

KINGDOM OF CAMBODIA

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Policy Brief

Promote women roles in leadership and governance in the health sector



The Ministry of Women's Affairs, in collaboration with the Ministry of Health, the National Institute of Statistics of the Ministry of Planning, has established working groups to develop the Policy Briefs



Women in Leadership Positions in Public Administration of the Health Sector Remains Low

Women in leadership positions in public administration of the health sector remains low due to 4 main factors: 1. Social mindset, 2. Limited education of women compared to men; 3. Discrimination against women, and 4. Disrespect for women from male leaders who frequently think that women are still not able to do important work. The Royal Government of Cambodia has continued to prioritize the promotion of gender equality and the empowerment of women and young girls in all areas as specified in the Strategic Policy Agenda and Pentagonal Policy - Phase 1, by bolstering citizenship in a highly civilized society with morality, equity, and inclusiveness in which "women are the core".

Nearby Rattanak VI's Strategy 5 (2024-2028) focuses on women in leadership and governance. The plan show that the ratio of women in decision-making positions in the public sector is constantly increasing both at the national and sub-national levels. This increase is attributed to the Royal Government's policy of recruiting new employees, focusing on increasing the number of women from 20% to 50%.

Women whose positions are in executive management in health sector are likely to face some challenges that make it difficult for them to advance to higher positions. Quite often, this is because women in leadership positions encounter oppositions while trying to claim for and defend their jobs or demonstrate their management style as carried out by men. In addition to facing issues in the institutional management, there are other factors women face, including a lower proportion of women with higher educational level compared to men, misconceptions that women not possessing the same capabilities to lead as men, personal health, in particular with regard to reproductive health in young women, and structural factors such as gender structural bias and bias in recruitment and promotion of ranks.

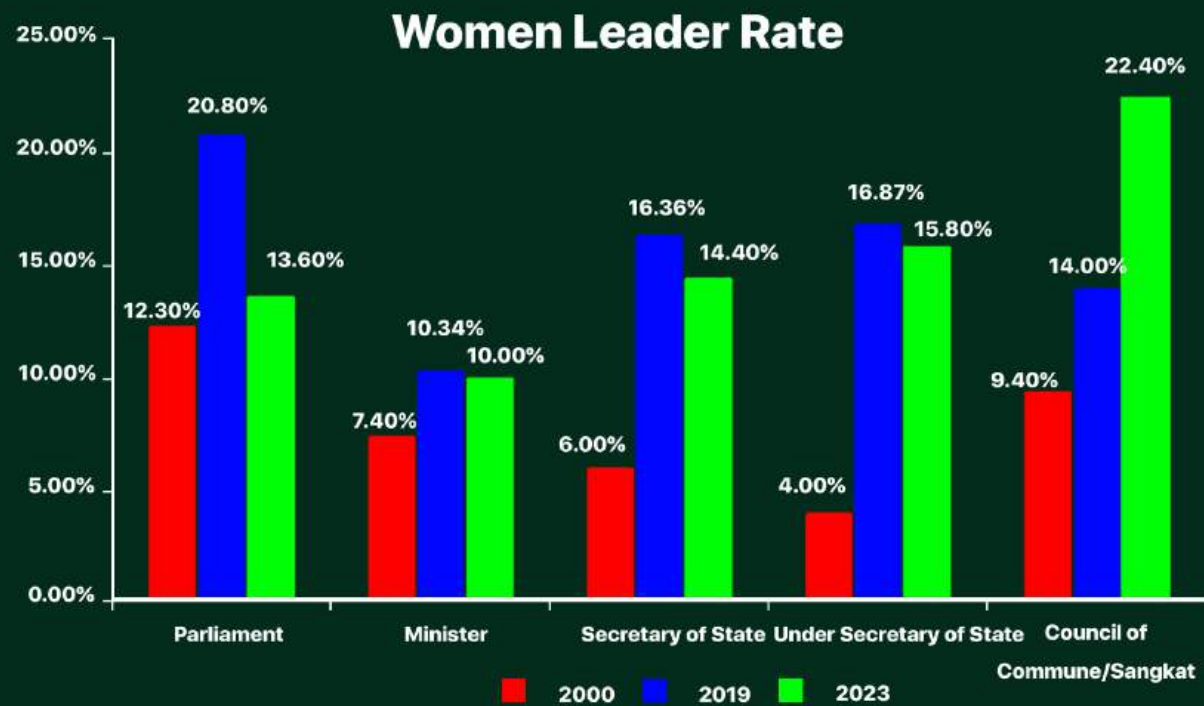
The new development of specific guidelines for the appointment of female leaders and civil servants in the MoH is absolutely beneficial to provide opportunities for women to fully take part in the national development of the country, and to help families, institutions and society to ensure growth and to contribute to the alleviation of people's poverty.

Women in Leadership Positions in Public Administration of the Health Sector Remains Low

The 2020-2024 Policy and Strategic Plan on Gender Mainstreaming in Health Sector suggests that the gender gap in the health sector needs to be taken into account by both the service recipients and the providers, including the management. In spite of the efforts of leaders and the cooperation of the development partners, the gender gap in the health sector, in particular at leadership level, remains. In health sector, the majority of public officials are women, 52.6% (2019), and most of them play a crucial role in providing primary health care, yet only a small number of them is at the management and decision-making levels.

Figure 1. shows the increased number of women in decision-making roles in the public and political sectors over the past 20 years (2000-2023), reflecting a significant increase at both the national and sub-national levels.

Figure 2. the gender-based human resource analysis of the Ministry of Health at both national and sub-national levels reveals that as of July 2024 there were a total of 31,101 civil servants, of which 17,088 being women (55%); compared to 2010, there were only 13,786 (52.94%). Most women are in the positions of midwives, officials and assistants.



Percentage of key women technical resources in health sector



Source: Ministry of Health

Policy Brief Options

Below are 4 Policy Recommendations to address this problem. Policy Recommendations 1 and 2 are priorities which the Ministry of Health must review, approve and translate into action since the formulation of specific guidelines for the appointment of leaders and civil servants at the MoH is totally vital in order to provide opportunities for women to fully engage in the national development to help families, institutions and society grow and contribute to cutting down poverty. This task can be attainable to enhance the number of women in leadership roles.

- Policy Brief Recommendation 1, which states that the Ministry of Health develops specific guidelines for the appointment of leaders, it is surely possible to be successful given the ongoing Gender Mainstreaming Policy in the Health Sector, Neary Rattanak VI's Action Plan, along with the sturdy support from the legislative and the executive bodies and numerous development partners. The benefits resulted from appointing women leaders based on gender equality and gender-based responsiveness in health sector are surely huge, as women leaders are more aware of women's issues than men.

- Policy Brief Recommendation 2, which states that the Ministry of Health solidifies the capacity development of women officials in terms of gender analysis and mainstreaming in health sector and orientation of women for leadership positions, it is surely possible to be successful as Recommendation 1 because this Recommendation fully supports the first one, and both of which must be simultaneously performed to attain mutual benefits;

- Policy Brief Recommendation 3, which states that the Ministry of Health increases opportunities for women to take on leadership roles by strengthening the implementation of measures and means to support a friendly and safe environment in the workplace as detailed in Neary Rattanak VI documents, can also be applied but will depend on the opportunity to establish them, as implementation of this recommendation requires more physical and financial resources, for example to implement or expand childcare services. The benefits resulted from this Recommendation 3 will provide women mental balance, which is a barrier to taking on a leadership position.

- Policy Brief Recommendation 4, which states that the Ministry of Health develops policies to identify the quotas for leaders and civil servants in the public and political spheres to make sure that women are able to participate as leaders and in the decision-making as men, while an option to increase the number of women, it may not be feasible. It can be difficult to formulate policies to identify appropriate ages or quotas for leaders and civil servants in the public and political spheres to make sure that women are able to participate in leadership and decision-making roles as men.

The Ministry of Health can develop specific guidelines for the appointment of leaders and enhancement of the implementation of appointing women in management and political positions in response to gender equality by focusing on the following points:

- Priorities must be given to women for the appointment of leaders in management and political positions and arrange hand over to young generation women;
- The positions of retired women must be replaced by women;
- The positions of retired men should be considered for women first; and
- A mechanism for women successors in leadership positions must be established.



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