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Health organizations in Nepal fall short on gender equality, a new study finds

Key points

- *Gender and Health 50/50 Nepal: Catalyzing change for gender equality and health equity*, the first report of its kind, assesses 77 global and national organizations active in health in Nepal on 11 measures of gender equality and reveals low levels of transparency and availability of policies and practices that support gender equality.
- Public commitments to gender equality are insufficient: Less than half of national NGOs have publicly committed to gender equality. Public commitments to gender equality are the first step to address gender inequities in the workplace and in health outcomes.
- More than half (57%) of maternity policies reviewed provide fewer weeks of paid leave than what women are entitled to by law.
- One third (10/30) of national NGOs and nearly half (23/47) of country offices of global organizations were led by women.
- Two-fifths (11/29) of the country offices of global organizations (not including UN or bilaterals) were led by Nepalese nationals, suggesting a lack of support for the career progression of Nepalese nationals within global organizations in Nepal.
- Many health programmes are gender-responsive but nearly one in three Nepali NGOs have gender-blind programmes. Gender-transformative programming is central to addressing inequities in health outcomes.

Organizations active in health policy and programming in Nepal are falling short on gender equality, finds a newly-released study by the [Center for Research on Environment Health and Population Activities \(CREHPA\)](#) with the support of [Global Health 50/50](#). Despite Nepal's Constitution and several other pieces of recent legislation that aim to protect the rights of women, the study of national organizations and global organizations operating in Nepal reveals low levels of transparency and availability of policies and practices that support gender equality.

Of 30 national NGOs examined in the study, only two had a workplace gender equality policy that was publicly available. The report argues for the urgent need to support national NGOs to develop and publish workplace policies that enable gender equality because transparency and implementation are key to shifting from commitment to results.

The study, available in the report, *Gender and Health 50/50 Nepal: Catalyzing change for gender equality and health equity*, examines the gender equality of the workplace and health programming of 77 organizations operating in the health sector in Nepal. Forty-seven (47) of these organizations are global with operations or offices in Nepal and 30 are national NGOs. An additional analysis was also conducted of two ministries and three government departments. The report is the first of its kind and aims to provide evidence for measuring gender equality in the health sector in Nepal.

The findings demonstrate that there is significant room for improvement across the four domains of gender equality assessed. Less than half (13/30) of national NGOs have publicly committed to gender equality and just three national NGOs sampled for the study include transgender and non-binary people in their commitments. Making a public commitment to gender equality is the starting point for addressing gender inequities in the workplace and in health outcomes.

Commenting on these findings, Dr Mahesh Puri, Co-Director at the Center for Research on Environment Health & Population Activities and co-author of the report said, “This study has revealed that global and national organizations are far from achieving transparency for gender equality. Few organizations are publishing workplace policies that support women’s career paths and provide equal opportunities. These policies need to be publicly available, not only to bring about transparency but also to hold these organizations to account for their commitments. Our report is the beginning of assessing progress on these measures of gender equality in Nepal.”

Gender equality policies fundamental at work

Workplace policies for gender equality, diversity and inclusion promote and support better workplaces while also facilitating career progression for women and other underrepresented groups. Of the 47 global organizations reviewed, the study found three workplace gender equality policies and two diversity and inclusion policies specific to their operations in Nepal (as opposed to global policies). More than half of maternity policies reviewed provide fewer weeks of paid leave than what women are entitled to by law as laid out in the Safe Motherhood and Reproductive Health Rights Act 2018 – demanding urgent attention to ensure that workplace policies are up-to-date.

There are gaps in gender parity of leadership and management positions. The findings show that women continue to be underrepresented at the highest level. One third (10/30) of national NGOs were led by women. Male leadership dominates in the government departments assessed despite commitments in the Constitution to promote the appointment of women in civil service. The senior management of the Ministry of Health and Population was highly gender unequal with 89% (25/28) men. The senior management of the Ministry of Women, Children, and Senior Citizens was at gender parity (54% men and 46% women) at the time of data collection (June 2021).

Only two-fifths (11/29) of the country offices of global organizations were led by Nepalese nationals, suggesting a lack of support for their career progression within global organizations.

Gender-transformative programming is central to addressing inequities in health outcomes however, nearly one in three (9/30) Nepal NGOs have gender-blind programs. This is in comparison to just 4% (2/47) of the Nepal-based programs of the global organizations that were found to be gender-blind.

Reflecting on the report Global Health 50/50 co-directors, Professors Sarah Hawkes and Kent Buse, said, “We are so pleased to have supported CREHPA in producing this pioneering report. The partnership has opened up new possibilities for understanding gender equality in national contexts. Effective change comes from within - we encourage Nepalis to use this data to demand gender equality and health equity.”

The full report can be accessed at [Nepal5050.org](https://nepal5050.org) For more information about this story, or to arrange interviews, contact: Minakshi Dahal, minakshi@crehpa.org.np and Alex Parker, alex.parker@globalhealth5050.org