

Gender-sensitive social protection and the MDGs

Gender dynamics cut across all eight of the Millennium Development Goals

Key points

- Policy dialogue on the Millennium Development Goals must recognise that the goals are linked by the gender dynamics of power, poverty and vulnerability
- Gender-sensitive social protection can contribute to the goals, but only if gender equality is seen as critical to programme effectiveness
- Advances in gender-sensitive programme design are being made but more investment is needed to build the capacity of programme staff and participants to strengthen implementation outcomes

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Taken together, the eight Millennium Development Goals (MDGs) aim to support human capital development and poverty reduction. However, even though gender inequality exacerbates poverty and vulnerability, gender is explicit in only two of the goals. MDG3 – promote gender equality and empower women – includes targets on gender parity in education, the share of women in wage employment, and the proportion of seats held by women in national legislatures. MDG5 – improve maternal health – focuses on maternal mortality and, since 2005, universal access to reproductive health. This explicit inclusion in just two MDGs is too narrow: gender dynamics cut across all the goals but have been relatively invisible in policy dialogues, sidelining other gender-specific risks and vulnerabilities, roles and responsibilities, and power relations (Jones et al., 2008).

Social protection has become an increasingly popular mechanism to address risk and vulnerability in recent years. At the same time, however, social protection has focused largely on protecting the vulnerable against economic risks and vulnerability. Social vulnerability, such as gender inequality and social discrimination, has largely been overlooked in the broader social protection debate (Holmes and Jones, 2009). In reality, economic and social risks are linked and recognising different experiences of poverty and vulnerability is vital if social protection programmes are to help people move out of poverty (ibid; Devereux and Sabates-Wheeler, 2004). Taking only an income approach to poverty reduction is unlikely to lead to gender equality and the empowerment of girls and women, or tackle the development challenges that must be overcome for sustainable poverty reduction.

This briefing paper draws on ODI's research on social protection and gender in eight



Gender issues cut across all of the MDGs.

countries and three regions funded by DFID and AusAID and discusses how social protection interventions (including public works programmes, asset and cash transfers, and targeted social services) can promote an inter-linked gender-sensitive approach to the MDGs. It looks at three clusters of Goals: poverty and sustainable development (MDGs 1 and 7); service access, care and care-giving (MDGs 2-7); and voice and agency (MDGs 3 and 8).

Poverty reduction and sustainable development: supporting economic productivity

Women are disproportionately represented in the agricultural sector and in employment that is vulnerable (ie. insecure or poorly paid). There is a gender gap in wages as a result of the concentration of women in low paying industries, differences in skills and work experience and sheer discrimination (ILO, 2009a). Now the global economic crisis has exacerbated income poverty and food insecurity in developing countries and unemployment has risen. There are a projected 200 million new working poor earning less than

Box 1: Gender relations shape social protection programmes

Programme beneficiaries and stakeholders emphasise that gender dynamics play a key role in shaping social protection programme effectiveness, as the following examples illustrate:

‘LEAP enables us to buy school uniforms, books and fees; it makes it easier for children to remain in school. It also helps us to take care of our children and to access better health care and drugs, especially for the children when they are sick. But LEAP has not affected family relations. Household members relate in the same way as before’ (Female in focus group discussion, Tanbo, Ghana, 2009).

‘Men are always preferred than women [in NREGA]. Single women are excluded as some works demanded the participation of both men and women as a pair’ (Female in focus group discussion, Bhagwanpura Village 1, India, 2009).

‘Women are involved in heavy physical work at working sites. The programme doesn’t consider that women in female-headed households have triple responsibilities at home. It does not consider women’s home-based productive activities such as family planning, child care, income-generating activities, vegetable gardening, inset plantation, etc.’ (Gender Expert, Women’s Affairs Office, Soddo Zuria, Ethiopia 2009).

‘Before it was different, there were no training sessions. We didn’t know, so when we argued with our wives we even kicked them or punched them. But with Juntos they always tell us we must live in harmony. Before, women were not aware of their rights, even men weren’t, which is why there was violence ... Now it has diminished, we talk more’ (Men in focus group discussion, Motoy, Peru, 2009).

‘... BRAC has [also] trained us that women can marry at the age of 18 and men can marry at the age of 21; child marriage, registration of marriage, dowry, divorce, water born diseases, vitamin A and so on. BRAC has taught us about 10 issues’ (Life history, female, Magura, Bangladesh, 2010).

... \$2 a day – mostly in the informal economy, and the majority of them women (ILO, 2009b).

Well designed social protection programmes can support progress towards MDG1 by promoting women’s participation in economic activities through public works programmes, improving nutrition and food security through regular income and food transfers and reducing the poverty gap through targeted interventions such as cash transfers, asset transfers and inputs.

Public works programmes, for example, can be designed to tackle some of the challenges women face in engaging in productive activities. Examples taking gender into account include two programmes in Ethiopia and India: the Ethiopian Productive Safety Nets programme (PSNP) and the India Mahatma Gandhi National Rural Employment Guarantee Act (formerly known as NREGA). They reach over eight million people and over 40 million households respectively. Both require that one-third of their participants are women and provide equal wages and childcare facilities. The PSNP also includes alternative (direct cash transfers) support for pregnant and nursing women; flexible working hours to accommodate domestic responsibilities; the creation of gender-sensitive assets (such as access to water and firewood/fuel); and direct income support to female-headed households, given their greater time and labour poverty. Both have supported households’ immediate needs, especially by supporting household food consumption, and could support

MDG7 on environmental sustainability by improving sources of drinking water and developing improved agricultural practices through the creation of public assets such as irrigation systems and wells.

Public works programmes in Ethiopia and India also highlight the need for effective gender-sensitive implementation, including equal wages and appropriate work. This means raising awareness among development agents, local government, as well as women and men taking part in the programme to move away from a male-productive-based norm. It is also critical to ensure that funds are made available and used for childcare facilities and that flexible working hours are enforced.

The importance of quality basic and social services

There is growing evidence that gender dynamics are intrinsic to service access (Sen and Ostlin, 2007; Levine et al., 2008), and with almost two-thirds of the service-related MDGs off-track, this is clearly important. Men and women, girls and boys face different challenges in accessing quality services because of a range of biological (e.g. divergent disease burdens) and social factors (including time poverty, mobility restrictions, unequal socio-cultural power, and gendered risk behaviours). As part of a focus on tackling human capital deprivations in vulnerable populations, a number of social protection instruments, however, try to improve service access, especially through cash transfers and targeted social services.

Cash transfer programmes, which provide a regular cash benefit to impoverished households to alleviate poverty and promote human capital development, have burgeoned in the developing world since the mid-1990s. They have been heralded by some analysts as gender-friendly initiatives, given their targeting of care-givers and recognition of women’s caring responsibilities (Thakur et al., 2009). Many of these programmes require participants to comply with conditionalities or ‘co-responsibilities’ to ensure that their children access basic health and education services. In low-income countries in particular, these cash transfers are critical for MDGs 2 and 3, supporting children’s primary school attendance (e.g. Ghana’s LEAP programme), and providing incentives (in the form of extra payments) for parents to invest in their daughters’ secondary education (e.g. Mexico’s Progresá programme and Bangladesh’s Female Secondary School Assistance Programme).

Evidence also suggests that cash transfers can support progress towards MDGs 5 and 6. Qualitative research with programme participants finds that cash transfers also help with healthcare costs, which are often seen as a woman’s responsibility in the household. Ghana’s LEAP participants, for instance, often used their cash payment to pay for the national social insurance card. Indeed ill-health was identified as a common source of vulnerability across all country case studies, including in the case of pregnancy as well as ‘killer diseases’ such as malaria and HIV/AIDS. Evaluations also show

that cash transfer programmes with good linkages to complementary services, such as Peru's Juntos programme, enhance access to preventative health services (e.g. immunisation and nutrition programmes) and to women's reproductive health services, including information on family planning for adolescent girls, and support for pregnant women who are victims of gender-based violence.

Improving household cash flow and service coordination are critical to improve service access, but do not address socio-cultural barriers to that access, such as time poverty, mobility restrictions and gender-based violence and exploitation. There is growing recognition that making cash transfers conditional upon children's uptake of services exacerbates women's time poverty and can even hamper their ability to earn an income (Molyneux, 2006). In Pakistan's new Benazir Income Support Programme, programme staff visit women to help them sign up for bank accounts in their own name. However, without tackling the socio-cultural mobility restrictions women face, gender-specific vulnerabilities will not be addressed. Similarly, by focusing on household heads, social protection programmes may exclude adolescent girls or single women living in extended family arrangements who, in the absence of economic independence, are vulnerable to exploitation.

Targeted social services are social protection mechanisms that aim to strengthen service access. In the case of Viet Nam's National Targeted Programme for Poverty Reduction, fee exemptions are provided for education and health services, complemented by access to credit, vocational training, agricultural extension services and legal aid. This package approach has helped to address the multidimensional experiences of poverty and vulnerability in poor and excluded communities (MOLISA and UN in Viet Nam, 2009), but overlooks some of the specific deprivations faced by, in particular, ethnic minority women, including language barriers and lack of land title that prevent them accessing services.

Mexico's Programa Estancias Infantiles provides subsidised childcare services to working or studying caregivers in poor households and is another targeted social services initiative aiming to improve the care (including health and education) of pre-school age children while supporting women's economic empowerment opportunities. By recognising the value of care and the importance of promoting joint society-state responsibility for care work, this programme underscores a key dimension that has too often been missing in policy dialogues around the MDGs. Facilitating service access requires moving beyond a reliance on technology and infrastructure in isolation, to ensuring that policies and programmes are informed by a clear analysis of the underlying social determinants, including the dynamics of the care economy. At the micro-level, this may mean encouraging men to participate more actively in the support and care of their children (as promoted by awareness-raising forums on gender roles linked to many Latin American conditional

cash transfer programmes), while at the macro-level it may mean holding governments and development partners to account for progress in supporting care services and caregivers.

Women as agents of change

MDG3 deals with two aspects of women's empowerment – education and national political representation. Promoting the ability of women to articulate their views in a meaningful way (voice) and to become the agents of their own empowerment (agency) is vital to overcome engrained socio-cultural conditioning and the gendered division of labour (Jones et al., 2008). At local level, a number of social protection programmes have aimed to increase women's participation in programme governance structures. As part of its objectives to improve local governance and democracy, NREGA has included social audits – an innovative public vigilance mechanism. In Bangladesh, an asset transfer programme managed by BRAC seeks to include the village elite and the extreme poor programme beneficiaries (mainly women) through a Poverty Reduction Committee where beneficiaries actively participate in regular meetings. Empowering women in this context has given them a new voice in a new context and structure and has, in some cases, enhanced their social capital.

Such participation and empowerment is dependent on clear programme objectives and incentives to involve women in community and decision-making processes. However, the participation of women in community meetings in many country contexts continues to be low – a result of prevailing socio-cultural attitudes as well as domestic responsibility and time constraints. Meetings must be organised at a time when women can attend, language barriers must be tackled, and incentives, such as having a minimum quota of women in the meeting for it to go ahead, can help. Ensuring that women speak and raise their demands in meetings also requires specific support and capacity-building. Linkages with NGOs and CSOs can play an important role here. In Peru, for example, the programme promotes the election of community facilitators ('madres líderes' or 'presidentas'), who serve as a link between programme staff and beneficiaries and are trained in areas such as leadership, participatory methodologies and organisation. This gives women the chance to participate and lead at the community level, increasing their confidence and self esteem and addressing traditional barriers such as perceived lack of skills and fear of speaking in public.

Donors can also create an international environment that is more supportive of women's voice and agency, contributing to MDG8, which focuses on improved international aid and cooperation. At national and international level the links between social protection and women's empowerment vary significantly, but, in general, there is too little recognition of the potentially transformative role of



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social protection. Donors can support investment in capacity-building to ensure that implementers are trained on gender issues and to promote enhanced representation of gender focal points at the local level. Donors should also prioritise the collection and analysis of sex and age disaggregated data to inform the design and implementation of programmes to promote gender equality.

Policy recommendations

Gender-sensitive social protection can maximise synergies across the MDGs by reducing poverty and inequality. Given the wide-range of the goals and the challenges to be overcome to achieve them by 2015, a package of social protection measures can help to address multi-dimensional gender vulnerabilities. It is critical to strengthen the design, implementation, programme partnerships and monitoring and evaluation of social protection interventions.

Policy and programme design: Policies and programmes need to be informed by a clear analysis of economic and social gender vulnerabilities. These include unequal decision-making power and different roles in the household; the time poverty of women and girls as a result of domestic and care work responsibilities; limited participation and influence in community decision-making; language barriers among ethnic minority women; vulnerability to violence and abandonment; and mobility restrictions. It is essential that addressing gender issues is no longer seen as a technical task to be completed and is seen, instead, as critical to programme effectiveness and the achievement of the MDGs.

Implementation: three key implementation challenges need to be addressed to capitalise on the transformative potential of social protection.

First, it is vital to develop tailored and ongoing capacity-building about gender-related programme aims, including reducing women's time poverty and finding collective solutions to care work responsibilities – for male and female programme participants and programme implementers alike. Poor training undermines the potential for benefiting from the programme's linkages. Programme designers need to ensure strong political commitment, strategic coordination

across implementing agencies and service providers, and sufficient funding over the medium to long term to achieve real change. Support from women's government agencies or gender focal points is needed to support gender-sensitive programme implementation. Second, in the case of public works and asset and cash transfer programmes, there is scope to make better use of the regular interactions that social welfare officers/local implementation officers have with local communities on payment days, to initiate community dialogues on ways to address gender inequalities such as gender-based violence, early marriage, the costs of child labour, especially for girls' human capital development, and gendered forms of social stigmatisation.

Third, programmes with strong and well-coordinated linkages to complementary services are more likely to have a notable impact on women's practical gender needs and their more strategic gender interests by tackling their vulnerabilities in a more holistic fashion. Good linkages are needed, for example, across health and reproductive health services, credit access and employment training.

Monitoring, evaluation and learning: Given scarce resources and a 2015 deadline, there is an urgent need for investment to ensure that gender considerations are integrated into the monitoring and evaluation of social protection programmes, including the collection, analysis and dissemination of gender and age disaggregated indicators that capture progress in tackling both economic and social vulnerabilities. Institutionally, linkages and lesson learning between government- and NGO-implemented programmes should be promoted through frequent knowledge exchange activities and lesson learning among donors and international agencies to identify opportunities to strengthen gender-sensitive social protection programming. Linked to this, mechanisms need to be in place to translate the lessons from training into performance indicators that are monitored, with good performance rewarded.

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