

ECONOMIC AND GENDER JUSTICE FOR WOMEN COMMUNITY HEALTH WORKERS

Community health workers (CHWs) deliver primary health care to over one billion people in low-and middle-income countries. Women are the majority of CHWs worldwide and are often the first, and sometimes only, point of contact with the health system for communities. Yet most women CHWs are not in formal sector jobs, they are uncared, subject to violence and harassment and do not have the salaries, professional skills, supervision, and supplies they need to succeed. Women CHWs face multiple forms of gender discrimination. Professionalising CHWs is a matter of gender and economic justice and will benefit all health systems' users.



7 KEY ASKS FROM WOMEN IN GLOBAL HEALTH

1 Count women CHWs

The World Health Organization (WHO) recognizes CHWs as being the foundation of primary health care making a significant contribution, particularly to the health of women and children. The world is facing a projected shortfall of 10 million health workers by the year 2030 but many governments do not know how many CHWs are working to deliver health in their countries or where those workers are located. So the first step is to [Count CHWs](#).

2 Pay women CHWs

Women in Global Health research estimates that a minimum of six million women are working unpaid or grossly underpaid in core health system roles. They value their jobs and want to be paid but are held back by gender norms and lack of education from accessing paid roles. Women CHWs must be professionalized and paid fairly for the work they do and provided social protection including maternity pay, sick pay, paid time off, and pensions.

3 Support Women CHWs

Women CHWs are disempowered by lack of support and resources from health systems. They need regular supervision, consistent supplies, and transportation.

4 Protect Women CHWs

Sexual exploitation, abuse, and harassment of women CHWs is pervasive but invisible in official data. All CHWs, including volunteer cadres, must be included in legal frameworks to protect against violence, sexual exploitation, abuse and harassment.

5 Enable Women CHWs to Have Careers

Women CHWs may have missed out on years of schooling but have important professional expertise and experience in community health. New research from WGH finds women CHWs are health and social leaders in their communities but their expertise is not recognized. CHW programs should adapt requirements for entry and progression, balancing skills and experience over qualifications and establish career ladders for women CHWs as well as bridges to other health professions. Governments should provide funded opportunities for education and training tailored to the reality of women's lives.



6 Support Women CHWs to Challenge Gender Norms

Health systems designed to rely on unpaid and underpaid work by women reflect a gendered care economy and social norms treating women's unpaid work in health as an extension of the unpaid care work that women are expected to do at home. Governments should encourage redistribution of unpaid work within families. Women CHWs know their value and are role models in their communities driving change through collective action.

7 Listen to women CHWs

Women CHWs know what is needed to improve their access to opportunities, and maximize their potential to drive better community health. Policy makers must involve women CHWs in program design and health planning and listen to women CHWs who are the experts on the health of their communities.



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