



2021
INTERNATIONAL
YEAR OF

HEALTH AND CARE WORKERS

Support them so they can support you!



Promoting gender equality for rural women

through health workforce policies to develop, attract, recruit and retain health workers in rural and remote areas

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Protect. Invest. Together.

Rural health and health workforce

Almost half the world's population live in a rural or remote area

Low health workforce densities



Only 1 in 3 nurses work in rural areas

In some rural areas access to health workers is **10 times lower** than urban areas

There is a mismatch between the need for, demand for and supply of health workers in rural areas.

Developing, attracting, recruiting and retaining health workers in rural and remote areas to deliver PHC and UHC

Health systems outcomes



2 billion people with limited

access to essential health services in rural areas



- -Unmet health needs
- -Decreased life expectancy
- -Higher under-5, maternal and preventable mortality

Socioeconomic disadvantages



8 out of 10 of world's extremely poor live in a rural area

Higher rates of unemployment and underemployment

Far-reaching consequences on:

- health
- global health security
- development















Gender and the rural health workforce

- Almost 70% of the global health workforce are women
- Gender dynamics play an important role in the rural health sector:
 - gender norms and stereotyping
 - educational and training opportunities
 - living and working conditions

- unpaid care
- safety and security
- employment and workplace bias



"Considering race, gender, ethnicity, language, sexuality, disability and sociodemographic background of community and health workers is an important component of the acceptability of care" – WHO, 2021





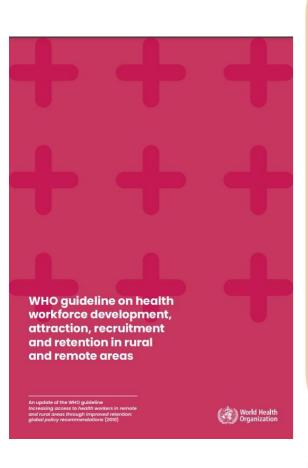








Good Practice Statement and Recommendations



Good practice statement

Interventions should be interconnected, bundled and tailored to the local context

- Whole-of-government and whole-of-society approach
- Consider gender, equity and rights, along with the roles and responsibilities of health workers and rural communities
- Consider impact of policies on different health workers and sociodemographic characteristics including gender, age, class, ethnicity, migration status, civic status, language, sexuality, disability and religion



Education – 5 recommendations

Selection, development and training of students



Regulation – *4 recommendations*

Regulatory and government policies



Incentives – 1 recommendation

Financial and non-financial incentives



Personal and professional support – 7 recommendations

Policies to protect, support and assist rural health workers

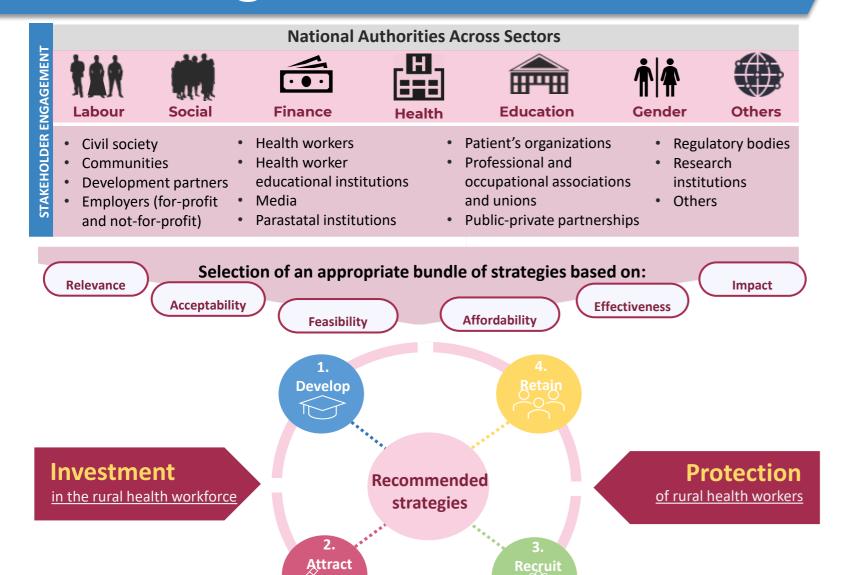
Source: WHO (2021)

https://apps.who.int/iris/handle/10665/341130

Overarching principle for the formulation of policies:

Acknowledge the pervasive gender dynamics and resultant occupational segregation by gender in the health sector and respond accordingly to ensure that women in the workforce are adequately valued, supported, protected and promoted.

Dialogue and actions

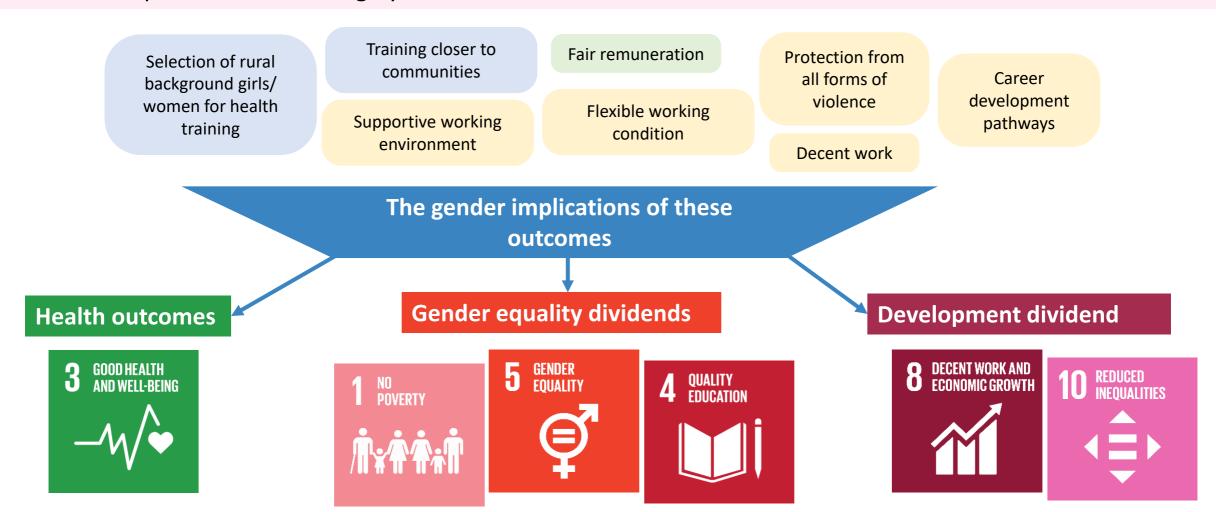


Guiding principles for formulation of policies

- Gender, equity and rights e.g. include women in decision making, consider policy impact on gender
- Strengthen human resources for health management
- Harmonize with national health plan
- Monitor and evaluate selected bundle

Gender transformative rural health workforce policies

 Ensuring that women in the workforce and students undergoing training are adequately valued, supported, protected and promoted will be highly beneficial to rural and remote communities



Conclusion





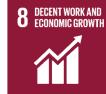
- National and global health and sustainable development goals cannot be achieved with health workers.
 - Most health workers and carers are women
 - Women in rural health workforce are essential to achieving UHC and SDGs

















Thank you!