum of reported value	Sum women	Sum men
<b>Education jobs total</b>	<b>45</b>	<b>18</b>	<b>27</b>
Number and type of jobs and/or employment in existing businesses	17	5	12
Number of jobs created in new businesses as a direct result of projects	28	13	15



Indicator – RIS countries only (where the country of residence was declared)	Sum of reported value	Sum women
<b>Education</b>	<b>6</b>	<b>3</b>
Number and type of jobs and/or employment in existing businesses	1	0
Number of jobs created in new businesses as a direct result of projects	5	3

Figures 12, 13: Gender diversity reported in jobs activated as a result of EIT Health Education programmes

Indicator	Sum of reported value	Sum women	Sum men
<b>Education citizens/patients total</b>	<b>230,964</b>	<b>115,734</b>	<b>115,230</b>
Number of citizens/patients involved	3,749	1,774	1,975
Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs	218,911	109,864	109,047
Number of citizens/patients trained	8,304	4,096	4,208



Indicator – RIS countries only (where the country of residence was declared)	Sum of reported value	Sum women
<b>Education</b>	<b>2,441</b>	<b>1,349</b>
Number of citizens/patients involved	1,631	885
Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs	694	385
Number of citizens/patients trained	116	79

Figures 14, 15: Gender diversity reported across citizens and patients engaged or impacted in EIT Health Education activities

## 1.5. ENTREPRENEURSHIP

A start-up portfolio survey of 327 start-ups has showed 129 start-ups are led by women (CEOs) (30%). This demonstrates that while entrepreneurship as a career pathway is increasingly gaining ground among women, further effort is necessary to boost the participation of women in entrepreneurship activities in the health sector and within EIT Health’s programmes. To measure and benchmark trends

in the participation of women in health entrepreneurship activities, EIT Health already collects quantitative gender-disaggregated data on a set of KPIs, such as:

- Start-ups created of/for innovation by gender of CEO/owner [EITHE04]
- Supported start-ups/scale-ups by gender of CEO/owner (including data on combination of RIS and gender) [EITHE03]
- Investment attracted by KIC supported start-ups/scale-ups by gender of CEO/owner (including data on combination of RIS and gender) [EITHE06]
- # Start-ups created by students enrolled and graduates from EIT labelled MSc and PhD programmes by gender of CEO/owner (including data on combination of RIS and gender) [EITHE05.1]

Additionally, EIT Health has worked closely with its Partners to facilitate activities aimed directly at building capacity for aspiring women entrepreneurs, such as the Women Entrepreneurship Bootcamp connecting early-stage, women-led or co-led healthcare start-ups to a network of mentors, helping to leverage the diversity in the company leadership team to achieve the best possible outcomes.<sup>37</sup> Indeed, the Bootcamp recognises and celebrates the vital contributions of women through the inaugural Agnès Guerraz Prize for Women Entrepreneurship.<sup>38</sup> Similarly, EIT Health's Mentoring & Coaching Network offers start-ups and scale-ups access to a diverse pool of industry specialists, including women experts and opinion leaders, while start-ups have an opportunity to connect with women investors via the Venture Centre of Excellence (VCoE), a pioneering EIT Health and European Investment Fund (EIF) initiative, providing a unique co-investment programme and AI-powered platform connecting investors and European health SMEs to catalyse their growth from Series A to pre-IPO rounds.<sup>39</sup>

When juxtaposed with other sector, health has historically observed a comparatively higher proportion of women entrepreneurs.<sup>40</sup> This is reflected in the EIT Health Business Plan 2021-22 portfolio of entrepreneurship and business creation initiatives, with a balanced distribution of start-ups and scale-ups created among women and men CEOs (at 50%; Figure 16). Yet, figures also show that across activities, significantly more start-ups and scale-ups with a male CEO are supported compared to women-led enterprises, with 320 start-ups or scale ups supported that are led by men (67%) compared to 156 companies led by women (33%) (Figure 16). This trend in the support directed at women-led enterprises is also reflected in RIS countries (Figure 17). Indeed on a cross-EU portfolio level, indicators measuring investment attracted in start-ups and scale-ups, and metrics for in-company investment realised following EIT Health-supported project lead time underscore marked differences in investment injected into enterprises with a woman CEO at the helm compared to businesses led by men (EUR 151,505,596 cumulative investment across indicators in companies led by women versus EUR 724,566,337 in companies led by men across the Business Plan 2021-2022 reporting period) (Figures 18 & 24). Together, these insights call on the need for further action to mainstream the participation of women in entrepreneurship in health through supporting women CEOs and unlocking investment opportunities for companies led by women (Annex 2 Gender Equality Plan).

On the other hand, KPIs linked to jobs created in existing and new businesses in EIT Health entrepreneurship portfolio activities, as well as among EIT health-supported SMEs show a more even distribution, with these roles filled relatively equally among women and men talent (Figures 20, 21). Similarly, women and men are involved in entrepreneurship portfolio activities to a comparable extent, and both women and men are reported to benefit from solutions developed or implemented in these activities equally (Figure 22). Nevertheless, further interrogation of the data is needed to better

<sup>37</sup> EIT Health (2023) [Women Entrepreneurship Bootcamp](#)

<sup>38</sup> EIT Health (2023) [News article: MiMark awarded inaugural Agnès Guerraz Prize](#)

<sup>39</sup> EIT Health – European Investment Fund (2023) [Venture Centre of Excellence](#)

<sup>40</sup> Panteia, European Commission (2014) [Statistical Data on Women Entrepreneurs in Europe – Country Fiche](#)

understand the causes for the gender gap reported in the numbers of citizens and patients trained, particularly in the context of a smaller data sample captured for this indicator (n=24) (Figure 22).

The below data summaries display the status quo of the EIT Health Entrepreneurship portfolio (snapshot data for Business Plan 2021-2022, as analysed at November 2023).

Indicator	Count of consolidated figures	Charts
<b>Start-ups and scale-ups supported by KICs</b>	<b>476</b>	<p>Gender diversity among start-ups and scale-ups supported by KICs</p> <ul style="list-style-type: none"> <li>Start-ups and scale-ups supported by KICs F - Female</li> <li>Start-ups and scale-ups supported by KICs M - Male</li> </ul>
F - Female	156	
M - Male	320	
<b>Start-ups created of/for innovation</b>	<b>4</b>	<p>Gender diversity among start-ups created of/for innovation</p> <ul style="list-style-type: none"> <li>Start-ups created of/for innovation F - Female</li> <li>Start-ups created of/for innovation M - Male</li> </ul>
F - Female	2	
M - Male	2	
<b>Grand Total</b>	<b>480</b>	

Indicator – RIS countries only (where the country of residence was declared)	Count of consolidated figures
<b>Start-ups and scale-ups supported by KICs</b>	<b>148</b>
F - Female	63
M - Male	85
<b>Start-ups created of/for innovation</b>	<b>1</b>
F - Female	1
<b>Grand Total</b>	<b>149</b>

Figures 16, 17: Gender diversity reported in business creation in EIT Health Entrepreneurship activities

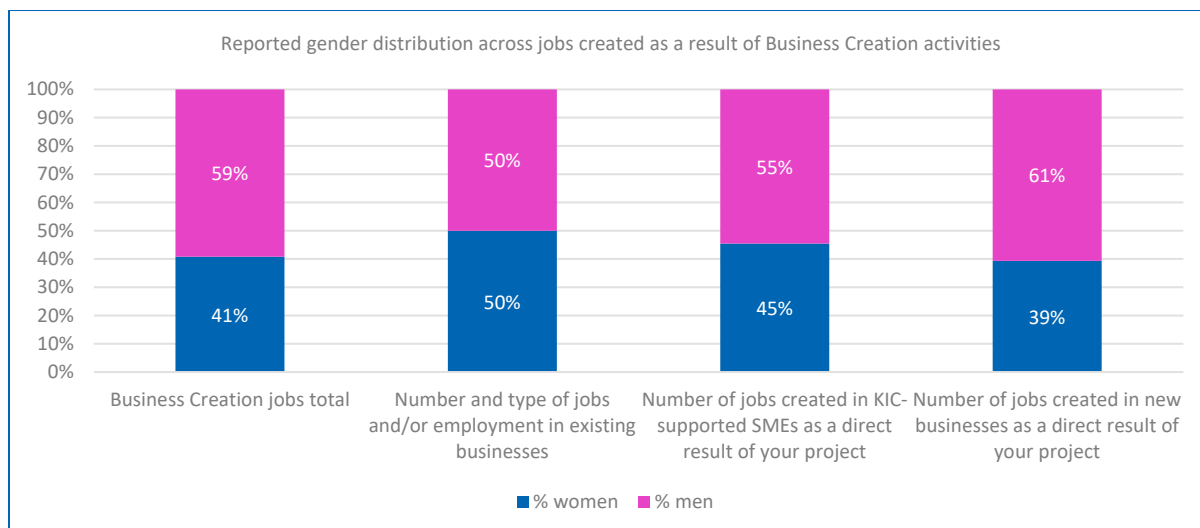
Indicator	Sum of Reported Value	Charts
<b>In-company investment triggered during or after project lead time (€) as a result of your project</b>	<b>€ 18,740,000</b>	<p>Investment attracted by KIC supported start-ups and scale-up</p> <p>€ 1,000,000,000</p> <p>€ 500,000,000</p> <p>€ 0</p> <p>82%</p> <p>18%</p> <p>■ F - Female ■ M - Male</p>
M - Male	€ 18,740,000	
<b>Investment attracted by KIC supported start-ups and scale-up</b>	<b>€ 828,367,206</b>	
F - Female	€ 147,080,808	
M - Male	€ 681,286,398	
<b>Grand Total</b>	<b>€ 847,107,206</b>	

Indicator – RIS countries only (where the country of residence was declared)	Sum of Reported Value
<b>In-company investment triggered during or after project lead time (€) as a result of your project</b>	<b>€ 1,700,000</b>
M - Male	€ 1,700,000
<b>Investment attracted by KIC supported start-ups and scale-up</b>	<b>€ 102,869,263</b>
F - Female	€ 55,515,808
M - Male	€ 47,353,455
<b>Grand Total</b>	<b>€ 104,569,263</b>

Figures 18, 19: Gender diversity reported in investment attracted across businesses supported under EIT Health Entrepreneurship activities

Indicator	Sum of reported value	Sum women	Sum men
<b>Business Creation jobs total</b>	<b>223</b>	<b>91</b>	<b>132</b>
Number and type of jobs and/or employment in existing businesses	24	12	12
Number of jobs created in KIC-supported SMEs as a direct result of your project	11	5	6
Number of jobs created in new businesses as a direct result of your project	188	74	114

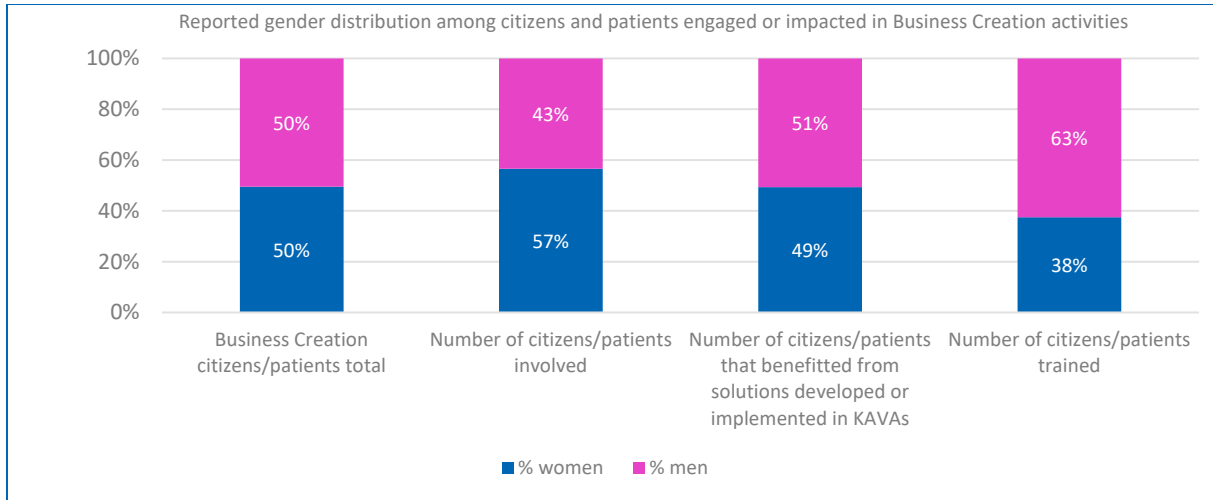




Indicator – RIS countries only (where the country of residence was declared)	Sum of reported value	Sum women
<b>Business Creation</b>	<b>95</b>	<b>38</b>
Number and type of jobs and/or employment in existing businesses	14	9
Number of jobs created in KIC-supported SMEs as a direct result of your project	5	3
Number of jobs created in new businesses as a direct result of your project	76	26

Figures 20, 21: Gender diversity reported in jobs activated as a result of EIT Health Entrepreneurship programmes

Indicator	Sum of reported value	Sum women	Sum men
<b>Business Creation citizens/patients total</b>	<b>2152</b>	<b>1066</b>	<b>1086</b>
Number of citizens/patients involved	99	56	43
Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs	2029	1001	1028
Number of citizens/patients trained	24	9	15



Indicator – RIS countries only (where the country of residence was declared)	Sum of reported value	Sum women
<b>Business Creation</b>	<b>577</b>	<b>310</b>
Number of citizens/patients involved	64	43
Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs	509	267
Number of citizens/patients trained	4	0

Figures 22, 23: Gender diversity reported across citizens and patients engaged or impacted in EIT Health Entrepreneurship activities

## 1.6. INNOVATION

The EIT Health portfolio of innovation activities incorporates a number of collaborative, cross-discipline consortia seeking to co-develop and launch new or improved innovative products, solutions, or technologies on the market with the aim to drive improvements in the way health care is delivered, disrupt healthcare industry standards with new practices or procedures, and maximise health outcomes for patients. To measure and benchmark trends in the participation of women in health innovation activities, EIT Health already collects quantitative gender-disaggregated data on a set of KPIs, such as:

- In-company investment triggered during or after project lead time (€) as a result of project, by gender of CEO/owner
- Investment attracted by KIC supported start-ups and scale-up, by gender of CEO/owner (including data on combination of RIS and gender) [EITHE06]
- Number and type of jobs and/or employment in existing businesses
- Number of jobs created in new businesses as a direct result of projects

EIT Health has co-funded a number of innovation projects delivered through joint industry, research, healthcare provider and business stakeholders that aimed specifically at addressing clinical conditions predominantly impacting women, or with a thematic focus on women’s health. Examples in the activity

portfolio include the projects 'Smart Ultrasound in Obstetrics and Gynaecology' (SUOG)<sup>41</sup> or 'Be RIGHT with breast cancer risk management' (BRIGHT)<sup>42</sup>.

Analysis of the KPIs data reported for the innovation portfolio in Business Plan 2021-22 reflect broader sectoral trends. Similarly to the status quo observed in the entrepreneurship activities portfolio, investment (public and private) is predominantly and disproportionately injected into those EIT Health innovation project-supported start-ups and scale-ups that are led by a male CEO, with up to 85% of the total investment reported for the portfolio directed at these companies (Figures 24 & 25). Recognising the investment divide evident between enterprises led by women compared to those led by men, EIT Health will undertake specific action to deliver workshop(s) for the investor community on the value-add of women leadership in start-ups and scale-ups in the health sector, including through the participation of subject-matter experts and women opinion leaders, and complemented by testimonials of opportunities and actions to overcome challenges (Annex 2 Gender Equality Plan). The ambition is to increase investors' awareness of the investment gap between women-led companies compared to enterprises led by men. Furthermore, EIT Health will facilitate workshops or discussions in an alternative format on the importance of women-led investment rounds for the incubation of health innovation and emerging businesses, thereby promoting women-led Venture Capitals or Business Angels, disseminating women investor expertise and raising awareness for the importance of diversity in investment decisions.

Additionally, and echoing the wider historical status quo in the health sector, the data show lower percentages of female citizens or patients involved in innovation projects, lower numbers of female citizens or patients benefiting from solutions developed or implemented in innovation activities, and significantly lower involvement of women as subjects in clinical trials testing innovative technologies, solutions or processes (in the latter case, only 30% of clinical trial subjects reported in the innovation portfolio are women) (Figure 28). This observation applies for RIS countries too (Figure 29). Trends in clinical trial enrolment are most appropriately assessed in the context of the end group that is foreseen to benefit from the innovation, and conclusions may best be drawn at the level of individual projects accordingly. Yet on general terms, while innovative solutions developed and launched on the market as a result of EIT Health-supported activities frequently impact a diversity of relevant citizen and patient end groups, including women, initiatives aimed directly at health challenges faced by women remain under-represented in proposals successfully selected into the innovation portfolio. EIT Health will accordingly continue to raise awareness in its community for the insufficient research and innovation into health conditions disproportionately affecting women, as well as for the persistent low enrolment of female participants in clinical trials, including where the technology or solution is understood to bring benefits for a diversity of patients in health conditions agnostic to gender. Further, EIT Health will report on the numbers of EIT Health-supported collaborative innovation project consortia that focus specifically on the development of technologies or interventions addressing Women's Health challenges, FemTech solutions or health conditions disproportionately impacting women (Annex 2 Gender Equality Plan).

On the other hand, portfolio KPIs data on emerging job and employment opportunities in existing and new businesses show a more balanced tendency, with up to 57% of new jobs created as a result and direct outcome of innovation projects in the 2021-22 Business Plan reportedly filled by women candidates (Figure 26 & 27).

To further the mainstreaming of women in innovation activities supported by EIT Health, EIT Health Calls for Proposals will include a specific requirement for applicant consortia to describe how the gender dimension will be incorporated into the design and implementation of the corresponding project, including, as appropriate, impact on citizens and patients reached, specific outcomes or outputs realised

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<sup>41</sup> EIT Health (2022) [SUOG – Introducing SUOG for ultrasound pregnancy support](#)

<sup>42</sup> EIT Health (2022) [BRIGHT – Genetics-based test for breast cancer risk](#)

that focus on gender-related issues, or the involvement of specific beneficiaries supporting the gender dimension, among others (Annex 2 Gender Equality Plan). The responses of applicant consortia will be assessed during an Ethical, Legal and Societal Issues (ELSI) review step in the proposal selection process.

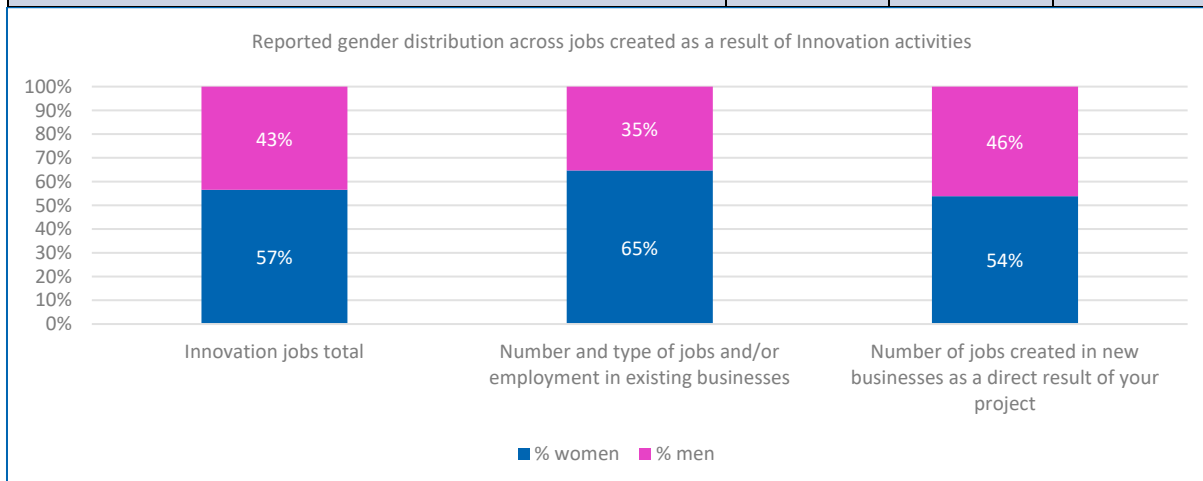
The below data summaries display the status quo of the EIT Health Innovation portfolio (snapshot data for Business Plan 2021-2022, as analysed at November 2023).

Indicator	Sum of reported value	Charts						
<b>In-company investment triggered during or after project lead time (€) as a result of your project</b>	<b>€ 1,885,089</b>	<p>In-company investment triggered during or after project lead time (€) as a result of your project</p> <table border="1"> <tr> <th>Gender</th> <th>Percentage</th> </tr> <tr> <td>M - Male</td> <td>80%</td> </tr> <tr> <td>F - Female</td> <td>20%</td> </tr> </table>	Gender	Percentage	M - Male	80%	F - Female	20%
Gender	Percentage							
M - Male	80%							
F - Female	20%							
F - Female	€ 374,410							
M - Male	€ 1,510,679							
<b>Investment attracted by KIC supported start-ups and scale-up</b>	<b>€ 27,079,638</b>	<p>Investment attracted by KIC supported start-ups and scale-up</p> <table border="1"> <tr> <th>Gender</th> <th>Percentage</th> </tr> <tr> <td>M - Male</td> <td>85%</td> </tr> <tr> <td>F - Female</td> <td>15%</td> </tr> </table>	Gender	Percentage	M - Male	85%	F - Female	15%
Gender	Percentage							
M - Male	85%							
F - Female	15%							
F - Female	€ 4,050,378							
M - Male	€ 23,029,260							
<b>Grand Total</b>	<b>€ 28,964,727</b>							

Indicator – RIS countries only (where the country of residence was declared)	Sum of Reported Value
<b>Investment attracted by KIC supported start-ups and scale-up</b>	<b>€ 2,729,260</b>
M - Male	€ 2,729,260
<b>Grand Total</b>	<b>€ 2,729,260</b>

Figures 24, 25: Gender diversity reported in investment attracted across businesses supported under EIT Health Innovation activities

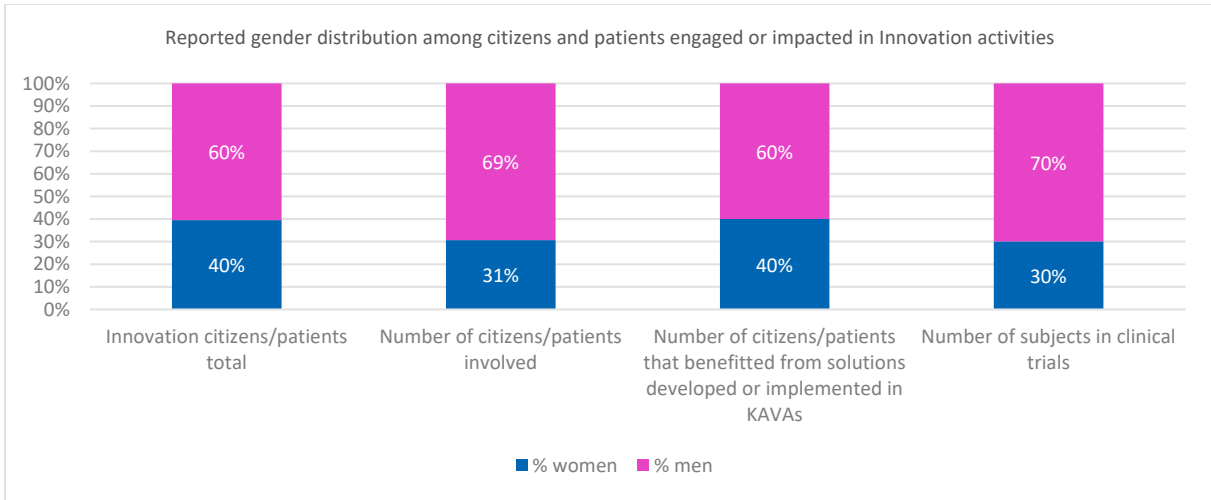
Indicator	Sum of reported value	Sum women	Sum men
<b>Innovation jobs total</b>	<b>69</b>	<b>39</b>	<b>30</b>
Number and type of jobs and/or employment in existing businesses	17	11	6
Number of jobs created in new businesses as a direct result of your project	52	28	24



Indicator – RIS countries only (where the country of residence was declared)	Sum of Reported Value	Sum women
<b>Innovation</b>	<b>31</b>	<b>18</b>
Number and type of jobs and/or employment in existing businesses	10	8
Number of jobs created in new businesses as a direct result of your project	21	10

Figures 26, 27: Gender diversity reported in jobs activated as a result of EIT Health Innovation projects

Indicator	Sum of reported value	Sum women	Sum men
<b>Innovation citizens/patients total</b>	<b>147,406</b>	<b>58,242</b>	<b>89,164</b>
Number of citizens/patients involved	4,314	1,322	2,992
Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs	141,828	56,714	85,114
Number of subjects in clinical trials	661	199	462



Indicator – RIS countries only (where the country of residence was declared)	Sum of reported value	Sum women
<b>Innovation</b>	<b>101,876</b>	<b>36,680</b>
Number of citizens/patients involved	3,181	917
Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs	98,606	35,738
Number of subjects in clinical trials	89	25

Figures 28, 29: Gender diversity reported across citizens and patients engaged or impacted in EIT Health Innovation activities

# ANNEX 2 – EIT HEALTH GENDER EQUALITY PLAN 2024-2026 (3-YEAR)

## 1. EXECUTIVE SUMMARY

Informed by the EU Gender Equality Strategy 2020-2025<sup>43</sup>, Horizon Europe provisions for Gender Equality Plans<sup>44</sup>, the EIT Strategic Innovation Agenda 2021-2027<sup>45</sup> and the EIT Gender Equality Policy and Action Plan<sup>46</sup>, the EIT Health Gender Equality Plan (GEP) 2024-2026 sets out a roadmap to implement the EIT Health Gender Mainstreaming Policy. Absorbing key learnings from the supporting Status Quo Analysis, the GEP supports the implementation of the EIT Health Gender Mainstreaming Policy through laying out concrete actions, indicators, corresponding timelines and responsible action owners over a 3-year time span. The GEP sets out an action course to on the one hand maintain existing good practice and methodology for the promotion of gender equality, while on the other sustaining and, where needed, increasing women's participation in various activity lines supported by EIT Health. The GEP therefore considers both the maintenance, composition, diversity, and equality of the EIT Health workforce and talent pool, as well as opportunities for driving equity and boosting the participation of women in education, entrepreneurship and innovation in the health sector. The GEP thereby aims to exploit EIT Health's positioning as a health ecosystem node to uphold current positive practice, call to joint action and elicit change.

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<sup>43</sup> European Commission (2020) [A Union of Equality: Gender Equality Strategy 2020-2025](#)

<sup>44</sup> European Commission (2021) [Gender equality: a strengthened commitment in Horizon Europe](#)

<sup>45</sup> EIT (2021) [Strategic Innovation Agenda \(SIA\) for 2021-2027](#)

<sup>46</sup> EIT (2022) [EIT Gender Equality Policy 2022-2027](#)

## 2. THE GENDER EQUALITY PLAN 2024-2026

Objectives	Activities	Results	Indicators	Responsible(s)	Timeline
1. <b>Strengthening the lead role of EIT Health on gender equality and women's participation in the health ecosystem and community</b>	Formulate the EIT Health Gender Mainstreaming Policy	Gender Mainstreaming Policy approved by KIC Management Board	Gender Mainstreaming Policy published on EIT Health website	EIT Health gender policy development committee	Q4 2023
	Ensure high-level follow-up of the Policy and Action Plan through presenting an update for discussion at the EIT Health Management Board at least once a year	Continued prioritisation of activities linked to gender mainstreaming both within the organisation and its activities portfolio is assured on management-level	Annual Report on the progress of the Policy	EIT Health Gender Mainstreaming Coordinator  Supporting EIT Health internal people committee  EIT Health functional units	Q3 Yearly 2024-2026



	<p>Include gender in EIT Health reporting processes</p>	<p>A clear assessment of the performance of gender equality objectives, including reporting of EIT Deliverables</p>	<p>The EIT Health Business Plans inform on gender equality in the KIC's activities and its data are gender disaggregated where relevant, including through dedicated EIT Deliverables:</p> <ul style="list-style-type: none"> <li>• <i>'Report on strategies and actions/measures implemented to ensure gender balance in KIC's innovation, business creation, education programmes, including in RIS countries, and results of these actions. Report including information on percentage of KIC staff, disaggregated by level, and by gender, trained on gender equality.'</i></li> <li>• For Cross-KIC Clusters: <i>'Report on strategies and actions/measures implemented to ensure gender balance and incorporation of gender dimension in the Cross-KIC programmes, and results of these actions.'</i></li> </ul> <p># good practices highlighted in EIT Health Business Plan Reports</p>	<p>EIT Health functional units</p>	<p>Q1 2024 (2023 reporting period)</p> <p>Q4 2024 (2024 reporting period)</p> <p>Q4 2025 (2025 reporting period)</p> <p>Q4 2026 (2026 reporting period)</p>
	<p>Identify and appoint gender champion(s), including on a management level, and encouraging male gender champions to join the relevant people committee supporting EIT Health gender equality measures</p>	<p>Increased support for gender mainstreaming across the organisation</p>	<p># of gender champions appointed at KIC level</p> <p># of management-level gender champions appointed at KIC level</p>	<p>EIT Health Management Board</p> <p>Supporting EIT Health internal people committee</p>	<p>Q1 2024</p>

	Embed gender equality in the organisation of events and conferences by having gender balanced speaker lists	Increased opportunity for women opinion leaders to participate in EIT Health-organised events and inform high-level conversations	90% of events with a panel including at least one woman (target 50% women in all panels as optimal)	EIT Health functional units	Already common practice  2024-2026 continuous
	Organise specific events, round tables, workshops or panels on gender equality in health technology and innovation, to disseminate and raise awareness of challenges faces by women in the health sector both on the side of the workforce and as citizens and patients engaging with health systems	Increased appreciation and understanding of challenges faced by women in the health ecosystem among EIT Health's community and Partners network	# specific events, round tables, workshops or panels on gender equality in health technology and innovation	EIT Health functional units  EIT Health Corporate Affairs	Q2 2025
	Eliminate male-only selection and evaluation panels among education, entrepreneurship and innovation activity portfolios, as well as male-only recruitment panels for EIT Health positions	Gender representation in evaluation, selection and recruitment panels is balanced and equal participation is assured	# panels with participation of at least one woman representative (100% ideal)	EIT Health functional units	Already common practice  2024-2026 continuous
	Review database and pool of experts (evaluators, mentors, etc.) for gender diversity and balance	EIT Health's network of experts the organisation can tap into is balanced in terms of gender representation and diversity of voice	% of EIT Health's expert pool and network is made up of women opinion leaders, evaluators or mentors (target 50%)	EIT Health functional units	2024-2026 continuous
	Expand the membership of the EIT Health Innovators Community with women members and leverage community effect for gender equality action and the promotion of gender equality initiatives in the health sector	Diverse EIT Health Innovators Community established with equitable participation of women and with community initiatives focused on gender equality	% of women members of the EIT Health Innovators Community (target 50%)  EIT Health gender initiatives supported by EIT Health Innovators Community members	EIT Health Gender Mainstreaming Coordinator  Supporting EIT Health internal people committee  EIT Health Corporate Affairs	2024-2026 continuous



	Scope opportunities to collaborate with NGOs advocating for gender equality, including in the health sector	Closer collaboration with expert players promoting gender equality established	# collaborations (e.g. via MoU; target at least 1)	EIT Health Gender Mainstreaming Coordinator  Supporting EIT Health internal people committee	Q3 2024
	Find and actively engage with local CLC-appropriate gender equality networks	EIT Health CLC ecosystem is more closely linked to local gender equality networks or initiatives	# gender initiatives (events, summits, partnerships, etc) supported broken down on EIT Health CLC level, with at least one initiative per CLC	EIT Health CLCs  EIT Health Management Board	2024-2026 continuous
	Map gender balance initiatives by the EIT and its KICs and support dissemination to increase cross-sectoral awareness and action	Increased cooperation between cross-sectoral communities	EIT KICs gender balance initiatives informed and disseminated	EIT Health Gender Mainstreaming Coordinator  Supporting EIT Health internal people committee	2024-2026 continuous
	Support gender policy in existing EIT Health strategic partnerships	Increased support for gender action within the EIT Health ecosystem	Gender policies in existing strategic partnerships or MoUs mapped in the form of a matrix list	EIT Health Gender Mainstreaming Coordinator  Supporting EIT Health internal people committee	Q3 2024

	Continue expanding the activities of the 'FutureHealthHERo' initiative under the WorkInHealth Foundation ecosystem and the EIT Health Innovators Community	Increased reach of FutureHealthHERo and WorkInHealth to young women talent	<p>FutureHealthHERo LinkedIn page established</p> <p>FutureHealthHERo TikTok channel established</p> <p>Promotional video and interview-style content generated, including 2 promo videos, 15 short interviews with students and 2 longer interviews with women leader role models in healthcare</p> <p>FutureHealthHERo booth and supporting activities facilitated at the EIT Health Summit 2024<sup>47</sup></p>	<p>WorkInHealth Foundation</p> <p>EIT Health Corporate Affairs</p>	<p>Q2 2024</p> <p>2024-2026 continuous (expansion of activities under the 'FutureHealthHERo' brand)</p>
	Disseminate EIT Health's gender equality impact	Increased awareness of the impact of EIT Health activities on gender equality	<p>Gender equality is featured in EIT Health external communications</p> <p>Status Quo Analysis updated with new indicator data</p> <p>EIT Health Spotlight <sup>48</sup> on the 'Girls Go Circular' Cross-EIT KIC initiative <sup>49</sup> scoped and delivered</p>	<p>EIT Health Gender Mainstreaming Coordinator</p> <p>Supporting EIT Health internal people committee</p> <p>EIT Health Corporate Affairs</p>	<p>2024-2026 continuous</p> <p>2024 (Spotlight)</p>
	Devise an EIT Health gender equality manifesto to support gender action across the EIT Health network	Bolstered community support for gender mainstreaming in the health sector, including via gender-sensitive language and communication approaches	<p>EIT Health gender manifesto developed</p> <p># EIT Health Partners signing gender manifesto</p>	<p>EIT Health Gender Mainstreaming Coordinator</p> <p>Supporting EIT Health internal people committee</p>	<p>Q2 2025</p>

<sup>47</sup> EIT Health (2023) [EIT Health Summit](#)

<sup>48</sup> EIT Health (2023) [Our Impact – Spotlight](#)

<sup>49</sup> EIT RawMaterials GmbH (2023) [Girls Go Circular – Digital and Entrepreneurial Skills for the Circular Economy](#)

<p><b>2. Building capacity and raising awareness in the internal organisation on gender equality issues at the workplace as well as in innovation, technology, entrepreneurship, education and research</b></p>	<p>Appoint a Gender Officer/Gender Mainstreaming Coordinator for EIT Health and include gender in their job description and performance mechanisms. Allocate sufficient resources</p>	<p>Gender is embedded in the organisational structure/capacity of the KIC</p>	<p>Gender Mainstreaming Coordinator appointed</p> <p>Gender included in the Gender Officer/Gender Mainstreaming Coordinator’s job description</p>	<p>EIT Health Management Board</p>	<p>Q1 2024</p>
	<p>Formalise a relevant supporting EIT Health internal people committee as a platform for gender action and equality topics, enabling it as a structure supporting the Gender Officer/Gender Mainstreaming Coordinator, with an oversight for the correct implementation of EIT Health’s Gender Equality Plan and policy, and with diverse and gender-balanced composition inclusive of the top management profiles such as: CEO; Chief of Staff; Corporate Affairs; CLC representative, Human Resources (HR), Compliance, as well as non-managerial staff representatives as appropriate (Gender Officer/Gender Mainstreaming Coordinator)</p>	<p>Gender is embedded in the organisational structure/capacity of the KIC</p>	<p># of job descriptions that contain gender equality as an area of responsibility, by seniority</p> <p># number of meetings held with participation of the Gender Officer/Gender Mainstreaming Coordinator and the supporting EIT Health internal people committee</p> <p># reports outlining work of committee</p>	<p>EIT Health Management Board</p>	<p>Q1 2024</p> <p>2024-2026 continuous</p>

	Organise internal workshop or webinar to raise awareness of Gender Mainstreaming Policy and GEP provisions	Workshop organised and internal awareness of and support for Gender Mainstreaming Policy garnered among staff	# of staff participating, disaggregated by level and by gender	Supporting EIT Health internal people committee  EIT Health Gender Mainstreaming Coordinator	Q2 Yearly 2024-2026
	Organise gender equality and implicit bias training for EIT Health staff, including EIT Health leadership	High-level awareness and capacity raising of gender issues assured among staff	# and % of staff following gender and implicit bias training  # and % of management-level staff following gender and implicit bias training  <i>Reported through a dedicated EIT Deliverable 'Report on strategies and actions/measures implemented to ensure gender balance in KIC's innovation, business creation, education programmes, including in RIS countries, and results of these actions. Report including information on percentage of KIC staff, disaggregated by level, and by gender, trained on gender equality.'</i>	EIT Health functional units  EIT Health Management Board  EIT Health Human Resources (HR)	Q1 2024 (2023 reporting period)  Q4 2024 (2024 reporting period)  Q4 2025 (2025 reporting period)  Q4 2026 (2026 reporting period)

	Set up guidelines to use gender-sensitive language at in-person events, in marketing or communication material, and during recruitment	Guidelines for gender-sensitive language in marketing, communication and recruiting approved and used in KIC	Guidelines published on internal intranet pages  Guidelines embedded in EIT Health gender equality manifesto	Supporting EIT Health internal people committee  EIT Health Corporate Affairs	Q4 2024
	Continue attendance and exchange of information at the relevant EIT or EIT KICs-organised gender equality meetings or working groups	Best-practice is disseminated across European innovation communities and of progress towards gender mainstreaming is benchmarked	# EIT or EIT KIC gender equality thematic meetings attended by EIT Health Gender Officer/Gender Mainstreaming Coordinator	EIT Health Gender Mainstreaming Coordinator	2024-2026 continuous
<b>3. Achieving a gender balanced representation in staff and management</b>	Consolidate human resources policy on recruitment and promotion with Gender Mainstreaming Policy, and review human resources policy periodically to assure continued fit-for-purpose on work life balance, care and family life	Improved/maintained gender balance among staff  Improved participation of women in decision-making positions	% of male and female staff members reported in EIT Health reporting  % of women and men in decision-making positions  % of less represented gender in top governance and management positions; 50% by 2025  At least 33% of EIT Health Supervisory Board (SB) members are women by 2025 (50% optimal where feasible)	EIT Health Human Resources (HR)  EIT Health Management Board  Supporting EIT Health internal people committee	Q4 2024 (2024 reporting period)  Q4 2025 (2025 reporting period)  Q4 2026 (2026 reporting period)
<b>4. Education: promote gender equality and women's participation</b>	Active recruitment of female students, graduates and participants through specific communication channels	Gender balanced participation in EIT labelled MSc/PhD programmes reported in gender-disaggregated data	40% women students enrolled in EIT labelled MSc/PhD programmes by Q4/2024 (if possible, also target on combination RIS and gender) [KPI EITHE07.5] and 40% women graduates from these programmes by Q4/2024 (if possible, also target on	EIT Health functional units  EIT Health Communications units	Q4 2024 (2024 reporting period)

			combination RIS and gender) [KPI EITHE07.4]		
		Gender balanced participation in (non-degree) education and training reported in gender-disaggregated data	Minimum 50% female participants in (non-degree) education and training by Q4 2024 (if possible, target on combination RIS and gender) [EITHE08]		
		Gender balance in the start-ups created of EIT labelled MSc/PhD programmes reported in gender-disaggregated data	Minimum 25% of start-ups created of EIT labelled MSc/PhD programmes owned by women or with female CEO by Q4 2024 (if possible, target on combination RIS and gender) [EITHE05]		
		Gender balance in the EIT labelled MSc/PhD students and graduates who joined start-ups reported in gender-disaggregated data	Minimum 25% of EIT labelled MSc/PhD students and graduates who joined start-ups are women by Q4 2024 [EITHE09]		
	Include gender in EIT Health reporting processes for Higher Education Initiative (HEI)	A clear assessment of the performance of gender equality objectives is available, including reporting of EIT Deliverables	Activities in the Higher Education Initiative (HEI) and its data are gender disaggregated where relevant, including through dedicated EIT Deliverable: <ul style="list-style-type: none"> <li>• <i>'Report on strategies and actions/measures implemented to ensure gender balance and incorporation of gender dimension in the HEI, and results of these actions'</i></li> </ul>	EIT Health functional units	Q3 2024
	Scope continuation of existing best-practice education initiatives such as the Top Female Founders Summer School	Training opportunities for women talent are assured in a continued manner	List of training opportunities oriented at or benefited by women talent	EIT Health functional units	Q2 2024-2026 continuous





	<p>Assure focus on gender equality in EIT Health-supported activities through integration into EIT Health calls for proposals</p>	<p>Gender action and EIT KIC gender diversity value statement is streamlined into EIT Health programmes, leading to increased impact of the programmes</p> <p>Aligned EIT Health calls processes with EIT KICs call monitoring principles:</p> <ol style="list-style-type: none"> <li>1. The Call includes the EIT KIC gender diversity value statement and invites the applicants to share their gender equality policy/ measures ensuring gender equality and diversity management during the performance of the contract</li> <li>2. For Calls related to innovation, business creation &amp; acceleration and education activities design and implementation, as well as for HR and Communications services calls where applicable; the Call includes a requirement of a gender expertise within the team performing the contract.</li> <li>3. Gender dimension is incorporated into the aims of the Call. The Applicants are required to incorporate gender dimension into the design and implementation of activities (included intended impact, outputs, outcomes, beneficiaries).</li> </ol>	<p>EIT Health call(s) for proposals (e.g. Flagships Call) includes the EIT KIC gender diversity value statement</p> <p>EIT Health call(s) for proposals application form(s) (e.g. Flagships Call) invites applicants to share gender equality policy and measures ensuring gender equality and diversity, to be assessed as part of the appropriate self-assessment and/or ethical, legal and societal (ELSI) review processes</p> <p>EIT Health calls for proposals remain in compliance with EIT KICs call monitoring principles</p>	<p>EIT Health functional units</p> <p>EIT Health Gender Mainstreaming Coordinator</p> <p>Supporting EIT Health internal people committee</p> <p>EIT Health Management Board</p>	<p>Q4 2023 – Q1 2024</p> <p>2024-2026 continuous</p>
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	Measure participation of women in both applications and selected proposals in EIT Health call(s) for proposals	Increased availability of benchmarking data for the engagement of women talent in EIT Health proposals	# women in EIT Health proposal applications (target 80% proposals have at least one contributor who is a woman)  # women in EIT Health activities (target 80% activities have at least one contributor who is a woman)	Supporting EIT Health internal people committee	Q4 2024 Q4 2025 Q4 2026
<b>5. Entrepreneurship: promote gender equality and women's participation</b>	Active outreach to and recruitment of female entrepreneurs through specific communication channels and dissemination opportunities	Gender balance in the CEOs/owners of start-ups created of/for innovation reported in gender-disaggregated data	Minimum 25% of start-ups created of/for innovation have a woman CEO/owner [EITHE04.1 and EITHE04.4]	EIT Health functional units	Q4 2024 (2024 reporting period)
		Gender balance in the CEOs/owners of supported start-ups/scale-ups	Minimum 25% of supported start-ups/scale-ups have a woman CEO/owner by Q4 2024 (if possible, target on combination RIS and gender) [EITHE03]	EIT Health Communications units, including Marketing	Q4 2025 (2025 reporting period)  Q4 2026 (2026 reporting period)
		Gender balance in the CEOs/owners of KIC supported start-ups/scale-ups that attract investment	Minimum 25% of investment attracted by KIC supported start-ups/scale-ups have a woman CEO/owner by Q4 2024 (if possible, target on combination RIS and gender) [EITHE06]		
		Gender balance in the CEOs/owners of start-ups created by students enrolled and graduates from EIT labelled MSc and PhD programmes	Minimum 25% of Start-ups created by students enrolled and graduates from EIT labelled MSc and PhD programmes have a woman CEO/owner by Q4 2024 (if possible, data on combination RIS and gender) [EITHE05]		

	Scope continuation of existing best-practice entrepreneurship initiatives such as the Women Entrepreneurship Bootcamp, or the inaugural Agnès Guerraz Prize for Women Entrepreneurship by the WorkInHealth Foundation	Entrepreneurship opportunities for women are assured within EIT Health programmes offering on a continuous basis	List of entrepreneurship opportunities oriented at or benefited by women	EIT Health functional units	Q2 2024-2026 continuous
	Deliver workshop for investor community on the value-add of women leadership in start-ups and scale-ups in the health sector, through participation of subject-matter experts and women opinion leaders	Increased awareness among the investor community of the investment gap between companies led by women and men-led enterprises, including testimonials of opportunities and actions to bridge gap	Investor workshop delivered	EIT Health functional units	Q3 2024-2026 continuous
	Organise specific events, round tables, workshops or panels to share best-practice in the investor community, showcasing the importance of women investor expertise for the incubation of health innovation, and promoting women-led Venture Capitals or Business Angels	Increased awareness among the health ecosystem of women investor expertise and the importance of diversity in investment decisions in support of emerging businesses	# specific events, round tables, workshops or panels on women investors in health technology and innovation	EIT Health functional units  EIT Health Corporate Affairs	Q3 2025
	Assure focus on gender equality in EIT Health-supported activities through integration into EIT Health calls for proposals	Gender action and EIT KIC gender diversity value statement is streamlined into EIT Health programmes, leading to increased impact of the programmes  Aligned EIT Health calls processes with EIT KICs call monitoring principles: 1. The Call includes the EIT KIC gender diversity value statement and invites the applicants to share their	EIT Health call(s) for proposals (e.g. Flagships Call) includes the EIT KIC gender diversity value statement  EIT Health call(s) for proposals application form(s) (e.g. Flagships Call) invites applicants to share gender equality policy and measures ensuring gender equality and diversity, to be assessed as part of the appropriate self-assessment	EIT Health functional units  EIT Health Gender Mainstreaming Coordinator  Supporting EIT Health internal people committee	Q4 2023 – Q1 2024  2024-2026 continuous



		<p>gender equality policy/ measures ensuring gender equality and diversity management during the performance of the contract</p> <p>2. For Calls related to innovation, business creation &amp; acceleration and education activities design and implementation, as well as for HR and Communications services calls where applicable; the Call includes a requirement of a gender expertise within the team performing the contract.</p> <p>3. Gender dimension is incorporated into the aims of the Call. The Applicants are required to incorporate gender dimension into the design and implementation of activities (included intended impact, outputs, outcomes, beneficiaries).</p>	<p>and/or ethical, legal and societal (ELSI) review processes</p> <p>EIT Health calls for proposals remain in compliance with EIT KICs call monitoring principles</p>	<p>EIT Health Management Board</p>	
	<p>Measure participation of women in both applications and selected proposals in EIT Health call(s) for proposals</p>	<p>Increased availability of benchmarking data for the engagement of women in EIT Health proposals</p>	<p># women in EIT Health proposal applications (target 80% proposals have at least one contributor who is a woman)</p> <p># women in EIT Health activities (target 80% proposals have at least one contributor who is a woman)</p>	<p>Supporting EIT Health internal people committee</p>	<p>Q4 2024 Q4 2025 Q4 2026</p>

6. Innovation: promote gender equality and women's participation	Active outreach to and recruitment of female innovators through specific communication channels and dissemination opportunities	Assured gender balance in the CEOs/owners of innovative products/services designed or tested	Minimum 25% of innovative products/services designed or tested, having a woman CEO or owner by Q4 2024 (rate maintained across 2024-2026 reporting periods)	EIT Health functional units  EIT Health Communications units	Q4 2024 (2024 reporting period)  Q4 2025 (2025 reporting period)  Q4 2026 (2026 reporting period)
	Report on the number of EIT Health supported collaborative innovation project consortia focusing on Women's Health and/or FemTech topic areas and/or conditions disproportionately impacting women	Increased understanding of the impact of EIT Health calls for proposals in Women's Health and FemTech topic areas	# of innovation projects funded that address women's health issues (target at least one project addressing health condition that disproportionately impacts women)	EIT Health functional units	Q4 2023 – Q1 2024  Continuous 2024-2026
	Scope integration into relevant iterations of the EIT Health calls for proposals (e.g. Flagships Call with two-stage application processes) Support Programme a specific presentation on gender equality in the context of innovation processes through the invitation of an expert speaker, guiding innovation consortia through key considerations in incorporating gender dimension into their full proposals for submission at stage two	Incorporation of gender dimension is kept at the forefront of innovation proposals applications, and full proposals submitted for stage two evaluation meet the applicable gender-related criteria in the relevant ethical, legal and societal (ELSI) review processes	Gender equality session attended by all innovation teams partaking in any relevant Support Programmes, as appropriate  100% innovation projects passing through ELSI review process receive in their ELSI feedback favourable evaluation on gender equality and integration of gender dimension into the project (i.e. no proposal is flagged for lack of consideration for gender dimension in the ELSI review)	EIT Health functional units	Q2 – Q3 2024  Continuous 2024-2026
	Scope launching of an 'Innovation for Gender Equality' grant/prize/contest	Innovative approaches to addressing Gender Equality in the health sector are celebrated	Prize awarded and winner reported through external communications activity (social media communication or similar)	EIT Health functional units	Q2 2025



	<p>Assure focus on gender equality in EIT Health-supported activities through integration into EIT Health calls for proposals</p>	<p>Gender action and EIT KIC gender diversity value statement is streamlined into EIT Health programmes, leading to increased impact of the programmes</p> <p>Aligned EIT Health calls processes with EIT KICs call monitoring principles:</p> <ol style="list-style-type: none"> <li>1. The Call includes the EIT KIC gender diversity value statement and invites the applicants to share their gender equality policy/ measures ensuring gender equality and diversity management during the performance of the contract</li> <li>2. For Calls related to innovation, business creation &amp; acceleration and education activities design and implementation, as well as for HR and Communications services calls where applicable; the Call includes a requirement of a gender expertise within the team performing the contract.</li> <li>3. Gender dimension is incorporated into the aims of the Call. The Applicants are required to incorporate gender dimension into the design and implementation of activities (included intended impact, outputs, outcomes, beneficiaries).</li> </ol>	<p>EIT Health call(s) for proposals (e.g. Flagships Call) includes the EIT KIC gender diversity value statement</p> <p>EIT Health call(s) for proposals application form(s) (e.g. Flagships Call) invites applicants to share gender equality policy and measures ensuring gender equality and diversity, to be assessed as part of the appropriate self-assessment and/or ethical, legal and societal (ELSI) review processes</p> <p>EIT Health calls for proposals remain in compliance with EIT KICs call monitoring principles</p>	<p>EIT Health functional units</p> <p>EIT Health Gender Mainstreaming Coordinator</p> <p>Supporting EIT Health internal people committee</p> <p>EIT Health Management Board</p>	<p>Q4 2023 – Q1 2024</p> <p>2024-2026 continuous</p>
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	Measure participation of women in both applications and selected proposals in EIT Health call(s) for proposals	Increased availability of benchmarking data for the engagement of women in EIT Health proposals	<p># women in EIT Health proposal applications (target 80% proposals have at least one contributor who is a woman)</p> <p># women in EIT Health activities (target 80% proposals have at least one contributor who is a woman)</p>	Supporting EIT Health internal people committee	<p>Q4 2024</p> <p>Q4 2025</p> <p>Q4 2026</p>
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