The Impact of Women in the Healthcare Workforce: A Perspective from Nepal

Dr. Anil Bikram Karki
President, Nepal Medical Association
Vice President, CMAAO





Context

- Women form a critical part of the healthcare workforce worldwide.
- In Nepal, their role has been transformative, especially in areas such as maternal and child health, community healthcare, and public health initiatives.
- The theme of this symposium, "The Impact of Women in the Healthcare Workforce," aligns with global efforts to promote gender equality in healthcare. Addressing this issue is crucial for improving health outcomes and achieving sustainable development goals.

Historical Context

Early Beginnings

- Women's contribution in Nepal's healthcare workforce was marked by pioneers such as Dr. Sita Devi Shah, Nepal's first woman doctor.
- These early trailblazers broke through significant cultural and societal barriers, setting the stage for future generations.

Milestones

- Institute of Medicine (IOM): Established in 1972, IOM has been instrumental in increasing female enrollment in medical education.
- Key Policy Changes: Over the years, policies like gender quotas in medical colleges and healthcare jobs have supported the inclusion of women in the field.

Current Status of Women in Medicine in Nepal

- Women now make up approximately 45% of medical students in Nepal's major institutions.
- About 30% of Nepal's doctors are women, with higher concentrations in gynecology, pediatrics, and public health.
- Women are less represented in fields such as surgery and cardiology, where they make up only about 25-30% of specialists.
- Compared to neighboring countries, Nepal is ahead in certain areas of women's representation but still faces similar challenges.
- Globally, Nepal's progress is commendable, but there is room for improvement, especially in leadership and specialized fields.

Notable Figures

- Dr. Sudha Sharma: The first female President of the Nepal Medical Association, recognized for her leadership and advocacy.
- Dr. Kanti Giri, the first Gynaecologist of Nepal.
- Dr. Asha Singh, Nepal's first female Additional Inspector General of Police (AIGP), Nepal.
- Dr Sangita Bhandari, First female Vice-Chancellor of Nepal.
- Dr. Sudha Sharma is the first female doctor to serve as the **Secretary** of Health and Population in Nepal.
- Dr. Chanda Karki, **Member of Parliament**, House of representatives, Federal Parliament of Nepal. Professor, Dept of obs/gyn. Former Principal and CEO, Kathmandu Medical College.

Impact on Healthcare

- Maternal and Child Health: Women healthcare professionals have significantly improved maternal and child health outcomes, particularly in rural areas.
- Public Health Initiatives: Female doctors have led critical public health campaigns, such as immunization drives and reproductive health education.
- Research and Innovation: Women have contributed to medical research in areas like women's health, infectious diseases, and public health.

Challenges Faced by Women in Healthcare

Gender Bias and Discrimination

- Hiring and Promotion: Despite qualifications, women often face bias during recruitment and promotion.
- Workplace Environment: Gender-based discrimination, including pay disparities and lack of recognition, persists.

Work-Life Balance

- Cultural Expectations: Traditional gender roles place additional burdens on women, requiring them to balance professional and familial duties.
- Support Systems: The lack of childcare facilities, flexible working hours, and adequate maternity leave policies exacerbates these challenges.

Leadership Barriers

- Underrepresentation: Women are underrepresented in leadership roles within medical institutions and regulatory bodies.
- Glass Ceiling: The "glass ceiling" effect limits women's progression to senior positions.

Government and Institutional Support

Government Policies

- Gender Quotas: Policies mandating gender quotas in medical colleges and healthcare employment have helped increase female participation.
- Maternity Leave and Childcare: Recent improvements in maternity leave policies are a step towards better work-life balance.

Institutional Programs

- Nepal Medical Association Initiatives: NMA has launched programs aimed at empowering women, including leadership training and mentorship.
- NMA organizes "Women in Medicine" program each care to felicitate the female doctors from the president of Nepal for their relentless contributions.
- Gender Equality and Social Inclusion (GESI) Strategy: The Ministry of Health's GESI strategy aims to mainstream gender equality in healthcare.

WOMEN IN MEDICINE IN NEPAL









Success Stories: Female Community Health Volunteers

This program has mobilized thousands of women to deliver essential health services, particularly in rural areas. Services such as:

- 1. Distribution of the family planning commodities (pills and condoms)
- 2. Distribution of the iron tablet to pregnant and lactating mothers
- 3. Oral rehydration solution distribution
- 4. Health education, communication and community outreach
- 5. Act as linkage between the health facility and the community and provide referral services especially for maternal and newborn services, CB-IMNCI services
- 6. Provided support in home delivery cases mainly focused on initiating skin to skin contact after birth, uptake of misoprostol, and application of chlorhexidine in cord after delivery

Future Directions

Improving Representation

- Leadership and Specialization: Increase representation of women in leadership roles and specialized fields.
- Mentorship and Sponsorship Programs: Develop structured programs to support career advancement.

Enhancing Support Systems

- Work-Life Balance: **NMA** has been introducing and working in the policies that support work-life balance, such as extended maternity leave and flexible working hours for **resident doctors as well.**
- Professional Development: Expand opportunities for continuous professional development.

Continued Advocacy

- Gender Equality Advocacy: Ongoing efforts are needed to address systemic barriers.
- Community Engagement: Engage with communities to change societal attitudes towards women in the workforce.

Pressing concern: Violence against female doctors

Rising Incidents

- Female doctors across South Asia face increasing violence, ranging from verbal abuse to physical assaults.
- This violence often stems from gender biases, societal pressures, and a lack of security in healthcare settings.

Call to Action

Continued efforts are needed to support and empower women in healthcare, ensuring they can contribute fully to improving health outcomes in globally.

Implement better security protocols in hospitals, including trained security personnel and emergency response systems.

Urgent need for stronger policies and laws that protect healthcare workers, particularly women, in the workplace.

Establish counseling and support networks for female doctors affected by violence, promoting a safer and more supportive work environment.

THANK YOU

Any questions?

Nepal has made significant progress in increasing the representation and impact of women in the healthcare workforce. However, challenges remain, particularly in terms of gender bias, work-life balance, and leadership representation.

I welcome your questions and look forward to hearing your insights and suggestions on how we can collectively support the advancement of women in healthcare.