

WGEA Gender Pay Gap 2024 Employer Statement

The George Institute for Global Health is a not-for-profit medical research organisation with a mission to improve the health of millions of people worldwide. Our workforce in Australia comprises almost 400 employees working in medical research, project management and professional service occupations. Our strategic areas of focus on equity, impact and resilience are key drivers of our success.

As a priority for our research, we are providing critical evidence to improve women's health and eliminate sex and gender bias in medicine through our research and advocacy that lead to improved treatments, more equitable healthcare systems and fairer policies in Australia and around the world.

Our organisation's values state our commitment to justice and inclusion, which are at the heart of our workplace policies, our research work and our culture.

We strive to achieve pay equity for our team no matter where they are based and regardless of their biological sex or gender identity.

We know that team members sharing and contributing their diverse views and perspectives enables innovation and collaboration, reflects our approach to our research work in communities all over the world, and increases our positive impact on some of the world's biggest health issues.

We are committed to eliminating our gender pay gap with a structured, accountable program of measures across all our offices and welcome this opportunity to provide an update on our progress in Australia.

Our gender pay gap

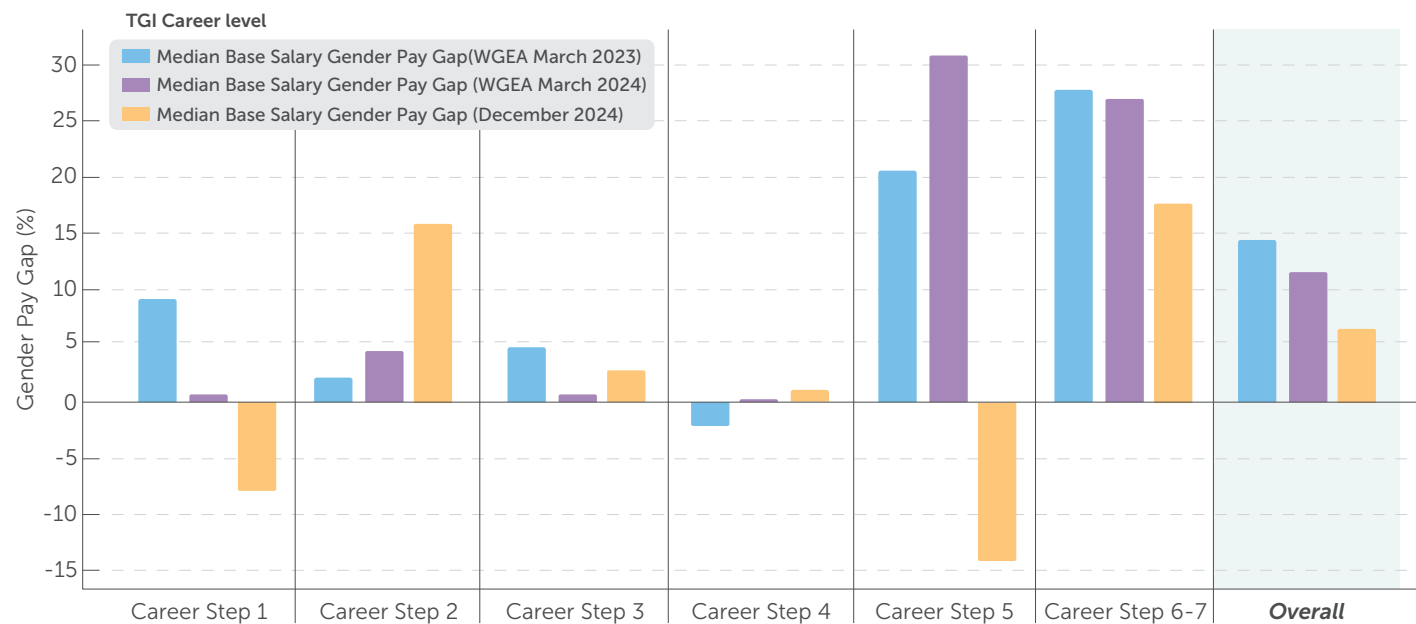
The gender pay gap is the difference in earnings between men and women* in the workplace, expressed as a percentage over men's earnings. It can be measured based on men and women's average or median earnings. The gender pay gap is different from equal pay, whereby men and women are paid the same amount for the same, or comparable roles.

As a result of ongoing efforts, our overall median and average base salary gender pay gaps at March 2023 were reduced by 3% and 3.98%, to 11.7% and 22% respectively by March 2024.

By December 2024, the gaps were further reduced by 5.6% and 4.2% respectively - our median gender pay gap at the end of 2024 was 6.1% and our average gender pay gap was 16.3%.

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Table 1. Gender pay gap comparison from WGEA submission dates 2023 and 2024; and December 2024 data



* Career step 6 and 7 data has been aggregated to protect the confidentiality of individual pay information.

In 2024, we took action to create better gender balance in the composition of our team members at early career levels as well as in our leadership by updating our recruitment process to provide more diversity in our recruitment longlist.

We also reviewed our workplace culture and policies to ensure we provide an environment that is attractive to women at all stages of their lives. This included launching our Reproductive Health Policy as well as updating our Respect at Work framework to strengthen capabilities on inclusive leadership, as well as putting in place additional pathways for reporting issues.

Understanding our gender pay gap

Workforce composition

Our Australian workforce is made up of approximately 75% women and 25% men¹. Our workforce consists of employees who work in academia (research), clinical trials operations (project) and professional roles (e.g. philanthropy, communications, legal and human resources). We refer to these groups as research, project, and professional job families. Progression within the organisation is structured according to career steps, starting from Foundation (career step 1) through to Executive (career step 7). While there has been improvement since 2023, the primary reasons for our gender pay gap remain an under-representation of men (24%) at early career steps (1 and 2); and under-representation of women (41%) at senior career steps (6 and 7).

At our senior career steps 6 and 7 we also have an over-representation of men in research (72% at December 2024). This is reflective of the medical research sector, where historically men have dominated senior leadership positions. According to a 2024 Association of Australian Medical Research Institutes report, 62.9% of senior academics were men and 37.1% were women.

¹ Note our workforce also includes non-binary team members, whom WGEA has excluded for now, as it works to establish a baseline.

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Our pay approach

Our pay approach is anchored in the principle of 'fair pay for all'. We use pay benchmarking to determine the relevant salary range in the employment market for each role, and place an individual's pay within this range, based on their skills, knowledge, and experience; this supports pay progression over time.

For each of our job families, the benchmarks are based on the industry sectors from which we employ people. That means for our research job family we use pay benchmarks from the university sector, for project and clinical operations roles, we use universities, clinical trial organisations and the public sector, and for our professional roles we use the general market. As the market informs our pay, there may be variances due to industries dominated by women vs men, contributing to a gender pay gap.

Our progress, aims, and actions

Over the next five years, we are committed to closing our gender pay gap, and to strengthening our practices and culture so that we have greater gender balance across all career levels and roles.

As part of our pay approach, we will undertake external benchmarking to inform our pay practices and decisions to ensure internal pay equity for like-for-like roles, skills, and experience. This approach has resulted in improvements in the median and average gender pay gaps over the last two years.

As reported last year, we have four key strategies to reduce our gender pay gap:

1. Accelerate career progression of women and appointment of women into senior leadership roles
2. Increase representation of men at early career levels
3. Seek greater gender diversity in all job families within professional and research roles
4. Ensure workplace policies attract and retain women at all life and career stages

1. Accelerate career progression of women and appointment of women into senior leadership roles

Part of our five-year people strategy is to develop and implement initiatives to improve diversity in our leadership group and to accelerate the advancement of women into leadership roles.

Since March 2023, senior academic and professional appointments and promotions have resulted more women in leadership roles (career steps 6 and 7) from 25% (March 2023) to 36% (March 2024) and 41% (December 2024).

We continued to deliver our Accelerate leadership program to support emerging leaders to develop the skills and capabilities they will need to move into leadership roles. The 2024 program included 9 women out of 15 participants. We have also continued our participation in Franklin Women's Mentoring Program that supports women to progress their career in the STEMM sector. Three women mentees from our organisation take part in the program each year. We also provide opportunities for three mentors to take part in the program. Through individual mentorship and coaching, the program provides clarity on the diversity of career pathways in the sector and support for individual leadership development.

2. Increase representation of men at early career levels

Currently men are under-represented at earlier career levels within the organisation. There has been a redesign of the recruitment process to ensure more men at early career steps are longlisted in the process. This has resulted in: a 15% increase in men being interviewed for early career levels and consequently an

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increase of approximately 20% of men being appointed to early career level positions in 2024; and an overall increase in men in early career level positions by 4% to 24% by December 2024.

3. Attract and retain gender diversity across all roles within the professional job family

We know that diverse teams are better able to drive innovation and deliver better outcomes. While acknowledging that we still need to improve our gender balance for teams that are dominated by either women and men (for example, IT and Project Operations), there have been improvements in the gender diversity of our professional roles.

As of December 2024, HR increased its male representation by 5.5% over March 2024, with the team now having 28.6% men; Research and Professional Support Services (administration) have increased male representation by 18.9% with the team now having 30% men; and Finance have increased proportion of women by 14.1% to 36%.

4. Ensure our workplace policies attract and retain women at all life and career stages

We recognise that providing a workplace that supports women at all stages of their life and career is more likely to be an attractive choice for potential employees. Beyond supporting career progression, we are focusing on practices and policies that continue to support our ability to attract and retain women. In 2024, we:

- Increased our parental leave offering from 12 weeks to 18 weeks plus superannuation to enhance our support for women who undertake primary caring responsibilities, as well as encourage more men to take parental leave. In 2024, men make up 23% of parental leavers, compared to no men taking this leave in 2023
- Strengthened our emphasis on providing a safe and inclusive culture through the launch of our Respect at Work framework. The inclusivity training for team members and people leaders, as well as multiple reporting pathways reduces attrition risks and strengthens leadership capabilities
- Launched our Reproductive Health Policy in recognition of the specific health challenges which can arise throughout the reproductive and post reproductive years. Since its launch in May 2024, approximately 9% of people utilised this leave in Australia.
- Our other actions will include ongoing feedback via consultations and surveys to understand the specific experiences of women and other dimensions of diversity such as caregiving status.

Understanding experiences of women and other groups will ensure we provide an environment that supports their needs. The survey will provide data to help us understand what is working well and what specific actions we need to take to address any concerns or barriers.

Disclosure

The information in this statement is accurate at the time of publishing and is approved by Sarah Bench, Chief People Officer, The George Institute for Global Health.