



Human Resources for Health and Gender

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Outline of Presentation

- Background
- Engendering Health workforce policy
- Engendering health workforce development and retention initiatives
- Engendering Health institutions
- Key Recommendations

Background

- Gender has not been given due emphasis in the HRH arena
- Some professions within the health sector are dominated by one gender category, which has led to care giving jobs, community work be done by women only, and operations, treatment executed by men
- Men interested in care provision and women interested in treatment and operations are victimized by the stereotyping of the professions with specific gender
- As one climbs up the health workforce career ladder, women increasingly become the minority
- Women often enter the health sector career with generally lesser qualifications than men

Fig.1. Distribution of female health professionals by WHO region

Source: WHO 2006: 6, Global Atlas of the Health Workforce

(<http://www.who.int/globalatlas/default.asp>, accessed 19 January 2006)

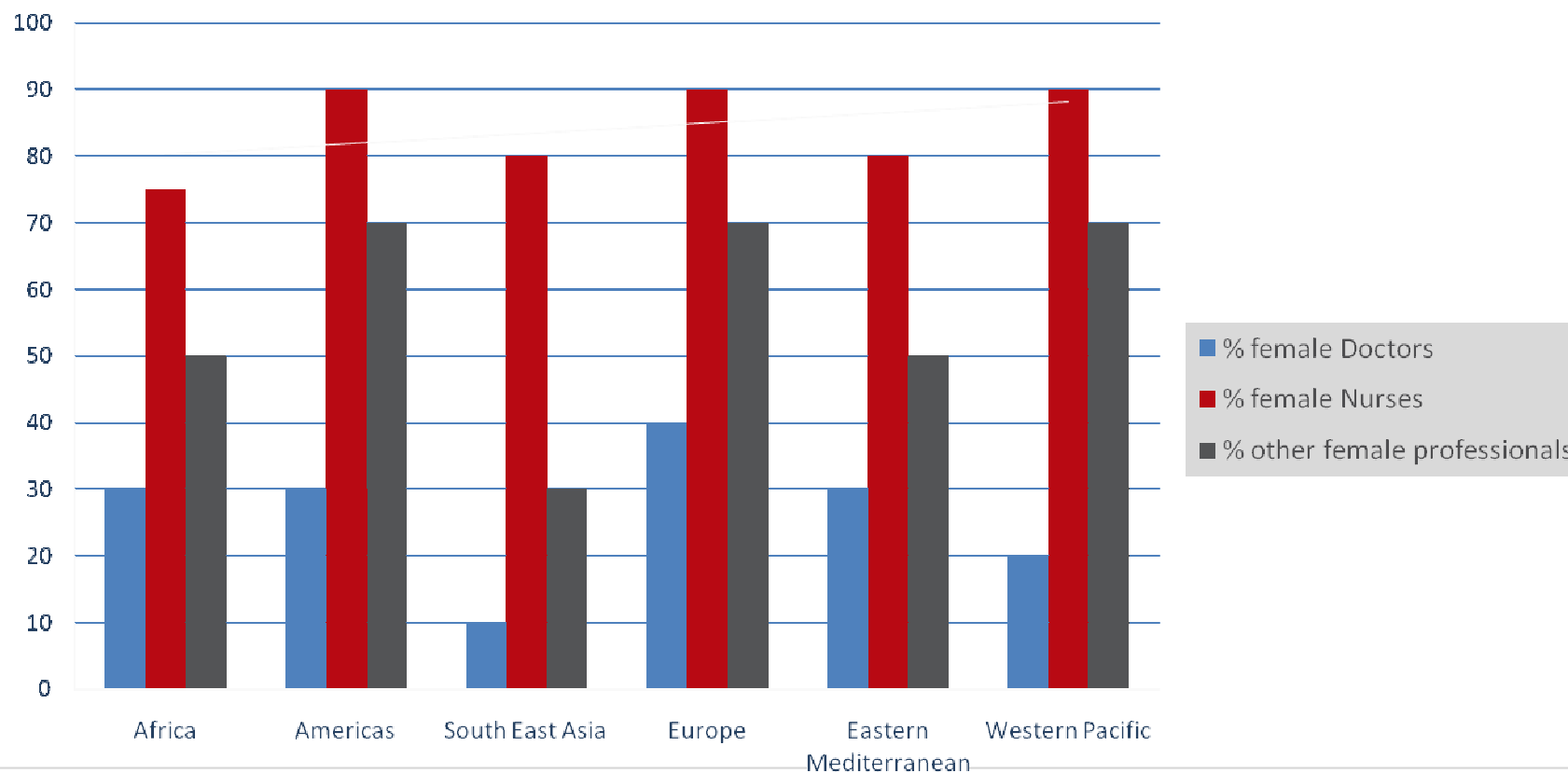
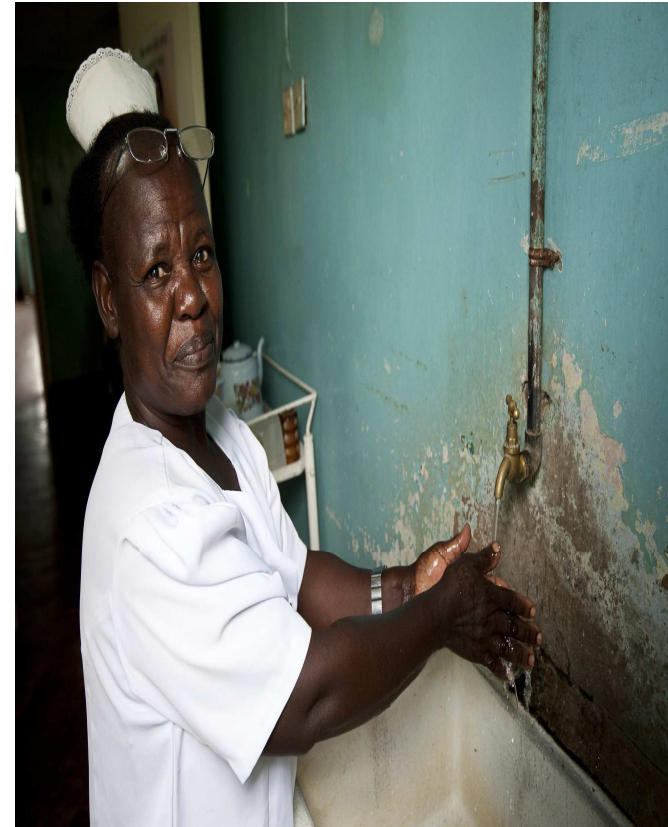


Table1. Percentages of female doctors in different countries.

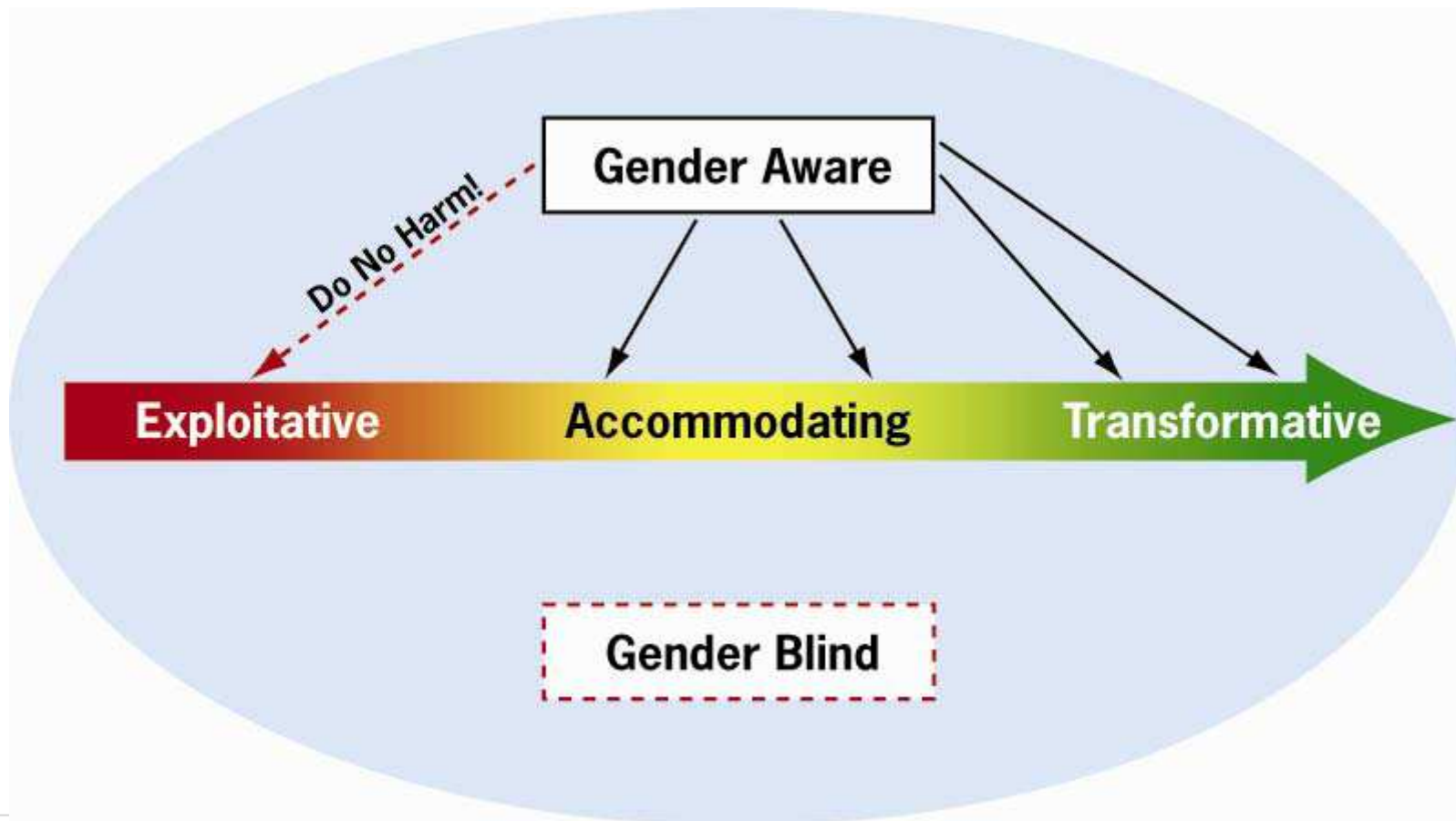
Country	% of female doctors	Source
India	40	Baru 2005
Egypt	35	Nasser et al 2000
Lebanon	16	Kasser et al 2006
Costa Rica, Chile, Uruguay	30-50	Knaul et al 2000
Nicaragua	41	Nigenda & Machado 2000
USA	23	Gupta et al 2003
Canada	33	Adams 2005
UK	35	Gupta et al 2003
Denmark	31	Gupta et al 2003
Netherlands	30	Gupta et al 2003
Russian Federation	67	Gupta et al 2003

Background ctd...

- Women leave and re-enter the health workforce at different times due to their reproductive roles.
 - This results in their foregoing training, career development and promotional opportunities
- Country HRH policies and strategies do not often have gender considerations, reflecting national role model biases
- Women's social status affects the extent to which efforts to mainstream gender in HRH strategies of countries are successful
- HRH policies, from career development, to performance improvement and retention need to be based on gender norms and designed to address gender equality



Gender Continuum



Engendering Health Workforce Policy

- HRH leaders should view gender inequality as a key barrier to workforce entry, re-entry and retention, requiring policy and program responses.



Engendering Health Workforce Policy

Key Elements of a Gender-sensitive Health Workforce Policy

- Consider barriers to gender equality in strategies and operational plans
- Identify key stakeholders and advocate for addressing gender equality in HRH recruitment, development and retention efforts
- Advocate for a system that is built to narrow the gender gap in the health workforce both in pre service and in service
- Incorporate gender budgeting considerations in the HRH Strategy

Engendering Health Workforce Development and Retention Initiatives

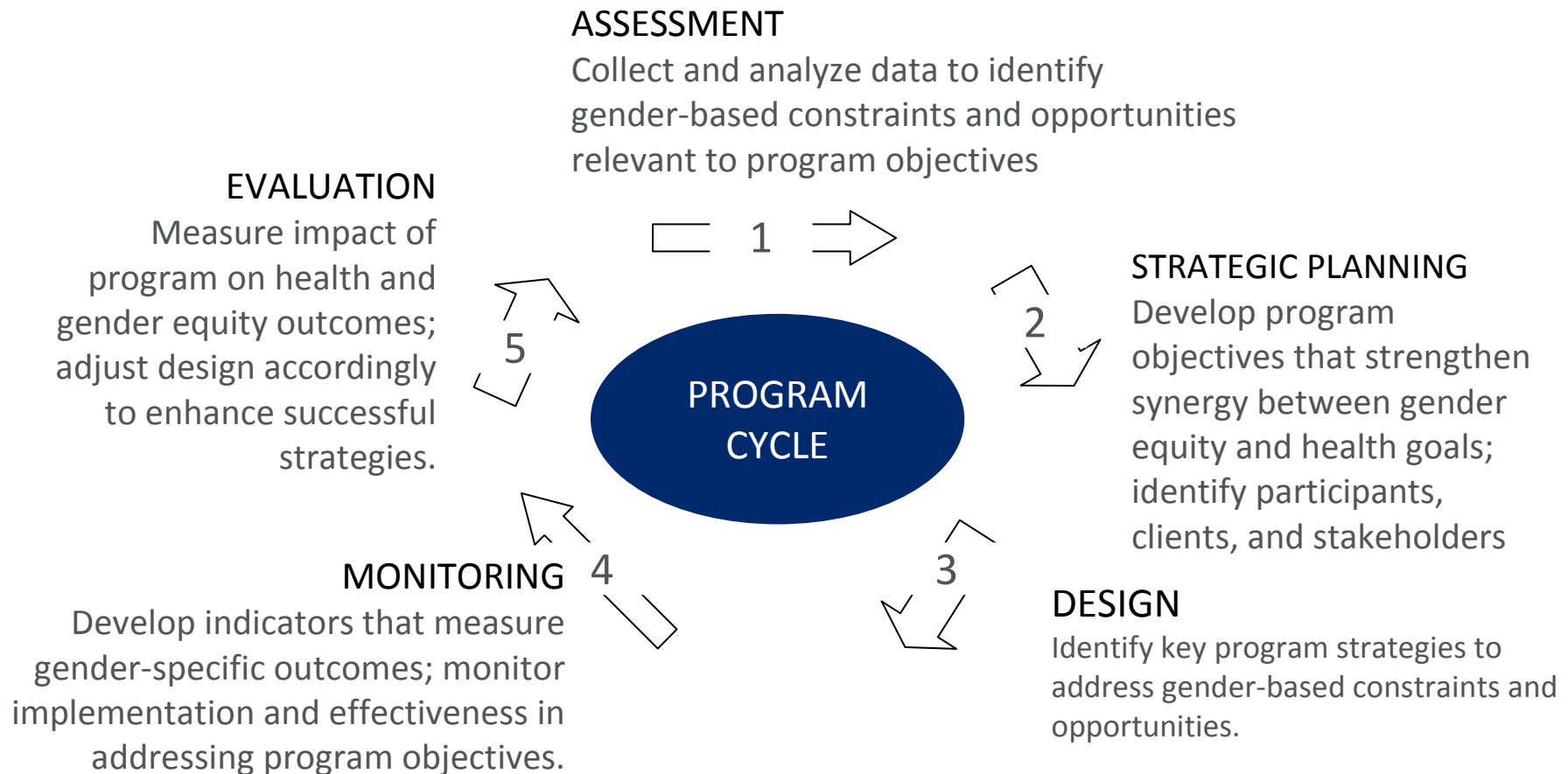
- Countries have embarked on multiple initiatives for health workforce development ranging from training increased numbers of health workers for replacement needs, to task shifting
- These HRH training initiatives do not typically reflect awareness and response to societal gender barriers



Engendering Health Workforce Development and Retention Initiatives (Continued)

- Health systems need to use HRH effectively; worker retention is key to an uninterrupted provision of health care
- This means understanding the dynamics of gender in deployment and work assignments such as:
 - needs of female health workers in leaving and re-entering the health workforce
 - family responsibility and care female health workers shoulder

Gender Integration Can Begin Anywhere in the Program Cycle





Key areas to consider are:

- Discrimination Based on Marital and Pregnancy Status and Family Responsibilities
- Occupational and Task Segregation
- Wage/Remuneration Discrimination
- Gender Stereotyping
- Sexual Harassment and Assault

Engendering Health Institutions

- Health institutions are often “gender blind” in providing health services, monitoring and reporting results as well as managing HRH.
- Increasing awareness of the role of gender among key health managers is vital to address discrimination
- Policies should be gender sensitive and equity based, including:
 - equal wages for equal work;
 - taking into account gender considerations in assigning tasks
 - participation of male and female health workers in the management of health institutions
 - creation of a supportive environment for female workers leaving and re-entering the workforce due to family responsibilities)

Key Recommendations



- **Policy/Planning:** Strengthen HRH policy and planning to promote gender equality
- **Workforce Development:** Increase gender integration/ decrease segregation in education, training and work
- **Workplace Support:** Create more supportive, fairer and safer work environments



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