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WOMEN'S HEALTH AND GENDER INEQUALITIES

Gender equality by 2045: reimagining a healthier future for women and girls

Gender equality is achievable and an imperative

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The Generation Equality Forum in Paris on 30 June–2 July 2021 marks the 25th anniversary of the Beijing Platform for Action on Women. The 1995 event was a milestone for advancing women's rights,¹ but it is disheartening that still not one country can claim to have achieved gender equality.

By 2045 most global leaders will be too young to remember the Beijing declaration, but the global community will have failed if gender inequality is still widespread. In this future we expect deaths from childbirth—particularly among women in the poorest households and countries—to be rare events. HIV and other sexually transmissible infections among young women and girls should have fallen drastically. We expect women and girls of reproductive age to have full control over their own reproductive decisions and nearly all to have their need for modern contraception met. Early deaths and severe disability attributable to non-communicable diseases such as cardiovascular diseases, chronic obstructive pulmonary disease, and poor mental health should have declined. In most countries, women and girls will be living safe, violence-free lives. We expect good progress in the development of green technologies, and that outbreaks of infectious diseases such as covid-19 will be quickly contained because the world will be better prepared.

This optimistic vision of 2045 can be a reality, and we already know how to get there.

Realising the vision

The covid-19 pandemic has been a serious setback for gender equality and women's health. However, progress is still possible. The first requirement is that paid employment and unpaid care work are valued equally, recognising the fact that many women are not employed or work in informal sectors and that women bear a disproportionate burden of unpaid care work.

Universal coverage for health and social protections could also improve gender equality and health equity. For this to happen, sexual and reproductive healthcare must be included in essential services, and social protection policies should include provision for child care; paid parental, sick, and family care leave; and an old age pension.² Health services and health insurance funded through tax based systems, including for informal work sectors, will also benefit women.³ Particular focus is required on people facing intersecting forms of discrimination

because of age, ethnicity, migration, sexual orientation, and gender identity, among others.

Bodily autonomy—enabling women and girls to make informed sexual, reproductive, and healthcare decisions—requires that all children, especially girls, complete secondary school and receive comprehensive sexuality education.⁴ Harmful gender norms, particularly those related to masculinity need to be shifted through changes in individual attitudes, community beliefs, and government policies, enabling men to share more equitably in care work and making norms that privilege men and condone violence against women unacceptable.⁵

Covid-19 has highlighted the importance of strengthening health systems to mitigate the harms caused to women and girls during crises. Better prepared health systems can offer uninterrupted essential services for women and girls when they need it most, including services for victims of gender based violence. Strengthening health systems means ensuring safe, decent working conditions for female healthcare workers, who make up the majority of the workforce. This includes preventing sexual harassment and violence, ensuring women have appropriately designed protective equipment, eliminating the gender pay gap, and adequately remunerating women for care work.⁶

Research, development, and innovations for health must explicitly address sex or gender differences. A legacy of male bias in the development of vaccines, drugs, and diagnostics makes for poor science and has neglected the health of women and girls. Equitable access to digital technologies is also needed, along with measures to ensure online privacy for women and girls.⁷ Although green technologies are expected to benefit all, investments that will benefit women, such as clean cooking fuels to reduce indoor pollution, can't be overlooked.

Commercial determinants of poor health must be tackled to help reduce the prevalence of non-communicable diseases and keep prevalence low, including the strict regulation of the marketing and pricing of harmful substances such as alcohol, tobacco, and sugar.⁸ Further, the exploitation of harmful gender norms by industries producing these products must be explicitly tackled.

Staying on track

Ultimately, governments are responsible for driving the scale of change needed to achieve the vision of the Beijing declaration. Many have already committed

to this vision by 2030 through the sustainable development goals. What can be done to keep them on track?

Investing in feminist movements, which have been instrumental in fostering progressive changes towards gender equality, is crucial. Yet financing for feminist movements accounts for just 1% of the overseas development assistance allocated to gender equality programmes.⁹ Adequate long term financing of feminist movements is key to holding governments accountable.

Despite many calls for more women leaders at the top of global institutions, most are still led primarily by men from the global north.¹⁰ Accelerating the pace of change towards a diversity of women, equally represented as leaders of governments, health and development agencies, and other global organisations, is long overdue.

The goal of gender equality in health for women and girls within 25 years is not out of reach. We know how to achieve it, and future generations are entitled to nothing less.

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