

# HEALTH SYSTEMS RESILIENCE THROUGH THE PRISM OF GENDER EQUITY AND JUSTICE

Mothers' Group in Nepal. Courtesy of HERD International

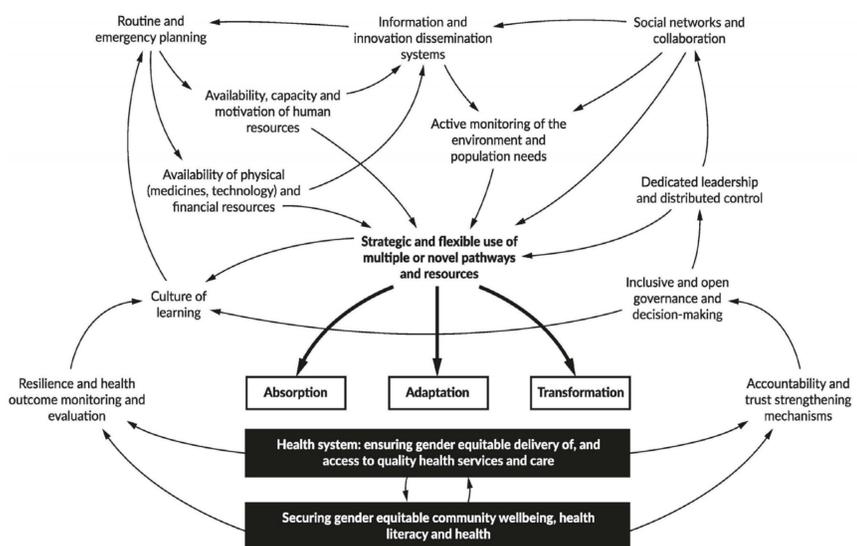
## Background

Social markers, such as gender, ethnicity and race, contribute to power imbalances and inequities. When they intersect, they can lead to poverty, marginalisation, and associated health challenges. These are exacerbated in fragile and shock-prone (FASP) settings.

This study explored how health policies work for and against gender, equity and justice (GEJ) issues, considering how policies to encourage resilience can be strengthened.

## Methods

- The ReBUILD for Resilience GEJ Working Group held a series of webinars to explore the conceptualisation of GEJ in FASP settings.
- A conceptual framework was applied to illustrate how efforts to rebuild health systems can consider GEJ.
- We mapped the implications for GEJ research, policy and practice, gathering illustrative examples from four fragile contexts (Lebanon, Myanmar, Nepal and Sierra Leone) and planning a way forward.



## Examples of our findings

- In Nepal, there is little meaningful participation from marginalised groups in local governance structures.
- A priority in Myanmar is to formalise permanent seats in decision-making bodies for civil society organisations representing marginalised groups.
- In Lebanon, the 2019 economic crisis and then COVID-19 led to many human resources for health (HRH) challenges, eg decline in health workers' incomes, high turnover, shortage of staff and poor service delivery to female Syrian refugees.
- Disease outbreak responses in Sierra Leone provided an opportunity to work on GEJ within preparedness and response efforts.

## Implications for GEJ research, policy and practice

- A learning site approach can help explore decision-making and governance at local levels and promote the availability and use of GEJ disaggregated data on HRH to inform actions on health workers' gendered experiences and needs in FASP settings.
- To improve service delivery, it is critical that health policies consider GEJ and include strategies that allow effective implementation and foster progressive changes in power relationships.
- Resilience is not an end in itself, but a step towards securing equitable community wellbeing, health literacy and health.



Further information on this study and outputs

[rebuildconsortium.com](https://rebuildconsortium.com)

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Co-authors: Wesam Mansour, Abriti Arjyal, Chad Hughes, Emma Tiange Gbaoh, Fouad Mohamed Fouad, Haja Wurie, Hnin Kalayar Kyaw, Julie Tartaggia, Kate Hawkins, Kyu Kyu Than, Lansana Hassim Kallon, Maya Abou Saad, Obindra Chand, Phone Myint Win, Rouham Yamout, Shophika Regmi, Sushil Baral, Sally Theobald & Joanna Raven

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