



Women Leaders in Global Health Conference of 2019

Hosted by University of Global Health Equity



November 9-10, 2019

Call for Action

Twenty years since the Beijing Declaration, over 1000+ participants from 81 countries gathered in Kigali, Rwanda for the third Women Leaders in Global Health (WLGH19) conference. This conference was hosted by the University of Global Health Equity (UGHE), an initiative of Partners in Health, and engaged a broad array of local, national, and global collaborators. Leaders and change agents representing diverse sectors of global health convened for WLGH19 at the Kigali Convention Center in November 2019 to discuss how to effectively address the global health leadership gender imbalance and challenge the status quo for women within Africa and beyond. Numerous sessions were held featuring experts on a range of topics, including but not limited to: climate change, women in conflict and crisis, the role of collective bargaining for health, women's role in research, the need for mainstreaming inclusiveness within global health for people with special needs (especially for women with disabilities), the role of art in global health, and innovations to achieve health-related Sustainable Development Goals (SDGs). The following are the "Call for Action" from this gathering.

We the participants of Women Leaders In Global Health 2019 call for:

1. All funding organizations (i.e., private, public and those based on public-private partnerships) to establish guidelines starting from the date of the 20th anniversary of the Beijing declaration on gender equity to use their funds to:
 - a. Provide support only to institutions that have gender parity (50/ 50 balance) in their board and leadership committee;
 - b. Fund only projects that demonstrate gender parity in implementation and in outcomes (with the exception of those projects which are established to address the special needs of one gender)
 - c. Organizations that have gender parity in their staff composition
 - d. Organizations that implement regulations address the gender gap in wages and labor market participation.

2. All funding and research institutions to establish guidelines starting in 2020 to devote 50% of health research funding to support projects and innovations that focus on women's health needs and priorities. Potential areas of interest include: promoting gender equality, reproductive and gynecological health, women's empowerment as well as projects and policies that mainstreaming inclusiveness of minorities including disability, and the protection of women displaced and in conflicts.
3. Professional societies and academic associations and institutions to institute internal rules starting at their next General Assembly or election to promote equal representation (at least 50%) of women in their board, their committees and leadership positions; and support this action with relevant trainings and experience sharing programs for appointed women.
4. All national and international organizations to demonstrate a commitment to developing policies based on Global Health 50/50 recommendations and apply the relevant tools of Global Health 50/50 ([here](#)). This includes establishing institutional workplace policies that remove barriers relevant to women who are striving to both advance in their careers while also having a family. Such policies could include implementing flexible hours, telecommuting, paid maternity and childcare leave, travel support for childcare, workplace nursing and baby care rooms, and so forth.
5. Starting in 2020, all global health organizations and supporters to design and implement at least one project a year aimed at empowering early-mid career women.
6. All nations to implement the regulations, recommendations, and obligations to align with the Convention on the Rights of Persons with Disabilities. For instance, all health facilities and global health institutions should adapt physical structures and facilities to ensure they are meeting disability standards (e.g. installing handrails and ramps).
7. All academic health institutions to devote time to addressing the impact of climate change which disproportionately affects women, as part of the curriculum
8. All academic health institutions to implement cultural competence training in their curricula, as well as health care providers ensuring sensitivity to the cultural context of different populations.
9. All nations to implement the regulations and recommendations of international treaties, global conventions, and gender equity obligations. This includes, but is not limited to:
 - Convention on the Elimination of all Forms of Discrimination Against Women
 - Beijing Declaration and Platform for Action
 - Sustainable Development Goals (SDGs)



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