



An Inter-Governmental Organization for Promoting South-South Cooperation

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## WOMEN'S EMPOWERMENT AND GENDER EQUALITY

# PROMOTING WOMEN'S EMPOWERMENT FOR BETTER HEALTH OUTCOMES FOR WOMEN AND CHILDREN



#### Introduction

he fundamental right to the highest attainable standard of health, including physical, mental and social well-being has been recognized in many global, regional and national declarations and charters. There is now substantial evidence that healthy populations are a foundation for sustainable social, economic and environmental development and for peace and security, and vice versa. However, despite many advances over the previous decades, large numbers of disadvantaged people still suffer ill health, with thousands dying every day from preventable causes. Women and children from underserved communities bear a particularly high burden of preventable disease and death.

Post 2015 discussions have noted that improvements in population health will require multisectoral investment in the social, environmental and economic determinants that have slowed progress towards the health MDGs. The Partners in Population and Development meeting on "South-South Cooperation in the Post ICPD and MDGs" aims to identify opportunities to strengthen south-south collaboration towards achieving the MDGs and in the Post 2015 era.

This strategy brief focuses on 'how to' strengthen cross-sectoral approaches between health and its social, economic and environmental determinants. It is part of a series of strategy briefs which can be accessed at http://www.who.int/pmnch/knowledge/publications/strategybriefs/en/.

## **Women's Empowerment and Gender Equality**

Women's empowerment and equality is a fundamental human right and critical to achieve development objectives, including health. Women's increased political participation, control of resources including land, access to employment and education are crucial for promoting sustainable development. There are numerous pathways by which greater gender equality can lead to improvements in health and quality of life for women and their family members. Women with greater agency are more likely to have fewer children, more likely to access health services and have control over health resources, and less likely to suffer domestic violence. Their children are more likely to survive, receive better childcare at home and receive health care when they need it. At the same time, improved health outcomes for women can help to strengthen their own agency and empowerment. Healthy women are more able to actively participate in society and markets and take collective action to advance their own interests. They are likely to have greater bargaining power and control over resources within the household. Therefore collaborative action between gender and health can help maximize the impact of gender policies on health and vice versa.

# **Cross-sectoral Challenges**

Despite the recognized benefits for health and development outcomes, mainstreaming strategies for women's empowerment into sectoral initiatives has proved to be challenging without sustained high level political engagement. The technical expertise required to realise such benefits, including the expertise to understand the complex process of gender reform, measure progress through gender-specific performance indicators, garner the support of key stakeholders, and challenge deeply-entrenched gender norms and power structures throughout society is often lacking. Where the expertise exists, it is frequently situated in gender-specific departments, and there is limited incentive for policymakers and programme managers from other sectors and departments to interact or engage with it.

# **Practical Strategies**

Despite these challenges, there are examples of practical strategies which have capitalised on the synergies between women's empowerment and women and children's health outcomes.

#### 1: UNDERSTAND THE POLITICAL CONTEXT FOR GENDER REFORM

Gender progressive policy-making and the process of gender reform requires policymakers across sectors to be informed of the relevant stakeholder relationships and the formal and informal institutions that can influence gender equality and strengthen the links between gender and health. Institutional and stakeholder analyses can help to identify entry points and priorities for reform, understand opposition to reform, and inform coalitions for change and strategies to engage critics. An institutional analysis focuses on formal and informal institutions, including the legislative framework for gender equality (e.g. property rights, labour market regulations or family law), customary traditions, and the societal and cultural norms that determine gender roles and create incentives for stakeholder behaviour. A stakeholder analysis provides policymakers with information on which actors are likely to support or oppose policy change and implementation and identify champions who can facilitate high-level commitment to gender equality. This process must be underpinned by and supported by an in-depth analysis of the socioeconomic context and the specific differences in needs, opportunities and constraints faced by women and girlsincluding age, marital status, ethnicity, geography, education, economic status and religion. A solid evidence base is imperative for informing policymakers across sectors of the

# CASE STUDY: ECONOMIC AND SOCIAL EMPOWERMENT THROUGH EMPLOYMENT OPPORTUNITIES FOR WOMEN IN HEALTHCARE AND SUPPORTING FREE MOVEMENT IN PAKISTAN

The Pakistan Lady Health Workers programme (LHWP) is a major public sector initiative to provide reproductive healthcare to women in Pakistan. It employs almost 100,000 women as community health workers who address women's reproductive healthcare needs by providing information, basic services and access to further care. The programme has had substantial positive impacts on family planning, antenatal care, neo-natal check-ups and immunisation rates in the communities it serves. It has also had significant effects on the lives of the health workers. They receive training, are knowledgeable and gain respect, earn an income, and have become more visible and mobile within their communities. An evaluation has shown that the women are more empowered: they have greater say in intra-household decision-making, including family planning and health-seeking behaviour. One driver of success is that the initiative builds on existing processes of socio-economic change in Pakistan, including rapid urbanization, and increasing acceptance of female education. Moreover, the government has clearly promoted it as a government job, and has given it considerable media coverage, giving the women needed credibility in their communities. The new status of these women and their authority in their communities has no doubt contributed to the programme's ability to improve women's and children's health outcomes.

key gaps, challenges and opportunities for gender mainstreaming in the design of policies and initiatives.

#### 2: GARNER BROAD BASED SUPPORT

Gender sensitive reforms within and across sectors are most likely to succeed when support is broad-based and/or high level. Engagement with civil society, the private sector and other stakeholders is imperative. Women's organisations have historically played a critical role in promoting changes in society, attitudes and policy, in particular regarding labour legislation and family law. For example, the Self Employed Women's Association in India has advocated and created initiatives for female workers to obtain better work, income, food and social security. Men also play a significant role in support of women's empowerment in their roles as partners, fathers, political or traditional leaders and in business. While the evidence suggests that both men and women need to be engaged in changing gender roles and norms, public policies still rarely reflect on the role of men in changing gender norms, and a limited number of small-scale initiatives exist. The Rwanda Men's Resource Centre engages men and boys in promoting positive masculinities, healthy families and combating gender-based violence by organising training, undertaking research and national advocacy. The Rwandan government has also, through high level commitment by the head of state, been able to increase women's representation in parliament and the public sector. In Malawi the 50/50 campaign, driven by the Malawi Electoral Commission, aims to increase female representation in political offices through policies, such as the reduction of fees for women running for office.

#### 3: CREATE FORMAL AGREEMENTS, CODES AND LAWS TO CHANGE NORMS THAT VIOLATE WOMEN'S RIGHTS

Government action can lead to transformative reforms across different sectors through policy interventions related to improving women's economic opportunities (e.g. parental leave, child care), closing gaps in access to assets (e.g. land and ownership rights, inheritance laws), or reducing differences between men's and women's voice within society (e.g. quotas for political representation) or the household (e.g. family law governing marriage and divorce, freedom of movement or property rights). In some countries these reforms may require the reconciliation of multiple legal systems including customary and religious law. For instance in Tanzania the current land legislation, which was enacted in 1999 after an extensive process of consultation and debate, includes provisions specifically aimed at strengthening the land rights of women, while recognising customary law and existing rights. This progressive law was in part made possible by the participation of Tanzania's strong civil society in the debates preceding the legislation. Civil society has also used litigation as a strategy to strengthen women's land rights.

#### **4: IMPLEMENT AND ENFORCE POLICY REFORM**

The implementation of policy reform in any sector is complicated, especially when policies run counter to conservative gender norms. This is especially true when the status quo is perceived to be challenged and the constituencies who benefit are poor and politically marginalised women. Understanding institutions and stakeholder positions helps to devise a tailored and successful implementation. The Pakistan Lady Health Workers programme (LHWP), successfully gave female health workers credibility and authority in their communities and helped to overcome conservative norms which restricted women's mobility (see case study). Mainstreaming gender in budgets is also crucial to ensure enabling the implementation the gender sensitive policies.

#### **5: Make Policies Gender-Smart**

Successful gender mainstreaming ensures that the determinants of inequality are tackled at all stages of the policy cycle. This includes ensuring policies integrate a human rights based approach, focusing on non-discrimination and equality; participation and inclusion; accountability and the rule of law. The design and implementation of policies must also consider the potential of unintended negative consequences, such as increasing gender-based violence or re-enforcing inequalities within the household, and ways to

# CASE STUDY: GENDER-SMART CONDITIONAL CASH TRANSFER PROGRAMME IN EGYPT

The Egyptian CCT pilot programme works with low-income families, especially mothers and female heads of household with school-aged children. The families are given monetary transfers from the government on certain conditions (minimum school attendance, regular visits to health clinics, nutrition). The programme has an explicitly gender-smart design that takes into account gender critiques of other CCT schemes (e.g. adding to women's time poverty and taking agency away through strict conditions that can reinforce women's role as carer). For example, mothers are still responsible for fulfilment of the programme's conditions, but other interventions are in place to alleviate the burden placed on them, such as financial compensation for time spent fulfilling programme conditions, essentially recognising the value of their time and providing them with an income, thereby enhancing their independence and agency. Social workers monitor the loan conditionalities, visiting the women once a month, talking to them as family representatives, and providing them with much-needed support in terms of access to resources. This has included empowering measures such as cash for small businesses, as well as cash to support ill or handicapped family members, and in some cases support in combating family members' drug addiction.

address these. For example, a conditional cash transfer (CCT) programme in Egypt to improve education, health and nutrition takes into account gender critiques of other CCT schemes by making provisions to avoid reinforcing gender inequalities in the household (see case study). Designing gender-smart policies also requires that women are involved in all stages of design,

planning and implementation.

#### **6: BUILD TECHNICAL EXPERTISE**

Successful gender mainstreaming needs to go hand-in-hand with training and capacity building for policymakers, programme managers and implementers in order to develop gender expertise in all sectors. This will help to improve understanding of the interface between women's empowerment and health outcomes, and to facilitate gender-sensitive cross-sectoral collaboration by all actors.

#### 7: TRACK PROGRESS IN ADDRESSING OBSTACLES TO WOMEN'S EMPOWERMENT

Monitoring and evaluation of sectoral initiatives and cross-sectoral collaborations to improve women's and children's health should include indicators to measure the effect of initiatives on women's empowerment and gender equality, including gender inequities in health. Gender-sensitive monitoring and evaluation uses gender-specific indicators and data disaggregated by sex to identify disparities in outcomes and impact of any given policy and the gender-related factors underlying them. Most national Demographic and Health Surveys include indicators to measure women's empowerment (see for example the Nigerian DHS Chapter 15).

# **Supporting Tools and Technologies**

Institutional, political and social analysis	Holland, J (2007) Tools for Institutional, Political and Social Analysis. A Sourcebook for Development Practitioners. The World Bank. Washington D.C. http://go.worldbank.org/GZ9TK1W7R0
Advocacy	Pan American Health Organisation (PAHO) and World Health Organisation (WHO). Gender and Health Advocacy Kits: http://www1.paho.org/english/hdp/hdw/advocacykits.htm
Engaging men and boys	Institute of Development Studies, IDS (2012) Mobilising Men in Practice: Challenging sexual and gender-based violence in institutional settings. Tools, Stories, Lessons. http://www.ids.ac.uk/files/dmfile/MobilisingMeninPracticeonlinefinal.pdf
Gender analysis and mainstreaming	March, C., Smyth, I. and M Mukhopadhyay (1999) A Guide to Gender-Analysis Frameworks. Oxfam. http://policy-practice.oxfam.org.uk/publications/a-guide-to-gender-analysis-frameworks-115397 Moser, A. (2007) Gender and Indicators. Overview Report. BRIDGE/IDS. http://www.bridge.ids.ac.uk/reports/IndicatorsORfinal.pdf SIDA (1997) Handbook for Mainstreaming a Gender Perspective in the Health Sector. http://jamda.ub.gu.se/bitstream/1/165/1/sida_health.pdf

## **Opportunities to Engage**

The discussions on the post-2015 development framework provide a key opportunity to engage policymakers on the importance of women's empowerment for women's and children's health outcomes. Gender should be a central part of the Inequalities thematic group, but should also cross-cut discussions in all other groups, so that the overall approach to the new framework is equity-focused and gender-sensitive. The annual World Health Assembly provides an excellent global forum to discuss the importance of gender equality for the health outcomes of all. Gender-related conferences such as the Women's Health Annual Congress (next one in April 2014), the Commission on the Status of Women organized by UNWomen provide an excellent opportunity for policymakers from any sector to understand the issues at the nexus of gender and health. The International Conference on Population and Development Beyond 2014 Review is also a key opportunity to influence the future of global population and development policy at national, regional and global levels.

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   Geneva. http://www.who.int/gender/women\_health\_report/en/
- MenEngage Global Alliance. http://www.menengage.org/