# ISCCM Position Statement
# for Improving Gender Balance in Critical Care Medicine

*This Position Statement has been put together by the ISCCM Diversity, Equity and Inclusion (DEI) Committee through a consensus process involving Past Presidents and senior members of the ISCCM, using a Delphi methodology*

## AT THE WORKPLACE

### Workforce Recruitment

1. The recruitment of female staff in Critical Care Medicine should be independent of their plan for marriage, plan to have children, or spouse income. Questions related to these should be avoided.
2. Pay parity should exist between male and female staff with equivalent credentials and work profile.

### Addressing Healthcare Workers

3. To prevent female doctor from being identified as paramedics, they could be introduced as doctors to visitors/family members and could wear name badges.
4. The female staff should be introduced or addressed as equivalent to their male counterparts in professional organisations or conferences
5. Gender neutral titles/designations should be used (e.g. Chairperson instead of Chairman).

### Workplace Inclusivity

6. If feasible, irrespective of gender, healthcare workers should be permitted flexibility in working hours, provided for genuine family-related issues and for a limited period.
7. The infrastructural arrangements for female staff in the ICU should include the availability of separate changing rooms, toilets, and rest areas.
8. Maternity leave should be provided for female staff as per the existing national laws.
9. Equal work distribution and opportunity in academic activities, research and professional growth, should be provided to staff in the same position, irrespective of gender.

### Prevention of Harassment and Bullying

10. The measures to prevent harassment/bullying of female employees at the workplace should include:
    - Organising Prevention of Sexual Harassment (POSH) training programs at the workplace
    - Provision for non-judgmental anonymized reporting and redressal mechanisms
    - Separate committee to address/investigate harassment/bullying cases
    - Appropriate and transparent action taken against the offenders

## REPRESENTATION IN ISCCM

### Conferences

11. To improve female participation in the ISCCM annual conference, babysitting facilities should be provided, if requested.

12. To improve female representation in academic meetings, active efforts should be taken to identify female speakers for a particular topic.
13. Mentorship programs should be conducted for women.

**Electoral Positions**

14. To improve female representation on the ISCCM Executive Committee, College Board, or as Journal Editor, women should be actively encouraged to stand for ISCCM elections,

**Nominated Positions**

15. The female nomination in various ISCCM Committees (e.g., guidelines /research /scientific /organising committees/journal or newsletter editorial boards) should be proportionate to the membership ratio.

ISCCM: Indian Society of Critical Care Medicine