

Editorial

Leading the Way: Empowering Women in Healthcare Leadership

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he phrase "glass ceiling" is a persistent barrier that women face in the healthcare industry in Pakistan, limiting their opportunities and hindering their aspirations to become leaders. According to the American Association of Academic Medicine, females account for 18% of directors of medical institutions, though accounting for over 50% of graduates from medical schools in the United States. Only 10 of Pakistan's 97 medical and dental colleges, had a female dean or principal, according to the PMC (Pakistan Medical Commission) list of private medical colleges.

Interviews conducted for a study by Raza et al, identified several barriers that prevent women from pursuing careers in healthcare in Pakistan, including harassment in hospitals, inadequate compensation for the high workload, job transfer restrictions, and inefficient recruitment. Despite making up over 70% of the workforce in the global health sector, women only occupy 25% of senior positions. The repercussions of gender inequality are more concerning in developing nations than in industrialized ones, especially in Pakistan, which is ranked 142 out of 146 on the gender parity index in the World Economic Forum's Global Gender Gap Report 2023.⁵ The lack of professional development, research opportunities, salary disparities, the dearth of same-sex mentors, and the lack of female role models for female medical students and lack of uniform, state-sponsored paid parental leave and assistance for child care and elder care, serve as key obstacles to gender parity in global health leadership.⁶

A monumental decision regarding the facilitation of working women "The Daycare Centers Act 2023" was assented to by the President of Pakistan making it mandatory for public



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and private departments in the federal capital to establish daycare centers. There are a total of 237 Day care centers in Pakistan as of July 12, 2024.⁷

The Protection against Harassment of Women at the Workplace Act 2010 is the first to address workplace harassment as a significant legal issue. It gives them equal opportunities to earn a livelihood and raise their voice against harassment, eventually leading to greater participation by women in the workforce. A limitation of the Act is its failure to consider gender-based discrimination experienced by women in the workplace. The Pakistani government must take some legal actions to guarantee the Act's proper execution.8 Federal Ombudsman Secretariat for Protection Against Harassment at Workplace (FOSPAH) is an autonomous judicial statuary body providing speedy justice in harassment at the workplace. 517 of the 725 harassment cases filed with it last year had been decided. Due to the awareness campaign on FOSPAH's role and functions, there has been an increase in the number of harassment cases that have been registered with the organization.9

To facilitate women, fulfilling their parental responsibilities without sacrificing their career advancement, the government assented to the Maternity and Paternity Leave Bill, 2023, which will become a law. The bill would allow female employees working for public and private organizations under the administrative jurisdiction of the federal government to take three periods of paid maternity leave: 180 days for the first time, 120 days for the second, and 90 days for the third. Section 7 of the West Pakistan Maternity Benefit Ordinance, 1958 prohibits an employer from terminating an employee six months before the child's due delivery date to avoid paying maternity benefits.¹⁰

Gender disparity and its pernicious effect should be discussed with the government, WHO, and organizations working specifically for healthcare to advocate more policies facilitating women in healthcare. Addressing this requires a multifaceted approach like flexible work arrangements, structured development and mentorship programs, leadership training, transparent salary structures, improvements in the Harassment of Women at Workplace Act 2010 and strong reporting mechanisms for harassment at the workplace, more research opportunities by granting funds for specific women-led projects, recruitment of females on leadership positions and introduction of flexible human resource policies, establishing affordable on-site child care centers, organizations and institutions should introduce programs for connecting female leaders with students who are yet to take this path. By tackling these issues comprehensively, we can foster a more equitable environment that promotes gender parity in health-care leadership.

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