

Women's Month 2021: Opinion Piece

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We celebrate this year's Women's Month under the theme:

"Generation Equality: Realising Women's Rights for an Equal Future".

The concept of Generation Equality is a global campaign and links South Africa to global efforts to achieve gender equality by 2030 for this *new generation*.

As early as 1956 on this 9th day of August, women in South Africa showed us a glimpse of what is possible with their courage, leadership and level of organisation. The significance of this day is critical and rightfully earmarked as a day to remember and reflect upon. The reflection for pharmacy sadly does not paint a picture of progress. Women pharmacists make up 65% of the total profession (10565 of 16340 registered). This "women dominant" theme runs through the entire profession from support staff to the current BPharm student population at our universities.

With the pharmacy profession dominated by women in South Africa, we have shown little appetite to interrogate the concepts of equality and women's rights and this must certainly be an indictment on our profession. Over the years we have celebrated women's month with national and international statistics showing the level of gender inequality and power imbalance between men and women. It is a well-known fact that these inequities significantly and negatively impact economic growth and social development. Gender equality is listed as one of the United Nations Sustainable Development Goals and included in the 21 FIP Development Goals for Pharmacy. Despite this, the pharma landscape in South Africa, very much reflective of the world order, is lagging behind the necessary targets for the 2030 agenda. Be it the top ten pharma CEO's in the country, the presidents/Chairs of our Associations, Heads of pharmaceutical services or owners of community pharmacies, every area reflects a minefield of barriers significantly obstructive to the advancement of women in pharmacy thereby inhibiting a breakthrough of the proverbial glass ceiling. Instances where companies, including significant players within the South African landscape, have demonstrated commitment to creating opportunities for women in leadership, have seen them move rapidly into the top ten of the FTSE 100 rankings.

Deloitte's report (Women in the boardroom, A global perspective, 6th edition) examines data-driven change and cites data from 8648 companies in 49 countries and across 136 000 directorships that show that only 16.9% of Board Seats are held by women and just 5.3% of Board Chairs are female. A country analysis reflects that Norway has the highest percentage of board seats occupied by women (41%) with South Africa (20%) and the UK (22.7%) at approximately half of that. The lowest quartile includes Russia (8.5%), Morocco (5.5%) and UAE (3.8%).



A reflection on this past year and the COVID-19 pandemic, identify women healthcare workers making up 70% of the global health workforce. As such, women have probably had to carry the additional burden of their professional safety at work added to the wellbeing and safety of their families at home at the end of each day. Culturally, the South African environment demands that women not only take care of their own but their extended family and further extending into the community. This situation is clearly reflected in data extrapolated from Italy, Spain and the US where more than 70% of COVID-19 infections amongst healthcare workers were women. Undoubtedly a similar exercise in South Africa would elicit similar results pertaining to our frontline workforce. Lotta and her team suggest that “gender-neutral policy-making neglects the needs of women” as they negate the significant portion of the representation of women in such data sets.

The starting point for pharmacy, in particular, is to do a deep dive to first understand the extent of the problem that our female pharmacy workforce faces. This will provide us with a path for acceleration and will go above and beyond the current strategic approach of setting representation targets, merely updating hiring and promotion practices without a clear actioning strategy and somehow expecting women to find their way to leadership roles. For real change to be effected, it will require a task team invested in the desire for such transformation, with the necessary technical and research skills to untangle this complex problem, lay bare the roadblocks and barriers, and set goals to achieve this ‘equal future’ centrepiece of the 2021 Women’s Month theme. Such an approach may yet give us a chance to attain the SDGs of 2030. We do have the competence and know-how inherent in the diverse skill set that characterises our professional workforce, particularly amongst the women pharmacists and support personnel. All that is required now is a genuine mind shift coupled with a commitment from each of the various players within the pharma industry.

The Beijing Declaration and Platform for Action of 1995—endorsed by 189 governments at the Fourth World Conference on Women held in China is the most visionary agenda for the human rights of women and girls, everywhere. The agenda seizes the moment to reimagine economies, societies, and political systems so that they uphold human rights and achieve gender equality, leaving no one behind.

For real change to be effected, it will require a task team invested in the desire for such transformation, with the necessary technical and research skills to untangle this complex problem, lay bare the roadblocks and barriers, and set goals to achieve this ‘equal future’ centrepiece of the 2021 Women’s Month theme.

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Let us seize the moment to reimagine economies, societies, and political systems so that they uphold human rights and achieve gender equality, leaving no one behind.

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