

# Making the MDGs Work for All

Gender-Responsive Rights-Based Approaches to the MDGs





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Lorraine Corner, July 2008

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## LIST OF ABBREVIATIONS

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BPFA	Beijing Platform for Action
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
DHS	Demographic and Health Survey
FAO	Food and Agriculture Organization of the United Nations
GDP	Gross Domestic Product
GNI	Gross National Income
GNP	Gross National Product
HIPC	Highly indebted poor countries
IASC	Inter-Agency Standing Committee
IDPs	Internally Displaced Persons
ICESCR	International Covenant on Economic, Social and Cultural Rights
IFI	International Financial Institutions
ILO	International Labour Organization
LDCs	Least developed countries
MDGs	Millennium Development Goals
MDRI	Multilateral Debt Relief Initiative
MICS	Multiple Indicator Cluster Survey
NGOs	Non-Governmental Organizations
ODA	Official Development Assistance
OECD	Organization for Economic Cooperation and Development
OECD/DAC	Organization for Economic Cooperation and Development— Development Assistance Committee
PPP	Purchasing power parity
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
UNIFEM	United Nations Development Fund for Women
WHO	World Health Organization



## PREFACE

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**M**aking the MDGs Work for All: Gender-Responsive Rights-Based Approaches to the MDGs is a resource on how to implement the Millennium Development Goals (MDGs) from a gender equality and women's empowerment perspective. It is especially designed to assist development policy makers, planners and practitioners from government and civil society to develop, implement and monitor strategies to achieve each goal for all – women and men, girls and boys – in ways that adapt global goals and indicators to national and local contexts and draw links between the different MDGs.

Promoting gender equality and empowering women is clearly embedded in the Millennium Declaration, and is one of the eight MDGs. Set at the heart of the development agenda, the MDGs are a fresh promise for progress on gender equality and women's empowerment. Conversely gender equality and women's empowerment are critical to achieving the MDGs – most obviously Goal 2 on universal primary education, Goal 4 on reducing child mortality, Goal 5 on improving maternal health, and Goal 6 on combating HIV/AIDS, malaria and other diseases. Gender equality and women's empowerment also contribute to Goal 1 on poverty reduction and to economic growth directly through women's increased labour force participation, productivity and earnings, as well as indirectly through beneficial effects on children's well-being and the quality of the next generation's human resources. Women are also key players in the achievement of Goal 7, ensuring environmental sustainability.

However gender equality perspectives are poorly reflected across all the MDGs in their current formulation. Most either have inadequate or no gender sensitive targets and indicators, making them difficult to achieve. Second, the target for Goal 3 on gender equality and its indicators are limited. They represent a possible means to equality and do not necessarily reveal the quality of rights women enjoy or women's real empowerment. Third, the MDGs appear as stand alone goals, blurring the multi-sectoral links between all goals, targets and indicators, including the cross-cutting gender link. For instance, preoccupation with maternal health and gender disparities in education, without addressing their relationship to feminized poverty, gender biases in the economy, gendered violence and ideologies, could thwart gender equality, women's empowerment and thus the achievement of all the goals.

UNDP reviews of 13 and 78 MDG reports for 2003 and 2005 respectively establish that gender equality is not adequately mainstreamed into national reports; traditional gender role and trait stereotyping persists; an instrumentalist rather than a right-based focus frames approaches to gender equality; sex-disaggregated quantitative data is not supplemented by qualitative data or adequate gender analysis; the nature of reporting makes invisible the cross-linkages between targets and indicators across goals; and involvement of gender equality advocates in the preparation of MDG reports across all the goals is lacking.

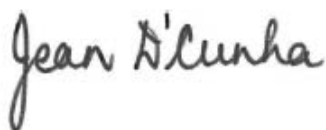
Global statistical data for 2005 reveals that girls constituted 57 per cent of the 72 million children of primary school age not enrolled in school. Globally, women were 48 per cent of those living with HIV/AIDS. More than half a million women died each year of treatable and preventable complications in pregnancy and childbirth. Preventing unplanned pregnancies alone could avert one quarter of these deaths, yet 137 million women have an unmet need for family planning and an additional 64 million were using traditional methods with high failure rates. Women formed only 39 per cent of non-agricultural wage labour, but more than 60 per cent of unpaid family workers. Thus the majority of women lacked access to cash incomes, job security and social protection. Quite obviously a poor gender equality and women's empowerment score card spells poor performance in MDG achievement.

Against this background, this UNIFEM publication that presents a gender-responsive rights-based approach to MDG implementation, is a useful and relevant resource with strong East, Southeast, South Asian, and national resonance. It is gender-responsive and rights-based in that it takes account of (a) the different and unequal situation of women and men, girls and boys in most contexts and (b) the different and discriminatory impact of policies and institutions that mirror these socio-economic and political inequities between women and men, girls and boys. It calls attention to ensuring that policy, institutional and social environments – structure, process and content – guarantee that men and women, boys and girls have equal access to opportunities and benefits; that the State as duty bearer is obligated to protect, respect and fulfill the rights of all and to ensure that others do so too; that the capacities and capabilities especially of the most vulnerable are built to claim their rights and entitlements. The publication argues for the comprehensive and indispensable use of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Beijing Platform for Action (BPFA) frameworks - endorsed, owned and committed to by all 10 ASEAN Member States – to ensure MDG implementation.

Part One of the publication sets the framework for a gender-sensitive rights-based framework to achieving the MDGs. It begins by mapping out the elements of a gender-sensitive rights-based approach to development. It provides an overview of the MDGs, specifically highlighting (a) the inadequate integration of gender into MDG implementation and reporting; (b) the need to adapt the MDGs, including its gender dimensions to regional and national contexts; (c) the need to forge links between all the MDGs, including the gender links. This section then maps out the causes for slow MDG implementation in several countries, especially in the South and Southeast Asian region, in part due to inadequate attention to gender equality and women's empowerment. It then suggests measures to achieve gender-sensitive rights-based MDG implementation and reporting for the future, emphasizing the use of CEDAW, BPFA and MDG principles and processes as mutually reinforcing mechanisms. This involves the following: that institutional mechanisms engage CEDAW and BPFA advocates at all stages of MDG implementation; that we draw on the rich data and analysis generated in the CEDAW and BPFA review processes to inform gender equality and women's priorities in relation to all MDGs; draw on CEDAW and BPFA to frame MDG targets and indicators across all goals; upscale tried and tested strategies under CEDAW and BPFA to inform National Development Policies, Plans and Programmes to achieve the MDGs; draw on the CEDAW and BPFA monitoring and review processes to draw attention to MDG-related progress and challenges in delivering on gender equality and women's empowerment; ensure that MDG resources are adequately allocated and spent on gender equality and women's empowerment concerns.

Part Two of the publication emphasizes application – how to engender MDG implementation. It analyzes each goal with its current targets and indicators from a gender equality and women’s empowerment perspective; provides specific information and analysis on gender equality and women’s empowerment concerns across each of the MDGs; suggests gender-sensitive targets and indicators for each goal that are relevant at national and subnational levels; shows how to mainstream a gender-sensitive rights-based perspective into MDG implementation, highlighting the principles, processes and strategies involved in the same from the good practice of countries in the region and beyond. In doing so, this publication complements the 2005 UNIFEM publication *Pathway to Gender Equality*<sup>1</sup>, which draws the conceptual link between CEDAW, BPFA and the MDGs as mutually reinforcing processes and provides an overview of the specific actions recommended by CEDAW and BPFA to achieve each goal.

UNIFEM invites development practitioners within government and civil society to draw on the rich data, analysis, targets and indicators in the publication to engender the implementation of all MDGs.



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**PART ONE**  
UNDERSTANDING THE GLOBAL  
MILLENNIUM DEVELOPMENT GOALS

## Understanding the Global Millennium Development Goals

In 2000, the global community came together to take a global approach to development. The Millennium Declaration—adopted by 189 of the 192 Member States of the United Nations—identified peace, security and development, including environment, human rights, and governance, as the main global development challenges. The Declaration resolved, among other things, to promote gender equality and the empowerment of women as effective ways to combat poverty, hunger and disease and to stimulate development that is truly sustainable.

The Declaration consolidated a set of inter-connected development goals into a global agenda in the form of the Millennium Development Goals. The current goals and targets, as revised in 2007, are shown in Matrix 1.

Matrix 1: The Millennium Development Goals and Targets			
Goals		Targets	
1.	Eradicate extreme poverty and hunger	1.A	Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day
		1.B	Achieve full and productive employment and decent work for all, including women and young people
		1.C	Halve, between 1990 and 2015, the proportion of people who suffer from hunger
2.	Achieve universal primary education	2.A	Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling
3.	Promote gender equality and empower women	3.A	Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015
4.	Reduce child mortality	4.A	Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate
5.	Improve maternal health	5.A	Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio
		5.B	Achieve, by 2015, universal access to reproductive health
6.	Combat HIV/AIDS, malaria and other diseases	6.A	Have halted by 2015 and begun to reverse the spread of HIV/AIDS
		6.B	Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it
		6.C	Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Matrix 1: The Millennium Development Goals and Targets	
7. Ensure environmental sustainability	<p>7.A Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources</p> <p>7.B Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss</p> <p>7.C Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation</p> <p>7.D By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers</p>
8. Develop a global partnership for development	<p>8.A Develop further an open, rule-based, predictable, non-discriminatory trading and financial system. Includes a commitment to good governance, development and poverty reduction – both nationally and internationally</p> <p>8.B Address the special needs of the least developed countries. Includes: tariff and quota free access for the least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction</p> <p>8.C Address the special needs of landlocked developing countries and small island developing States (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)</p> <p>8.D Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term</p> <p>8.E In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries</p> <p>8.F In cooperation with the private sector, make available the benefits of new technologies, especially information and communications</p>

The Millennium Development Goals represent a vision or aspiration at the global level, and are derived from the averages of long-term global trends (primarily during the 1970s and 1980s), projected forward to 2015. The global goals and targets **cannot** be taken directly as appropriate targets for any individual country. Progress in meeting the global targets should be assessed at the global level, and any failure to meet the targets reflects a failure of the

global community. Individual countries should adapt the global goals, targets and indicators to their specific situation and context, and their progress should be measured against these national goals, targets and indicators.

## A. Gender in the Millennium Development Goals

The Millennium Development Goals include a specific goal on gender equality and women's empowerment—Goal 3. However, the role of gender in the goals has been the subject of criticism and a source of confusion among countries and agencies struggling to implement and monitor them at country level.

Since the submission of the early national reports, a number of studies have explored this issue. In 2003, the World Bank publication *Gender Equality & the Millennium Development Goals*<sup>2</sup> reviewed the MDGs as a whole from a gender perspective, emphasizing that achievement of Goal 3 was an essential input to the achievement of all eight goals.

In the same year, a gender review of 13 national MDG reports by the United Nations Development Programme (UNDP) focused on whether and how reports incorporated gender, mentioned women's issues and/or identified gender and women's issues in goals other than Goal 3. The review revealed that:

- gender equality and women's empowerment perspectives were not adequately mainstreamed into reports;
- women were still viewed in terms of their vulnerabilities and traditional gender roles;
- the approach to women under the other goals was instrumental—seeing improvements in women's situation as a means of achieving other goals, such as reducing child mortality—rather than rights-based and focused on realizing women's human rights as the primary objective.<sup>3</sup>

The review considered adding at least one gender-specific indicator to each target but, due to concerns about data availability, national capacities, and the reporting burden on countries, instead recommended more sex-disaggregated data showing differences between females and males, and more qualitative information on gender and women's issues.<sup>4</sup>

In 2005, the UNDP Bureau of Development Policy reviewed all the 78 national reports that were available against similar criteria, but in more detail and with more thorough gender analysis.<sup>5</sup> The review identified three areas of concern that needed to be addressed to align reporting with strategic priorities for gender equality.

### *Range and scope of reporting*

- reports tended to cover only the minimum set of indicators;
- data were rarely disaggregated along other axes of inequality such as class or ethnicity;
- where sex-disaggregated quantitative data were used, they were not supported by qualitative data or adequate gender analysis.

### *Linkages across goals*

- targets and indicators overlap across goals but the approach to reporting made these cross-linkages invisible. For example, the dependence of child survival on gender equality was not apparent, and linkages were not drawn between eradicating poverty and hunger, gender equality and improving maternal health.

#### *Ownership and buy-in*

- there was wide variation in the extent to which non-government groups were involved in producing national MDG reports. Women's groups and gender experts should have been involved for all goals.

*Gender and the Millennium Development Goals*, a review published by Oxfam in June 2005, highlighted a number of weaknesses in both the goals themselves and their implementation:<sup>6</sup>

- Goal 1 views poverty as lack of income and food, but poor women experience poverty in many ways, including economic, social and political marginalization;
- the Millennium Development Goals do not support non-poor women whose security and human rights are threatened by, for example, domestic violence or barriers to political participation;
- the goals have a limited view of empowerment as a technical goal to be implemented by the same decision makers and institutions that have disempowered women in the past;
- the paralysing effect of poverty on women's ability (sometimes described as 'agency') to overcome inequality is not recognized or addressed;
- the goals adopt an instrumental approach on gender that uses women to deliver other aims without really addressing gender inequality or the needs and priorities of women.

Oxfam emphasized the need to view the goals from the perspective of the Millennium Declaration, and to more clearly link the Millennium Development Goals to women's human rights, the Beijing Platform for Action and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW).

In 2007 a revision of the targets and indicators under the MDGs led to some important changes. Of particular significance to gender equality and women's empowerment was the inclusion of two new targets: 'achieve full and productive employment and decent work for all, including women and young people' and 'achieve universal access to reproductive health by 2015'. In addition, all relevant indicators are to be disaggregated by both sex and age. This is a significant step forward, and reflects persistent inter-agency advocacy and technical work, particularly by UNIFEM.

## **B. Human Rights in the Millennium Development Goals**

Although not explicitly presented within a human rights framework, the Millennium Development Goals have the potential to support a rights-based approach through their emphasis on investment in public goods such as health, education, water and sanitation and other infrastructure, and through their call for gender equality.<sup>7</sup> In 2005, the then Secretary-General noted that development, security and human rights go hand in hand.<sup>8</sup> Indeed, Section V of the Millennium Declaration commits Member States to promote 'respect for all internationally recognized human rights and fundamental freedoms, including the right to development'. The Declaration explicitly referred to the Universal Declaration of Human Rights, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child.<sup>9</sup>



CEDAW and the Beijing Platform for Action each contain a wealth of information that is directly relevant to efforts to apply a gender-responsive rights-based approach to the Millennium Development Goals—further detailed in the International Agreements Appendix of this report. The three international agreements have complementary and mutually reinforcing roles:

- CEDAW highlights specific areas of women’s rights;
- the Beijing Platform Critical Areas of Concern provide a roadmap of the actions needed to achieve gender equality and women’s rights;
- the Millennium Development Goals, as the focus of the global development agenda, present an important opportunity for integrating a gender-responsive and rights-based approach into development in ways that will benefit all—women and men, girls and boys.

Both CEDAW and the Beijing Platform for Action emphasize the relationship between women’s rights and human rights:

- women’s rights are human rights, and human rights are also women’s rights;
- women, as human beings, have equal rights with men in all spheres of life, a principle not yet recognized in law in many countries, nor achieved in reality in any country;<sup>10</sup>
- due to their biological and gender roles, the loss of certain human rights—eg reproductive rights, and the right to a life free of all forms of violence—has a greater impact on women than on men.

### C. A rights-based approach to development

A rights-based approach regards development, poverty alleviation and gender equality as processes toward the full realization of human rights. Equality and non-discrimination are important ends in themselves, not merely a means of achieving the Millennium Development Goals.

Four basic principles must be met in a rights-based approach.<sup>11</sup> Each explicitly includes gender equality between women and men and a gender perspective that recognizes that women have different roles from men and therefore different needs, priorities and specific rights. The four principles are:

- **participation** in the process of decision-making by all those who are potentially affected, particularly women and poor people;
- **accountability** that enables rights-holders—females and males—to claim their rights and ensures that the State fulfils its obligations as duty bearer;
- **empowerment** that gives women and men the power, capacities, capabilities and access to resources to enable them to change their own lives;
- **non-discrimination** and specific attention to vulnerable groups. Discrimination is defined as ‘any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.’<sup>12</sup>

A rights-based approach emphasizes processes equally with outcomes. The key processes to be observed in implementing a rights-based approach are:

- **ensuring broad participation in decision-making**, especially of poor people and marginalized poor women;
- **holding governments accountable** through transparency of process and results and widespread access to information. All citizens, including women, have a right to hold their governments accountable for progress in implementing international and national commitments, including the MDGs, CEDAW and the Beijing Platform. In order to do this, they must have ready access to the necessary information;
- **empowering women**, especially poor women, through capacity-building to support informed and active participation;
- **removing discrimination and including women**, the poor and disadvantaged groups as active agents in development rather than as passive beneficiaries. The principle of non-discrimination requires an active effort to identify those who are discriminated against, trace the causes and mechanisms that result in discrimination, and actively address them.

The challenge for gender equality and women's empowerment lies in effective implementation of gender equality policies. This requires civil society and women's groups to be empowered to claim their rights, work with their governments, and monitor results through gender-responsive targets and indicators.

## D. Lack of gender-responsive rights-based approach contributes to slow progress

In many countries, progress against the Millennium Development Goals at any reasonable level has been less than satisfactory. As the Secretary-General of the United Nations said in *The Millennium Development Goals Report 2005*, 'the report shows us how much progress has been made in some areas, and how large an effort is needed to meet the Millennium Development Goals in others'.<sup>13</sup>

One of the principal reasons for slow progress is that the policies and programmes designed to achieve the goals have not been implemented in a gender-responsive way to ensure that interventions are as effective in reaching and addressing the needs of women and girls as they are in addressing those of men and boys. In most countries, women and girls form more than half of the population, with important roles in the economy, managing and supporting their households and caring for family and community. However, a gender-responsive approach that equally benefits females and males is often not evident:

- the specific situations, problems and priorities of women and girls are not considered, leading to gender blind strategies and programmes. For example, overlooking the role of women and girls in an issue may mean that a key target group of a strategy is not reached. As a result, the country as a whole may suffer;
- targets are not disaggregated by sex or other socio-economic variables, meaning that the specific needs of social groups most in need, especially women and girls, are not prioritized. This often has negative consequences both for those groups and the country as a whole.

#### Women's roles are often overlooked

Agricultural policies and programmes often overlook the role of women in small livestock and crop farming, concentrating on male farmers. However, in countries such as Thailand, many men in farming households have migrated to urban areas in search of wage employment, leaving women to do most of the farming. If agricultural extension programmes and information that could increase agricultural productivity are not designed with this in mind, they may not reach these female-headed households, and their impact will be much less.

Another reason for the slow progress is failure to link implementation of the Millennium Development Goals to a rights-based approach that empowers all people—both women and men—to claim their rights and become active agents in their own development, as well as that of their families, communities and the nation. In the great majority of national MDG reports, the issue of human rights is either absent or rates only a token reference.<sup>14</sup> The basic principles of a rights-based approach are often weak or absent:

- in terms of **participation**, policies and programmes are developed without the participation of civil society or beneficiaries;
- in terms of **accountability**, information on policies, programmes and people's rights is not widely available, especially to women and disadvantaged groups, and the lack of transparency and avenues such as parliamentary committees or a free press make it difficult for civil society and other groups to hold governments accountable;
- in terms of **empowerment**, women, the poor, minorities, the disabled, internally displaced persons, refugees and other disadvantaged groups lack the capacity to participate on an active and informed basis in decision-making and monitoring;
- in terms of **non-discrimination**, governments fail to identify or address direct or indirect discrimination experienced by women, the poor, ethnic minorities, the disabled and disadvantaged groups.

For policies and programmes to be well designed and implemented, monitoring and reporting must also be gender-responsive and rights-based. However, with few exceptions, national monitoring and reporting are neither. The reasons include:

- **lack of data on gender issues:** data available for monitoring and reporting do not cover many gender issues where males and females have different interests or different outcomes. These may include inequalities between women and men in access to and ownership of resources such as land, livestock, credit and property; inequalities between females and males in inheritance; and inequalities in total workload due to women's combined responsibilities for labour force participation, household chores and family care;

- **gender-insensitive data collection methods:** most data are collected from interviews with male household heads, usually by male enumerators who are also supervised by men. The process is not sensitive to the different situations, roles and priorities of women and men or to the need for data on the specific needs of women, including women in disadvantaged groups;
- **lack of sex-disaggregation in data available for monitoring:** even when collected by sex, data are often not shown separately for females and males;
- **lack of sex-disaggregation for data at more detailed levels:** even where sex-disaggregated data are provided, the breakdown by sex is often limited only to totals and does not extend to more detailed levels of analysis. For example, the total labour force may be shown separately for females and males but detailed industrial and occupational classifications are shown only for the total labour force. Other areas where detailed sex-disaggregation should be undertaken include aged women and men, disabled females and males, females and males in minority groups, and females and males with HIV/AIDS or chronic diseases;<sup>15</sup>
- **lack of transparency and accountability:** data on progress toward targets are not widely disseminated, especially to women's groups, the poor and other disadvantaged groups. Data are also not presented in formats that are appropriate to non-technical or illiterate audiences, such as graphics, pictures, story boards or oral presentations.

Addressing these problems does not only benefit women and girls. It may also benefit men and boys, by revealing their specific needs. It is essential to the achievement of the Millennium Development Goals for all—women and men, girls and boys.

#### **Sex-disaggregated data reveal the needs of boys**

Data comparing educational outcomes for females and males have revealed lower attendance rates among males in several countries (such as Lesotho, Mongolia, and Philippines) and poorer performance by boys in others (such as Australia and the United Kingdom). As a result, new programmes have been introduced to address the specific educational needs of boys.<sup>16</sup>

## **E. An opportunity to improve global gender-responsive rights-based data**

The 2010 round of the Population and Housing Censuses provides an important opportunity to provide internationally comparable gender-responsive rights-based data on a global scale. A United Nations expert group meeting to review critical issues relevant to the planning of the 2010 round of Population and Housing Censuses emphasized 'the need for Governments to ensure that the census would be gender-responsive and that by revising the definitions, data disaggregated by gender would become available. Such data are necessary in the formulation of gender policies at national and subnational levels'.<sup>17</sup> Countries such as India and Nepal, with the assistance of UNIFEM, implemented strategies to make their 2001 national population and housing censuses responsive to gender issues and differences between women and men. Their experience offers a basis for other countries to undertake similar initiatives for the 2010 census, with the support of the United Nations Statistics Division and, in Asia-Pacific, the UN-ESCAP Statistics Division.

### **A model for engendering the 2010 Population And Housing Census**

In Nepal, women's groups worked with government to engender the 2001 Population and Housing Census to ensure that data were gender-responsive, covered gender issues and were disseminated to women's groups. Strategies were implemented in three areas:

#### *Planning and Design*

- gender training was provided for senior and middle management;
- a committee monitored equal treatment of women in project management;
- questionnaires and manuals were reviewed from a gender perspective, resulting in questions being added on property ownership for women and men;
- new occupation and industry codes were developed with the same level of detail for male- and female-dominated occupations and industries;
- a media campaign raised awareness on the need for data on women.

#### *Data Collection*

- gender training was held for all interviewers and supervisors;
- a target was set for 50 percent of enumerators and supervisors to be women. (The actual figures achieved were only 20 percent of interviewers and 10 percent of supervisors, due to a lack of qualified women and the extent of gender barriers faced by women in Nepal, particularly in rural areas);
- a public campaign emphasized that women work, and that their work is economically important.

#### *Data Processing and Analysis*

- all individual data were disaggregated separately for women and men, and tables were reviewed from a gender perspective;
- special tables were added comparing labour force participation of women in male- and female-headed households; marital status for male and female household heads; and women's and men's ownership of housing, land and livestock for male- and female-headed households;
- the extended production boundary of the 1993 System of National Accounts, which includes fetching water and fuel as work, was used. This increased labour force participation of females by 9 percent compared with 5 percent for males.<sup>18</sup>

## **F. A gender-responsive rights-based approach to MDG reporting**

MDG reports are mechanisms for holding the 189 governments that attended the Millennium Summit accountable for the commitments they made under the Millennium Declaration in 2000. The first comprehensive five-yearly report on progress was released by the Secretary-General of the United Nations in 2005, and the next is scheduled for 2010. Regional and subregional reports have also been prepared by some of the regional UN Commissions. All these reports are useful political tools for motivating governments to improve their performance through comparisons with other countries at the regional and global levels.

However, at the national level, monitoring should be more regular and linked to routine data analysis and advocacy. Long-term goals and five-yearly reports are of limited practical interest to governments which need to focus on short-term political survival. To move governments to take real responsibility and concrete actions, monitoring needs to focus on intermediate targets that are achievable and politically relevant.

National MDG reports, linked to CEDAW reports and national plans of action for women and gender equality, can provide the basis for regular monitoring. However, civil society groups, especially women's groups, need to participate more actively to achieve genuine accountability and gain value from monitoring and reports. For example, trends in sex-disaggregated and gender indicators can be used to support sustained campaigns of advocacy and lobbying to improve the gender-responsiveness of policies and programme implementation. Women's groups should therefore play a more pro-active role in:

- monitoring national MDG indicators on a regular, preferably annual, basis;
- analysing reasons for slow progress and identifying achievable and relevant intermediate targets;
- promoting the adoption of indicators which are more gender-responsive and rights-based;
- ensuring that all data and indicators are shown separately for females and males and presented in formats that are usable by non-technical audiences and useful for lobbying and advocacy;
- using monitoring results in lobbying and advocacy with both decision makers and communities.

To achieve this, it is necessary to build the capacity of women's groups, yet capacity-building for civil society groups often overlooks women and is gender blind in providing conditions such as childcare, gender equality behavioural norms, appropriate timing and locations that enable women to participate. For example, the 2003 MDG Guidelines recognize the need to build the capacity of civil society to use data and information effectively to improve the quality and accountability of governance. However, they do not specify the sections of civil society, such as women and vulnerable groups, that should be prioritized.

Capacity-building efforts also need to incorporate mechanisms where the capacity developed can be used to work with States Parties to meet their obligations under national and international commitments such as the MDGs. These mechanisms can be as simple as annual meetings between government officials and civil society representatives, including women's groups, to review progress on indicators for intermediate targets. Other approaches might include use of the media to publicize progress.

**PART TWO**  
ADAPTING MILLENNIUM DEVELOPMENT  
GOALS TO THE NATIONAL CONTEXT

## **Adapting Millennium Development Goals to the National Context**

As noted earlier, the global goals and targets of the Millennium Development Goals were derived from global statistical trends to 1990, and are not directly applicable to individual countries. For countries that have already reached higher standards they are largely irrelevant, while in poorer countries they are largely unattainable.<sup>19</sup> Countries need to adapt the global set of goals, targets and indicators to their national context to produce their own national MDG reporting framework. When appropriate, countries may then need to adapt this national set to conditions at subnational level. In the process, both gender and human rights must be taken into consideration.

CEDAW country reports and national Plans of Action based on the Beijing Platform often include more relevant intermediate targets, as well as information on how these might most effectively and efficiently be achieved, and on specific actions to which governments have already made commitments. Women's groups should ensure that these documents contribute to the development of national and subnational MDG reporting frameworks.

The process of developing the national and subnational MDG reporting frameworks should include the following steps:

- undertaking a gender-responsive and rights-based analysis of the goal;
- developing the national set of long-term goals, targets and indicators;
- determining strategies to be used to achieve these goals, and setting intermediate targets;
- determining the intermediate targets and indicators;
- determining the data to be collected.

Part Two of this handbook is designed to assist countries and agencies in this process of developing national goals, indicators and targets. It begins with a more detailed discussion of the process outlined above, before providing detailed information relating to each goal in turn.

### **A. Gender-responsive rights-based analysis**

The first step in developing a national set of targets and indicators for a particular goal is to analyse the global goal from a gender-responsive rights-based perspective, taking into account the specific national or subnational context. Some of the issues which may be relevant are presented in section A under each goal below.

This analysis should lead on to the determination of strategic priorities. Strategic priorities are those policy or programme options that will potentially have the largest impact toward achieving a goal at the lowest cost within a specific local or national context. Typically, strategic priorities will be determined by analysis of the barriers to achievement of the particular goal, an assessment of the resources available and an evaluation of the likely success of various strategies in overcoming them. The relative importance of these various factors, combined with an assessment of the most effective, and cost-effective, ways of addressing each, and the probability of success within a given time frame, will inform judgements about the most strategic priorities.



For example, the major barriers to achievement of gender equality and empowerment may be economic—lack of paid employment for women; socio-cultural—low social status for women in the society; or human rights—the prevalence of gender-based violence, low levels of education and literacy among females or women’s lack of participation in decision-making. The strategic priorities under this goal may therefore vary across countries—economic empowerment for women in one country; eliminating gender-based violence in another; and in a third, incentives for parents to send girls to school combined with economic policies that create paid employment for them when they complete their education.

The selection of strategic priorities leads into the setting of national long-term targets and indicators. Typically, long-term targets will be time-limited to 2015, in line with the most of the global targets. In some cases, it may be more appropriate to have a different time horizon, as with global targets 6.B (by 2010), 7.B (by 2010) and 7.D (by 2020).

## B. National long-term targets and indicators

Section B under each goal suggests modified or new targets and/or indicators based on the issues identified in the gender analysis. These are proposed as a starting point for consideration. Countries should adopt or modify these, or develop new targets and indicators, to reflect their strategic priorities. Although the data that relate to these national long-term indicators may not be comparable at the global level, the indicators should still be used in country reports to monitor progress at the national level.

## C. Gender-responsive rights-based strategies

Section C under each goal suggests gender-responsive rights-based strategies which could be adopted by countries to address the issues and strategic priorities identified in the initial analysis. These lists are not intended to be exhaustive, but rather, to be a starting point. Not all will be feasible or appropriate for all countries. Countries should select and adapt these suggestions based on local circumstances.

## D. National intermediate targets and indicators

To guide policy, motivate governments and ensure accountability, realistic intermediate targets should be set—preferably with separate targets for females and males, as well as specific disadvantaged groups. Intermediate targets are shorter-term targets which, if achieved, will contribute to attainment of the global target and goal. In themselves they are insufficient to achieve the goal.

For example, an intermediate target for ‘improving maternal health’ could be ‘providing all women, including those in rural and isolated areas and poor women, with access to emergency delivery services for childbirth’. This is an *intermediate* target because, in addition to emergency services being available, women must also be sufficiently informed to make use of them and economically and socially empowered to make decisions about their needs independently of their husbands or other family members.

Intermediate targets should, ideally, be annual targets. Each should have indicators—usually more than one—disaggregated by sex and for each subgroup in the poor population. These indicators should also have shorter time horizons, as they relate to specific strategies

designed to achieve the intermediate targets. Section C under each goal suggests national intermediate targets and indicators for consideration.

Numeric targets are important for accountability, and many of the suggested targets include percentage targets. These are marked with an asterisk to indicate that they should be adapted to suit what is both feasible and necessary to achieve national targets.

The suggested timeframes in the targets should also be adjusted to take account of how often data can be collected. Administrative data from government are more likely to be available on a regular, at least annual, basis, whereas most surveys are conducted at 3-5 year intervals. Where data are available, intermediate indicators should be monitored at least annually and the results used to lobby policy-makers and programme managers to improve their strategies.

It is to these intermediate targets that governments should be held accountable.

## **E. Types of indicators**

In most cases, several long-term and intermediate indicators are provided for each target. Some will be more relevant and useful than others in particular contexts or countries. Some may be most useful at the subnational level, others at national level. However, in general as with the global MDGs a 'package' of indicators would be needed to adequately monitor progress and provide input to the development or refinement of policies and programmes.

Different types of indicators may be required:

- output indicators usually relate to activities that must be conducted in order to achieve a certain outcome. For example, 'the number of sexuality education classes conducted in schools or communities' is an output indicator;
- process indicators relate to ongoing processes that are required to contribute to the achievement of a goal. For example, 'agricultural extension departments routinely record and report participation in programmes by sex' is a process indicator;
- outcome indicators relate to significant outcomes that contribute directly to achievement of a goal. For example, 'female share of wage employment in agriculture, industry and service sectors' measures an outcome that directly contributes to the elimination of income poverty among women.

Some suggested indicators use numbers, while others include percentages or ratios. Numbers show short-term changes, whereas percentages, which change more slowly, reflect longer-term changes. Changes relating specifically to women show whether women are benefiting from policies and programmes. However, ratios of benefits for women compared to men are needed to show whether gender gaps are being closed.

The 2007 revised list of MDG indicators includes an overarching note that 'all indicators should be disaggregated by sex and urban/rural as far as possible'. Indicator 2.3 under Goal 2—'literacy rate of 15-24 year-olds, women and men'—is the only indicator outside Goal 3 that is explicitly disaggregated by sex in the official list. In this report, each matrix of suggested indicators includes an overall note on how data should be disaggregated, with some indicators including specific disaggregation. In national sets of MDG indicators, it is highly desirable to include the specific disaggregation as part of each indicator, so that this is not overlooked during data collection and reporting.

## **F. Data collection**

Some of the suggested long-term and intermediate indicators require data sources such as nutrition surveys, time use surveys and labour force surveys that are not available for all countries. However, at national or subnational level, these sources may be available.

In other cases, data for the suggested indicators may be available by making changes to current data collection methods. For example, household, agriculture or industry surveys, bank credit records and reports, and some government reports may be able to be modified to provide sex-disaggregated data and data on gender issues.

In other cases, the issues may be sufficiently important for the country to invest in collecting the required data.

## **G. A note on numbering**

- This report uses the following numbering system for targets and indicators:
- long-term targets and indicators begin with “L”;
- intermediate targets and indicators begin with “I”;
- the second character is the number of the corresponding global goal;
- the third character is a sequential letter within the goal—upper case in the long-term sets, lowercase in the intermediate sets;
- indicators have a fourth character, sequentially numbered within the target.

This system makes it easy to distinguish between global and national targets/indicators, and between long-term and short-term, within this report. This distinction may be useful to retain when a consolidated list of national goals, targets and indicators is produced. However, an alternative numbering system may be preferred.

# GOAL 1

## ERADICATE EXTREME POVERTY AND HUNGER

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## Goal 1: Eradicate Extreme Poverty and Hunger

**G**oal 1 is, in many ways, the core Millennium Declaration Goal. All other goals and targets contribute in some way to the global challenge of eradicating extreme poverty and hunger.

### Box 1. Development and poverty eradication in the Millennium Declaration

‘We will spare no effort to free our fellow men, women and children from the abject and dehumanizing conditions of extreme poverty, to which more than a billion of them are currently subjected. We are committed to making the right to development a reality for everyone and to freeing the entire human race from want.

We resolve therefore to create an environment—at the national and global levels alike—which is conducive to development and to the elimination of poverty.<sup>120</sup>

Poverty and hunger not only have a greater impact on women, they are also among the principal—though not the only—causes of inequality, including gender inequality, and lack of empowerment, including lack of empowerment for women and girls. However, since many countries do not have separate data for females and males on poverty and hunger, the global targets and indicators for Goal 1 are especially limited from a gender-responsive rights-based perspective.

**Matrix 2: Global targets and indicators for poverty and hunger**

Targets		Indicators	
<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>			
<b>Poverty</b>			
1.A	Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	1.1	Proportion of population below \$1 (PPP) per day
		1.2	Poverty gap ratio
		1.3	Share of poorest quintile in national consumption
<b>Employment</b>			
1.B	Achieve full and productive employment and decent work for all, including women and young people	1.4	Growth rate of GDP per person employed
		1.5	Employment-to-population ratio
		1.6	Proportion of employed people living below \$1 (PPP) per day
		1.7	Proportion of own-account and contributing family workers in total employment
<b>Hunger</b>			
1.C	Halve, between 1990 and 2015, the proportion of people who suffer from hunger	1.8	Prevalence of underweight children under-five years of age
		1.9	Proportion of population below minimum level of dietary energy consumption

Four articles in CEDAW provide the international legal basis for a human rights and gender equality perspective on poverty and hunger. Similarly, the International Covenant on Economic, Social, and Cultural Rights provides the legal basis for regarding freedom from hunger as a human right for all.

**Box 2. Legal basis for a human rights perspective on poverty and hunger**

- CEDAW 3: Guarantee of basic human rights and fundamental freedoms, including from hunger
- CEDAW 1 & 2: Eliminate all forms of discrimination against women
- CEDAW 11: Employment – the right to work is an inalienable right of human beings; eliminate discrimination in the workplace; equal pay and benefits for work of equal value
- CEDAW 13(b): The right of women to equal access to bank loans, mortgages and other forms of financial credit.
- ICESCR 11(2): Food was first declared a human right in the Universal Declaration of Human Rights 1948, and reaffirmed in the International Covenant on Economic, Social, and Cultural Rights (ICESCR), 1966. Article 11 (2) of the ICESCR establishes ‘the fundamental right of everyone to be free from hunger’.

## A. Issues for a gender-responsive rights-based analysis

If poverty and hunger are to be eradicated, a range of gender and rights issues need to be addressed, both in relation to poverty and hunger in general, and in relation to Goal 1 in particular. The first challenge is the macroeconomic policy context, which directly impacts on poverty, and therefore on hunger.

### 1. Macroeconomic policies need to be pro-poor

Conventional neo-classical economics, which has dominated economic policy in recent decades, gives high priority to low inflation, low public debt, low public expenditure, low taxation and low budget deficits. It gives **low** priority to full employment, high levels of public investment and improvements in the availability of public goods and services, all of which are of vital importance to the poor.

Conventional neo-classical economic policies have often harmed the interests of the poor by trying to minimize general government expenditures to reduce inflationary pressures, reduce public sector investment and promote private sector activity. In particular, they have often reduced expenditures on public services, including health and education, especially during economic recessions. Such policies increase unemployment and force the poor back into the subsistence economy, where the burden is greatest on women and girls.

Most of the poor are in the rural sector and agriculture is their main livelihood. However, the tremendous potential of the agricultural sector to reduce poverty has been weakened by unfavourable macroeconomic policies that led to high and variable interest rates and inflation in the 1980s as well as the erosion of public services such as agricultural extension services since the 1980s; the failure of agricultural credit policies; and the massive scaling down of public investment in irrigation and rural infrastructure.<sup>22</sup>

**Public sector investment has been important in the development of several rapidly growing economies**

Research by the United Nations Economic and Social Commission for Asia and the Pacific shows that persistent poverty and widening inequality in the region are the result of decades of neglect of agriculture. Growth strategies and economic policies in the region have systematically overlooked the agricultural sector, despite the fact that agriculture is the main livelihood of the poor and still provides employment for 60 percent of the working population in Asia and the Pacific.<sup>21</sup>

To reduce poverty, macroeconomic policies need to be **pro-poor**. Such policies challenge a number of the basic principles of conventional economic policies from the last two decades.

A pro-poor policy framework requires increased public spending and more flexible macroeconomic policies.<sup>24</sup> Universal access to basic social services is the key. Basic social services are public goods, with strong synergies and positive benefits that extend beyond those directly intended. They are especially important for the poor and women, both because women's traditional gender roles depend more directly on basic services

**Public sector investment has been important in the development of several rapidly growing economies**

Public investment was a key instrument for fostering growth and reducing poverty in the Republic of Korea. It still plays an important role in China and Viet Nam, which are among the top achievers of the MDG targets.<sup>23</sup>

and because women have poorer access to non-public goods. In a pro-poor policy environment, basic services should therefore be either free or heavily subsidized, whether provided by government, the private sector or NGOs. Public investment in energy, rural roads, irrigation and basic education should be increased, which often stimulates private investment.

Pro-poor policies use cost recovery and user fees sparingly, recognizing that affordability of services and the willingness of poor households to pay are key issues which must be considered. Affordability studies on user fees should be closely linked to poverty assessments. The latter place these costs in a range of household expenditure profiles and pay particular attention to specific kinds of households—particularly minority and disadvantaged households—and also to the situation of individual members of households, especially women and girls. Households may be more reluctant to pay user charges for women and girls, for example for education or health care, because they do not see these as contributing to the productive capacity of the household because women and girls are less likely to work on paid employment. As a result, the imposition of user fees for education in a number of countries has led to reduced enrolment rates for girls. In other cases, user fees for health services have reduced women's access to health care, especially for women in poor and disadvantaged households.



Pro-poor policies are also cautious about approaches which aim to narrowly target basic social services.

Such approaches can have huge hidden costs. It is often difficult to identify the poor and to reach them, because they are often unable to document their eligibility, cannot afford the travel costs and the loss of time required to obtain the benefit, and suffer social stigma from

participation in targeted programmes. As a result, the non-poor tend to capture a large part of targeted subsidies destined for the poor. Administrative costs are also at least double those for non-targeted programmes.

#### **The effects of cuts in primary health care budgets**

In many countries, public investment in primary health care shrank as a proportion of government expenditure during the 1990s, and costs were shifted to clients. But poor people, especially women, cannot afford fees and depend on public services.

The effects of these cuts can be measured. In Indonesia after the late-1990s economic crisis, use of health care declined and health outcomes worsened, mostly for women and particularly the poor. A controlled experiment demonstrated that in areas where fees were imposed, health centre use declined, more recovery time was needed after illness and labour force participation dropped—particularly among the poor, men over 40, and women in households with low economic and educational status.<sup>25</sup>

Inflation is not the major threat to the poor that conventional economics has maintained in the past. The poorest in rural areas are relatively sheltered from inflation by their dependence on the subsistence economy. Research has established that moderate inflation, defined as from 5 to 30 percent per year, but more usually 10-15 percent per year, is not damaging for growth or the poor.<sup>28</sup>

#### **Income redistribution may contribute to growth**

‘there is every reason to suspect that some amount of redistribution [...] might in fact contribute to more economic growth.’<sup>26</sup>

Conventional economics strongly promotes policies of liberalization and free trade. In contrast, pro-poor policies advocate great care when considering deregulating financial markets and/or liberalizing trade. Financial liberalization and surging imports have often destabilized economies, denied poor people access to credit and cut both jobs and growth. Women in poor families are most disadvantaged because they must continue to feed and care for their families despite loss of income and reduced services.

#### **Women were especially affected by the economic crisis in Republic of Korea 1997-1998**

In the economic crisis in South Korea, more women lost jobs than men. Employment declined by 3.8 percent for men and 7.1 percent for women in 1997-1998. In response, the government promoted a national campaign ‘Get Your Husband Energized’ asking women to support husbands who were depressed due to unemployment or bankruptcy. However, husbands were not asked to support wives who had lost their jobs.<sup>27</sup>



The benefits of trade have often been narrowly concentrated, or benefited people with skills or capital that are beyond those possessed by the poor. Although women have often gained employment in export industries, wages in these industries are low, the working environment is poor and employment is insecure. The poorest women usually lack sufficient education to find jobs even under these conditions.

Heavily subsidized products from rich countries—such as sugar, cotton, fruit, corn, meat and dairy products—have damaged or destroyed the livelihoods of millions of smallholders in poor nations. Again, it is women in the smallholder families who are the last resort for the support and survival of the affected families.

Recent research has found that openness of trade is not a prerequisite for development. A study of 80 low- and middle-income developing countries between 1984 and 2001 found that low levels of trade openness were significantly associated with positive growth and high level of trade openness with negative growth.<sup>29</sup> Others have suggested that trade may be a result rather than a cause of development.<sup>30</sup>

Internationally there has been a shift towards acceptance that an equitable society is a value in its own right. Pro-poor policies also bring equity concerns into economic policy debate, recognizing that in extremely unequal societies, reducing inequality can be an important strategy for reducing poverty. Redistribution of access to services, assets or political influence can increase economic efficiency where markets are missing or imperfect, as is often the case in developing countries. Equity and growth can also be complementary because extremes of economic and political inequality lead to inequitable institutions that favour influential people, at considerable economic cost.<sup>31</sup>

Yet most poverty reduction strategies overlook equity concerns. At most, inequalities are recognized, but not matched with concrete policies to reduce them. They fail to acknowledge that equity is an essential foundation of a strong and sustainable economy. Growth without equity often leads to economic and political instability and even conflict, as well as to the waste of potentially productive human resources. An equitable society and an efficient, sustainable economy can only emerge when women and men have the means to become agents of their own development, rather than recipients of handouts. Only then will poverty reduction be rapid and sustainable.

**Gender equality is often overlooked in poverty strategies**

Although essential for achieving the MDGs, gender equality continues to receive little attention in most anti-poverty plans. A recent review of Poverty Reduction Strategy Papers prepared in 2002 found that only three addressed gender issues ‘commendably if not completely’, eight applied an outdated women-in-development approach and two almost neglected gender altogether.<sup>32</sup>

**2. Macroeconomic policies need to be gender-responsive**

Conventional economic frameworks are gender-blind because they fail to recognize or take into account the different economic roles and situations of women and men, which are especially different in poor countries and in poor households and communities.<sup>33</sup> They need to recognize that most of women’s contribution to the economy, particularly in developing countries, takes place through the unpaid care economy.

The unpaid care economy—in which women do most of the work—maintains the labour force by feeding, clothing and caring for household members in the paid workforce; preserves social relations; maintains social cohesion; and promotes civic responsibility and community relations. Because these roles are not recognized, financial and trade liberalization often inadvertently place new burdens on those providing unpaid care, at the same time as undermining the provision of public services to support this work.

Conventional neoclassical policies are implemented in a variety of ways. Central banks aim to keep inflation below a specific—low—target level, leading to pressure on governments to balance their budgets. As a result, governments may be forced to cut public sector expenditure during economic recessions, just at a time when many poor households and women in particular are most in need of public services such as health, water, sanitation and transportation to help them cope with the effects of the recession. ‘Stability’ frameworks imposed on many developing countries by international financial institutions include rigid rules about the ratio of the budget deficit—the amount by which government expenditure exceeds revenue—to Gross National Product (GNP), and the ratio of public debt to GNP. These take no account of the economic cycle, again leading governments to cut public expenditure during economic recessions.

International financial institutions often only allow governments to use loans to invest in physical capital (infrastructure, roads, buildings etc), but not in human or social capital (education, health, training, employment creation). Men are more likely to be the primary users of infrastructure, while women have greater needs for education, health etc.

In the past, such rules have tended to deepen global recessions and undermine the livelihoods of women and men, throwing them back into the non-market economy. Gender bias and the assumption that men are breadwinners and women are not, often results in women losing their jobs before men. Women’s unemployment is thus often higher than men’s, although women usually have less access to social welfare benefits. The ILO *Global Employment Trends for Women Brief* reported that in 2006 more women than ever before were unemployed, with the rate of women’s unemployment (6.6 percent) higher than that of men (6.1 percent).<sup>35</sup>

Women’s traditional gender roles pressure them to become safety nets for their families, continuing to feed and clothe their families despite the lack of income from unemployed men.

Female-headed households are especially affected because the main income earner is likely to be among the first to lose their jobs. Cutbacks in public services make the task for women more difficult. Unemployment among men may cause depression, ill-health and a tendency to violence because their sense of personal and gender identity is closely linked to their breadwinner role—all of which impact on the women in their families.

The coping strategies that women use often exacerbate the impact of poverty on women themselves and/or their daughters. For example, women may be forced to take poorly paid work in unhealthy or hazardous working conditions with consequent negative effects on their health.

#### **The impact of counting unpaid economically productive activities**

In India in 1998-1999, women contributed 55 percent of total economic activity. Under the revised definition of GDP that includes time spent collecting water and fuel, Indian women spent more time than men on economic activity, in addition to doing most of the unpaid domestic and care work. Rural males averaged 46 hours per week on economic activity compared to 56 hours for rural females. The urban figures were 45 hours for males and 46 hours for females.<sup>34</sup>

Older daughters may have to take over the mothers' household and childcare responsibilities. As a result, their school attendance and performance may suffer, and some may be completely deprived of education.

Improved recognition of and data collection on women's economically productive roles would contribute toward more gender-responsive macroeconomic policies. This might involve implementation of the 1993 revision of the System of National Accounts, which classifies fetching fuel and carrying water—both largely done by women—as economically productive activities to be included in the Gross National Product. It might also involve time use surveys to provide more complete information on women's roles in the economy, particularly as unpaid family workers and in the informal sector.

### 3. Goal 1 needs to focus on the multi-dimensional nature of poverty

Within the Millennium Development Goals framework, a major limitation is the narrow focus of Goal 1 on income/expenditure poverty and hunger. From a rights perspective, poverty consists of failure to achieve and/or utilize a range of basic capabilities. In addition to adequate nutrition, these include the capability to avoid preventable and premature mortality; have adequate shelter; have a basic education; have personal security and equitable access to justice; and be able to appear in public without shame, earn a livelihood and take part in community life.

The global poverty target only captures the nutrition capability. The employment target introduced in the 2007 revision of the MDGs captures the earning capability, and education and mortality are captured in Goals 2 and 5, and to some extent Goals 4 and 6. However, the vital elements of personal security and participation, and the multidimensional nature of poverty as experienced by women, are not well covered by the MDGs. Some countries have been more creative in generating indicators to capture the broader aspects of poverty.

#### Gender-responsive poverty analysis in Timor-Leste

The 2003 Timor-Leste Poverty Assessment<sup>36</sup> provides a good example of what can be achieved by a more thorough examination of household data from a gender perspective, going beyond the simple identification of female-headed households to examine different kinds of female-headed households and the situation of women in male-headed households. It reported that:

- 'The evidence on gender bias in Timor-Leste is mixed. First, women do not live in poorer households than men';<sup>37</sup>
- 'Male-headed households are consistently better off than female-headed households in terms of education, health and subjective well-being, but not so based on consumption poverty – but we lack information on intra-household distribution. For example, while one in two children under 6 are immunized against measles in male-headed households, less than two in five are in female-headed households. Fatherless children experience higher poverty, with poverty being 6 percent higher than for children with living fathers';<sup>38</sup>
- 'In addition, we also find little systematic differences across gender-age groups ... For adults, male educational standards are generally higher, which says more about gender inequalities in the past than today'.<sup>39</sup>

#### 4. Some of the poorest women may live in non-poor households

Women may lack many of the basic capabilities that define poverty even when they live in households that are not currently defined under Goal 1 as poor. For example, those women in male-headed households—even in non-poor households—who are elderly, disabled, or the victims of gender-based violence may be among the poorest and most disempowered women in the community. In some countries, girls in non-poor households may be deprived of education and health care, even to the point where lack of health care leads to death. Similarly, women in non-poor households may be deprived of access to health care, particularly to reproductive health care and qualified health personnel at the time of delivery, resulting in their deaths. A narrow focus on female-headed households or only on poor households may completely overlook the perilous situation of these women.

#### 5. Poverty data need to be analysed separately for women and men

In order to identify and address the poverty of women and girls and disadvantaged groups, or the effects of household poverty on women and girls, indicators need to be shown separately for females and males, as well as by age and other relevant categories. Disaggregation by sex and other categories that identify poverty groups should be carried out at all levels of analysis, not just in the overall totals.

Poverty is currently measured only at household level, as it is not possible to calculate individual measures of income or expenditure poverty. There is no clear definition of the income poverty of individuals, and no data. Earnings can be disaggregated by the sex of the earner but the earner may not control that income. For example, men may control the money that women earn.

In low income countries, household expenditure data are often used to measure poverty because they are more accurate. However, these data do not include the sex of the person making or benefiting from expenditures, as identifying who makes spending decision, and who benefits from expenditure, is complex. Women typically decide on and are responsible for small daily expenditures, but men usually control larger expenditures. Men tend to spend more on personal consumption, such as cigarettes and entertainment, while women tend to spend first on meeting family needs, and last on themselves. Thus, even if women control expenditures, they may still be the poorest members of the household.

Outcome indicators of poverty such as lack of education, illiteracy, poor nutrition and poor health suggest that more women than men are poor. However, we have no direct measures of poverty to show this. Existing data do not enable the disaggregation of the global poverty indicator 1.1 – proportion of population below \$1 (PPP) per day – by sex or other socio-economic categories.

It is possible to disaggregate poverty headcount ratios and poverty gap ratios by sex and other categories, although the extent of disaggregation is limited by the size of the survey. However, it is important to recognize the limitations of these ratios.<sup>41</sup>

#### **Cambodia adds a new poverty indicator**

Cambodia has added a new poverty indicator, 'Proportion of girls and boys aged 5-17 years who are working'. Working children both reflects household poverty in the current generation and contributes to poverty in the next. The new indicator can be disaggregated by sex.<sup>40</sup>

- the headcount ratio is the proportion of the population classified as poor. Although easy to understand, it does not capture the degree of poverty or the distribution of poverty among the poor. For example, the headcount ratio would not change if the income of every poor person was cut by half. Nor would it change if income was transferred from a very poor person to a not-very-poor person who was still classified as poor. This ratio was dropped in the 2007 revision of the MDGs;
- the poverty gap ratio is the average poverty gap in the population as a proportion of the poverty line. It shows how far poor households or individuals lie below the poverty line. The poverty gap ratio measures the depth or intensity of poverty and shows how poor the poor are. However, it is still insensitive to the distribution of income among the poor.

Nevertheless, using these two indicators supplemented by qualitative data, it is possible to analyse the global poverty indicators from a gender perspective.

Poverty can also be measured through time use or time allocation surveys. Time is the one direct measure of individual poverty within the household that allows comparisons between females and males. Time use surveys have been conducted by more than 80 countries around the world, including middle and low income countries such as India, Laos and Cambodia.

## 6. Actions are needed to reduce the time women and girls spend on unpaid domestic and care work

For poor women and girls, lack of time is perhaps the most crippling form of poverty because it contributes to their lack of capability in almost all other dimensions. Lack of time deprives women and girls of access to education and training, information, health and other services, employment and other income-earning opportunities.

Time use statistics typically show clear differences between the amount and type of work done by women and men. Men are more likely to be in paid work while women are more likely to spend most of their time on unpaid domestic and care work. Men also have more rest and leisure time than women.

### Women do more unpaid work of economic value

In most countries, women do more unpaid domestic and care work and contribute more total hours of paid economic and unpaid domestic and care work combined.

In the Republic of Korea in 2000, women spent 150 percent more time than men on activities of economic value, mostly in household activities and in work excluded from GDP. Women's unpaid work accounted for 78 to 85 percent of the total value of unpaid work.<sup>42</sup>

In Thailand in 2003, women spent almost twice as much time as men on household activities and community services and equal amounts of time on personal care, total employment and leisure. Women in the formal sector worked 1.2 hours more than men in their secondary jobs while spending equal time with men in their main jobs.<sup>43</sup>

In Viet Nam in 2002, although women contributed equal amounts of time to income generation, men did not share equally in housework. As a result, women carried an unequal share of total work.<sup>44</sup>

Time poverty for women and girls is so important that it can no longer be over-looked.<sup>45</sup> It is an issue that must be addressed at the policy level and in programmes and projects.

## 7. Policy makers need to recognize that poverty has a greater impact on women and girls

The feminization of poverty refers primarily to the greater impact of all forms of poverty on women and girls. Strategies used by poor households to cope with poverty tend to burden women and girls, resulting in their poorer human resources compared with men. Government strategies to address poverty often overlook their impact on women, further increasing the impact of poverty on women and girls.

### **Jobs for the poor in public works may increase the impact of poverty of women**

Programmes that create jobs for the poor in construction and other types of infrastructure that are usually male-dominated often fail to provide employment for women.

Where the jobs, as is often the case, require the worker to live on sites far from their homes, much of their earnings do not reach their families but are spent on site. Women and girls in their families are further burdened because they lose the men's contribution to certain household chores and household economic activity; they are at increased risk of being infected by HIV/AIDS or STDs by returning partners; and they are at greater risk of personal insecurity if there is no adult male resident in the household.

While data on household headship can be useful in identifying poor women, in most countries and settings the feminization of poverty cannot be adequately measured in terms of the proportion of female-headed households in the population. Defining female-headed households is difficult and the approach varies by country. In most, it is a self-declared category and may or may not mean that there is an adult male resident in the household. In some cultures, it is almost inconceivable that a woman would be identified as the head if any adult male also lived in or, if a migrant, 'belonged to' the household. In other cultures, such as Viet Nam, a woman may be identified as the household head even although she has a living spouse.

Consequently, interpretation of data on female-headed households is difficult and cross-country comparisons are especially difficult. It is therefore important to examine the composition of female-headed households and identify different categories of female headship.

### **Two categories of female-headed households**

Viet Nam household data on female-headed households have been divided into two categories: those in which there is a spouse and those in which there is not. The data reveal that female-headed households without a spouse are generally more disadvantaged.<sup>46</sup>

In many countries, female-headed households are not on average poorer than male-headed households.<sup>47</sup> However, the average may conceal a polarized distribution. At the higher end of the income distribution are households which are female-headed by choice, where the woman tends to be well-educated and in good employment, often single, and with few or no dependants. At the other end are households which are female-headed because of divorce, separation, or widowhood. In these households the woman is often less well-educated, not employed, and there tend to be more children and other dependants. If analysis focuses only on the average across all female-headed households, these poor households will be overlooked.

Comparing average female- and male-headed households, although often done, is not very meaningful because they differ in structure. Male-headed households tend to have more children while female-headed households, because the woman is probably widowed, separated or divorced and, on average, older, tend to have fewer children. Because most do not have adult



male members, female-headed households also tend to have fewer adult income earners than male-headed households.

Most household data can be disaggregated in terms of both income levels and household headship, enabling the poorest female- and male-headed households to be identified and their situations analysed. This analysis shows that some female-headed households, particularly those without adult males and older women living alone, are among the poorest and require special assistance. In male-headed households, some women are also poor because they are powerless and suffer serious deprivation in all areas of capability. As noted earlier, some of the poorest women may live in male-headed households and even in male-headed non-poor households, particularly if they are elderly, disabled or the victims of gender-based violence.

The issue is not whether female- or male-headed households are poorer. The real issue is which households, regardless of headship, suffer from poverty and hunger, and what can be learned about their characteristics in order to formulate and implement policies and programmes to address poverty and hunger.

### **8. Youth—and young women in particular—are a priority target group**

As discussed later under Goal 3, the Task Force on Education and Gender Equality identified adolescents as one of the three priority target groups needing special attention. The 2007 revision of the MDGs recognized the importance of women's and youth employment to addressing poverty and hunger by incorporating the new target 1.B—'achieve full and productive employment and decent work for all, including women and young people'.

However, the indicators for this target no longer include a specific measure of youth employment or unemployment. Indicator 45 from the 2003 version of the MDGs—'unemployment rate of young people aged 15-24 years, each sex and total'—should continue to be used at the national level under Goal 1.

### **9. Policy makers need to recognize that women and girls are more affected by lack of food security**

Household food security—the availability of adequate food of sufficient nutritional quality throughout the year—is the prime concern of poor households, and especially of poor women. Women are both primarily responsible for feeding the family and most likely to suffer the consequences of malnutrition.

According to conventional gender stereotypes in most societies, it is women's responsibility to feed their families, even when male breadwinners are unable to provide sufficient food. Empirical evidence shows that it is females who are largely responsible for making food available in poor households, either by producing it or purchasing it. Where women have to increase their workload in food production or go out to work in order to purchase food, girls are often withdrawn from school to take over the women's domestic and care work. Thus, the poverty of the mother is passed to her daughters through lack of education.

Women are also often disadvantaged as consumers of food. Most societies distribute food first to the male breadwinner, then to boys and lastly to girls and women. As a result, women are most likely to suffer from hunger and malnutrition.

To be effective, policies and programmes to reduce hunger must take these gender differences into account.

### 10. Nutritional data need to be collected for both males and females

Nutrition surveys are typically focused on the birth of healthy babies and thus on women of reproductive age in their role as bearers of children and not in their own right. As a result, there are usually no data to compare the nutrition of women and men.

This is especially problematic in poor households where nutrition levels for women and girls are likely to be lower because men and boys tend to be given priority in the allocation of food. The Food and Agriculture Organization of the United Nations (FAO) reports that females are more susceptible to malnutrition than males in some countries.

It should be noted that at specific ages, very young boys may be more susceptible to poor nutrition than girls of the same age because they are allowed to play away from home, where their food intake is not supervised. However, poorer nutrition among boys generally does not last beyond school age and is not related to deliberate patterns of food distribution within families.

#### **Sex-disaggregated nutrition data: limited availability and ambiguous findings**

Of 30 FAO country surveys containing sex-disaggregated data on Body Mass Index, 11 showed a higher incidence of chronic energy deficiency among women, while one showed a reverse gender gap – males were more affected. Of 306 surveys of wasting by sex that had sex-disaggregated data, 35 showed a gender bias, with girls more affected in 9 cases and boys more affected in 39 cases.

Only 13 percent of 311 surveys provided data on stunting, while only 10 percent of 308 surveys provided data on underweight separately for females and males. Boys were more affected by stunting in 39 cases out of 40, and by underweight in 26 cases out of 30. Higher levels of under-nutrition among adult females were limited to only a few countries but these included the most populous countries, China and India.<sup>48</sup>

### 11. Particular attention must be paid to women and girls in crisis and conflict situations

Women and girls in crisis, conflict and post-conflict situations, particularly refugees and internally displaced persons (IDPs), are the most vulnerable in populations, with some of the highest levels of poverty and hunger in the world. In crisis and conflict, women and girls often become direct targets for gender-based violence by the opposing parties, as well as from males within their own communities. In addition to the direct impact, the threat of gender-based violence further reduces their ability to perform their normal tasks, particularly fetching water and fuel and foraging for foods that involve travel to isolated locations and expose them to greater risk. Women and girls also have specific gender-based needs, including contraception, feminine hygiene materials, and safe places to gather

#### **Gender issues can be overlooked in emergency relief**

“In the rush to mobilize support, sort out logistics, coordinate with colleagues, respond to the demands and questions from HQ, we sometimes lose sight of who we are meant to be helping. We offer protection and distribute aid but can forget that women, girls, boys and men often have different needs, face different threats and have different skills and aspirations. Ignoring this can mean our assistance is not properly targeted.”<sup>49</sup>



for information sharing and mutual support. Failure to meet these needs may be a violation of their human rights.

Attention should also be paid to women and girls because they can be instrumental in reducing hunger and the impact of poverty on communities and families in crisis and conflict. Women, often with the assistance of girls, are caregivers for children, disabled persons and the elderly and bear a primary responsibility for families' most immediate needs for food and water.

Despite this, the needs and potential roles of women and girls are often overlooked in conflict and post-conflict situations and women are not represented or included in decision-making. This is partly due to the priority given to directly addressing the immediate crisis and conflict situations, and partly because the main agencies or sections of agencies involved in providing emergency relief have not been accustomed to working with women, and have not been sensitized to gender issues or trained in gender-responsive approaches. The lack of attention to women's needs is now being addressed by initiatives such as the Inter-Agency Standing Committee (IASC) *Gender Handbook in Humanitarian Action*<sup>50</sup> and IASC *Guidelines for Gender-based Violence Interventions in Humanitarian Settings*<sup>51</sup> and Security Council resolution 1325 (2000), which called for women to be more equally represented in all stages of peace processes.

However, the importance of addressing the needs of women and girls in crisis and conflict situations for the achievement of Goal 1 has not been fully appreciated. It is estimated that 80 percent of the approximately 25 million internally displaced persons in the world are women and girls.<sup>52</sup> A very large proportion of IDPs and refugees live in poverty due to loss of livelihoods, assets and safety nets.<sup>53</sup> In a number of countries, failure to address poverty among IDPs and refugees through a gender-responsive rights-based approach will make it difficult to achieve the global target for Goal 1.

## B. National long-term targets and indicators

Matrix 3 below suggests a range of long-term targets and indicators for poverty and hunger, based on the preceding gender-responsive rights-based analysis of Goal 1. They should be adapted and added to so that they are relevant and useful for the individual country.

Women's groups should ensure that data and references to women's poverty and lack of food security in CEDAW country reports are used in the process of developing national and subnational targets and indicators. The responses of the CEDAW Committee on these matters to the most recent country report may also be useful in providing a global and rights-based perspective.

The relevant sections of the Beijing Platform and National Action Plans based on the Platform also provide information on government commitments to women and gender equality.

<b>Matrix 3: National long-term targets and indicators for poverty and hunger</b>	
<b>Targets</b>	<b>Indicators (see notes #^ below)</b>
<b>Poverty</b>	
L1.A Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day ( <i>unchanged from global target</i> )	L1.A.1 Proportion of girls and boys aged 5-17 years who are working ( <i>a proxy indicator – working children usually come from poor families and are likely to remain poor during their adult lives due to lack of education</i> )
L1.B Halve, between 1990 and 2015, the proportion of people in female-headed households whose income is less than one dollar a day	L1.B.1 Poverty headcount ratio, disaggregated by sex, age, sex of household head and other relevant socio-economic variables <sup>54</sup> L1.B.2 Poverty gap ratio, disaggregated by sex, age and sex of household head
L1.C Halve, between 1990 and 2015, the time poverty of women and girls	L1.C.1 Mean number of hours of unpaid household and domestic (non-labour force) work carried out by women and men per week L1.C.2 Mean number of hours of rest and recreation of women and men per week <i>Note: these indicators require time use survey data</i>
<b>Employment</b>	
L1.D Achieve full and productive employment and decent work for all, including women and young people ( <i>unchanged from global target 1.B</i> )	L1.D.1 Ratio of employed to population of working age ( <i>based on global indicator 1.5</i> ) L1.D.2 Unemployment rate of young people aged 15-24 years ( <i>based on global indicator 45 from 2003 version, which was dropped in 2007 revision</i> )
<b>Hunger</b>	
L1.E Halve, between 1990 and 2015, the proportion of females and males who suffer from hunger ( <i>based on global target 1.C</i> )	L1.E.1 Prevalence of underweight girls and boys under five years of age ( <i>based on global indicator 1.8</i> ) L1.E.2 Prevalence of stunted girls and boys under five years of age L1.E.3 Proportion of females and males below minimum level of dietary energy consumption ( <i>based on global indicator 1.9</i> ) L1.E.4 Proportion of adolescent females aged 13-19 years below minimum level of dietary energy consumption L1.E.5 Number of months per year that households experience food shortages L1.E.6 Proportion of households using iodized salt

Matrix 3: National long-term targets and indicators for poverty and hunger		
L1.F Halve, between 1990 and 2015, the proportion of females and males in female-headed households who suffer from hunger	L1.F.1	Prevalence of underweight girls and boys under five years of age in female-headed households ( <i>based on global indicator 1.8</i> )
	L1.F.2	Prevalence of stunted girls and boys under five years of age in female-headed households
	L1.F.3	Proportion of females and males in female-headed households below minimum level of dietary energy consumption ( <i>based on global indicator 1.9</i> )
	L1.F.4	Proportion of adolescent females aged 13-19 years below minimum level of dietary energy consumption in female-headed households
	L1.F.5	Number of months per year that female-headed households experience food shortages
	L1.F.6	The proportion of female-headed households using iodized salt
L1.G Reduce food insecurity by 5 percent* over 3 years*	L1.G.1	Proportion of households experiencing food insecurity during year prior to survey
L1.H Reduce severity of food insecurity by 5 percent* over 3 years*	L1.H.1	Average number of months per year that households experienced food insecurity during year prior to survey
L1.I Reduce by 2 percent* over 3 years* the results of chronic hunger among women and adolescent girls	L1.I.1	Proportion of women and adolescent girls with low Body Mass Index
	L1.I.2	Proportion of women and adolescent girls in female-headed households with low Body Mass Index
	L1.I.3	Proportion of women and adolescent girls with from iron anaemia
	L1.I.4	Proportion of women and adolescent girls in female-headed households with from iron anaemia
L1.J Reduce by 2 percent* over 3 years* food insecurity among women and girls	L1.J.1	Proportion of female-headed households experiencing food insecurity during year prior to survey
	L1.J.2	Number of women and girls in households experiencing food insecurity during year prior to survey
L1.K Reduce by 5 percent* over 3 years* the severity food insecurity among female-headed households	L1.K.1	Average number of months per year that female-headed households experienced food shortages during year prior to survey

Matrix 3: National long-term targets and indicators for poverty and hunger	
L1.L Reduce by 5 percent* over 3 years* the severity of food insecurity among women and girls in camps for refugees and/or internally displaced persons	<p>L1.L.1 Proportion of women and adolescent girls with low Body Mass Index</p> <p>L1.L.2 Proportion of women and adolescent girls in female-headed households with low Body Mass Index</p> <p>L1.L.3 Proportion of women and adolescent girls from iron anaemia</p> <p>L1.L.4 Proportion of women and adolescent girls in female-headed households from iron anaemia</p>
<p>* Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.</p> <p># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</p> <p>^ All household level indicators should be disaggregated by rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</p>	

## C. Gender-responsive rights-based strategies

Although monitoring the goals, targets and indicators is important, success in achieving the Millennium Development Goals ultimately rests on implementation of effective policies, programmes and projects. In order to be effective, the strategies that they are based on must be gender-responsive and rights-based. This section presents a number of strategies for reducing women's poverty and hunger and the impact of household poverty on women and girls. A particular target group throughout should be women and girls in minority and disadvantaged groups.

### 1. Make macroeconomic policies pro-poor, gender-responsive and rights-based

As noted in the gender analysis, the macroeconomic policy environment is critical to the success of poverty and hunger eradication strategies. Macroeconomic policies must be pro-poor, gender-responsive and rights-based, avoiding the negative impact which many conventional neo-classical economic policies have had on the poor, and particularly women and girls.

Macroeconomic policies must also support increased agricultural productivity through increased investment in research and development, human capital, extension services, irrigation and rural infrastructure. FAO estimates that 60 percent of food farmers in Asia are women.<sup>55</sup> Farmer-oriented initiatives such as extension services, training, and management of irrigation and infrastructure should particularly target women, who in many countries in the region are the majority of farmers of food crops.

Gender-responsive rights-based strategies to address this issue include:

- increase government expenditure on public services, particularly health and education;
- increase government expenditure on employment creation during times of economic recession;
- set and monitor affirmative action policies for women in employment creation and income generation programmes during times of economic recession;
- maintain basic services such as primary, reproductive and child health programmes, public access to potable water, and public transport;
- consult poor communities and women's groups when budget cuts are under consideration;
- integrate equity, gender equality and income distribution considerations into the formulation of macroeconomic policy;
- study and take into account the potential impact of financial and/or trade liberalization policies on the poor, and particularly women in feminized industries and sectors, when considering whether to implement these policies;
- in expanding industries and sectors that will benefit from any financial and/or trade liberalization policies, study the impact on women and apply affirmative action policies to ensure that women benefit through increased employment and other opportunities;
- in declining industries or sectors that are likely to suffer from financial and/or trade liberalization policies, protect the rights of, and provide training and other support for, women to enable them to transfer to other industries or sectors;
- increase the productivity of women in agriculture through increased investment in research and development, human capital, extension services, irrigation and rural infrastructure, and changes to land tenure systems where necessary.

## 2. Improve the gender-responsiveness of poverty statistics

Poverty statistics are a particular challenge for gender analysis. Although it is difficult to disaggregate the most widely used indicators of income poverty by sex because they are household-based, a lack of sex-based differences in household statistics does **not** mean that women and girls are not differently affected by poverty from men and boys. Indicators for hunger (nutritional status) and output indicators for education and health show clearly that the impact of poverty is greater on females.

Time use statistics are one approach that can show differences in the time dimension of poverty for individual females and males within households. Time use surveys can be incorporated as a module in other household surveys, and have been conducted by more than 80 countries, including middle and low income countries such as India, Laos and Cambodia. Because behaviour change tends to take time, a 3-5 year interval between time use surveys is adequate for policy and monitoring purposes. In the short term, advocacy and lobbying are the most important uses for time-use data.

### Time use data highlight the roles of females and males

Time use surveys can show:

- differences in the amount of paid and unpaid work carried out by women and men;
- differences in the total workload of women and men;
- differences in the time that girls and boys are able to spend on school work;
- activities that women are doing at the time when health and other services are open, and where those activities take place;
- activities that women and girls are doing when they might otherwise be able to take paid work.

Many household surveys conducted to measure poverty now include qualitative surveys and focus groups to obtain qualitative data on people's perceptions and experience of poverty. These data enable decision makers and programme managers to better understand people's concept of poverty and its consequences.

Gender-responsive rights-based strategies to address this issue include:

#### **People's ideas of poverty differ from official concepts**

In Timor-Leste, people regard the poor as those who lack the support of family or friends, rather than those who lack income or food. People who are unable to contribute to family or community gatherings in the traditional manner due to poverty, prolonged absence or other reasons can become completely socially isolated. It is this social isolation that is regarded as poverty.

- develop and implement a time use survey—it should be large enough to provide data of sufficient quantity and quality for policy analysis, but does not need to be statistically representative;
- analyse the time use data to show differences in time use between women and men and girls and boys; between females and males in poor compared with non-poor households; and between females and males in minority and disadvantaged households compared with other households;
- present this data to policy makers and communities in appropriate formats for the respective audiences in order to change attitudes about female and male activities and roles, and base decision-making on facts rather than stereotypes;
- analyse this data to reveal the processes that cause the different outcomes in education, health, nutrition and employment for females and males, particularly those in minority and disadvantaged households, that are the result of gendered poverty;
- conduct public information campaigns to show the different patterns of time use among women and men and their implications for gender equality and empowerment;
- follow these with campaigns to promote more flexible concepts of men's and women's roles and encourage men and boys to share domestic work and childcare and, in the long-run, achieve a more equal balance of paid and unpaid work between females and males;
- conduct qualitative surveys using interviews with individual women and men and focus groups, including focus groups of minorities and disadvantaged women and men, and present the results to policy makers to increase their understanding of the different ways in which poverty affects women and men;
- analyse the data to identify instances and forms of gender-based discrimination and discrimination against other disadvantaged women and men.

### **3. Invest in time-saving infrastructure, especially in rural areas and poor communities**

Women and girls, particularly those in poor households, are especially dependent on time-saving infrastructure. Time use surveys show that women spend long hours fetching water and fuel and often are unable to complete their work during daylight hours. Lack of access to time-saving devices for household work and poor access to transport reduces the time available for other things. As a result, they are often unable to take advantage of short-term cash-income earning opportunities in the local area.

Gender-responsive rights-based strategies to address this issue include:

- invest in rural electrification or alternative sources of power which will enable women to use time-saving devices to reduce the time taken by housework and enable children, especially girls, to do their homework in the evenings after their domestic work is completed;
- where electricity supply is limited, undertake time use surveys to understand how women and men, girls and boys use their time in terms of the need for electricity in the home and provide power during the hours when it would be of most benefit, especially to women and girls;
- promote more efficient, environmentally friendly and healthy sources of energy—particularly for food preparation, which takes up many hours of the day for women and girls;
- promote alternative sources of energy such as solar and wind power for isolated areas and minority populations not reached by mainstream supplies;
- support complementary measures to enable women and girls to use the time saved to contribute to household income in order to increase the willingness of households to invest in improved sources of energy or fuel efficient stoves;
- invest in public water supply and sanitation facilities and consult women as to their form and location to ensure convenient and safe access;
- ensure that such schemes also cover areas with significant minority populations;
- train women to maintain public sources of water, such as wells and water pumps—as the main users, they are more reliable at undertaking maintenance; and the training also changes gender stereotypes about women's ability to manage machinery;
- provide complementary micro-credit or other income generation programmes to help women use the time saved to increase their incomes;
- ensure, through affirmative action policies where necessary, that minority women and girls benefit from these measures;
- invest in improved and affordable public transport, and ensure that timetables, stopping places, and other arrangements are specifically adapted to the needs of women and girls, including those from minority groups and those with special needs, such as disabled women and girls;
- ensure appropriate lighting and consider personal security for women travellers;
- in particular, provide efficient and affordable public transport systems to give women convenient access to markets where they can buy raw materials and sell the products of home-based and micro-enterprises, as well as easy access to schools, midwives and local health centres.

#### 4. Increase women's access to paid employment

One of the human rights most often denied to women is the right to work that is adequately remunerated, safe and recognized as a valuable contribution to their households and the economy. Their economic dependency on men for income, both in cash and in kind, is one of the reasons for the greater impact of poverty on women and girls.

When men's sources of income are lost through unemployment or are withdrawn due to illness, death, family breakdown or other causes, women are often poorly equipped to find substitute sources of cash income. In some cases, women are forced into prostitution to support their families; in other cases family assets including land have to be sold, thus increasing their vulnerability.

#### **Time poverty obstructs women's access to paid work and services**

Women's lack of access to paid work, education or training is often a consequence of time poverty and role conflict. Examples include inability to attend school, training, meetings or work because of the need to mind children, or carry out household chores.



Women's lack of access to paid work is partly a consequence of their limited education and training. Due to their low levels of education and lack of access to training, most poor women can only obtain unskilled, poorly paid and often unsafe jobs. Government training and employment programmes often fail to address the conflicts between women's domestic, reproductive and care roles that prevent them from accessing both training and employment.

Gender-responsive rights-based strategies to address this issue include:

- ensure that training times and locations are convenient to mothers and other women with household and family care responsibilities;
- provide access to childcare or support for carers to enable them to enter the workforce. In low-income countries, low-cost community-based care and cooperatives can successfully deliver these services;
- provide food, both for the women trainees and their families, so that they can devote their time to the training rather than preparing food for the family's evening meal. Again, in low-income countries, cooperative approaches can meet this need at low cost;
- support women through training and services to change stereotypes about appropriate roles and work for women and men and enable them to take up male-dominated occupations that are often better paid. Such support must include protection against sexual harassment and gender-based violence, both in the home, while travelling to work and in the workplace. It should also include public education campaigns for families and men to gain their support and reduce the risk of gender-based violence.

## 5. Increase women's access to land, property, credit and other resources

Another contributory factor to women's poverty and dependence is their lack of access to capital such as land, livestock, property and other resources that could enable them to farm independently or start a business. Lack of access to land for food production is a significant contributory factor to hunger and malnutrition in many areas. Women's micro enterprises are often directly related to the provision of food in their communities and also directly contribute to the ability of women to meet the food needs of their families.

Lack of access to capital leads to lack of access to credit. Low participation in micro-enterprise programmes may also occur if they are not adapted to women's need to balance participation with domestic duties and care of children and other family members. Furthermore, women are known to be conservative borrowers and are particularly reluctant to risk family assets, such as a house, to secure loans.

### Gender-responsive approach to collateral

In the Philippines, business plans with cash flow estimates have been accepted as an alternative to 'bricks and mortar' as collateral for small loans.

Gender-responsive rights-based strategies to address this issue include:

- ensure and monitor women's participation in agricultural extension programmes;
- implement small business and micro-credit programmes that specifically target and monitor the participation of women
- where women's participation in programmes is low, identify and address the causes, developing special programmes for women if necessary;
- where necessary, revise laws and legislation to remove discrimination and enable women to independently own and inherit property, access credit and conduct business;



- follow up changes in the legislation with training and awareness-raising for financial institutions and their staff to ensure that the legislation is implemented;
- monitor the lending practices of financial institutions in granting loans to women in their own name and according to the provisions of the revised legislation;
- where necessary, undertake advocacy with banks and other financial institutions to remove discriminatory and other practices that restrict women's access to credit;
- advocate with government departments and banks to report and monitor participation in small business and micro-credit programmes by sex for sole proprietorships and individual loans;
- use the data to advocate for improved access for women through more gender-sensitive programmes, such as providing flexible hours for access, and special women's desks/units in government departments and/or banks operated by staff who have had gender awareness training;
- where necessary, modify conditions for loans, particularly collateral, to take into account women's lack of title to property or reluctance to risk property.

## 6. Empower women and girls

In countries where the basic cause of extreme hunger is not an absolute shortage of food, empowerment for women is possibly the most critical factor in eradicating hunger among women and girls. Women's poor nutrition is often a result of the unequal distribution of food within the household, for which they themselves are usually responsible. Empowerment involves enhancing women's self-esteem and sense of self worth, increasing their awareness of their human rights and how to claim them, and increasing their capacities in areas such as using data for advocacy.

### Women's empowerment will improve women's nutrition

'Underlying the deep inequity in women's access to nutrition is her own unquestioning acceptance of her status as an unequal member of the family and society. Eventually, gender empowerment alone is likely to be the key to the resolution of the hunger challenge [for females] in the [South Asian] region.'<sup>56</sup>

Gender-responsive rights-based strategies to address this issue include:

- provide women, particularly those in poor households, with training on empowerment and self-esteem to encourage them to distribute food resources more equally within the household;
- ensure, through affirmative action policies where necessary, that minority women and girls benefit from these measures;
- provide training and awareness-raising for women on their right to food and nutrition and its importance for their own welfare and that of their families;
- provide training in using data for advocacy on food security issues to women's groups, including those representing minority and disadvantaged groups, so that they can participate on an informed basis in efforts to improve women's food security;
- establish regular consultations between women's groups, including those representing minority and disadvantaged groups, and relevant statistics staff to advocate gender-sensitive data collection on food security and monitoring of food security from a gender perspective;
- facilitate collective actions to empower women, especially those from minority groups, and support their right to adequate food.

## 7. Ensure non-discrimination on the basis of sex or other criteria, especially for women and girls

The principle of non-discrimination requires an active effort to identify discrimination, analyse its causes and remove them. While, as a group, all women are subjected to some level of discrimination, particular subgroups may experience greater discrimination due to their age, ethnicity, disability or other individual characteristics, or due to isolation. Women and girls within these discriminated subgroups typically suffer multiple forms of discrimination as a result of their sex and gender roles and their membership of the discriminated groups. For example, minority groups are often at high risk of malnutrition and hunger and, within them, women and girls typically have the poorest nutrition and suffer most from hunger.

For this reason, analysis of discrimination should always be disaggregated by sex to show the effects of multiple forms of discrimination on women and girls.

Gender-responsive rights-based strategies to address this issue include:

- identify and pay special attention during data collection and analysis to women and girls at high risk of poverty and hunger, including those in rural and isolated areas, elderly women, those who are disabled, and those who have HIV/AIDS or other chronic diseases;
- disseminate the results of data analysis to vulnerable target groups and consult them on possible responses to any areas of concern;
- use the data analysis and consultation to develop policies and programmes which address any areas of concern;
- support collective action by vulnerable groups and ensure their access to capacity-building, opportunities for participation in decision-making and other rights-related initiatives, paying particular attention to the inclusion of women and girls.

## 8. Implement gender-responsive rights-based programmes in crisis and conflict situations

In countries with internally displaced persons and refugees, gender-responsive and rights-based programmes are especially needed to reduce poverty among these vulnerable populations and to address the particular needs of women and girls in crisis and conflict-related situations. Research has shown that the failure to address gender issues can also contribute to the development and the course of conflict situations.<sup>57</sup> Therefore, countries should consider not only populations involved in declared crisis and conflict or post-conflict situations but also address gender issues and the needs of women and girls among subgroups with high levels of general and particularly politically-motivated violence.

A comprehensive review of gender-responsive rights-based strategies for crisis and conflict situations can be found in the IASC handbook *Women, Girls, Boys and Men Different Needs – Equal Opportunities*.<sup>58</sup> These strategies include:

- ensure that managers of camps and new housing developments have adequate data on the situation of women and girls in the camps and on gender relations, including a gender-responsive rights-based perspective on social organization and cultural practices, and local government and traditional justice systems;
- ensure that women are explicitly targeted for the distribution of food and water and other supplies related to family care and maintenance, including micro-credit and cash payments;
- explicitly include a quota for women in income generation and livelihood projects, including those involving forms of employment not traditionally carried out by women;

- consult women on the location of camp facilities, particularly food and water distribution points and toilet and sanitation facilities and pay particular attention to women's safety and security in using these facilities;
- consult women and take into consideration women's daily routine in determining the timing of food and water distribution and the opening hours for health and other community facilities.

## D. National intermediate targets and indicators

Matrix 4 below suggests a range of national intermediate targets and indicators for poverty and hunger, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

Matrix 4: National intermediate targets and indicators for poverty and hunger	
Targets	Indicators (see notes #^ below)
<b>Poverty</b>	
11.a Promote macroeconomic policies that are pro-poor and gender-responsive	11.a.1 Proportion of government expenditure spent on public goods that benefit women, particularly poor women ( <i>data can be obtained from gender analysis of the public budget</i> ) 11.a.2 Proportion of women benefiting from employment and income generating schemes during economic recessions or adjustment 11.a.3 Ratio of females to males benefiting from employment and income generating schemes during economic recessions or adjustment

**Matrix 4: National intermediate targets and indicators for poverty and hunger**

<p>11.b Increase the productivity of female farmers by 3 percent* per year until it at least reaches that of farmers in middle income agricultural countries</p>	<p>11.b.1 Proportion of the agricultural extension budget that has been analysed from a gender-responsive rights-based perspective</p> <p>11.b.2 Proportion of beneficiaries of agricultural extension services who are women</p> <p>11.b.3 Proportion of participants in training in sustainable agricultural technologies who are women</p> <p>11.b.4 Proportion of agricultural training courses that have been designed from a gender perspective to meet women's as well as men's needs</p> <p>11.b.5 Proportion of individual agricultural micro-credit loans made to women</p> <p>11.b.6 Proportion of farmers using specific new technologies, disaggregated by sex</p> <p>11.b.7 Proportion of women farmers owning their own land</p> <p>11.b.8 Proportion of farmers working their own land who are women</p> <p>11.b.9 Proportion of farmers renting land in their own name who are women</p>
<p>11.c Ensure the availability of time use data at country or subnational level to provide sex-disaggregated data on the time poverty of women and men</p>	<p>11.c.1 Time use data available and analysed by sex to show the differential impact of poverty on women and men and girls and boys, including the specific impact on women and men and girls and boys among minority groups, refugees and IDPs</p>
<p>11.d Sex-disaggregated data for females and males and gender-responsive analysis used to monitor Goal 1 wherever possible</p>	<p>11.d.1 Individual-level data on poverty and hunger in national and subnational MDG reports are disaggregated by sex at all levels</p> <p>11.d.2 Gender-responsive analysis is applied to monitoring of both poverty and hunger targets, including among minority groups, refugees and IDPs</p>
<p>11.e Increase by 2 percent* per year women's share of ownership of land and property, either individually or jointly with their spouses</p>	<p>11.e.1 Female share or joint ownership of land, livestock, housing, home-based and other business enterprises (<i>where data on ownership have been collected by sex in the original survey or census</i>)</p>

#### Matrix 4: National intermediate targets and indicators for poverty and hunger

11.f	Increase by 2 percent* each year the proportion of poor households, female-headed households, rural households and minority households with access to electricity or alternative sources of power	11.f.1	Proportion of poor households, female-headed households, rural households and minority households with access to electricity or alternative sources of power
11.g	Increase by 2 percent* each year the proportion of poor households, female-headed households, rural households and minority households with access to safe water	11.g.1	Proportion of poor households, female-headed households, rural households, minority, refugee and IDP households with year-round access to safe water
11.h	Increase by 2 percent* each year the proportion of poor households, female-headed households, rural households and minority households with access to adequate sanitation	11.h.1	Proportion of poor households, female-headed households, rural households, minority, refugee and IDP households with adequate sanitation
11.i	Increase by 2 percent* each year the proportion of poor households, female-headed households, rural households and minority households within 20 minutes of public transport	11.i.1	Proportion of poor households, female-headed households and rural households minority, refugee and IDP households within 20 minutes of public transport
11.j	Increase by 2 percent* each year the proportion of poor households, female-headed households, rural households and minority households using public transport	11.j.1	Proportion of poor households, female-headed households and rural households using public transport within the week prior to the survey  <i>Data could also be collected on the sex of individuals using public transport.<sup>59</sup></i>
11.k	Increase by 2 percent* each year the proportion of poor households, female-headed households and rural households with access to credit	11.k.1	Proportion of poor households, female-headed households, rural households and minority households with access to credit
11.l	Increase by 5 percent* each year the direct access of women in refugee and IDP camps to all forms of economic assistance provided	11.l.1	Proportion of economic assistance (cash, credit, livestock, seed etc) distributed directly to women in refugee and IDP households, by category of assistance
		11.l.2	Proportion of jobs created by employment creation and livelihood programmes for refugees and IDPs that were created for women

**Matrix 4: National intermediate targets and indicators for poverty and hunger**

11.l.3 Ratio of female to male employment on employment creation schemes, by type of payment (food for work or other in-kind payments and wages)	
<b>Employment</b>	
11.m Increase by 2 percent* per year women's share of paid employment	<p>11.m.1 Female share of wage employment in agriculture, industry and service sectors</p> <p>11.m.2 Female share of new wage employment in agriculture, industry and service sectors</p> <p>11.m.3 Ratio of female to male wages, by sector</p> <p>11.m.4 Share of sole proprietorships owned by women that benefit from micro-enterprise programmes</p> <p>11.m.5 Female share of individual loans, especially from government sponsored micro-credit programmes</p>
<b>Hunger</b>	
11.n Increase by 2 percent* each year women's ownership and use of land	<p>11.n.1 Existence of legislation granting females equal rights to ownership of land and property with males</p> <p>11.n.2 Number of land titles issued to women in previous year, by urban and rural areas</p> <p>11.n.3 Number of land titles issued jointly to women and their husbands in the previous year, by urban and rural areas</p> <p>11.n.4 Female share of ownership or share under joint husband/wife ownership of land, by urban and rural areas</p> <p>11.n.5 Female share or share under joint husband/wife tenancy of rented or leased land, by urban and rural areas</p>

Matrix 4: National intermediate targets and indicators for poverty and hunger		
11.o	Increase by 2 percent* each year women's ownership of housing	<p>11.o.1 Existence of legislation granting females equal rights to ownership of housing with males</p> <p>11.o.2 Number of house titles issued to women in previous year, by urban and rural areas</p> <p>11.o.3 Number of house titles issued jointly to women and their husbands in the previous year, by urban and rural areas</p> <p>11.o.4 Female share of ownership or share under joint husband/wife ownership of housing, by urban and rural areas</p> <p>11.o.5 Female share or share under joint husband/wife tenancy of rented or leased housing, by urban and rural areas</p>
11.p	Increase by 2 percent* each year women's inheritance of land or housing	<p>11.p.1 Existence of legislation granting females equal rights to inheritance with males</p> <p>11.p.2 Number of females making claims under this legislation</p> <p>11.p.3 Number of females awarded property rights under the legislation</p> <p>11.p.4 Number of women inheriting land or housing in previous year</p>
11.q	Increase by 5 percent* each year women's access to support from agricultural extension, micro-credit and micro-enterprise programmes, especially – but not only – those related to food production	<p>11.q.1 Number of women participating in agricultural extension, micro-credit and micro-enterprise programmes, by purpose of activity, with a specific category for food production</p> <p>11.q.2 Ratio of women to men participating in agricultural extension, micro-credit and micro-enterprise programmes, by purpose of activity, with a specific category for food production</p>
11.r	Increase by 5 percent* each year women's access to loans for agriculture, home-based and other businesses, especially – but not only – for food-related activities	<p>11.r.1 Existence of legislation granting females equal rights to borrow from banks and other lending bodies in their own name and on the same terms as males</p> <p>11.r.2 Number of individual loans issued by banks and other lending bodies to women for agriculture, home-based and other businesses, by purpose of loan</p> <p>11.r.3 Ratio of female to male individual borrowers of loans for agriculture, home-based and other businesses, by purpose of loan</p>



**Matrix 4: National intermediate targets and indicators for poverty and hunger**

<p>11.s Ensure the availability of data to monitor women's access to resources</p>	<p>11.s.1 Agricultural extension departments routinely record and report participation in programmes, by sex and other relevant socio-economic categories, including identification of minority groups</p> <p>11.s.2 Banks and lending bodies, including micro-credit groups, routinely record and report the sex of borrowers in terms of the categories female, male, joint husband and wife and enterprise</p> <p>11.s.3 Micro-credit and micro-enterprise programmes routinely record and report the sex of borrowers in terms of female, male and joint enterprises</p> <p>11.s.4 Registrars of land and property or other appropriate authorities routinely record and report ownership, tenancy and registration of inheritance, by sex of owner, tenant or beneficiary in terms of the categories female, male, joint husband and wife and enterprise</p>
<p>11.t Increase by 5 percent* each year the direct access of women in refugee and IDP camps to all forms of food and related assistance provided</p>	<p>11.t.1 Proportion of food and related assistance distributed directly to women in refugee and IDP households, by category of assistance</p> <p>11.t.2 Proportion of food and related assistance distributed to female-headed households among refugees and IDPs, by category of assistance</p>
<p>11.u Provide sufficient budget to support the chosen strategies and ensure that policies and programmes to benefit girls receive an equal share</p>	<p>11.u.1 Proportion of the national budget devoted to addressing poverty and hunger</p> <p>11.u.2 Proportion of the national budget actually spent on addressing poverty and hunger</p> <p>11.u.3 Proportion of GDP allocated to addressing poverty and hunger</p> <p>11.u.4 Proportion of the national poverty and hunger budget allocated to gender-responsive rights-based initiatives</p> <p>11.u.5 Proportion of the national poverty and hunger budget actually spent on gender-responsive rights-based initiatives</p>

*\* Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.*

*# All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.*

*^ All household level indicators should be disaggregated by rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.*

*Goal 1: Eradicating Extreme Poverty and Hunger*

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# GOAL 2

## ACHIEVE UNIVERSAL PRIMARY EDUCATION

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## Goal 2: Achieve Universal Primary Education

Access to education is the fundamental right of all children. Article 13.1 of the International Covenant on Economic, Social and Cultural Rights ‘recognizes the right of everyone to education’, while article 13.2(1) states that ‘primary education shall be compulsory and available free to all’. CEDAW is more specific about the type of education, calling for girls and boys to have access to the same curricula, the same quality of education, the same opportunities for scholarships and other grants and the same opportunities to participate actively in sports and physical education.

**Matrix 5: Global target and indicators for education**

Target		Indicators	
		<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>	
2.A	Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	2.1	Net enrolment ratio in primary education
		2.2	Proportion of pupils starting grade 1 who reach last grade of primary
		2.3	Literacy rate of 15-24 year-olds, women and men

*Global Monitoring Report 2007 Millennium Development Goals* found that, between 2000 and 2005, the global primary school completion rate increased from 78 percent to 83 percent and the pace of progress accelerated in many countries. Some countries, such as Cambodia, have made remarkable progress. Yet 38 percent of developing countries are unlikely to reach 100 percent primary completion by 2015. Another 22 percent lacked data to track progress, and are also unlikely to achieve the target.

*The Millennium Development Goals Report 2007* found that of the 72 million children of primary school age who were not in school, 57 percent were girls.<sup>60</sup> Girls from ethnic, religious, or caste minorities—the ‘doubly disadvantaged’—were the least likely to complete primary school, making up approximately 75 percent of the 55 million girls who remain out of school.<sup>61</sup>

The global target for primary education refers to both boys and girls, and the indicators should be monitored separately at the global level. Countries often use a combination of census data and either administrative data collected from schools by the educational system or household survey data. In many countries, educational system data are not available separately for girls and boys, or not available at all.

Household survey data are normally obtained from either the Multiple Indicators Cluster Survey (MICS, usually supported by UNICEF in conjunction with the national statistics office), or a Demographic and Health Survey (DHS). Data on individuals in each household are usually available by sex from both surveys. However, at the country level, less than half of the 78 countries reviewed by UNDP in 2005 reported the net enrolment ratio separately for girls and boys.<sup>62</sup>

## A. Issues for a gender-responsive rights-based analysis

### 1. Completion of primary education alone is largely an instrumental target

For women and girls who receive only primary education, the main beneficiaries are their families and the children that they have or later bear. This is because completion of primary education by mothers is strongly associated with having fewer children, fewer of those children dying in infancy or childhood, better nutrition for their children and a greater likelihood that they will send their children to school.

#### Primary education does not necessarily lead to a job

A study of labour market participation decisions in Indonesia, the Republic of Korea, the Philippines, Sri Lanka and Thailand in 2001 found that primary education increased the probability of labour market participation only in Indonesia. Secondary education increased the probability in Indonesia and Thailand, while tertiary education increased the probability in all countries.<sup>63</sup>

Primary education can also help women obtain information on a range of topics, from agriculture to health and HIV/AIDS. Thus, it can increase agricultural productivity, help women to protect themselves from HIV/AIDS and other preventable diseases and increase their ability to negotiate safe sex. Girls' education is therefore instrumental in achieving all of the MDGs. However, primary education alone is insufficient to empower women, particularly because in the poorest countries it is often of poor quality, tends to reinforce rather than change gender stereotypes and is not sufficient to lead to regular paid employment.

Despite these limitations, primary education is the foundation of all higher levels of education and therefore the essential first step toward higher levels of education for girls.

In countries that have already achieved universal primary education, the national target should be revised to set a higher level of educational attainment for Goal 2. Higher levels of education are especially important for girls because they have greater potential to lead to paid employment and thus to increased empowerment.

### 2. National MDG indicators should be shown separately for boys and girls

*The Millennium Development Goals Report 2006* reports the net enrolment ratio in primary education 1990/91 and 2003/04, disaggregated by sex and region.<sup>64</sup> However, sex-disaggregated data are not available for many countries. This creates a major problem for policy analysis because it is difficult to identify whether aggregate levels of enrolment are a general education and development

#### Development issue or gender issue?

If the primary school net enrolment ratio in a particular country was 60 percent, the country would be facing a rights and a development issue because 100 percent of children of primary school age have a right to be in school. Whether it also faces a gender issue is not apparent.

If sex-disaggregated data showed that the enrolment ratio was 70 percent for boys and only 50 percent for girls, the country would be dealing with both a rights/development issue as well as a gender and women's rights issue, as evidenced by the gender gap.

issue or a specific gender issue – or both. As a result, the specific problems faced by girls are often not recognized and not addressed.

For all education indicators, it is important at the country level to disaggregate by sex and other socio-economic categories and to disaggregate by sex within these, since there are often significant differences in the educational experience and access of girls and boys within particular remote, minority and disadvantaged groups.

### 3. National indicators need to accurately capture access to primary education for both boys and girls

The global indicators for primary education have a number of limitations and weaknesses which reduce the accuracy and usefulness of their data for planning and monitoring purposes.

*Indicator 2.1: net primary school enrolment ratio* is the ratio of the number of children of official primary school age (as defined by the national education system) who are enrolled in primary school to the total population of children of official primary school age.<sup>65</sup> The number of children in school is obtained from administrative data collected by the educational system, if available, or estimated from household surveys.

#### Some countries have a reverse gender gap in education

In some countries, it is boys who are more likely to have low enrolment ratios or to have poor attendance. In the 2006 Millennium Development Goals Report four countries – Bhutan, Brazil, Lebanon and the Slovak Republic – reported that boys were less likely than girls to obtain primary education.

Net enrolment ratios do not reflect the proportion of children actually enrolled in primary school because the ratio only includes those of official primary school age. However, in poorer countries and especially for isolated populations, children may enrol for the first time at ages well above the official starting age and thus still be in primary school at ages well above the official completion age. Similarly, students who repeat or dropout and later return to school will not be included in the net enrolment ratio. This affects the usefulness of the ratio for planning purposes. In both cases, it is usually girls who are most likely to be affected.

The net enrolment ratio does not take into account differences in attendance rates. Children may be enrolled but attend school rarely or irregularly.<sup>66</sup> This is especially the case for girls, who are often kept at home to help their mothers with childcare, domestic and other work.

An alternative measure is the gross primary enrolment ratio. This is defined as the number of primary school children, regardless of age, divided by the number of children of official primary school age. It is often more widely available than the net enrolment ratio. Since it represents the actual number of children in primary school, it is also more relevant for planning.

*Indicator 2.2: Proportion of pupils starting grade 1 who reach last grade of primary*, is often known as the survival rate to grade 5. It measures the proportion of pupils starting grade 1 who are expected to reach the last grade of primary, and is an estimate based on data on enrolment and repetition by grade for two consecutive years. The estimate assumes that dropouts never return to school; that promotion, repetition and dropout rates remain constant over the entire period in which the age group or cohort is enrolled in school; and that the same



rates apply to all pupils enrolled in a given grade, regardless of whether they previously repeated a grade.<sup>67</sup>

However, there is extensive evidence to show that promotion, repetition and dropout rates vary considerably, both between girls and boys, between urban and rural areas and by other socio-economic variables. Thus, the indicator is not gender-responsive, nor does it not cover adequately the realization of the right to education for minorities and other disadvantaged groups.

UN Statistics Division recommends that this survival rate be supplemented with the primary completion rate, which focuses on the share of children who ever complete primary schooling to the last grade of primary, regardless of the time it takes them.<sup>68</sup> This is the ratio of the total number of students successfully completing or graduating from the last year of primary school in a given year to the total number of children of official graduation age in the population.

Another alternative measure is the primary retention rate—the proportion of students entering grade 1 that remain in school until the last grade of primary. This requires school level data of reasonable quality.

*Indicator 2.3: Literacy rate of 15–24 year-olds* is referred to as the youth literacy rate. This is the percentage of the population 15–24 years old who can both read and write with understanding a short simple statement on everyday life. It is an outcome indicator of the effectiveness of primary education over the previous 10 years or so.

Interpretation of this indicator is difficult, particularly in multi-lingual societies where literacy in a minority language may confer fewer benefits than literacy in the national language. Methods for measuring literacy vary greatly and number of years of schooling is sometimes used as a proxy where there has been no direct measurement. The functional literacy of an individual will reflect not just their formal schooling but also the extent to which they use written language in daily life and any training they have had subsequent to leaving school. Thus, the indicator tends to overestimate literacy levels for women, who often have fewer opportunities to use written language and poorer access to training.

#### 4. Parents and society often attach little value to girls' education

Some of the most intractable obstacles to education for girls are socio-cultural. Girls are expected to marry, leave their parents' household and have children, so parents and society as a whole often see little value in sending girls to school. Educating a boy is seen as a better investment because he is more likely to get paid work and is traditionally obligated to care for his parents in their old age.

##### **Parents do not expect to benefit from girls' education**

Proverbs or sayings heard in societies such as Bangladesh that 'educating a girl is like watering your neighbour's tree' reflect the expectation that daughters will leave the family on marriage and that the family will therefore not benefit from investment in their education.

Some societies are also opposed to education for girls on the grounds that it will make them less willing to accept the typical life of a woman in that society. Such attitudes are a

major barrier to girls' education even in families that can easily afford the costs. They are a larger obstacle in poor families that have to choose how to invest their scarce resources.

#### **5. Girls do more domestic work that often keeps them from school or affects their performance**

When girls are enrolled in school, parents are more likely to keep girls than boys home to help with domestic work or childcare, both because these are traditionally female roles and because they see little harm in interrupting their schooling.

An interagency study of child labour covering more than 70 countries found that, almost universally, a higher proportion of girls than boys do domestic work and girls also do more hours per week. The difference in hours per week ranged from very little in Lesotho and Swaziland to almost 12 hours in Guatemala.<sup>69</sup>

As a result of the amount and timing of household chores, girls tend to have poorer school attendance, less time for homework, and be more likely to drop out from school. Where domestic chores prevent a child from realizing her or his right to education and other basic human rights, UNICEF argues that the chores should be regarded as a form of child labour.<sup>70</sup>

#### **6. Distance and lack of physical facilities tends to affect girls more than boys**

Parents tend to be more concerned for the physical safety of girls if they have to travel any distance to attend school, especially on foot.<sup>71</sup> This is a greater issue once girls reach puberty, when protection of a girls' reputation and honour become a much greater concern. Lack of infrastructure such as toilets and access to water have been found to be a barrier to girls attending school, especially after puberty.

#### **7. Curricula, teaching materials and methods, and attitudes often reinforce gender stereotypes**

Gender stereotypes are disempowering. They not only reinforce the perceptions of boys, teachers, parents and others as to appropriate roles, employment and behaviours for girls, but also tend to limit the aspirations and ambitions of girls and women themselves.

Article 10(c) of CEDAW is clear that girls' right to education includes a focus on the content of the education provided. CEDAW calls for elimination of stereotyped concepts of the roles of men and women by encouraging coeducation, revising textbooks and school programmes and adapting teaching methods.

## 8. Poverty and education fees particularly reduce opportunities for girls' education

Poor families have to make difficult choices about the allocation of their scarce resources. The result is often a decision to concentrate educational expenditure on boys, on the assumption that boys are more likely to later get paid work, while girls don't need education because they will marry and leave the family household.

The International Covenant on Economic, Social and Cultural Rights stipulates that primary education should be free and compulsory. However in recent years, user-pays policies have been advocated by international financial institutions and others. Fees have been introduced and/or increased even in countries, such as China and Viet Nam, where education was formerly free. The result, almost universally, is a decrease in girls' access to education unless specific measures such as subsidies for basic education or scholarships for poor students are introduced to offset the impact of fees.

### China and Viet Nam: public support for basic education

In Viet Nam the government pays half the cost of compulsory primary education to year 5, spending 4 percent of Gross National Income (GNI) on education in 2004. In 2000, Viet Nam had a net enrolment rate of 97 for boys and 91 for girls. Girls were 46 percent of pupils at primary level in 2004 and 48 percent at secondary level.<sup>72</sup>

China, which is also ahead of the primary school enrolment target, spent 2 percent of GNI on education in 2000. Between 1990 and 2004, primary school progression rates to grade 5 increased dramatically, from 58 to 100 for boys and from 78 to 98 for girls. The central and local governments have established scholarships to assist poor students to access the nine years of compulsory education, including free or reduced tuition, living allowances and free textbooks. The net primary enrolment rate was 99 for boys and 95 for girls. However, large regional disparities remain, with poorer access in less populated areas.<sup>73</sup>

## 9. HIV/AIDS and family care is a major barrier to girls' education in epidemic-affected countries

When women become the main carers of husbands and other family members with HIV/AIDS, girls in the family are often forced to become primary breadwinners. If the woman also becomes affected by HIV/AIDS, the eldest daughter or a grandmother will probably become the main caregiver, including taking responsibility for any siblings. As a result, girls drop out from school or are not enrolled.

## 10. Discrimination against minority groups is a major cause of girls' non-attendance in school

Policies and practices on minority education are inevitably linked to complex political, cultural, social, and economic factors. They are also critical to the achievement of universal primary education, as a recent study estimates that almost three quarters of the girls who do not attend school come from excluded groups, which represent only 20 percent of the population of developing countries.

### Most out-of-school girls are from minority groups

In 2000, nearly 75 percent of the 55 million out of school in developing countries were female and from excluded ethnic, religious, or caste groups.<sup>74</sup>

Though many minority children may be legally allowed to enter school, they may be excluded by discrimination due to their ethnicity, language barriers, socio-cultural status, or the remoteness of their villages. Some are legally excluded because they lack birth certificates or citizenship papers. In addition, minority languages and traditions are either not taught in schools or may be prohibited. When this is combined with cultural norms within the excluded group that seclude women, or when the women are expected to work long hours on domestic chores or farm work, school attendance and completion rates for girls are low and drop-out rates high.<sup>75</sup> Making schools culturally inclusive is a challenge that is as difficult as it is important for achieving Goal 2.

### **11. In some countries with high levels of education, the performance of boys is below that of girls**

This problem often emerges in primary school and continues throughout secondary level. It has been attributed to different rates of biological development, the predominance of women teachers, especially at the primary level, and the consequent lack of role models for boys, as well as the ‘feminization’ of teaching styles. Among the countries affected are Australia and the United Kingdom, both of which have developed special programmes to improve educational outcomes for boys.

### **12. Goal 2 overlooks the literacy needs of older women and men**

In countries that have had low levels of education in the past, the literacy needs of adults who did not have access to formal education when they were of school age are not currently addressed by the MDGs. In most countries, women are the majority of the adult illiterate population. Illiteracy among the adult population, particularly women, is an obstacle to the achievement of all the MDGs because women and men who are illiterate have more limited opportunities for employment and lack access to information related not only to employment but also on health, governance and welfare.

#### **Literacy through non-formal education is vital for older women**

Through the Women’s Literacy and Basic Skills Project, many of Laos’ illiterate ethnic minority women have been given access to non-formal education and a chance to improve their lives. A total of 3,240 women participated in the program’s various projects. It is estimated that another 16,000 people will benefit indirectly, including children and other family members, as well as villages.<sup>76</sup>

As education levels increase, societies become more dependent on the written word and forms of communication such as mobile phones and computers that assume basic literacy and numeracy. As a result, older populations may tend to become socially excluded. This can have serious consequences, not just for illiterate women and men but more generally where HIV/AIDS or high levels of international labour migration result in increased responsibility for childcare by the grandparent generation. It can also affect productivity levels in economies with high levels of adult illiteracy and shortages of labour.

## B. National long-term targets and indicators

Matrix 6 below suggests a range of long-term targets and indicators for education based on the preceding gender-responsive rights-based analysis of Goal 2. They should be adapted and added to so that they are relevant and useful for the individual country.

In considering these targets and indicators, countries should take into account the level of education that has been attained by the majority of children in schools, as well as any specific needs relevant to the country or the culture, such as a cultural or religious preference for segregated schools for girls.

Women's groups and civil society should ensure that CEDAW and the Convention on the Rights of the Child, as well as other human rights, country reports, the Beijing Platform and national action plans on women and children are taken into consideration in the development of specific targets and indicators for implementation of programmes to achieve Goal 2. These documents can also provide input to the preparation of country and subnational MDG reports.

<b>Matrix 6: National long-term targets and indicators for education</b>	
<b>Targets</b>	<b>Indicators (see note # below)</b>
L2.A Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling ( <i>unchanged from global target</i> )	L2.A.1 Gross enrolment ratio in primary education L2.A.2 Ratio of girls to boys in primary education L2.A.3 Primary completion rate ( <i>as recommended by UN Statistics Division</i> ) L2.A.4 Primary retention rate
<i>For countries that have already, or almost, achieved the global Goal 2 target:</i>	
L2.B Ensure that, by 2015, children everywhere, girls and boys alike, will be able to complete a full course of junior secondary schooling or, for countries that have already or almost achieved universal junior secondary education, a full course of senior secondary or equivalent technical and vocational schooling	L2.B.1 Net enrolment ratio in junior/senior secondary/technical and vocational education ( <i>adapted as relevant to the country situation</i> ) L2.B.2 Gross enrolment ratio in junior/senior secondary/technical and vocational education L2.B.3 Ratio of girls to boys in junior/senior secondary/technical and vocational education L2.B.4 Proportion of pupils starting grade 6 who reach grade 9/ grade 12 ( <i>based on global indicator 2.2</i> ) L2.B.5 Junior/senior secondary/technical and vocational completion rate ( <i>as recommended by UN Statistics Division</i> ) L2.B.6 Junior/senior secondary/technical and vocational retention rate
# All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.	

## C. Gender-responsive rights-based strategies

### 1. Promote the value of education for girls to parents and communities

Overcoming the socio-cultural barriers to education for girls is critical to achieving universal primary education. Research shows that the economic benefits from success are significant. Other benefits to the society and the family include improved health and nutrition of the girl's children; lower likelihood of illness and death among the girl's children; and increased earnings and productivity for the girl when she gains employment.

#### Education increases women's wages and farm productivity

It has been estimated that, globally, women's wages rise by 10 to 20 percent for each year of schooling.<sup>77</sup> Four years of school for girls boosts farmers' annual productivity by an average of 9 percent.<sup>78</sup>

Gender-responsive rights-based strategies to address this issue include:

- use communications and media strategies to inform parents and communities of the benefits of girls' education, emphasizing the benefits most relevant to the society;
- hold awareness-raising workshops among communities on human rights, CEDAW and women's rights, particularly the rights of girls and boys to basic education;
- advocate for girls' access to education with community leaders and 'gate-keepers' such as household heads and senior family members, including older women;
- promote young educated women—particularly those working in paid positions, including local teachers and health staff—as role models and examples to families and communities of the benefits of education for girls.

### 2. Promote economic policies that create employment opportunities for women with education

The relationship between girls' education and economic policy goes both ways: economic policies can contribute to girls' education by creating the kind of employment that provides incentives for parents to invest in girls' education; girls' education can contribute significantly to economic growth.

#### Gender gaps in education may reduce national growth

In Pakistan, estimates over several time periods found that education for females had higher rates of return than for males. One study estimated the return on investments to get more girls into schooling at over 20 percent. Another estimated that between 1960 and 1992, annual growth in income per capita [in Pakistan] could have been nearly a percentage point higher if Pakistan had closed the gender gap as fast as East Asia.<sup>79</sup>

The existence of wage employment and income-generating opportunities for girls with education is the most persuasive reason for parents to change their views on the value of educating their daughters. Policies and programmes which ensure that education leads to income-earning opportunities for women, thus providing families with a return on their investment in girls' education, are critical. Women who are in such employment, or involved in micro-enterprises or home-based



businesses, are also more likely to support education for their daughters as they see the need for education in their business or work.

In most cases, employment such as factory and basic clerical workers requires junior secondary education. Governments are therefore encouraged to raise the target for Goal 2 from primary education to at least junior secondary education.

Gender-responsive rights-based strategies to address this issue include:

- promote macroeconomic policies that create new employment opportunities or protect existing jobs for women with education;
- support micro-credit programmes for women to enable them to invest in micro-enterprises or home-based businesses;
- promote micro-enterprise development and micro-credit schemes for school leavers;
- promote macroeconomic policies that favour industries and sectors that employ women with at least junior secondary education;
- provide training opportunities for educated women to gain well-paid positions in expanding industries and to move out of declining industries;
- promote programmes to support women's businesses and ensure that they have equal access to credit for business purposes;
- identify successful women's businesses and assist them to upscale and replicate them in areas or markets where they would not compete directly with the original successful business;
- encourage successful businesswomen and men to mentor businesswomen with potential for success;
- promote programmes for women's businesses to move into exports;
- support businesswomen's participation in trade missions and consider the viability of trade missions specifically for businesswomen.

**Garment exports provide work for educated young women in Cambodia**

Trade policies in Cambodia have generated employment for young educated women. The garment sector provides most of the industrial employment in Cambodia. In 2006 it had a workforce of about 325,000 people, most of whom are women who are young and literate with higher than average levels of education. Most are also from rural areas, where their remittances help support rural households and provide a positive incentive for rural parents to keep their daughters in school.<sup>80</sup>

**3. Invest in time-saving infrastructure to reduce the time girls spend on domestic work**

Time-saving infrastructure that reduces the dependence of households on children's, especially girls', domestic work can increase the potential for girls to enrol in school. It can also increase girls' attendance and their performance, as they will have more time for homework. For example, piped water can save women and girls many hours in the day that would otherwise be spent carrying water. Safe water also reduces the incidence of illness and the time taken by women and girls in caring for sick family members, thereby reducing girls' absence from school.



In addition to those suggested under Goal 1, gender-responsive rights-based strategies to address this issue include:

- provide free school meals and take-home rations for all children using locally produced foods, both to reduce the time that women and girls spend preparing food and to improve children's nutrition.

#### 4. Provide support for girls' domestic and care responsibilities

Another effective approach is to encourage schools to support girls who have domestic responsibilities to continue their education, for example by providing schooling at times when girls are not so busy with domestic work and to provide facilities at school that enable girls to carry out, for example, childcare while attending school.

Gender-responsive rights-based strategies to address this issue include:

- allow flexible school times to help girls meet their other family responsibilities without missing or dropping out of school;
- during school hours, provide childcare for preschool-aged siblings to enable girls to attend school and focus on learning rather than caring for younger brothers and sisters;
- provide sources of power so that students can study at night.

#### **Flexible school hours and childcare increase girls' enrolment**

In Bangladesh, flexible school hours and provision of childcare for siblings have increased girls' enrolment and retention in school without increasing cost.<sup>81</sup>

#### 5. Improve girls' physical access to schools

Strategies to improve physical access to schools may address the location of schools, transport, and the classroom and other facilities at the school. Hostels are especially important for secondary level, where it is less likely that schools will be located near girls' homes. The hostels could be operated by NGOs or communities.

Gender-responsive rights-based strategies to address this issue include:

- improve transportation to enable girls to travel to and from school in minimum time and in safety;
- provide schools or schooling as close as possible to the location where girls live;
- build lower secondary classrooms attached to primary schools to help meet the aims of basic education for all;
- provide single-sex schools, or classrooms with female teachers for female students, especially with teachers who come from the community;
- provide state-supported and state-supervised hostels for girls, located near to schools.

#### **Locate schools near population centres**

The experience of the NGO BRAC in Bangladesh has shown that schools or satellite schools can be established in most centres of population without significantly adding to costs.<sup>82</sup>

## **6. Review educational content and teaching methods to remove gender stereotypes**

The content of education is as important as the quantity. Girls are often stereotyped into 'feminine' subjects and denied access to sports and extra-curricular activities, thus reinforcing the basis of gender inequality.

Teaching methods may favour boys, particularly where the majority of teachers are men. Alternatively, they may become 'feminized' in countries where the majority of teachers, particularly at primary level, are women. However, regardless of the sex of the teacher, teachers tend to devote more time to boys and less to girls, who are regarded as more passive learners.

Gender-responsive rights-based strategies to address this issue include:

- review curricula to ensure that they are gender-responsive, promote gender equality and avoid gender stereotypes;
- review educational materials to remove gender stereotypes and gender bias, particularly in the ways in which females and males and their life experiences are depicted;
- review the curricula of teacher training institutions and faculties of education to remove gender stereotypes and gender bias and to ensure that teachers are sensitized to gender issues in the classroom and learn to promote gender equality among their students;
- use gender analysis to identify any gender differences in educational outcomes and develop appropriate strategies to meet the needs of both girls and boys.

## 7. Review educational content and teaching methods from a rights perspective

The concept that children—or women—have rights is completely foreign to many systems of education. Learning is by rote, and students are expected to be passive learners. Teachers' authority is absolute, which contributes to the routine use of physical punishment, as well as sexual harassment and abuse of children, especially girls.

Such education provides a very poor basis for a democratic society in which people must actively claim and protect their rights and hold governments accountable. It also provides an inadequate foundation for employment in the modern economy, which requires creativity, problem-solving, independent thinking, teamwork and life-long learning. A rights-based and gender-responsive approach to education is the foundation of a democratic and free society in which the rights of women and all members of society are recognized, respected, protected and fulfilled.

Gender-responsive rights-based strategies to address this issue include:

- review curricula from a rights-based perspective and ensure that they provide information on national human rights commitments under international law and promote respect for human rights, particularly women's human rights;
- review educational materials to ensure that they provide information on the countries' international human rights obligations, including the Convention on the Rights of the Child (CRC) and CEDAW;
- review curricula in teacher training institutions to ensure that teachers are aware of their responsibilities as duty bearers under CRC, CEDAW and other human rights conventions;
- promote the development and implementation of anti-harassment, anti-bullying and anti-sexual harassment policies, programmes and procedures in schools, teacher training institutions and universities;
- in teacher training, emphasize positive methods of class control and ensure that teachers are aware that physical punishment, which is still widespread in schools in many countries, is a violation of human rights;

### Education for women's empowerment requires new approaches to content and methods

The Indian National Policy on Education 1986 committed state policy to using education as an 'agent of basic change in the status of women'. The Mahila Samakhya programme, which has been operating since 1989, aims to empower women to promote the inclusion of women and their daughters in education.

The programme uses awareness-raising and collective strategies to redefine education as an enabling and empowering tool. It regards education as a process that would enable women to 'think critically, to question, to analyse their own condition, to demand and acquire the information and skills they need to enable them to plan and act collectively for change'. Mahila Samakhya helps women to question rather than accept.

By placing the empowerment agenda in the hands of collectives of women at the village level, Mahila Samakhya has seen the emergence of a locally articulated development agenda, including health, livelihoods, income generation, savings and credit—with women developing their own strategies to address issues of importance to them. This includes participation in local governance, ensuring the effective functioning of government service delivery and dealing with broader social issues that have a negative impact on women's lives—such as male alcoholism and violence.<sup>83</sup>

- encourage schools and departments of education to monitor and report on cases of harassment, bullying and sexual harassment in schools, teacher training institutions and universities.

## 8. Address barriers to schooling for girls from minority groups

As noted earlier, girls from minorities—excluded ethnic, religious or caste groups—were almost 75 percent of the estimated 55 million girls who remained out of school in developing countries in 2000.<sup>84</sup> Special strategies are needed to overcome the barriers that they face.

Gender-responsive rights-based strategies to address this issue include:

- eliminate discriminatory policies such as requiring a birth certificate or other civil registration documents for school registration, which still exclude many girls;
- change teachers' negative and often discriminatory attitudes and behaviours, which both reflect and reinforce community prejudices and disempower even those girls from minority groups who do manage to enrol in school;
- provide compensatory preschool and in-school programs to help disadvantaged girls catch up;
- provide support such as targeted stipends to overcome parents' reluctance to send girls to school, and cover the direct and opportunity costs of schooling;<sup>85</sup>
- in the longer run, eliminate the poverty and social exclusion experienced by many minority families and thus reduce the need for many minority girls to work either in income generation or in domestic work to assist or substitute for their mothers.

## 9. Achieve gender equity among teachers and head teachers at each level of education

Children need role models of both sexes. Education systems should aim for a reasonable mix of female and male teachers. Between 40 percent and 60 percent of either sex would be an appropriate target. In many countries, this will involve a major effort to recruit and train female teachers, but in others the focus will need to be on recruiting and training male teachers, particularly at the primary level.

Discrimination against women in promotions and appointment as head teachers must be eliminated. The existing imbalance in most countries, where the majority of head teachers are men regardless of the sex of the majority of teachers, represents de facto discrimination and is a violation of women's human rights under CEDAW.

Gender-responsive rights-based strategies to address this issue include:

- promote the recruitment of a mix of female and male teachers at all levels of education;
- through the human resource section of the department of education, monitor the recruitment, in-country and overseas training and promotion of female teachers;
- in rural or isolated areas, make special provision for appropriate accommodation for female teachers;
- where necessary, provide additional training opportunities and special courses for female teachers to enable them to reach the standards required for promotion;
- through the human resource section of the department of education, monitor the appointment of women to head teacher positions. Where there is apparent discrimination, initiate measures to remove it and redress any recent cases;

- where the department of education does not collect or release such statistics, support civil society and/or women's groups to work with the relevant section/s in the department to ensure that such data are collected and regularly reported to the parliament and the public;
- where necessary, assist the human resource section of the department of education with training and human resource management systems development, so that they can collect and report such statistics.

## 10. Reduce the direct costs of education for girls

The direct costs of education are a major obstacle to education for girls from poor families. Although the elimination of fees for basic education is required by Article 13 of the ICESCR, they continue to be levied in many countries, even at the primary level. For example, fees are still widespread in sub-Saharan Africa.<sup>87</sup> The costs of books and uniforms are also a barrier to the education of girls.

Even non-poor families may be unwilling to bear the direct costs of education for their daughters. As a result, strategies to reduce these costs which are specifically targeted at poor families are often ineffective.

The World Bank now recognizes the scope for improving the educational attainment of the poor through greater efforts to eliminate user fees in primary education.

Gender-responsive rights-based strategies to address this issue include:

- provide free books and uniforms for girls;
- provide stipends or scholarships to girls;
- initiate targeted payments to mothers that are conditional upon their daughters attending school for a minimum number of days per month and on the child's performance.

### **A community approach to increase the enrolment and retention of girls**

Poor families in Papua New Guinea, especially subsistence farmers in the country's isolated highlands, lack the cash to pay for their children's school fees. If parents have to choose, they send their sons rather than their daughters to school. School enrolment and retention rates are among the lowest in East Asia and the Pacific and the gender gap in primary school is the highest in the region.

In 2004, church elders, community leaders, parents and teachers at Gaglmambuno Primary School decided to establish School Fees Akepile, a collective fund which encourages all members of the community, whether they have a child in school or not, to contribute to the school fees of all the children in the village. Since the whole community pays, everybody makes sure that the children really are in school. As a result, enrolment increased from 104 in 2004 to 240 in 2005, and many of the students are girls. The government, with UNICEF support, integrated the school into a pilot programme to accelerate girls' education.<sup>86</sup>

## D. National intermediate targets and indicators

Matrix 7 below suggests a range of national intermediate targets and indicators for education, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

Matrix 7: National intermediate targets and indicators for education	
Targets	Indicators (see note # below)
<p>I2.a Increase girls and boys physical access to primary education by 5 percent* each year until 100 percent enrolment is achieved (<i>or to junior secondary or senior secondary, as appropriate to the country</i>)</p>	<p>I2.a.1 Distance and/or time spent travelling to school, by education level, sex and other relevant socio-economic categories</p> <p>I2.a.2 Ratio of girls to boys staying in state-supported accommodation to attend school, by education level</p> <p>I2.a.3 Proportion of schools with adequate toilets</p> <p>I2.a.4 Proportion of schools with separate toilets for girls and boys</p> <p>I2.a.5 Proportion of schools with access to safe water</p>
<p>I2.b Increase number of female teachers at all levels in schools, including as head teachers, by 5 percent* each year until women are at least 40 percent of the total</p>	<p>I2.b.1 Proportion of female teachers, by school type, school location and education level</p> <p>I2.b.2 Proportion of female senior and head teachers, by school type, school location and education level</p>
<p>I2.c Increase enrolment and completion rates for girls from minority populations in primary education by 5 percent* each year until 100 percent enrolment is achieved (<i>or to junior secondary or senior secondary, as appropriate to the country</i>)</p>	<p>I2.c.1 Enrolment rates, by sex for minority populations at each level of education</p> <p>I2.c.2 Completion rates, by sex for minority populations at each level of education</p> <p>I2.c.3 Teachers from minority groups as percentage of all teachers, by sex and level of education</p> <p>I2.c.4 Number of schools or programmes specifically directed towards minority groups in terms of gender-responsive approaches to the minority culture and/or language</p>
<p>I2.d Increase parental and community support for girls' education</p>	<p>I2.d.1 Proportion of parents with positive attitudes to girls' education, by sex of participating parent or community member and, where relevant, sex of child/children</p>

Matrix 7: National intermediate targets and indicators for education	
<i>(direct data could be obtained from an attitudinal survey; school enrolment rates would also be an indirect indicator of parental attitudes)</i>	
12.e Increase labour force participation rates for girls leaving school by 2 percent* each year so that girls' education leads to practical benefits for the girls and their families	12.e.1 Labour force participation rates for women, by education level, location and other relevant socio-economic categories 12.e.2 Ratio of female to male labour force participation, by location and other relevant socio-economic categories 12.e.3 Number of new jobs created for women 12.e.4 Ratio of new jobs held by women to those held by men, by location and other relevant socio-economic categories
12.f Reduce the amount of domestic work carried out by girls and boys by at least 15 minutes* per week each year	12.f.1 Number of hours spent on domestic chores and care work, by sex and other relevant socio-economic categories
12.g Reduce the sex difference in the amount of domestic work carried out by girls and boys by 2 points* per time use survey	12.g.1 Ratio of hours spent on domestic chores and care work by girls over that carried out by boys 12.g.2 Ratio of girls to boys carrying out domestic chores and care work
12.h Review, by 2015, all curricula and materials, teacher training and methods at all levels of education, remove gender stereotypes and adapt to the different interests and learning styles of girls and boys	12.h.1 Number of gender evaluations of curricula, materials, teacher training curricula and institutions and number of changes resulting from these 12.h.2 Proportion of the curricula which has been reviewed from a gender-responsive rights-based perspective 12.h.2 Proportion of schools and educational institutions with specific gender equality policies, programmes and procedures
12.i Ensure that, by 2015, all curricula and materials, teacher training and methods at all levels of education have been reviewed and modified to promote a human rights perspective, encourage active learning, respect children's rights, and promote respect, protection and fulfilment of the human rights of women and girls	12.i.1 Number of rights-based evaluations of curricula, materials, teacher training curricula and institutions and number of changes resulting from these 12.i.2 Number of schools and educational institutions with explicit harassment, bullying and sexual harassment policies and procedures to deal with cases 12.i.3 Number of incidents of harassment, bullying and sexual harassment reported in schools, by sex of victim and sex of perpetrator



**Matrix 7: National intermediate targets and indicators for education**

<p>12.j Provide sufficient budget to support the chosen education strategies and ensure that policies and programmes to benefit girls receive an equal share</p>	<p>12.j.1 Proportion of the national budget devoted to education, by level of education</p> <p>12.j.2 Proportion of the national budget actually spent on education, by level of education</p> <p>12.j.3 Proportion of GDP allocated to education</p> <p>12.j.4 Proportion of the national education budget allocated to gender-responsive rights-based initiatives, by level of education</p> <p>12.j.5 Proportion of the national education budget actually spent on gender-responsive rights-based initiatives, by level of education</p>
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*\* Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.*

*# All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.*

# GOAL 3

## PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

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## Goal 3: Promote Gender Equality and Empower Women

If the MDGs followed the official United Nations definition of gender mainstreaming, all the goals would incorporate a gender equality and women's empowerment perspective. All targets and indicators would be gender-responsive and, where possible, sex-disaggregated, enabling the 'concerns and experiences of women', as well as men, to be an integral part of the entire MDG process.

### Box 3. United Nations definition of gender mainstreaming

In July 1997, the United Nations Economic and Social Council defined the concept of mainstreaming a gender perspective as follows:

'Mainstreaming a gender perspective is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in any area and at all levels. It is a strategy for making the concerns and experiences of women as well as of men an integral part of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres, so that women and men benefit equally, and inequality is not perpetuated. The ultimate goal of mainstreaming is to achieve gender equality.'

Instead, the first draft of the MDG document clearly views the gender goal primarily as an instrument for achieving the other MDGs.<sup>88</sup> The goal that was to become Goal 3 was described in paragraph 121 as 'to promote gender equality and the empowerment of women as effective ways to combat poverty, hunger and disease and to stimulate development that is truly sustainable'.

Women's rights were not on the agenda in paragraph 121, although they were referred to in the education goal and in a separate goal 'to combat all forms of violence against women and to implement the Convention on the Elimination of All Forms of Discrimination against Women' (paragraphs 209-13). The latter goal did not survive the translation to the MDGs, leaving Goal 3 as the only explicitly gender goal, focused on improvements in women's lives and women's empowerment as an instrument to achieve the other goals, rather than to benefit women and girls and realize their human rights.

The only target under Goal 3 focuses on eliminating gender disparity in education. The three indicators are broader, covering participation in education, gender disparity in wage employment, and participation in national parliaments. A fourth indicator—the ratio of literate women to men 15-24 years old—was moved in the 2007 revision of the MDGs to become (with slight modification) indicator 2.3 under Goal 2.

Matrix 8: Global target and indicators for gender equality and empowerment			
Target		Indicators	
<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>			
3.A	Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	3.1	Ratios of girls to boys in primary, secondary and tertiary education
		3.2	Share of women in wage employment in the non-agricultural sector
		3.3	Proportion of seats held by women in national parliament

## A. Issues for a gender-responsive rights-based analysis

The following analysis draws heavily on the work of the UN Millennium Task Force on Education and Gender Equality. This Task Force was set up under the UN Millennium Project, an independent advisory body established by the Secretary-General of the United Nations, to develop a concrete action plan for the world to achieve the Millennium Development Goals.

### 1. Gender equality covers three domains

Gender equality and empowerment both encompass many dimensions that are not covered under Goal 3 or any of the other MDGs. The Task Force on Education and Gender Equality used an operational framework for gender equality that covers three inter-related aspects or domains of gender equality:

- **capabilities:** basic abilities as measured by education, health and nutrition. Capabilities are the means through which other forms of well-being can be accessed;
- **access to resources and opportunities:** equality of opportunity to use their capabilities through access to economic assets such as land or housing, resources such as income and employment, as well as political opportunity, such as representation in parliaments and other political bodies;
- **security:** reduced vulnerability to violence and conflict, which cause physical and psychological harm and reduce the ability of individuals, households and communities to fulfil their potential. Gender-based violence against women and girls is often intended to keep them 'in their place' through fear.<sup>89</sup>

The global MDGs focus on the first two of these domains. However, change in all three is critical to achieve gender equality.

### 2. Gender equality is not sufficient for empowerment

The Taskforce noted that empowerment is related to but different from gender equality and requires both gender equality and the freedom for women and girls to make their own choices about their lives. Empowerment is the ability of women to control their own destiny. To be empowered, women must not only have equal capabilities and access to resources and opportunities. They must also have the capacity or agency to make decisions and strategic choices. In order to exercise free choice, they must have security and live without fear of violence or coercion.

### 3. The priorities for achieving Goal 3 are interdependent with the other goals

The Task Force identified seven inter-dependent strategic priorities for achieving gender equality and women's empowerment. Goals, targets and indicators related to many of these priorities are found under the other goals of the global MDG framework. Others are not addressed at the global level, but are suggested in the relevant sections of this document.

- strengthen opportunities for post-primary education for girls, in addition to achieving universal primary schooling for girls (*Goal 2*);
- guarantee sexual and reproductive health and rights for women and girls (*Goals 3, 5 and 6*);
- invest in infrastructure to reduce the time spent by women and girls' on unpaid household and care work (*Goals 1 and 2*);
- guarantee property and inheritance rights for women and girls (*Goals 1, 2 and 7*);
- eliminate gender inequality in employment by reducing women's dependence on informal employment, closing gender gaps in earnings and reducing occupational segregation, which is the concentration of women and men in different occupations and industries, particularly the concentration of women in poorly paid occupations and industries (*Goal 1*);
- increase women's share of seats in national parliaments and local government bodies (*Goal 3*);
- eliminate violence against girls and women (*Goal 3*).

### 4. Three target groups of women should be prioritized

The Task Force emphasized that three target groups of women require special attention:

- poor women in the poorest countries and in countries where poverty remains high despite significant increases in national income;
- adolescents, who are at a stage in life when strategic interventions can dramatically improve outcomes for the rest of their lives. Due to the large numbers of adolescents in poor countries, such improvements can significantly improve national outcomes;
- women and girls in conflict and post-conflict situations, who are usually the majority of displaced people in refugee camps and conflict zones and whose rights and lives are threatened daily. Post-conflict situations may offer a greater opportunity to reduce gender barriers and create a more gender-equitable society because the traditional social norms and structures have been disrupted by the conflict. This is particularly the case if reconstruction promotes the full and equal participation of women.<sup>90</sup>

## B. National long-term targets and indicators

Matrix 9 below suggests a range of long-term targets and indicators for gender equality and empowerment, based on the preceding gender-responsive rights-based analysis of Goal 3. They should be adapted and added to so that they are relevant and useful for the individual country.

The suggested targets and indicators which are marked + are based on the report of the UN Millennium Task Force on Education and Gender Equality 2005.<sup>91</sup> As noted, many of the seven strategic priorities identified by the Task Force are related to other MDG goals. The suggestions below should therefore be read in conjunction with the relevant targets and indicators under Goals 1, 2, 5, 6 and 7.

Women's groups and civil society should ensure that CEDAW and the Convention on the Rights of the Child, as well as other human rights, country reports, the Beijing Platform and national action plans on women and children are taken into consideration in the development of specific targets and indicators for implementation of programmes to achieve Goal 3. These documents can also provide input to the preparation of country and subnational MDG reports.

<b>Matrix 9: National long-term targets and indicators for gender equality and empowerment</b>	
<b>Targets</b>	<b>Indicators (see note # below)</b>
L3.A Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015 ( <i>unchanged from global target 3.A</i> )	L3.A.1 Ratio of female to male gross enrolment rates in primary, secondary, and tertiary education <sup>+</sup>
	L3.A.2 Ratio of female to male gross enrolment rates in technical and vocational education, by field of study
	L3.A.3 Ratio of female to male enrolment rates in universities, by faculty and level—undergraduate, masters and doctorate
	L3.A.4 Ratio of female to male completion rates in primary, secondary and tertiary education <sup>+</sup>
	L3.A.5 Ratio of female to male completion rates in technical and vocational education, by field of study
	L3.A.6 Ratio of female to male completion rates in universities, by faculty and level—undergraduate, masters and doctorate
L3.B Guarantee sexual and reproductive rights for women and girls <sup>+</sup>	L3.B.1 Proportion of demand for contraceptives that is satisfied <sup>+</sup>
	L3.B.2 Adolescent fertility rate <sup>+</sup>
L3.C Invest in infrastructure to reduce women's and girls' time burden <sup>+</sup>	L3.C.1 Mean number of hours per day/year spent by women and men on fetching water or collecting fuel <sup>+</sup>
	L3.C.2 Mean number of hours of unpaid household and domestic (non-labour force) work carried out by women and men per week <sup>+</sup>
	L3.C.3 Mean number of hours of rest and recreation of women and men per week <i>Note: These indicators require time use survey data.</i>
L3.D Guarantee women's and girls' property and inheritance rights <sup>+</sup>	L3.D.1 Land ownership, by female, male and jointly held <sup>+</sup>
	L3.D.2 Housing title, disaggregated by female, male or jointly held <sup>+</sup>

### Matrix 9: National long-term targets and indicators for gender equality and empowerment

L3.E Eliminate violence against girls and women <sup>+</sup>	<p>L3.E.1 Prevalence of domestic violence against women and girls<sup>+</sup></p> <p>L3.E.2 Proportion of reported cases of domestic violence against women and girls that are prosecuted</p> <p>L3.E.3 Proportion of domestic violence cases prosecuted that result in a conviction</p> <p>L3.E.4 Average length of sentence for convicted perpetrators of domestic violence against women and girls</p>
L3.F Eliminate violence against girls and women in situations of crisis or conflict	<p>L3.F.1 Prevalence of violence, including gender-based violence, against women and girls in situations of crisis or conflict</p> <p>L3.F.2 Proportion of cases of violence, including gender-based violence, against women and girls in situations of crisis or conflict that are prosecuted</p> <p>L3.F.3 Proportion of cases of violence, including gender-based violence, against women and girls in situations of crisis or conflict that result in conviction</p> <p>L3.F.4 Average length of sentence for convicted perpetrators of violence, including gender-based violence, against women and girls in situations of crisis or conflict</p> <p><i>Note: for crisis and conflict situations, such data should be collected and monitored by the agencies responsible for management of refugee and resettlement camps. In some cases prosecutions should be under international human rights law rather than national laws.</i></p>
<p><i>* Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress</i></p> <p><i># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</i></p> <p><i>+ Based on the report of the UN Millennium Task Force on Education and Gender Equality 2005.</i></p>	



## C. Gender-responsive rights-based strategies

### 1. Ensure that educational outcomes lead to employment or increased incomes

To improve gender equality and, especially, empowerment, increased educational attainment for girls and women must lead to increased cash incomes. As discussed under Goal 2, empirical evidence shows that parental and community attitudes towards female education begin to change where increased education for girls leads directly to paid employment, because they can see a direct benefit.

Even if women and girls do not immediately benefit because their earnings are controlled and used by their families, the increased income that they earn does give them some leverage and a greater say in family affairs, and this eventually contributes to empowerment. It may also lead to delayed age at first marriage, which also reduces the negative health effects of early marriage and childbearing and can increase women's empowerment within marriage.

Where women are able to retain some control over their earnings, the result is both increased gender equality and empowerment. However, it should be noted that married women continue to prioritize spending their incomes on their families rather than themselves.

Gender-responsive rights-based strategies to address this issue are suggested under Goal 2.

### 2. Improve sexual and reproductive rights for women

Sexual and reproductive rights are essential to women's ability to develop their capabilities, maintain their health, take advantage of educational and economic opportunities, and make strategic choices about their lives. Improving sexual and reproductive rights for women requires improvements in the health system. It also involves working with men and communities to promote their recognition of and respect for women's sexual and reproductive rights, to encourage men to take responsibility for their own sexual health and fertility and to help them exercise those responsibilities.

In addition to strategies suggested under Goals 5 and 6, gender-responsive rights-based strategies to address this issue include:

- provide quality family planning services through the national health system, covering both female- and male-based methods of contraception, emergency obstetric care, safe abortion—where that is legal—and post-abortion care;
- provide services to prevent and treat sexually transmitted diseases, including HIV/AIDS, through the national health system;
- implement programmes to reduce malnutrition and anaemia, which contribute to reproductive health problems, particularly among poor women, adolescent girls and in rural areas subject to food shortages;
- implement programmes of sexuality education, both within and outside the health system;
- support integrated sexuality education and services for young people, in line with the Convention on the Rights of the Child;
- support integrated sexuality education for adults, in particular men, through non-formal education and community-based efforts;
- promote public information campaigns by government and civil society on women's reproductive rights and on national obligations under CEDAW, particularly Article 12, and

under the Programme of Action of the International Conference on Population and Development.

### 3. Promote gender equality and men's involvement in unpaid domestic and care work

Investing in infrastructure to reduce women and girls' time burden will assist them to participate in educational, productive and civic activities, but will not lead to gender equality unless their share of unpaid domestic and care work is reduced and that of men increased. This is happening slowly in more developed countries, but even in the most advanced countries, women, including working women, do most of the unpaid domestic and care work in households. This inevitably reduces their access to education, paid employment and participation in public life and therefore disempowers women compared to men.

#### **Women are paid less than men and are more likely to work part-time**

Women are still at a significant earnings disadvantage in the workplace in the UK and across Europe. In the UK, 82 percent of part-time workers are women, while in Europe the figure is 81 percent. In 2003, women working part-time earned just 60 percent of the average hourly earnings of men who worked full-time.<sup>92</sup> Some women work part-time by choice and others because they are unable to find full-time work that is compatible with their family responsibilities. In some countries, men are also increasingly choosing to work part-time.

Improved infrastructure assists women to carry out their current work load in a shorter period of time, and thus to build and use their capabilities. By removing drudgery and introducing the potential for using technology and labour-saving equipment, electrification, improved transport and other aspects of infrastructural development may also encourage men to share in unpaid work.

#### **Policies can change gender stereotypes**

In Sweden, the majority of a generous provision of parental leave, paid by the State, was taken only by mothers, although it was available to either parent. When the government reserved part for fathers only, the proportion of fathers taking both the reserved share and more of the available leave increased sharply. The new policy changed perceptions about the social acceptability of men taking parental leave.

Unpaid household and care work is essential for the welfare of society and the sustainability of the economy. However, as long as decisions between women and men about who is responsible for the unpaid aspects of household activity and family life are determined by cultural expectations and gender stereotypes rather than the best interests of the individuals involved, Goal 3 cannot be achieved. Policy and institutional changes, such as flexible working arrangements for women and men, paid family and care leave for women and men, as well as changed attitudes toward men taking on domestic roles, will be needed to enable individual women and men to allocate unpaid household work and family care in ways that best suit their particular needs and situations.

Even when individual women and men are free to share unpaid work as they choose, women's reproductive role means that women will probably still do more family care than men, take more time out of the paid workforce and be more likely to choose part-time work in order

to balance work and family. They will therefore have, on average, shorter working lives and lower retirement incomes, although they will also, on average, live longer. Policy makers,

Particularly those involved in the design and implementation of welfare policy, social support systems, pension and superannuation systems, need to take this difference into account to ensure that women are not systematically disadvantaged as a result, particularly in old age.

In addition to strategies proposed by the Task Force on Education and Gender Equality, and others suggested under Goal 1 in relation to women's time poverty, gender-responsive rights-based strategies to address this issue include:

#### **Family-friendly policies help men to share in childcare**

In the Australian public service, both women and men can work flexible hours as long as they average the standard total number of hours. Thus, a couple can arrange their working hours so that one parent is always available to supervise their children before school, and the other can cover after school. Purchased leave arrangements which allow up to four extra weeks leave a year, spreading the lower salary across the full year, make it easier for parents to care for their children during school holidays. Women returning from maternity leave also have the right to work part-time for the first year, and all employees can negotiate part-time arrangements if their manager approves.

- implement public campaigns to change community attitudes among both women and men towards gender role stereotypes and, in particular, promote and value men's participation in unpaid household and care work;
- encourage workplaces and employers to provide paid parental leave to both fathers and mothers on the birth of a child;
- where uptake by fathers is low, consider providing part of the parental leave package only to men, to encourage them to take advantage of this facility;
- encourage workplaces and employers to treat women and men employees equally in providing special leave for those needing to care for sick children or disabled or elderly family members;
- encourage workplaces and employers to facilitate job sharing and part-time work for both women and men to enable them to more equally share in unpaid family and household responsibilities; however, note that part-time work can disadvantage women if they are in industries and sectors that pay significantly less than standard rates;
- encourage workplaces and employers to allow flexible working arrangements for women and men to enable both to participate actively in family life and to improve the balance between work and family, particularly for men.

#### 4. Increase women's ownership of property and their rights to equal inheritance

Ensuring women's rights to land not only guarantees a roof over their head, but also provides livelihoods and a safety net for women and their families. Joint titling prevents unilateral actions by one partner and helps to protect women against loss of property as a result of divorce or death of the spouse.

However, women in developing countries are much less likely than men to own land, housing or other productive assets such as livestock. Unequal ownership of and access to property arise from customary laws, registration of land and housing in the name of the household head, who is usually a male, and inheritance practices that typically favour males over females.

Where land or other property is communally owned, women are also less likely than men to have access to its use or to control how it is used. In particular, women do not have the right to rent, mortgage, bequeath or sell communal property even when they have the right to use it. The right to use is also not secure and can be withdrawn by men, especially if the value of the property changes due to pro-market policies or the introduction of cash crops in preference to subsistence crops.

In socialist systems such as China and Viet Nam, both females and males above a certain age were issued with equal rights to use state-owned land, but these cannot be transferred. Many women have found that their access to the land is lost on marriage because, by custom, most marry out of their natal village. Others lose access when they migrate to towns in search of work. Since the land cannot be sold and they often live far away, their right to the land is effectively lost. Married women's lack of access to land in the village into which

##### **Lack of data on women's property rights**

Few countries have accurate data on women's property rights. However, studies in several regions suggest that gender disparities in land ownership are large. A study of five Latin American countries found that women were one-third or less of land owners. In Cameroon, where women do more than 75 percent of agricultural work, women were estimated to hold less than 10 percent of land certificates.<sup>93</sup>

##### **Lao women lose traditional land rights**

In Lao society, daughters make up the majority of those who inherit land from parents. However, as a result of gender-blind land titling programmes, these matrilineal inheritance patterns have been changing. According to the Lao delegation presenting their Country Report to CEDAW in 2005, recent statistics showed that, while most of the land originally belonged to women, the land title documents were mostly registered in the husband's name alone.

The Lao delegation explained that in the past, land had been registered in the wife's name, but land titling had resulted in a change to the husband's name, even though according to Lao law, common marriage assets should be registered under the names of both husband and wife. The land titling commission acknowledged the shortcomings in the system and was taking steps to restore land rights to women. To ensure full implementation of the law, Lao women were also being educated on the land titling process.<sup>94</sup>

they marry also tends to reduce their participation in decision-making in the family and community.

Patriarchal societies, which form the majority, bequeath most property to sons rather than daughters. Traditionally, where a bride price is paid, this is regarded as the girls' share of inheritance. However, this usually does not include land or other property. Under Islamic law, female heirs are entitled to only half the share of male heirs. Such practices reinforce and reproduce women's lack of property rights through the generations.

**Women in Viet Nam have equal rights to property but many are unaware**

In Viet Nam, the Law on Marriage and Family considers land acquired after marriage to be a common asset. Under the revised Land Law 2003, land certificates must bear the names of both husband and wife if the land belongs to both of them. If the woman's name is stated on the certificate, the law protects her and she maintains rights to the land in case of separation, divorce or widowhood. However, many women are unaware of their rights.<sup>95</sup>

Donors assisting governments to implement formal land titling schemes therefore have a special responsibility to ensure that their projects are gender-sensitive and to monitor the issuing of land titles by female, male and joint title holder.

In view of the vulnerability of many rural women in such circumstances, programmes addressing the needs of female farmers should also consider supporting property rights for women. For example, programmes that provide improved access to credit, seeds, fertilizers and new technologies could also promote joint titling or titling in women's names.

Group strategies can also assist women to obtain land and property rights through cooperative ventures to invest in or manage land and production. For poor women, these may include obtaining group rights over land or property distributed by government or otherwise acquired by them.<sup>97</sup> Women's groups can also use human rights law, particularly CEDAW and ICESCR, to claim their rights to housing and property through the courts.

**Land rights are vital for women in post-tsunami Aceh**

Land conflicts are increasing in Aceh since the 2004 tsunami and a significant number of women have been denied the right to own and inherit land since the tsunami. Most land is recorded in the name of men, with only about 5 percent of plots registered in the names of husband and wife. Aceh will not succeed in rebuilding if women are denied the right to own land and benefit from land revenues. A joint land titling policy issued in 2006 by the reconstruction agency was an important milestone for Aceh and Indonesia as a whole.<sup>96</sup>

Gender-responsive rights-based strategies to address this issue include:

- remove legislative obstacles to equal inheritance or women's ownership of property;
- ensure that programmes to issue formal land titles are sensitive to gender issues and to existing patterns of land ownership, particularly where these are matrilineal;
- legislate for joint titling for property acquired during marriage and ensure that awareness of the law is raised among women, men, communities and the courts;
- support awareness raising programmes to promote equal inheritance rights for women and girls;

- repeal inheritance laws discriminating against women;
- explore innovative approaches to joint and collective ownership and access to land and property, and identify and implement those most appropriate for specific circumstances and groups of women, particularly poor women and those from minority groups;
- promote government programmes to assist poor women to hold group rights over land distributed by government or otherwise acquired by them;
- complement women's land rights with improved access to credit, seeds, fertilizers and new technologies.

## 5. Reduce gender inequality in paid employment and business

Paid employment or access to alternative sources of cash income, particularly business, are critical to women's empowerment. A secure income provides security and independence and enhances a woman's capacity to make free and strategic choices about her life, as well as that of her children. It also contributes to more intangible aspects of empowerment such as enhanced self-confidence and self-esteem, and increases a woman's bargaining power in her family and household, as well as increasing the respect she commands within the community.

Early marriage, early childbearing, and domestic and care responsibilities are significant barriers to women's and girls' employment. Providing ways for women to manage their care responsibilities while working is critical to increasing the participation rate of women in the formal and informal sectors.

In the formal sector, both domestic and care responsibilities and low levels of education are barriers to women's employment, particularly in the absence of paid maternity leave. However, paid maternity leave must be implemented in ways that do not significantly increase the costs to employers of employing women compared to men.

Women are also disadvantaged and face discrimination in the formal sector through lower earnings and fewer benefits, particularly allowances and pensions. In many countries, family allowances are paid only to male heads of household and denied to women even when they are household heads. The compulsory retirement age is also often lower for women than men, even though women tend to have shorter working lives due to their childbearing and rearing responsibilities. As a result, working women receive lower pensions although their need for retirement income is greater because, on average, they live longer than men. The majority of women who do have pensions gain them only through their husbands, because the women are either not in the workforce or are in casual and/or part-time work.

Many women are forced to work in the informal sector where earnings are low and working conditions poor. Women migrant workers are particularly likely to work in the informal and service sectors, where working conditions are both poor and poorly monitored by the relevant authorities. They are especially vulnerable if they are illegal or undocumented workers, as there are few mechanisms to protect their rights.

### Sharing the costs of maternity leave

A recent Australian proposal suggested imposing a small tax on all workers and pooling this to pay maternity leave to women at their usual wage for 17 weeks. All employers would also pay a small levy on their wages bill into a pool to cover the costs of temporarily replacing woman workers on maternity leave. In this way, all workers and employers would share the cost of maternity leave, and the direct costs of maternity leave would not give employers a reason for refusing to hire women.



In addition to those suggested under Goal 1, gender-responsive rights-based strategies to address this issue include:

- support programmes to improve working conditions for women migrant workers, particularly those in vulnerable occupations such as domestic service;
- provide subsidies or use tax concessions and other incentives to encourage workplaces and employers to establish work-based childcare or otherwise assist their employees with their care responsibilities;
- help communities to establish cooperative or collective childcare, especially for poor women and those in the informal sector;
- ensure that women's greater need for retirement income is considered in the design of pension schemes and that gender equality is applied in terms of retirement age and other pension conditions;
- implement public employment guarantee schemes for poor women, especially in rural areas;
- provide a basic public pension for elderly women with no other means of support;
- develop social protection schemes for workers in the informal sector to cover gaps in the public provision of health insurance, maternity allowances and disability allowances and support;
- develop collective approaches to provide social protection and welfare benefits to women and girls working in the informal sector;
- monitor and improve working conditions in the informal sector, particularly for women and girls;
- develop gender-responsive rights-based approaches to providing paid maternity leave for working women;
- support women's groups to organize women and girls working in the informal sector to negotiate better working conditions and provide services to members;
- provide micro-credit and micro-enterprise programmes that specifically target women and girls in the informal sector;
- invest in basic infrastructure, including access to safe water, electricity and sanitation, to support women and girls working in the informal sector.

#### **Empowering women migrant workers in Asia**

The UNIFEM Regional Programme on Empowering Women Migrant Workers in Asia works in close collaboration with the Ministry of Labour in Jordan, which is amending the labour law to cover domestic workers. This recognizes domestic workers as productive labour and as workers with legally recognized and enforceable rights.

The Ministry has also endorsed a Special Unified Working Contract for Non-Jordanian Domestic Workers with substantive rights provisions. Under the contract, the employer is responsible for the costs of the workers' travel, work and residence permits, timely payment of wages and providing adequate shelter, clothing, health care, and accident insurance. The worker has the right to terminate the contract without notice and is entitled to a weekly holiday and a bonus at the end of the contract equivalent to 15 days wages. Workers are entitled to treatment in accordance with international human rights standards.

The Government of Hong Kong also issues a legally valid domestic worker's employment contract with important rights provisions, including minimum wages paid direct to the worker in timely fashion, a weekly holiday and health insurance.<sup>98</sup>



## 6. Increase women's participation in decision-making in the public sphere at all levels

Women's free, active and informed participation in decision-making in all spheres of life is an essential component of empowerment because it enables women to help determine the kind of world in which they want to live and the way in which they wish to live their lives. Women's equality of opportunity to participate in politics is a human right, as well as a basic requirement for genuine democracy. Women have different priorities and concerns from men, and are more likely to be active in supporting laws benefiting women, children and families.

However, getting women—or any other group—elected to parliament in significant numbers usually involves a series of processes over a period of time. In newly established countries such as Timor-Leste, or in countries rebuilding democracies, women's participation in the development of a national constitution is a critical step. Civic education for women, and gender-responsive education for women and men is important in ensuring that both are willing to vote for women candidates.

Training for potential women candidates should be based on a realistic assessment of the political system rather than on an idealised model of modern western democracies. Advocacy with key community opinion leaders and traditional leaders, both women and men, may be much more important than a modern electoral campaign. Focusing only on women voters may be ineffective if households, and women, traditionally deliver their votes as 'directed' by village leaders

Advocacy on behalf of women's active involvement in political parties is another important step. In many

### UN training for potential candidates in Timor-Leste

UNIFEM and the UN Gender Affairs Unit conducted six workshops to train 250 women interested in contesting the first democratic election in Timor-Leste in August 2001. Twenty-six of the participants registered as candidates, making up 10 percent of all women candidates, and one of these was eventually elected. A number of the women who trained decided not to run for office but to form a Women's Political Caucus to support all women candidates during the election. As a result of the activities of the caucus and the national women's network REDE, 27 percent of seats in the election were won by women.

### 932 women elected to Cambodia's Commune Councils

In 2002, 11,853 women candidates—16 percent of all candidates—stood for Cambodia's first democratically contested commune elections in three decades.

UNIFEM and other donors supported seven women's NGOs to recruit five master trainers who ran an initial Training of Trainers course for 80 trainers from 24 provinces and four trainers from each of the three major parties. At the end of the course, the trainees were tested and 59 passed. The new graduate trainers were then given hands-on training in two pilot training courses for candidates in two provinces.

On return to their home provinces, the 59 trainers ran between six and 26 workshops training 5,527 women, of whom 60 percent registered as candidates. The NGOs had directly trained 61 percent of all candidates, well exceeding their target of 30 percent.

As a result, women were elected in all 24 provinces covered by the training, the majority as council members. Almost 17 percent of the elected women were elected to one of the top three positions in the Commune Councils.

countries, the majority of candidates elected are party candidates. It is much more difficult for independent candidates to get elected and, if elected, to have any influence in the parliament. Some of the more successful quota systems to increase women's participation in parliament have been implemented through political parties rather than directly in the parliament.

The local level of government is especially important for women because it provides many of the basic services such as water, sanitation and the delivery of health and education, and can also be a stepping stone to higher levels of politics. Entry to local government is often easier for women because political parties tend to be less active and it is easier for women to organize and to reach potential voters. Quota systems for women at the local level have been effective in a number of countries and are often more easily instituted because they can be legislated by the national government.

The Beijing Platform for Action set a minimum target for women's participation in national parliaments and local government of 30 percent. Although ideally women's share should be around half, experience suggests that 30 percent is the critical minimum required for women's collective voices to be heard and for individual women to feel free to express their personal opinions.

Once in parliament, elected women need support to fulfil their responsibilities. Like all new representatives, they need to be trained in parliamentary procedures and strategies and to be supported by their constituencies. In addition, women who are elected will not necessarily be representative of the majority of women, and may not understand their needs. Women's groups can help to ensure that they effectively advocate for gender-responsive rights-based approaches within parliament by giving them ongoing encouragement, keeping in regular contact, and supporting them to understand the gender aspects of all issues which impact on women, including those such as macroeconomic policy which are not traditionally understood as relevant to women or gender.

The decisions affecting the lives of women are not just taken in parliaments and local government—decisions by the civil service, international financial institutions and even private companies also have significant impact. While the global participation target focuses on the public sphere, which is more easily held accountable and for which data are usually available, it is important not to overlook these other institutions. It is likely that in many, women's participation at the senior levels is low; women who are at senior levels may not be representative or and understand the needs of most women; and both male and female decision makers are generally unaware of the importance of gender-responsive rights-based approaches. Similar strategies to those for parliamentarians could target both women and men in these institutions.

#### **A quota helps women enter local government**

In Timor-Leste, a 2004 law stipulates that women and men can be elected as *Aldeia* or Hamlet Chiefs and members of the Hamlet Councils. Councils are to comprise the *Chefe de Suco*; all the *Chefe de Aldeias* within the *suco*; two women; two youth, one of each sex; and an elder.

A nationwide UNIFEM training campaign on transformative leadership supported women as potential candidates. More than half of the women trained stood for election to the Councils, and 55 percent were elected. Between 10 and 67 percent of trained women were elected in the districts. Female voters were 49 percent of the total, outnumbering male voters in three districts. Only 76 women stood for 442 *Suco* Chief positions and seven were elected. In accordance with the 2004 law, at least 1,342 women were elected across all districts. Two women were also elected as customary leaders, a post traditionally held by men.<sup>99</sup>

Gender-responsive rights-based strategies to address this issue include:

- legislate quotas of at least 30 percent for women at the local level;
- lobby political parties to apply a quota of at least 30 percent for women at all levels of government;
- support gender-responsive rights-based civic education for women and men that recognises the importance of women's vote, and encourages women and men to vote for female candidates;
- support training for potential female political candidates at all levels of government, based on careful study of the particular political system of the country and how male candidates go about getting elected;
- at all levels of government, support training for newly elected women and men

#### **UN support for women in politics in Thailand**

A Thai NGO and UNDP issued a report on *Women's Right to a Political Voice in Thailand* to highlight women's status in government, analyse barriers and suggest ways of overcoming them. UNIFEM then supported capacity-building for women to run in elections, provided technical support on gender-responsive governance to elected women and assisted them to establish a Network of Women for Local Government.

As a result of lobbying by women's groups, the 2007 Constitution includes more gender equality provisions. Political parties must consider an appropriate proportion of women in the party list; gender equality is set as a criteria for selection of senators; and the NGO members of the Parliament's Irregular Standing Committee to consider bills related to women, children and disadvantaged groups must have equal numbers of women and men.<sup>100</sup>

- focusing on both a gender-responsive rights-based perspective and the technical aspects of their roles as parliamentarians;
- provide training for women in parliament and local government on the budget and encourage them to be active on budget committees;
- support and encourage elected female representatives throughout their term in office, not just at the time of the election;
- monitor voting patterns of male and female representatives in the parliament on issues that are particularly important to women, note that these may not just be 'women's' or 'gender' issues but include major issues of national importance, especially economic policy;
- establish mechanisms such as regular meetings between female representatives in parliament and women's groups, including those representing poor and rural women, to ensure that female members of parliament are able to understand and adequately represent the interests and concerns of women in the community;
- support female representatives in parliament to advocate for gender budgeting initiatives to ensure that commitments to women and gender equality are matched by appropriate budget allocations.

## 7. Eliminate violence against women and girls

Violence against women and girls is a gross violation of women's rights. Apart from its serious health and development effects, and its contribution to homelessness, violence and the fear of violence is a major obstacle to women's empowerment. It prevents women from exercising their right to freedom of choice in how they live their lives.

### **UNIFEM supports legislation against domestic violence**

UNIFEM supported advocacy by women's groups and gender advocates for the passage of anti domestic violence laws in Cambodia, Indonesia, Lao PDR, and Viet Nam, as well as in Thailand.

A major obstacle to the development of policies and programmes to address gender-based violence is the lack of consistent and comparable data, both over time and between countries. However, existing data collected by women's organizations working on the issue and data held by the police and courts can be used for advocacy.

### **CEDAW Concluding Observations lead to legislative change on women's rights in Thailand**

In Thailand, advocacy by the national women's machinery and women activists in following up on the CEDAW Concluding Observations resulted in the passage of the new Act on the Protection of Victims of Domestic Violence. The Act provides for systematic protection and rehabilitation of victims, requires members of public to report and obliges law enforcement officers to respond immediately to acts of violence against women. Amendments to the Criminal Code replaced a discriminatory provision on marital rape. An amendment to the Family Law Act allows equal grounds to women and men for divorce and betrothal, both as recommended by the CEDAW Committee.<sup>101</sup>

Gender-responsive rights-based strategies to address this issue include:

- implement programmes in national statistics offices to collect regular data on the prevalence of violence against women and girls, either through special surveys or as modules in existing surveys;
- collect, collate and disseminate existing data on violence against women from NGOs, police and court records;
- ensure that available data on violence against women are presented in CEDAW country reports; if necessary, assist women's groups to develop alternative reports to present the data;
- increase the number of cases reported and prosecuted in the courts;
- establish special police units staffed by women officers specifically trained to handle cases of violence against women;
- work with men and men's groups to raise awareness that violence against women is a crime and an abuse of women's human rights;
- in hospitals and health clinics, develop protocols to identify cases of violence against women and to deal appropriately and sensitively with cases of rape and domestic violence;
- improve laws and legal mechanisms such as restraining and protection orders to protect women from abusive partners, and make marital rape a crime;

- implement school-based programmes for boys and girls to promote respect for women and girls and to raise awareness that violence against women, including psychological violence and sexual harassment, are crimes;
- provide safe houses for women and girls affected by violence against women;
- provide training for all police and court officials, including judges, on violence against women and girls to ensure that violence against women is treated as a serious crime and an abuse of human rights;
- monitor police and courts on cases of violence against women and ensure public dissemination of the results in the media to raise awareness of its prevalence and the way in which the legal and judicial system are dealing with the issue;
- improve public infrastructure, particularly transportation systems, the location of bus stops and access points for rail stations, etc, as well as lighting in public places, in order to improve women's safety;
- where women must work late at night, provide special arrangements for their security and safety both at work and on their journey home.

## **8. Eliminate violence, especially gender-based violence, against women in crisis and conflict**

Historically, the focus of efforts to reduce violence against women has tended to be on domestic violence. However, violence against women and girls in situations of conflict is now recognized as a 'weapon of war' and a basic abuse of human rights.

Rape and sexual violence against women may be used as a means of attacking their communities. To reduce the risks of them being rejected and socially excluded, counselling and support services for women affected by such violence also need to target families and communities.

Women in conflict and crisis situations are also particularly vulnerable to other forms of violence such as robbery, which further increases the precariousness of their situation.

Specific strategies are needed to address all forms of violence, including gender-based violence, against women and girls in situations of crisis and conflict. These include:

- implement special measures in conflict and crisis situations to protect women and girls from violence, including gender-based violence, such as providing protected areas, sensitizing police and security forces to gender-based violence, providing regular patrols by police and/or security forces and including women in police and security forces;
- ensure that data are collected and used to identify women and girls in crisis and conflict situations who are at high risk of violence—including orphans, widows and disabled women and girls—and implement special measures to protect them;
- undertake gender audits of programmes to distribute food, water and other supplies to assess and minimize the risks of violence to women and girls accessing the programmes, for example by providing safe locations and access routes, operating during daylight and, where possible, with sufficient time for women and girls to reach safety before dark, providing lighting where they need to move after dark (for example, to access toilet facilities), and providing physical protection by police and/or security forces;
- consult women and girls, particularly those in groups at high risk of violence, including gender-based violence, on their protection needs;
- provide appropriate counselling and support services for women and girls affected by violence, including gender-based violence, as well as for their families and communities.

## 9. Implement gender-responsive budgeting

Increased resources, both human and financial, are needed to achieve the MDGs. These resources must be directed toward gender-responsive rights-based strategies. Gender-responsive budgeting is a tool for achieving both increased resources and supporting the implementation of gender-responsive rights-based strategies.

Gender-responsive budgeting should:

- be incorporated within the existing national budgeting system and the existing system of data collection, monitoring and evaluation;
- involve collaboration among budget officials, line department officials and the national women's machinery;
- involve community participation, including from parents and women's groups;
- focus not only on increasing budget allocations for programmes for girls but also on monitoring and evaluation to ensure that implementation is gender-responsive and rights-based.

## 10. Support women and women's groups to hold governments accountable for their commitments

Accountability requires transparency, information, and mechanisms through which rights holders can hold governments and government officials to account. Women are often denied access to information by illiteracy, poor education, lack of time due to domestic and other responsibilities and male domination in decision-making.

Poor women in particular may need assistance from NGOs and other groups in order to claim their rights and hold governments accountable for their commitments under the Millennium Development Goals.

Gender-responsive rights-based strategies to address this issue include:

- support capacity-building for women's groups to enable them to use data and analysis to hold governments accountable;
- disseminate the results of gender analysis under the MDGs to women's groups;
- disseminate results in formats such as charts, pictographs and summary statistics that are appropriate for non-technical audiences—for illiterate audiences, appropriate formats include simple story boards, pictures drawn in the earth, role plays and puppets;
- consult women's groups on interpretation of results and integrate their responses into the final reports;

### Using the courts to uphold human rights

In April 2001, during a severe and prolonged drought, an NGO petitioned the Supreme Court of India arguing that the government has a duty to provide relief for mass hunger.

The government responded with a list of programmes being implemented. However, the court directed the government to *fully* implement all the schemes. This converted them into legal entitlements, giving eligible beneficiaries the right to demand benefits and approach the court if their entitlements were not provided. Some of the programmes provided a national maternity benefit for poor women. An integrated child development scheme also covered adolescent girls, pregnant and lactating mothers and provided a childcare centre in each settlement.<sup>102</sup>



- create mechanisms such as public meetings, access to the media, or parliamentary committees through which women's groups and civil society can hold governments accountable for meeting MDG targets;
- support civil society groups and NGOs to use the courts to hold governments accountable for meeting established human rights, such as the right to food, particularly for women and girls.

### 11. Ensure women's active participation in data collection

To inform gender-responsive rights-based policies, it is essential that data are collected through methods that are gender-responsive and reflect women's concerns and situations. This requires that women from a range of backgrounds, including minorities and disadvantaged groups, and experts on gender analysis and gender statistics, participate in all aspects and types of data collection. The approach taken in Nepal to engendering the 2001 Population and Housing Census gives a good example (see page 8).

Gender-responsive rights-based strategies to address this issue include:

- include women, gender statistics experts and gender and poverty experts in design teams for all surveys and other forms of data collection, and in data analysis and dissemination;
- consult women's groups, including those representing minorities and disadvantaged groups, in the design and development of surveys and other data collection instruments;
- conduct focus groups separately for women and men so that women can freely express their views and share their experiences;
- for the same reason, conduct separate sex-disaggregated focus groups for age and other socio-economic categories, such as minority background, caste, income level and household headship;
- include women, ideally not less than 40 percent and not more than 60 percent, in data collection as enumerators, supervisors, and in data entry and dissemination, and ensure that women from minority and other disadvantaged groups are included in these roles at appropriate proportions.

## D. National intermediate targets and indicators

Matrix 10 below suggests a range of national intermediate targets and indicators for gender equality and empowerment, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

The targets in Matrix 10 are largely based on the seven priority strategies identified by the Task Force on Education and Gender Equality.<sup>103</sup> These indicators monitor implementation processes rather than long-term outcomes. They therefore focus on both numbers and changes relating specifically to women, as well as ratios comparing women and men.

Numbers show short-term changes, whereas percentages, which change more slowly, reflect longer-term changes. Changes relating specifically to women show whether women are



benefiting from policies and programmes. However, ratios of benefits for women compared to men are needed to show whether gender gaps are being closed.

<b>Matrix 10: National intermediate targets and indicators for gender equality and empowerment</b>	
<b>Targets</b>	<b>Indicators (see note # below)</b>
<p>I3.a Increase employment for women by 2 percent* each year until labour force participation rates for women and men are similar in total and by sector and industry</p>	<p>I3.a.1 Number of new jobs for women, by sector and industry</p> <p>I3.a.2 Ratio of new jobs for women to new jobs for men, by sector and industry</p> <p>I3.a.3 Number of new women's businesses, by sector and industry</p> <p>I3.a.4 Ratio of new women's to new men's businesses, by sector and industry</p> <p><i>These indicators will allow comparisons between expanding and declining sectors and industries</i></p>
<p>I3.b Eliminate gender inequality in employment by decreasing women's reliance on informal sector employment by 2 percent* per 3-year* survey period</p>	<p>I3.b.1 Proportion of women in wage and self-employment, by type</p> <p>I3.b.2 Proportion of women-owned sole proprietorships</p> <p>I3.b.3 Proportion of individual loans to women by government and private banks</p> <p>I3.b.4 Proportion of individual loans to women in micro-credit schemes</p> <p>I3.b.5 Proportion of women-owned businesses in micro-enterprise support schemes</p>
<p>I3.c Eliminate gender inequality in employment by closing gender gaps in earnings by 2 percent* per 3-year* survey period until equality is achieved</p>	<p>I3.c.1 Gender gaps in earnings in wage and self-employment, by occupation</p> <p>I3.c.2 Gender gaps in earnings in wage and self-employment, by industry</p>
<p>I3.d Eliminate gender inequality in employment by reducing occupational and industrial segregation by 2 percent* per 3-year* survey period until equality is achieved</p>	<p>I3.d.1 Proportion of women and men in paid employment, by occupation</p> <p>I3.d.2 Proportion of women and men in paid employment, by industry</p>
<p>I3.e Increase incomes for women through women-owned and women-controlled businesses by 2 percent* each year until parity is reached with men</p>	<p>I3.e.1 Number of women-owned businesses starting up</p> <p>I3.e.2 Ratio of women-owned to men-owned businesses starting up</p> <p>I3.e.3 Number of women-owned businesses participating in government-funded business</p>

Matrix 10: National intermediate targets and indicators for gender equality and empowerment	
in similar businesses	<p>support programmes, including export-oriented programmes</p> <p>I3.e.4 Ratio of women-owned to men-owned businesses participating in government-funded business support programmes, including export-oriented programmes</p>
I3.f Improve sexual and reproductive rights for women	<p>I3.f.1 Number of new acceptors for family planning, by sex</p> <p>I3.f.2 Number of abortions performed, where this is legal</p> <p>I3.f.3 Number of sexuality education classes conducted in schools</p> <p>I3.f.4 Proportion of students attending sexuality education classes in schools, disaggregated by sex</p> <p>I3.f.5 Number of sexuality education classes conducted in communities for women and men</p> <p>I3.f.6 Number of participants in sexuality education classes conducted in communities, disaggregated by sex</p> <p>I3.f.7 Ratio of men to women attending community sexuality education</p> <p>I3.f.8 Number and/or proportion of adolescents receiving counselling services or sexuality education from schools or the health system, disaggregated by sex</p> <p>I3.f.9 Ratio of male to female adolescents receiving counselling services or sexuality education</p>

Matrix 10: National intermediate targets and indicators for gender equality and empowerment		
13.g	Eliminate social expectations and gender stereotypes about whether women or men should do unpaid domestic and care work, leading to an increase in the amount of time that men spend on housework and child care and a more equal sharing of these responsibilities between women and men	13.g.1 Time trends in the number of hours of childcare by men 13.g.2 Ratio of women's hours of childcare to men's 13.g.3 Trends in men's hours spent on housework 13.g.4 Ratio of women's hours of housework to men's 13.g.5 Number of employers giving flexible work arrangements to women and men 13.g.6 Ratio of male to female employees using flexible work arrangements 13.g.7 Number of employers providing parental leave to both fathers and mothers on the birth of a child 13.g.8 Ratio of male to female employees taking parental leave 13.g.9 Number of employers providing leave to male and female employees to fulfil care responsibilities 13.g.10 Ratio of male to female employees taking care leave
13.h	Reduce the incidence of violence against women and girls by 5 percent* each year until it is eliminated.	13.h.1 Number of cases of violence against women reported to police 13.h.2 Number and/or proportion of reported cases prosecuted in the courts 13.h.3 Number of perpetrators sentenced and length of sentence 13.h.4 Number of women/girls seeking shelter in safe houses or from women's groups for protection from violence against women 13.h.5 Proportion of the population that knows violence against women is a crime

**Matrix 10: National intermediate targets and indicators for gender equality and empowerment**

<p>I3.i Reduce the incidence of violence against women, including gender-based in situations of crisis or conflict by 5 percent* each year until it is eliminated</p>	<p>I3.i.1 Number of cases of violence against women and girls in crisis or conflict situations reported to the relevant authorities</p>
	<p>I3.i.2 Number and/or proportion of reported cases of violence against women and girls in crisis or conflict situations prosecuted</p>
	<p>I3.i.3 Number of perpetrators of violence against women and girls in crisis or conflict situations sentenced, and length of sentence</p>
	<p>I3.i.4 Number of women/girls in crisis or conflict situations utilizing special shelters for protection from violence</p>
	<p>I3.i.5 Proportion of the police/security forces/emergency service personnel that has been sensitized to the need for special attention to violence, particularly gender-based and sexual violence, against women</p>
	<p>I3.i.6 Proportion of service delivery programmes in crisis or conflict situations that have undertaken a gender audit to minimize the risks of violence against women and girls</p>

### Matrix 10: National intermediate targets and indicators for gender equality and empowerment

<p>13.j Increase women's participation in the public sphere at all levels by 5 percent* each year to reach at least 30 percent* by 2015.</p>	<p>13.j.1 Number and size of women's quotas in the national parliament</p> <p>13.j.2 Number of political parties with quotas for women candidates and size of quotas, by party</p> <p>13.j.3 Number of women trained as potential candidates for election, by level of government—national, subnational, local</p> <p>13.j.4 Proportion of candidates standing for election who are women, by level of government</p> <p>13.j.5 Proportion of elected seats won by women, by level of government</p> <p>13.j.6 Proportion of voters who are women, by level of government</p> <p>13.j.7 Number of elected women and men participating in gender-responsive training in governance procedures</p> <p>13.j.8 Existence of mechanisms linking elected women to women constituents</p> <p>13.j.9 Existence of mechanisms to monitor voting patterns of female and male members of parliament on issues of importance to women, including general economic issues</p> <p>13.j.10 Women's share of employment in the civil service, by level and sector</p>
<p>13.k Provide sufficient budget to support the chosen strategies and ensure that policies and programmes to benefit girls receive an equal share</p>	<p>13.k.1 Proportion of the national budget devoted to gender equality and empowerment</p> <p>13.k.2 Proportion of the national budget actually spent on gender equality and empowerment</p> <p>13.k.3 Proportion of GDP allocated to gender equality and empowerment</p> <p>13.k.4 Proportion of the national gender equality and empowerment budget allocated to gender-responsive rights-based initiatives</p> <p>13.k.5 Proportion of the national gender equality and empowerment budget actually spent on gender-responsive rights-based initiatives</p>

\* *Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.*

# *All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.*

# GOAL 4

## REDUCE CHILD MORTALITY

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## Goal 4: Reduce Child Mortality

**H**igh levels of infant and child mortality up to the age of 5 years continue to be a major development and human rights issue in many developing countries, particularly the poorest. Although more children are surviving the first five years of life, globally there are significant differences by region. Child mortality is greatest in Africa, which has 42 percent of child deaths under age 5.

Progress in reducing child mortality lags behind progress in all of the other goals,<sup>104</sup> and progress in sub-Saharan Africa is still lagging far behind other regions in the world.<sup>105</sup> Southern Asia also has relatively low rates of child survival, although there has been a marked improvement between 1990 and 2004.

Only two regions, East Asia and Pacific and Latin America and the Caribbean, are close to achieving the MDG target. But even in those two regions, more than half the countries are off track.<sup>106</sup> However some countries have significantly reduced child mortality—infant mortality fell in Timor-Leste by 7.1 percent between 2000 and 2005<sup>107</sup> and in Viet Nam from 147 per thousand live births in 1990 to 78 in 2005.<sup>108</sup>

**Matrix 11: Global target and indicators for reducing child mortality**

Target		Indicators	
<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>			
4.A	Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate	4.1	Under-five mortality rate
		4.2	Infant mortality rate
		4.3	Proportion of one-year-old children immunized against measles

### A. Issues for a gender-responsive rights-based analysis

#### 1. More boys are born in most countries, but more boys die during infancy

In most countries, gender differences in infant and child mortality are small and largely reflect biological differences. The natural birth rate by sex is between 103 and 107 boys for every 100 girls, but infant mortality rates for boys are almost universally higher than for girls due to biological factors.



## 2. Some Asian countries have an extreme surplus of males at birth

However, there are exceptions to the norm in Asia, especially in the world's most populous nations, China and India. This is related to a strong preference for sons in these cultures, particularly in rural areas, resulting in infanticide in times past, and more recently in abortion of female foetuses. In China this is compounded by the impact of the one-child family planning policy.

In 1990, Amartya Sen estimated that such extreme sex ratios translated into 100 million 'missing women'.<sup>113</sup> In 2003, he noted there had been little change. The ratio of women to men in the total population was a little worse in China and a little better in India, Bangladesh, Pakistan, and West Asia but had not altered radically in

any of these countries. Although the total numbers of missing women had continued to grow this was mainly due to the absolute growth in population.

A paper published in late 2005 has an alternative explanation for some of the differences in the sex ratio at birth.<sup>114</sup> There is evidence that women who are carriers of hepatitis B give birth to a higher ratio of boys to girls than non-carriers. Since many of the countries with missing women also have a relatively a high proportion of people who carry the hepatitis B infection, this could produce a higher than normal ratio of male to female births, even in the absence of excess female mortality. The paper suggests that, after adjusting for differences in the sex ratio at birth caused by hepatitis B, the number of missing women based on population estimates for 1980–1990 drops from 60 to 32 million.<sup>115</sup>

However, there is a significant difference across countries in the share of the gender bias that can be explained by hepatitis B. China has very high sex ratios at birth but declining sex ratios over childhood, suggesting that most of the difference in childhood and population sex ratios is due to sex ratios at birth. By contrast, India has moderately higher sex ratios at birth but also increasing sex ratios during childhood, suggesting that female infants and children are more likely to die than males. Hepatitis B can explain 75 percent of the missing women in China but less than 20 percent in India, Nepal and Pakistan.<sup>118</sup>

### Missing girls in China and India

From a relatively normal ratio of 108 boys to 100 girls in the early 1980s, the male surplus in China increased progressively to 111 in 1990, 116 in 2000, and 120 boys per 100 girls in 2004. Only seven of China's 29 provinces were within the world's average sex ratio in 2004. In eight 'disaster provinces' there were from 26 to 38 percent more boys than girls.<sup>109</sup>

In India 1984 -1998, the sex ratio at birth was 108 males for every 100 females.<sup>110</sup> Between 1991 and 2001, the sex ratio of the child population aged between 0 and six years of age fell sharply from 945 females per 1,000 males to 927 per 1,000.<sup>111</sup> From a relatively normal ratio of 108.5 boys to 100 girls in the early 80s in China, the male surplus progressively rose to 111 in 1990, 116 in 2000, and around 120 boys for every 100 girls in 2004.<sup>112</sup>

### Infant and child mortality rates for girls have fallen but are still abnormally high in China and India

More girls than boys die in infancy and in childhood in China and some areas of India. In China, death rates for first born children are not significantly different, but the risk of death rises dramatically for second and higher order births of girls.<sup>116</sup> Death rates are higher for girls born to families with daughters and no living sons.<sup>117</sup>

### **3. Sex-selective abortions are a new dimension of female disadvantage**

While female disadvantage in mortality in South Asia has been substantially reduced, a new female disadvantage has emerged in South and East Asia through sex-specific abortions of female fetuses. Modern technology makes sex-selective abortion possible and easy, and it is being widely used in societies with a strong preference for sons. In India and China, where infanticide of girl children seems to have been largely eradicated, sex-selective abortion is a major cause of unbalanced sex ratios at birth and among children. Unbalanced sex ratios among children lead to unbalanced sex ratios in the adult population.

### **4. Policy makers should be aware of the gender implications of unbalanced population sex ratios**

The gender implications of these statistics are alarming. They are not limited to poor societies or those where women are particularly disempowered—some of the most unbalanced sex ratios at birth in India are found in states with rapid rates of growth and relatively high incomes, such as the Punjab, Haryana and Maharashtra, which are among the richest states in India.<sup>119</sup> The decline in the child sex ratio is likely to result in more girls being married at younger ages, more girls dropping out of school, higher maternal mortality due to early child bearing, the immigration of poor women from other countries for marriage, especially to rural areas, and an increase in violence against girls and women, including rape, abduction, trafficking, and forced polyandry—the practice of sharing a wife among more than one man, particularly brothers.

On the more positive side, in the Republic of Korea sex ratios at birth have declined with economic development and modernization.<sup>120</sup>

Policy makers need to be aware of these implications, and develop strategies to prevent these negative outcomes on women.

### **5. Most children who do not survive to their fifth birthday die from preventable causes**

A 2005 study found that 73 percent of the 10.6 million child deaths worldwide each year are the result of six causes: pneumonia, diarrhoea, malaria, neonatal sepsis, preterm delivery and asphyxia at birth. The first four causes account for 54 percent of all child deaths globally. 94 percent of all child deaths due to malaria are in Africa.<sup>121</sup>

While measles is not among the six leading causes of child deaths, it is responsible for almost half a million deaths of children each year and results in blindness or loss of hearing in many others. The proportion of one-year-old children immunised against measles—global indicator 4.3—may be regarded as an indicator of the effectiveness and efficiency of the preventive health system. However at country level, alternative indicators which reflect more directly the main causes of child mortality in that country may be more relevant.

### **6. Boys aged 2-5 are at higher risk of death due to greater exposure to risk**

In most countries, boys who have reached the age of physical mobility tend to have higher death rates than girls. This may be a result of social attitudes, particularly in rural societies—girls are more likely to be kept within the home and are more closely supervised, while small boys are allowed to wander away from home to play or to care for livestock, and may be more exposed to disease and accidents. Boys aged 2-5 also often have poorer nutrition than girls, possibly because their meals are not so well supervised.

## 7. Mothers, the main caregivers, may lack the power to improve the health of their children

The role of mothers is recognized as critical in improving child survival—it is mothers or grandmothers who are primarily responsible for the care of under-five children. However, they may lack the economic resources, time, and/or access to transport which is necessary to access health care for their children. They also often lack the power and authority to make critical decisions that may make the difference between a child living or dying.

The role of fathers and male household heads in child survival, particularly as key decision makers, is often overlooked. Improving the understanding of child health and nutrition among fathers and other significant decision makers in the family and community, as well as among mothers, can empower mothers to make decisions on child health and increase the likelihood that childhood illnesses can be prevented or detected and treatment sought.

Higher levels of mothers' education result in a significant reduction in child mortality. Although mother's education is not included as an indicator for Goal 4, the *Millennium Development Goals Report 2006* notes that secondary or higher education for mothers doubles child survival.<sup>122</sup> Women's economic, social and decision-making empowerment is also important to reducing child mortality. While this is not highlighted in Goal 4, it is mentioned as a gender issue in the technical manual *Indicators for Monitoring the Millennium Development Goals*.<sup>123</sup>

## 8. Efforts to reduce child mortality need to target high risk groups of mothers

If significant progress is to be achieved in reducing child mortality, efforts must be targeted at the mothers of children at highest risk of mortality. Specific programmes are needed to empower them to make decisions on the health and welfare of their children and ensure they have the resources needed to implement appropriate measures.

Detailed analysis of infant and child mortality is therefore needed to identify mothers, as well as children, at highest risk of child mortality. Among these mothers are those in poor households and minority groups, adolescent and young mothers, and women refugees and internally displaced persons in crisis and conflict situations. These mothers should be specifically targeted in the delivery of child health and nutrition programmes.

### Low income and civil disturbance are risk factors for child mortality

An analysis of selected countries for the 2007 World Bank MDG monitoring report found that child mortality was 40 percent higher for children in the lowest income (quintile) households compared with the highest income (quintile) households.<sup>124</sup> While 82 percent of children in the top quintile and 69 percent of all children were immunized for measles in these countries, only 59 percent of children in the bottom income quintile were immunized.<sup>125</sup>

The report also observed that civil disturbance was a significant factor in the failure of many African countries to improve child mortality outcomes.<sup>126</sup>

## B. National long-term targets and indicators

Matrix 12 below suggests a range of long-term targets and indicators for child mortality, based on the preceding gender-responsive rights-based analysis of Goal 4. They should be adapted and added to so that they are relevant and useful for the individual country.

Women's groups should ensure that data and references to child mortality in CEDAW country reports are used in the process of developing national and subnational targets and indicators. The responses of the CEDAW Committee on these matters to the most recent country report may also be useful in providing a global and rights-based perspective.

The relevant sections of the Beijing Platform and National Action Plans based on the Platform also provide information on government commitments to women and gender equality related to child mortality under Critical Area of Concern C Women and Health.

<b>Matrix 12: National long-term targets and indicators for reducing child mortality</b>	
<b>Targets</b>	<b>Indicators (see note # below)</b>
L4.A Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate for both girls and boys ( <i>based on global target 4.A</i> )	L4.A.1 Under-five mortality rate, by sex and age
L4.B Eliminate, between 1990 and 2015, excess female under-five mortality ( <i>in countries where this exists</i> )	L4.B.1 Infant and child mortality rate, disaggregated by sex L4.B.2 Proportion of 1-year-old children immunized against measles, disaggregated by sex L4.B.3 Proportion of under-five children in malaria-affected areas sleeping under treated anti-malarial nets, disaggregated by sex and age L4.B.4 Proportion of 1-year-old children immunized against measles, mumps and rubella, disaggregated by sex L4.B.5 Proportion of 5-year-old children completing a full course of immunization against Diphtheria, Tetanus, Pertussis (whooping cough) and Hib (DTP-Hib), disaggregated by sex and age L4.B.6 Proportion of 5-year-old children completing a full course of immunization against polio
L4.C Eliminate sex-selective abortions by 2015 ( <i>in countries where this is widely practiced</i> )	L4.C.1 Sex ratio at birth
L4.D Reduce by two-thirds* excess mortality among under-five boys	L4.D.1 Number of accidental deaths of under-five children, by sex

Matrix 12: National long-term targets and indicators for reducing child mortality	
due to accidents and poor nutrition	<p>L4.D.2 Prevalence of underweight among girls and boys under five years of age</p> <p>L4.D.3 Prevalence of stunting among girls and boys under five years of age</p>
L4.E Increase coverage of child health and nutrition programmes among adolescent and young mothers, mothers from poor households and minority groups, and women refugees and IDPs by 5 percent* per year to reach at least the same level as the general population by 2015	<p>L4.E.1 Proportion of 1-year-old children of the relevant target groups of mothers immunized against measles, disaggregated by sex</p> <p>L4.E.2 Proportion of under-five children of the relevant target groups of mothers in malaria-affected areas sleeping under treated anti-malarial nets, disaggregated by sex and age</p> <p>L4.E.3 Proportion of 1-year-old children of the relevant target groups of mothers immunized against measles, mumps and rubella, disaggregated by sex</p> <p>L4.E.4 Proportion of 5-year-old children of the relevant target groups of mothers completing a full course of immunization against Diphtheria, Tetanus, Pertussis (whooping cough) and Hib (DTP-Hib), disaggregated by sex and age</p> <p>L4.E.5 Proportion of 5-year-old children of the relevant target groups of mothers completing a full course of immunization against polio</p>
<p>* <i>Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.</i></p> <p># <i>All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</i></p>	

### C. Gender-responsive rights-based strategies

Implementation strategies for achieving Goal 4 tend to focus primarily on women as mothers and on a health and health education perspective. However, fathers and male decision makers in families and communities are often equally important in ensuring that children receive appropriate preventive and curative health care. Eliminating extreme poverty, particularly its greater impact on women, and promoting women's empowerment and gender equality are essential components of an integrated approach to Goal 4.

In countries facing extremely unbalanced sex ratios at birth and/or in the child population, the strategies required to address this very serious and complex gender issue are also broader

and more complex. Again, they centre on promoting gender equality and women's empowerment. Thus, many of the gender-responsive rights-based implementation strategies required to achieve Goal 4 have already been covered under Goals 1, 2 and 3, and are not repeated here. This section will focus on strategies that directly address the major gender and rights issues identified above for Goal 4.

### 1. Disaggregate data sources on child mortality by age and sex

As shown in the analysis section, there are many gender patterns in child mortality which can only be revealed by sex-disaggregated data. While the official list of the MDG targets and indicators does have an overarching statement that "all indicators should be disaggregated by sex and urban/rural as far as possible", this is easily overlooked. Specifically including sex-disaggregation in national targets and indicators will ensure that this does not occur. UNICEF and UNFPA both have an important role in addressing this through the Multiple Cluster Indicators Surveys and Demographic and Health Surveys.

Gender-responsive rights-based strategies to address this issue include:

- routinely collect, present and analyse data on infant mortality by sex and data on child mortality by age and sex in Multiple Cluster Indicators Surveys and Demographic and Health Surveys.

### 2. Identify and address the factors that lead to higher mortality among girls where this occurs

The factors which lead to higher mortality among girls, where this occurs, are different in different countries and even in different regions within countries. Implementing a strategy which has been successful in another location, without checking if the factors it addresses are relevant in the new location, is likely to lead to wasted resources. It is important to begin with research, and to monitor impact.

Gender-responsive rights-based strategies to address this issue include:

- conduct research on infant mortality data by sex and child mortality data by age and sex to identify the factors that lead to higher mortality among girls in countries or regions where this occurs;
- conduct research on why girl babies and children are less likely than boys to receive preventive treatment or medical care;
- monitor clinic attendance and immunization rates by the sex of the child, and develop follow-up mechanisms where girls are known to not have received immunization.

#### **Gendered spaces: an obstacle to girls' health care**

In one Indian area, girls were less likely to receive medical care because of the lack of an appropriate waiting place in the local town for fathers and daughters. Because women did not use public transport, men had to take children to the clinic. However, the bus service ran only in the morning and evening, so the father had to wait in town the whole day. If the child was a boy, they could wait at a local tea shop, but this was not regarded as an acceptable place for girls, even infants. Consequently, men were reluctant to take their daughters to the clinic.<sup>127</sup>



### **3. Identify and address the factors that lead to higher mortality among older boys where this occurs**

Where boys aged 2-5 are at more risk of accidents and poor nutrition because they are allowed to roam free outside the home, parents and communities need to be educated on the need to ensure that small boys are fed regularly and supervised, and on the risks of accidental death or exposure to disease pathogens through, for example, drinking unsafe water in the environment.

Gender-responsive rights-based strategies to address this issue include:

- conduct awareness-raising and health education campaigns on appropriate diets and feeding patterns for under-five children who are no longer breastfed;
- conduct awareness-raising and health education campaigns on environmental risks and safety precautions for under-five children outside the home.

### **4. Address the factors that lead to sex-selective abortions of females**

Initiatives to reduce the sex-selective abortion of females need to reduce son preference, increase the value placed on girls and reduce the number of sex-selective abortions performed by medical professionals.

Gender-responsive rights-based strategies to address this issue include:

- conduct more research on sex-selective abortions and the factors that lead to them;
- develop public information campaigns addressing parents, medical staff and communities on the value of daughters and girls;
- provide cash incentives to families raising daughters;
- reduce the pressure on mothers to produce male babies by addressing factors such as dowry payments and traditional customs that favour sons over daughters;
- enforce laws which ban the medical profession from performing sex-selective abortions and impose fines of sufficient magnitude to act as a real deterrent to the practice;
- lobby policy makers about the serious long-term consequences for gender equality and women's rights of extremely unbalanced sex ratios in the population;
- ensure that the issues of sex-selective abortions and unbalanced child sex ratios are raised in CEDAW country reports and with other human rights bodies; if necessary, assist women's groups to prepare an alternative report to the Committee on these matters.

### **5. Target health education and information to men**

In the long term, gender equality and empowerment of women will increase women's capabilities and their ability to make strategic decisions about their children's health. However, in the short term many women lack the power to make critical decisions about their children's health, such as when to take them for treatment or whether to have them immunized. Even when they are able to make the decisions, women may lack the financial, time or transportation resources to put their decision into effect. While the empirical evidence is clear that high-order births are much more at risk of death both in infancy and childhood, women often have little say in the number of children they bear. Thus, apart from empowering women, working with fathers and other men is an important and complementary intermediate strategy.



Gender-responsive rights-based strategies to address this issue include:

- develop appropriate messages and media to deliver information on child health to fathers, male household heads and male community leaders;
- promote family planning programmes to men, especially those programmes using male methods of contraception, so that men take responsibility;
- adapt child health services to the needs of fathers in terms of appropriate hours, location, and atmosphere to encourage fathers to bring their children for preventive or curative services;
- implement child health programmes that encourage fathers and mothers to take joint responsibility for their children's health;
- within the health system, record, collate and report the sex of the caregiver bringing under-five children to clinics or hospitals, by sex of child;
- specifically target these interventions to adolescent and young women, poor and minority women, and refugee and IDP women in crisis and conflict situations, as relevant to the particular national context.

## D. National intermediate targets and indicators

Matrix 13 below suggests a range of national intermediate targets and indicators for reducing child mortality, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

<b>Matrix 13: National intermediate targets and indicators for reducing child mortality</b>			
<b>Targets</b>		<b>Indicators (see note # below)</b>	
14.a	Increase the number of men sharing responsibility with women for the care and health of under-five children	14.a.1	Men as a proportion of those bringing under-five children to health clinics, by sex of child ( <i>from clinic records</i> )
		14.a.2	Number of men aware of health and immunization requirements for under-five children ( <i>from MICS</i> )
14.b	Sex-disaggregated data on infant mortality and data disaggregated by sex and age for child mortality are available and used in analysis and monitoring	14.b.1	Sex-disaggregated data on infant mortality and data disaggregated by sex and age for child mortality are collected, collated, disseminated and analysed ( <i>particularly from MICS and DHS surveys</i> )
		14.b.2	The number or proportion of official government reports that routinely provide sex-disaggregated data on infant mortality and data disaggregated by sex and age for child mortality

Matrix 13: National intermediate targets and indicators for reducing child mortality	
14.c Increase in evidence-based policies and programmes building on analysis of the factors leading to higher mortality rates for female infants and under-five girls	14.c.1 Number of studies of the factors leading to higher mortality for female infants and under-five girls
	14.c.2 Number of new policies and programmes addressing the issue
	14.c.3 Development of indicators for monitoring the effectiveness of these policy and programme responses
	14.c.4 Attendance of under-fives at clinics and hospitals, by age and sex of child
14.d Increase in evidence-based policies and programmes building on analysis of the factors leading to sex-selective abortions of female fetuses	14.d.1 Number of studies of factors leading to sex-selective abortions of female fetuses
	14.d.2 Number of new policies and programmes addressing the issue
	14.d.3 Development of indicators for monitoring the effectiveness of these policy and programme responses
	14.d.4 Number of abortions performed, by sex of foetus ( <i>available in some countries from health system records</i> )
	14.d.5 Number and sex of other living children at the time of the abortion
14.e Reduce the number of sex-selective abortions of female fetuses by 5 percent* per year until they are eliminated	14.e.1 Number of cases brought against medical professionals for conducting or facilitating sex-selective abortions
	14.e.2 Number of convictions of medical professionals
	14.e.3 Size of fine or length of sentence for convicted medical professionals
	14.e.4 Data on sex-selective abortions of female fetuses and measures taken to eliminate them are presented in CEDAW country reports
14.f Increase in policies and programmes that specifically target adolescent and young mothers, poor or minority mothers, refugee or IDP mothers in crisis or conflict situations, as relevant to the particular country context	14.f.1 Number of new policy responses and programmes directed toward mothers from the relevant target groups
	14.f.2 Development of indicators for monitoring the effectiveness of these policy and programme responses among mothers from the relevant target groups

**Matrix 13: National intermediate targets and indicators for reducing child mortality**

\* *Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.*

# *All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.*



# GOAL 5

## IMPROVE MATERNAL HEALTH

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## Goal 5: Improve Maternal Health

In 2005, 536,000 women died of maternal causes, compared to 576,000 in 1990. Ninety-nine percent of these deaths occurred in developing countries. The maternal mortality ratio—deaths during pregnancy and within 42 days of termination of pregnancy per 100,000 live births—was 450 maternal deaths per 100,000 live births in developing regions, compared to just 9 per 100,000 in developed regions.<sup>128</sup>

The small decline in the global ratio of maternal mortality reflects mainly declines in countries with relatively low levels of maternal mortality.<sup>129</sup> According to the *2007 Millennium Development Goals Report*, maternal mortality remains unacceptably high in sub-Saharan Africa and South Asia, where most of the deaths occur.<sup>130</sup> By contrast, dramatic improvements were recorded in Southeast Asia, North Africa and East Asia by the *2006 Millennium Development Goals Report*<sup>131</sup>.

Although there are many causes of maternal death, the most common cause is bleeding after birth—post-partum haemorrhage. Others are infections, complications from unsafe abortion, prolonged or obstructed labour, and hypertensive disorders during pregnancy, especially eclampsia. These can occur without warning and require prompt access to obstetric services equipped to provide lifesaving drugs, antibiotics and transfusions and to perform caesarean sections and other surgical interventions.

### Maternal risk begins in girlhood

The foundations for maternal risk are often laid in girlhood. Women whose growth has been stunted by chronic malnutrition are vulnerable to obstructed labour. Anaemia predisposes women to haemorrhage and sepsis during delivery and has been implicated in at least 20 percent of post-partum maternal deaths in Africa and Asia.<sup>132</sup>

**Matrix 14: Global targets and indicators for improving maternal health**

Target		Indicators	
<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>			
5.A	Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	5.1	Maternal mortality ratio
		5.2	Proportion of births attended by skilled health personnel
5.B	Achieve, by 2015, universal access to reproductive health	5.3	Contraceptive prevalence rate
		5.4	Adolescent birth rate
		5.5	Antenatal care coverage (at least one visit and at least four visits)
		5.6	Unmet need for family planning

## A. Issues for a gender-responsive rights-based analysis

### 1. Maternal mortality is difficult to measure without a reliable death registration system

The global target is challenging to monitor because maternal mortality is very difficult to measure without a reliable death registration system, and few developing countries have such systems. It is difficult to collect data on maternal deaths, because when a woman dies, the family unit of which she was a member ceases to exist. If the husband of the deceased woman is asked about deaths in his family, he will tend to answer in the context of his **new** family, and therefore not report the death of his first wife. Some demographers have attempted to overcome this through the ‘sisterhood method’ – collecting data by asking women about their sisters.

Maternal mortality statistics in countries without reliable death registration systems are therefore only estimates, and probably under-estimate the true extent of maternal mortality.

### 2. Maternal mortality is typically approached from a health perspective

UNFPA promotes a three-pronged strategy for improving maternal health that requires:

- all women to have access to contraception to avoid unintended pregnancies;
- all pregnant women to have access to skilled care at the time of birth;
- all those with complications to have timely access to quality emergency obstetric care.

#### Women in developing countries lack reproductive health care

A 2005 report showed that, worldwide, only 60 percent of women had access to contraception. The proportion of deliveries attended by skilled health staff averaged 38 percent in low income countries and was as low as 11 percent in Nepal, 19 percent in Lao PDR, 23 percent in Pakistan and 43 percent in India. By contrast, the figure was 68 percent in Indonesia, 85 percent in Viet Nam, 87 percent in Sri Lanka, 97 percent in China, 99 percent in Mongolia and 100 percent in Jordan.<sup>133</sup>

Many countries are unable to meet these requirements for all women, especially those in poor families and rural and isolated areas.



However, even when these services are available, many women are unable to take advantage of them. Focusing purely on a health perspective, without a gender-responsive rights-based analysis of the issue, means that the reasons women do not access these services may not be identified and addressed.

For example, the health approach tends to emphasize health education rather than women's empowerment as the solution to the widespread failure of women to attend clinics or use the services of trained midwives or doctors. However, the barrier is often that the women lack the decision-making power to choose to use available services.

#### **Lack of empowerment may lead to maternal mortality**

In an isolated area of West Aceh during the 1980s, a team from the Indonesian Institute of Sciences investigated a recent case of a woman who had died giving birth to her second child.

The health clinic said that the woman had chosen not to use the trained midwife because she did not understand the importance of trained care or the risks she faced. The staff recommended more and better health education for other women in the area.

However, the neighbours had quite a different story. The young mother had already experienced a difficult home birth with her first child and wanted to use the midwife at the clinic, where she hoped for better care. However, her husband and her mother-in-law refused to allow this. Since she had survived the first birth, they expected she would also survive this one.

When, after two days in labour it became apparent that she may not survive, the family again refused to allow her to be taken to the clinic. They said that, if she were to die, it was better that she did so at home, and so she did.

Health education for the woman would not have changed the outcome. Empowerment would have.<sup>134</sup>

Women's empowerment is therefore a vital factor in reducing maternal mortality.

### **3. Men and communities should be targeted for health education on pregnancy and childbirth**

Given the lack of empowerment of many women, it is male decision makers and some senior women who often make decisions about women's access to health care that can mean the difference between life and death. Husbands, male household heads and senior women in the community should be targets for health education on care during pregnancy and the importance of attendance by a trained health professional at the birth.

#### **4. Maternal health should be considered from perspective of women's rights to reproductive health**

Basic health care is a human right, and reproductive health care is a particularly important human right for women. While most pregnant women want to deliver a healthy baby, some women do not choose to become pregnant and should have the right to a safe abortion.

With the introduction of the new global target 5.B—'achieve, by 2015, universal access to reproductive health'—the 2007 revision of Goal 5 recognises the need for a broad approach to maternal health that encompasses women's access to contraception and safe abortion; identification and treatment of sexually transmitted infections and HIV/AIDS; and treatment for the consequences of unsafe abortions or genital mutilation. In addition to contributing to improving maternal health, this is essential to the full realization of women's reproductive rights.

#### **5. Genital mutilation is a serious violation of women's reproductive rights and must be eliminated**

Female genital mutilation is the collective name given to several different traditional practices that appear to be linked primarily to a desire to subordinate women and to control their sexuality. Worldwide, between 100 and 140 million women and girls in the world are estimated to have undergone female genital mutilation and 3 million girls are estimated to be at risk of undergoing the procedures every year.<sup>135</sup> Currently, it is primarily practiced in 28 African countries, with sporadic practice in some nations in the Middle East and in a few ethnic groups in India and Sri Lanka.<sup>136</sup> Prevalence varies significantly from one country to another. For example, the prevalence rate is 92 percent in Mali, compared to 28 percent in Senegal.<sup>137</sup>

Female genital mutilation can damage the health of women, girls and newborn babies. While excessive bleeding—sometimes in resulting in death—and shock are some of the immediate consequences, long-term health effects can include chronic pain, infections, and trauma. Women who have undergone female genital mutilation have higher risks for caesarean sections, longer hospital stays, and postpartum haemorrhaging. Their newborn babies have higher death rates during and immediately after birth.<sup>138</sup>

The Convention on the Rights of the Child and CEDAW both explicitly recognize that practices harmful to women, such as female genital mutilation, are violations of human rights. In 2003 the Cairo Declaration for the Elimination of Female Genital Mutilation affirmed that 'the prevention and the abandonment of female genital mutilation can be achieved only through a comprehensive approach promoting behaviour change, and using legislative measures as a pivotal tool.' Many countries have implemented initiatives to eliminate the practice, including laws which criminalize it, education and outreach programs, and the use of civil remedies and administrative regulations to prevent it. In February 2008, ten United Nations agencies pledged to support governments, communities, and women and girls to abandon the practice within a generation, with a major reduction in many countries by 2015.<sup>139</sup> Experience has shown that, while making female genital mutilation illegal may play a role, ultimately it is women and men in communities and national leaders who must take the initiative in bringing about the social and cultural changes needed to eliminate the practice.

The more extreme forms of female genital mutilation are not widely practiced in Asia. According to a national report in Indonesia, Type I (commonly referred to as clitoridectomy) and less invasive procedures (Type IV) are practiced in many parts of the archipelago. A study in Jakarta and West Java found most female children who were circumcised underwent

ritualistic, largely non-invasive procedures. The government included this practice as a gender issue in its National Action Plan to End Violence against Women in November 2000. The National Ulemas Council supports eliminating female circumcision in stages, currently supporting ritualistic, non-invasive forms.<sup>140</sup>

## 6. Women should have access to transportation infrastructure and communications

To reduce maternal mortality, women must have physical access to health and medical services. Public transport, or at least passable roads, is most important for increasing use of antenatal and post-natal services. When difficult births occur without warning, as can often be the case, it is also vital to have ambulances and good communications to the centre where the ambulance is located, as well as reasonable roads. However, in some least developed countries, many women lack passable roads and/or communication with assistance in an emergency.

## 7. Basic reproductive health services should be free and easily accessible to all women

Basic reproductive health services include family planning information, services and counselling; antenatal, delivery (including assisted delivery) and postnatal care of mothers at the primary health care level; referral to secondary care for the management of obstetric complications; prevention of abortion, management of the consequences of abortion, and post-abortion counselling and family planning; and maternal care. The importance of family planning in particular in reducing unwanted pregnancies and abortions, which are a significant cause of maternal mortality, is recognized in the 2007 revision of the MDGs by the addition of global indicator 5.5—‘unmet need for family planning’.

These services should be free and easily accessible to all women, particularly poor women, women from disadvantaged minorities, adolescent and young women, and women refugees and IDPs in crisis and conflict situations.

However, as a result of the neoclassical economic policies discussed under Goal 1, the charging of fees for attendance at antenatal care and for the use of midwives has discouraged many women from using these services, as they lack the financial resources needed. In some cases where financial resources are sufficient, families and even women themselves may be unwilling to spend them on health care for women due to the low status given to women and lack of understanding of the importance of reproductive health care.

### Poor women are least likely to use antenatal care

In all developing regions, the poorest 20 percent of the population are less likely to use antenatal care than the richest 20 percent. In Asia, the ratio of use by pregnant women in the richest to the poorest households varies from 1.3 in Indonesia, 1.4 in Philippines and 1.9 in Viet Nam, to 3.1 in Nepal, 3.6 in India, 4.1 in Bangladesh, and 10.1 in Pakistan.<sup>141</sup>

## 8. Antenatal and delivery services should be prioritized

Most maternal deaths result from preventable causes, many of which can be diagnosed during antenatal checks. Good antenatal care—a minimum of four antenatal visits during pregnancy—helps address problems in both mother and baby, including pre-eclampsia, blood-type incompatibility, diabetes, low birth weight, and birth defects. Tetanus injections are also vital for the health of both mother and child and can be provided during antenatal visits.

These antenatal services must be prioritized and adequately supported with financial resources and qualified health staff in order to help reduce maternal mortality.

However, it is now recognized that antenatal care alone does not have a significant impact on maternal mortality. It must be accompanied by improved care during delivery. The antenatal period presents opportunities for reaching pregnant women with interventions that may be vital to their health and well-being and that of their infants, as well as a route for ensuring that pregnant women do, in practice, deliver with the assistance of skilled health care.<sup>143</sup>

### Many pregnant women are not protected against tetanus

The percentage of pregnant women receiving tetanus injections in 2003 was 46 percent in Cambodia, 78 percent in India, 51 percent in Indonesia, 36 percent in Lao PDR, 69 percent in Nepal, 57 percent in Pakistan, 70 percent in Philippines and 79 percent in Viet Nam.<sup>142</sup>

## 9. Adolescent and young women should be specifically targeted by maternal health initiatives

In the 2007 revision of the MDGs, the new global indicator 5.4—adolescent birth rate—recognizes the importance of improving maternal health among adolescents as a means of reducing the overall high levels of maternal mortality in many developing countries.

The risk of maternal death is about three times higher among adolescent girls aged 15-19 years than for those aged 20-24 years. Adolescents are also more likely than older women to experience miscarriages and still births. About 7 to 12 percent of adolescent pregnancies are terminated by miscarriages and/or still births compared to 6 to 8 percent of pregnancies among women aged 20-24 years.<sup>144</sup>

## B. National long-term targets and indicators

Matrix 15 below suggests a range of long-term targets and indicators for improving maternal health, based on the preceding gender-responsive rights-based analysis of Goal 5. The target and indicators should be adapted and added to so that they are relevant and useful for the individual country.

Since poverty, education, the health and nutrition of girls, women's empowerment and violence against women are all relevant to Goal 5, relevant targets and indicators are also covered under goals 1, 2, 3, 4 and 5.

Women's groups should ensure that data and references to maternal health and mortality in CEDAW country reports are used in the process of developing national and subnational targets

and indicators. The responses of the CEDAW Committee on these matters to the most recent country report may also be useful in providing a global and rights-based perspective.

The relevant sections of the Beijing Platform and National Action Plans based on the Platform also provide information on government commitments to women and gender equality related to maternal mortality under Critical Area of Concern C Women and Health.

<b>Matrix 15: National long-term targets and indicators for improving maternal health</b>	
<b>Target</b>	<b>Indicators (see note # below)</b>
L5.A Achieve, by 2015, universal access to reproductive health <i>(unchanged from global target)</i>	L5.A.1 Proportion of females of reproductive age using contraception L5.A.2 Proportion of males of reproductive age using male methods of contraception L5.A.3 Number of females and males receiving treatment for sexually transmitted infections L5.A.4 Ratio of females to males receiving treatment for sexually transmitted infections L5.A.5 Number of women receiving safe abortions <i>(available for a limited number of countries where this is legal)</i> L5.A.6 Birth interval in months, by sex of previous infant and birth order, where appropriate
<i># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</i>	

## C. Gender-responsive rights-based strategies

### 1. Reduce the costs for women of accessing primary reproductive health care

Costs in terms of money, time and opportunity cost—other activities that could be carried out with the money and time used to access care—are important factors in women's use of reproductive health care.

Gender-responsive rights-based strategies to address this issue include:

- remove attendance fees from clinics providing primary health care, including reproductive health services;
- implement national or local health insurance schemes to help women cover other health costs;

- in isolated villages, organize for women in the last weeks of pregnancy to move to hostels or other accommodation nearer to qualified medical assistance—free, or at only a nominal charge;
- provide a midwife within a reasonable distance of at least 90 percent of the population and a health clinic staffed by qualified personnel in all centres of population;
- adjust the hours of operation for primary health care clinics to open at times when women are not busy with work or priority household tasks;
- provide training to staff in primary health clinics, hospitals and midwives on CEDAW and other human rights instruments to ensure that they are aware of women's rights to reproductive care and to treatment that respects their human dignity;
- monitor the quality of services provided by primary health clinics, hospitals and midwives to ensure that the care provided is culturally sensitive and respects women's human rights.

#### Community support schemes for pregnant women

In some Indonesian villages, small sums of money are collected regularly within the community to provide a fund to support pregnant women with transport costs to clinics, particularly for the birth. The schemes include arranging beforehand for transport providers to be ready at any time to transport the woman to the clinic.

## 2. Improve women's access to transport and communications infrastructure

Improving transport and communications infrastructure benefits all people in need of emergency treatment, and therefore contributes to reducing child mortality as well as improving maternal health. It may also contribute to reducing poverty by providing better access to information and markets. Strategies under Goal 8 to improve access to new technologies are relevant.

#### Mobile phones improve access to health care

Grameen Bank brought telephones to distant villages in Bangladesh. Loans were given to almost 139,000 poor rural women to pay for the phones, and radio and mobile phones are now in almost half the villages of Bangladesh. The women set up call centres in their homes where villagers pay a small fee for using the phone. The phones provide access to emergency care, and enable women to get information on health services, health care and other matters.<sup>145</sup>

Gender-responsive rights-based strategies to address this issue include:

- provide all women, including those in rural and isolated areas and poor women, with access to emergency delivery services for childbirth
- in isolated areas, organize communities to monitor the health of women during the last weeks of pregnancy and prepare emergency transportation and communication with qualified obstetric services in case of a difficult delivery;
- where technically feasible, provide at least one mobile or radio-phone for public use at a modest charge.

## 3. Involve men and communities in maternal health care

Women are often unable to access antenatal care and/or the services of a qualified midwife because of the decisions of male members of their households or of older women who are not

well-informed on the importance of these services for the health of women and their children. The support and active participation of men and communities is essential for the effective implementation of some of the suggested interventions to improve women's physical access to maternal health care.

Gender-responsive rights-based strategies to address this issue include:

- conduct information workshops or other events for men and communities on women's reproductive health, maternal health and the importance of antenatal care and for births to be assisted by a qualified midwife;
- conduct information workshops or other events for men and communities on women's rights, particularly women's reproductive rights, and on men's and communities' responsibilities to help reduce maternal mortality.

## D. National intermediate targets and indicators

Matrix 16 below suggests a range of national intermediate targets and indicators for improving maternal health, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

<b>Matrix 16: National intermediate targets and indicators for improving maternal health</b>	
<b>Targets</b>	<b>Indicators</b> (see note # below)
15.a Increase women's access to reproductive health services by 2 percent* per year until all women are covered	15.a.1 Average distance or time to nearest antenatal care clinic 15.a.2 Average waiting time for women attending clinics for antenatal care 15.a.3 Average distance or time to nearest midwife 15.a.4 Average distance or time to nearest qualified emergency obstetric care 15.a.5 Availability of ambulance or equivalent to transport women needing emergency obstetric care 15.a.6 Average cost of accessing antenatal care 15.a.7 Average cost of accessing services of a qualified midwife 15.a.8 Proportion of women accessing reproductive health services, by type of service and socio-economic category of women



Matrix 16: National intermediate targets and indicators for improving maternal health	
15.b	<p>Involve men and communities in maternal health care</p> <p style="margin-left: 40px;">15.b.1 Number of health education initiatives working with men and communities on maternal health care</p> <p style="margin-left: 40px;">15.b.2 Number of participants attending maternal health care workshops or events, by age and sex</p>
<p><i>* Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.</i></p> <p><i># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</i></p>	

# GOAL 6

## COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

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## Goal 6: Combat HIV/AIDS, Malaria and Other Diseases

Activity under Millennium Development Goal 6 usually focuses primarily on combating HIV/AIDS. This is partly because HIV-related illnesses or conditions are a major cause of death—in 2007, approximately 1.7 million adults and 330,000 children under 15 died of AIDS-related illnesses. Although sex-disaggregated data on deaths are not available, it is estimated that in late 2007, 50 percent of the 30.8 million adults living with HIV/AIDS were women. The focus on combating HIV/AIDS is also because of the immense publicity given to the campaign to fight the HIV/AIDS; the relatively good access to data for monitoring progress; and its economic and social impact, much of which falls on women and children.

*The Millennium Development Goals Report 2007* observed that prevalence had levelled off in the developing world, but 4.3 million people around the world were newly infected in 2006. The fastest rates of infection were in Eastern Asia and the Commonwealth of Independent States (CIS). In 2006, women were more than half of those living with HIV in the areas hardest hit by the virus.<sup>147</sup> Since HIV first appeared in Asia around 1988, approximately 2.6 million men, more than 950,000 women, and almost 330,000 children have died of AIDS-related diseases.<sup>148</sup>

Data on HIV and sexual behaviour trends among young people, which provide information on recent developments in and the likely path of HIV epidemics, are showing positive signs. HIV infections among 15–24-year-old pregnant women are used as an indicator of recent trends because the infections are likely to be relatively recently acquired and are influenced less by mortality and antiretroviral therapy compared with adult or all-age HIV prevalence. Analysis from 11 of 15 of the most affected countries with sufficient data to show recent trends revealed declining HIV prevalence since 2000/2001 among pregnant women aged 15–24 years attending antenatal clinics.

However, in terms of total deaths, deaths among women, the disease and care burden for individual women and the economic costs for countries, increased attention is needed to combating malaria and tuberculosis. Each year malaria kills approximately 10,000 pregnant women, and 200,000 children of pregnant women in malaria-endemic countries.<sup>149</sup> Between 350 and 500 million clinical episodes of malaria occur each year, resulting in over 1 million deaths. At least half of these are likely to be women. The economic costs are also high due to reduced productivity, which is estimated to result in an average loss of 1.3 percent of economic growth annually in countries with intense transmission.<sup>150</sup>

### HIV/AIDS cases are increasing in Asia

In 2007, an estimated 4.9 million people in Asia were living with HIV, including 440,000 people newly infected in the previous year. Approximately 300,000 people died from AIDS-related illnesses in 2007.

In East Asia, there were almost 20 percent more new HIV infections in 2007 than in the previous year. HIV prevalence was highest in South-East Asia, with varying trends among countries. Prevalence declined in Myanmar, Thailand and Cambodia but increased at a particularly high rate in Indonesia and Viet Nam. The proportion of people affected in India is less than previously estimated but the absolute numbers are large—2.5 million in 2006.

In Oceania, 75,000 people were living with the virus, 14,000 had been newly infected and 1,200 died of AIDS-related illnesses. Over 70 percent of those living with HIV were in Papua New Guinea, where the epidemic was still expanding, although at slightly lower levels than previously believed.<sup>146</sup>

Tuberculosis is responsible for around 2 million deaths each year. In Africa, it is the leading cause of death for people with HIV/AIDS. Again, more than half of these would be women, as women now comprise almost 60 percent of those with AIDS in sub-Saharan Africa. Other diseases such as dengue fever and bird influenza are significant threats to health in some countries but their relative impact on women is unknown due to the general lack of sex-disaggregated data in the health system.

<b>Matrix 17: Global target and indicators for combating diseases</b>	
<b>Targets</b>	<b>Indicators</b>
	<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>
6.A Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.1 HIV prevalence among the population aged 15-24 years) 6.2 Condom use at last high-risk sex 6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS 6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years  <i>Note that the focus on the age group 15-24 years is based on the need to identify recent trends.</i>
6.B Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it	6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs
6.C Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	6.6 Incidence and death rates associated with malaria 6.7 Proportion of children under 5 sleeping under insecticide-treated bednets and Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs 6.8 Incidence, prevalence and death rates associated with tuberculosis 6.9 Proportion of tuberculosis cases detected and cured under directly observed treatment short course

## A. Issues for a gender-responsive rights-based analysis

### 1. Women are more vulnerable to HIV infection

The main means of transmission for most women is heterosexual. In many countries, infection rates are rising more rapidly among women than men. The proportions of women living with HIV in Asia is growing as HIV is transmitted to the female partners of infected men, many of whom became infected through injecting drug use, or during unprotected paid sex or sex with other men.<sup>151</sup>

Women are biologically more susceptible to HIV infection. There is more of the virus in sperm than in vaginal secretions, so women are more likely to be infected by men than the reverse. Microlesions during intercourse, especially during violent intercourse, create entry points for the virus. Sexually transmitted infections also increase the risk of infection, as does poor nutrition.

Women are also socially and culturally more vulnerable because they are often expected to be ignorant about sexuality. In many cultures, women are expected to remain faithful within marriage, but men are not. When wives are socialized into not discussing sex, they are unable to protect themselves from HIV-infected husbands and may face violence if they raise questions on the subject, further increasing their vulnerability. Even when the husband is known to be infected, young women are often pressured to have unprotected sex in order to produce a child.

#### Men's knowledge of HIV helps protect women

One precondition for halting the epidemic is for people to understand how the virus is spread. The proportion of men aged 15-24 years who are sufficiently well informed varies widely across the region. It is high—over 45 percent—in Cambodia and Viet Nam, which have had some success in reducing transmission rates.<sup>152</sup>

### 2. Particular groups of women are especially at risk of HIV infection

Traditionally, HIV/AIDS programming has identified and targeted high-risk groups in terms of behavioural risk factors, particularly those related directly to modes of transmission such as sexual behaviour or drug use. However, broader aspects of social, economic or political vulnerability that result from power imbalances in gender and other social and economic relations are often overlooked.

Poor women, women in female-headed households with no adult male present, disabled women, homeless women and women in crisis and conflict situations are especially vulnerable to threats of forced sex that often carry an associated high risk of exposure to HIV infection.<sup>153</sup> For example, poverty may force women or girls to trade sex for food to feed their families, and prevent them from buying condoms or seeking treatment. Poverty, illiteracy or the social exclusion experienced by minority groups may limit access to information about HIV and methods of transmission, as well as to access to treatment and other services. Women migrant workers are also at risk because they tend to be excluded from programmes and services in destination countries.

The power imbalances that make women and girls disproportionately vulnerable to HIV/AIDS infection are even more pronounced during crisis, conflict and displacement, leading



to high risk of HIV infection among women in refugee and displaced populations.<sup>154</sup> Lack of power in gender relations is also a factor in the higher risk to adolescent girls and young women, particularly when sexual relations involve older men, or when women tend to marry at young ages and to marry men who are significantly older.

Women in these various risk groups need to be specifically targeted by HIV/AIDS programmes. However, they are very likely to be overlooked by or socially or economically excluded from prevention and treatment programmes.

### **3. Discrimination and stigma restrict sex workers' access to HIV/AIDS treatment and services**

One of the most prominent risk groups is sex workers, who often face discrimination and stigma. A recent estimate suggests that up to 10 million Asian women sell sex and at least 75 million men buy it regularly.<sup>155</sup> Sex workers are thus a major focus of HIV/AIDS programming because of their perceived role as a potential source of infection. In fact, the biological evidence is that it is equally or more likely that men are infecting the sex workers.

Sex workers are also a major group of women with specific issues and needs in relation to human rights, reproductive health, and support and treatment for those who are HIV-infected. They often face discrimination and stigma and in some countries they are criminalized. Studies have found strong prejudice against people living with HIV in health services in Asia. Although sex workers are widely targeted for preventive strategies, their needs tend to be overlooked in reproductive health and HIV/AIDS support and treatment programmes.

### **4. Married women are also a risk group needing attention**

It took some time before it was recognized that a major factor in the spread of HIV was transmission from infected men to their wives. As a result, in many countries women are now more than half of those with HIV/AIDS. However, they continue to face greater stigmatization, poorer access to information and treatment and continuing abuses of their human rights. Wives of migrant workers, fishermen or other men who normally work far from their homes for extended periods are at particular risk.

A 2008 report on HIV/AIDS in Asia noted that the most sensible way to prevent HIV infection from increasing among women was to prevent husbands from becoming infected. However, it also observed that there had been few attempts to provide relevant programmes.<sup>158</sup>

#### **Married women are at risk**

Men who buy sex, most of who are from 'mainstream' society, are the single most powerful driving force in Asia's HIV epidemics and constitute the largest infected population group. Because most men who buy sex either are married or will get married, significant numbers of ostensibly 'low-risk' women who only have sex with their husbands are exposed to HIV. Effective means of preventing HIV infections in the female partners of these men have yet to be developed in Asia, but are clearly essential.<sup>156</sup>

For example, in Papua New Guinea married women account for half of all new infections. Married women also account for 39 percent in of new infections in Thailand and 46 percent in Cambodia.<sup>157</sup>



There is little HIV/AIDS-related data available on married women and men to provide a foundation for such programmes. HIV/AIDS surveys rarely collect data from the general population but focus on subgroups who are relatively accessible and often also represent specific target groups—such as military conscripts, sex workers, pregnant women and people living with AIDS seeking antiretroviral therapy. Some data have been obtained from fishermen and migrant workers and their wives—considered at particularly high risk—but these do not represent the main population of husbands and wives now recognized as needing attention in Asia.

### 5. Women need improved access to barrier methods to prevent HIV infection

Because of gender and other forms of inequality on the balance of power in sexual relations, women and girls need a safe contraceptive method that they can initiate and control. Women often find it difficult to ensure that their partners use condoms, particularly within marriage. Currently, the female condom is the only available method that protects against both unwanted pregnancy and sexually transmitted infections, including HIV, and that women and girls can initiate and to some extent control. It is therefore an important supplement to the male condom.

More than 19 million female condoms have been distributed in 70 countries through a public/private partnership brokered by UNAIDS in Africa, Asia and Latin America. UNAIDS also promotes the female condom through a programme addressing HIV/AIDS in the workplace. However, it is still not readily available and is much more expensive than the male condom—too expensive for poor women.

### 6. Women need protection from discrimination due to their HIV/AIDS status

HIV/AIDS programmes are often gender-blind and may even discriminate against women. Ante-natal testing for HIV/AIDS is one example. Pregnant women are often tested for the infection without their informed consent and without post-test counselling because they are a convenient sub-population for sentinel surveys and because of concern about mother to child transmission. This is an abuse of their human rights.

When a man contracts HIV, his wife is likely to be stigmatized as the source, although the reality is probably that he infected her. The wife is likely to be ostracized by her family and community and may suffer violence from her husband and/or his family.

Health providers also often have discriminatory attitudes to men and women with HIV, primarily because they fear that they may become infected through contact. Pregnant women who are HIV positive are often

#### Women are especially subject to HIV-related stigma

An APN+ study looked at AIDS-related discrimination in 2001-02 in India, Indonesia, the Philippines and Thailand. It found that significantly more women than men with AIDS had:

- experienced harassment and ridicule;
- been physically assaulted;
- been refused entry to or asked to leave a public place;
- been forced to change their place of residence;
- been excluded from family activities;
- lost financial support from family members;
- been advised not to have a child;
- been coerced into an abortion or sterilization; or
- had their child(ren) forcibly taken from them because of their HIV status.<sup>159</sup>



coerced into an abortion or sterilization, and single and widowed women with HIV/AIDS are especially subject to stigma and discrimination, leading to violations of their human rights.

### 7. Women bear the main responsibility of care for family members with HIV/AIDS

As the main carers of dependants generally, women are the main carers of family members with HIV/AIDS. This can be an enormous burden in terms of the amount of time required and the heavy nature of the work, such as lifting the patient and carrying the large amounts of water needed for care. The burden is compounded by the reduction in time to earn an income to provide a livelihood for the family, particularly since it is usually the husband who is infected first and thus most likely to be the first in need of care. Children, particularly girls, may have to take on the breadwinner role. Women who are suffering from the disease themselves still have to care for their ailing husbands and their children.

The burden of care affects three generations of women. Initially, the woman cares for her infected husband. She is also likely to become infected herself, and to later require care from her mother or eldest daughter. When both parents eventually die, the eldest daughter or an aged grandmother will have to care for the orphaned children. This often includes finding work to provide a livelihood for the family. This is a particular burden for grandmothers, as they are often in ill health themselves, and frequently poor because of the lack of education for women of their generation. For the eldest daughter, the need for immediate income combined with domestic responsibilities means she will be unable to attend school and will have to take poorly paid work, thereby contributing to the inter-generational transmission of poverty.

### 8. Tuberculosis is a major killer of women, but they are less likely than men to obtain treatment

Tuberculosis still kills almost two million people a year worldwide. Despite the availability of curative treatment for three decades, the incidence is on the rise in many countries. Under the Global Plan to Stop TB, the international target is to detect 70 percent of pulmonary sputum positive cases, and to treat 85 percent of these successfully.<sup>162</sup>

More women die each year of tuberculosis than of all maternal mortality causes combined. Biologically, women are at greater risk of tuberculosis than men, and they progress faster from infection to active tuberculosis. Tuberculosis is the single biggest killer of young women.

People with tuberculosis often

#### Stigma affects women with tuberculosis in Viet Nam and India

Stigma was reported as a major concern for women with tuberculosis in Viet Nam. Women in Viet Nam feared stigma more than men, so much so that they would often opt to isolate themselves to avoid stigmatizing interactions.<sup>160</sup>

A study in India found that married women living with their parents-in-law were most vulnerable to stigma—28 percent of those affected by tuberculosis. Many were treated normally by their in-laws until the disease was diagnosed. Once tuberculosis was diagnosed, they were often sent back to their natal home. Unmarried females often sought treatment at a distant centre because they feared public knowledge of the diagnosis would make it difficult for them to find a marriage partner.<sup>161</sup>

face social stigma. Every year, 300,000 children are forced to leave school because their parents have tuberculosis, and 100,000 women are divorced or abandoned and often lose access to their children because of the social stigma.<sup>163</sup>

As a result of this stigma, many women in developing countries fail to seek diagnosis or treatment for tuberculosis. Men face less stigma and are more likely to be supported by their families, visit a doctor, be diagnosed, treated and cured. Women are more likely to 'ignore their symptoms and just hope they will go away.'<sup>165</sup>

Cost is another factor in why women do not seek treatment. Under the 'Directly Observed Treatment Short Course' (DOTS) recommended by WHO, patients are given drugs at a clinic on alternate days over six months meaning there are significant costs in health care providers, travel and opportunity costs such as lost income. Surprisingly, those women who do accept the DOTS regime are more likely to complete it than men, perhaps because they are socialized to be more compliant.<sup>166</sup>

#### **Women are less likely to receive treatment for tuberculosis**

An Indian study found that women following the DOTS programme would have to travel up to 15 km for six months on alternate days to get the necessary drugs. Most of those surveyed—69 percent—reported that visiting health centres was not convenient because they had to care for small children, travel was too expensive, and transport was a problem. Cultural factors also played a role as women were restricted from travelling alone or spending money on their own health.<sup>164</sup>

In spite of their increased biological risk, the reported incidence of tuberculosis among women is nearly always lower than for men. It remains unclear whether, and to what extent, these differences are a true reflection of disease incidence; a result of women's reluctance to seek diagnosis due to stigma and costs; or an indication of health system failures to detect and report female cases.

### **9. Sex-disaggregated data on malaria are needed to help increase treatment rates among women**

Each year, 300 to 500 million people develop malaria and 1.5 to 3 million—mostly children—die<sup>168</sup>. In malaria-endemic countries, approximately 50 million women become pregnant each year, of whom more than half live in tropical Africa. Malaria infection during pregnancy results in the deaths of an estimated 10,000 women and 200,000 infants. Severe malarial anaemia contributes to more than half of these deaths.

#### **Sex-disaggregated data are not generally available for malaria**

Sex-disaggregated data were not available for China, Lao PDR, Pakistan, Papua New Guinea, the Philippines or Viet Nam. Males comprised 55 percent in Bangladesh, 70 percent of adult cases in Cambodia, 59 percent of reported cases in India, 52 percent of reported cases in Nepal and 58 percent in Sri Lanka.<sup>167</sup>

Tuberculosis prevalence rates are high in Southeast Asia, where the disease accounts for between 4.3 and 7.2 percent of all deaths.<sup>169</sup> Tuberculosis mortality among women is also high relative to other regions.<sup>170</sup>

Despite the size of the problem evidenced by these statistics, most data on the prevalence or incidence of malaria are not disaggregated by sex. Until recently almost the entire literature on women and malaria was focused on pregnant women, since child deaths are the major share of total deaths from malaria. However, a few studies have begun to identify and examine differences in the biology and sociology of tuberculosis between females and males. An important initiative in this regard is WHO *Gender in Tuberculosis Research 2005*<sup>171</sup>. Women's and men's different work, leisure and sleeping patterns may result in different levels of exposure. In some countries, women have less access to treatment due to distance/time to health centres, lack of cash income and transport.<sup>172</sup>

Some countries under the Malaria Rollback Programme did provide reported cases by sex in the *World Malaria Report 2005*. These data are usually obtained from health clinics and thus reflect treatment rates. In Asia, they were universally lower for women than for men. There are no epidemiological data to suggest that women are less likely to be infected by malarial parasites, which suggests that women are less likely than men to obtain treatment for the disease.

## B. National long-term targets and indicators

Matrix 18 below suggests a range of long-term targets and indicators for combating HIV/AIDS, malaria and other diseases, based on the preceding gender-responsive rights-based analysis of Goal 6. The target and indicators should be adapted and added to so that they are relevant and useful for the individual country.

Relevant targets and indicators are also covered under goals 1, 2, 3, 4, 5 and 7. For example, the proportion of households without access to safe water and sanitation is an obvious factor increasing the burden for women caring for family members with HIV/AIDS or suffering from malaria or tuberculosis. Strategies under Goal 3 to improve sexual and reproductive rights for women are also very relevant to the prevention of HIV/AIDS.

Women's groups should ensure that data and references to HIV/AIDS, malaria and other diseases in CEDAW country reports are used in the process of developing national and subnational targets and indicators. The responses of the CEDAW Committee on these matters to the most recent country report may also be useful in providing a global and rights-based perspective.

The relevant sections of the Beijing Platform and National Action Plans based on the Platform also provide information on government commitments to women and gender equality under Critical Areas of Concern B ('Education and Training of Women'), C ('Women and Health') and D ('Violence Against Women').

<b>Matrix 18: National long-term targets and indicators for combating diseases</b>	
<b>Targets</b>	<b>Indicators (see note # below)</b>
<b>HIV/AIDS</b>	
L6.A Increase use of HIV/AIDS prevention strategies, especially those that protect women, and increase access to the female condom by 2 percent* each year until usage is equal to that of the male condom	<p>L6.A.1 Proportion of males using a condom at their last high-risk heterosexual encounter</p> <p>L6.A.2 Proportion of female sex workers using a condom with their last client</p> <p>L6.A.3 Proportion of married men using condoms within marriage</p> <p>L6.A.4 Proportion and/or number of women using female condoms</p> <p>L6.A.5 Proportion of married women who are able to discuss sexuality with their husbands</p>
L6.B Increase women's access to confidential HIV-testing and counselling so that it is available to all women by 2015	<p>L6.B.1 Number of women tested for HIV with their informed consent</p> <p>L6.B.2 Ratio of women to men tested for HIV with their informed consent</p> <p>L6.B.3 Number of women testing HIV positive who are given post-test counselling</p> <p>L6.B.4 Ratio of women to men testing HIV positive who are given post-test counselling</p>
L6.C Increase access for women with HIV/AIDS to effective antiretroviral therapy by 2 percent* each year until it reflects the proportion of women with HIV in the population	<p>L6.C.1 Number of women with HIV/AIDS receiving antiretroviral drugs</p> <p>L6.C.2 Ratio of women to men with HIV/AIDS receiving antiretroviral drugs</p>
L6.D Raise the awareness of policy makers, particularly in the health sector, and of health professionals on the greater biological, economic and social vulnerability of women to HIV/AIDS	L6.D.1 Gender-responsive policies are instituted and gender-responsive programmes addressing women's needs are developed and adequately funded
L6.E Improve women's health in areas related to risk factors for HIV/AIDS	<p>L6.E.1 Proportion of women and men in high-risk groups affected by sexually transmitted infections</p> <p>L6.E.2 Number of females and males receiving treatment for sexually transmitted infections</p> <p>L6.E.3 Body mass index of women with HIV/AIDS</p> <p>L6.E.4 Prevalence of iron anaemia among women with HIV/AIDS</p>
L6.F Support the human rights of women with HIV/AIDS	L6.F.1 Number of women with HIV/AIDS who are employed

<b>Matrix 18: National long-term targets and indicators for combating diseases</b>	
	L6.F.2 Number of support groups formed for women with HIV/AIDS and adequately funded by donors, governments or other funding sources
L6.G Improve women's knowledge of reproduction and sexuality	<p>L6.G.1 Percentage of females and males aged 15-24 with comprehensive correct knowledge of HIV/AIDS</p> <p>L6.G.2 Ratio of females to males aged 15-24 with comprehensive correct knowledge of HIV/AIDS</p> <p>L6.G.3 Percentage of females and males aged 15-24 with adequate knowledge of reproduction and sexuality</p> <p>L6.G.4 Ratio of females to males aged 15-24 with adequate knowledge of reproduction and sexuality</p> <p>L6.G.5 Percentage of women aged 15-24 able to discuss reproduction and sexuality with partners or potential partners</p> <p><i>As noted previously, these indicators focus on young women as indicative of trends among women in general</i></p>
L6.H Improve knowledge of reproduction and sexuality among married women in particular.	<p>L6.H.1 Percentage of married females and males with comprehensive correct knowledge of HIV/AIDS, by age</p> <p>L6.H.2 Ratio of married females to males with comprehensive correct knowledge of HIV/AIDS</p> <p>L6.H.3 Percentage of married females and males with adequate knowledge of reproduction and sexuality, by age</p> <p>L6.H.4 Ratio of married females to males with adequate knowledge of reproduction and sexuality, by age</p> <p>L6.H.5 Percentage of married women able to discuss reproduction and sexuality with partners or potential partners, by age</p>
<b>Malaria</b>	
L6.I Improve women's access to treatment for malaria by at least 5 percent* per year until all women with malaria symptoms are receiving prompt and effective treatment	<p>L6.I.1 Number of women receiving treatment for malaria</p> <p>L6.I.2 Ratio of women to men receiving treatment for malaria</p>

<b>Matrix 18: National long-term targets and indicators for combating diseases</b>	
L6.J Increase women's access to preventive measures for malaria by at least 5 percent* each year until all women in malaria-affected areas are using effective preventive measures	L6.J.1 Proportion of women in affected areas sleeping under treated anti-malarial nets, disaggregated by age  L6.J.2 Ratio of women to men in affected areas sleeping under treated anti-malarial nets, disaggregated by age
<b>Tuberculosis</b>	
L6.K Increase women's access to treatment for tuberculosis by at least 5 percent* per year until all women with tuberculosis symptoms are receiving effective treatment	L6.K.1 Number of women receiving treatment for tuberculosis  L6.K.2 Ratio of women to men receiving treatment for tuberculosis
L6.L Reduce the stigma faced by women affected by tuberculosis	L6.L.1 Increased awareness among the public of the importance of treating women who have tuberculosis, and of the benefits to their families and communities
<p>* Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.</p> <p># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</p>	

## C. Gender-responsive rights-based strategies

### 1. Ensure an appropriate share of the national budget is allocated to health

The shares of GDP and the national budget allocated to the health sector are quite low in many countries, including some with serious public health problems and high levels of HIV, tuberculosis and malaria infection. In many cases, the share of health in the national budget needs to be increased in order to achieve national health goals. Currently, the health sector share averages 7 percent in high income countries, 3 percent in middle income countries, 2 percent in East Asia and the Pacific, and 1 percent in low income countries and in South Asia.<sup>174</sup>

#### The proportion of national resources spent on health varies

The proportion of GDP spent on health in Asia in 2004 ranged from a low of 2 percent in Pakistan and around 3 percent in Bangladesh, Indonesia, and Philippines to 7 percent in Cambodia and 11 percent in Timor-Leste. The proportion of public expenditure in total health expenditure varied from a low of 17 percent in India, 20-30 percent in Bangladesh, Cambodia, Lao PDR, Pakistan and Viet Nam to 34 percent in Indonesia, 60-65 percent in Bhutan and Thailand and 79 percent in Timor-Leste.<sup>173</sup>

In other cases, it is the share of health expenditure directed to public health programmes which may need to be increased. Currently, this share averages around 60 percent in high income countries, 50 percent in middle income countries, around 40 percent in East Asia and the Pacific, 25 percent in low income countries and below 20 percent in South Asia.

Health allocations also need to be spent effectively and to reach all sectors of society, including females and vulnerable groups, who also include women and girls. With the high cost of drug treatments for HIV and tuberculosis, striking an appropriate balance between prevention and treatment is a critical issue, particularly in poor countries with large disease burdens. In 2004, more than 80 percent of people in developing countries paid for out-of-pocket health expenses compared with only 37 percent in high income countries.<sup>175</sup>

Gender-responsive rights-based strategies to address this issue include:

- with the help of gender budget experts working with the Ministry of Finance and the budget section of the health department and based as far as possible on analysis of sex-disaggregated data to identify the main diseases affecting women, conduct a gender analysis of the health budget for HIV/AIDS and other major diseases in the population;
- when the results of the gender analysis indicate that it is needed, increase the allocation of resources to health, and/or to programmes benefiting women;
- in particular, assist women's groups to use the results of gender analysis to lobby the national AIDS council to integrate gender concerns into HIV/AIDS programmes.

## 2. Raise awareness of women's greater vulnerability to HIV/AIDS

Decision makers and health professionals need to understand the various factors—biological, economic, social and cultural—that make women more vulnerable to HIV infection and to the burden of HIV/AIDS-related conditions and care, and the need for special programmes to protect and support them.

Since women's access to treatment will be affected more by costs than men's due to their lower incomes, free or heavily subsidized distribution is essential for poor women. In countries subject to the epidemic, this will require well-informed economic policy makers and appropriate macro economic policies.

### **Countries facing an HIV epidemic need appropriate economic policies to finance treatment for all, including women**

A recent paper argues that any adverse macroeconomic effects of a large scaling up of HIV/AIDS financing can be prevented by proper exchange-rate management, including frontloading aid, building up a modest stock of foreign exchange reserves and refraining from over-reacting to initial moderate increases in inflation and the value of the exchange rate.<sup>176</sup>

Policy makers in other sectors, community leaders and employers also need to understand how factors within their influence may increase women's vulnerability to HIV/AIDS, or to the impact of HIV/AIDS on them. For example, the provision and location of safe water can have a major impact on women caring for family members with HIV/AIDS. Women living with HIV/AIDS are also at greater risk of discrimination, harassment and violence in the workplace



and therefore need special attention and protection from employers and human resources managers.

Gender-responsive rights-based strategies to address this issue include:

- produce information materials and public campaigns adapted to the various decision-making groups;
- facilitate consultations between groups of women with HIV/AIDS and the target groups identified above;
- establish a parliamentary committee to consider the rapidly rising rate of infection among women, particularly married women, and develop measures to address it.

### 3. Reduce women's risk factors for exposure to HIV/AIDS

Improved reproductive health for women and better nutrition help reduce women's biological, social and economic vulnerability to HIV and protect them from infection. Women's risk of exposure to HIV/AIDS is increased by poverty, poor nutrition, low levels of education, illiteracy, lack of information on HIV/AIDS, lack of knowledge about sexuality and inability to discuss it with sexual partners, and lack of empowerment among women in general and sex workers in particular to negotiate safe sex with partners and clients. These are addressed under Goals 1, 2, 3 and elsewhere in this section.

Policy makers in non-health sectors, employers and community leaders also need to be more aware of the factors which increase women's vulnerability.

Gender-responsive rights-based strategies to address this issue include:

- implement information campaigns on sexually transmitted infections to address women and specific high-risk groups, including wives of migrant workers;
- establish clinics for the treatment of sexually transmitted infections that are separate for women and men, readily accessible and provide privacy for those seeking treatment;
- direct information campaigns on good nutrition and measures to reduce iron anaemia to women with HIV/AIDS and women in high risk groups, including wives of migrant workers.

### 4. Improve and protect women's access to treatment for HIV/AIDS

In an increasing number of countries, women are now more than half of the population living with HIV. The majority of those receiving antiretroviral therapy for HIV/AIDS should therefore be women.

The data available to *Progress on Global Access to HIV Antiretroviral Therapy* in June 2005 showed little discrimination. Although this is encouraging, prevailing

#### **In many countries, both women and men are receiving treatment**

Available disaggregated data do not suggest wide disparities between men and women accessing treatment. In the WHO EURO region, for example, access appears equitable, with 28 percent of registered cases among women and women being 32 percent of people on antiretroviral therapy. In sub-Saharan Africa, nearly 6 of 10 adults on treatment are women. This reflects an equitable distribution because more women are infected than men.<sup>177</sup>

cultural attitudes could still result in the health needs of men being given priority over those of female family members, particularly where resources are limited. Barriers continue to restrict access to treatment and care for marginalized groups, such as injecting drug users and sex workers.

Gender-responsive rights-based strategies to address this issue include:

- make antiretroviral therapy free of charge or heavily subsidized, and address the indirect costs of access;
- ensure that distribution programmes for antiretroviral drugs target women and monitor their participation;
- consult women with HIV/AIDS and conduct a gender analysis of the methods of distribution to minimize barriers to women's participation;
- record, disseminate and analyse data on women's and men's participation in distribution programmes for antiretroviral drugs;
- monitor the data on women's and men's participation in distribution of antiretroviral drugs and use it to increase women's access to match their proportion of the total population with HIV/AIDS;
- include screening, prevention and treatment of opportunistic infections and HIV-related conditions such as cervical cancer as part of a treatment package for HIV positive women and girls.

## 5. Eliminate discrimination and stigma against women living with HIV

Women living with HIV are particularly subject to discrimination, stigma and sometimes violence, partly because they are often believed to be the main transmitters of sexually transmitted infections. Such beliefs and traditional attitudes to sex, blood and the transmission of other diseases provide a basis for the further stigmatization of women with HIV.

Women living with HIV tend to be blamed for the behaviour that resulted in their infection, while men are excused. Some women are abandoned by the husbands who infected them, while others are rejected by their families and communities.<sup>178</sup>

Gender-responsive rights-based strategies to address this issue include:

- conduct awareness campaigns with employers to assist women living with HIV to obtain employment;
- conduct awareness campaigns in the workplace to reduce stigma and discrimination from colleagues;
- conduct awareness campaigns in schools, and particularly with teachers, to promote the rights of HIV-positive women to reduce stigma and discrimination against girls who are HIV-positive or whose parents are infected.

## 6. Protect the human rights of women with HIV/AIDS

All measures to prevent HIV/AIDS need to be carefully reviewed from a rights perspective. Sometimes programmes or laws intended to protect women, such as testing pregnant women for HIV without their voluntary and informed consent, may actually discriminate against them.

### The reproductive rights of women with HIV should be protected

Some countries, such as Cambodia, criminalize any person who, while aware of having HIV, transmits it to others. While intended to protect women from men who knowingly passing the virus to them, it can be—and has been—used against women who wish to have a child.<sup>179</sup>

Gender-responsive rights-based strategies to address this issue include:

- stop mandatory testing of pregnant women and replace it, where possible, by voluntary testing of couples and couple counselling;
- ensure that women living with HIV have the right to have children if they wish;<sup>180</sup>
- ensure that women living with HIV have the right to an abortion if they want it;<sup>181</sup>
- outlaw sterilization of women living with HIV unless each woman gives her full, informed and unpressured consent;<sup>182</sup>
- assist women living with HIV/AIDS to establish self-help groups to advocate for their rights and initiate group actions where necessary.

## 7. Support primary caregivers for people with AIDS, and children orphaned by AIDS

The majority of primary caregivers are women, including girls and grandmothers. The physical burden of care is so heavy that it leaves little time or energy for economic activity to provide a livelihood for the family.

Gender-responsive rights-based strategies to address this issue include:

- encourage communities to provide collective support; in particular, by assisting girls in affected families to continue their education; and poor grandmothers to obtain financial support for themselves and the children they care for;
- work with primary caregivers, especially older women, to help them manage both their care responsibilities and earning a livelihood for the family;
- ensure that girls who are primary caregivers or orphans are able to receive education to at least junior secondary level through stipends, distance learning or informal schooling;
- where the number of children orphaned by AIDS is large, organize the children into self-help families and communities and, as far as possible, ensure that schooling is provided locally;
- provide piped water to the homes of women caring for people with HIV/AIDS—this would significantly reduce their burden due to the large amount of water required for care.

## 8. Reduce the stigma and discrimination experienced by women with HIV/AIDS and tuberculosis

Stigma—negative thoughts about a person or group based on prejudice or fear—can lead to discrimination—action resulting from stigma where someone is treated unjustly on the basis of their actual or presumed HIV status or their actual or perceived membership of a particular group. HIV/AIDS-related stigma builds on and reinforces other prejudices, reinforcing existing social inequalities – especially those of gender, sexuality, class and ethnicity. Stigma often leads to violations of human rights.<sup>183</sup>

In a number of countries, women with tuberculosis are stigmatized because there is a perception that they should not be preparing or serving food. As this is their traditional gender role, their “value” is perceived to be significantly lowered. Men with tuberculosis are not subject to the same stigma, as they do not traditionally prepare food. This stigma is one of the main reasons for women failing to attend clinics for tuberculosis testing and treatment.

A rights-based and gender-responsive approach to removing stigma is therefore essential. Communities, policy makers and health professionals must respect the human rights of people with HIV/AIDS or tuberculosis and address the particularly difficult issues facing women in this situation.

Gender-responsive rights-based strategies to address this issue include:

- conduct awareness-raising among communities, particularly men, on the causes and consequences of stigma and the human rights of those experiencing it, including the specific issues of women, emphasizing the costs to families and the community as a whole of the consequences of stigma, and addressing the fears and/or prejudices which underlie the stigma;
- target awareness-raising to policy makers, health professionals, and communities and draw special attention to stigma among high-risk groups including injecting drug users, prisoners, sex workers and indigenous people, emphasising that the failure of programmes to prevent and eliminate these diseases is a principle consequence of stigma;
- involve women with HIV/AIDS and/or tuberculosis in programmes to address stigma and its consequences.

## 9. Improve knowledge of women's reproduction and sexuality among both women and men

HIV and sexual and reproductive health are closely linked. Most HIV infections are sexually transmitted or associated with pregnancy, childbirth and breastfeeding. Women and girls need adequate knowledge about both reproduction and sexuality, as well as empowerment to use this knowledge to protect themselves against HIV infection and, if infected, to manage their lives and preserve their health. Men's knowledge of reproduction and sexuality can help protect women from infection and support women's reproductive rights.

In addition to those proposed under Goal 3, gender-responsive rights-based strategies to address this issue include:

- develop and widely distribute through health clinics, schools and workplaces information on women's reproduction and sexuality and use radio and TV to reach illiterate women and those with low levels of education;

- develop and widely distribute through men's clinics, schools and workplaces information on women's reproduction and sexuality and reproductive rights that specifically seeks to inform men;
- support NGOs to develop and present innovative ways of presenting information on women's reproduction and sexuality and reproductive rights to communities, such as through drama, music and other forms of entertainment.

#### 10. Involve men in protection and support for women with HIV/AIDS, tuberculosis or malaria

Men are not the only, or perhaps even the primary, sources of stigma and discrimination against women with HIV/AIDS or tuberculosis. However, men could be a more important source of support and protection for these women, in particular by ensuring that women receive the care and treatment they need. Discrimination against women has been shown to be widespread among health staff, many of whom are men. The apparently lower treatment rates for women with malaria and tuberculosis compared with men may be partly the result of such discriminatory attitudes that discourage women from seeking treatment, as well as discriminatory attitudes within families that limit their access to treatment. Involving men, including medical staff and at community level, will help to change such attitudes and reduce stigma and discrimination.

In addition to the measures targeting men under the sections above on reducing stigma and discrimination, and improving knowledge of women's reproductive health and sexuality, gender-responsive rights-based strategies to address this issue include:

- develop programmes to involve male relatives of women living with HIV/AIDS and/or tuberculosis in their support and care, stressing the benefits of successful treatment to families and the community;
- develop programmes with male community leaders to advocate with families in their community to ensure that female family members with HIV/AIDS and/or tuberculosis receive appropriate care and treatment, again emphasizing the benefits to the families and the community;
- analyse the causes of violence against women with these diseases, and work in communities, workplaces etc to develop preventative measures.

#### 11. Improve women's timely access to treatment for malaria

Time is a critical factor in the treatment of malaria, especially children. Prompt and effective treatment can halve death rates. The timeliness of treatment can be significantly improved by bringing diagnosis and treatment closer to families, including by enabling women to diagnose and treat malaria within their own home.

Gender-responsive rights-based strategies to address this issue include:

- reduce travel costs by ensuring that local health clinics provide appropriate treatment;

##### **Mothers can provide effective anti-malarial treatment for their children if trained**

Two studies published in *The Lancet* showed that training mothers in African villages in early diagnosis of malaria symptoms reduced mortality by 30 to 40 percent, compared to using community health workers.<sup>184</sup>

- develop village-based distribution systems for effective anti-malarial treatments that are supplied and monitored by the health system;
- provide training and involve women suffering from malaria in such village-based distribution systems;
- train mothers to identify the symptoms of malaria and initiate appropriate treatment;
- in conjunction with this training, provide anti-malaria medication that can be administered immediately in homes.

## D. National intermediate targets and indicators

Matrix 19 below suggests a range of national intermediate targets and indicators for combating HIV/AIDS, malaria and other diseases, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

<b>Matrix 19: National intermediate targets and indicators for combating diseases</b>	
<b>Targets</b>	<b>Indicators (see note # below)</b>
16.a Where it is low, increase the share of GDP spent on health to at least 4 percent*, and the share of public health expenditure to at least 50 percent* of total expenditure on health	16.a.1 Total expenditure on health as a percentage of gross domestic product ( <i>World Bank health indicator</i> )
	16.a.2 Government expenditure on health as a percentage of total expenditure on health ( <i>World Bank health indicator</i> )
16.b Increase the share of the health budget for programmes for women and for women's priorities, including prevention and treatment of HIV/AIDS, tuberculosis and malaria, by 2 percent* each year until incidence trends decline	16.b.1 Gender analysis of the health budget
	16.b.2 Total expenditure on preventive and primary health care as a percentage of total health budget
	16.b.3 Total expenditure on reproductive health care as a percentage of the total health budget
	16.b.4 Total expenditures on programmes for prevention and treatment of HIV/AIDS, tuberculosis and malaria as a percentage of the total health budget
16.c Reduce risk factors for women for exposure to HIV	16.c.1 Rates of sexually transmitted infections, by sex ( <i>from epidemiological surveys</i> )
	16.c.2 Number of specialist facilities established for sexually transmitted infections
	16.c.3 Number of women attending clinics for treatment of sexually transmitted

Matrix 19: National intermediate targets and indicators for combating diseases		
		infections
	16.c.4	Number of men attending clinics for treatment of sexually transmitted infections
16.d	Improve and protect women's access to antiretroviral therapy for HIV	<p>16.d.1 Number of antiretroviral therapy distribution programmes that have undertaken gender analysis of their distribution processes</p> <p>16.d.2 Number of women with HIV/AIDS involved in antiretroviral therapy distribution programmes</p> <p>16.d.3 Number of women in stigmatized groups receiving antiretroviral therapy</p>
16.e	Women's rights respected and protected for women and girls with HIV/AIDS	<p>16.e.1 In countries with high rates of HIV infection, inclusion of data and analysis on the situation of women with HIV/AIDS in the country CEDAW report and on the situation of girls in the country CRC report</p> <p>16.e.2 Number of cases of violations of rights of women or girls with HIV/AIDS and their outcomes</p>
16.f	Primary caregivers for people with HIV/AIDS are supported	<p>16.f.1 Data available and monitored by the welfare department on HIV/AIDS primary caregivers by number, age, sex, education and relationship to person with HIV/AIDS</p> <p>16.f.2 Social safety net available for aged caregivers and number of people using it, by age and sex</p>
16.g	Girls who become caregivers or are orphaned by AIDS are supported and attend school to at least junior secondary level	<p>16.g.1 Number of girls in families with HIV/AIDS, or orphaned by AIDS, who attend school or receive equivalent education through alternative sources</p> <p>16.g.2 Number of girls in families with HIV/AIDS, or orphaned by AIDS, who complete schooling to junior secondary level</p>
16.h	Reduce the stigma experienced by women with HIV/AIDS and/or tuberculosis	16.h.1 Number of women seeking diagnosis and treatment for HIV/AIDS and tuberculosis each year ( <i>the number should increase over time if stigma is reduced</i> )
16.i	Improve knowledge of women's reproduction and sexuality among both women	16.i.1 Number of women and men of reproductive age (15-49) who have adequate knowledge of women's



Matrix 19: National intermediate targets and indicators for combating diseases		
and men		reproduction and sexuality 16.i.2 Ratio of women to men of reproductive age (15-49) who have adequate knowledge of women's reproduction and sexuality <i>Data could be obtained from a fertility survey that interviews both women and men</i>
16.j	Increase the number of men involved in providing support and protection for women with HIV/AIDS, tuberculosis or malaria	16.j.1 Number of men participating in health system programmes to support women with HIV/AIDS, tuberculosis or malaria 16.j.2 Number of male community leaders participating in health system programmes to support women with HIV/AIDS, tuberculosis or malaria 16.j.3 Number of men's groups working to eliminate violence against women and girls with HIV/AIDS, tuberculosis or malaria
16.k	Improve women's access to treatment for malaria and tuberculosis	16.k.1 Number of women seeking diagnosis and treatment for tuberculosis or malaria ( <i>see also indicator 8.8.1</i> ) 16.k.2 Number of women trained to diagnose and treat malaria 16.k.3 Number of women involved in distribution of anti-malarial treatments
<p>* <i>Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.</i></p> <p># <i>All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</i></p>		

# GOAL 7

## ENSURE ENVIRONMENTAL SUSTAINABILITY

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## Goal 7: Ensure Environmental Sustainability

In recent years, the global community has come to recognize the importance of the environment to the wellbeing of all countries and people in the world. Climate change, sustainable development and biodiversity are all high on the political agenda in both industrialized and developing countries. Environmental sustainability—defined as meeting current human needs without undermining the capacity of the environment to provide for those needs in the long term—is essential to achieving all of the other Millennium Development Goals. Environmental sustainability requires a stable environment that provides resources such as freshwater, food, clean air, wood, fisheries, and productive soils on a regular and predictable basis and protects people from floods, droughts, pest infestations, and disease.

Many people living in developing countries face more immediate dangers in their physical environment. At the end of 2004, 18 percent of the world's population lacked access to safe drinking water and 40 percent lacked access to adequate sanitation.<sup>185</sup> Almost half of the world's population lack access to latrines and are unable to practise such basic hygiene as washing their hands in safe water.<sup>186</sup> Each year, more than 2.2 million people in developing countries die from preventable diseases associated with lack of access to safe drinking water, inadequate sanitation and poor hygiene.<sup>187</sup> More than 90 percent of slum dwellers live in developing countries and include one out of every three city dwellers – one sixth of the world's population.<sup>188</sup> The largest share of the world's slum dwellers live in South Asia, followed by East Asia. China and India combined have 37 percent of the world's slums.<sup>189</sup>

In the 2007 review of the MDGs, the indicator for improving the lives of slum dwellers—the proportion of households with access to secure tenure—was replaced by a proxy indicator focusing on access to water supply; sanitation; overcrowding defined in terms of the number of persons per room; and the durability of construction materials used for the dwelling. A new target of reducing biodiversity loss was also added.

Matrix 20: Global targets and indicators for environmental sustainability			
Targets		Indicators	
<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>			
7.A	Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	7.1 7.2 7.3 7.4	Proportion of land area covered by forest CO <sub>2</sub> emissions, total, per capita and per \$1 GDP (PPP), and consumption of ozone-depleting substances Proportion of fish stocks within safe biological limits Proportion of total water resources used
7.B	Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss	7.5 7.6	Proportion of terrestrial and marine areas protected Proportion of species threatened with extinction
7.C	Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	7.7 7.8	Proportion of population using an improved drinking water source Proportion of population using an improved sanitation facility
7D	By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers	7.9	Proportion of urban population living in slums <i>The actual proportion of people living in slums is measured by a proxy, represented by the urban population living in households with at least one of the four characteristics: (a) lack of access to improved water supply; (b) lack of access to improved sanitation; (c) overcrowding (3 or more persons per room); and (d) dwellings made of non-durable material</i>

## A. Issues for a gender-responsive rights-based analysis

### 1. Environmental sustainability and gender equality are interdependent

The Millennium Development Goals are interrelated and interdependent. Nowhere is this more apparent than in the relationship between Goal 7 and Goal 3. Gender equality and women's empowerment are essential for environmental sustainability, but a sustainable environment is also critical for the welfare of

#### Women's involvement in water projects led to success

A study of community water and sanitation projects in 88 communities in 15 countries found that projects designed and run with the full participation of women were more sustainable and effective than those that did not. An earlier World Bank study came to a similar conclusion.<sup>190</sup>

women and their families.

Gender equality and empowerment play out within the context of both the social and the physical environments. While the social environment may often seem the more important factor, for poor women in the poorest areas of the poorest countries, the physical environment is vital. Without water, food, shelter and the means for a livelihood, equality and empowerment are both meaningless and unattainable.

However, women's role in the environment was not recognized until the 1980s, when policy makers began to realise that the exclusion of women from environmental projects usually led to project failure. In many ways, women have a closer physical relationship with the natural environment than men. It is women who are largely responsible for providing water and fuel, which the urban poor and most rural populations have to obtain from their surroundings. Women are also the majority of farmers in developing countries, producing 60 to 80 percent of the food. Women are therefore particularly dependent on natural resources, and are most affected by the loss or degradation of environmental resources on which they have traditionally relied.

At the same time, women play an important role in the management of natural resources, including soil, water, forests, and energy. Rural women often have a deep understanding of the natural world in which they live. However, poor women's dependence on the environment combined with their poverty and lack of alternatives may also mean that they contribute to environmental degradation and pollution in both rural areas and urban slums.

Women are also affected by environmental toxins and contaminants, yet most of the testing of these on humans is carried out only on men. Knowledge is only recently coming out on the

#### **Women most affected by environmental degradation**

Deforestation or water contamination increases the time women spend seeking fuel or clean water. In Gujarat, India, for example, women spend four or five hours a day collecting fuel, a task previously necessary only once every four to five days.

Increased prevalence of disease due to environmental contaminants increases women's role as primary caregivers for ill family members and affect women's health. Toxic chemicals and pesticides in air, water and earth increase the burden of family health care on women and directly affect their own health. For example, discharges from a fertilizer factory in Gansu province, China, have been linked to a high number of stillbirths and miscarriages.

Urban air and water pollution also threaten health, particularly for women who have the highest levels of exposure. In the Indian cities of Delhi and Agra, for example, drinking water comes from rivers heavily polluted by DDT and other pesticides.<sup>191</sup>

#### **Women are at high risk of environmental toxins**

In 2003, the Centers for Disease Control tested 116 toxic chemicals and reported that women had significantly higher levels than men of ten of these. Three of the ten chemicals were phthalates—a group of chemicals that are linked to birth defects and are commonly found in health and beauty products. Only one chemical tested—lead, was found in higher levels in men.<sup>192</sup>

impact of certain environmental toxins on children through contamination before birth and through breast milk. Since many toxins accumulate in body fat and women naturally have a higher proportion of fat tissue than men, tests on women and men show that for some chemicals, there are much higher levels of toxicity among women.

## 2. Women should be involved as decision makers in environmental sustainability at all levels

At the community level, women are often involved in water projects in particular, primarily because experience has shown that the participation of women leads to sustainability and project success. However, the most important decisions affecting projects such as these are made at higher levels—in parliaments, the civil service, international financial institutions and even private companies. Parliamentary decision-making remained firmly in the hands of men until quite recently, when a significant number of women were appointed as ministers of water or environment. Sex-disaggregated data on decision makers in the other arenas are not easily obtained.

### Female ministers of water or environment: a critical mass

In late 2005, there were 40 female ministers of water or environment across the world, covering every region and every level of development. In 2005, one chaired the African Ministerial Council on Water and the African Ministers initiative on Water, Sanitation and Hygiene. 'These leaders constitute the critical mass needed to get gender integrated into water and sanitation programmes.'<sup>193</sup>

To achieve and effectively carry out these higher-level positions, women (and men) need access to training on environmental management, to be sensitized to the need to integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources. To use their position to benefit other women through a gender-responsive and rights-based approach to environmental management, they may also benefit from training on gender and women's rights.

## 3. Clean water and adequate sanitation are human rights

Water is both a fundamental and inalienable human right and a public good, which governments are obliged by international law to provide to all. It should not be a marketable commodity. Access to sanitation facilities is also a fundamental human right that protects health and human dignity. It is also a cost-saving investment: for every dollar invested in sanitation, up to \$34 can be saved in health, education, and social and economic development costs.<sup>194</sup>

However, in poor countries, international financial institutions have imposed on some governments water privatization policies and user-pays fees for access to basic sanitation facilities as a condition of loans, without regard to the gender or human rights implications. As a result, the poor—especially women and girls and particularly those in urban slums—are denied access to the privatized water and sanitation

### User pays fees kill 250 people in South Africa

In Alexandra and KwaZulu Natal in South Africa in 2000 and 2001, people who were unable to pay higher water user fees were forced to use contaminated water. As a result, more than 250 people died.<sup>195</sup>

because they cannot afford the costs or they cannot meet the conditions, such as land or house ownership, required for access to the privatized water grid.

Many are now advocating that, as a basic human right, water should be excluded from World Trade Organization and free trade agreements because legally considering water as a commodity, investment or service under such agreements violates the International Covenant on Economic, Social and Cultural Rights and Article 14 of CEDAW.

#### **4. Access to clean water and adequate sanitation gives women and girls time for other activities**

As well as being a basic human right, access to safe drinking water is essential for gender equality, because of the time that women and girls now spend fetching water. If they lack access to a latrine, girls and women may have to wait until after dark to defecate, and may also have to walk long distances for excreta disposal, exposing them to the risk of violence.

##### **Some women spend eight hours a day carrying water**

In Asia, women and girls in some countries take more than eight hours a day travelling 10 to 15 kilometres and carrying between 15 and 29 litres of water per trip. African women walk an average of six kilometres to collect water and carry on their heads around 20 kilograms of water.<sup>196</sup>

Access to safe water and adequate sanitation services would give women and girls the time to access education, health care and paid work, each of which contributes directly to gender equality and women's empowerment. Older girls, who are sometimes deprived of access to education because of the lack of basic segregated sanitation facilities in schools, would also be able to continue their education.

#### **5. Women, especially female-headed households, need land rights and water for productive uses**

World Bank research studies suggest that in some parts of the world, lack of access to or ownership of land may be the main reason for women's limited access to water, and a key reason for the greater poverty of female-headed households. Many female farmers have little or no access to water to irrigate their crops. Since they produce up to 80 percent of the world's food, increasing women's access to irrigation water would contribute greatly to food security and poverty reduction.

##### **Women's lack of land rights reduces their access to water**

In many countries, including most of Latin America, land ownership is a precondition for access to water. However, women hold title to less than two percent of the world's private land.<sup>197</sup>

Including female farmers in irrigation schemes and giving them a voice in water management are essential to fighting rural poverty. The active involvement of women with men can increase project effectiveness, especially because water-related environmental risks affect women more than men. Sound water management to reduce the number and severity of water-related disasters will benefit all women, not just female farmers.



## 6. Women are more vulnerable to natural disasters and their consequences

Women and children are fourteen times more likely than men to die during natural disasters, some of which are the direct result of environmental degradation and possibly climate change. Both gender norms and biological factors may play a part.

In the 1991 cyclone in Bangladesh, women and girls were greatly over-represented in the approximately 140,000 people killed because cultural norms prevented them from hearing the emergency warnings and from accessing cyclone shelters.<sup>199</sup> The 2003 European heat wave also killed more women than men.<sup>200</sup> Lack of access to warnings of impending storms and other natural events may also prevent women from making appropriate preparations that might protect them or reduce the economic impact of the event.<sup>201</sup>

### Women were almost 80 percent of the dead in the 2004 tsunami

In Aceh, India and Sri Lanka, almost 80 percent of those who died in the tsunami were women. The tsunami also produced some very gender-specific after-shocks, ranging from women giving birth in unsafe conditions, to increased cases of rape and abuse. In Sri Lanka, dead bodies were sexually abused and women were dragged out of the rushing water and raped as payment for being saved. In Thailand, women were discriminated against even in death—government assistance provided twice as much for a man's funeral as for a woman's.<sup>198</sup>

Natural disasters intensify women's poverty and increase their workload as they often have to fulfil both their traditional caregiver role and provide livelihood support for their families and extended families. In some cases, disasters also destabilize family and social structures, pushing some impoverished families to sell girl children into trafficking for basic survival.<sup>203</sup>

### Disasters can have a long-term impact on women and girls

'The women who lost all their ... belongings and their life savings in India, after the recurrent floods of the monsoons ... have not been able to compensate their losses even after decades. This situation has threatened their security within the family relationship. Children (both girls and boys) dropped out of school. And young girls, whose families lost their savings and jewellery ... which were to provide their dowry in marriage, either lost the opportunity or had to delay getting married, which has serious implications for their social status, psychology and survival.'<sup>202</sup>

## 7. Adequate sanitation reduces disease and the time women spend on care of the sick

Diarrhoea, cholera, typhoid and a number of parasitic infections, as well as diseases such as dengue fever and malaria, are linked to poor sanitation. Those most affected are the poor and school-aged children who are most exposed to risk. Adequate sanitation both reduces the incidence and prevalence of disease and, as a result, the time that women spend in the care of the sick.

## 8. Locating water sources and toilets close to home may reduce the risk of violence against women

Violence against women and girls may occur when they have to venture away from home to fetch water or relieve themselves. Locating water sources and toilets closer to home and in public rather than secluded areas may reduce this risk. When water and sanitation projects are designed and implemented by men, such important issues are often overlooked.

## 9. More training is needed for women in water management and sanitation

Despite the increase in the number of women ministers for water and environment, decision-making in water management and sanitation is dominated by men at both the technical and community levels.

More qualified women water and sanitation engineers and technicians are needed so that women can play an equal and informed role in decision-making at all levels. Gender stereotypes about appropriate roles for females and males also need to change at the community level. Women should be given opportunities to learn new skills ‘on the job’ in water and sanitation projects.

Women need training in environmentally sustainable technologies in order to make appropriate and informed decisions and avoid the negative consequences of inappropriate technologies.

### Women need skills in water supply maintenance

A UNIFEM water supply project in Cambodia in the 1990s trained women, who were the main users, to maintain and repair the project water pumps. During training, the men laughed because they thought the women would be unable to do such work. However, the women successfully maintained and repaired the water pumps, giving them a new sense of achievement and showing the men that women could carry out ‘technical’ work.<sup>204</sup>

### Women need better information on household sanitation

In several countries, people have drilled bore wells within their house compounds where they have also dug holes for toilet purposes. The inevitable result is water contamination and the spread of water-borne diseases, leading to the deaths of many—particularly children.

## 10. Women need security of tenure and adequate housing, especially in urban slums

Many women spend most of their lives within their house and its environs. Women are therefore especially dependent on security of tenure for their housing. For women who are already leading a precarious existence in slums, it is even more so. Although the 2007 revision of the MDGs no longer uses access to secure tenure as an indicator for improving the lives of slum dwellers, secure access to housing remains an important issue for women and women's advocacy groups.<sup>205</sup>

Under international human rights law, Article 11(1) of the International Covenant on Economic, Social and Cultural Rights, secure tenure is one of the seven components of the human right to adequate housing, which is also linked to the right to land. Under international law, both women and men have equal rights to housing and property.

However, the reality is far from the law. Almost one third of the world's women are homeless or live in inadequate housing<sup>207</sup> and it has been estimated that only 2 percent of property is owned by women. In many countries, domestic violence is the main reason for homelessness among women—lack of secure tenure means that it is the women who become homeless, rather than the perpetrators. According to the UN Special Rapporteur on Adequate Housing, 'a separated or divorced woman with no land and a family to care for often ends up in an urban slum, where her security of tenure is at best questionable'.<sup>208</sup>

#### **Poor rural women in Indonesia also lack land rights**

The day-to-day insecurity of poor women in rural Indonesia is often compounded by their lack of land rights. In many areas of rural Java, women play a much greater role than men in rice cultivation, which is the main agricultural activity, and in virtually all matters pertaining to land. When they are not tending to their children or to domestic chores such as cooking or cleaning, they are working the land. However, the land does not produce enough food to ensure household food security, and their right to use much of the land that they cultivate is not legally recognized.

Giving them secure access to land is the basis for transforming their lives. It can ensure that they have enough food on their tables, give them a more secure source of income and create opportunities for new ways of making money for their households.<sup>206</sup>

In Africa and South Asia, women are denied, often by both law and custom, the right to own or inherit land, housing and property and can only access land and housing through male relatives. Their security of tenure is therefore dependent on good marital and family relations and they are always at risk of gender-based violence.

Without equal rights to housing, land and property, women cannot enjoy other fundamental human rights such as the right to privacy, protection of the law against interference or attacks on one's privacy and security of person, the right to health, food, water, and the right to self-determination.

### **11. Women in urban slums need improved infrastructure and services and a political voice**

While security of tenure and access to housing are very important to women living in slums, on their own they will not make the significant improvement to their lives that Goal 7 promises. The safe water and adequate sanitation services should reach women in the slums as elsewhere, but the lack of basic transportation and communications infrastructure and other services, including health care, are also major issues for women living in slums.

The location of many slums in environmentally fragile areas subject to flooding, landslides, mudslides, industrial pollution and other forms of environmental degradation makes it difficult, if not unlikely, for even the limited benefits under Goal 7 to reach those living in slums in these areas. The problems of urban slums are problems of urban planning—or the lack of it—and can only be addressed at a political level, where women and those living in slums are poorly represented. In general, they are also ill-equipped to influence the substantial vested economic interests that are largely responsible for the continued existence of slums.

## B. National long-term targets and indicators

Matrix 21 below suggests a range of long-term targets and indicators for environmental sustainability, based on the preceding gender-responsive rights-based analysis of Goal 7. They should be adapted and added to so that they are relevant and useful for the individual country.

Women's groups and civil society should ensure that CEDAW and the Convention on the Rights of the Child, as well as other human rights, country reports, the Beijing Platform and national action plans on women and children are taken into consideration in the development of specific targets and indicators for implementation of programmes to achieve Goal 7. These documents can also provide input to the preparation of country and subnational MDG reports.

<b>Matrix 21: National long-term targets and indicators for environmental sustainability</b>			
<b>Targets</b>		<b>Indicators</b> (see notes #^ below)	
<b>Sustainable development</b>			
L7.A	Increase the numbers of women in environmental initiatives as decision makers and sensitize them to the principles of sustainable development	L7.A.1	Number of women ministers in environmental areas at national level
		L7.A.2	Number of women senior officials in departments of environment
		L7.A.3	Number of women officials in departments of environment participating in training courses on sustainable development
		L7.A.4	Ratio of female to male employees in government departments working on the environment, by rank or level
L7.B	Increase women's understanding of environmental sustainability and the need for it to be integrated into national policies in order to reverse the loss of environmental resources	L7.B.1	Number of women active in environmental organizations
		L7.B.2	Ratio of women to men active in environmental organizations
		L7.B.3	Gender equality and a women's empowerment perspective mainstreamed into the activities and projects of environmental organizations
		L7.B.4	Number of women's environmental organizations
		L7.B.5	Women's environmental organizations as a percentage of all environmental organizations
		L7.B.6	Ratio of women to men members of environmental organizations
L7.C	Increase the capacity of women to perform their traditional tasks in an environmentally sustainable way	L7.C.1	Number of programmes to train women to perform their traditional tasks in an environmentally sustainable way
		L7.C.2	Number of women trained to perform traditional tasks in an environmentally sustainable way

### Matrix 21: National long-term targets and indicators for environmental sustainability

Biodiversity	
L7.D Increase women's understanding of biodiversity and how to integrate it into national policies in order to reduce the rate of loss	L7.D.1 Number of women active in preserving biodiversity
	L7.D.2 Ratio of women to men active in preserving biodiversity
	L7.D.3 Gender equality and a women's empowerment perspective mainstreamed into biodiversity activities and projects
	L7.D.4 Number of women's biodiversity groups
	L7.D.5 Women's biodiversity groups as a percentage of all biodiversity groups
	L7.D.6 Ratio of women to men members of biodiversity groups
Water and sanitation	
L7.E Ensure that households have access to safe drinking water facilities that meet the needs of women and girls	L7.E.1 Ratio of women to men involved in decision-making about water
	L7.E.2 Proportion of households actually using the water facilities provided <i>This will indicate whether the facilities actually meet the needs of women.</i>
	L7.E.3 Number of hours women and girls spend collecting water before and after the introduction of safe drinking water
	L7.E.4 Distance or time taken to access water before and after provision of the facilities
L7.F Ensure that households have access to sanitation facilities which meet the needs of women and girls	L7.F.1 Ratio of women to men involved in decision-making relating to the design of sanitation facilities
	L7.F.2 Proportion of households actually using the sanitation facilities provided <i>This will indicate whether the facilities actually meet the needs of women.</i>
	L7.F.3 Average distance or time taken to access sanitation before and after provision of the facilities

<b>Matrix 21: National long-term targets and indicators for environmental sustainability</b>			
L7.G	Ensure that female farmers in slums, including those in female-headed households, have access to irrigation water	L7.G.1	Proportion of female farmers in slums with access to irrigation water, by sex of household head
		L7.G.2	Ratio of women to men on local water management bodies
<b>People living in slums</b>			
L7.H	By 2020, to have achieved a significant improvement in the lives of at least x million slum dwellers, including at least y female-headed households living in slums <i>(based on global target 7.D— numbers to be set as appropriate to the country)</i>	L7.H.1	Proportion of households with access with access to improved water supply, disaggregated by sex of household head
		L7.H.2	Proportion of households with access with access to improved sanitation, disaggregated by sex of household head
		L7.H.3	Proportion of households with more than three persons per room, disaggregated by sex of household head
		L7.H.4	Proportion of households constructed of durable materials, disaggregated by sex of household head
L7.I	Ensure that women in urban slums have access to urban infrastructure and basic services which meet their needs	L7.I.1	Number of women and girls accessing services in urban slums
<p># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</p> <p>^ All household level indicators should be disaggregated by rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</p>			

## C. Gender-responsive rights-based strategies

### 1. Involve women in environmental initiatives as active participants and decision makers

Women's involvement can be increased through affirmative action policies such as quotas or targeted financial support. Quotas should be complemented by training and support for the women filling the quotas, so that they can contribute on an informed basis in terms of men's approaches. In addition, the training and support should empower the women to also contribute in terms of women's knowledge and needs.

Regardless of whether quotas are imposed, the participation of women in decision-making, paid employment and sharing the benefits of environmental projects and programmes should be monitored through sex-disaggregated data.

#### Women become leaders on water management in India

The Indian women's NGO SEWA encouraged women to join local water committees. SEWA had already organized women into business-development groups, and giving them a voice on local water committees was the next logical step because women are primarily responsible for fetching and using water.

At first, women were reluctant as water infrastructure was regarded as male territory. Most men were critical of women's participation, and some even said they would not drink from a source created by women. However, women slowly gained confidence as they began to lead water activities, raise their productivity, and see their incomes increase. One said "now we've learned so much about measurements, maps, and surveying methods that everyone wants to become a member and know about these things."<sup>209</sup>

Gender-responsive rights-based strategies to address this issue include:

- provide non-formal training at community level that provides gender-responsive rights-based knowledge on environmental management while, at the same time, encouraging women to display their knowledge and understanding of the environment in which they live;
- introduce quotas for women in water management and sanitation committees, particularly at the local level;
- introduce quotas in staffing of environmental projects and programmes;
- introduce quotas for female students in environment-related tertiary and vocational training courses, or provide scholarships or stipends to female students in these courses;
- monitor the participation of women in decision-making, paid employment and sharing the benefits of environmental projects and programmes;
- use the results of such monitoring to lobby government and donors to increase women's participation.

### 2. Increase women's ability to perform their tasks in an environmentally sustainable way

Many of women's traditional tasks, such as farming and the collection of fuel, directly impact on the physical environment. In some areas, traditional practices which were environmentally



sustainable, such as crop rotation, have been replaced by modern practices which are damaging to the environment. In other areas, it is the traditional practices, such as slash and burn agriculture, which are unsustainable, particularly in situations where population density has increased. Reviving sustainable traditional practices, teaching farmers sustainable alternatives to damaging traditional practices, and finding alternative sources of fuel where current methods damage the environment, are all critical to sustainable development.

Women may also be damaging the environment through their collection of fuel, or the methods they use to cook food. Traditional cooking stoves may generate gases which harm both the environment and women users' health. Alternatives must be sustainable both in terms of the environment, and women's ability to perform their fuel collection and cooking tasks.

As women are so integral to these tasks, policies and programmes which aim to implement these suggestions must be designed and implemented in a gender-response rights-based way, or they risk failure. Similarly, policies and programmes which aim to reverse the loss of environmental resources, or protect biodiversity, must take a gender-responsive rights-based approach to ensure that they take account of women's roles and needs, and deliver benefits to them.

Gender-responsive rights-based strategies to address this issue include:

- ensure that women have access to formal education and informal training courses on environmental sustainability and environmental management;
- sensitize women to the importance of protecting environmental resources, reducing pollution, recycling and incorporating other sustainable practices;
- work with women to identify and revive traditional sustainable environmental practices, and develop sustainable alternatives to traditional practices which are environmentally damaging;
- where fuel collection or the traditional methods of cooking are damaging the environment, introduce alternatives that are compatible with women's roles and responsibilities;
- facilitate and support the establishment of community environment groups involving women to monitor local air and water quality, use of pollutants etc and to lobby local government to provide a healthy sustainable living environment.

### **3. Ensure that economic policies are compatible with the right to safe drinking water**

The 145 countries that ratified the International Convention on Economic, Social and Cultural Rights (ICESCR) are obliged to progressively ensure that every person has access to safe drinking water, equally and without discrimination. CEDAW also established that rural women's health depends on adequate and non-discriminatory access to water. However, the economic policies formulated under Poverty Reduction Strategy Papers and other national policy instruments sometimes prioritize economic objectives that conflict with national obligations under international human rights treaties and conventions.

Gender-responsive rights-based strategies to ensure that governments meet their international human rights obligations include:

- organize human rights workshops on ICESCR and CEDAW for economic policy makers and senior officials from departments dealing with the environment, water and sanitation;
- hold workshops for women's groups and advocates on the human rights implications of economic policy, particularly in relation to privatization of public goods such as water;

- support lobbying and advocacy by women's groups to promote collaboration with international financial institutions;
- support and promote active and informed participation by women's groups in development planning processes, including Poverty Reduction Strategy Papers and National Development Plans.

#### 4. Ensure that water and sanitation initiatives are gender-responsive and rights-based

The mere presence of women in decision-making does not guarantee that initiatives will be gender-responsive or meet the needs of most women. The women most likely to obtain decision-making positions are not necessarily representative of the majority of women users and may not understand their needs. Project and programmes that are not gender responsive are likely to fail because women will not be able to access their benefits.

Gender-responsive rights-based strategies to address this issue include:

- mainstream a gender-responsive rights-based perspective in all environmental projects and programmes to ensure that factors such as location, cultural appropriateness, timing of services and other aspects related to women's gender roles are taken into consideration;
- incorporate specific measures to empower women to play an active role in environmental projects and programmes;
- undertake gender analysis of the budgets of environmental projects and programmes to ensure that women's needs are being adequately addressed and appropriately funded;
- monitor through sex-disaggregated data women's share of the benefits of environmental projects, paying particular attention to poor women and women from female-headed households;
- undertake gender analysis of all water supply, irrigation and sanitation projects in order to ensure that women benefit and to avoid unintended and unexpected negative consequences.

#### 5. Ensure that environmental sustainability projects build the capabilities of girls and women

Safe water and adequate sanitation, in appropriate locations, should save the time and energy women and girls now spend on collecting water. It is important that this time saving benefits women and girls by leading to increased access to education; to literacy and other non-formal education and training; and to income-generating opportunities such as micro-enterprises.

Projects to ensure environmental sustainability can also contribute to building the capabilities of women and girls. Most projects to provide safe drinking water and adequate sanitation, improve urban infrastructure, implement reforestation strategies and protect areas of high biodiversity value require labour, and provide the opportunity for paid employment. The projects also provide opportunities for local women

##### **Piped water enables girls to go to school**

In Morocco a World Bank rural water and sanitation project in six provinces was associated with a 20 percent increase in girls' school attendance in four years, attributed in part to a reduction in the time the girls spent fetching water. Access to safe water reduced the time spent collecting by women and young girls by 50 to 90 percent.<sup>210</sup>

and men—both paid and volunteer—to develop technical knowledge and skills, as well as skills in planning, management, problem-solving, teamwork, communication and leadership. This skill development can improve women’s access to further paid employment, and lead to empowerment within their community.

Gender-responsive rights-based strategies to address this issue include:

- directly link water supply and sanitation projects with projects and programmes to promote education for girls or literacy training and non-formal education and training for women;
- build links between water supply and sanitation projects and micro-credit and micro-enterprise programmes designed for women;
- ensure that women have equal access to paid employment on environmental sustainability projects, and that they are not just exploited as voluntary community workers;
- ensure that women—both paid and volunteer—have the same opportunity as men to develop knowledge and skills on environmental sustainability initiatives;
- monitor through sex-disaggregated statistics the impact of environmental sustainability projects on women’s and girls’ health and access to education and employment.

**6. Ensure that female slum farmers, especially in female-headed households, obtain irrigation water**

Although slums are urban areas, many cities continue to sustain small farm plots cultivated by slum dwellers to provide food for subsistence and generate some income. In many cases, the farmers are women who depend on water for their crops. However, in many countries and communities women farmers lack access to irrigation water because of their lack of land rights and lack of empowerment. Women in female-headed households are especially affected.

Gender-responsive rights-based strategies to address this issue include:

- apply a quota for women in slum water management committees and irrigation projects;
- apply a special quota for female-headed households in water management committees and irrigation projects;
- conduct joint workshops for female and male farmers on women's access to water for production and emphasize the benefits to men and their children, as well as the economy, from the increased productivity women will obtain with irrigation water.

## 7. Increase women's access to housing and security of tenure, particularly in urban slums

Access to housing and security of tenure, particularly in the event of divorce, separation or the death of the spouse, are especially important to women in urban slums because of the general insecurity in their lives. Property rights are also important because many slum households rely on small informal sector enterprises for their livelihood and women are often the principal operators of these businesses.

In addition to strategies related to tenure, land rights and titling under Goal 1, gender-responsive rights-based strategies to address this issue include:

- consider legislation to establish urban adverse possession, ensuring a gender-responsive rights-based approach is adopted;
- provide suitable land on which poor people, including women, can construct their own housing and provide security of usage of this land.<sup>212</sup>

### Joint ownership of family property increases women's security

Laws may provide for compulsory community property for married couples, and potentially for those in consensual unions. In some countries, the law also creates a presumption of joint ownership of family farms or other family businesses, unless there is a contract to the contrary. Where countries allow optional joint tenure, women are often at a serious disadvantage upon divorce or the death of their spouse. Procedures for documentation and registration of joint titles need to be simple and efficient. In some countries, the procedures are complex, time-consuming and require documents, such as birth certificates, that many women do not have.

### Urban adverse possession increases tenure security in Brazil

Brazil has attempted to improve tenure security in both informal settlements and informal lease of land through legislation on urban adverse possession. This allows an individual or a group to claim small plots if they have continuously occupied it for a minimum of 5 years without intervention of the owner; if it is used only for themselves or their families; and they do not own other rural or urban property. The occupants must make a formal legal application before a Judge. The rightful owner of the land has the right to contest the request in a public hearing. If they fulfil these requirements, the occupants can be legally declared in possession of the land via a Court Order. Collective adverse possession is permitted in irregular low-income settlements and slums, where it is often impossible to identify the lands occupied by each occupant. However, it is less often used than individual adverse possession.<sup>211</sup>

## 8. Improve women's access to infrastructure and services in urban slums

Access to infrastructure and services in urban slums is especially difficult, partly because of the geography of many slum areas and partly because service providers are often unwilling to

enter these areas because of concerns about security and a perception that slums are not profitable markets.

Although public subsidies will be needed to create or improve infrastructure in slums, a savings component and a component for the user to pay for the services should be included to increase 'buy-in' and a sense of ownership among women and the community. Micro-finance, particularly schemes involving a compulsory savings component, can help to provide livelihoods and develop assets and markets in slum communities. Partnerships can be developed between community groups, including women's groups, and the public sector to deliver urban services to slum populations.

#### **SEWAHOUSING helps informal sector workers**

The *Ahmedabad Parivartan* project in India, supported by the women's organization SEWAHOUSING, transforms the physical environment in which informal sector workers live, by providing a package of seven infrastructure services including paved roads, individual toilets, water and drainage connections and street lighting.

The package is provided on an equitable cost sharing basis through a unique partnership between the municipality, the private sector and community residents, each of whom pay one-third of the total on-site capital cost of service provision.<sup>213</sup>

Gender-responsive rights-based strategies to address this issue include:

- use micro-finance to improve urban infrastructure and services and ensure that women take the lead, particularly in the design of water supply, sanitation and local environment infrastructure;
- develop partnerships between the public sector and women's groups to provide improved urban services;
- provide gender-responsive rights-based technical advisory services to community-based projects and programmes to increase women's access to urban services;
- support women's organizations and/or communities to provide group housing for homeless women in slums;
- support women's organizations and/or communities in slums to provide secure shelter for homeless women who are victims of domestic violence.

## **D. National intermediate targets and indicators**

Matrix 22 below suggests a range of national intermediate targets and indicators for environmental sustainability, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

<b>Matrix 22: National intermediate targets and indicators for environmental sustainability</b>	
<b>Targets</b>	<b>Indicators</b> (see notes #^ below)
<b>Sustainable development</b>	
17.a Increase the numbers of women in environmental initiatives as decision makers, particularly at local levels, by at least 10 percent* each year and sensitize them to the principles of sustainable development	17.a.1 Number of women leaders in environmental areas at subnational level 17.a.2 Number of women appointed to environmental areas in local government 17.a.3 Number of women officers at decision-making levels on the environment in local government 17.a.4 Number of women enrolled in environment-related tertiary or vocational courses 17.a.5 Proportion of graduates from environment-related tertiary or vocational courses who are women 17.a.6 Number of women leaders attending non-formal training courses on environmental management 17.a.7 Number of women attending informal training courses on environmental management at community level
17.b Increase women's participation in environmental initiatives as decision makers by at least 1 percent* each year	17.b.1 Number of women holding official positions in environmental organizations or bodies 17.b.2 Ratio of women to men holding official positions in environmental organizations or bodies
17.c Increase women's share of the benefits from environmental initiatives by at least 4 percent* each year until gender equality is achieved	17.c.1 Ratio of female to male paid workers in environmental projects 17.c.2 Ratio of women's to men's share of the gains from environmental projects ( <i>where this can be readily ascertained</i> )

### Matrix 22: National intermediate targets and indicators for environmental sustainability

#### Biodiversity

- |      |   |        |  |
|------|---|--------|--|
| 17.d | Increase the numbers of women in biodiversity initiatives as decision makers, particularly at local levels, by at least 10 percent* each year and sensitize them to the importance of reducing the rate of loss | 17.d.1 | Number of women leaders in biodiversity groups at subnational level                            |
|      |   | 17.d.2 | Number of women appointed to biodiversity areas in local government                            |
|      |   | 17.d.3 | Number of women officers at decision-making levels on biodiversity in local government         |
|      |   | 17.d.4 | Number of women enrolled in biodiversity-related tertiary or vocational courses                |
|      |   | 17.d.5 | Proportion of graduates from biodiversity-related tertiary or vocational courses who are women |
|      |   | 17.d.6 | Number of women leaders attending non-formal training courses on biodiversity                  |
|      |   | 17.d.7 | Number of women attending informal training courses on biodiversity at community level         |

#### Water and sanitation

- |      |  |        |   |
|------|--|--------|---|
| 17.e | Ensure that time saved for women and girls through water and sanitation initiatives contributes to building their capabilities | 17.e.1 | Ratio of girls school attendance before the initiative was implemented to their school attendance after, by level of education    |
|      |  | 17.e.2 | Ratio of girls to boys attending school before and after the initiative was implemented, by level of education                    |
|      |  | 17.e.3 | Ratio of girls to boys on educational performance measures before and after the initiative was implemented, by level of education |
|      |  | 17.e.4 | Ratio of health clinic attendance by females before to that after the initiative was implemented                                  |
|      |  | 17.e.5 | Ratio of females to males attending health clinics before and after the initiative was implemented                                |
|      |  | 17.e.6 | Ratio of female labour force participation before the initiative was implemented to that after                                    |
|      |  | 17.e.7 | Ratio of female to male labour force participation before and after the initiative was implemented                                |

- |      |  |        |  |
|------|--|--------|--|
| 17.f | Ensure that water and sanitation, environmental and biodiversity initiatives are gender-responsive and meet the needs of women | 17.f.1 | Number or percentage of initiatives that include gender analysis in the process of development |
|      |  | 17.f.2 | Number or percentage of initiatives that include gender budget analysis in the process         |



<b>Matrix 22: National intermediate targets and indicators for environmental sustainability</b>	
and girls	of development
17.g Increase percentage of female farmers, especially in female-headed households, in slums that able to obtain irrigation water by 5 percent* each year until parity is reached with male farmers	17.g.1 Number of female farmers using irrigation water for last crop 17.g.2 Ratio of women to male farmers using irrigation water for last crop 17.g.3 Number of female farmers from female-headed households using irrigation water for last crop 17.g.4 Percentage of female farmers from female-headed households using irrigation water for last crop as a ratio of male farmers from male-headed households using irrigation water for the same crop
<b>People living in slums</b>	
17.h Increase the share of gender-responsive rights-based programmes and expenditure on infrastructure and services in slums by at least 5 percent* per year until all have access	17.h.1 Proportion of local government expenditure in urban slums that has been subject to gender-responsive rights-based analysis 17.h.2 Proportion of municipal budget spent on providing infrastructure and services to urban slums
17.i Increase the proportion of slum dwellers, particularly women, with access to secure tenure by at least 5 percent* per year	17.i.1 Proportion of households with access to secure tenure, by sex of household head 17.i.2 Proportion of women in slums living in households with access to secure tenure
17.j Reduce the number of homeless women by 5 percent* per year until homelessness is eliminated	17.j.1 Number of homeless women 17.j.2 Ratio of homeless women to homeless men
17.k Increase the amount of new or improved housing allocated to women living in urban slums by 5 percent* per year	17.k.1 Number of new or improved housing units allocated to women living in urban slums, as sole tenant or jointly with their spouses, 17.k.2 Proportion of new or improved housing units allocated to women living in urban slums, as sole tenant or jointly with their spouses, to the total housing units allocated to people living in urban slums
17.l Improve urban infrastructure and services available to women in urban slums by 5 percent*	17.l.1 Number of initiatives implemented to improve infrastructure and services in slums which are directed towards or involving women in previous year

### Matrix 22: National intermediate targets and indicators for environmental sustainability

per year until all have access	17.1.2	Number of projects or programmes in urban slums to improve infrastructure and services
	17.1.3	Number of such projects or programmes that involve and consult women
17.m Ensure that all programmes for urban infrastructure and services in slums are gender-responsive and rights-based	17.m.1	Proportion of total budget for urban infrastructure and services in slums that has been subject to gender-responsive rights-based analysis
	17.m.2	Proportion of urban infrastructure and services programmes in slums that have been subject to gender-responsive rights-based analysis
	17.m.3	Budget spent on improved infrastructure and services in slums which is directed towards or involving women in previous year
<p><i>* Numeric targets are important for monitoring and accountability. Suggested percentage targets should be adapted to suit what is both feasible and necessary to achieve national targets. Suggested timeframes should be adjusted in accordance with how often data are available to measure progress.</i></p> <p><i># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</i></p> <p><i>^ All household level indicators should be disaggregated by rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</i></p>		



# GOAL 8

## DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT

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## Goal 8: Develop a Global Partnership For Development

The Millennium Development Goals represent a partnership between the developed and developing countries to create an environment at the national and global levels that is conducive to development and the elimination of poverty.<sup>214</sup> Goal 8 deals primarily with macroeconomic and general economic policy issues, and the role of donors and international financial institutions in working with developing countries to support development through global partnership. It also deals with access to drugs, and to new technologies. As of April 2007, 23 donor reports had been submitted under Goal 8, including three from one donor.

**Matrix 23: Global targets and indicators for global partnership**

Targets		Indicators	
		<i>All indicators should be disaggregated by sex and urban/rural as far as possible</i>	
8.A	Develop further an open, rule-based, predictable, non-discriminatory trading and financial system  Includes a commitment to good governance, development and poverty reduction – both nationally and internationally	<i>Some of the indicators listed below are monitored separately for the least developed countries (LDCs), Africa, landlocked developing countries and small island developing States</i>	
8.B	Address the special needs of the least developed countries  Includes: tariff and quota free access for the least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction	<p><b>Official development assistance (ODA)</b></p> <p>8.1 Net ODA, total and to the least developed countries, as percentage of OECD/DAC donors' gross national income</p> <p>8.2 Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation)</p> <p>8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied</p> <p>8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes</p> <p>8.5 ODA received in small island developing States as a proportion of their gross national incomes</p>	
8.C	Address the special needs of landlocked developing countries and small island developing States (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)	<p><b>Market access</b></p> <p>8.6 Proportion of total developed country imports (by value and excluding arms) from developing countries and least developed countries, admitted free of duty</p> <p>8.7 Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries</p> <p>8.8 Agricultural support estimate for OECD countries as a percentage of their gross</p>	

Matrix 23: Global targets and indicators for global partnership		
8.D	Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term	<p>domestic product</p> <p>8.9 Proportion of ODA provided to help build trade capacity</p> <p><b>Debt sustainability</b></p> <p>8.10 Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative)</p> <p>8.11 Debt relief committed under HIPC and MDRI Initiatives</p> <p>8.12 Debt service as a percentage of exports of goods and services</p>
8.E	In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries	8.13 Proportion of population with access to affordable essential drugs on a sustainable basis
8.F	In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	<p>8.14 Telephone lines per 100 population</p> <p>8.15 Cellular subscribers per 100 population</p> <p>8.16 Internet users per 100 population</p>

Although virtually all donor countries have gender policies, only eight of the reports reviewed by UNDP in 2005 mentioned gender issues or concerns under Goal 8. Most of those were in reports from developing rather than donor countries.<sup>215</sup>

## A. Issues for a gender-responsive rights-based analysis

### 1. Implementation of non-discriminatory trading and financial systems is not gender neutral

Most countries experience at least some degree of sex segregation in the labour market. In some sectors—eg mining and related industries—the majority of workers are men. In some occupations—especially those requiring higher education and higher skills—men also form the majority of workers. Women are the majority of workers in sectors that are dependent on poorly paid

and ‘unskilled’ labour, and in home-based industries, especially at the lower levels.

This sex segregation means that policies and programmes to implement open rule-

based free trading systems are not gender neutral, as they affect different sectors, industries and occupations in different ways. Expanding industries benefit and grow, creating new jobs.

Declining industries are unable to compete in a more open market and contract, creating unemployment. If, as is often the case, women are concentrated in the declining industries, they are negatively affected by trade or financial liberalization, particularly in the short term. This is exacerbated by gender bias, where women are the first to lose their jobs because employers assume that men are the main income-earners in their households. Policies and programmes are needed to provide safety nets and new opportunities for

#### Jobless growth – a new paradigm is needed

ILO describes the dominant economic policy regime as generating jobless growth—economic growth that does not generate increased employment. This tends to disadvantage women seeking to enter the labour market. The current policy framework stresses macro economic stability, freer markets, a smaller role for the public sector and uninhibited international flows of capital and goods. However, it does not extend the same freedom of movement to the labour market. The ILO argues that alternative policies are needed to secure economic stability without sacrificing the welfare of working people or entrenching existing gender inequalities. It notes that the most difficult challenge is political: to create the policy space needed to support sustainable poverty reduction, gender equity and decent work for all.<sup>216</sup>

#### Economic reform in Viet Nam was not gender neutral

IFIs and international donors have played a significant role in policy development and development finance in Viet Nam. Official development assistance (ODA) as a proportion of Gross National Income ranged from 3.7 to 5.7 percent between 1994 and 2002 and ODA per capita ranged from US \$12.90 in 1996 to US \$ 22.92 in 2005.<sup>217</sup>

Although economic reforms in Viet Nam under Doi Moi were gender-neutral in intent, culturally determined patterns of horizontal and occupational segregation resulted in gender biases and increased social stratification. Women bore the brunt of deflationary measures such as fiscal austerity and public sector downsizing during the early reform period. As globalization accelerates in Viet Nam, output shares of foreign direct investment (FDI) and the private sector in general are expected to rise at the expense of state enterprises. Given the extent of gender wage discrimination in the private sector, government will need to increase competition in the high-wage sectors of the economy and strengthen laws against gender discrimination in order to achieve Goal 3.<sup>218</sup>



women in declining industries, and to provide training and other support to assist women to move into expanding industries and occupations.

Other macroeconomic policies promoted by many development donors, and particularly the international financial institutions (IFIs), include privatization of government banks, transport networks and public utilities; reductions in public sector spending; reducing the civil service. These policies are often attached as a condition of aid or loans. Again, these policies are not gender neutral. For example, women and girls, particularly in poor countries and poor families, are highly dependent on public sector services. However unsatisfactory and inefficient they may be, public services are usually more accessible to the poor and to women than privatized services, however efficient and effective these may be.<sup>219</sup>

Privatization, public sector cuts, free trade and financial liberalization have failed to deliver poverty reduction, increased gender equality or many of the other promised benefits in many poor countries. All such policies need to be subject to gender-responsive rights-based analysis to identify the benefits and costs and how these are distributed; the likely impact on the poor, women and other vulnerable groups. The analysis should then inform decisions about whether and how to implement the policies, including the design of strategies to enhance positive impacts and mitigate negative impacts.

## 2. Increased global partnership resources are needed

In the poorest countries and for the poorest women and girls, the MDGs are simply not achievable within current national budgets.<sup>220</sup> Both the total amount of Official Development Assistance (ODA) provided by donor countries to developing countries, particularly the least developed countries, and the share of that ODA directed toward policies that are pro-poor, gender-responsive and rights-based, must be increased.

Donors should support gender analysis of national and sectoral budget processes, as well as of their own aid budgets, in order to ensure that programmes that promote gender equality and fulfil the rights of women and girls receive an adequate share of the available resources.

Resource allocation should also reflect that agriculture is the main livelihood of the poor. However, between 1983-1987 and 1998-2000, ODA for agriculture in Asia and the Pacific fell by 57 percent to an annual average of \$5.1 billion. Lending for agriculture by multi-lateral lending agencies such as the World Bank and the Asian Development Bank also showed a downward trend. As a result, growth and productivity in agriculture have stalled. Alongside this, the decline in poverty has been slowing down in the region since the late 1980s.<sup>222</sup>

### Agricultural development linked to declines in poverty

When agricultural development was placed high on the development agenda, poverty declined rapidly in Viet Nam, Thailand, Bangladesh, and many other countries in Asia and the Pacific. In China for example, half of the decline in poverty occurred in the first half of the 1980s when agriculture was given priority.<sup>221</sup>

## 3. Increased funding and support is needed to improve gender-responsive data

A key theme under all goals has been the need for gender-responsive and sex-disaggregated data. These are essential to evidence-based policy formulation and programme design;

effective gender analysis of budget outcomes; and monitoring progress in implementing the MDGs. Lack of such data jeopardizes the achievement of the MDGs.

Given the many urgent and pressing priorities faced by developing country governments, particularly in the least developed countries, it is unlikely that they will allocate sufficient funding to provide the statistics needed. Under the global partnership, donor countries, international financial institutions and UN agencies have an important role in addressing this by increasing their support for gender-responsive data collection, analysis and dissemination. This may be through ODA and technical assistance in areas such as policy development, data collection and training.

#### **4. Many targets and indicators under Goal 8 are the responsibility of donor countries**

Goal 8 explicitly covers two sets of players in the global partnership – donor countries, and developing countries. Many of the indicators under Official Development Assistance and market access are the responsibility of donor countries. The development of non-discriminatory trading and financial systems also involves donor countries. As explained below, the introduction of such systems is not gender neutral. Donor countries should therefore be incorporating a gender-responsive rights-based perspective in this work, and reporting their progress against the relevant targets in Goal 8 in the same way that developing countries report their progress

Donor countries might also consider developing national, or in some cases regional or subregional, sets of the relevant MDG targets and indicators under Goal 8, with corresponding intermediate targets and indicators, to reflect their particular situation. Women's groups in donor countries might lobby and assist their governments to ensure that this responsibility is recognized and fulfilled.

Regional and global summaries of progress against the Millennium Development Goals should include the donor-focused targets, as well as those focused on developing countries. This is in keeping with the spirit of global partnership, ensuring that both donor and developing countries are held accountable for their commitments.

Many of these issues are being addressed through the work of the inter-agency MDG Gap Task Force, which has the objective of developing a methodology to systematically track international development commitments, primarily under Goal 8, and their fulfilment at the international and country levels. This work will feed into a high-level meeting in September 2008 which will bring together Heads of State or Government, as well as leaders of civil society and the private sector, with a view to bridging the implementation gap, strengthening accountability of all parties in the global partnership for development, helping to translate existing commitments into action, and evoking new commitments needed to achieve the MDGs by 2015.

#### **5. Some indicators under Goal 8 are the responsibility of developing countries**

To date, national MDG reports from developing countries have generally only addressed Goals 1 to 7. However, indicators on the total amount of ODA received from all donors, debt sustainability, access to pharmaceuticals and access to new technologies can only be monitored by developing countries. These need to be included in sets of national and intermediate targets and indicators—adapted as appropriate to reflect the local circumstances—and reported against in national MDG reports. Women's groups in developing

countries should ensure that these targets and indicators are not overlooked, and that they are addressed in a gender-responsive rights-based way.

## 6. International financial institutions are also part of the global partnership

International financial institutions include the International Monetary Fund (IMF), the World Bank, and regional banks such as the Asian Development Bank. They were established as part of the United Nations system, participated in the global UN conferences and support implementation of the MDGs. IFIs are key players in the global partnership for development. They provide loans and some grant funding to developing countries, particularly the poorer countries, and also develop and implement development programmes in collaboration with receiving countries.

Voting power in both the IMF and the World Bank is based on member contributions and rests with the majority shareholders, which are industrialized countries. Borrowing countries thus have little say in the IFI policies to which they are subjected and often little discretion in practice about whether to accept the conditions attached to their loans.<sup>223</sup>

Debt relief and debt sustainability are inextricably linked with the providers of loans to developing countries—both the individual donor countries, and the international financial institutions supported by those donor countries. Both the IMF and the World Bank provide policy-based loans that require reforms in a sector or the economy as a whole, known as ‘conditionalities’, that the IFIs regard as requirements for sound economic policy and development. However, conditionalities have often failed to generate growth and have tended to prioritize decreasing government expenditure and repaying debts over reducing poverty and realizing human rights. An International Poverty Centre study of financial liberalization in Africa found that although it modestly reduced substitution between public and private savings and increased the correlation between private credit and investment, the correlation with both liquidity and private-sector credit expansion was negative and it had no effect on growth. The paper concluded that on the basis of the empirical evidence, the policy had been ‘a flop’.<sup>224</sup>

In the past, conditionalities have included potentially harmful reforms such as reducing public sector expenditure and balancing the budget. While sound policies in theory, in practice these sometimes lead to cuts in public expenditure on health and education, introduction of user fees, and the laying-off of other state employees regardless of the economic cycle. Without sufficient attention to complementary policies to ameliorate these effects and, in some cases, their adoption in periods of recession, such reforms may negatively affect progress toward achievement of the MDGs. In health and education, cutbacks and the introduction of user-fees both reduce women’s access, impacting directly on goals 2, 3, 4, 5 and 6. In the public sector—which in many countries is a major source of employment for young women with higher levels of education—reducing employment often results in women losing their jobs first.

However since the early 2000s, IFIs have paid more attention to and begun to increase funding for the social sectors, and some have made significant progress in mainstreaming gender in social programmes. Some IFIs have had gender policies since the 1980s. In 2003, the heads of the IMF and the World Bank committed their institutions to promote gender equality, commitments that are slowly being realized through major shifts in the social content of country assistance programmes.<sup>225</sup> In reaction to strong criticism from feminist groups, some, including the World Bank and the Asian Development Bank, have established gender advisory groups made up of leading gender experts and feminist advocates, which act in an advisory and individual capacity.

Despite these achievements in incorporating gender into social programmes, IFIs remain less gender-responsive in their approaches at the macroeconomic level, both in the conditionalities they attach to loans, and in their general promotion of privatization and liberalization. The differential impacts of investment in infrastructure on women and men, and on the poor is still overlooked.

Given all these roles, it is clear that the IFIs are part of the global partnership. Recognition of their role in achieving the MDGs brings with it accountability to the global community for fulfilling this role. As such, it seems appropriate for IFIs to develop agency-level sets of MDGs, similar to those developed by donor countries, and to report on progress against these goals. Where IFIs influence macroeconomic policies or developing country budget policies through conditionalities, its MDG reporting framework should include the macroeconomic and gender-budgeting aspects addressed under Goals 1 and 3 in this report, as well as the relevant items under Goal 8. One of the main benefits of doing this will be to increase awareness across individual agencies of their impact on the MDGs, and to ensure that all parts of the agency incorporate a gender-responsive rights-based approach that supports their achievement.

## 7. United Nations agencies and NGOs are also players in the global partnership

United Nations agencies are also players in the global partnership for development, and have a key role in encouraging a gender-responsive rights-based approach globally. The overarching policy and monitoring frameworks developed by individual UN agencies on particular issues influence the way in which individual countries approach these issues locally. For example, incorporating a gender-responsive rights-based analysis of climate change into the relevant UN documents and discussions will support and encourage countries to recognize their national gender and rights issues in relation to climate change. Not doing so makes it more likely that countries' responses to climate change will be gender- and rights-blind. For this reason, it may be appropriate and useful for individual UN agencies to go through the MDGs, identify those most relevant, and develop gender-responsive rights-based targets and indicators to guide their work.

### United Nations Secretary-General

The UN Secretary-General, Mr. Ban Ki-moon, has stressed the need for the United Nations itself to be an accountable member of the global partnership. 'Even as I work with you to rally international support, I am striving to increase the United Nations' own effectiveness in advancing its development priorities. I have repeatedly said that we should be measured by our results, not just our rhetoric. Today's United Nations cannot simply champion development; it must deliver every day on its promises.'<sup>226</sup>

In some countries, larger international NGOs may have development programmes almost as large as many bilateral donors. They tend to focus on advocacy and programme delivery, often in partnership with governments in both donor and developing countries, as well as with other NGOs. Some, especially those working on issues such as poverty, education and health, are likely to already incorporate a gender-responsive rights-based approach in their work. Others working in areas that are not traditionally seen as 'women's issues'—such as biodiversity—may not be. Without a gender-responsive rights-based approach, some of their programmes may undermine the overall achievement of the MDGs. Developing a set of organization-level MDG targets and indicators will increase awareness across the NGO of its impact on the MDGs, and ensure that all areas incorporate a gender-responsive rights-based approach in their work, thereby supporting the achievement of the goals.

## 8. Donor aid programmes should mainstream a gender-responsive rights-based perspective

All major donor countries have commitments under CEDAW and the Beijing Platform for Action. They also have gender equality and women's empowerment policies both domestically and in relation to their aid programmes.

It is therefore important that the commitment of donor countries to gender equality and human rights is comprehensive, and integrated into their aid programmes. National targets and indicators under Goal 8 need to incorporate a gender-responsive rights-based element to identify whether aid programmes integrate these commitments, as reflected for example in routine use of gender analysis; routine use of gender statistics in all sectors; and appropriate resource allocations to mainstream gender-responsive rights-based and women's empowerment perspectives.

### Box 4. Extracts on gender from selected donor country reports

**Australia:** The 2005 Australian report, which predates AusAID's 2007 strong gender equality policy, makes no mention of women or gender. The Australian aid programme in 2005 focused on the fundamentals for achieving the MDGs, broad-based economic growth, good governance and stability, while directly investing in those sectors explicitly identified in the MDGs.<sup>227</sup>

**Denmark:** The 2002 report noted that DKK 70 million had been allocated to pilot projects on gender equality and poverty reduction, equating to less than 1 percent of total Danish ODA. This led in 2004 to a 'Strategy for Promoting Gender Equality Between Women and Men in Danish Development Cooperation'. The objective was to promote gender equality in rights, access to and control over resources, and access to political and economic influence. The 2004 report did not indicate a specific allocation of resources for gender equality.<sup>228</sup>

**Finland:** The 2004 report noted a steady increase in funds for gender equality between 1998 and 2003 with 'at least one project' in each long-term partner country promoting gender equality. 'However, the number of projects primarily focusing on this objective . . . is relatively low'.<sup>229</sup>

**Sweden:** The 2004 report emphasized the importance of a strong poverty reduction focus, a gender equality perspective and a human rights perspective irrespective of channel. No financial commitment was mentioned.<sup>230</sup>

**Germany:** The 2005 report noted that it was working to ensure that some of the funds liberated by HIPC debt relief benefited women through primary education for girls or improving the situation of women. It also provided special funds to put a gender perspective into the Poverty Reduction Strategy Papers. Germany was also planning to evaluate implementation of gender equality in the institutions of German development cooperation.<sup>231</sup>

#### Box 4. Extracts on gender from selected donor country reports

**European Union:** An EU report covering 2000–2004 reported that most EU Member States regard gender equality as a crosscutting theme in development policy, supporting both mainstreaming a gender equality perspective in all activities of development cooperation, and funding programmes aimed especially at empowerment for women and girls. However, the report also commented that ‘the EU should call for a clearer political commitment of donors and partner countries to gender equality. Indeed, efforts towards gender equality should be an integrated part of EU investments in all of the MDGs.’ There should also be a ‘stronger emphasis on gender equality as a goal in itself, [and] its central role in development policy with a focus on poverty reduction, human rights and the MDGs’.<sup>232</sup>

**United Kingdom:** in addition to mainstreaming a gender equality perspective, the United Kingdom also supports gender specific activities to promote the rights of women and girls. In 2003/04 DFID committed £297 million to promote gender equality and empowering women.<sup>233</sup>

## B. National long-term targets and indicators

Matrix 24 below suggests a range of long-term targets and indicators for the global partnership based on the preceding gender-responsive rights-based analysis of Goal 8. They should be adapted and added to so that they are relevant and useful.

In developing countries, women’s groups should ensure that data and references in CEDAW country reports to issues relevant under Goal 8, such as access to pharmaceuticals and new technologies, are used in the process of developing national and subnational targets and indicators. The responses of the CEDAW Committee on these matters to the most recent country report may also be useful in providing a global and rights-based perspective.

The relevant sections of the Beijing Platform and National Action Plans based on the Platform also provide information on government commitments. Each section of the Platform included specific commitments by governments, international bodies including relevant United Nations organizations, bilateral and multilateral donors and non-governmental organizations, as well as a section on the international level under Chapter VI Financial Arrangements.

<b>Matrix 24: National long-term targets and indicators for global partnership</b>	
<b>Targets</b>	<b>Indicators</b> (see note # below)
<b>Official development assistance</b>	
L8.A Increase amount of ODA provided by donor countries to 0.7 percent GNP for OECD /DAC donors and 0.15 percent for least developed countries	L8.A.1 Net ODA, total and to the least developed countries, as percentage of OECD/DAC donors' gross national income (unchanged from global indicator 8.1)
L8.B Increase share of this devoted to pro-poor, gender-responsive rights-based policy support and programmes	L8.B.1 Proportion of net ODA allocated to pro-poor, gender-responsive rights-based policy support and programmes
L8.C Increase support from donors and IFIs for the collection, analysis and dissemination of gender-responsive and sex-disaggregated data	L8.C.1 Number of MDG indicators monitored using gender-responsive and, where appropriate, sex-disaggregated data L8.C.2 National statistics offices routinely collect gender-responsive and, where appropriate, sex-disaggregated data L8.C.3 Gender-responsive and sex-disaggregated data collected, analysed and disseminated in Multiple Indicator Cluster Survey (MICS) and Demographic and Health Survey (DHS), fertility and household surveys where appropriate
L8.D Gender-responsive rights-based perspective mainstreamed in donor aid programmes	L8.D.1 Routine use of gender analysis in donor aid programmes L8.D.2 Routine use of gender statistics in all sectors in donor aid programmes L8.D.3 Appropriate resource allocations to mainstream gender-responsive rights-based perspective in donor aid programmes L8.D.4 Number of sectors and local government bodies routinely using gender budget analysis



<b>Matrix 24: National long-term targets and indicators for global partnership</b>	
L8.E International financial institutions accountable to international human rights bodies	L8.E.1 International financial institutions take human rights implications of economic policy into account in providing policy-based loans to developing countries
	L8.E.2 Proportion of IFI loans and grants to developing countries that are genuinely pro-poor and not merely dependent on the trickle-down effect to reduce poverty
	L8.E.3 Trends over time in the percentage of poor households in countries or areas of countries that are heavily dependent on IFI finance
L8.F International financial institutions held to account for implementation of their gender policies	L8.F.1 Proportion of IFI loans and grants to developing countries that are pro-poor, gender-responsive, rights-based and benefit women and girls
	L8.F.2 Proportion of IFI loans and grants to developing countries that specifically target women and girls and/or gender issues
	L8.F.3 Proportion of IFI projects and programmes that incorporate gender analysis and use sex-disaggregated data
L8.G Donors held to account for implementation of their gender policies	L8.G.1 Proportion of ODA to developing countries for gender-responsive rights-based policies that benefit women and girls
	L8.G.2 Proportion of ODA to developing countries that specifically target women and girls and/or gender issues
	L8.G.3 Proportion of ODA projects and programmes that incorporate gender analysis and use sex-disaggregated data
<b>Market access</b>	
L8.H Trade policies take into consideration the impact of free trade agreements on women and sectors and industries where women are the major part of the labour force	L8.H.1 Gender analysis considered by developed countries in promoting trade policies in developing countries
	L8.H.2 Developed countries reduce and remove tariffs and non-tariff barriers on crops and products produced by women
	L8.H.3 Proportion of ODA provided to help build the capacity of women to engage in international trade

**Matrix 24: National long-term targets and indicators for global partnership****Debt sustainability**

L8.I	Funds released by debt relief initiatives, including HIPC, are used to support gender equality and women's rights	L8.I.1	Donors giving debt relief to poor countries work with governments to ensure that at least half of the funds released are used to support programmes that primarily benefit women and girls, particularly in education and health
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**Essential drugs**

L8.J	Women and girls have access to essential drugs	L8.J.1	Proportion of the population with access to essential drugs, by sex and other relevant socio-economic characteristics
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**New technologies**

L8.K	Women and girls have access to and use telephone lines and mobile phones	L8.K.1	Number of women and girls with access to a public telephone within 5 minutes from where they live
		L8.K.2	Number of women and girls with access to a mobile phone within 5 minutes from where they live, including village mobile phone schemes
		L8.K.3	Ratio of females to males owning a mobile phone
L8.L	Women and girls have access to and use computers and the internet	L8.L.1	Number of women and girls with access to a computer within 30 minutes from where they live
		L8.L.2	Number of women and girls with access to the internet within 30 minutes from where they live, including public access internet facilities
		L8.L.3	Ratio of females to males owning a computer

# All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.

## C. Gender-responsive rights-based strategies

### 1. Direct more ODA, loans and grants to gender-responsive rights-based policies and programmes

In the same way that developing country budgets need to invest more in gender-responsive rights-based policies and programmes, donor countries and IFIs should ensure that more of their ODA, loans and grants are directed towards such policies and programmes.

Strategies to address this issue include:

- women's groups in donor countries lobby their governments to direct their ODA in this way;
- women's groups work with the women's national machinery to lobby donors for increased support for gender equality and women's rights;
- use the previous country CEDAW report and the Committee's concluding observations to support such advocacy;
- use gender statistics and gender analysis to support advocacy, emphasizing the importance of women in achieving all eight MDGs and the benefits for all from gender equality and women's empowerment;
- donors to undertake gender-responsive rights-based analysis of their development programmes and budgets;
- support gender-responsive rights-based analysis of total ODA and/or loans and grants to support lobbying and advocacy.

### 2. Increase funding and support to improving gender-responsive and sex-disaggregated data

Both funding and technical assistance are needed to develop better gender-responsive rights-based data. Donor countries, IFIs and UN agencies all have a role. In some cases, including the requirement for such data on a particular issue in a key document may be the first step. Others include improving the collection, dissemination and analysis of gender-responsive rights-based data and the presentation, where appropriate, of sex-disaggregated data.

Strategies to address this issue include:

- ensure that women's groups and the national women's machinery undertake basic training in gender-responsive data collection and simple ways of using gender statistics and sex-disaggregated statistics, so that they can become effective partners of national statistics offices but also hold them accountable for collecting and disseminating good quality gender-responsive statistics;
- advocate with donors and IFIs to increase the financial resources directed to gender-responsive rights-based data collection;
- advocate for adequate funding for gender-responsive statistics with external agencies involved in and supporting specific surveys, such as UNICEF for the Multiple Cluster Indicator Survey, UNFPA for Demographic and Health Surveys and other demographic and fertility surveys, the World Bank and regional banks for national household surveys;
- where opportunities exist, include a requirement for gender-responsive rights-based data in key international documents and agreements.

### 3. Encourage all members of the global partnership to report against relevant areas of Goal 8

Goal 8 comprises a mixture of targets and indicators, with some relevant to donor countries, and others relevant to developing countries. In addition, while the MDG does not specifically address this, IFIs are also key players in the partnership, with much the same responsibilities as donor countries. UN agencies, NGOs and the private sector also have a role.

#### The global partnership

‘This effort must involve all our partners, from international financial and development institutions, to NGOs and the private sector. In particular, all United Nations member States – developed and developing, North and South – must work together towards these goals.’<sup>234</sup>

In response to this:

- donor countries should report against relevant targets and indicators under Goal 8 (and any other appropriate goals);
- developing countries should ensure relevant targets and indicators under Goal 8 are included in their national sets, and report against these;
- IFIs should consider developing their own agency-level sets of MDG targets and indicators addressing relevant areas of Goal 8 and any other appropriate goals, such as those dealing with macroeconomic policies and budgeting under Goals 1 and 3;
- UN agencies and NGOs could consider developing their own agency-level sets of gender-responsive rights-based MDG targets and indicators to inform their own work;
- private sector companies may wish to also develop a set of gender-responsive rights-based MDG targets and indicators relevant to their role.

### 4. Integrate a gender-responsive rights-based perspective in national monitoring of aid effectiveness

As donors and recipient countries alike strive to maximize development impact, new international, regional and national initiatives have emerged to promote and monitor the effectiveness of ODA and development programmes. In 2005 donors and partner countries agreed on the Paris Declaration on Aid Effectiveness, Ownership, Harmonization, Alignment, Results and Mutual Accountability. The Declaration is founded on the five principles for aid effectiveness identified in the title and includes measurable targets for 2010 and a set of 12 indicators to monitor progress in achieving them. The document provides the basic framework for improving the effectiveness of Official Development Assistance for the remainder of the decade and beyond. However, gender receives only a passing mention in paragraph 42, where gender equality is noted as an example of a cross-cutting issue, together with 'other thematic issues'. The MDGs themselves also only receive a passing mention, in the first paragraph.

The lack of a gender-responsive rights-based perspective in the Paris Declaration and a clear link to the MDGs and in the monitoring indicators presents a challenge to efforts to build a gender-responsive rights-based global partnership to implement the MDGs. In the past, innovative programmes for gender equality and women's empowerment have often relied on donor funding and donor-driven support for the adoption at national level of what were, at the time, new ideas about development from the global level. The new aid modalities that are increasingly adopted in support of Paris Declaration commitments to national ownership and

alignment, such as direct budget support and sector-wide approaches, may lead to a reduction in the type of flexible and innovative funding that has been strategically important in the development and promotion of gender mainstreaming strategies.

Strategies to address this issue include:

- gender experts and women's research groups analyse donor aid programmes and budgets from a gender-responsive rights-based perspective to provide data to advocate for increased aid funding for gender equality and women's empowerment;
- gender advocates and women's organizations use the analysis to work with donors to integrate a gender-responsive rights-based approach throughout their aid programmes, focusing particularly on the new aid modalities such as direct budget support and sector wide approaches;
- gender advocates and women's organizations advocate for and provide technical support to gender-responsive rights-based analysis of donor budgets and programmes;
- gender experts and women's research groups collaborate with national monitoring mechanisms to develop gender-responsive rights-based indicators for monitoring commitments under the Paris Declaration;
- gender advocates and women's organizations use the analysis to collaborate at the subregional, regional and international levels to advocate for incorporation of a gender-responsive rights-based perspective to the monitoring of aid effectiveness under the Paris Declaration and related instruments.

##### **5. Women's groups in donor and developing countries should work with donor countries and IFIs**

Women's groups in developing countries may have little power to influence the conditions which donor countries and IFIs place on funding provided to their governments. Women's groups in donor countries may be interested and be skilled and effective at lobbying their own governments, but have limited understanding of the issues faced by women in developing countries. By collaborating bilaterally and through regional or international women's organizations, they increase their understanding and skills base, and improve the likelihood of their concerns being heard. Women's groups in donor countries may also be able to provide financial and other support to those in developing countries.

Strategies on which women's groups in developing and donor countries could collaborate include:

- work with and lobby donors to match their gender policies with the financial resources that would be needed to make them effective;
- advocate with relevant donors for a gender audit of their donor agencies, such as that proposed by Germany in its 2005 MDG Report;<sup>235</sup>
- advocate with donor development agencies to subject their aid programmes to gender-responsive rights-based analysis;
- advocate with IFIs to subject their loan and grant programmes to gender budget analysis, and to undertake gender-responsive rights-based analysis of any conditionalities which are being considered.

## 6. Build capacity for integrating a gender-responsive rights-based perspective into economic policy

Global target 8.A calls for the further development of an open, rule-based, predictable, non-discriminatory trading and financial system. A gender-responsive and rights-based approach is needed to recognize and take into account the potentially differential impact on women and men, and their different needs and priorities. Such an approach is equally important in the development of economic policy documents such as Poverty Reduction Strategy Papers and National Development Plans.

This requires increased skills and understanding in two key groups. On the one hand, capacity-building is needed for economic agencies and economic advisers to recognize the importance of and implement gender-responsive and rights-based policies and strategies. On the other hand, capacity-building is also needed among women's groups, the women's national machinery, and women in the civil service to understand and influence economic policies and programmes.

The various women's agencies and organizations, women in the civil service—especially those in Ministry of Finance or sectoral budget bureaus—and women in parliament can form a very effective lobby group if they present a united front on economic issues to the IFIs, Ministry of Finance and donors. However, women's groups, particularly in the poorer countries, should also recognize the direct and indirect pressures governments face in making policy choices and conducting aid negotiations, and work with them as allies. Women's groups should ensure that they are well advised by gender-sensitive economic experts and are supported by appropriate statistics and analysis.

The increased capacity will enable women's groups, the national women's machinery and women in the civil service to effectively monitor economic policy processes. Where appropriate, they should work with ministries of trade on trade policy, ministries of finance on privatization and/or financial liberalization to represent women's interests and promote gender analysis of any proposed policy changes.

CEDAW country reports and reports to other human rights bodies can be used to draw attention to the need for integrating a gender-responsive rights-based perspective into economic policy in general, and to specific policies and conditionalities. Women's groups in poor countries most affected by inappropriate IFI conditionalities should consider the value of preparing an alternative report to the CEDAW Committee highlighting the negative impact on their rights.

Strategies to address this issue include:

- provide workshops on gender-responsive rights-based approaches to economic advisers and staff in economic agencies;
- assist women's groups and women in the parliament to undertake basic training with gender-sensitive economists so that they can understand the broad policy issues and advocate effectively for gender-responsive rights-based economic policies;
- ensure that gender-sensitive female and male economists work with mainstream economic advisors to advocate a gender-responsive rights-based perspective on policy analysis and decision-making;
- assist women's groups and gender-sensitive economists to work with civil society budgeting groups to introduce a gender-responsive rights-based perspective to their work;

- ensure that women's groups and the national women's machinery are able to engage on an informed basis in the preparation of Poverty Reduction Strategy Papers, National Development Plans and other economic policy documents.

Women's groups might also consider the actions proposed by the Gender Action Guide to World Bank and IMF Policy-Based Lending 2006.

**Box 5. Proposed actions from the Gender Action Guide to IFI  
Policy-Based Lending**

- Advocate and lobby countries to implement economic and social policies that address and rectify gender inequality;
- Advocate and lobby IFIs to provide direct budget support as agreed in the Paris Declaration and promote the Paris Principles of national ownership, alignment and harmonization to support national priorities, mutual accountability and managing for development results while promoting gender equality and women's empowerment;
- Work with the World Bank to strengthen its gender policy and extend it to all programmes, including infrastructure projects, and lending;
- Support debtor countries that choose to repudiate debts incurred through lending to corrupt officials and governments; such debts comprise an estimated 20 percent of at least \$500 billion of developing country debt
- Encourage the IFIs to provide grants to fund education for poor children and girls in countries where they have required governments to charge user fees
- Lobby the World Bank and IMF to undertake a gender audit of their operations to assess impact on the poor, especially women and girls
- Call for increasing policymaking space in low-income countries to enable them to pursue policies that can improve gender relations and increase sustainable economic growth.<sup>236</sup>

**7. Include cross-border issues affecting women and girls, including migrant workers and trafficking**

At county level, as demonstrated by countries such as Viet Nam, additional goals and targets of national priority can be added to the MDGs in national reports. However, some emerging issues which contribute to increased poverty, result in serious violations of human rights, and have the potential to obstruct the achievement of the MDGs in the poorest countries, are cross-border in nature. In particular, issues such as migrant workers and trafficking cannot be adequately addressed at national or even regional level. Consideration should therefore be given to including these issues in the MDG framework, not only at the national level but also in regional reports and possibly in the global report.

Strategies to address this issue include:

- where appropriate, include a goal to support migrant workers, particularly women, in the national MDGs, and develop appropriate targets and indicators for monitoring and reporting;
- where appropriate, include a goal to reduce and ultimately eliminate trafficking in women and girls in the national MDGs, and develop appropriate targets and indicators for monitoring and reporting.



## D. National intermediate targets and indicators

Matrix 25 below suggests a range of national intermediate targets and indicators for the global partnership for development, based on the preceding analysis and suggested strategies. They should be adapted and added to so that they are relevant and useful for the individual country.

Intermediate targets and indicators should be used by women's groups and civil society, as well as by policy makers and programme managers, to assess whether a particular strategy is achieving the intended result and to indicate where and when a strategy may need to be adjusted or replaced.

<b>Matrix 25: National intermediate targets and indicators for global partnership</b>	
<b>Targets</b>	<b>Indicators (see note # below)</b>
18.a Increase the share of ODA, loans and grants to support gender equality and women's rights	18.a.1 Proportion of ODA supporting gender equality and women's rights, by donor ( <i>from output of gender budget analysis of ODA</i> ) 18.a.2 Proportion of loans from IFIs supporting gender equality and women's rights 18.a.3 Proportion of grants from IFIs supporting gender equality and women's rights
18.b Increase the share of ODA, loans and grants for gender-responsive and sex-disaggregated data	18.b.1 Proportion of ODA supporting gender-responsive and sex-disaggregated data 18.b.2 Proportion of loans from IFIs supporting gender-responsive and sex-disaggregated data 18.b.3 Proportion of grants from IFIs supporting gender-responsive and sex-disaggregated data
18.c Donors implement a gender-responsive rights-based perspective into their aid programmes and projects	18.c.1 Number of donors conducting gender budget analysis of their ODA 18.c.2 Number of donors routinely using sex-disaggregated data to monitor their projects and programmes
18.d A gender-responsive rights-based perspective is integrated into national economic policy, particularly at the macro level	18.d.1 CEDAW country reports include an analysis of the impact of economic policy, particularly macro economic policy, on women and girls 18.d.2 References to human and women's rights implications and national obligations in economic policy documents

Matrix 25: National intermediate targets and indicators for global partnership		
18.e	International financial institutions consult regularly with women's groups and routinely monitor and report on the impact of their policies on women and the poor	<p>18.e.1 References to the impact of economic policies on women, girls and the poor in IFI policy documents</p> <p>18.e.2 Number of gender-responsive rights-based economic policies being supported by IFIs</p>
18.f	Cross-border issues affecting the rights of girls and women are incorporated in Goal 8 at the national level and addressed, particularly the rights of women migrant workers and protection from trafficking	<p>18.f.1 Policies and programmes initiated by governments to provide services to and protect the rights of women migrant workers</p> <p>18.f.2 Ratio of women to men migrant workers overseas or returning</p> <p>18.f.3 Value of remittances from migrant workers, by sex of worker</p> <p>18.f.4 Reported cases of trafficking in previous year</p> <p>18.f.5 Number of cases of trafficking prosecuted by the police in previous years</p> <p>18.f.6 Number of traffickers convicted</p> <p>18.f.7 Length of sentences given to convicted traffickers</p>
18.g	A gender-responsive and rights-based perspective is integrated throughout monitoring of aid effectiveness, including monitoring for the Paris Declaration	18.g.1 Gender-responsive rights-based indicators are used to monitor aid effectiveness, including monitoring for the Paris Declaration.
<p># All individual level indicators should be disaggregated by sex, rural/urban location and other relevant socio-economic variables, particularly those relating to minority groups and, where relevant, internally displaced persons.</p>		



# APPENDIX

## Appendix

The Convention on the Elimination of All Forms of Discrimination against Women, the Beijing Platform for Action and the Millennium Development Goals are mutually supporting processes. CEDAW and the Beijing Platform are the two key international gender equality and women's rights documents.

### A. Convention on the Elimination of All Forms of Discrimination against Women

CEDAW was adopted by the United Nations General Assembly in 1979. By 2 Nov 2006, 185 countries—over 90 percent of the United Nations—were party to the Convention. States Parties to the Convention make a serious commitment to eliminate discrimination against women and to guarantee women's rights.

#### Box 6. States Parties' Commitments under CEDAW

By accepting the Convention, States commit themselves to undertake a series of measures to end discrimination against women in all forms, including to:

- incorporate the principle of equality of men and women in their legal system, and abolish all discriminatory laws and adopt new laws that prohibit discrimination against women;
- establish tribunals and other public institutions to ensure the effective protection of women against discrimination;
- ensure elimination of all acts of discrimination against women by persons, organizations or enterprises.

States Parties to the Convention are required to submit an initial baseline country report on the situation of women to the Committee for the Elimination of All Forms of Discrimination against Women, followed by reports every four years that show progress and indicate which actions will be taken during the following four years. These reports are subject to detailed public scrutiny by the Committee, which issues comments to which States Parties then respond.

Described as an international bill of rights for women, CEDAW establishes women's human rights in 16 substantive articles and in the general recommendations issued from time to time by the Committee. Article 1 defines two kinds of discrimination against women and shows that two different strategies, or a combination of both, may be needed to achieve gender equality. De jure or formal discrimination, such as laws that prevent, in ways that do not apply to men, women from owning property or obtaining credit, requires legal and institutional reforms to remove discriminatory provisions. De facto discrimination that results in differential outcomes between women and men, such as lower levels of literacy or education for women than men due to lower parental priority for education for girls, may require actions to raise awareness and change attitudes, or special programmes targeting women and girls.

**Box 7. CEDAW Substantive Articles**

Article 1: Discrimination	Defines discrimination against women as ‘any distinction, exclusion or restriction . . . on the basis of sex which has the effect . . . of impairing . . . the recognition, enjoyment or exercise by women, . . . on a basis of equality of men and women, of human rights. . .’
Article 2: Policy Measures	Take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices which constitute discrimination against women
Article 3: Basic human rights	Guarantee women the exercise and enjoyment of human rights and fundamental freedoms on a basis of equality with men
Article 4: Special Measures	Temporary special measures aimed at accelerating de facto equality between men and women shall not be considered as discrimination
Article 5: Sex Role Stereotyping	Eliminate prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women
Article 6: Prostitution	Suppress all forms of traffic in women and exploitation of prostitution of women.
Article 7: Political and Public Life	Eliminate discrimination against women in the political and public life of the country
Article 8: Representation	Ensure to women, on equal terms with men and without discrimination, the opportunity to represent their governments at the international level and to work in international organizations
Article 9: Nationality	Grant women equal rights with men to acquire, change or retain their nationality.
Article 10: Education	Ensure women equal rights with men in the field of education
Article 11: Employment	Eliminate discrimination against women in the field of employment
Article 12: Health	Eliminate discrimination against women in the field of health care
Article 13: Economic and Social Benefits	Eliminate discrimination against women in other areas of economic and social life
Article 14: Rural Women	Take into account the problems faced by rural women and the significant roles they play in the economic survival of their families, including their work in the non-monetized economy.
Article 15: Law	Accord to women equality with men before the law
Article 16: Marriage and Family Life	Eliminate discrimination against women in all matters relating to marriage and family relations.

General Recommendations issued from time to time by the Committee supplement the original 16 substantive articles, while some cover administrative matters. General Recommendations cover some issues such as violence against women that were not covered by the original articles; address emerging issues such as HIV/AIDS; or extend and update existing articles. The later General Recommendations, such as Nos. 23, 24 and 25, are longer with more analysis, and more detailed recommendations, making them a valuable resource for engendering the MDGs.

#### Box 8. Selected CEDAW General Recommendations

No. 5	1988	Temporary special measures, affirmative action, preferential treatment and quotas, in education, economy, politics and employment
No. 6	1988	Effective national machinery to advise on the impact on women or policies and monitor the situation of women
No. 8	1988	Women to represent their government equally with men at international level and work in international organizations
No. 9	1998	Statistical data on women to be presented separately for women and men
No. 12	1989	Violence against women – States Parties to protect women against violence in the family, at work or in social life
No. 13	1989	Equal pay for work of equal value
No. 14	1990	Female circumcision
No. 15	1990	Avoid discrimination against women in prevention and control of AIDS
No. 16	1991	Unpaid women workers in rural and urban family enterprises
No. 17	1991	Measurement and quantification of unpaid domestic work of women and its recognition in the gross national product
No. 18	1991	Disabled women
No. 19	1992	Violence against women is a violation of women's human rights
No. 20	1992	Reservations to the Convention
No. 21	1994	Equality in marriage and family relations, including ownership of marital property and inheritance
No. 23	1997	Eliminate discrimination in political and public life, right to vote, participate in policy formulation and in NGOs
No. 24	1999	Women and health
No. 25	2004	Definition and explanation of temporary special measures.



## B. Beijing Platform for Action

The Beijing Platform for Action was the outcome document from the Fourth World Conference on Women held in Beijing in 1995. The Beijing Declaration and the Platform were signed by representatives of 189 Governments.

Based on input from women's groups through the NGO Forum and from governments participating in the Conference, the Platform identified 12 critical areas of special concern to women.

### Box 9. The Beijing Platform 12 Critical Areas of Concern

1. Women and poverty—the persistent and increasing burden of poverty on women
2. Education and training of women—inequalities and inadequacies in and unequal access to education and training
3. Women and health—inequalities and inadequacies in and unequal access to health care and related services
4. Violence against women
5. Women and armed conflict—the effects of armed or other kinds of conflict on women, including those under foreign occupation
6. Women and the economy—inequality in economic structures and policies, in all forms of productive activities and in access to resources
7. Women in power and decision-making—inequality between men and women in the sharing of power and decision-making at all levels
8. Institutional mechanisms for the advancement of women—insufficient mechanisms at all levels to promote the advancement of women
9. Human rights of women—lack of respect for and inadequate protection and fulfilment of the human rights of women
10. Women and the media—stereotyping of women and inequality in women's access to and participation in all communication systems, especially in the media
11. Women and the environment—gender inequalities in the management of natural resources and in the safeguarding of the environment
12. The girl child—persistent discrimination against and violation of the rights of the girl child.

Each of the critical areas of concern:

- diagnoses the specific problems for women in the area;
- proposes strategic objectives and concrete actions;
- identifies which actions are to be taken by specific actors in order to achieve the objectives.

The objectives and actions are 'interlinked, of high priority and mutually reinforcing'. The Platform for Action is intended to improve the situation of all women, who often face similar barriers. However, it gives special attention to poor women, rural women, and the most disadvantaged women, including those facing discrimination due to 'race, age, language, ethnicity, culture, religion or disability, because they are indigenous or of other status'.

Like CEDAW, the Platform recognizes the barriers some or specific groups of women face due to their family status, particularly if they are single parents; and to their socio-economic status, including living in rural, isolated or impoverished areas. Singled out for special attention are refugee women, internally displaced women, immigrant and migrant women and women migrant workers, and those affected by environmental disasters, serious and infectious diseases and various forms of violence against women.

The General Recommendations and Country Reports to the CEDAW Committee, and the Beijing Platform's 12 Critical Areas of Concern provide gender analysis and practical inputs for a gender-responsive rights-based approach to the MDGs.

### C. Common Concerns of the MDGs, CEDAW and the Beijing Platform

The extent to which gender and women's rights are dimensions of each of the MDGs is evident from a comparison of the eight goals with the focus of the substantive articles of CEDAW and the 12 critical areas of concern in the Beijing Platform. If the CEDAW General Recommendations were included, the cross-cutting nature of gender in all eight goals would be even stronger.

**Box 10. Common Concerns of the MDGs, CEDAW and Beijing Platform**

MDG Goals	Related CEDAW Articles	Related Critical Area of Concern
1. Eradicate extreme poverty and hunger	3. Guarantee of basic human rights and fundamental freedoms, including from hunger 11. Employment 14. Rural women	A. Women and poverty – the persistent and increasing burden of poverty on women F. Women and the economy – inequality in economic structures, policies, productive activities and access to resources
2. Achieve universal primary education	10. Education 16. Marriage and family life	L. The girl child – persistent discrimination against and violation of the rights of the girl child B. Education and training of women – inequalities, inadequacies and unequal access to education and training
3. Promote gender equality and empower women	7. Political and public life 8. Representation 10. Education 11. Employment	B. Education and training of women F. Women and the economy G. Women in power and decision-making – inequality between women and men in power and decision-making at all levels

**Box 10. Common Concerns of the MDGs, CEDAW and Beijing Platform**

4. Reduce child mortality	12. Health	C. Women and health – inequalities, inadequacies and unequal access to health care and related services
5. Improve maternal health	12. Health	C. Women and health
6. Combat HIV/AIDS, malaria and other diseases	12. Health	C. Women and health
7. Ensure environmental sustainability	7. Political and public life 14. Rural women	K. Women and the environment – inequalities in management of natural resources and safeguarding the environment
8. Develop a global partnership for development	7. Political and public life 8. Representation	F. Women and the economy G. Women in power and decision-making

*CEDAW Articles 1 (Discrimination), 2 (Policy measures), 4 (Special measures) and 5 (Sex role stereotyping and prejudice) are relevant to all MDGs*

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Promoting gender equality and empowering women is clearly embedded in the Millennium Declaration, and is one of the eight Millennium Development Goals (MDGs). Set at the heart of the development agenda, the MDGs are a fresh promise for progress on gender equality and women's empowerment, so critical to achieving development. *Making MDGs Work for All* urges for the comprehensive use of the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) and the Beijing Platform for Action in policies and programmes for the achievement of MDGs. It provides rich examples of how each MDG can be approached in a manner that is gender-responsive and rights-based.

