INTERNATIONAL WOMEN'S YEAR, 1975

1. The XXIII Meeting of the Directing Council of the Pan American Health Organization, focusing its attention on the major issues concerning women in health, approved Resolution X, which urged the Governments:

   a) to assign high priority to the promotion and protection of women's health, together with employment and educational opportunities, and particularly to meeting their needs in rural areas;

   b) to give high priority to the inclusion of women in planning, decision-making, execution and evaluation of health programs at all levels, and to improve the information they possess concerning participation of and opportunities for women in the health sector;

   c) to develop the necessary machinery for ensuring the creation or improvement of public or private institutions to take responsibility for the care of the children of working mothers.

   The resolution also recommended that the Organization provide the necessary assistance to the countries in obtaining data concerning the participation of women in health occupations and take positive action to establish an active policy of recruitment, promotion and training of women for professional and other posts, aiming towards their increased representation at the planning and decision-making levels of the Pan American Sanitary Bureau.

   The resolution called for a report on the measures taken and the progress achieved in these areas to the 76th Meeting of the Executive Committee and to the XXIV Meeting of the Directing Council.

   This report attempts to describe briefly some of the activities undertaken and being planned by the Organization in this area.
2. The Organization has continued to promote and participate in the various regional activities concerning the integration of women in development. Studies and analyses have been made of national and international documents, pertinent to the Region, concerning the status of women and proposals for their integration in development. Included in these are the documents of ECLA, CELADE, UNICEF, UNESCO, OAS, ILO, IACW and of the World Plan of Action approved at the International Women's Year Conference in Mexico, particularly the resolutions pertaining to the health of women and the integration of women in health and social development. These analyses have enabled the Organization to develop a strategy for action for the next decade based on the major concerns and issues which affect the integration of women in the development process as well as on the specific recommendations made at the International Women's Year Conference in the substantive area of health.

3. The International Women's Year World Conference emphasized that changes in the social and economic structure of societies, even though they are among the prerequisites, cannot of themselves ensure an immediate improvement in the status of a group which has long been disadvantaged. The World Plan of Action endorsed the need for formulation of national policies and programs to provide women with equal opportunities for participation in the development process and elimination of all obstacles that stand in the way of achieving equal status between the sexes.

The World Plan of Action suggested specific actions both at national and international levels in all areas, including political participation, education and training, employment, health and nutrition, housing and related and social services. Among the areas emphasized for action, of special importance are: integrated rural development; health, reproduction, growth and development including family health and child health, family planning, nutrition and health education; education and training at all levels and in all sectors; creation of employment opportunities; youth projects, including adequate emphasis on the participation of young women; and involvement of women in public administration. It was also recognized that plans for achieving equal participation of women in all spheres of the development process must become an integral part of national development policies and plans.

A regional seminar was held under the auspices of the UN and the Government of Argentina from 22 to 30 March 1976, for study of the obstacles that hinder the integration of women in economic, social and political participation. The Organization was represented in this seminar in an observer capacity. The reports presented by the delegations of the countries of the Region represented at this meeting were further analyzed with a view to identifying the major obstacles to the participation of women in political, social and economic development. From the analysis of these obstacles it is evident that attitudinal changes towards the traditional roles accorded to the sexes in society must occur through information and education of the communities simultaneously with legal and structural changes that could facilitate the participation of women in the society as equal partners.
4. The Organization, in consonance with its major concerns for the health of women, and the relevant health and supporting programs, as well as the status of women in the health sector, and specifically in reference to Resolution X of the XXII Meeting of the Directing Council, has defined the following areas for action which would be developed at regional and national levels during the next decade, in accordance with the priorities of the respective governments.

4.1. Strengthening of health services

a) The most prevalent health problems affecting women are linked to their reproductive behavior (complications of pregnancy and childbirth), poor nutrition conditions, and infections. Health problems of young women (15–24 years) merit special concern. High fertility rates of this age group, low economic status, particularly in the marginal urban and rural areas, and problems associated with social adaptation are important factors which affect their health.

Health services for meeting their needs require strengthening, specifically:

- comprehensive and continuous health care for all infants, preschool and school-age children without prejudice on grounds of sex;
- gynecological and cancer screening for cervical and breast cancer services;
- continuous care during pregnancy, delivery and postnatal periods by trained health personnel;
- health care for adolescent girls and boys including counseling on sexual growth and development, sexually transmitted diseases and family life;
- family planning services to permit the family to decide to have children when they want them and to avoid the health risks associated with pregnancy and childbirth.

In strengthening these health services, particular attention must be focused on rural areas and marginal urban areas, where the population is generally underserved by health and social services.

b) Health and family life education programs

Health education programs aimed at the family as a unit with specific efforts to:

- promote health practices, informing the family of its health needs, potential hazards and how to avoid them;
- promote childbearing and childrearing practices that have positive effects on the health of women and the family as a whole;

- combat taboos and cultural practices that are detrimental to the health of the family.

c) Food and nutrition programs

Establishment of food and nutrition policies and development of nutrition programs that would:

- take into account the nutrition requirements of women, particularly during pregnancy and lactation;

- encourage breastfeeding and appropriate infant and child feeding;

- include supplementary nutrition programs for mothers and children in need, especially in marginal urban and rural areas.

d) Provision of easily accessible water supplies for safe potable water to improve health conditions and to reduce the burden of carrying water, which generally falls upon women and children.

4.2. Supporting and complementary services

The health of the working woman is influenced by the dual role she is expected to play—one in the family and the other in the labor force. The working woman consequently suffers from the pressures of modern life within the traditional cultural framework. Supporting services for the family in general are inadequate, particularly in rural and marginal urban areas where many women must work to supplement the meager family income.

Activities that would facilitate female participation in the labor force without neglect of the family, particularly the very young children, include adequate provision of supporting services, adoption of suitable legislation, and provision of suitable vocational training programs. Specifically these include:

a) Promotion of the provision for supporting social services for the family and inclusion of adequate health components in these services intended to support families, particularly where women work outside the home, such as:

- nurseries and day care centers;

- health facilities close to the work environment;

- facilities for the care and breastfeeding of young children;

- nursing homes and hostels for working mothers in need.
b) Promotion and adoption of legislation and other social measures to enable women to combine their working roles and roles in the family more effectively and without conflict, such as:

- adequate maternity benefits for employed and self-employed women;
- economic support to working women, particularly where the woman is also the main provider for the family, to enable her to take care of her very young children;
- parental leave for childbearing and to permit fathers to participate more actively in the care of their young children.

c) Development of vocational education and training programs, particularly in the areas of:

- food processing and food marketing;
- food handling and preparation;
- family economics;
- handicrafts;
- formation and management of cooperatives.

Such programs should be focused on the rural areas within the context of rural development programs, and should particularly involve young women and men.

4.3. Education and participation of women in the health sector

Women in health should not be viewed only as recipients but also as providers of health services. The resolution specifically called for updating the knowledge about the participation and opportunities for women in the health sector, review of the obstacles that hinder their participation, and formulation of specific proposals for improving the status and participation of women in all aspects of health development.

The Organization has proposed the following activities in this area:

a) Provision in the annual questionnaire of data on human resources in health by sex, to permit analysis of sex ratios in health professions.

b) A comparative study on remuneration practices and career patterns of male and female health personnel in Latin America and the Caribbean to establish career profiles and identify the sex-related "career thresholds" and propose appropriate corrective strategies.
c) A study on women as the major health care providers in the community and as the decision inducers; this would permit assessment by women of their role in terms of knowledge, abilities and logistics, and propose appropriate strategies for full utilization of female potential in health.

d) Promotion of provision of information in schools about health careers and stimulation of young women and men to enter health careers, both in professional and auxiliary capacities.

e) A study of the analysis of the status of women in health by levels of health services, i.e., decision-making, top management, middle management and operational levels.

For these activities, additional resources will be required and the Organization is seeking extrabudgetary sources.

4.4 Women in the Pan American Sanitary Bureau

A joint staff-administration group was appointed in 1975 to investigate the causes of the limited recruitment of professional women and to suggest appropriate corrective measures with a view to increasing the proportion of professional women in PASB, and to investigate the reasons for the large proportion of women in the lower grades as compared with men and to recommend measures to achieve an equal distribution of opportunities for advancement of both sexes.

The group made an analysis of the pertinent information and formulated specific proposals.

Analysis of the data concerning the distribution of PASB staff by grade and sex has clearly shown a serious imbalance in both the professional and the general services categories. Among the professional staff, women are seriously underrepresented, and the small number present are mainly in the lower grades. Analysis of data concerning nationality, duty station and civil status suggests that one of the factors in the lower participation of professional women in the Organization could be the restriction of employment imposed on the spouse by a particular country. This factor would operate in reducing the number of married women seeking employment with the Organization due to the social stigma attached to the non-working husband.

With respect to the general services staff, it was found that in Washington female staff outnumbered male staff, while in the field (primarily in the centers) the ratios were equal. In both these groups, however, the upper grades of the general services tend to be filled by men.

The group, while still continuing its work, has made specific proposals to the Director and to the chairperson of the Staff Committee.
The Director has advised the field offices to actively seek professional women for recruitment in the Organization whenever vacancy notices are issued. The Chief of Personnel during his field visits has emphasized to the Country Representatives the policy of the Organization to increase the proportion of women among the professional staff.

The activities that are being pursued currently include:

- Follow-up with the Administration and the Staff Committee concerning specific proposals made by the joint staff-administration group.

- Interviews with Chiefs of Division concerning their plans for increasing the proportion of women among their professional staff;

- Study of the general service staff to investigate career objectives, relationship between qualification level and job responsibilities, and training potentials. It is hoped to acquire information by this means concerning:

  a) the possible underutilization of qualified female staff;

  b) the magnitude of possibilities for improving the participation of women at upper levels through appropriate training and promotion programs.

4.5. Promotional activities and international collaboration

a) The Director has circulated Resolution X of the XXIII Meeting of the Directing Council to all Member Countries, calling the attention of national authorities to the recommendations and urging them to take appropriate measures to increase the participation of women in health development.

b) The Organization has reviewed and commented on the UNICEF proposal for assistance to a regional project for the promotion and development of the role of women in community activities and in the development and welfare of the child and the family. The Organization has expressed its support for the development of the activities of this project. Discussions are also continuing with the Inter-American Commission of Women on joint collaboration in the development of regional activities. A Regional Plan of Action is expected to be drafted by ECLA in consultation with the governments and the international agencies. The Organization is expected to participate in this activity.

For the promotion and development of some of these activities additional resources are required. With the identification of clear project proposals, the Organization will seek extrabudgetary support, particularly from the fund for voluntary contributions for the International Women's Year established by the United Nations Economic and Social Council in Resolution 1850 for activities the express purpose of which is to ensure the full integration of women in development.