

INVESTING IN GENDER EQUALITY AND SOCIAL INCLUSION FOR IMPROVED HEALTH AND DEVELOPMENT

Photos by Jacob Kasell, Health Policy Project, RTI International



Kamala (pictured above) lives in Thinigaon and has two daughters and two sons.

"... as long as [my daughter] wants to study, we will educate her. We ourselves are not educated, which is why we are suffering. We don't want our children to go through the same thing."

Among women in the lowest wealth quintile in Nepal...

Women and girls already make important contributions to their families, communities, and the nation. Helping them to maximize their skills, access needed health and educational resources, and take active roles in family and community decision making could increase their contributions and further the country's social and economic development.

Family Planning

When women are able to determine the number and timing of their pregnancies through family planning (FP), their ability to participate in the workforce increases, they can increase their family's income, and they can invest more resources into feeding and educating their children. Contraceptive use among women in the lowest wealth quintile—40 percent—is lower than the national average, and their unmet need for family planning is higher, at 31 percent (Nepal DHS, 2011).

Education and Economic Growth

Education is important for many reasons, including economic empowerment and better health and well-being. Women from poor and disadvantaged groups, however, face inequities in education. Only 16.5 percent of women in the lowest wealth quintile have attained secondary education, compared with the national average of 42.8 percent (Nepal DHS, 2011). Investing in and encouraging girls' education can help change attitudes and increase opportunities for women's participation in the economy. "Equitable economic growth can lead [women] out of their disadvantaged conditions, increase resilience and lead to higher rates of economic growth" (PDNA, 2015).

Gender-based Violence

Gender-based violence negatively affects women's physical and psychological health. Social and cultural norms that condone gender-based violence (GBV) prevent women from accessing the resources and services they need to protect their health, and improve their well-being for themselves and their families. Currently, a higher percentage of women in the lowest wealth quintile (27.5%) agree that wife beating







Sources: Nepal DHS, 2006, 2011





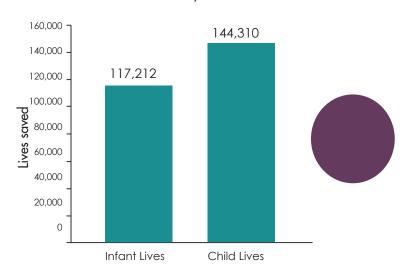


is justified, compared with the national average (23.2%). Investments to transform attitudes and prevent GBV and provide services to those affected by it not only improve and save women's lives, but also help to change harmful gender norms.

Combined Investments in Family Planning, Education, and Violence Prevention Save Lives

An analysis of recent data on factors affecting women's and girls' well-being (RAPID Women, 2015) found that investments in three areas could make a major difference in improving women's and children's health in the next few decades. The key programs that have the most impact are expanding equitable access to family planning, enabling girls from poor communities to stay in school longer, and transforming norms that condone violence. These programs have the greatest impact when they are implemented jointly. By preventing high-risk pregnancies and births, combined investments could save thousands of women's and children's lives among the poorest group of the population.

Lives Saved, 2015-2035



Source: RAPIDWomen Model



Call to Action

- Improve accessibility of family planning services for poor and rural areas
- Increase educational opportunities for girls to increase economic opportunities
- Increase investments in strategies to prevent and respond to violence against women

References

Ministry of Health and Population (MOHP) [Nepal], New ERA, and ICF International Inc. 2012, 2007. *Nepal Demographic and Health Survey 2011* and *Nepal Demographic and Health Survey 2006*. Kathmandu, Nepal and Calverton, Maryland: Ministry of Health and Population, New ERA, and ICF International.

National Planning Commission, Government of Nepal. 2015. *Nepal Earthquake 2015 Post Disaster Needs Assessment, Executive Summary.* Kathmandu: National Planning Commission.

USAID, Packard Foundation, and Futures Group. 2012. RAPID *Women* Model. Washington, DC: Futures Group. Application for Nepal completed in 2015 by the Health Policy Project.

Contact Us

Health Policy Project 1331 Pennsylvania Ave NW, Suite 600 Washington, DC 20004 www.healthpolicyproject.com policyinfo@futuresgroup.com The Health Policy Project is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-10-00067, beginning September 30, 2010. HPP is implemented by Futures Group, in collaboration with Plan International USA, Avenir Health (formerly Futures Institute), Partners in Population and Development, Africa Regional Office (PPD ARO), Population Reference Bureau (PRB), RTI International, and the White Ribbon Alliance for Safe Motherhood (WRA).

The information provided in this document is not official U.S. Government information and does not necessarily represent the views or positions of the U.S. Agency for International Development.