

## Gender equity in health and health care

*This is one of two statements on gender equity. Refer to “Gender equity in the nursing and health workforce” for more on gender equity in relation to the nursing workforce and leadership.*

Gender equity is the fair treatment of women, men and gender-diverse persons<sup>1</sup>. Gender is a major social determinant of health across the lifespan and impacts health status, exposure to risks and protective mechanisms, and access to and experience of health care services. Gender inequity is pervasive in all areas of society and is one of the most harmful social injustices globally. The lack of access to services by women, low socio-economic status and societal values that tolerate violence, sexual abuse and other violations of women’s rights have a direct impact on the health of women and girls. A large study across four continents found that health systems reinforce traditional gender roles, neglect gender inequalities in health and that clinic-based programmes are rarely gender responsive.<sup>1</sup>

Gender equality and the right to health are both fundamental human rights under international human rights laws. Women’s human rights include the rights *without discrimination* to: equality, dignity, autonomy, information, bodily integrity, respect for private life, the highest attainable standard of health, including sexual and reproductive health, and freedom from torture and cruel, inhuman and degrading treatment.<sup>2</sup> The nursing profession acts to uphold these human rights when delivering nursing care as well as through their contribution to policies, legislation and research in gender equity and the health and wellbeing of women and gender-diverse persons.

Women and gender-diverse persons have been marginalized and discriminated against across many societies causing them to face unique issues. All genders face significant health disparities between them that come from both social and biological

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<sup>1</sup> Gender identity is a person’s deeply felt internal and individual experience of gender. A gender-diverse person is an individual whose gender identity is outside of the perceived gender norm i.e. transgender, non-binary, two-spirit.<sup>1</sup>

causes.<sup>3</sup> For example, compared to men, women have greater mortality from myocardial infarction, are more frequently left undiagnosed from chronic obstructive pulmonary disease (COPD) and left untreated for strokes, experience delayed or missed dementia diagnosis, are left untreated for type 2 diabetes and have a higher prevalence of depression.<sup>4</sup> Men have younger ages of onset for cardiovascular diseases, heart attacks and strokes, higher prevalence of COPD, more lethal suicide attempts, higher prevalence of aggression, violence, substances abuse, and risky behaviours.<sup>4</sup>

One in three women will experience gender-based violence (GBV) in their lifetime, with high rates of intimate partner violence and non-partner sexual violence.<sup>5</sup> Modern slavery of women and girls, including human trafficking for forced labour and sexual exploitation as well as forced and/or early marriage, are prevalent worldwide and female genital mutilation is still carried out in some countries.<sup>6</sup> Forty-five percent of the 73 million annual abortions are unsafe. Unsafe abortions are concentrated in developing countries (97%) and among vulnerable and marginalized groups and cause up to 13% of maternal deaths.<sup>7</sup> The United Nations Working Group on the discrimination against women and girls has expressed concerns about the severe challenges to the universality of women's rights in the global community and maintains that reproductive health is not equal unless it includes access to affordable quality contraception and autonomy over the decision to continue or terminate a pregnancy.<sup>2</sup>

Gender comes to bear on access to and experience of high-quality health services in several ways. Economic differences between men and women in many parts of the world impact women's ability to afford health services and/or access to health insurance.<sup>8,9</sup> The higher burden of care responsibilities in the home placed on women may make it difficult to leave home to access health care, especially when residing in rural or remote areas.<sup>8</sup> Girls and women continue to face issues in seeking and continuing education in many parts of the world.<sup>9</sup> This can translate to lower health literacy and lower health awareness which can significantly impact when individuals seek care and how well they are able to navigate increasingly complex health

systems. Men are also less likely to access health care, especially for conditions that are stigmatized among men such as mental health services, and men's health receives less focus than women's health.<sup>10</sup>

Gender-diverse individuals may avoid seeking health services for fear of stigmatization.<sup>11</sup> Women, especially Indigenous women and women of colour, are less likely to be listened to in clinical settings as experts of their own experiences.<sup>12</sup> Women and gender-diverse persons belonging to other marginalized groups have factors that create other power hierarchies of privilege or disadvantage that intersect with gender power dynamics to create significant health disparities globally such as higher rates of sexually transmitted infections, mental health disparities and substance abuse disorders.<sup>13</sup> Gender-diverse persons, particularly those who also belong to other marginalized groups, are at an alarmingly high risk of human rights violations including killing, beatings, mutilation, rape and other forms of abuse and maltreatment.<sup>13</sup>

Nurses and all health care workers have a vital and central role in creating gender responsive health systems. Nurses are morally, ethically and professionally responsible for challenging health systems to reduce and prevent restrictive gender norms and inequalities leading to lower quality of care, weakened health systems and poor health outcomes.<sup>14</sup> Nurses promote environments in which human rights are acknowledged and respected and advocate for equity and social justice for access to health care. Nurses also make a significant impact in strengthening women and gender-diverse person's capacity to exercise increased control over their lives and living conditions.

## International Council of Nurses' position and recommendations

### As the global voice of nursing, ICN:

- Supports a vision in which every woman, girl and gender-diverse person has the right to physical and mental health and well-being, has social and economic opportunities and is fully able to participate in shaping prosperous and sustainable societies.
- Maintains that nursing care is respectful of and unrestricted by considerations of age, colour, culture, ethnicity, disability or illness, gender, sexual orientation, nationality, politics, language, race, religious or spiritual beliefs, legal, economic or social status as entrenched in the ICN Code of Ethics for Nurses.
- Advocates for women and gender-diverse persons to be actively included in health decision-making to shape policies, strategies and programmes to truly meet the needs of this population.
- Firmly supports the right of women, girls and gender-diverse persons to make autonomous decisions about their own body and health care decisions, including sexual and reproductive health services and rights, and believes that they must be enabled to do so.
- Firmly believes that women, girls and gender-diverse persons must have access to high-quality, affordable health services, including comprehensive sexual and reproductive health services, and that this is at the core of their basic rights to equality, privacy and bodily autonomy.
- Recognizes that equality in the supply of health services requires a differential approach between genders in accordance with their unique needs.
- Believes that access to high-quality health services for women and gender-diverse persons, including sexual and reproductive health services, need to be prioritized and provided in a safe environment during and after global health crises, conflict and natural disasters.
- Advocates for gender equity, education and empowerment of women and gender-diverse persons in both public and private life and supports fundamental social reforms to address the inequalities in power, status and roles.

- Calls for improved quality and quantity of data on the health of women and gender-diverse persons, disaggregated by gender and other intersecting characteristics, to remedy gendered data disparities and improve health outcomes.
- Deplores sexual exploitation and trafficking of women and girls for sex work and all forms of violence against women including female genital mutilation.
- Highlights the need for leadership by intersectional women and gender-diverse persons as well as the importance of achieving gender equity in the health workforce to create a diverse workforce able to address health disparities and diverse health challenges and to truly represent the people that nurses serve.

**ICN encourages national nurses' associations (NNAs) to:**

- Raise awareness of the importance of gendered health disparities and work to support the nursing profession to create health systems that address the health of women and gender-diverse persons.
- Support nurses, women and gender-diverse persons to be actively involved in health research, decision-making, service planning, leadership and care delivery.
- Advocate and lobby within regional and national governments to promote access to sexual and reproductive health services for all women and persons with uteri.
- Advocate for people-centred care to be delivered to all persons to ensure that health care is tailored to the unique gendered experiences and needs of all persons.
- Collaborate with education providers to design nursing curriculum at undergraduate and graduate levels to adequately prepare nurses to understand gendered health disparities and how to achieve gender-transformative policies/practices.
- Encourage nurses to engage in continuing professional development and education that allows them to recognize, understand and take action on gendered health needs and disparities to improve prevention, diagnosis and care for women and gender-diverse persons.

- Advocate for equitable gender norms, including those that make gender-based violence, including harmful practices such as early and/or forced marriage and female genital mutilation, unacceptable.

**ICN calls on governments and/or global health organizations to:**

- Implement gender analysis frameworks to examine differences in risks, exposures, vulnerabilities, and outcomes in health between all genders to identify critical, modifiable, health system and community factors that could limit access to health care.
- Address gender in health systems and programs through gender integration which includes creating knowledge and awareness of gender and responsibility for ensuring health systems policies, programmes and services are responsive, inclusive and reflective of diverse experiences and realities.
- Disrupt restrictive societal gender norms that perpetuate power imbalances and empower women to contribute to the development of evidence, policies and practices that impact their lives.
- Establish and enforce effective legal frameworks to address violence against women as a form of gender-based discrimination and a violation of women's human rights.
- Ensure that quality sexual and reproductive health education, information and services are accessible physically, economically and without discrimination as a matter of priority to address the unacceptable levels of morbidity and mortality and to uphold the human rights of women, girls and gender-diverse persons.
- Implement measures to improve access to safe, timely, affordable and respectful comprehensive abortion care services, considered by the World Health Organization as an essential health service.<sup>7</sup>

**ICN calls on individual nurses in their roles as clinicians, educators, managers, researchers, policy influencers or executives to:**

- Ensure awareness of gendered differences that affect access to care, treatment within care and the factors that impact these health disparities within and outside of clinical settings.
- Understand how stigma and discrimination are experienced by women and gender-diverse people when accessing care.
- Acknowledge the existence of gender bias and restrictive gender norms in and reinforced by health care systems.
- Strive to identify and understand the unique health and social needs of all genders through continuing education and professional development.
- Seek out stereotyping and bias training to better identify when one's own biases are impacting the care one delivers to someone based on their gender.
- Ensure that health research and data gathering has adequate collection methods regarding gender identity and other intersecting characteristics.
- Implement gender transformative strategies and policies in their workplaces.
- Recruit gender-diverse persons into the nursing workforce as this population faces significant health disparities, and a diverse workforce is needed to address diverse health challenges.
- Monitor for gender bias by observing for errors, omissions or deviations from established protocols, care standards and guidelines.
- Recognize, challenge and work to address gender bias and discrimination in their workplace across all settings.
- Apply an intersectional approach to nursing practice by adopting a person-centred approach that recognizes and respects the diverse identities and experiences of their patients.

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