Every year the Global Gender Report highlights how far women are behind men. A recent study concluded that it will take more than 170 years to close the gap before men and women reach the same levels of education, pay, and care.

When women have equal access to education and health services, they’re able to meet their potential, and entire communities and economies thrive. The OECD (Organization for Economic Co-operation and Development) estimates that increased education for women and girls accounts for about half the economic growth in OECD countries between 1962 and 2012.

As the world faces increasingly complex health challenges—including aging populations, an epidemic of non-communicable diseases, and health risks due to environmental issues—the ability of women to thrive and strengthen communities and economies has never been more crucial, and yet it is still not a realistic possibility for so many around the world.

In many cases, limitations in data availability prevent us from fully understanding gaps in sexual and reproductive health and rights. This is why, when world leaders come together at the World Health Assembly in May, I implore them to take the opportunity to elect a leader who is able to urgently act for change, dignity, and justice for women and girls everywhere.

The Director-General of the World Health Organization has a unique ability to shape the policies and drive the research that can help to advance women’s health. Technical qualifications are incredibly important, and another criterion is equally critical: the diversity of perspective that is needed to understand and solve current global health challenges.

Diversity is often discussed exclusively in terms of quotas; however, having worked extensively in women’s health, I have seen behind the numbers and learned what diversity in gender and geographic
Health challenges are not the same across geographies and genders. From natural factors such as climate to systemic issues linked to finances and workforce training, health issues vary considerably between geographic regions. And from complications related to childbirth to inequitable access to care due to their gender, women face different health issues and risks than men.

In order for us to overcome challenges as a global community, we need to develop solutions based on a depth of understanding of these challenges that comes with experiencing them. This is the true value of diversity.

While diversity has advanced considerably in the UN system, there is still much progress to be made. Of the current heads of UN agencies, funds, programs, and other entities, 77% are men.

And in terms of regional representation, just two heads of agency come from the WHO's Eastern Mediterranean Region, and none are from the WHO's South-Eastern Asia Region.

Improving women's health at this critical juncture will require the prioritization of key issues such as health research and data collection, and listening to the needs and elevating the voices of grassroots women and girls. It will also require very strong, outspoken leadership by someone who fully understands the issues and the challenges.

Women are watching with concern as we see governments and UN agencies move further away from gender equality in leadership. Eyes are peeled for the new appointments. How will women fare? Who will the governments choose? Will they remember gender inclusion? Will they consider and in fact elect a capable woman?

The imminent WHO Director-General election provides a critical opportunity to step up for women around the world by not only moving toward geographic and gender equality, but also by electing a leader who is capable of improving the health of women and girls around the world through qualifications, priorities, advocacy, and leadership. On May 23, I will be hoping member states make the right choice and elect a woman to be Director-General of the World Health Organization.

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