





EDİTÖRE MEKTUP / LETTER TO THE EDITOR

The urgent need to formulate and implement gender-transformative strategies in the health sector

Sağlık sektöründe toplumsal cinsiyet dönüşümündeki stratejileri formüle etmek ve uygulamak için acil gereksinim vardır

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To the Editor,

Amidst the demographic transitions and the rising health care needs, it has been estimated that more than 40 million new vacancies will be created in the health and social sector across the world¹. At the same time, it is important to understand that there will be a shortage of almost 18 million health workers, who will be required to meet the universal health coverage, predominantly in the low & middle income nations¹. Keeping these facts into account, it is quite obvious that there is a significant disparity between the need and the availability of the health workers and it won't be addressed till specific targeted interventions are planned and implemented^{1,2}.

Further, it has been reported that female health workers are exposed to a wide range of constraints and barriers which their male counterparts never experience, which in turn jeopardize their quality of life, influences gender equality and also interferes with the health care delivery^{2,3}. With regard to the female health workforce, horizontal and vertical segregation of the work assignments, stereotyping of the work, lesser paid jobs, lower positions in the job hierarchy are quite universal³. In addition, a major proportion of health workforce during conflicts / emergencies is females and thus their involvement in each front is crucial¹.

It is quite surprising that, even though, women constitute 7 out of 10 health workers across the world, but then only 25% of them have been assigned senior job positions¹. At the same time, various socio-

demographic attributes (viz. class, race, etc.) affects the leadership status¹⁻³. Moreover, the issue of sexual harassment and lack of legal provisions or social protection plays an important role in widening of the gap of gender inequality¹. Also, a significant difference in the salary between the two genders has been reported¹.

Acknowledging all these problems and the current fact that even though women deliver health, men are leading it, the time has come to change the existing trend^{1,2}. There is no doubt that once women start equally participating in the formulation of national health policies, the health system will be efficient^{2,4}. There is an immense need to document and acknowledge the contribution of women health workers and ensure that they become a part of the formal sector^{1,4}. Measures should be taken to enable adoption of gender-transformative strategies (to stabilize the health system and workplace for a dignified work profile for women)¹.

In addition, there is a definite scope for widening of the research dimension, wherein more emphasis should be given towards low & middle income nations, collection of gender-based statistics and formulation of appropriate policies which are required for ensuring gender equality¹⁻⁵. However, for all this to happen, there is an indispensable need to have sustained political support and collaboration from the concerned stakeholders^{1,4}.

In conclusion, gender inequality in the health sector is bound to affect the accomplishment of universal

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health coverage. It is high time that the policy makers realize the gravity of the problem and formulate gender-transformative measures for bridging the existing inequality.

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REFERENCES

1. World Health Organization. Delivered by women, led by men: A gender and equity analysis of the global health and social workforce. Geneva, WHO, 2019.
2. Shrivastava SR, Shrivastava PS, Ramasamy J. Working together to accomplish gender equality in health: World Health Organization. *Ann Trop Med Public Health*. 2016;9:286-7.
3. O'Dowd A. Health organisations are slow to tackle gender inequality in workforce, report finds. *BMJ*. 2019;364:l1084.
4. Shrivastava SR, Shrivastava PS, Ramasamy J. Strategies to ensure gender equality in the health sector. *Sudan Med Monit*. 2015;10:35-6.
5. Stoet G, Geary DC. A simplified approach to measuring national gender inequality. *PLoS One*. 2019;14:e0205349.