Women in healthcare still face barriers to advancement

While globally women now make up 70% of the health and social care workforce and deliver care to approximately five billion people, they still face persistent barriers to their advancement.

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According to the World Health Organisation (WHO) report *Delivered by women and led by men* women in healthcare still face a lack of support and recognition, segregation into lower-status jobs in health, discrimination, and in some contexts, constant threats of violence.

More recently the Covid-19 pandemic has placed a disproportionate burden on women healthcare workers.

Covid-19: adding to women's work

Prof Laetitia Rispel from the School of Public Health at the University of the Witwatersrand (Wits) points out women have to deal with increased workloads, having to work extra hours in their jobs and deal with extra work at home.

"We need to insist that women are fully involved in the rethinking and redesigning of the post-Covid-19 world of work," she says.

"For women to survive in healthcare, they need support networks, mentors and like-minded people who can help them

throughout their career journey.

"Self-care is often overlooked but is an important aspect to consider in women's healthcare," she adds.

Decline in female representation

Dr Boitumelo Semete-Makokotlela, CEO of the South African Health Products Regulatory Authority (SAHPRA), laments the gradual decline of female representation in health sciences over the course of their careers, and attributes this to lack of support.

"Women may leave their careers to start or care for their families and never return, not because they don't want to, but because they have to do it on their own," says Semete-Makokotlela.

"To address some of these challenges, companies need to consider flexible working hours and the option of working remotely, for women to effectively juggle their careers with the added family responsibilities they face.

"We need to recognise that women wear multiple hats and that not all women have support," she says.

Frequently discouraged

Hugette Diakabana, co-chair of the WHO Digital Health Technical Advisory Group, notes that in the technology space, one of the primary reasons for the under-representation of women is that entry requirements are too stringent.

"Even when women have the ability, they are frequently discouraged and told that they lack the necessary qualifications.

"Men with lower requirements, on the other hand, continue to enter the tech industry," says Diakabana.

Diakabana encourages young women to enter the space and refuse to be put off by entry requirements.

Women to empower themselves

Dr Angelique Coetzee, national chairperson: South African Medical Association (SAMA) and the first woman to chair the organisation in over a century, says it should not have taken this long for women to hold senior positions.

Coetzee is of the view that it is not up to men to ensure women's empowerment, but rather it is up to women to ensure their own advancement.

"A big challenge for women in decision-making positions is that even in those leadership positions, women still have to fight, and when they do, they are perceived as emotional. These, and other unconscious biases, must be addressed," notes Coetzee.

Reframe the narrative

This discussion took place at a recent Board of Healthcare Funders' (BHF) Women Empowerment Workshop.

The panellists concur that self-care is often neglected by many women in healthcare services, yet is among the most crucial of issues in enabling the psychological well-being of women in leadership positions.

"The time has come to reframe the narrative; as a majority women should drive global health and be viewed as proponents of change, not victims.

"Gender equality is a precondition to achieving 'health for all' by 2030, hence we cannot afford lip service but need gender

equality commitments that go beyond the rhetoric with action and financing," state the panellists.

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