



European Strategy for Women's Health and Well- being

Vienna, 22 May 2017



**World Health
Organization**

REGIONAL OFFICE FOR
Europe



**Organisation
mondiale de la Santé**

BUREAU RÉGIONAL DE L'
Europe



Weltgesundheitsorganisation

REGIONALBÜRO FÜR
Europa



**Всемирная организация
здравоохранения**

Европейское региональное бюро

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Division of Policy and governance
for health and well-being

WHO/EURO and the City of Vienna: a good partnership on women's health

WOMEN'S HEALTH COUNTS

KONFERENZ ÜBER DIE GESUNDHEIT VON FRAUEN IN MITTEL- UND OSTEUROPA
 CONFERENCE ON THE HEALTH OF WOMEN IN CENTRAL AND EASTERN EUROPE
 КОНФЕРЕНЦИЯ ПО СЛУЖБЕ ЗДОРОВЬЯ ЖЕНЩИН В ЦЕНТРАЛЬНОЙ И ВОСТОЧНОЙ ЕВРОПЕ

16 - 18 FEBRUARY 1994 UNO-CITY/VIENNA

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VIENNA STATEMENT
 FEBRUARY 1994

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VIENNA STATEMENT ON INVESTING IN WOMEN'S HEALTH IN THE COUNTRIES OF CENTRAL AND EASTERN EUROPE

This statement reflects the consensus of the participants attending Women's Health Counts: Conference on the Health of Women in Central and Eastern Europe.

WIENER ERKLÄRUNG ÜBER DIE INVESTITION IN DIE GESUNDHEIT VON FRAUEN IN DEN MITTEL- UND OST-EUROPÄISCHEN LÄNDERN

Diese Erklärung stellt einen Konsens der Teilnehmer und Teilnehmerinnen der Konferenz Women's Health Counts : Konferenz über die Gesundheit von Frauen in Mittel- und Osteuropa dar.

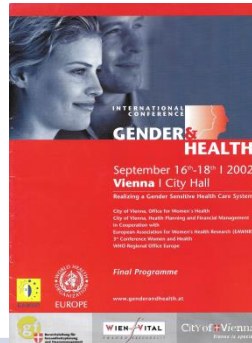
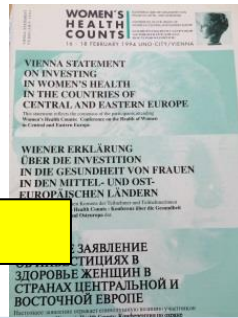
ВЕНСКОЕ ЗАЯВЛЕНИЕ ОБ ИНВЕСТИЦИЯХ В ЗДОРОВЬЕ ЖЕНЩИН В СТРАНАХ ЦЕНТРАЛЬНОЙ И ВОСТОЧНОЙ ЕВРОПЕ

Настоящее заявление отражает единодушную позицию участников конференции Women's Health Counts: Конференция по охране

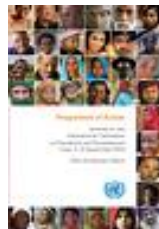
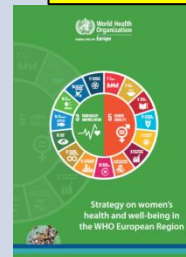
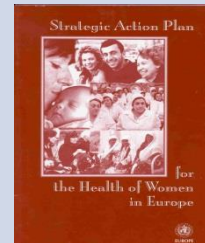
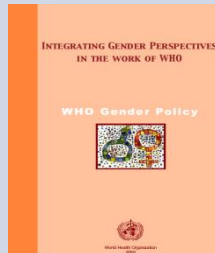
From 1994 to 2017



1994

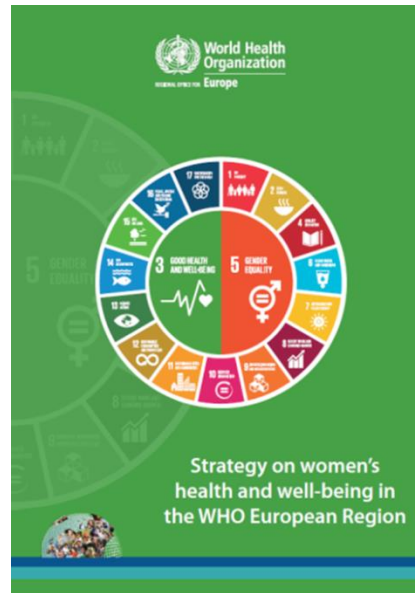
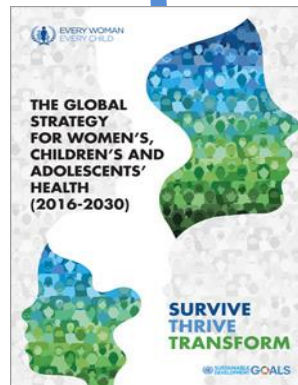


2016



A European strategy for women's health and well-being

Delivering on our commitments



3 GOOD HEALTH
AND WELL-BEING



5 GENDER
EQUALITY



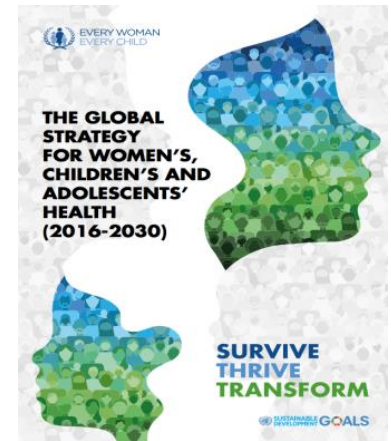
10 REDUCED
INEQUALITIES



16 PEACE AND
JUSTICE



Women's Health Challenges



WOMEN'S HEALTH CHALLENGES

307,000 WOMEN DIED IN 2014 IN **PREGNANCY** AND **CHILDBIRTH**, WITH MORE THAN ONE LIFE LOST EVERY 2 MINUTES



225 MILLION WOMEN HAVE AN UNMET NEED FOR **FAMILY PLANNING**



52% OF MATERNAL DEATHS (IN PREGNANCY, AT OR SOON AFTER CHILDBIRTH) ARE ATTRIBUTABLE TO THREE LEADING PREVENTABLE CAUSES - **HAEMORRHAGE, SEPSIS, AND HYPERTENSIVE DISORDERS**

28% OF MATERNAL MORTALITY RESULTS FROM **NON-OBSTETRIC CAUSES** SUCH AS MALARIA, HIV, DIABETES, CARDIOVASCULAR DISEASE AND OBESITY

8% OF MATERNAL MORTALITY IS ATTRIBUTABLE TO **UNSAFE ABORTION**



CERVICAL CANCER KILLS ALMOST AS MANY WOMEN AS CHILDBIRTH -

270,000 DEATHS A YEAR

1 IN 3 WOMEN AGED 15-49 YEARS EXPERIENCES **PHYSICAL AND/OR SEXUAL VIOLENCE** EITHER WITHIN OR OUTSIDE THE HOME



Sources:
Trends in Maternal Mortality, 1990-2013;
Levels and Trends in Child Mortality, Report 2014.

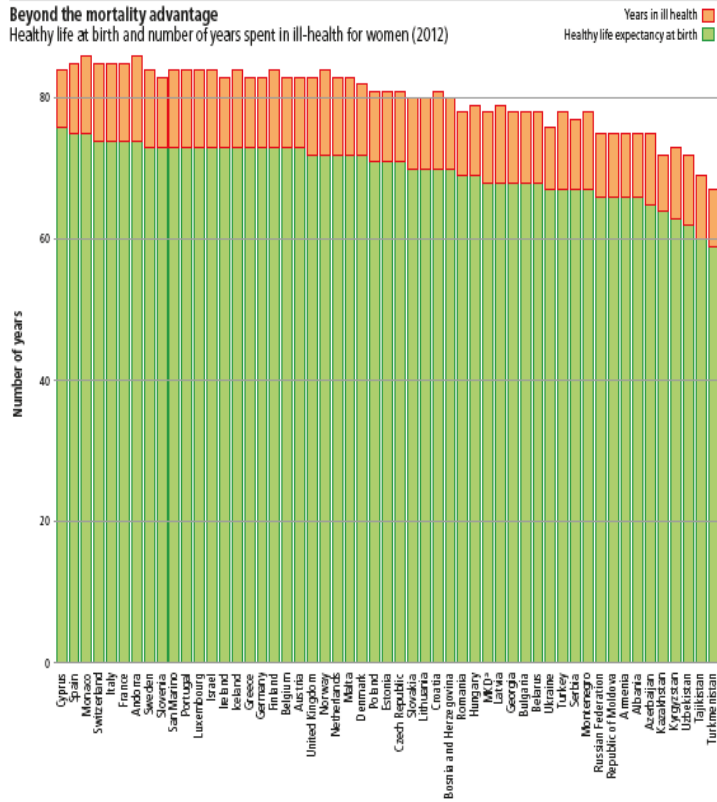
Beyond the mortality advantage

Fig. 2

Source: WHO (5).

Beyond the mortality advantage

Healthy life at birth and number of years spent in ill-health for women (2012)

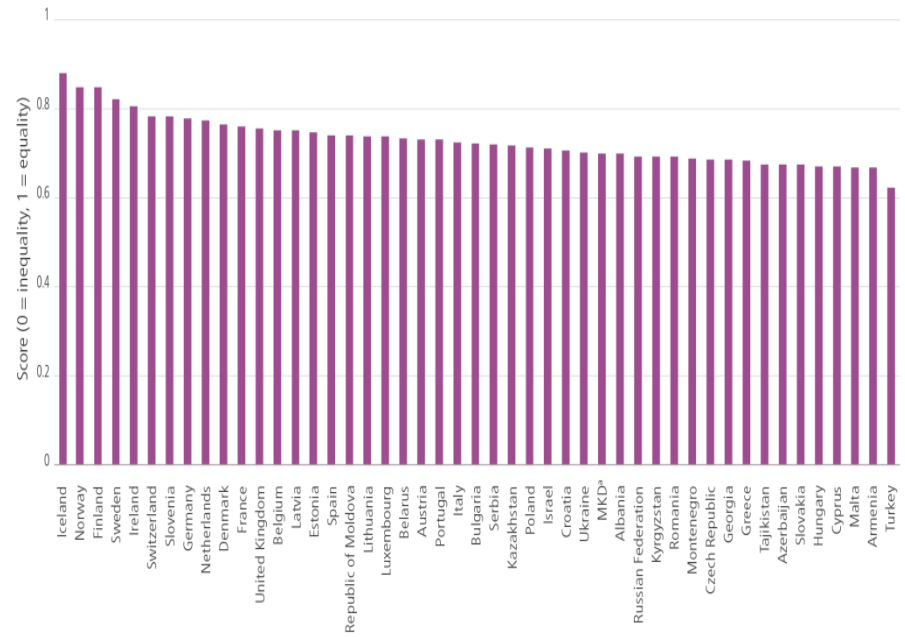


*The former Yugoslav Republic of Macedonia.

Fig. 3.1.

Source: WEF (8).

Gender Gap Index



*The former Yugoslav Republic of Macedonia (MKD is an abbreviation of the ISO).

WOMEN'S HEALTH AND WELL-BEING IN EUROPE



10 years in ill health

Up to 15 years difference in life expectancy between countries

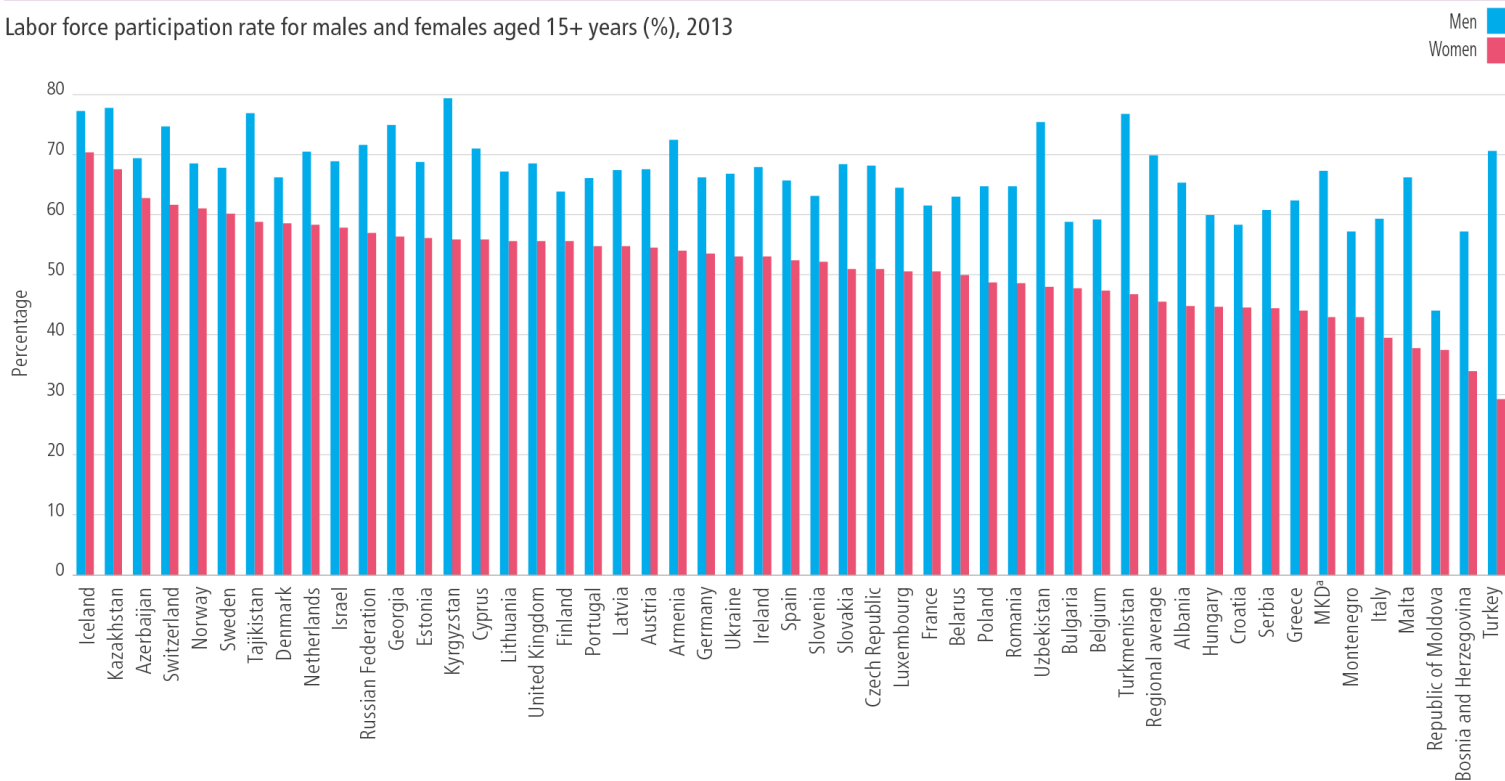


Gender unbalance in labor force participation

Fig. 2.7.

Source: UNDP (59).

Labor force participation rate for males and females aged 15+ years (%), 2013



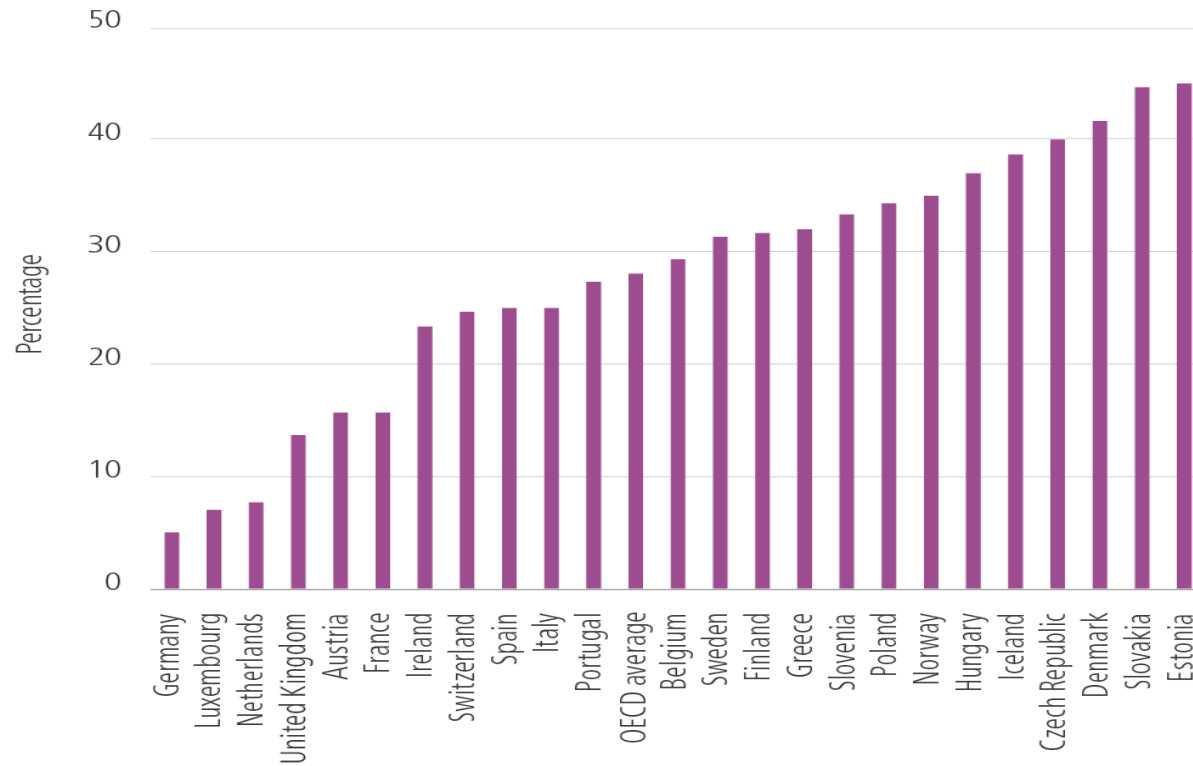
^aThe former Yugoslav Republic of Macedonia (MKD is an abbreviation of the ISO).

Pension gap in OECD countries

Fig. 2.9.

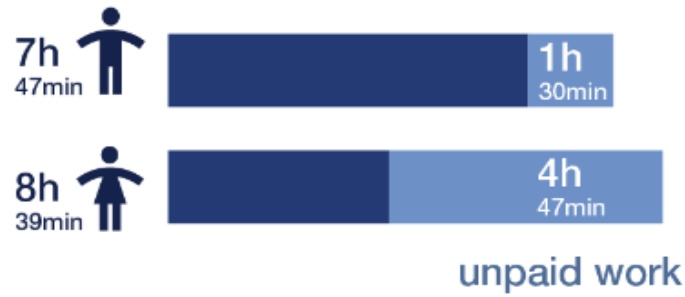
Source: OECD (80).

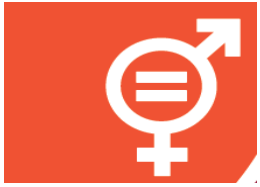
Pension gap, 24 OECD European countries





A working day for men and women





STOP VIOLENCE AGAINST WOMEN

In the WHO European Region

1 in 4 women has experienced **physical and/or sexual violence** by an intimate partner.



1 in 10 women has experienced **non-partner sexual violence**.



Violence against women IS PREVENTABLE

- ✓ Recognize it as a **public health** and **human rights** problem
- ✓ Create **policies** to eliminate violence against women
- ✓ Foster violence **prevention programmes**
- ✓ **Collect data** on prevalence, risk factors and health consequences
- ✓ Provide **women-centered services** for survivors
- ✓ **Train health care providers** in prevention and care

www.euro.who.int/violenceinjury

© WHO 09/2014

Still 47 years to go? Maybe more....

Austria

Gender Gap Index 2014

Rank

36

(out of 142 countries)

Score

0.727

(0.00 = inequality, 1.00 = equality)

Gender Gap Index 2016

Austria


rank
out of 144 countries **52**

score
0.00 = imparity
1.00 = parity **0.716**


Women's health and gender equality at RC66



2016




World Health Organization
REGIONAL OFFICE FOR Europe



3 GOOD HEALTH AND WELL-BEING
5 GENDER EQUALITY

Strategy on women's health and well-being in the WHO European Region



World Health Organization
REGIONAL OFFICE FOR Europe



3 GOOD HEALTH AND WELL-BEING
5 GENDER EQUALITY

Women's health and well-being in Europe:
beyond the mortality advantage

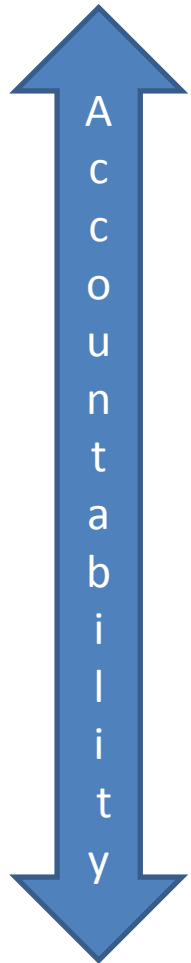


Vision

All girls and women are enabled and supported in achieving their **full health potential** and well-being, with their **human rights** respected, protected and fulfilled, and in which countries, both individually and together, work towards reducing **gender and socioeconomic inequities** in health within the Region and beyond



A transformative agenda: priority areas



Strengthening **governance** with women at the centre

Eliminating **discriminatory** values norms and practices

Tackling the impact of gender and other social economic, cultural and environmental **determinants**

Improving health **systems** responses to women's health and wellbeing

A transformative agenda: highlights

Governance

- Policy acknowledgement that it is more than maternal and child health
- Health and education sector working together to eliminate gender stereotypes: job segregation and
- Gender budgeting across sectors

Discrimination

- Intersectoral policies that value girls and eliminates harmful practices
- Addressing multiple discriminations: migrants, rural women, Roma women, older women, LGBTI
- Detecting and addressing discrimination: building capacity among health care providers to address discrimination, particularly VAW

Determinants

- Linking sex and gender with other determinants: NCDs and mental health
- Health and social protection sectors to reduce impact of precarious incomes

Systems

- Respond to women's needs with a lifecourse approach: CVD, mental health
- Gender based models of care: paid and unpaid work
- Eliminate sex and gender biases in research, use of medicines, prevention and care

Women in the changing world of work

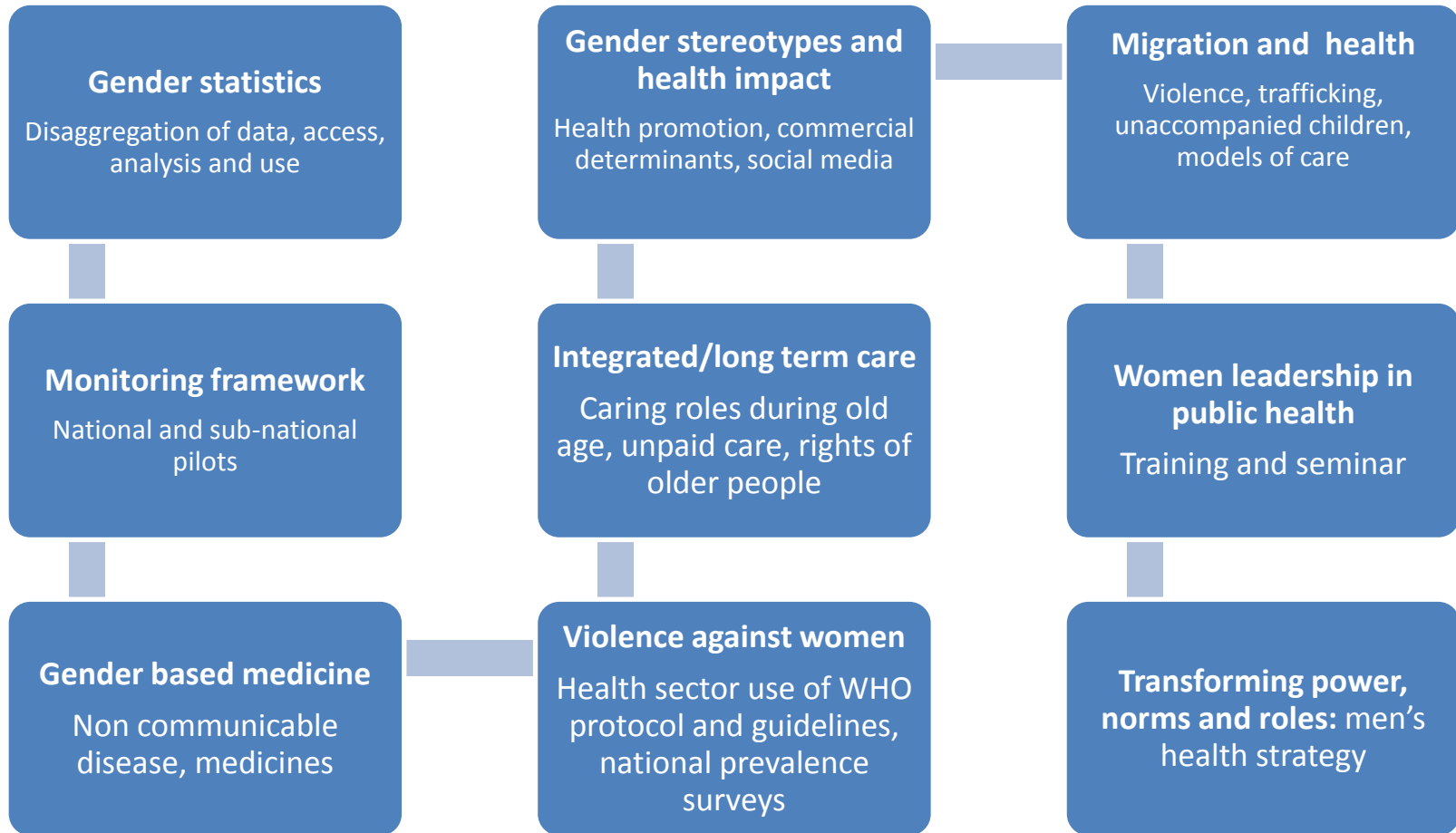
Top theme for IWD 2017 and CSW 61

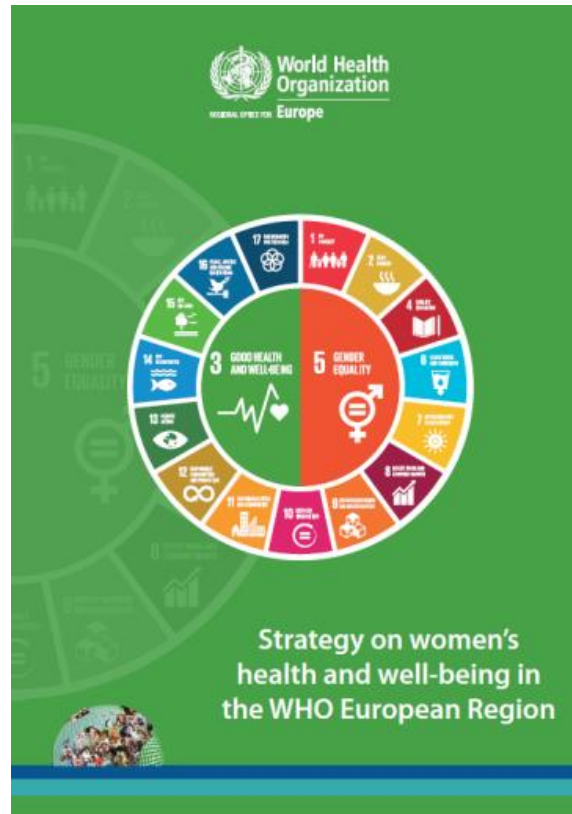
Implementing the European strategy for women's health and well-being

1. Strengthen opportunities and build capacities for women's participation and **leadership**
2. Promoting **gender equality** in all workplaces.
3. Reducing the negative impact on health and well-being of **precarious employment and working conditions**.
4. Ensuring that women's work is **equally valued**, that women's paid and **unpaid care work** is recognized, valued and compensated.
5. Supporting **sustainable models of care** that do not increase the pressure on women and in risk of social exclusion, including policies that **increase men's participation** in caring for their families (e.g. paternity leave).



Women's health strategy: initiatives by the WHO Regional Office





<http://www.euro.who.int/en/health-topics/health-determinants/gender>