




**Review****Gender Mainstreaming in Health**Fikriye Işık<sup>1</sup> , Mithat Kıyak<sup>2</sup> , Mustafa Işık<sup>3</sup> <sup>1</sup>Health Management Program, Health Sciences Faculty, Istanbul Okan University, Istanbul, Turkey<sup>2</sup>Department of Public Health, School of Medicine, Istanbul Okan University, Istanbul, Turkey <sup>3</sup>Health Management Department, School of Economics and Administrative Sciences, Istinye University, Istanbul, Turkey.

**Abstract:** The study aims to evaluate gender inequality faced by women working at healthcare services sector and to create awareness. The term “gender” expresses the socially determined roles and responsibilities of women and men and it may vary among populations and over time. Gender equality can be ensured not only through access to healthcare services, professional equality, justice and equity, but also by equal distribution of responsibilities and income between men and women. The study reviewed the literature particularly by screening the recently printed papers on gender mainstreaming, especially in association with the health sector. According to World Economic Forum Global Gender Gap 2020, Turkey is ranked 130 among 153 countries in terms of gender equality. This fact may be secondary to low engagement of women in the labor force. Although working hours of men and women are equal in Turkish health sector, the monthly wage equals to 201.9 hours for men and 200.5 hours for women. Another indicator of gender gap is the gender-based violence against women. According to a study conducted by Ministry of Health in 2018, women are mostly exposed to violence in health sector by 62.5%; 48.1% of healthcare professionals are exposed to verbal violence and 64.9% of crimes of violence are committed by men. Women account for majority of professionals employed in health sector. Considering their health professions, approximately 70% of nurses are women, while the figure is 100% for midwives and approximately 50% for medical doctors.

In conclusion, gender-based discrimination may occur in terms of taking advantage of the opportunities, allocation and use of resources and access to services. Women are far worse affected by aforementioned discrimination, as they are more disadvantageous and have lower social status than men. This study advises a perspective that focuses on “gender parity” better regarding policies, strategies and processes in the delivery of healthcare services.

**Keywords:** *Gender; health; gender gap; gender mainstreaming*

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## 1. Introduction

On the contrary to the biological sex, gender gap emerges in the socialization process; therefore, it may or may vary among populations and cultures. Gender configures life of both men and women and ultimately, the diversity conveys a meaning that determines the gender gap in terms of access to resources beyond just “being different”. This gap is prominently represented in the distribution of income. Today, women account for 70% of poor people worldwide. The situation, also called “feminization of poverty”, applies to both rich and poor countries and it is an indicator that reflects the unequal status of women in work life and low status at home.

Although many women have no employment opportunity, female employees are paid an amount that is, averagely, three-fourths of the income gained by men (SBU, 2017). Globally, women account for half of the world population but they represent 1/10 of global income, 2/3 of working hours and 1/100 of properties (Akin, 2010). Their social status is low, while the life expectancy is longer but quality of life is poorer.

## 2. Gender Mainstreaming in Health

Healthcare sector is among professions that are obliged for uninterrupted services both in our country and at global scale. Operations modes are irregular and professionals face busy schedules due to the quality of the service. Healthcare professionals, while rendering healthcare services for patients, are at greater risk of occupational accident and disease along with professional deformation than other professions. One of the factors that lead to common existence of such problems in the sector is the insufficient increase of qualified personnel despite the recent climb in the demand to the healthcare.

Although number of medical doctors and nurses per patient is very high in our country, these two professions are so wearing and deterrent, as they need to undertake the roles that are beyond their professions. When Turkish data is compared to the health data of OECD, number of persons per medical doctor is 498.2 and mean 341.3 for Turkey and OECD, respectively. Moreover, number of persons per nurse is 431.2 in Turkey, while the figure is mean 102 in OECD countries (OECD, 2018).

## 3. Role of Woman in Healthcare Sector Regarding Professional “Feminization”

Woman is responsible for “care” of households according to the gender roles that have differentiated over historical process. Households include children, husband, elders and sick family members. Therefore, “care service” has been existing worldwide since very ancient times. Today, nursing care is the profession that clarifies this situation best (Eser, 2017). Gender roles differentiate in medicine. Men prefer surgical departments more, while women take part rather in medical departments. Here, the exception proves the rule. For example, there are more women in gynecology and obstetrics and pediatric surgery comparing to other surgical departments. Female medical doctors prefer departments that are characterized by less burden of night shift, less invasive procedures and less wearing (Urhan and Etiler, 2011). Female medical doctors also prefer pediatrics, family medicine, gynecology and obstetrics, dermatology and otolaryngology that are more compatible with female role and are not dominated by men (Ünver et al., 2010). A journal

published in British Medical Journal (Wallis et al., 2017) compared male and female surgeons regarding patients undergoing elective surgeries, post-operative morbidity, post-discharge re-hospitalization and one-month mortality. Although there was no difference between male and female surgeons in terms of post-operative morbidity and re-hospitalization, post-operative month 1 mortality was significantly lower for patients operated on by female surgeons than the patients operated on by male surgeons (TTB, 2019).

Number of female medical doctors with managerial positions, such as head of institute, dean, head of department, chief doctor and deputy chief doctor in universities, medical faculties and teaching and research hospitals, is disproportionately lower than number of female medical doctors working in the field of medicine. For example, only 3 of 10 deputy chief doctors are female in a teaching and research hospital, where the chief doctor is man; moreover, there is no female manager in many organizations (TTB, 2019). Considering participation of women to decision-making processes, there are 38 senior managers in Central Organization of Ministry Health; excluding the staff with no clear detail or empty positions, it is determined that only one of 24 senior managers is a woman (Danayiyen and Kiyak, 2017).

According to 2018 statistics of Ministry of Health, number of medical doctors, nurses, midwives and other healthcare professionals working at all sectors (public, university, private) are 91,559, 126,891, 52,495 and 121,206, respectively (Health Statistics, 2018). Women account for majority of professionals employed in health sector. According to OECD data, women represent 40% of all medical doctors in Turkey (Orhan and Yücel, 2017). Considering their health professions, approximately 70% of nurses are women, while the figure is 100% for midwives and approximately 50% for medical doctors (İlkkaracan, 2010). When the profession of health is compared with other fields, it is characterized by highest working hours, mean 42.5 hours per week. As already known, upper limit of the legally allowed working hours per week is 45 hours. Turkey is also characterized by highest working hours in healthcare sector among European countries (Etiler, 2012). Although working hours of men and women are equal in Turkish health sector, the monthly wage equals to 201.9 hours for men and 200.5 hours for women (Etiler, 2015). Another indicator of gender gap is the gender-based violence against women. According to a study conducted by Ministry of Health in 2018, women are mostly exposed to violence in health sector by 62.5%; 48.1% of healthcare professionals are exposed to verbal violence and 64.9% of crimes of violence are committed by men (TTB, 2019).

## Conclusion

Gender-based discrimination deprives women of the right to life and education as well as professional life, equal wage and participation to decision-making processes, briefly of "benefiting from human rights". Gender of a person may be the underlying cause of discrimination regarding use of opportunities, allocation of resources and access to services in the field of health. Women are worse affected by aforementioned discrimination, as they are more disadvantageous and have lower social status than men. Considering the health sector, women should be allowed to take managerial roles along with being a labor force and their way should be smoothened in educational and scientific fields. The fact that female labor is both quantitatively and qualitatively intense in health sector clearly reveals out the importance of gender mainstreaming problem. The most effective way to ensure gender parity is to develop policies

that take the gender mainstreaming into account and to integrate a perspective that focuses on gender mainstreaming into laws and programs of the country.

### **Conflict of interest**

Authors declare no conflict of interest

### **References**

Akın, A. (2010). Combating gender discrimination in medicine. Female Medicine and Female Health Congress, Ankara.

Danayiyen, A., Kıyak M. (2017) Gender mainstreaming: how can we make health policies sensitive to gender?. 1st International 11th Health and Hospital Administration Congress (Full Text Paper / Verbal Presentation) (Publication No: 4496003)

Eser, G. (2017). Emotions, gender and stress. Beta Yayınları, İstanbul

Etiler, N. (2012). Effects of neoliberal policies on healthcare professionals: feminization of health sector. 3. Female Medicine and Female Health Congress (Verbal presentation).

İlkkaracan, İ. (2016). Analysis of İstanbul labor market from perspective of gender mainstreaming. "more and better work for women: Strengthening Women for Decent Work in Turkey" Project.

OECD, 2018 indicators. <https://data.oecd.org/healthres/doctors.html> (accessed 10 May 2019)

Orhan, B., Yücel, Ö. (2017). Gender-based perspective of delivery of healthcare services in Turkey. Marmara University Woman and Gender Investigations Journal, 1, 53-59. Doi: 10.26695/Mukatcad.2017.5

Ministry of Health, Health Statistics Annual 2017 Bulletin, <https://dosyamerkez.saglik.gov.tr/Eklenti/27344,saglik-istatistikleri-yilligi-2017-haber-bultenipdf.pdf?0> (accessed 10 May 2019)

Turkish Medical Association. (2019). Turkish Medical Association, Branch of Medicine and Female Health and Antalya Branch Office, "Workshop on Being a Female Medical Doctor", Result Report.

Urhan, B., Etiler, N. (2011). Gender-based analysis of female labor in health sector. Working and Society Journal, 29(2), 191-216.

Ünver, S., Diri, E., Ercan, İ. (2010). Social perspective of male members in the profession of nursing. Türkiye Klinikleri J Med Ethics, 18(2), 96-120

Wallis, C., Ravi, B., Coburn, N., Nam R., Detsky, A., Satkunasivam, R. (2017). Comparison of postoperative outcomes among patients treated by male and female surgeons: a population based matched cohort study. British Medical Journal, 359. Doi: <https://doi.org/10.1136/bmj.j4366>