

# Parliamentary Workshop on Advancing Maternal and Reproductive Health and Gender Equality in member countries of the Organization of Islamic Cooperation (OIC)

Tunis, Tunisia

March 8-10, 2012

Background Document Prepared by Diane Aboushi

## TABLE OF CONTENTS

#### I. INTRODUCTION

## II. DISCUSSION OF CEDAW AND THE MILLENNIUM DEVELOPMENT GOALS (MDGs)

#### **III. OPPORTUNITIES TO ADVANCE WOMEN'S RIGHTS**

#### IV. TOOLS TO IMPLEMENT CEDAW TO ADVANCE MDG 3 AND MDG 5

- A. Achieving Gender Equality in the Classroom
- B. Bridging the Gender Gap: Gender Discrimination in Employment
- C. Increasing the Proportion of Seats Held by Women in National Parliaments
- D. Reducing Maternal Mortality Rates
- E. Paving the Way for Universal Access to Reproductive Health

## I. INTRODUCTION

Parliamentarians are key to improving maternal and reproductive health and achieving gender equality at the national level. They promote, review, and adopt reproductive health and rights legislation, including budget appropriations. Parliamentarians also approve policies formulated by government and endorse resolutions and statements in support of reproductive health and rights.

The 56 member countries of the Organization of Islamic Cooperation (OIC) span the regions of the world. Like other countries, OIC Member States face a number of challenges to improving maternal and reproductive health and achieving gender equality. These include resistance from religious groups, skepticism about women's empowerment issues, shortcomings in the legal and institutional frameworks, non-inclusive practices of political parties, lack of information for effective advocacy, objective discussion of gender equality and maternal and reproductive health in parliaments, and scarce financial resources.

The **Parliamentary Workshop on Advancing Maternal and Reproductive Health and Gender Equality in member countries of the Organization of Islamic Cooperation (OIC)** will bring together parliamentarians and other leaders in government, international organizations, civil society and the CEDAW Committee to discuss national strategies, share best practices and obtain first-hand advice for successfully implementing the International Conference on Population and Development Programme of Action (ICPD PoA) and the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW).

The goal of the workshop is to provide a space for parliamentarians to openly address challenges, especially deeply- rooted cultural gender stereotypes. By sharing strategies with colleagues from other Muslim countries and experts from the international community, parliamentarians will be better equipped with the tools to: (1) discuss and debate in favor of the development of national legislation on maternal health, reproductive rights, and gender equality, and (2) draft new or revised legislation/regulations in this area and take measurable steps to improve enforcement/implementation of existing legislation.

This paper serves as a resource for parliamentarians in the OIC and complements the intellectual and practical tools provided in the workshop. It describes techniques that parliamentarians may employ to implement the relevant CEDAW articles to advance Millennium Development Goal 3 (MDG 3) on gender equality and women's empowerment and Millennium Development Goal 5 (MDG 5) on maternal and reproductive health. Several topics are covered, including: achieving gender equality in the classroom, eliminating gender discrimination in the workforce, increasing the proportion of seats held by women in national parliaments, reducing maternal mortality rates and paving the way for universal access to reproductive health.

#### II. BACKGROUND ON CEDAW AND THE MDGS

CEDAW remains the pre-eminent international treaty to this day in seeking to introduce, enforce and uphold equal rights and opportunities for women. This is essentially achieved through the prohibition of discrimination against women in many of its different manifestations in national law and practice. Although there are currently 187 States Parties to CEDAW, an extraordinary endorsement of the importance of this treaty by the international community, its implementation, in contrast, on a country by country basis, has been, to date, less than satisfactory. Legislators, as lawmakers, play a unique role in advocating for necessary legislation, drafting, overseeing it and mobilizing necessary resources for its implementation. They are key stakeholders in the proper implementation of the relevant provisions of CEDAW as the specific vehicle for advancing gender equality and improving maternal health. In particular, this paper focuses on CEDAW articles 10, 11, 12 and 16 (e) devoted to gender equality and maternal health.

In 2000, 189 nations made a commitment to lift people from extreme poverty and multiple deprivations. This pledge was expressed by the eight Millennium Development Goals (MDGs) to be achieved by 2015. In September 2010, the world recommitted itself to accelerate progress toward these goals. The emphasis of this paper is on MDG 3 and MDG 5, respectively. MDG 3 seeks to eliminate gender disparity in primary and secondary education, achieve gender balance in wage employment and to increase the proportion of seats held by women in national parliament. MDG 5 aims to reduce the maternal mortality ratio and achieve universal access to reproductive health.

While CEDAW is an international, legally-binding instrument on women's rights and MDG 3 and 5 are specific targets to be attained by countries by 2015, they follow parallel paths toward achieving women's rights. Thus, in implementing the relevant CEDAW articles, a country will be able to make progress towards achieving the goals set out in MDG 3 and MDG 5.

### III. OPPORTUNITIES TO ADVANCE WOMEN'S RIGHTS

The political will to make positive change is very strong in certain regions of the OIC. Specifically, home grown revolutions have swept across the Middle East and North Africa (MENA). Citizens of the MENA region are demanding that government officials become accountable to their citizens and that political leaders promote a system of governance that guarantees human rights and basic freedoms. The aspiration for change in the MENA region has served as an inspiration for the rest of the world. Parliamentarians from the MENA region and all the OIC countries have an opportunity and responsibility to assure that democratization results in the advancement of women's rights and opportunities for better health.

OIC countries have made some strides in advancing women's empowerment and maternal health but continue to struggle in fully meeting the goals set out in MDG 3 and MDG 5. For example, Tunisia has taken the lead by passing a law requiring that there be an equal number of men and women candidates on the ballots for the Constituent Assembly. Tunisia is also the first country in the MENA region to lift key reservations to CEDAW, a vital step toward achieving gender equality. In Egypt, however, there weren't any women included in the 63- person committee that drafted the package of constitutional amendments that passed with 77% of the vote.<sup>i</sup>

Parliamentarians can take advantage of the political will for social change by pushing for the advancement of MDG 3 on women's empowerment and MDG 5 on maternal and reproductive health by the following actions:

- Appropriate budgets that cover relevant programs.
- Establish women's caucuses in parliament to combine the power of women legislators, increase their influence, add a gender perspective into the policy development process, and introduce legislation that addresses priority issues necessary for the implementation of CEDAW to advance MDG 3 and MDG 5.
- Call for the MDGs to be a priority for all the committees on which they serve.
- Create strategic partnerships with civil society to generate issue awareness.
- Introduce legislation that promotes women's empowerment and reproductive health.

Moreover, OIC countries can continue to build on what they have done so far to empower women and improve women's health. Tunisia has covered good ground on gender equality as "women have played a visible role in Tunisian society, representing 37% of the working population, 56% of students, 24% of magistrates and 22% of the executive positions in the Tunisian civil service."<sup>ii</sup>

# IV. TOOLS TO IMPLEMENT CEDAW TO ADVANCE MDG 3 AND MDG 5

Parliamentarians have a crucial role in adopting legislation, approving policies formulated by the executive branch of government, advocating for resolutions that promote CEDAW and the MDGs and raising awareness on these instruments as important domestic policy issues. The following are specific ideas for parliamentarians to consider when thinking about practical actions to bridge the gender gap in education, the work force and in parliament, and to promote maternal and reproductive health.

# A. Achieving Gender Equality in the Classroom

Limited access to education for girls has a long term impact on a country's development as it hampers a woman's potential to contribute to it. Thus, it is in every country's interest to eliminate gender disparity in primary and secondary education, not only because it is the right thing to do, but also to ensure every citizen contributes their full potential to the economic and social progress of their country.

"...education is key to gender equality, which in turn leads to a virtuous cycle of higher productivity, growth of domestic product, more entrepreneurial success, higher return on investment and a more favorable demographic structure..."

Goldman Sachs Global Economics Paper, 2008<sup>iii</sup>

On a global level, girls are gaining ground when it comes to education<sup>iv</sup>, though unequal access persists in many countries, including in member countries of the OIC. Equal access to education in the early years remains a distant target in North Africa, Southern Asia, Sub-Saharan Africa and Western Asia<sup>v.</sup> At the level of secondary education, North Africa has achieved gender parity.<sup>vi</sup> However, girls remain at a distinct disadvantage in Southern Asia, Sub-Saharan Africa and Western Asia. At the tertiary level of education, the gender parity index for the whole of the developing world is highest, at 97 girls for every 100 boys.<sup>vii</sup> North Africa has achieved gender parity in tertiary education.<sup>viii</sup> Unfortunately, in South Asia, Sub-Saharan Africa and Western Asia, participation rates are skewed heavily in favor of boys.<sup>ix</sup>

Concrete actions Parliamentarians can take to achieve gender parity in education include the following:

- Introduce and adopt legislation that requires families to send their daughters to school up to the same minimum age as boys.
- Introduce and adopt legislation that will create or raise the statutory minimum age for marriage for young girls as 18 years of age.<sup>x</sup>
- Appropriate budgets for programs that offer non-traditional ways of educating out- ofschool girls. A good example of this is the program "Empowering Adolescent Girls to Become Agents of Social Transformation" in South Asia whereby out-of-school girls were provided the opportunity to access and complete primary education through nonformal ways and to continue learning through open schools and other means, which facilitates their entry into formal schools.<sup>xi</sup>
- Establish partnerships with civil society to gather data on which to base an in-depth assessment of the gender situation so that needs and goals can be accurately identified and targeted.
- Provide economic incentives for families to educate girls.
  - B. Bridging the Gender Gap: Gender Discrimination in Employment

To generate political will to bridge the gender gap in the employment sector, parliamentarians can convey to their colleagues that advancing women's rights and opportunities will have a tremendous positive impact on the overall development of their country.

"...societies that increase women's access to education, healthcare, employment, and credit, and that narrow differences between women and men in economic opportunities, increase the pace of economic development and reduce poverty..."

International Monetary Fund Survey, 2006<sup>xii</sup>

Worldwide, the share of women in non-agricultural paid employment increased from 35% in 1990 to almost 40% in 2009. While progress has slowed down in recent years because of the global financial and economic crisis, possibly widening the disparity in unemployment statistics between men and women, there are economic benefits to supporting equal opportunity practices. According to the Food and Agricultural Organization, "equalizing access to productive resources between female and male farmers could increase agricultural output in developing countries by 2.5- 4 percent".<sup>xiii</sup> Among the OIC countries, South Asia and Sub-Saharan Africa experienced the greatest improvement in women's rates of employment, though the proportion of women in paid employment in the former region remains below 20%.<sup>xiv</sup> The situation in North Africa has remained practically the same. In this region as well as in Western Asia, less than one in five paid jobs outside the agricultural sector are held by women<sup>xv</sup>

There are a few overall approaches that parliamentarians can take to bridge the gender gap in the employment sector.

- Advocate for legislation that gives women the right to work and makes gender discrimination illegal in employment practices.
- Talk to fellow parliamentarians and key decision makers about how enabling women's equal access to employment in the non-agricultural sector will significantly increase the country's GDP and raise the economic standing of the country.
- Fund projects that aim to promote gender equity in the private sector, including recruiting practices, human resource management, and policies and practices operating throughout the firm.
- Introduce legislation requiring equal opportunity practices for government contractors.

- Enter into partnerships with both men and women who seek to change societal perceptions on the ability of a woman to work.
- C. Increasing the Proportion of Seats Held by Women in National Parliaments

Women's participation in public life and decision-making processes is critical for achieving women's empowerment, gender equality and other development goals.

"Parliament is the key institutional forum where laws are formulated and where significant influence can be exerted in the policy making process therefore, a fair representation of women is essential in national parliaments to allow their voices and issues to be clearly heard to promote gender equality and ensure that the rights of women are respected and encoded in law"<sup>xvi</sup>

International Institute for Democracy and Electoral Assistance

Globally, despite growing numbers of women parliamentarians, the target of equal participation of men and women in politics is not within reach. As of September 2010, 19% of the world's parliamentarians were women, with the Arab region ranking the lowest at 12.4%.<sup>xvii</sup> In Afghanistan, which already has a significant number of women parliamentarians, after the 2010 elections, only one additional woman entered Congress. In Bahrain, one woman parliamentarian, who ran unopposed, was elected to the Lower House in 2011.<sup>xviii</sup> Meanwhile, women in Bahrain's Upper House, representing 27.5% of its members, were mostly appointed.<sup>xix</sup> South Asia, Indonesia, Malaysia and Sub Saharan Africa, also had some progress.<sup>xx</sup> Mozambique and Tanzania saw women elected for the first time in recent elections.<sup>xxi</sup>

Below are some recommendations for increasing women's participation in politics:

- Introduce legislation that calls for quota systems in political parties and/or ballots.
- Form (or join) a women's caucus to promote a gender equality agenda in the legislature or to enhance the work of women in parliament.
- Establish a fund to provide capital for female candidates.
- Encourage women to stand for elections and encourage media outlets to depict positive images of women in parliament and leadership positions.
- Mentor promising young women and encourage their political careers.

Specifically, legislated quotas or voluntary party quotas have been implemented for 67% of the 43 lower houses with 30 percent or more women members.<sup>xxii</sup> Afghanistan, Tunisia, Egypt,

Uganda, Kyrgyzstan have all implemented legislative quotas and have increased the percentage of women in Parliament. Parliamentarians can also look to the positive examples provided by Uganda's District Development Program, Kuwait's Equitable Political Participation Project, Pakistan's Gender Support Program and Kyrgyzstan's Promotion of Women in Parliament. In addition, Nigeria has established the Nigerian Women Trust Fund to generate resources and provide financial and technical assistance to female politicians. Each of these programs has actively promoted women's representation in parliament, built capacity of representatives to address gender issues and secured an enabling environment for women's participation.

## D. Effectively Reducing Maternal Mortality Rates

Parliamentarians have the power to make women's health a national priority. One of the many important reasons for improving women's health is that a woman who is healthy is more likely to produce healthy children. Healthy mothers and healthy children help make a vibrant society that will inevitably contribute to the development of a nation.

Despite progress toward reducing maternal mortality rates globally, pregnancy continues to be a major health risk for women in several regions, including member countries of the OIC. Most maternal deaths are concentrated in Sub-Saharan Africa and Southern Asia, which together accounted for 87% of such deaths globally in 2008.<sup>xxiii</sup> Those regions have demonstrated slow progress in reducing maternal mortality rates, while Southeast Asia, North Africa, and parts of South Asia have made great progress in reducing mortality rates among pregnant women.<sup>xxiv</sup> Malaysia and Indonesia, specifically, have made significant strides in this area.

Parliamentarians can use the following strategies to improve maternal health:

- Fund programs to expand the pool of birth attendants to include alternatives to trained medical doctors by educating and promoting the use of skilled midwives. A skilled health professional can administer interventions to prevent and manage life-threatening complications, or refer the patient to a higher level of care when needed.
- Advocate for investing in maternal and newborn health by highlighting the social and economic benefits and by emphasizing that maternal health is a human rights issue.
- Appropriate budgets for maternal health services, including family planning, by expanding health care facilities in rural and urban areas.
- Hold parliamentary hearings and discussions with experts and civil society to increase awareness of the benefits and challenges to effective access to maternal health services.

- Build effective partnerships across sectors to maximize scarce resources and share innovation to improve maternal and newborn health.
- Act as a national spokesperson for maternal health issues.

These strategies have already proved successful in some OIC country contexts. Malaysia was able to significantly reduce maternal mortality deaths by engaging in a number of actions which include, (i) improved access to and quality of care of maternal health services, together with family planning and expansion of health care facilities in rural and urban areas; (ii) investment in upgrading the quality of essential obstetric care in district hospitals, with a focus on emergency obstetric care services; (iii) streamlined and improved efficiency of referral and feedback systems to prevent delays in service delivery; (iv) increased professional skills of trained delivery attendants to manage pregnancy and delivery complications; (v) implemented a monitoring system with periodical reviews of the system of investigation, including reporting of maternal deaths through a confidential enquiry system; and (vi) worked closely with communities to remove social and cultural constraints and improve acceptability of modern maternal health services<sup>xxv</sup>.

Another example is Egypt's Ministry of Health and Population, which increased access to neonatal and obstetric care in rural areas by building maternity homes. Pakistan invested in mobile maternal health units where the units were able to provide skilled birth attendance to 43% of pregnant women in remote areas, 12% higher than the national average.<sup>xxvi</sup>

## E. Paving the Way for Universal Access to Reproductive Health

Universal access to reproductive health is necessary not only for mother and child, but also for a healthy society. A guide to UN World Conference Documents on the Right to Reproductive Health and Family Planning can be found in the following link: <u>http://www.unfpa.org/rights/language/right2.htm</u>

OIC countries are experimenting with innovative ways to allow for universal access to reproductive health and have had some success in the process. Parliamentarians can:

- Partner with civil society to support programs that teach family planning practices.
- Use their position of influence to speak out against the stigma associated with family planning and promote the right to sexual and reproductive health.
- Strengthen the capacity of committees within parliament to incorporate reproductive health so that it becomes a national priority.
- Make appropriate budget allocations for reproductive health services and supplies and ensure that resources are distributed to underserved communities and rural areas.

#### **End Notes**

i Stephanie Foster, Women and the Arab Spring: What's next?, Huffington Post, 9/20/2011

ii Freedom House report on Tunisia at http://www.freedomhouse.org/template.cfm?page=184

iii Lawson, S. 2008. "Women Hold Up Half the Sky", Goldman Sachs Global Economics Paper No. 164, page 2.4 March. The Goldman Sachs Group. Available at: http://www2.goldmansachs.com/ideas/demographic-change/women -hold-up-half-of-the-sky.pdf

iv MDG Report 2011, pg. 20

v MDG Report 2011, pg. 21

vi MDG Report 2011, pg. 21

vii MDG Report 2011, pg. 21

viii MDG Report 2011, pg. 21

ix MDG Report 2011, pg. 21

x General recommendations by the committee on the elimination of discrimination against women, General Recommendation No. 21 (13th session, 1994), Article 16(2)

xi MDG-3 policy at <u>http://mdgpolicynet.undg.org/ext/MDG-Good-</u> <u>Practices/mdg3/MDG3A\_South%20Asia\_Empowering\_Adolescent\_Girls\_to\_Become\_Agents\_of\_Social\_Transfor</u> mation.pdf

xii Stotsky, J.G. 2006. 'Gender and its Relevance to Macroeconomic Policy: A Survey'', International Monetary Fund Working Paper No. 06/233.10. International Monetary Fund: Washington, DC

xiii World Development Report, page 236-237, at <u>http://siteresources.worldbank.org/INTWDR2012/Resources/7778105-1299699968583/7786210-1315936222006/Complete-Report.pdf</u>

xiv MDG Report 2011, Page 21

xv MDG Report 2011, Page 21

xvi International Institute for Democracy and Electoral Assistance, Women in Parliament: beyond numbers, (Stockholm, Sweden IDEA, 2005). http://www.iiav.nl/epublications/2005/women in parliament.pdf#page=31

xvii Interparliamentarian Union, http://www.ipu.org/wmn-e/world.htm

xviii MDG Report 2011, pg 23

xix MDG Report 2011, pg 23

xx MDG Report 2011, pg 23

xxi MDG Report 2011, pg 23 xxii MDG Report 2011, pg 23

xxiii MDG Report 2011, pg 29

xxiv MDG Report 2011, pg 29

xxv United Nations Development Programme (UNDP). Malaysia: Achieving the Millennium Development Goals. In MDG5: Improve Maternal Health. Retrieved 12 August 2010, from UNDP Web site: <u>http://www.undp.org.my/uploads/mdg5.pdf</u>

xxvi UN Department of Public Information, DPI/2650 E/Rev.1 - September 2010.