



**Arbeitskreis
Frauengesundheit**
in Medizin,
Psychotherapie und
Gesellschaft e.V.

AKF Charta

Preamble

Because of their differing physical, mental and socioeconomic conditions, women and men are healthy and sick in different ways. Additionally, differing life conditions, for example, those of lesbian women, single mothers, as well as women with chronic illnesses, foreign backgrounds, and disabilities can have an influence on women's health. The establishment of a women-oriented health care system can only succeed when the living conditions of women from all levels of life and in all states of health have an entry into the system.

The AKF, which consists of women from differing health professions and women's health organisations, understands health in the same manner as the Ottawa Charter, which is to say, health is a process dependent on various factors, among which the most important are a self-determined life style, a knowledge of the preconditions of health and illness, equal opportunities, social support and peace, access to medical and social care systems, participation in the political decision-making process, as well as a positive life perspective. Women consider health and sickness differently than men and also deal with it differently. Although this is scientifically recognised, these facts are rarely considered in the structures and services of our public health system, neither in the practice of health research nor in prevention, neither in diagnosis, therapy, care nor in rehabilitation. Therefore a change in the paradigm of women's health care is urgently necessary.

Aims of the AKF are

- To strengthen the women in their areas of competence
This means to give them information, to promote them with their resources, and support them so that they can determine for themselves their life and their health and be able to have an influence on the basic conditions under which health becomes possible;
- To be engaged in the integration of knowledge concerning women's ways of life in all medical and social areas relevant to health
- To work for the anchoring of a gender-sensitive approach in the sense of gender mainstreaming in all medical and social areas
- To establish a network of women's and health professionals' experiences and competencies on a national and international level
- To have an influence on politics and society with the aim of realizing a women-appropriate health care system.

Demands of the AKF

Patient sovereignty and patient information

- Women must be able to make their own decisions considering diagnosis, therapy and rehabilitation (“informed consent”).
- For women to have access to information about the diagnosis, therapeutic care and rehabilitation possibilities, the health care system must be formulated in a clear and understandable fashion.
- The realities of life, the health issues, and the behaviour of women within the health care system should thus be considered. Those employed in the health care system should receive appropriate education, training and continuing education.

The women’s health movement

Institutions and projects of the women’s health movement have to be maintained and further expanded. The women’s health movement in Germany has successfully developed projects, models und services for women’s health care. At the same time, it has made known the gender- blindness of the public health system. The furthering of this work is indispensable and must be guaranteed by public finances.

Structuring the health care system

Institutions and services of the health care system have to be directed toward the needs and requirements of women. The life styles and life circumstances of women have to be particularly kept in mind and an easy access to the health care system must be insured. Psychosocial, psychosomatic, psychotherapeutic and nursing expertise has to be included in the biomedical diagnoses, therapies, and rehabilitation and care of women. Health care structures must accordingly accommodate these needs, and the cost carriers (health insurance companies) must accordingly guarantee the improvement of women’s health care.

Education, training and continuing education

The principles of gender mainstreaming and a comprehensive understanding of health in the sense of the Ottawa Charter must be adopted within each medical, therapeutic, and nursing education training and continuing education course of studies within the various wellness and health professions. To achieve this, related curricula must be developed, and its use and implementation must be regularly reviewed. Moreover, all further service providers, i.e. pharmacists and workers involved in the national public health insurance system must be responsibly included and have to be appropriately educated in gender sensitive health care.

Research

Health research has to be carried out in a gender specific way. Necessary preconditions for the allocation of research funds must pose questions which consider the differing life-, work- and environmental conditions of women and men. Decision-making committees for the distribution of funds have to consist of at least 50% women. Research results have to be anchored in evidence-based and quality-secured treatment concepts, as well as in the education and continuing education of health professionals.

Health care coverage

Health reports by the German government and its individual states have to be established in a gender- sensitive manner. The manners and means of women's lives should be particularly considered. Women's health organisations are to contribute to the establishment of these health reports.

Special reports must be established in terms of specific health issues, i.e. the medicalisation of women's life phases, consequences of reproductive technologies, consequences of sexual and/or domestic violence. Models of good practice should be considered and presented within these reports.

Equal rights policy

Leadership positions in public health and all self-administration committees in public health, and health and social policies must achieve gender parity in their membership.

Services catalogue

The decisions about the adoption of new therapies in the catalogue of the GKV services have to consider gender- specific evidence of effectiveness, as well as proof of an increase in the subjective quality of life and evidence of the economic consequences for both genders in the sense of gender budgeting. Indirect and direct disadvantages for women should be counteracted by the insurance companies.

Networking

Women's health networks are to be promoted and supported on a local and national level in order to initiate on-site structural changes. The cooperation of politicians, scientists, and practitioners and self-help organisations should be continued, and important areas of women's health should be publicised.

In order to make known their rights, the women of the AKF are following on and working on the respective health topics, i.e. hormone replacement therapy and salutogenesis. They are analysing these topics in view of their women- and gender-specific content, are giving specific and general recommendations, and are continuing to promote dialogue over women's health.

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