Alliance for Gender Equality and Universal Health Coverage (UHC)

Ask 7: Commit to Gender Equality and Women’s Rights –
Integrate gender equality and women’s human rights, including sexual and reproductive health and rights (SRHR), into UHC

Gender inequalities and harmful socio-cultural norms limit realisation of the right to health for all. Evidence shows that gender equality and women’s rights are critical drivers of health, wellbeing, and socio-economic development, and that gender-responsive health services—in particular SRHR interventions—are health promotive, preventive, low cost, and cost effective. Governments must respond to gender-related health needs throughout the life course, as well as address discriminatory norms, laws, and information and finance gaps. Addressing gender equality in health systems’ design, financing, and delivery and in the health workforce, will drive the success of UHC.

MILESTONES

By 2023 governments
1) adopt national health workforce plans that address gender inequity
2) deliver a package of essential health services that includes SRHR services by engaging with gender equitable national UHC advisory bodies (SDG Targets: 3.2, 3.3, 3.4, 3.5, 3.6, 3.7, 3.8, 5.1, 5.4, 5.6).

Ask 7
- Strengthen gender-sensitive health services that address gender-related barriers to health for all genders and secure women and girls’ equitable access to health, prioritizing the most marginalised women and girls.
- Include women from diverse groups (age, race, ethnicity, class, caste, disability, sexual orientation, gender identity, geography, health status) in equal numbers to men in UHC design, decision making, accountability and monitoring from community to global levels.
- Address in UHC the social determinants of health (including income, education, food security, environment, and punitive and discriminatory laws) that drive ill health based on socially constructed gender roles for all genders.
- Include in UHC comprehensive, essential services that are integrated, high quality, affordable, accessible, and acceptable to all girls and women throughout the life course; and incorporate sexual and reproductive health services free of stigma, discrimination, coercion and violence.
- Implement gender-responsive budgeting and monitoring for UHC and ensure equitable financing systems that are participatory, accessible, and minimise the greater burden of out-of-pocket payments faced by women over their life course.
- Value the role women play as 70% of the health workforce, including their role in unpaid care, and ensure decent work for women health workers that protects their fundamental rights, provides a fair income, and ensures a work environment free from violence, harassment and discrimination.

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**Founded March 2019**

**Co-Convenors:** International Women’s Health Coalition (IWHC), Women Deliver and Women in Global Health (WGH)

**Members:** Alliance for Reproductive Health Rights; Amref Africa; Asian Pacific Resource and Research Centre for Women (ARROW); Balance; DAWN; Diabetes Eswatini Organisation; Education as a Vaccine; Global Health Disrupted; International Federation of Medical Students’ Associations (IFMSA); Intrahealth International; Ipas; International Planned Parenthood Federation (IPPF); KMET; Latin American and Caribbean Women’s Health Network; Management Sciences for Health (MSH); Marie Stopes International; NCD Alliance; Pakachere Institute of Health and Development Communication; PAI; Pathfinder International; Partnership for Maternal, Newborn, and Child Health (PMNCH); Plan International UK; ProMundo; RESURJ; Sama Resource Group for Women and Health; SPECTRA; Swedish Association for Sexuality Education (RFSU); United Nations Foundation; Vision Spring Initiatives; Young Women for Change; Youth Coalition for Sexual and Reproductive Rights

**Social Media:**
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