

Gender barriers are worsening women's access to health care in Afghanistan

Protracted conflicts disproportionately claim more lives of civilian women and children than of armed combatants.¹ Low-income and middle-income countries are more vulnerable to diminished access to essential maternal health and reproductive health services when affected by conflict than are non-conflict countries. Inequalities are especially prevalent among the most disadvantaged, low-income, and least educated families living in rural settings and urban slums.²

For more than 40 years, Afghanistan has experienced chronic war and conflict, which has been severely detrimental to women's rights and health care. The country is now ranked 157 of 162 countries in the 2019 Gender Inequality Index (value of 0.655).³

Since 2003, the expansion of service provision coverage by Afghanistan's health-care system highly depended on funding from donors and out-of-pocket payments from patients. Considerable progress was made in improving maternal health indicators over this time. However, with the collapse of the Afghan Government on Aug 15, 2021, and the pausing of donor funding, gains made in the past two decades is now at risk.⁴

This political change has intensified pre-existing challenges faced by Afghan women that restrict their access to health-care services, especially in conflict-affected zones.⁵ An extremely conservative Afghan society and low literacy rate among women has limited their political, financial, and social mobility. Women

tend to have low paying positions as community health-care workers, nurses, and midwives and are poorly represented in high-paying managerial and policy-oriented health-related positions. The patriarchal culture dictates that a woman's income is taken and controlled by her husband or father and leaves her exposed to domestic violence and harassment from male colleagues and supervisors.

New challenges have also emerged since laws were enacted by the de-facto authorities, restricting employment, education, and movement of Afghan women. Women are no longer allowed to work and study in gender-mixed environments, and they cannot leave their homes to seek health care without a close male relative. Furthermore, there are no women in high managerial positions within the Afghan health sector. As high schools for adolescent girls close, the country will experience a female brain drain. Extreme poverty and food insecurity are further challenges that are disproportionately hampering the health of women.

We propose some key steps to prevent further deterioration of Afghan women's health. National and international organisations must advocate for removing the ban on education and employment for girls and women. UN agencies might also consider hiring women into high managerial

positions in health-related sections. Recruitment and robust training of female health workers throughout the health-care system is also necessary in a conservative society in Afghanistan; incentivised provisions, such as food and travel vouchers, for women at all levels of the health-care system could help retain female health experts in Afghanistan. Finally, interventions that increase women's access to health care at home, for example by investing in female community health workers, could help in improving women's health.

We declare no competing interests.

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- 3 UN Development Program. Human development report 2020. Dec 15, 2020. <https://hdr.undp.org/content/human-development-report-2020> (accessed June 2, 2022).
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- 5 Parray AA, Dash S, Ullah MIK, Inam ZM, Kaufman S. Female community health workers and health system navigation in a conflict zone: the case of Afghanistan. *Front Public Health* 2021; 9: 704811.