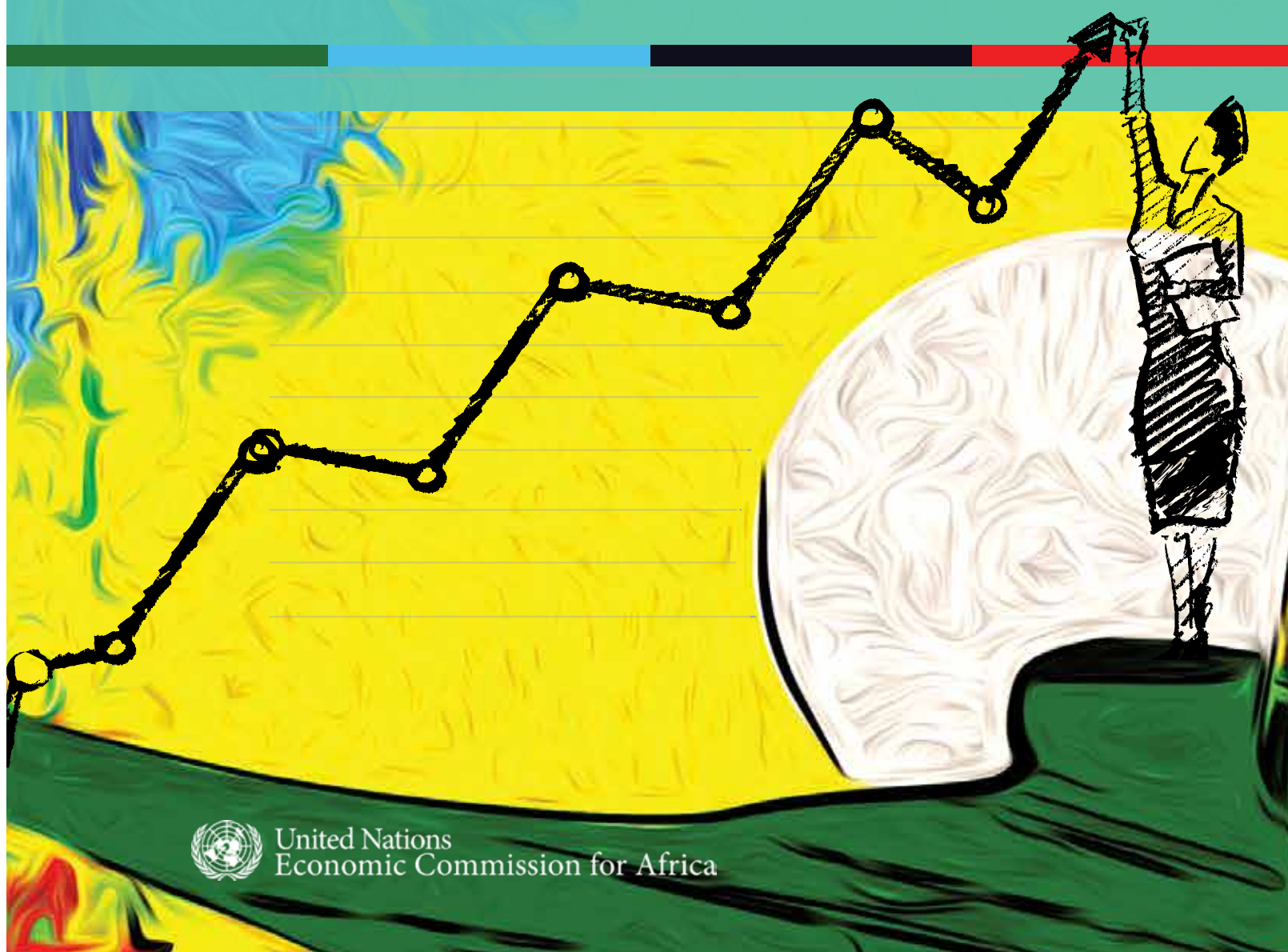


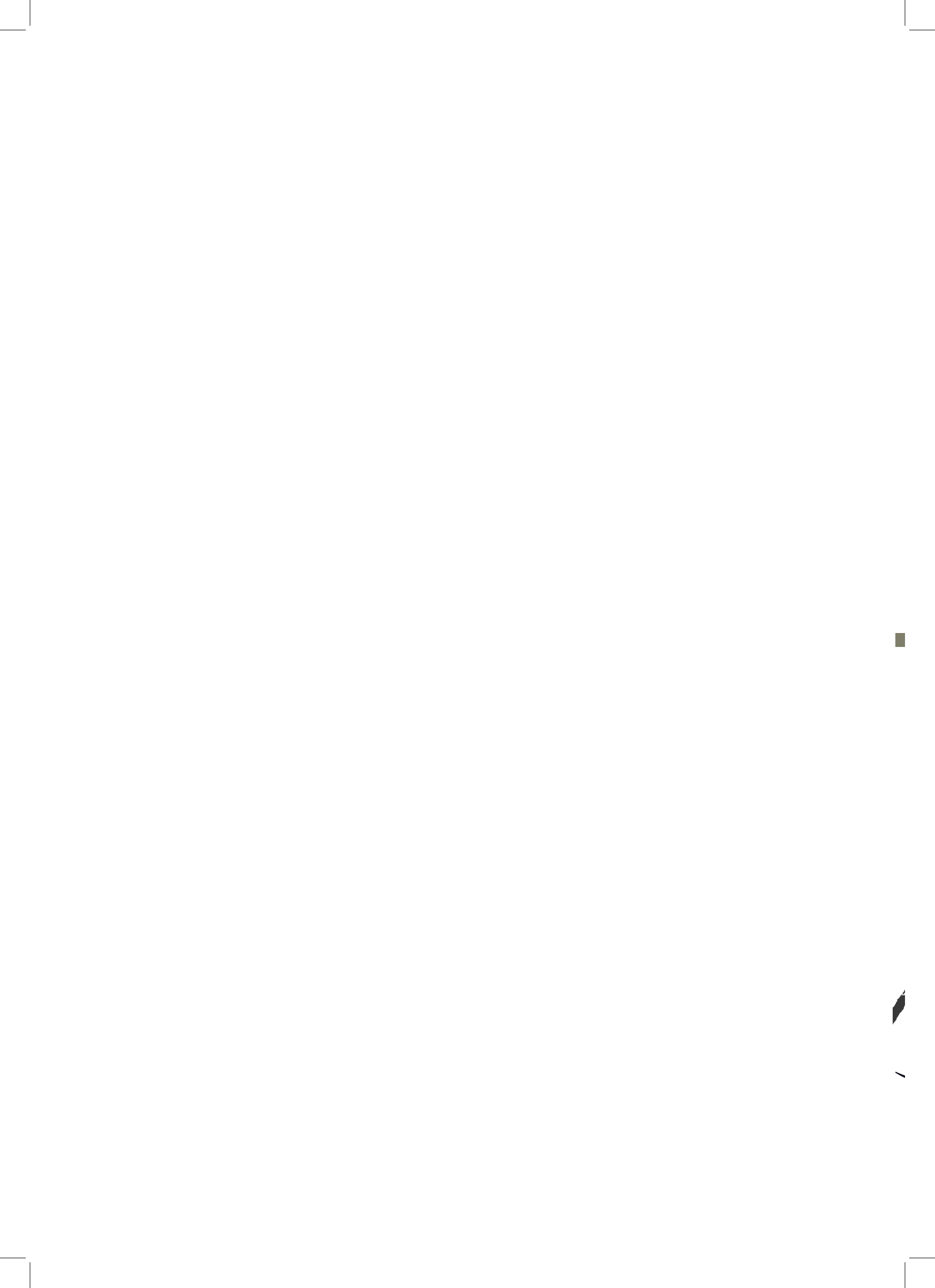


Measuring Gender Equality & Women's Empowerment in Africa

African Gender and Development Index
Regional Synthesis Report III, 2018



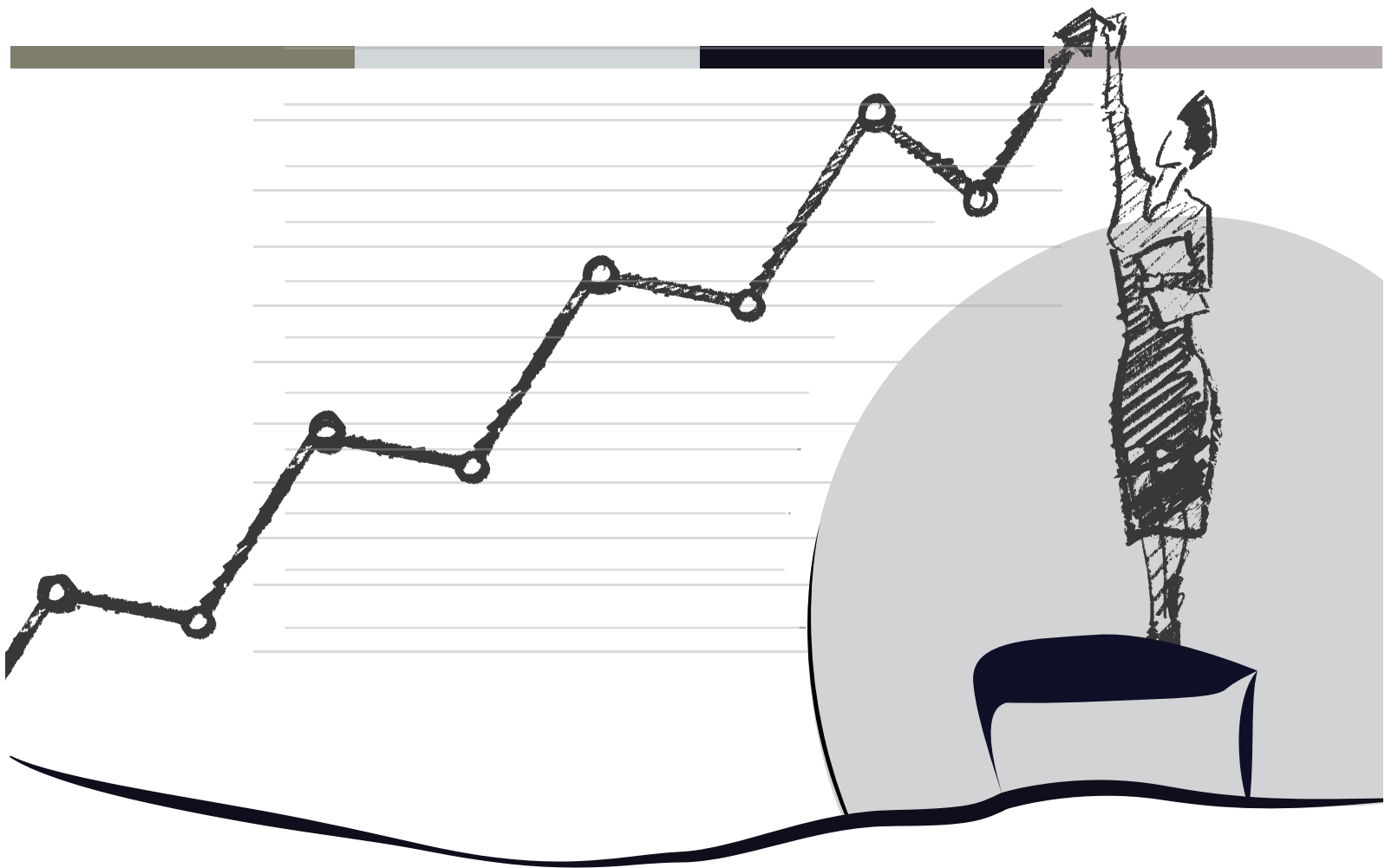
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ABBREVIATIONS AND ACRONYMS

AfDB	African Development Bank
AGDI	African Gender and Development Index
AIDS	acquired immunodeficiency syndrome
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
ECA	Economic Commission for Africa
FAO	Food and Agriculture Organization of the United Nations
FGM	female genital mutilation
GSI	Gender Status Index
HIV	human immunodeficiency virus
HIV/AIDS	human immunodeficiency virus/acquired immunodeficiency syndrome
ILO	International Labour Organization
NER	net enrolment rate
OHCHR	United Nations Office of the High Commission for Human Rights
SADC	Southern African Development Community
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WHO	World Health Organization

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1. INTRODUCTION AND BACKGROUND

1.1 INTRODUCTION

The African Gender and Development Index (AGDI) was introduced by the Economic Commission for Africa (ECA) in 2004 with the aim of supporting member States to measure the gap in the relative status of African men and women and to assess the progress made in implementing government policies that promote gender equality and the empowerment of women and girls. It was endorsed by ministers responsible for gender equality and women's affairs at the seventh African Regional Conference on Women (Beijing + 10 review), which was held in Addis Ababa in October 2004.

AGDI was piloted between 2004 and 2005 in 12 countries: Benin, Burkina Faso, Cameroon, Ethiopia, Egypt, Ghana, Madagascar, Mozambique, South Africa, Tunisia, Uganda and the United Republic of Tanzania. During phase 2, it was extended to an additional 14 countries: Botswana, Burundi, Cabo Verde, Congo, Côte d'Ivoire, Djibouti, the Democratic Republic of the Congo, the Gambia, Kenya, Malawi, Mali, Senegal, Togo and Zambia. In June 2015, AGDI 3 was launched in Eswatini (formerly known as Swaziland), Guinea, Liberia, Namibia, the Niger, Rwanda, Seychelles, Sierra Leone, South Africa and Zimbabwe. The fourth and last phase of AGDI implementation was launched in June 2016 and included the following countries: Chad, Guinea-Bissau, Mauritius, Mauritania, and Sao Tome and Principe. The completion of phases 3 and 4 will bring the total to 41 countries that have undertaken national AGDI studies, with South Africa undertaking the process twice.

The present report presents the status of gender equality in the 15 African countries that were part of Phase 3 and Phase 4 of AGDI, highlighting the disparities between men and women in the areas covered by the index. It is based mainly on the findings of the national reports prepared by the 15 countries as part of AGDI. These were supplemented by additional data and information from international databases to ensure that a consistent dataset was used in the analysis, together with other national and international sources and journal articles. The publications prepared under the aegis of United Nations Treaty Bodies, in particular the Committee on Elimination of Discrimination against Women, the Committee on the Rights of the Child and the Human Rights Council, were also used to provide supplementary information for the analysis.

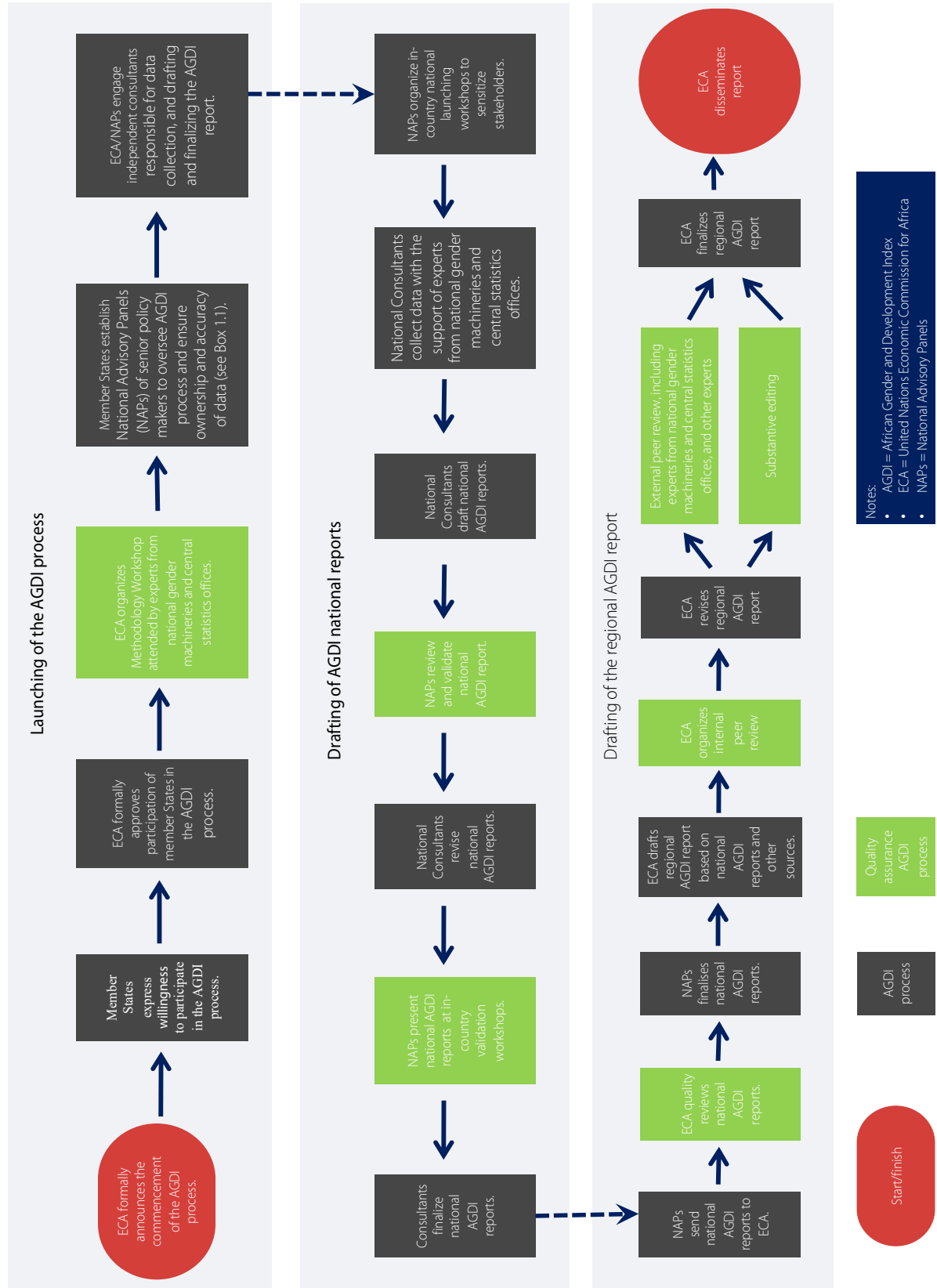
1.2 METHODOLOGY

Figure 1.1 gives a summary of the process involved in carrying out AGDI in a country. It starts when a country expresses its willingness to be part of AGDI, which includes training of the key personnel involved in the process, setting up a representative national advisory panel, recruiting an independent national consultant and drafting the national report on AGDI. The national gender machinery takes the lead role in managing the AGDI process at the national level, while a national advisory panel is set up to oversee and steer the process (see box 1.1).

ECA organized methodological workshops in June 2015 and June 2016 for AGDI Phase 3 countries and Phase 4 countries, respectively. For each country, a consultant was recruited by the national advisory

panel – and by ECA in the case of Rwanda – to collect data, and draft and finalize the national report on AGDI supported by a team of experts from the national gender machinery and national statistics office. The findings are summarized in the national report on AGDI.

Figure 1.1 African gender development index process



Box 1.1 African gender and development index national advisory panel

An important component of the AGDI process is the national advisory panel (NAP), which oversees and steers the process and conducts stakeholder training on data collection and scoring procedures. In setting up the panel, representation is drawn from strategic line ministries, the national statistics office, civil society organizations and national research institutions. The panel is also responsible for recruiting a national consultant to undertake the study and organize the validation of the national report on AGDI at a wider stakeholder forum. Consultative and participatory meetings are held between NAP members and the national consultant to assess the progress in the implementation of gender policy commitments and facilitate consensus among strategic actors and develop the rationale for the scoring presented in the African Women's Progress Scoreboard.

Source: *African Gender and Development Index: Technical note, ECA, 2017.*

1.3 STRUCTURE OF THE AFRICAN GENDER AND DEVELOPMENT INDEX

The index consists of two complementary parts: Gender Status Index (GSI) and the African Women's Progress Scoreboard. GSI covers the aspects of gender relations that can be measured quantitatively, while the Progress Scoreboard captures qualitative issues in relation to the performance of African Governments on gender policies in terms of implementing regional and international commitments on gender equality and women's empowerment.

1.3.1 GENDER STATUS INDEX

GSI consists of three blocks: the social power block, which measures human capabilities; the economic power block, which measures economic opportunities; and the political power block, which measures voice or political agency. The components and subcomponents of the three blocks are measured using relevant indicators. GSI contains 44 indicators divided into 7 components and 11 subcomponents. See annex I (figure AI.1) for an example of a completed GSI. The indicators receive equal weight in each component and subcomponent, ensuring that the three blocks have the same weight in arriving at GSI.

For most of the indicators, GSI is calculated the same way, by dividing the indicator for female achievement by that for male achievement for the specific variable. For indicators that refer to numbers or shares, the share of female in the total value is used.

There are, however, eight so-called reverse indicators that do not follow the rule. These are in relation to health (stunting, underweight, mortality, prevalence of HIV/AIDS); income (share of women under the poverty line); time use (non-market economic activities, domestic, care and volunteer activities); and employment (youth unemployment rate). GSI for reverse indicators is calculated as:

$$(1-R_w) / (1-R_m)$$

where R_w = ratio for women and R_m = ratio for men.

If an indicator is missing, the other indicators of the subcomponent are re-weighted, to take account of the actual number of available indicators. The report uses the internationally recognized measure of gender parity, which is at GSI values between 0.97 and 1.03 (see box 1.2).

Box 1.2 Gender status index and gender parity

For most indicators, Gender Status Index (GSI) is calculated by dividing the female value by the male value. If both values are the same, GSI has a value of 1. To allow for small variations in indicator values, gender parity is usually assumed to exist at GSI values between 0.97 and 1.03. The index, however, is an imperfect measure because it is not symmetrical around 1 and has no upper limit. For example, if the female primary net enrolment rate (NER) is 40 per cent and the male NER is 50 per cent, GSI has a value of 0.8. If the values are reversed, GSI has a value of 1.25, which gives the mistaken impression of greater gender disparity because 1.25 is at a greater distance from 1 than 0.8.

To tackle this imperfection, the United Nations Educational, Scientific and Cultural Organization (UNESCO) has developed an adjusted index that is symmetrical around 1 and limited to a range between 0 and 2. According to this, when the female indicator value is greater than the male indicator value, the calculation of the index is adjusted using the following formula: $2 - 1 / (\text{female value} / \text{male value})$. In the above example, when NER is greater than that of male, GSI has a value of 1.2 ($2 - 1 / (0.5 / 0.4) = 2 - 1 / 1.25 = 2 - 0.8 = 1$), which is the same distance from 1 than 0.8.

Source: Analysis based on the African Gender and Development Index: Technical note, ECA, 2017; and Reducing global poverty through universal primary and secondary education, UNESCO, 2017.

Data for the indicators in GSI are collected from diverse sources, including census reports, demographic and health surveys, labour force surveys, living standards measurement studies, and administrative reports. See annex I (table AI.1) for an example of a completed GSI.

1.3.2 AFRICAN WOMEN'S PROGRESS SCOREBOARD

The scoreboard focuses on issues such as women's rights that cannot be quantified using conventional statistics. It tracks Government progress in ratifying regional and international conventions, documents and treaties regarding gender equality and women's advancement and empowerment; and in incorporating the principles of these conventions and documents in national laws, programmes and policies. The regional conventions, documents and treaties included in Progress Scoreboard are: the 1990 African Charter on the Rights and Welfare of the Child; the 2001 New Economic Partnership for Africa's Development (NEPAD) Framework Document; the 2003 Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa; and the 2004 Solemn Declaration on Gender Equality in Africa. The key international instruments included are: the 1979 Convention on the Elimination of All Forms of Discrimination against Women (CEDAW); the 1989 Convention on the Rights of the Child and its optional protocols adopted in 2000; the International Conference on Population and Development Programme of Action; the Millennium Declaration of 2000, which defined eight Millennium Development Goals; the 1995 Beijing Platform for Action; the 1999 Optional Protocol to CEDAW; and the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (United Nations, 2000a). The scoreboard also tracks the progress made by the selected countries in relation to three Security Council resolutions on peace and security, namely, resolution 1325 (United Nations, 2000b), resolution 1820 (United Nations, 2008), and resolution 1888 (United Nations, 2009); and relative to Conventions 100, 111 and 182 adopted by members of the International Labour Organization.

The African Women's Progress Scoreboard is composed of four blocks: a women's rights block, in addition to the three blocks in GSI (economic power, political power and social power). The components of the Progress Scoreboard are presented in the form of a table with vertical and horizontal axes.

The vertical axis lists the indicators that deal with global and regional agreements, declarations or resolutions that African Governments have ratified and have committed to implement, as well as issues identified as crucially affecting women's lives, for which pertinent policy and implementation actions are expected from Governments. These issues include maternal health, HIV/AIDS, family planning, the

provision of safe abortion services, gender-based violence, harmful practices, school completion and gender mainstreaming in all departments.

The horizontal axis of the Progress Scoreboard identifies specific actions taken in order to implement and tackle the issues listed in the vertical axis. These include: ratification of and reporting on global and regional legal instruments; promulgation of laws and other legal measures; policy commitment; development of plans to achieve gender targets (with targets set, institutional mechanism in place and finance and human resources allocated); research; involvement of civil society; information and dissemination; monitoring and evaluation issues; capacity enhancement; and accountability and transparency.

The Progress Scoreboard uses a simple scoring system to quantify the performance of Governments on issues that have been agreed at global and regional levels in relation to gender equality and the empowerment of women and girls. The scoring is done by the countries themselves. Scoring is based on a three-point scale (0, 1 and 2) in which generally, 0 shows no action on implementation, 1 shows some or partial implementation and 2 is good or full action taken with regard to an issue. The total score for each of the specific items to be measured on the vertical axis is calculated in the relevant section of the Progress Scoreboard. The percentage is calculated by dividing the total score by the maximum possible score for that particular issue. Annex I (table AI.2), gives a summary of the scoring for the issues on the horizontal axis of the scoreboard, while table AI.3 shows an example of a completed Progress Scoreboard.

1.3.3 COUNTRIES COVERED BY THE PRESENT REPORT

The following countries are covered by the present report: Chad, Eswatini, Guinea, Guinea-Bissau, Liberia, Mauritania, Mauritius, Namibia, the Niger, Rwanda, Sao Tome and Principe, Seychelles, Sierra Leone, South Africa and Zimbabwe. Of the 15 countries that started the process of compiling their national reports on AGDI, 12 countries finalized their reports in time to be included in the regional overview; Guinea-Bissau, Liberia and Zimbabwe did not submit national reports in time for inclusion in the present report. Based on the patterns observed in the analysis of the findings and to facilitate reporting of the results, the following countries, except for Rwanda, are grouped together: Central and Western African countries (Chad, Guinea, Guinea-Bissau, Liberia, Mauritania, the Niger and Sierra Leone); Southern African countries (Eswatini, Namibia, South Africa and Zimbabwe); and small island developing States (Mauritius, Sao Tome and Principe and Seychelles). Guinea, Liberia and Sierra Leone were affected by the Ebola epidemic in 2014. Box 1.3 highlights some of the human resource issues facing Seychelles.

Box 1.3 Human resources challenges in small island development States: Seychelles

As is typical of small island developing States, Seychelles lacks human resources and there is high demand for staff with skills in specialized areas (e.g., policy development, human rights treaty reporting, child protection, women's issues, research, data analysis and management, among others). It is not unusual for staff working in the Gender secretariat to perform multiple tasks, such as developing project proposals, report writing, action planning, monitoring and evaluation, conducting awareness and training sessions, research, data collection and analysis, organizing workshops and preparing advocacy materials. Finding staff with multiple skills and commitment to gender issues is not easy. Furthermore, staff turnover is especially high in the Gender secretariat. It is difficult for the secretariat to play a strong leadership and coordinating role at national level with low levels of staffing. These concerns were also raised by the CEDAW treaty committee who urged Seychelles to strengthen the Gender secretariat and provide it with the authority, decision-making power, and human and financial resources that are necessary for it to work effectively for the promotion of gender equality and the enjoyment by women of their rights, including its capacity for effective coordination and cooperation among the various gender equality and human rights mechanisms and with civil society.

Sources: AGDI National Report for Seychelles and CEDAW Concluding Observations [Seychelles], 2013a.

Population. The countries covered by the present report have a total population of 127 million people as of mid-2016 (see table 1.1). The largest country is South Africa with a total population of approximately fifty-five million, compared with ninety-seven thousand people for Seychelles. The share of women's population is ranged between 49–51 per cent, except for Namibia (51.5 per cent) and Rwanda (52.1 per cent). The Niger had the highest growth rate at 3.8 per cent followed by Chad with 3.2 per cent. Mauritius had the lowest growth rate of 0.1 per cent.

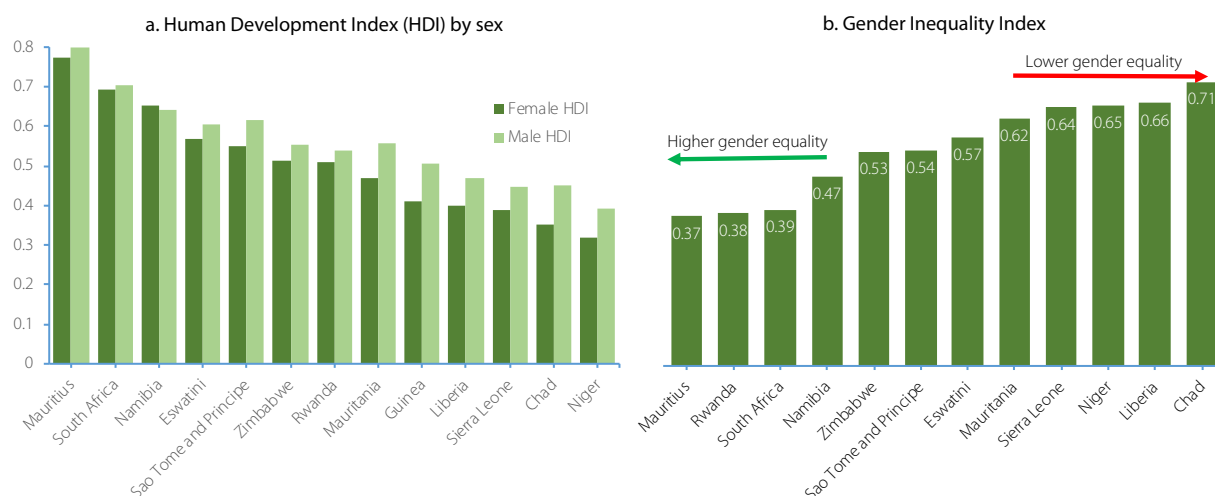
Table 1.1 Selected socioeconomic and population indicators for selected countries, 2010–2016

Country	Population (thousands)	Women's population (percentage)	Population growth rate (percentage)	GDP per capita (United States dollars)	Share of agriculture in GDP (percentage)	Human development index
Rwanda	11 883	52.1	2.5	723	30.3	Low
<i>Central and West Africa</i>						
Chad	14 497	49.9	3.3	739	29.6	Low
Guinea	12 947	49.8	2.3	512	20.8	Low
Guinea-Bissau	1 888	50.4	2.6	583	40.5	Low
Liberia	4 615	49.6	2.6	569	70.7	Low
Mauritania	4 166	49.7	3.0	1 391	27.7	Low
Niger	20 715	49.6	3.8	341	39.6	Low
Sierra Leone	6 592	50.5	2.3	601	61.3	Low
<i>Southern Africa</i>						
Eswatini	1 304	50.5	1.8	2 483	8.4	Medium
Namibia	2 514	51.3	2.2	4 192	6.7	Medium
South Africa	54 979	50.8	1.4	5 198	2.3	Medium
Zimbabwe	15 967	50.7	2.3	328	11.8	Low
<i>Small island developing States</i>						
Mauritius	1 277	50.6	0.2	9 589	3.5	High
Sao Tome and Principe	194	50.2	2.3	1 855	12.6	Medium
Seychelles	97	49.4	0.5	14 862	2.5	High

Sources: Africa Statistical Yearbook 2017, ECA, African Development Bank and African Union Commission, 2017; World Population Prospects: the 2017 Revision, Department of Economic and Social Affairs, 2017; and Human Development Report 2017, United Nations Development Programme, 2018.

Abbreviation: GDP, gross domestic product.

Economy. GDP per capita in 2016 ranged from below \$400 per year in the Niger and Zimbabwe to almost \$15,000 in Seychelles. Agriculture contributed to more than 60 per cent of GDP in Liberia and Sierra Leone, compared with less than 5 per cent in Mauritius, Seychelles and South Africa.

Figure 1.II (a) Human Development Index by sex and (b) Gender Inequality Index, 2017


Source: UNDP, 2018.

Note: Guinea-Bissau and Seychelles were not ranked because of lack of data.

Source: UNDP, 2018.

Note: Guinea, Guinea-Bissau and Seychelles were not ranked because of lack of data.

Human Development Index. The United Nations Development Programme (UNDP) Human Development Index is a composite index measuring average achievement in three basic dimensions of human development – a long and healthy life, knowledge and a decent standard of living (UNDP, 2016a). The small island States and Southern African countries are ranked either medium or high on the index, except for Zimbabwe. The countries in Central and West Africa, along with Rwanda and Zimbabwe, have low human development indices. The index for female is lower than that of their male counterparts in all countries under review with data, except for Namibia (see figure 1.II(a)). The gap is especially wide in Chad, Guinea, Mauritania and the Niger.

Gender Inequality Index. The Gender Inequality Index compiled by UNDP measures gender-based inequalities in three dimensions – reproductive health, empowerment and economic activity. The closer the index value is to zero, the higher the gender equality. In 2017, Mauritius had the best performance of 0.37 followed by Rwanda and South Africa with values of 0.38 and 0.39, respectively (see figure 1.II(b)). Chad had the highest value of 0.71, which means that it has the lowest level of gender inequality measured by this index. There is evidence that the Gender Inequality Index is negatively associated with the Human Development Index (UNDP, 2016b).

1.4 STRUCTURE OF THE REPORT

The present report is structured as follows: there are eight chapters, including the present introductory chapter. Chapter 2 – Commitment to women's rights and chapter 3 – Commitment to combat gender-based violence consolidate the findings of the Women's Rights Block of the African Women Progress Scoreboard. Chapter 4 – Commitment to education for all and chapter 5 – Commitment to quality health care discuss the findings of the social power block of both the Gender Status Index and African Women Progress Scoreboard. The results of the Gender Status Index and the African Women Progress Scoreboard for the economic power block and the political power block are discussed in chapter 6 – Access to economic opportunities and resources and chapter 7 – Women's agency and decision-making. Chapter 8 – Concluding remarks presents key messages from the report. Although AGDI was conceptualized before the adoption of the 2030 Agenda for Sustainable Development and Agenda 2063 of the African Union, the report takes account of the two agendas as far as possible and relates the performance of the countries covered by the report to the targets that they set.

ANNEX I GENDER STATUS INDEX AND AFRICAN WOMEN'S PROGRESS SCOREBOARD

Table AI.1 Example of the gender status index

Component	Sub-component	Indicator	Female	Male	Index	Sub-component	Component	Block
Education		Early childhood enrolment	11.2	20.5	0.546			
	Enrolment	Primary enrolment rate (net)	58.6	83.7	0.700			
		Secondary enrolment rate (net)	19.0	39.5	0.481			
	Completion	Tertiary enrolment rate (gross)	2.4	9.6	0.250	0.494		
Health	Literacy	Proportion of pupils starting primary grade 1 who reach last grade	56.1	75.9	0.739	0.739	0.604	
		Literacy rate of 15-24 year olds	33.2	57.4	0.578	0.578		
	Child health	Stunting of under-fives	27.0	27.3	1.004			
		(minus 2 standard deviations) Underweight under-fives (minus 2 standard deviations) Under-five mortality rate	22.1	25.4	1.044	1.016		
Income	HIV/AIDS	HIV/AIDS prevalence among 15-24 year olds	1.5	0.8	0.993	0.951	0.984	0.794
		Access to ART	40.0	44.0	0.909	0.951		
	Wages	Wages - agriculture	64.6	95.9	0.674			
		Wages - civil service	396.38	502.28	0.78			
Time use and employment	Wages	Wages - formal sector	568.65	609.34	0.933			
		Wages - informal sector	50.65	62.25	0.815	0.803		
	Income	Income from informal enterprise	274.18	688.88	0.398			
		Income from small agricultural household enterprise	447.68	499.13	0.897	0.707	0.755	
Employment	Time use	Share under the poverty line	28.7	13.8	0.827			
		Time spent in market economic activities (as paid employee, own-account or employer)	3.3	3.7	0.892			
	Employment	Time spent in non-market economic activities or as unpaid family worker in market economic activities	0.6	0.3	0.500			
		Time spent in domestic, care and volunteer activities	3.3	1.0	0.303	0.565		
		Share of population in non-agricultural wage employment	24.3	75.7	0.321			
		Youth unemployment rate	14.1	17.5	1.041	0.681	0.625	

Component	Sub-component	Indicator	Female	Male	Index	Sub-component	Component	Block	
Access to resources	Means of production	Ownership of rural land/farms	235 144	1 315 232	0.179				
		Ownership of urban plots/houses	81 603	413 205	0.197				
		Ownership of livestock	235	2 503	0.273				
	Management	Access to credit (commercial and microcredit)	39 205	72 905	0.538	0.297			
		Employers	2 822	16 442	0.172				
		Own-account workers	35 237	72 583	0.483				
		High civil servants (Class A)	1 360	9 140	0.149				
		Members of professional associations	297	3 211	0.092	0.224	0.261	0.547	
		Members of parliament	42	505	0.083				
		Cabinet ministers	6	46	0.130				
Public sector		Higher positions in civil service and parastatals	75	342	0.766				
		Employment in the security forces	1 325	15 233	0.087				
		Judges of higher courts	12	53	0.226				
		Judges of lower courts	42	305	0.138	0.225			
		Judges of traditional and religious courts	3	105	0.029				
		Members of local councils	8 246	27 965	0.295				
		Number of male/female traditional rulers	241	1 352	0.178				
		Senior positions in political parties	6	33	0.182				
	Civil society		Senior positions in trade unions	226	679	0.333			
			Senior positions in employers' associations	11	42	0.262			
		Senior positions in NGOs	29	370	0.078	0.214	0.215	0.519	
Gender Status Index									

Source: African Gender and Development Index, ECA, 2011.

Abbreviations: ART, antiretroviral treatment; HIV/AIDS, human immunodeficiency virus/acquired immunodeficiency syndrome; and NGOs, non-governmental organization.

Table AI.2 Activity scoring on the horizontal axis of the African Women's Progress Scoreboard

Activity	Scoring
Ratification of international or regional convention or charter	<ul style="list-style-type: none"> 0 - Not adopted 1 - Adopted with reservations 2 - Adopted without reservations
Reporting	<ul style="list-style-type: none"> 0 - No reporting 1 - Only some reporting done 2 - Reporting is up to date
Law or other legal measure	<ul style="list-style-type: none"> 0 - No law or legal measure 1 - Draft law 2 - Law or measure ratified in parliament
Policy commitment	<ul style="list-style-type: none"> 0 - No policy 1 - Draft policy, not fully elaborated 2 - Fully elaborated policy, approved by parliament
Development of a plan/gender plan	<ul style="list-style-type: none"> 0 - No plan has been prepared 1 - The development of a plan/gender plan is in process or an inadequate plan has been developed 2 - The plan/gender plan has been fully elaborated with clear objectives and targets set, and is in use
Targets set	<ul style="list-style-type: none"> 0 - No targets or measurable objectives specified 1 - General objectives specified but no targets set 2 - Specific objectives identified and measurable targets set
Institutional mechanism	<ul style="list-style-type: none"> 0 - No institutional mechanism identified 1 - Within a general department, focal person appointed without special mandate, or only at the national level, while implementation should reach down to local level 2 - Specific department, focal point or gender desk within departments or regional or local administration identified at the appropriate level, to ensure effectiveness
Budget	<ul style="list-style-type: none"> 0 - No government budget allocated for this item 1 - Some funds allocated, but not sufficient to cover the costs needed to meet the targets set in the gender plan or unclear what kind of total budget is allocated to gender-related issues 2 - Sufficient government budget allocated to cover the targets set in the gender plan
Human resources	<ul style="list-style-type: none"> 0 - No specific staff assigned 1 - Some staff assigned, but with insufficient gender expertise and without sufficient support or at too low a level in the administrative hierarchy 2 - Qualified high-level staff provided with the requisite support
Research	<ul style="list-style-type: none"> 0 - No research needs identified and no research commissioned 1 - Some research areas are identified and implemented 2 - Research needs identified and adequate research conducted or commissioned

Involvement of civil society	<p>0 - No attention paid to civil society, no consultation has taken place, no support foreseen</p> <p>1 - Some attention paid to civil society</p> <p>2 - Extensive process of consultation has taken place with the appropriate non-governmental organizations, and support for and collaboration with civil society incorporated into key activities</p>
Information and dissemination	<p>0 - No information efforts undertaken</p> <p>1 - Some campaigns undertaken, but limited in coverage because of language, media or other constraints such as the wide divergence between ethnic groups in a country</p> <p>2 - Extensive campaigns reaching wide sectors of the population conducted</p>
Monitoring and evaluation	<p>0 - No monitoring and evaluation mechanism in place, no tools and appropriate indicators put in place</p> <p>1 - Monitoring and evaluation tools identified and process put in place but not satisfactorily</p> <p>2 - Adequate monitoring and evaluation under way or undertaken</p>
Capacity enhancement	<p>0 - No training opportunities provided by the Government</p> <p>1 - Training opportunities offered do not make for optimum staff productivity</p> <p>2 - Sufficient training and retraining opportunities provided by the Government to maximize the capacity of staff to work effectively</p>
Accountability and transparency	<p>0 - Government has made no effort to ensure accountability and transparency</p> <p>1 - Government has made limited effort to ensure accountability and transparency</p> <p>2 - Government ensures that stakeholders are fully informed about intentions, plans, programmes, and budgets available</p>

Source: *African Gender and Development Index, ECA, 2011.*

Table AI.3 An example of the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanisms	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/Transparency	Total	Percentage	
Women's rights		2	1	2	1	1	1	1	1	1	1	1	1	1	1	17	48	
		X	X	2	1	1	1	1	1	1	1	0	0	0	0	10	38	
		X	X	2	1	1	1	1	1	1	1	0	0	0	0	10	38	
		1	X	X	X	X	X	X	X	0	0	0	0	0	0	1	7	
		X	2	1	1	1	0	0	0	1	1	0	1	1	0	10	36	
		X	2	1	1	2	1	1	0	1	1	1	1	1	1	15	53	
		X	0	1	2	1	0	1	0	0	0	1	1	1	1	10	35	
		0	2	2	1	1	1	2	1	1	1	1	1	1	1	17	56	
		X	X	2	2	2	2	1	1	1	2	1	1	1	1	18	69	
		X	X	0	1	1	0	0	0	0	2	0	1	1	0	6	23	
		X	X	2	1	1	1	1	0	1	1	1	0	1	1	12	46	
		X	X	1	1	1	1	1	0	1	1	1	1	1	1	12	46	
		X	X	2	2	1	1	1	1	1	1	1	1	1	1	15	57	
	Violence against women and children	X	X	1	0	0	1	1	0	0	1	1	1	1	0	7	27	
2		1	2	1	1	1	1	0	1	1	1	1	1	0	14	46		
2		1	2	1	1	1	1	0	1	2	1	1	1	1	17	56		
0		0	1	1	0	0	0	0	1	1	0	0	0	0	4	13		
X		X	0	2	2	1	1	1	1	2	2	2	2	1	18	69		
X		X	2	2	2	2	1	1	1	1	2	2	1	1	19	73		
X		X	1	2	2	2	1	1	1	1	2	2	2	1	19	73		
X		X	0	1	0	0	1	0	1	2	1	0	0	0	6	23		
X		X	1	1	1	1	1	1	1	1	1	1	1	1	13	50		
X		X	0	1	0	0	0	0	0	0	1	1	0	0	3	11		

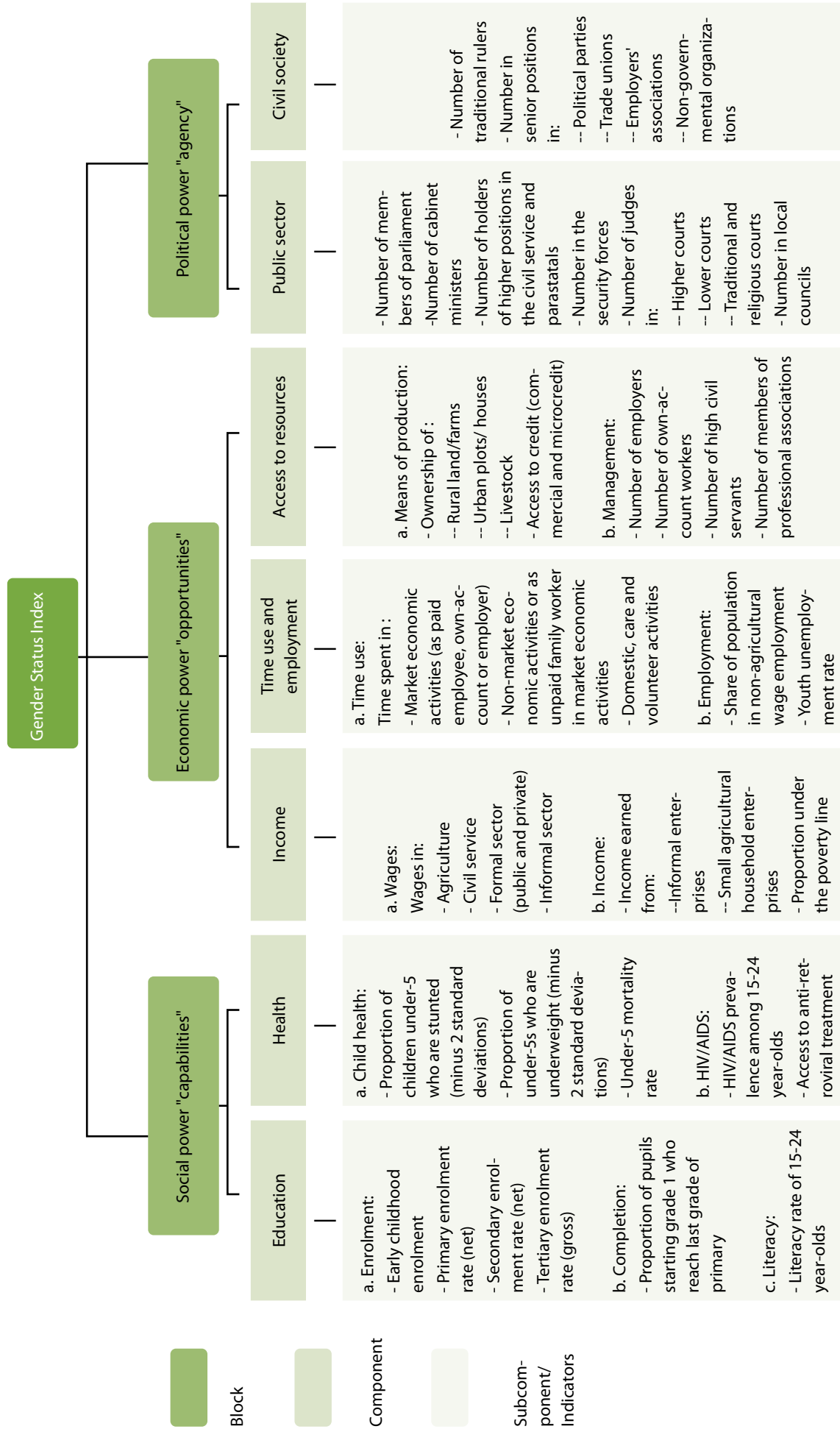
Economic power 'opportunities'	Employment	ILO Convention 100 on Equal Remuneration, 1951	2	2	2	2	2	2	2	1	0	1	1	1	1	1	0	19	63	
		ILO Convention 111 on Discrimination in Employment and Occupation, 1958	2	2	2	2	2	2	1	1	1	1	1	0	1	1	1	1	20	66
		ILO Convention 183 concerning Maternity Protection at the Workplace, 2000	1	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	3	10
		Engendering national poverty reduction strategies to ensure that gender dimensions of poverty are taken into account	X	X	X	2	1	1	1	0	0	0	0	0	0	1	0	0	7	29
		Access to agricultural extension services	X	X	X	0	1	0	1	0	1	0	1	0	0	1	1	1	6	50
		Access to land	X	X	X	0	1	0	0	0	1	0	0	0	0	0	0	0	2	16
		Access to technology	X	X	0	1	0	0	0	0	0	1	0	0	1	0	0	0	3	11
		United Nations Security Council Resolutions 1325, 1820, 1888 and 1889 on women, peace and security	1	X	1	1	0	0	0	0	0	0	0	0	0	0	0	0	3	10
		Participation in decision-making	X	X	0	1	0	1	1	0	0	1	1	1	1	1	0	0	8	20
		Political power 'agency'	Policies	Participation of women in peace processes and negotiations	X	X	0	1	0	0	0	0	0	0	0	1	0	0	0	1	3
Gender mainstreaming in all departments	X			X	1	1	2	2	1	1	1	1	1	1	1	1	1	15	57	
Support for women's quotas and affirmative action	X			X	0	1	1	0	0	0	0	0	0	0	0	0	0	2	7	
Total score																		356	38	

Source: African Gender and Development Index, ECA, 2011.

Note: X = Not applicable.

Abbreviations: ACHPR, African Charter on Human and Peoples' Rights; CEDAW, Convention on the Elimination of All Forms of Discrimination against Women; FGM, female genital mutilation; HIV/AIDS, human immunodeficiency virus/acquired immunodeficiency syndrome; ICPD, International Conference on Population and Development; ILO, International Labour Organization; and NEPAD, New Partnership for Africa's Development.

Figure AI.1 Components of the Gender Status Index





2. COMMITMENT TO WOMEN'S RIGHTS

"When women are healthy, educated and free to take the opportunities life affords them, children thrive and countries flourish, reaping a double dividend for women and children. ... Until there is gender equality, there can be no sustainable development ... [T]here is no tool for development more effective than the empowerment of women. No other policy is as likely to raise economic productivity or to reduce child and maternal mortality. No other policy is as sure to improve nutrition and promote health, including the prevention of HIV/AIDS. No other policy is as powerful in increasing the chances of education for the next generation."

Message from the late Kofi Annan,

The State of the World's Children 2007 (UNICEF, 2006).

2.1 INTRODUCTION

Gender equality is a development objective in its own right, which should be promoted by adopting and implementing specific policies and strategies that has long been recognized in regional and international reports, declarations, conventions and protocols. Since its formation in 1945, equality between men and women has been a fundamental value for the United Nations. The Preamble of the Charter of the United Nations underscored the determination of the United Nations, "to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women" (United Nations, 1945).

Since then, various global and regional commitments have been made, calling upon States to condemn and pursue a policy to eliminate discrimination against women. These commitments also urge states to take appropriate measures to ensure the full development and advancement of women, especially in the political, social, economic and cultural fields. Sustainable Development Goal 5, target 5.1, calls upon States to end all forms of discrimination against all women and girls everywhere.

This chapter provides a review of the progress made by the selected countries in domesticating the provisions of three international human rights treaties and three regional human rights treaties included in the African Women's Progress Scoreboard. The global treaties are the CEDAW adopted by the General Assembly in 1979, the Beijing Declaration and Platform for Action adopted at the United Nations Fourth World Conference on Women in Beijing in 1995, and the Optional Protocol to CEDAW of 1999. The regional treaties are the African Charter on the Rights and Welfare of the Child adopted in 1990, the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (the "Maputo Protocol") adopted in 2003 and the Solemn Declaration on Gender Equality in Africa adopted in 2004.

Table 2.1 Status of ratification of international and regional human rights treaties

	Convention on the Elimination of All Forms of Discrimination against Women	African Charter on the Rights and Welfare of the Child	Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women	Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa
Chad	✓(1995)	✓(2000)	✗ ^s	✗ ^s
Eswatini	✓(2004)	✓(2012)	✗	✓(2012)
Guinea	✓(1982)	✓(1999)	✗	✓(2012)
Guinea-Bissau	✓(1985)	✓(2008)	✓(2009)	✓(2008)
Liberia	✓(1984)	✓(2007)	✗ ^s	✓(2007)
Mauritania	✓ ^r (2001)	✓(2005)	✗	✓(2005)
Mauritius	✓ ^r (1984)	✓(1992)	✓(2008)	✓(2017)
Namibia	✓(1992)	✓(2004)	✓(2000)	✓(2004)
Niger	✓ ^r (1999)	✓(1996)	✓(2004)	✗ ^s
Rwanda	✓(1981)	✓(2001)	✓(2008)	✓(2004)
Sao Tome and Principe	✓(2003)	✗	✓(2017)	✗ ^s
Seychelles	✓(1992)	✓(1992)	✓(2011)	✓(2006)
Sierra Leone	✓(1988)	✓(2002)	✗ ^s	✓(2015)
South Africa	✓(1995)	✓(2000)	✓(2005)	✓(2004)
Zimbabwe	✓(1991)	✓(1995)	✗	✓(2008)

Source: ECA analysis based on data from the African Union, June 2017a and September 2017b, and the United Nations Treaty Collection, July 2018a and 2018b.

Notes: (✓) means that a country has ratified the treaty, while (✗) means that the country has not ratified the treaty. Numbers in brackets represent year of ratification. *r* = the country has expressed reservations. Mauritania has general reservation in respect of articles 13 (a) and 16 of the Convention on the Elimination of All Forms of Discrimination against Women. Mauritius has reservation in respect of article 29, para. 1. The Niger has reservations in respect of article 2, paras. (d) and (f); article 5, paras. (a) and (b); article 15, para. 4; article 16, paras. 1 (c), (e) and (g); and article 29, para. 1. *s* = these countries have signed but not ratified the instrument.

Whereas CEDAW and its Optional Protocol, the African Charter on the Rights and Welfare of the Child and the Maputo Protocol are binding legal instruments, the Beijing Platform for Action and the Solemn Declaration are not. Table 2.1 summarizes the status of ratification of the four binding legal instruments. Box 2.1 summarizes the reporting obligations of State parties to CEDAW, the African Charter on the Rights and Welfare of the Child and the Maputo Protocol, and the steps taken by Rwanda and Seychelles to effectively meet those obligations.

Box 2.1 Meeting treaty reporting obligations in Mauritania, Rwanda and Seychelles

The implementation of human rights treaties is usually monitored by bodies that are established by the terms of the relevant treaties. The treaty bodies operate through a combination of State party reviews, adoption of general comments/recommendations and, under protocols to some of the treaties, through reviewing individual complaints and holding inquiries. For example, article 18 (1) of the Convention on the Elimination of All Forms of Discrimination against Women obliged States parties to the Convention to submit a report on the legislative, judicial, administrative or other measures they have adopted to give effect to the provisions of the present Convention for consideration by the Committee on the Elimination of Discrimination against Women. Governments are expected to submit a report on the legislative or other measures taken to adopt the provisions of the Maputo Protocol every two years (article 26 (1)). The limited availability of up-to-date sex-disaggregated data and the burden of multiple reporting obligations are important challenges faced by State parties in submitting reports on time.

The Government of Mauritania has set up an interministerial technical committee, which includes all ministerial departments, the National Human Rights Commission and the Office of the Ombudsperson. The committee is responsible for drafting reports and following up on the implementation of the recommendations of treaty bodies and the universal periodic review. It consults civil society organizations and parliamentary authorities in finalizing reports.

In Rwanda, monitoring the implementation of the international commitments is done through the reporting process spearheaded by the Ministry of Gender and Family Promotion in collaboration with other members of the universal periodic review, including the Ministry of Foreign Affairs, the National Human Rights Commission, relevant organizations of the United Nations system and civil society organizations. The Gender Monitoring Office, which has the sole responsibility of monitoring the implementation of gender equality principles in all sectors and at all levels has set up a monitoring framework with key indicators relating to tracking of the implementation of the international commitments throughout the board. Gender profiles have been instituted both at sectoral and district levels to identify key achievements, lessons learned and gaps, which inform advocacy for policy and law reviews.

In October 2012, the Cabinet of Ministers of Seychelles established the Seychelles Human Rights Treaty Committee made up of representatives of government ministries, non-governmental organizations and civil society organizations, and is jointly chaired by the Department of Foreign Affairs and the Office of the Attorney General. One of the main tasks of the Committee is to coordinate and assist in the preparation and review of treaty reports, and ensure the promotion and dissemination of treaties, concluding remarks and recommendations from treaty bodies.

Source: ECA analysis based on data from the United Nations, 1979; African Union, 2003; Freeman, 2009; Draft national reports on AGDI for Rwanda and Seychelles; and Report to the Committee on the Rights of the Child [Mauritania], 2017a.

2.2 CONVENTION ON THE ELIMINATION OF ALL FORMS OF DISCRIMINATION AGAINST WOMEN

"For the purposes of the present Convention, the term "discrimination against women" shall mean 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."

(United Nations, 1979, article 1).

"States parties shall ensure that there is neither direct nor indirect discrimination against women. Direct discrimination against women constitutes different treatment explicitly based on grounds of sex and gender differences. Indirect discrimination against women occurs when a law, policy, programme or practice appears to be neutral in so far as it relates to men and women, but has a discriminatory effect in practice on women because pre-existing inequalities are not addressed by the apparently neutral measure. Moreover, indirect discrimination can exacerbate existing inequalities owing to a failure to recognize structural and historical patterns of discrimination and unequal power relationships between women and men."

(CEDAW, Committee General Recommendation No. 28, 2010, para. 16).



CEDAW, in its article 1, provides a comprehensive definition of discrimination against women that is applicable to the other provisions of the Convention (see first quote above). The United Nations Office of the High Commissioner for Human Rights (OHCHR) notes that this article underscores that sex- and gender-based differentiations that nullify or impair equal rights between men and women are discriminatory and therefore in violation of the Convention.¹ In addition, it notes that temporary special measures aimed at promoting the advancement of women and counteracting the effects of past discrimination are considered non-discriminatory and consistent with the mandate set forth in CEDAW. General recommendation No. 19 in the Committee on the Elimination of Discrimination against Women (1992) considers gender-based violence against women and girls as a form of discrimination.

Table 2.1 shows that all the selected countries have ratified CEDAW, although Mauritania, Mauritius and the Niger have expressed reservations with regard to some of the articles of the Convention, including some aspects of articles 2 and 16 in the case of Mauritania and the Niger. The Committee on the Elimination of Discrimination against Women (1998)² considers articles 2 and 16 “to be core provisions of the Convention”, and that reservations to article 16 are impermissible. The Niger agreed to review its reservations to the Convention in 2014 (CEDAW, Committee, 2017a).

Box 2.2 Selected actions undertaken by Rwanda and South Africa with regard to the Convention on the Elimination of All Forms of Discrimination against Women

Policies and strategies: Gender equality is a central pillar in all the main national development strategic plans, including Vision 2020 and the Economic Development and Poverty Reduction Strategy II (2013–2018) in Rwanda. The National Gender Policy (2016–2020) was developed to provide clear guidelines for integrating gender issues into the policies, programmes, activities and budgets across all sectors and at all levels. Several sectoral gender policies, strategies and programmes have been developed to support the implementation of the national gender policy, including the Girls' Education Policy (2008), the National Reproductive Health Strategy (2003), the gender mainstreaming strategy for agriculture, the gender mainstreaming strategy for the private sector (2014), the National Implementation Plan of the Beijing Platform for Action (2012–2017) and the National Accelerated Plan for Women, Girls, Gender Equality and HIV (2010–2014).

Laws: South Africa has introduced a number of laws to implement the provisions in CEDAW. These include:

- The Promotion of Equality and Prevention of Unfair Discrimination Act, 2000;
- The Recognition of Customary Marriages Act, 1998;
- The Reform of Customary Law of Succession and Regulation of Related Matters Act, 2009;
- The Preferential Procurement Policy Framework Act, 2000;
- The Broad-based Black Economic Empowerment Act, 2003.

Involvement of civil society organizations: In Rwanda, these organizations have been instrumental in advocating for the repealing of outdated laws. The Rwanda Initiative for Sustainable Development, Haguruka, Legal Aid Forum, Pro-femmes and others have all advocated for the repealing of gender insensitive provisions within the penal code of 1977 and the enactment of Gender-Based Violence Law and Land Law, among others. Pro-femmes Twese Hamwe, which is an umbrella organization of 57 women non-governmental organizations, takes the lead in tracking CEDAW implementation, reporting and monitoring and evaluation. Pro-femmes Twese Hamwe has translated CEDAW into Kinyarwanda, the official language in Rwanda, and undertakes the training of women who aspire to take leadership positions.

Information and dissemination: CEDAW has been translated into the four national languages in Mauritania.

Source: ECA analysis based on data from published and draft national reports on AGDI for Rwanda and South Africa, and Report to the Committee on the Rights of the Child [Mauritania], 2017.

1 OHCHR, Fact Sheet No. 22.

2 CEDAW, Committee (1998, paras. 6 and 17).

Table All.1 (see annex II) shows that, overall, countries' have scored themselves high on ratification, reporting, law, policy commitment and involvement of civil society. The weakest areas were human resources and research, followed by monitoring and evaluation. Chad scored itself highest at 100 per cent, followed by Rwanda with 93 per cent. The Niger scored itself lowest at 60 per cent followed by South Africa with 63 per cent. Box 2.2 summarizes some of the measures taken by Rwanda and South Africa to implement the provisions of CEDAW.

2.3 ARTICLE 2 OF THE CONVENTION ON THE ELIMINATION OF ALL FORMS OF DISCRIMINATION AGAINST WOMEN

States Parties condemn discrimination against women in all its forms, agree to pursue by all appropriate means and without delay a policy of eliminating discrimination against women and, to this end, undertake:

(a) To embody the principle of the equality of men and women in their national constitutions or other appropriate legislation if not yet incorporated therein and to ensure, through law and other appropriate means, the practical realization of this principle;

(b) To adopt appropriate legislative and other measures, including sanctions where appropriate, prohibiting all discrimination against women;

(c) To establish legal protection of the rights of women on an equal basis with men and to ensure through competent national tribunals and other public institutions the effective protection of women against any act of discrimination;

(d) To refrain from engaging in any act or practice of discrimination against women and to ensure that public authorities and institutions shall act in conformity with this obligation;

(e) To take all appropriate measures to eliminate discrimination against women by any person, organization or enterprise;

(f) To take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices which constitute discrimination against women;

(g) To repeal all national penal provisions which constitute discrimination against women.

(United Nations, 1979, article 2).

Article 2 of CEDAW calls upon Governments to condemn discrimination against women. To this end, Governments should take measures to embody the principle of the equality of men and women in their national constitutions, adopt appropriate legislative and other measures to prohibit and eliminate all discrimination against women, establish legal protection of the rights of women on an equal basis with men, take all appropriate measures to modify or abolish existing laws, regulations, customs and practices and repeal all penal provisions which constitute discrimination against women.

Table All.2 (see annex II) shows that in terms of article 2, overall, countries scored themselves high on involvement of civil society, law and policy commitment, and relatively low on budget, research and



setting targets. Chad scored itself highest at 96 per cent followed by Rwanda and Sao Tome and Principe with 92 per cent and Mauritius at 88 per cent. Sao Tome and Principe scored itself very high even though its constitution does not contain a clause on non-discrimination (see table 2.2 and discussion below). The Niger, which has reservations in respect of some aspect of article 2, scored itself lowest at 38 per cent. The Government of the Niger declared that the provisions of article 2, paragraphs (d) and (f) "cannot be applied immediately, as they are contrary to existing customs and practices which, by their nature, can be modified only with the passage of time and the evolution of society and cannot, therefore, be abolished by an act of authority".³ Sierra Leone did not report progress on article 2.

2.3.1 EXAMPLES OF COMPLIANCE AND NON-COMPLIANCE

Examples of compliance and non-compliance with article 2 of CEDAW in countries covered by the report are summarized below.

Article 2(a): Embody the principle of gender equality in national constitution or legislation

- According to the Women, Business and the Law database (World Bank Group, 2018a), the constitutions of Chad, Eswatini, Mauritius, Namibia, the Niger, Rwanda, Seychelles, Sierra Leone, South Africa and Zimbabwe contain a clause on non-discrimination (see table 2.2). In addition, the constitutions of these countries mention gender as a basis for non-discrimination, except for Seychelles. For example, section 20 (2) of the Constitution of the Kingdom of Eswatini [formerly Swaziland] Act 2005, states that "a person shall not be discriminated against on the grounds of gender".⁴ All of the selected countries have a clause on equality in its constitution. Section 13 of the Constitution of Chad and article 15(1) of the Constitution of Sao Tome and Principe provide that men and women are equal before the law.
- In Mauritius, the Equal Opportunities Act (2008) provides for having equal access to opportunities in areas dealing with employment, education, the provision of accommodation, goods, services and other facilities, sports, the disposal of immovable property, admission to private clubs and premises open to the public.
- The constitutions of Mauritius and Sierra Leone and legislation in the Niger make possible "personal status laws" that deny a segment of women's basic rights enjoyed by the majority of the population (see box 2.3).

Article 2(b): Adopt legislation and other measures prohibiting discrimination against women

- In Rwanda, Organic Law N° 10/20/2013/OL prohibits political organizations from basing themselves on any division that may lead to discrimination, including sex, while the Land Law (Law No. 43/2013) prohibits all forms of discrimination, including having access to land (Committee on the Elimination of Discrimination against Women, 2015a). However, in practice women experienced some difficulties pursuing property claims due to lack of knowledge, procedural bias against women in inheritance matters, multiple spousal claims due to polygyny, and the threat of violence (United States Department of State, 2018).

³ United Nations Treaty Collection. Available at https://treaties.un.org/pages/viewdetails.aspx?src=treaty&mtdsg_no=iv-8&chapter=4&lang=en.

⁴ See, www.wipo.int/edocs/lexdocs/laws/en/sz/sz010en.pdf.

Table 2.2 Extent to which national constitutions contains non-discrimination clause and recognize customary laws and gender equality on transmission of nationality

	A. Does the constitution contain a clause on non-discrimination?		B. Does the constitution contain a clause on equality?	C. Is customary law recognized as a valid source of law under the constitution?		D. Can a married woman confer citizenship to a non-national spouse in the same way as a man?
	A1. Yes, or no to A.	A2. If yes to A1, does it explicitly mentions sex or gender?	Yes, or no to B.	C1. Yes, or no to C.	C2. If yes to C1, is it invalid if it violates constitutional provisions on non-discrimination or equality?	Yes, or no to D.
Chad	✓	✓	✓	✓	✓	✓
Eswatini	✓	✓	✓	✓	✓	✗
Guinea	✗	-	✓	✗	-	✗
Guinea-Bissau	✗	-	✓	✗	-	✓
Liberia	✗	-	✓	✓	✓	✓
Mauritania	✗	-	✓	✗	-	✗
Mauritius	✓	✓	✓	✓	✗	✓
Namibia	✓	✓	✓	✓	✓	✓
Niger	✓	✓	✓	✓	✓	✓
Rwanda	✓	✓	✓	✓	✓	✓
Sao Tome and Principe	✗	-	✓	✗	-	✓
Seychelles	✓	✗	✓	✗	-	✓
Sierra Leone	✓	✓	✓	✓	✗	✗
South Africa	✓	✓	✓	✓	✓	✓
Zimbabwe	✓	✓	✓	✓	✓	✓

Source: ECA analysis based on the Women, Business and the Law database, Washington, D.C., World Bank, 2018a.

Notes: (✓) means "Yes", (✗) means "No" and (-) means "non-applicable" to the questions asked.

Box 2.3 Discriminatory provisions in Mauritius, the Niger and Sierra Leone

Mauritius. Section 16 (1) of the Constitution states that "no law shall make any provision that is discriminatory either of itself or in its effect". Section 16 (4)(c), however, contains specific exceptions to protection from discrimination that makes possible the existence of personal status laws. Women married under these laws are denied basic rights enjoyed by women under the civil marriage law, which makes discrimination possible in marriage, divorce, distribution of marital property, inheritance, guardianship, and others. People of the Muslim faith may opt to marry in accordance with Muslim rites, governed by Muslim religious rules. Judges deciding on litigious issues arising between spouses of a Muslim religious marriage, can only pass judgment after consulting the appropriate religious authority. The Government has set up several commissions tasked to look into the current rules governing marriages and dissolution of marriages celebrated in accordance with Muslim rites, as well as issues on children and succession rights; however, no consensus has been reached to date.

Niger (the). Act No. 62-11 (1962) and Law No. 2004-50 (2004) give precedence to the application of customary law over civil law in most personal status matters, including marriage, divorce, direct descent, inheritance, settlement of assets and wills, and in relation to property ownership, adversely affecting women and girls. A non-discriminatory Personal Status Code (2010) has been drafted but not adopted due to the hostility of specific groups.

Sierra Leone. Section 27 (4)(d) of the 1991 Constitution (amended in 2001) states that section 27(1), which guarantees protection from discrimination, "shall not apply to any law so far as that law makes provision with respect to adoption, marriage, divorce, burial, devolution of property on death or other interests of personal law". Several Constitutional Review Commissions have recommended that this section of the Constitution be expunged. However, section 27 is one of the "entrenched clauses" that can only be lawfully amended by way of a referendum.

Source: ECA analysis based on data from the national report on AGDI for Mauritius, 2017; CEDAW Committee Concluding Observations [Sierra Leone], 2014a; and CEDAW Committee Concluding Observations [the Niger], 2017.



Article 2(c): To establish legal protections for women through public institutions, including tribunals

- In Mauritius, the Equal Opportunity Commission was set up in 2013 under the Equal Opportunity Act (2008) to address complaints alleging discrimination, including those on the basis of sex. Cases unresolved by the Commission are referred to the Equal Opportunity Tribunal, which has jurisdiction to issue interim orders, and directives and compensatory orders.
- In Rwanda, cultural attitudes still prohibit women and children from owning property. Courts have overturned decisions made by the community based on Law N° 22/99 (see discussion on article 2(b)).

Article 2(d): Eliminating discrimination by, and within, public authorities and institutions

- In the Niger, women are discriminated against with regard to having access to social benefits and pensions (Act No. 2007-26 determines the criteria for entitlement to and levels of family allowances, benefits and bonuses; and Decree No. 60-55/MFP/T on the remuneration and material benefits allocated to officials in state public administrations and establishments).⁵

Article 2(e): Take all measures to eliminate discrimination by any person, organization or enterprise

- In Mauritius, every employer employing more than 10 employees on a full-time basis is required to draw up and apply an equal opportunity policy in line with the guidelines issued by the Equal Opportunities Commission.
- In Rwanda, Law No.59/2008 (2008) on the Prevention and Punishment of Gender-Based Violence punishes marital rape and addresses economic, sexual, physical and psychological abuse.
- In South Africa, the Employment Equity Act (1998) states that where designated groups are under-represented, employers are required to prepare an employment equity plan that includes numeric targets as opposed to compulsory quotas. For example, the South African Cabinet revised the employment equity target from 30 per cent to 50 per cent women in Senior Management Service positions throughout the public service by March 2009.

Article 2(f): Modify or abolish discriminatory laws, regulations, customs and practices

- Women are prevented from transmitting their citizenship to a non-national spouse in the same way as a man in Eswatini, Guinea, Mauritania and Sierra Leone (see table 2.2).
- Law No. 2014-60 (2014) amended the Nationality Code in the Niger to allow women to transfer Nigerian citizenship through marriage, a right previously reserved to men only.⁶
- In Rwanda, the labour law was amended in 2009 to forbid direct or indirect gender-based violence or moral harassment at the work place, and prohibit punishment for any worker who reports or testifies on violence.

⁵ CEDAW, Committee Concluding Observations [the Niger] (2017, para. 35(b)).

⁶ Committee, Concluding Observations [the Niger] (2017, para. 4(b)).

- In Seychelles, in 2013 a Civil Code Revision Committee chaired by the Chief Justice was assigned the responsibility of revising and modernizing the Civil Code of Seychelles (1975) in line with the provisions in the Constitution (see box 2.4).

Article 2(g): Repeal all discriminatory penal codes

- In Rwanda, Penal Code (1977), which provided for unequal punishment of men and women who committed the same offence, was repealed and replaced by Penal Code (2012) to provide for equal penalties for similar offences.

Box 2.4 Legal provisions not in line with article 16 of the Convention on the Elimination of All Forms of Discrimination against Women in Seychelles

A review undertaken in 2013 concluded that there were a few discriminatory legal provisions relating to marriage and family relations, such as article 214 of the Civil Code of Seychelles (1975), making husbands primarily responsible for the family charges; article 389 giving preference to fathers with regard to the administration of the child's property, consent to the child's marriage, and the child's domicile; and article 40 of the Civil Status Act, which sets the minimum age of marriage for girls at 15 years of age and boys at 18 years of age. The same year, a Civil Code Revision Committee chaired by the Chief Justice was assigned the responsibility of revising and modernizing the legislation in line with the provisions in the Constitution. The Civil Code of Seychelles Bill 2017 is being considered as a replacement for the current code.

Source: ECA analysis based on data from the draft national report on AGDI for Seychelles.

2.4 ARTICLE 16 OF THE CONVENTION ON THE ELIMINATION OF ALL FORMS OF DISCRIMINATION AGAINST WOMEN

States Parties shall take all appropriate measures to eliminate discrimination against women in all matters relating to marriage and family relations and in particular shall ensure, on a basis of equality of men and women:

- (a) The same right to enter into marriage;*
- (b) The same right freely to choose spouse and to enter into marriage only with their free and full consent;*
- (c) The same rights and responsibilities during marriage and at its dissolution;*
- (d) The same rights and responsibilities as parents, irrespective of their marital status, in matters relating to their children; in all cases the interests of the children shall be paramount;*
- (e) The same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights;*
- (f) The same rights and responsibilities with regard to guardianship, ward ship, trusteeship and adoption of children, or similar institutions where these concepts exist in national legislation; in all cases the interests of the children shall be paramount;*
- (g) The same personal rights as husband and wife, including the right to choosing a family name, a profession and an occupation;*



(h) The same rights for both spouses in respect of the ownership, acquisition, management, administration, enjoyment and disposition of property, whether free of charge or for a valuable consideration.

The betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specify a minimum age for marriage and to make the registration of marriages in an official registry compulsory.

(United Nations, 1979, article 16).

Article 16 of CEDAW relates to the elimination of sex and gender discrimination in marriage and family relations. Women and girls could be denied the legal rights afforded to them by national constitutions and statutory laws because of customs, traditional attitudes and parallel legal systems, including customary and religious laws. In General Recommendation No. 21, the Committee on the Elimination of Discrimination against Women underlined that “polygamous marriage contravenes a woman’s right to equality with men” that “ought to be discouraged and prohibited”.⁷ Furthermore, customs and tradition that enable forced, arranged and child marriages are in contravention of subsection 1(b) of article 16. In subsection 1(f), the article recommends that States Parties include the legal concepts of guardianship, wardship, trusteeship and adoption in their family codes to ensure that children born out of wedlock enjoy the same rights as children of married couples.⁸ The need to recognize and consider the wife’s non-monetary contributions when dividing marital property after the dissolution of the marriage, is covered in subsection 1(h).⁹ Subsection 2 obligates State Parties to adopt the same minimum age standards for both men and women, and establish a legal requirement of marriage registration. Marriage registration protects the rights of spouses with regard to property issues upon dissolution of the marriage by death or divorce.¹⁰

On their performance vis-a-vis article 16, overall, countries scored themselves high on involvement of civil society, law and institutional mechanism and relatively low on setting targets and budget (see annex II, table All.3). For article 2, Chad scored itself highest with 96 per cent, followed by Rwanda at 92 per cent, while the Niger scored itself lowest at 38 per cent. The Niger has reservation in respect of paragraphs 1(c), (e) and (g) of article 16. Sierra Leone, alongside Mauritania, which has a general reservation in respect of article 16, did not report on this article of CEDAW.

⁷ CEDAW, Committee General Recommendation No. 21 (1994, para. 14).

⁸ American Bar Association, Central and East European Law Initiative (2002, p. 56).

⁹ CEDAW, Committee General Recommendation No. 21 (1994, para. 32).

¹⁰ CEDAW, Committee General Recommendation (2013b, para. 25).

Box 2.5 Various forms of family, with application to Rwanda and South Africa

"Marriages may be formed through a variety of customs, ceremonies and rituals that may be sanctioned by the State. Civil marriage is sanctioned solely by the State and is registered. Religious marriage is solemnized through the performance of ritual(s) prescribed by religious law. Customary marriage is undertaken by the performance of ritual(s) prescribed by the customs of the parties' community." [para. 19]

"In some States parties, the law also provides for registered partnerships and establishes rights and responsibilities between the parties. ... De facto unions are not registered and often do not give rise to any rights. Some States, however, recognize de facto unions and establish equal rights and responsibilities for them that can vary in scope and depth. Certain forms of relationships (namely, same-sex relationships) are not legally, socially or culturally accepted in a considerable number of States parties." [paras. 22–24]

Article 17 of the Constitution of Rwanda specifies that only civil, monogamous marriages are recognized by law.

In South Africa, a person may only legally marry under the following three laws: the Marriage Act (1961), which provides for civil or religious opposite-sex marriages; the Recognition of Customary Marriages Act (1998), which provides for the civil registration of marriages solemnized according to the traditions of indigenous groups; and the Civil Union Act (2006), which provides for opposite-sex and same-sex civil marriages, religious marriages and civil partnerships. Muslim marriages are now recognized if solemnized by a marriage officer duly registered under the Marriage Act, allowing them to be recorded on the National Population Register and so to receive the full legal status afforded by the country's Constitution.

Source: ECA analysis based on CEDAW Committee, 2013b, and published and draft national reports on AGDI for South Africa and Rwanda.

2.4.1 EXAMPLES OF COMPLIANCE AND NON-COMPLIANCE

Examples of compliance and non-compliance with article 16 in countries covered by the report are summarized below.

Subsection 1(a): The same right to enter into marriage

Polygynous marriages¹¹ are allowed in Chad, Guinea, the Niger, Sao Tome and Principe, South Africa and Zimbabwe.

Subsection 1(b): The same right to freely choose a spouse and enter into marriage with their free and full consent

- In Guinea, levirate marriages (coercing a widow to marry her deceased husband's brother) are common in many communities.¹²
- In the Niger, most child marriages are conducted under customary law, which does not require the consent of the future spouses for marriage.¹³
- Section 27 of the Constitution of the Kingdom of Eswatini provides that marriage may be entered into only with the free and full consent of the intending spouses. Customary practices are permitted unless they conflict with the provisions of the Constitution. Section 28 (3) provides that women shall not be compelled to undergo or uphold a custom to which she is in conscience opposed.
- Box 2.5 highlights the legal frameworks governing marriages in Rwanda and South Africa.

¹¹ Polygamy is the practice of marrying more than one spouse at the same time. Sociologists use the term polygyny to refer to a situation when a man marries multiple wives at the same time, and polyandry when a woman marries multiple husbands at the same time.

¹² National report on AGDI for Guinea (2017, p. 33, section 3(1)).

¹³ CEDAW, Committee Concluding Observations [the Niger] (2017a, para. 42 (a)).



Subsection 1(c): The same rights and responsibilities during marriage and at its dissolution

- In Eswatini, the Marriage Act (1964) and the customary law relegate married women to minors and vests marital power to the male spouse. As a consequence, women continue to experience discrimination in marriage, inheritance and ownership of assets.

Subsection 1(d): The same rights and responsibilities related to raising children

- In Namibia, the Married Persons Equality Act (1996) gives equal guardianship to mothers and fathers in both civil and customary marriages.
- In Seychelles, according to the Civil Code of Seychelles (1975), husbands are primarily responsible for the family charges; and fathers are given preference as regards (a) the administration of the child's property, (b) consent to the child's marriage and (c) the child's domicile (see box 2.4).
- In its national report on AGDI, South Africa noted that the execution of the duty of parents to support their children under the Maintenance Act (1998) is still a challenge as maintenance officers and investigators are ineffective in dealing efficiently and adequately with enquiries and investigations, which results in women often having to spend considerable time away from work to attend numerous appointments in the court.¹⁴

Subsection 1(f): The same rights to custody of children

- In Guinea, women have the right to custody over their children until the age of seven years, in the case of divorce.
- Section 56 (3) of the Constitution of Zimbabwe 2013 states that: "Every person has the right not to be treated in an unfairly discriminatory manner on such grounds as their nationality, race, colour, tribe, place of birth, ethnic or social origin, language, class, religious belief, political affiliation, opinion, custom, culture, sex, gender, marital status, age, pregnancy, disability or economic or social status, or whether they were born in or out of wedlock."¹⁵ In 2015, the High Court in Zimbabwe ruled that children born in and out of wedlock have equal right to their parents' estate and property.¹⁶

Subsection 1(g): The same personal rights

- Married women in Chad, Guinea-Bissau and the Niger are not allowed by law to open bank accounts without their husbands' permission (World Bank, 2018).
- In Guinea, a married woman retains her given name and her family name, and is free to manage and dispose of her finances, to conclude contracts and to take loans, as well as to conduct any legal transaction.¹⁷
- In Mauritius, the law gives complete freedom of choice to women to retain their own name, to change to the husband's name or to use both names.

¹⁴ Commission on Gender Equality (2015, p. 63).

¹⁵ See <http://extwprlegs1.fao.org/docs/pdf/zim127325.pdf>.

¹⁶ Southern African Development Community (2016, p. 7).

¹⁷ Government of Guinea (2005, p. 19).

- In the Niger has legal provisions restricting married women's legal capacity, including the requirement to obtain the husband's permission to exercise a profession.¹⁸
- In Rwanda, the Commercial Code was amended in 2010 so that there is now no need for a woman to have the authorization of her husband to start a business.¹⁹

Subsection 1 (h): Property inheritance and ownership

- In Eswatini, section 16 of the Deeds Registry Act (1968) was amended in 2012 to provide women with the legal right to register title deeds for land in their names.
- In Mauritius, widows and widowers inherit the property of the deceased spouse whatever the circumstances and the matrimonial regime (Civil Code, article 731).²⁰
- In Namibia, the Communal Land Reform (2002) entitles widows the right to stay on communal land allocated to their deceased husband, even if they re-marry.
- In the Niger, the application of customary law results in unequal land inheritance and land grabbing from widows.²¹
- In Rwanda, under article 4 of the Land Law N° 43/2013, "All forms of discrimination, such as that based on sex or origin, in relation to access to land and the enjoyment of real rights shall be prohibited". Further, "The right to land for a man and a woman lawfully married shall depend on the matrimonial regime they opted for".²²
- Box 2.6 highlights how women are discriminated against under customary rules of property inheritance and ownership in Eswatini, Sierra Leone and Zimbabwe.

18 CEDAW Committee Concluding Observations [the Niger] (2017a, paras. 34 and 35(c)).

19 Government of Rwanda (2015, p. 6, para 6).

20 Southern African Development Community (2016, p. 10).

21 CEDAW Committee Concluding Observations [the Niger] (2017a, para. 34).

22 Government of Rwanda (2013, p. 26).

Box 2.6 Discrimination in property inheritance and ownership in Eswatini, Sierra Leone and Zimbabwe

Mary-Joyce Doo Aphane took the Government of Eswatini to court and argued that the Deeds Registry Act was discriminatory of her and other women in the community. Section 16 (3) of the Deeds Registry Act prevented women married in the community from registering immovable property in their names. This piece of legislation further allowed the husband to be the sole administrator of the property. Ms. Aphane further asserted that the piece of legislation went against the provision of section 20 of the Constitution, which states that everyone is equal before the law, while section 28 awards women equal rights to men in political, economic and social activities. On the 23 of February 2010, Justice Qinisile Mabuza ruled in favour of Ms. Aphane and gave women in the community the right to register property in their names and have equal partnership with their husbands in its administration.

There are no legal barriers against women owning property under general law in Sierra Leone, both husband and wife can either separately or jointly acquire, own, manage and dispose of property; however, women are at a disadvantage as far as inheritance to land due to the prevalence of customary rules of succession based on the patrilineal system. Under the rules of patrilineal succession, children born to a woman from a land-owning community or family cannot inherit land in that community or from the family unless their father hails from the same community or family. In addition, preference is normally given to heads of households in the allocation of land who invariably are adult males. The Devolution of Estates Act (2007) has repealed all the discriminatory provisions of law and practices against women and has made men and women equal in the distribution of estate.

In Zimbabwe, two types of marriages are legally recognized. Marriages under the Marriages Act are monogamous, while the Customary Marriages Act allows a man to marry more than one wife. It was reported in 2013 that as many as 84 per cent of customary law unions are unregistered and do not qualify as marriages under the law. Upon dissolution of unregistered customary law union, the woman is only entitled to leave with "umai" or "mawoko" property, which refers to goods such as utensils and linen. In 2017, the High Court awarded Ms. Melody Kurebgaseka part of the property accumulated during the subsistence of her unregistered customary union of 14 years. She was denied part of the property when her unregistered union collapsed.

Source: ECA analysis based on ECA, 2014; draft national report on AGDI for Sierra Leone; *The Herald*, 2013 and 2017; and Government of Sierra Leone, 2011.

Section 2: Prohibition of child marriage; establishing a marriage registry

The legal recognition of marriages is an important element in protecting the rights of women and children. This is because it allows women to obtain rights to property and maintenance during and after marriage, assist in ensuring that marriages are entered into with free and full consent, and that the minimum age of marriage is being upheld (Polavarapu, 2016).

- The legal age of marriage is discussed in the section on child marriage in chapter 3 of the present report.
- In Guinea, only officials of the civil registry are authorized to solemnize a marriage and it must be formally registered.
- The Marriage Act (1961) of Namibia provides for the registration of civil marriage and not for customary and polygamous marriages.
- Law No32/2016 (article 166) of Rwanda recognized only civil monogamous marriage contracted upon mutual consent before the public administration.
- The Registration of Customary Marriage and Divorce Act (2007) in Sierra Leone provides for the registration of all customary marriages and divorces.
- Although it outlaws forced marriages by requiring the consent of both parties to a marriage, the Recognition of Customary Marriages Act (1998) of South Africa in section 4 (9) states that "[f]ailure to register a customary marriage does not now affect the validity of that marriage".

2.5 OPTIONAL PROTOCOL TO THE CONVENTION ON THE ELIMINATION OF ALL FORMS OF DISCRIMINATION AGAINST WOMEN

"Communications may be submitted by or on behalf of individuals or groups of individuals, under the jurisdiction of a State Party, claiming to be victims of a violation of any of the rights set forth in the Convention by that State Party. Where a communication is submitted on behalf of individuals or groups of individuals, this shall be with their consent unless the author can justify acting on their behalf without such consent."
[Article 2]

"The Committee shall not consider a communication unless it has ascertained that all available domestic remedies have been exhausted unless the application of such remedies is unreasonably prolonged or unlikely to bring effective relief." [Article 4(1)]

(United Nations, 1999a).

The Optional Protocol to CEDAW (OP-CEDAW) is an international legal mechanism developed to support the implementation of CEDAW. It enables the Committee on the Elimination of Discrimination against Women to receive complaints from individuals and conduct inquiries into alleged grave or systematic violations of the rights set forth in the Convention.²³ It is a treaty in its own right – State parties to CEDAW should ratify OP-CEDAW separately to be bound by its provisions.

Seven out of the countries covered in the present report (Chad, Eswatini, Guinea, Liberia, Mauritania, Sierra Leone and Zimbabwe) have not ratified the OP-CEDAW (see table 2.1). In 2015, the Committee on the Elimination of Discrimination against Women recommended that State Parties to CEDAW ratify the Optional Protocol.²⁴ It also recommended that they inform women, civil society organizations and institutions of the procedures available for furthering women's rights to have access to justice through the Optional Protocol Conduct through outreach and educational programmes, resources and activities, in various languages and formats.

2.6 BEIJING PLATFORM FOR ACTION

Governments should: "Provide constitutional guarantees and/or enact appropriate legislation to prohibit discrimination on the basis of sex for all women and girls of all ages and assure women of all ages equal rights and their full enjoyment; Embody the principle of the equality of men and women in their legislation and ensure, through law and other appropriate means, the practical realization of this principle; Review national laws, including customary laws and legal practices in the areas of family, civil, penal, labour and commercial law in order to ensure the implementation of the principles and procedures of all relevant international human rights instruments by means of national legislation, revoke any remaining laws that discriminate on the basis of sex and remove gender bias in the administration of justice."

Beijing Platform for Action, (United Nations, 1995, para. 232 (b) – (d)).

Overall, countries scored themselves high on reporting, followed by policy commitment, setting targets and involvement of civil society for the Beijing Platform for Action (see annex II, table All.4). Areas that were scored low were human resources, budget, research, information and dissemination, and monitor-

²³ CEDAW Committee (2015b, para. 67).

²⁴ Ibid., para. 68.



ing and evaluation. Chad, Rwanda and Sao Tome and Principe scored themselves highest at 100 per cent, followed by Mauritius at 93 per cent, with Guinea and South Africa scoring themselves at 61 per cent.

Some of the constitutional and legislative measures to meet the commitments in the Beijing Platform for Action in the countries covered by the present report has been discussed earlier. Subsequent sections of the report will also discuss the legal and policy initiatives taken by countries to promote gender equality in the social, economic and political spheres.

2.7 AFRICAN CHARTER ON THE RIGHTS AND WELFARE OF THE CHILD

“State Parties to the present Charter shall take specific legislative, administrative, social and educational measures to protect the child from all forms of torture, inhuman or degrading treatment and especially physical or mental injury or abuse, neglect or maltreatment including sexual abuse, while in the care of the child.

Protective measures under this Article shall include effective procedures for the establishment of special monitoring units to provide necessary support for the child and for those who have the care of the child, as well as other forms of prevention and for identification, reporting referral investigation, treatment, and follow-up of instances of child abuse and neglect.”

African Charter on the Rights and Welfare of the Child (Addis Ababa, Organization of African Unity, 1990, article 16 (1) – (2)).

All countries covered by the report have ratified the African Charter on the Rights and Welfare of the Child, except for Sao-Tome and Principe (see table 2.1). Overall, countries scored themselves high on law, policy commitment, institutional mechanism and involvement of civil society for the Charter (see annex II, table All.5). Areas that were scored low were monitoring and evaluation, capacity enhancement and accountability/transparency. Chad, Mauritius, the Niger and Rwanda scored themselves at least 90 per cent while Seychelles scored itself lowest at 67 per cent. Box 2.7 highlights the child protection interventions in Mauritius and Seychelles.

Box 2.7 Child protection interventions in Mauritius and Seychelles*Laws*

Mauritius. The Child Protection Act (1994, as amended in 1998 and 2005) obligates medical and paramedical professionals or schools to report suspected cases of child abuse and makes provision for all cases of child trafficking, abandonment and abduction. The Divorce and Judicial Separation Act mandates the courts to seek the views of a child above the age of 10 in which he or she has an interest. The Child Protection and Care Bill is aimed at domesticating the Convention on the Rights of the Child.

Institutional mechanisms

Mauritius. The Ombudsperson for Children's Office was set up in December 2003 to create an effective mechanism for the investigation of complaints regarding the violation of children's rights. The National Children's Council (NCC) ensures that children participate effectively in all social, economic and political life. An elected National Children's Committee was set up in 2003 as part of NCC to deliberate on matters relating to child welfare and to offer its views to the National Children's Board. The Community Child Protection Programme is a forum at the district level to raise people's awareness to child protection issues and ensure early detection and reporting of children at risk.

Seychelles. A Police Child Protection Team was set up in 2015 composed of five police officers. The team specializes in child protection cases and responds to instances of neglect and child abuse. The National Commission for Child Protection was set up in 2005, to advocate for amendments of legislations, collect statistics with regard to children and to raise awareness among people about the rights of the child.

Information and dissemination

Mauritius. Awareness-raising for girls on the Convention on the Rights of the Child, Commercial Sexual Exploitation, teenage pregnancy, violence, abuse, harassment (inclusive of bullying in schools) and Child Protection Clubs.

Source: ECA analysis based on data from published and draft reports on AGDI for Mauritius and Seychelles, and Government of Seychelles, 2015.

2.8 PROTOCOL TO THE AFRICAN CHARTER ON HUMAN AND PEOPLES' RIGHTS ON THE RIGHTS OF WOMEN IN AFRICA (MAPUTO PROTOCOL)

"States Parties shall combat all forms of discrimination against women through appropriate legislative, institutional and other measures. In this regard they shall: (a) include in their national constitutions and other legislative instruments, if not already done, the principle of equality between women and men and ensure its effective application; (b) enact and effectively implement appropriate legislative or regulatory measures, including those prohibiting and curbing all forms of discrimination particularly those harmful practices which endanger the health and general well-being of women; (c) integrate a gender perspective in their policy decisions, legislation, development plans, programmes and activities and in all other spheres of life; (d) take corrective and positive action in those areas where discrimination against women in law and in fact continues to exist; (e) support the local, national, regional and continental initiatives directed at eradicating all forms of discrimination against women.

States Parties shall commit themselves to modify the social and cultural patterns of conduct of women and men through public education, information, education and communication strategies, with a view to achieving the elimination of harmful cultural and traditional practices 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 women and men."

Maputo Protocol, (Addis Ababa, African Union, 2003, article 2 (1) – (2)).



Concerned that “women in Africa still continue to be victims of discrimination and harmful practices”²⁵ and notwithstanding the ratification of a number of international and regional human rights instruments, the Assembly of Heads of State and Government adopted the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) in 2003. The Maputo Protocol is a legally binding human rights instrument. It “expands the scope of protected rights beyond those provided for under CEDAW . . . deals with rights already covered in CEDAW with greater specificity” and address a number of issues “of particular concern to African women that were not included in CEDAW”²⁶ (see box 2.8). Of all the countries covered by the report, Chad, the Niger and Sao Tome and Principe have not yet ratified the Maputo Protocol (see table 2.1).

Box 2.8 Key provisions of the Maputo Protocol

The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) of 2003 has the following key provisions:

- The first binding treaty to provide for the right: to circumscribed “medical abortions” (see chapter 5); and of a woman to be protected against HIV infection and to know the HIV status of her sexual partner;
- Obliges State parties to encourage monogamy;
- Compels State parties to enact and enforce laws prohibiting domestic violence, and criminalizing marital rape;
- Provides for the “protection of women in armed conflict”;
- The girl child may not be recruited or “take a direct part in hostilities”;
- State parties should set a “minimum age of marriage” at 18, and all marriages must “be recorded in writing”;
- Women have the “right to food security”;
- The rights of women who are widows, women with disabilities and elderly women;
- Requires State parties to have affirmative action such as electoral quotas, and with regard to discrimination in law, illiteracy and education.

Source: ECA analysis based on African Union, 2003, and Viljoen, 2009.

Overall, countries scored themselves high on policy commitment, law, development of a plan and involvement of civil society for the Maputo Protocol (see annex II, table All.6). The weakest areas were budget, human resources, information and dissemination, and monitoring and evaluation. Chad, Mauritania, Mauritius, Rwanda, Sao Tome and Principe and Sierra Leone scored themselves at least 80 per cent, while the Niger and Seychelles scored themselves less than 60 per cent.

2.9 SOLEMN DECLARATION ON GENDER EQUALITY IN AFRICA, 2004

The Solemn Declaration on Gender Equality is a non-binding instrument aimed at promoting and protecting women's rights in nine specific areas that are complementary with specific provisions of the Maputo Protocol. These areas are: HIV/AIDS; women's involvement in peace processes and post-conflict reconstruction; “the prohibition of recruitment of child soldiers”; “the prohibition of the abuse of women and sex slaves”; awareness-raising about gender-based violence and trafficking in women; promoting parity in local and national elections; the right to development; land, property and inheritance; and education and literacy.²⁷

²⁵ African Union (2003, preamble).

²⁶ Viljoen (2009, p. 21).

²⁷ Ibid., pp. 25–26.

Overall, countries scored themselves high on policy commitment and involvement of civil society for the Solemn Declaration (see annex II, table AII.7). The weakest area was budget, followed by human resources, research, information and dissemination, and accountability/transparency. Chad, Mauritius, Rwanda and Sao Tome and Principe scored themselves above 80 per cent while Guinea and Seychelles scored themselves less than 60 per cent. Seychelles scored itself zero on law, institutional mechanism, budget, human resources and research. Sierra Leone did not report on this issue.

2.10 REVIEW AND MODIFICATION OF CUSTOMARY LAW

"Customary law refers to the customs and usages traditionally observed among the indigenous African peoples of South Africa and which form part of the culture of those peoples."

Recognition of Customary Marriages Act 120 of 1998 (Government of South Africa, 1998, section 1).

"[C]ustomary law" means the customary law, norms, rules of procedure, traditions and usages of a traditional community in so far as they do not conflict with the Namibian Constitution or with any other written law applicable in Namibia."

Traditional Authorities Act 25 of 2000 (Government of Namibia, 2000, section 1).

As discussed above, the majority of the countries have gender-equality clauses in their constitution (see table 2.2); however, the constitution of some countries also recognizes systems of customary and religious laws. These laws are often discriminatory and deny women and girls full enjoyment of their rights afforded to them under national constitutions and statutory laws.

This tension in plural legal systems between constitutional rights and statutory laws on the one hand and customary and religious laws on the other, raises two main issues with regard to the promotion of gender equality. First, the tension is especially salient for private issues such as marriage, divorce, distribution of marital property, inheritance rights, marital rape and guardianship, among others. Second, the constitution is usually silent as to how these conflicts are to be resolved, leaving it to the judiciary to adjudicate on such matters.²⁸ As will be discussed in chapter 6, given that the judicial system is still dominated by males, these decisions may not always be based on the principles underpinning CEDAW. Signatories to CEDAW and other human rights instruments are obligated to review their legislative frameworks and to amend or repeal (or both) provisions that discriminate against women.

Not all countries have customary laws. The constitutions of Guinea, Guinea-Bissau, Mauritania, Sao Tome and Principe and Seychelles do not recognize customary law (see table 2.2). The constitutions of Chad, Eswatini, Liberia, Namibia, the Niger, Rwanda, South Africa and Zimbabwe recognize customary law as a valid source of law provided they do not violate constitutional provisions on non-discrimination or equality. For example, article 176 of the Constitution of Rwanda provides that: "Unwritten customary law remains applicable provided it has not been replaced by written law, is not inconsistent with the Constitution, laws, and orders, and neither violates human rights nor prejudices public security or good morals." In Sierra Leone, section 27 (4) (e) of the Constitution states that section 27(1), which guarantees protection from discrimination, shall not apply for the application of customary laws. Although Mauritius does not strictly have customary laws, it does have a provision for personal laws, which mainly affects women from the Muslim community (see box 2.3).

²⁸ Sigsworth and Kumalo (2016, p. 7).



Overall, countries scored themselves high on institutional mechanism and involvement of civil society (see annex II, table AII.8). The weakest area was targets, followed by budget and monitoring and evaluation. Of the countries in which customary laws exist, Rwanda scored itself highest at 92 per cent and Guinea lowest with 12 per cent. Box 2.9 includes examples of the harmonization of customary laws with national laws and constitutions.

Box 2.9 Harmonization of customary and national laws

- Eswatini is reviewing the Marriage Act and Administration of Estates Act (1902) to align them with the provisions of the Constitution.
- Liberia. "The Committee notes that, in 2011, the State party adopted an act establishing a law reform commission with a mandate to review laws. The Committee also notes the pluralistic legal system in the State party, where customary and statutory law are applicable side by side, and is concerned that certain elements of customary law are in conflict with statutory law and do not comply with the Convention."
- Namibia. "The Committee notes that the State party has a pluralistic legal system in which customary and statutory law are both applicable and that section 66 (1) of the Constitution provides that customary law is valid only to the extent to which it does not conflict with the Constitution or any other statutory law. The Committee is concerned, however, that some elements of customary law are not in compliance with the Convention."
- Niger. "No timeframe is envisaged to repeal discriminatory legislation, including provisions in the Civil Code regulating, inter alia, the matrimonial home (article 108), the status of head of household and paternal power (articles 213 to 216), the legal capacity of a married women (articles 506 and 507), remarriage (articles 228, 296), the exercise of guardianship over children (articles 389 to 396, 405), and the distribution of marital assets (article 818)."
- In South Africa, the Reform of Customary Law of Succession and Regulation of Related Matters Act (2010) gave widows and daughters equal inheritance rights with widowers and sons.
- The Law Commission of Zimbabwe is working on proposals to harmonize customary laws with national laws.

Source: ECA analysis based on Southern African Development Community (SADC), 2016, CEDAW Committee Concluding Observations [Liberia], 2015b, CEDAW Committee Concluding Observations [Namibia], 2015c, and CEDAW Committee Concluding Observations [the Niger], 2017a.

2.11 CONCLUDING REMARKS

This chapter looked at the progress made by the selected countries in meeting their commitments set out in global and regional instruments on women's rights. These instruments are CEDAW, the African Charter on the Rights and Welfare of the Child, the Beijing Declaration and Platform for Action, the Optional Protocol to CEDAW, the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) and the Solemn Declaration on Gender Equality in Africa. CEDAW and its Optional Protocol, the African Charter on the Rights and Welfare of the Child and the Maputo Protocol are binding legal instruments, while the Beijing Platform for Action and the Solemn Declaration are not.

Convention on the Elimination of All Forms of Discrimination against Women. All countries covered in the present report have ratified CEDAW. Mauritania and the Niger, however, have expressed reservations with respect to articles 2 and 16, which the Committee on the Elimination of Discrimination against Women considers to be core provisions of the Convention.

African Charter on the Rights and Welfare of the Child. All countries covered by the present report have ratified the Charter, except for Sao-Tome and Principe.

Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women. Chad, Eswatini, Guinea, Liberia, Mauritania, Sierra Leone and Zimbabwe have not yet ratified the Optional Protocol.

Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa. Chad, the Niger and Sao Tome and Principe have not yet ratified the Protocol.

Domesticating the provisions of international and regional human rights instruments. Countries have made considerable progress in incorporating the principles and provisions of these legal instruments into their national constitutions and legislation, adopting legislation, policies and other measures prohibiting discrimination against women, and amending and repealing laws, regulations, customs and practices that are discriminatory. Toward that end, countries have reviewed laws to identify discriminatory provisions, including by setting up review commissions.

Plural legal systems. Although the majority of countries have gender-equality clauses in their constitution, the constitution of some countries also recognizes systems of customary and religious laws. These laws are often discriminatory and deny women and girls full enjoyment of their rights afforded to them under national constitutions and statutory laws. Countries have taken steps to harmonize customary laws with constitutional provisions and national laws in line with CEDAW and other instruments.

Personal status laws. Another issue that poses a challenge to domestication of provisions of these legal instruments is the existence of "personal status laws" in Mauritius, the Niger and Sierra Leone. Personal status laws deny a segment of women's basic rights enjoyed by the majority of the population and makes discrimination possible in marriage, divorce, distribution of marital property, inheritance, guardianship and others.

Reporting obligations of State parties. The limited availability of up-to-date sex-disaggregated data and the burden of multiple reporting obligations are important challenges faced by State parties in submitting reports on time to treaty bodies. Seychelles has set up an interministerial committee to coordinate and assist in the preparation and review of treaty reports and ensure the promotion and dissemination of treaties, concluding remarks and recommendations from treaty bodies.

Scoring on the African Women's Progress Scoreboard. Overall, countries scored themselves well on enacting legislation, policy commitment and involvement of civil society organizations in terms of meeting the international and regional commitments on women's rights. Weak areas were budget, human resources, monitoring and evaluation, and research.

2.12 RECOMMENDATIONS

Governments should undertake the following interventions to eliminate all discrimination against women and promote equality between men and women:

- **Ratification of instruments.** Expedite, for countries that have not yet done so, the ratification of the African Charter on the Rights and Welfare of the Child, Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa;
- **Harmonization of laws with international and regional human rights instruments.** Harmonize statutory and customary laws with the provisions of the relevant international and regional human rights



instruments and repeal all legislation that is incompatible with the principle of equality of women and men;

- **Review and modify discriminatory laws, regulations, customs and practices.** Accord priority to the review of laws, regulations, customs and practices, including customary laws and personal status laws in which they exist, to identify and take steps to modify those that discriminate against women and girls;
- **Participation of women and civil society organizations.** Ensure that women and civil society organizations participate substantively in processes aimed at reviewing discriminatory laws and domesticating the provisions of international and regional instruments on women's rights;
- **Awareness-raising.** In collaboration with civil society organizations, undertake education awareness-raising programmes that target parliamentarians, the general public and other key stakeholders, highlighting the importance of incorporating the prohibition of sex-based discrimination with gender equality provisions in legislation. In addition, Governments should strengthen programmes that are aimed at enhancing women's awareness of their rights and the means to claim them as their rights;
- **Resources.** Allocate adequate organizational, human, technical and financial resources to the justice system to ensure that non-discriminatory laws are effectively enforced and that women have effective access to justice;
- **Data.** Enhance the collection, analysis and dissemination of comprehensive data, disaggregated by sex, age, disability, ethnicity, location and socioeconomic status, which should be used to assess the trends of women and progress made towards the realization of gender equality in all areas covered by the international and regional instruments that they are party to;
- **Dissemination.** Continue to disseminate the contents of the regional and international human rights treaties which they are party to, including translating them into local languages.

ANNEX II COUNTRY SCORES ON COMMITMENTS ON WOMEN'S RIGHTS ON THE AFRICAN WOMEN'S PROGRESS SCOREBOARD

Table AII.1 Scores for the Convention on the Elimination of All Discrimination against Women, 1979 on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	30	30	100
Eswatini	2	2	1	2	2	1	2	1	1	1	2	1	1	1	1	21	30	70
Guinea	2	2	2	2	2	2	2	2	1	0	2	1	1	1	1	23	30	77
Mauritania	1	2	2	2	2	2	2	1	1	1	2	2	2	2	2	26	30	87
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	1	1	2	21	30	70
Niger	1	2	1	1	1	2	1	1	1	1	1	1	1	1	2	18	30	60
Rwanda	2	2	2	2	2	0	2	2	2	2	2	2	2	2	2	28	30	93
Sao Tome and Principe	2	1	2	2	2	2	2	2	1	2	2	2	1	2	2	27	30	90
South Africa	2	1	2	2	1	1	1	1	1	1	2	1	1	1	1	19	30	63

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AII.2 Scores for Article 2 of the Convention on the Elimination of All Discrimination against Women, 1979 on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	1	2	2	2	2	2	2	2	25	26	96
Guinea	2	1	1	1	1	1	1	0	2	1	1	1	1	14	26	54
Mauritania	2	2	2	2	1	1	1	0	1	1	1	2	2	18	26	69
Mauritius	2	2	2	2	2	1	2	2	2	2	1	2	1	23	26	88
Namibia	2	2	1	1	2	1	1	1	2	1	1	1	1	17	26	65
Niger	1	1	0	0	1	0	1	1	1	1	1	1	1	10	26	38
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	2	2	1	2	2	2	2	1	24	26	92
Seychelles	1	2	1	1	1	1	1	1	2	2	1	2	1	19	26	73
South Africa	2	2	2	1	2	1	1	1	2	1	1	1	1	18	26	69

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AII.3 Scores for Article 16 of the Convention on the Elimination of All Discrimination against Women, 1979 on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	1	2	2	2	2	2	2	2	25	26	96
Guinea	2	1	1	1	1	1	1	1	2	1	1	1	1	15	26	58
Mauritius	1	1	2	2	2	1	2	1	1	2	1	1	1	18	26	69
Namibia	2	2	2	1	2	1	1	1	1	1	1	1	1	17	26	65
Niger	1	1	0	0	1	0	1	1	1	1	1	1	1	10	26	38
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	1	2	1	2	2	1	1	1	21	26	81
Seychelles	1	2	1	1	1	1	1	1	2	2	1	2	1	17	26	65
South Africa	2	1	0	0	2	1	1	1	2	1	1	1	1	14	26	54

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AII.4 Scores for Beijing Platform for Action, 1996 on the African Women's Progress Scoreboard

	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	2	28	28	100
Eswatini	2	1	2	2	2	2	1	1	1	2	1	1	1	1	20	28	71
Guinea	2	1	1	2	2	1	1	1	1	1	1	1	1	1	17	28	61
Mauritania	2	2	2	2	2	2	1	1	1	2	2	1	2	2	24	28	86
Mauritius	2	2	2	1	2	2	2	2	2	2	1	2	2	1	25	28	89
Namibia	2	2	2	2	2	2	1	1	1	2	1	1	1	1	21	28	75
Niger	2	2	2	2	2	2	1	1	2	2	2	2	2	2	26	28	93
Rwanda	2	2	2	2	2	2	2	2	2	2	2	2	2	2	28	28	100
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	2	28	28	100
Seychelles	2	1	2	1	2	1	1	1	1	2	2	1	2	1	20	28	71
Sierra Leone	2	2	1	2	1	2	1	1	1	2	1	1	1	2	20	28	74
South Africa	2	1	2	1	1	1	2	1	1	2	0	1	1	1	17	28	61

Sources: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AII.5 Scores for African Charter on the Rights and Welfare of the Child, 1990 on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	1	1	1	2	27	30	90
Eswatini	2	1	2	2	2	2	2	1	1	1	2	1	1	1	1	22	30	73
Guinea	2	0	2	2	2	2	2	1	2	1	2	1	1	1	1	22	30	73
Mauritania	1	2	2	2	2	2	2	1	2	1	2	2	2	2	1	24	30	80
Mauritius	2	2	2	2	1	2	2	2	2	1	2	2	2	2	1	27	30	90
Namibia	2	2	2	2	2	2	2	2	1	1	2	1	1	1	1	24	30	80
Niger	2	2	2	2	2	2	2	2	2	2	2	2	1	1	1	27	30	90
Rwanda	2	2	2	2	2	0	2	2	2	2	2	2	2	2	2	28	30	93
Sao Tome and Principe	0	0	2	2	2	2	2	2	2	2	2	2	2	2	2	26	30	87
Seychelles	2	1	2	2	1	2	2	2	1	1	1	1	0	1	1	20	30	67
South Africa	2	2	2	2	2	1	2	2	1	2	2	1	1	1	1	24	30	80

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Although Sao Tome and Principe has not yet ratified the Protocol and thus has no reporting obligations, it scored itself on the other dimensions.

Table AII.6 Scores for Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, 2003 (Maputo Protocol) on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	0	2	2	2	2	2	2	2	2	2	2	2	2	2	2	28	30	93
Eswatini	2	1	1	2	2	2	2	1	1	1	2	1	1	1	1	21	30	63
Guinea	2	0	2	1	2	2	1	1	1	1	2	1	1	1	1	19	30	63
Mauritania	2	2	2	2	1	2	2	1	1	1	1	1	2	2	2	24	30	80
Mauritius	1	2	2	2	2	2	2	1	2	2	2	1	1	2	1	25	30	83
Namibia	1	2	2	2	2	2	1	1	1	1	1	1	1	1	1	20	30	67
Niger	0	2	1	2	2	1	1	1	1	1	1	1	1	1	1	17	30	57
Rwanda	2	2	2	2	2	0	2	2	2	2	2	2	2	2	2	28	30	93
Sao Tome and Principe	0	0	2	2	2	2	2	2	2	2	2	2	2	2	2	26	30	87
Seychelles	2	0	1	2	0	1	1	1	1	1	2	1	0	1	1	15	30	50
Sierra Leone	2	2	2	2	2	2	2	1	1	1	2	1	1	1	2	24	30	80
South Africa	2	2	2	1	2	1	1	0	0	2	2	1	1	1	1	19	30	63

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Notes: Although they have not yet ratified the Protocol, Chad, the Niger and Sao Tome and Principe scored themselves on the other dimensions. In its national report, South Africa noted that "Reporting" was not applicable as there was no reporting requirements. Article 26 (1) of the Protocol requires States Parties to indicate the legislative and other measures undertaken for the full realization of the rights enshrined in the Protocol in their reports submitted in accordance with article 62 of the African Charter on Human and People's Rights. South Africa submitted its initial report under the Protocol in August 2015.

Table AII.7 Scores for the Solemn Declaration on Gender Equality in Africa, 2004 on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	1	2	2	2	2	1	1	1	2	1	1	1	1	18	26	69
Guinea	2	1	1	1	1	1	1	1	2	1	1	1	1	15	26	58
Mauritania	2	2	1	2	1	1	1	1	1	1	1	2	2	18	26	69
Mauritius	2	2	2	2	2	1	2	2	2	1	2	2	1	23	26	88
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	1	18	26	69
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	1	2	2	1	2	1	2	2	2	2	2	23	26	88
Seychelles	0	2	0	1	0	0	0	0	1	1	1	1	1	10	26	38
South Africa	2	2	1	1	2	1	1	1	2	1	1	1	1	17	26	65

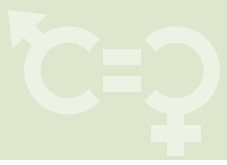
Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AII.8 Scores for the review and modification of customary law on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/transparency	Total	Maximum score	Percentage
Chad	0	0	0	0	0	0	0	0	0	0	0	0	0	0	26	0
Guinea	0	0	0	0	1	0	0	0	1	0	0	1	0	3	26	12
Mauritius	1	x	x	x	x	x	x	x	x	x	x	x	x	1	2	50
Namibia	2	2	2	1	2	1	1	1	2	1	1	1	1	18	26	69
Niger	0	2	1	2	2	1	1	1	2	2	1	1	1	17	26	65
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
South Africa	2	0	2	1	2	1	1	1	2	1	1	1	2	17	26	65

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Although Mauritius does not have customary laws, it has a provision for personal laws (see box 2.3).



3. COMMITMENT TO COMBAT VIOLENCE AGAINST WOMEN

3.1 INTRODUCTION

"Violence against women both violates and impairs or nullifies the enjoyment by women of their human rights and fundamental freedoms. The long-standing failure to protect and promote those rights and freedoms in the case of violence against women is a matter of concern to all States and should be addressed."

Beijing Platform for Action (United Nations, 1995, para. 112).

"[A] high rate of violence [against women] can be likened to a completely preventable and curable disease currently burdening health care systems and preventing women and girls from enjoying full health."

Africa Human Development Report 2016 (UNDP, 2016b, p. 44).

Violence against women and children is a violation of the human rights and fundamental freedoms of women and girls, and is a serious public health issue. Several regional and international reports, declarations, conventions and protocols have recognized the need and urgency to eliminate this scourge in all its forms.

The Declaration on the Elimination of Violence against Women, adopted by the General Assembly in 1993, called for states to condemn and eliminate violence against women in all its forms.²⁹ This was echoed by the Beijing Declaration and Platform for Action in 1995 (see above quote). The Optional Protocol to CEDAW of 1999 empowers the Committee on the Elimination of Discrimination against Women to receive complaints from individuals and groups in its jurisdiction and to investigate gross violations. The Convention on the Rights of the Child of 1989 provides that "States Parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children".³⁰ Sustainable Development Goal 5 is aimed at eliminating all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation (target 5.2), calling for the elimination of all harmful practices, such as child, early and forced marriage and female genital mutilation (target 5.3) by 2030.

Other key international instruments pertaining to violence against women and children include the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (United Nations, 2000a), the Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography (United Nations, 2000c) and the Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict (United Nations,

²⁹ United Nations (1993, article 4)

³⁰ Ibid., (1989a, article 2 (f)).

2000d). Table 3.1 summarizes the status of ratification of four international human rights treaties on violence against women and children.

On the African continent, the 2003 Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa is revolutionary as it was the first international instrument to compel member States to take the measures necessary to eliminate the practice of FGM.³¹ Among the countries covered by the present report, Chad, the Niger and Sao Tome and Principe have not yet ratified the Protocol (see table 2.1). In the 2004 Solemn Declaration on Gender Equality in Africa, Heads of State and Government of the African Union agreed to mount campaigns against the recruitment of child soldiers, abuse of girl children as wives and sex slaves, and gender-based violence.³²

Violence against women encompasses physical, sexual, psychological and economic violence whether occurring in public or in private life (see box 3.1). It includes sexual abuse of female children in the household, rape, marital rape, sexual harassment, female genital mutilation and other traditional practices harmful to women, trafficking in women and forced prostitution.

Table 3.1 Status of ratification of international human rights treaties on violence against women

Country	Convention on the Rights of the Child	Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography	Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict	Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children
Chad	✓(1990)	✓(2002)	✓(2002)	✓(2009)
Eswatini	✓(1995)	✓(2012)	✓(2012)	✓(2012)
Guinea	✓(1990)	✓(2011)	✓(2016)	✓(2004)
Guinea-Bissau	✓(1990)	✓(2010)	✓(2014)	✓(2007)
Liberia	✓(1993)	✗ ^s	✗ ^s	✓(2004)
Mauritania	✓ ^r (1991)	✓(2007)	✗	✓(2005)
Mauritius	✓(1990)	✓(2011)	✓(2009)	✓(2003)
Namibia	✓(1990)	✓(2002)	✓(2002)	✓(2002)
Niger	✓(1990)	✓(2004)	✓(2012)	✓(2004)
Rwanda	✓(1991)	✓(2002)	✓(2002)	✓(2003)
Sao Tome and Principe	✓(1990)	✗	✗	✓(2006)
Seychelles	✓(1990)	✓(2012)	✓(2010)	✓(2004)
Sierra Leone	✓(1990)	✓(2001)	✓(2002)	✓(2014)
South Africa	✓(1995)	✓(2003)	✓(2009)	✓ ^r (2004)
Zimbabwe	✓(1990)	✓(2012)	✓(2013)	✓ ^r (2013)

Source: ECA analysis based on the United Nations Treaty Collection, July 2018b

Notes: (✓) means that a country has ratified the treaty, while (✗) means that the country has not ratify the treaty. Numbers in bracket represent the year of ratification. ^r = the country has expressed reservations. Mauritania has general reservation in respect of articles or provisions of the Convention on the Rights of Children "which may be contrary to the beliefs and values of Islam, the religion of the Mauritania People and State". South Africa and Zimbabwe have reservations with respect to article 15(2) of the Protocol. ^s = these countries have signed but not ratified the instrument.

31 African Union (2003, article 5 (b)).

32 Ibid., (2004, articles 5 and 6).

Box 3.1 Definition and cost of violence against women

Article 1 of the Declaration on the Elimination of Violence against Women defines violence against women as: "Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life."

The Declaration goes on to explain in article 2 that violence against women includes, but is not limited to, the following:

- a. Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation;
- b. Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;
- c. Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

In addition, the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa broadens the definition to include economic violence. The Domestic Violence Act (2007) of Sierra Leone defines economic abuse as "the unreasonable deprivation of any economic or financial resources to which the complainant, or a family member or dependent of the complainant is entitled under any law, requires out of necessity or has a reasonable expectation of use, including household necessities and mortgage bond repayments or rent payments in respect of a shared household."

Violence against women imposes both human and economic costs on societies. The human cost affects victims and their relations directly and includes pain, grief, fear of violence among women and psychological suffering. The economic cost includes increased spending on health care, social services, civil and the criminal justice system, absenteeism from work, and lost productivity and output. In a study undertaken in Chatsworth, a township in KwaZulu Natal, South Africa in 2008, a sample of the female victims of domestic violence who sought the assistance of the Community Care Centre was surveyed. The study estimated that the total cost per incident of domestic violence amounted to \$691 (Dalal and Dawal, 2011).

Source: ECA analysis based on data from the United Nations, 1993; African Union, 2003; and Government of Sierra Leone, 2007a.

This chapter reviews the progress made by the selected countries in fulfilling their obligations set out in the international and regional human rights instruments to tackle violence against women.

3.2 PRACTICES HARMFUL TO WOMEN AND GIRLS

"States Parties shall prohibit and condemn all forms of harmful practices which negatively affect the human rights of women and which are contrary to recognized international standards. States Parties shall take all necessary legislative and other measures to eliminate such practices, including:

- *Creation of public awareness in all sectors of society regarding harmful practices through information, formal and informal education and outreach programmes;*
- *Prohibition, through legislative measures backed by sanctions, of all forms of female genital mutilation, scarification, medicalization and para-medicalization of female genital mutilation and all other practices in order to eradicate them;*
- *Provision of necessary support to victims of harmful practices through basic services such as health services, legal and judicial support, emotional and psychological counselling as well as vocational training to make them self-supporting;*

- *Protection of women who are at risk of being subjected to harmful practices or all other forms of violence, abuse and intolerance."*

Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa

(African Union, 2003, article 5).

The Committee on the Elimination of Discrimination against Women and the Committee on the Rights of the Child have defined a set of criteria to identify harmful practices. The following list defines the characteristics of harmful practices:

- (a). "They constitute a denial of the dignity and/or integrity of the individual and a violation of the human rights and fundamental freedoms enshrined in the two conventions [the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child]."
- (b). "They constitute discrimination against women or children and are harmful insofar as they result in negative consequences for them as individuals or groups, including physical, psychological, economic and social harm and/or violence and limitations on their capacity to participate fully in society or develop and reach their full potential."
- (c). "They are traditional, re-emerging or emerging practices that are prescribed and/or kept in place by social norms that perpetuate male dominance and inequality of women and children, on the basis of sex, gender, age and other intersecting factors."
- (d). "They are imposed on women and children by family members, community members or society at large, regardless of whether the victim provides, or is able to provide, full, free and informed consent."³³

Harmful practices may take the form of female genital mutilation, forced marriages, including child or early marriage, exchange or trade-off marriages, servile marriages, and levirate marriages (coercing a widow to marry a relative of her deceased husband) and polygamy.³⁴ Child marriage and female genital mutilation are discussed in more detail below. Box 3.2 highlights examples of practices harmful to women and girls in the selected countries that have been identified by United Nations Treaty Bodies.

³³ CEDAW – United Nations Committee on the Elimination of Discrimination against Women and the Committee on the Rights of the Child (2014, para. 16).

³⁴ *Ibid.*, (paras. 19 – 25).

Box 3.2 Examples of practices that are harmful to women and children

- Chad: “[The Committee on the Elimination of Discrimination against Women] expressed serious concern about the persistence of entrenched harmful cultural norms and practices, including feminine genital mutilations, early marriages, sororate (a widower marries the sister of his deceased spouse), and levirate (‘wife inheritance’ in which a man takes on in marriage the widow of his deceased brother).”
- Guinea: The Committee on the Rights of the Child] recommended that Guinea “enforce existing legislation prohibiting FGM [female genital mutilation] and promote change with regard to the levirate, sororate, repudiation, polygamy and other practices.”
- Niger: According to the Committee on the Elimination of Discrimination against Women, “wahaya” a form of slavery including sexual slavery, persists in the Niger. “The Special Rapporteur on slavery noted that the practice of wahaya or ‘fifth wife’ entailed the purchase of a woman or a girl as a slave under the guise of ‘marriage’.”
- Sierra Leone: “The Committee against Torture noted the persistence of harmful traditional practices inflicted on elderly women in relation to allegations of witchcraft. It was concerned about reports of the commission of ritual crimes and the lack of effective investigations, the alleged interference of traditional leaders and the reliance on out-of-court settlements in such cases.”
- South Africa: “The Committee on the Elimination of Racial Discrimination was concerned at the persistence of harmful cultural or traditional practices against women and girls, such as ukuthwala, which could be tantamount to forced child marriage. ... The Committee on the Rights of the Child was concerned at the high prevalence of harmful practices, including virginity testing, witchcraft, female genital mutilation, violent or harmful initiation rites and intersex genital mutilation.”
- Zimbabwe: “The Committee [on the Elimination of Discrimination against Women] also expressed concern about customary and religious laws and practices that discriminated against women ... such as polygamy and bride price (lobola). ... The Committee on the Rights of the Child expressed concern about forced and early marriage, polygamy, lobola and, in certain regions, virginity testing and witch hunting.”

Source: ECA analysis based on CEDAW Committee Concluding Observations [the Niger], 2017a; Human Rights Council, Compilation [Chad], 2013, para. 23; Human Rights Council, Compilation [Guinea], 2014a, para. 31; Human Rights Council, Compilation [the Niger], 2015a, para. 22; Human Rights Council, Compilation [Sierra Leone], 2015b, para. 30; Human Rights Council, Compilation [Zimbabwe], 2016, paras. 19–20; and Human Rights Council, Compilation [South Africa], 2017, paras. 57 and 58.

Overall, countries scored themselves high on law, policy commitment and institutional mechanism for harmful practices on the African Women's Progress Scoreboard (see annex III, table AIII.1). The weakest areas were monitoring and evaluation, capacity enhancement and accountability/transparency. Of the countries that scored their performance on harmful practices, Chad and the Niger scored themselves at the least at 85 per cent, while Sao Tome and Principe scored itself lowest at 19 per cent.

3.2.1 CHILD MARRIAGE

“Child marriage and the betrothal of girls and boys shall be prohibited and effective action, including legislation, shall be taken to specify the minimum age of marriage to be 18 years and make registration of all marriages in an official registry compulsory.”

African Charter on the Rights and Welfare of the Child (Organization of African Unity, 1990).

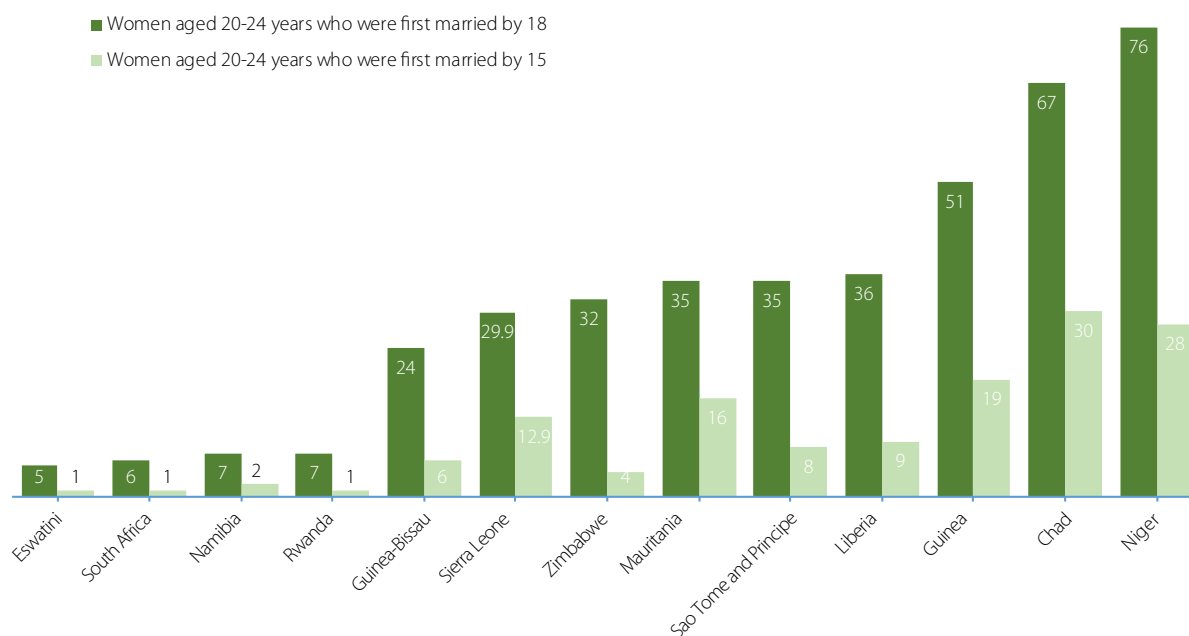
"That a minimum legal age of marriage for girls and boys, with or without parental consent, is established at 18 years. When a marriage at an earlier age is allowed in exceptional circumstances, the absolute minimum age must not be below 16 years, the grounds for obtaining permission must be legitimate and strictly defined by law and the marriage must be permitted only by a court of law upon the full, free and informed consent of the child or both children, who must appear in person before the court."

UNICEF (2014, para. 55(f)).

Child marriage is any marriage in which at least one of the parties is under 18 years of age. Although boys are also affected, the overwhelming majority of child marriages involve girls.³⁵ For example, in the Niger, 5 per cent of men aged between 20 and 49 years were married before the age of 18, compared with 77 per cent of women in the same age group (UNICEF, 2014).

According to data from the Demographic and Health and Multiple Indicators Cluster Surveys, less than 10 per cent of women between 20 and 24 years of age in Eswatini, Namibia, Rwanda and South Africa had been married or had entered into a union before reaching 18 years of age (see figure 3.I). For Liberia, Mauritania, Sao Tome and Principe, Sierra Leone and Zimbabwe the figures were between 30 per cent and 50 per cent, while it was 51 per cent in Guinea, 67 per cent in Chad and 76 per cent in the Niger. The Niger has the highest overall prevalence of child marriage in the world, with Chad and Guinea being among the top 10 countries with the highest rates of child marriage.³⁶ The share of women between 20 and 24 years of age that had been married or had entered into a union before reaching 15 years of age were 28 per cent in the Niger and 30 per cent in Chad.

Figure 3.I Share of women aged between 20 and 24 years who were first married by 15 years of age and 18 years of age, 2012–2017 (percentage)



Source: ECA analysis based on data from Demographic and Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2003; and Zimbabwe, 2015. Data from Multiple Indicators Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2015; Sao Tome and Principe, 2014; and Sierra Leone, 2017.

35 UNICEF (2014, para. 20).

36 Ibid.



Legal reform to introduce a minimum age at marriage is one of the strategies that can be used to reduce and prevent child marriage. The legal age of marriage for all the countries with data is either 18 or 21 years of age, except in Seychelles where article 40 of the Civil Status Act sets the legal age of marriage at 15 years for females and 18 years for males. Its concluding observations on the combined fifth and sixth periodic reports of Seychelles, the Committee on the Rights of the Child strongly urged the country "to take all necessary measures to harmonize the minimum age of marriage for girls with that for boys by raising the minimum age of marriage for girls to 18 years."³⁷

In Rwanda, the Law Governing Persons and Family (Law N° 32/2016) sets the legal age of marriage at 21 years for both men and women, as in Eswatini, Namibia and the Niger. According to the draft national report on AGDI for Rwanda, this age limit is meant to allow informed decision-making and to prohibit any form of coercion and full development of the reproductive capacities of women to avoid complications at child birth.

Box 3.3 Exceptions to the legal age of marriage in selected countries

- In Guinea, the Children's Code 2008 allows the marriage of boys and girls under 18 years of age with the consent of their parents or legal guardians.
- In the Niger, the Committee on the Elimination of Discrimination against Women noted that "most child marriages are conducted under customary law, which does not require the consent of the future spouses for marriage or a minimum age for marriage."
- In Sierra Leone, the Child Rights Act (2007) in section 34 (1) states that the minimum age of marriage is 18 years. Although the Registration of Customary Marriage and Divorce Act (2007) also stipulates a minimum age of marriage of 18, it provides that if a child below the age of 18 has his or her parents' consent to a marriage, a marriage may be lawfully concluded.
- In South Africa, the Children's Act (2005) set the minimum age for marriage at 12 years for girls and 14 years for boys. The Marriage Act (1961) and the Recognition of Customary Marriages Act 120 of 1998 set different conditions for marriages for girls and boys under 18 years of age. Consent from the Minister of Home Affairs is required for boys between 14 and 17 years of age to enter into customary or civil marriages. Girls between 12 and 14 years of age that wish to enter into civil marriages require the consent of the Minister of Home Affairs, while those between 15 and 17 years only require the consent of their parents. Girls between 12 and 17 years of age may enter into customary marriages only with the consent of the Minister of Home Affairs.

Source: ECA analysis based on published and draft national reports on AGDI for Mauritius and Sierra Leone Report; Government of Guinea, 2008; Government of Sierra Leone, 2007; Child Rights South Africa, 2017; CEDAW Committee Concluding Observations [the Niger], 2017, para. 42(a); Committee on the Rights of the Child, Concluding Observations [Sierra Leone], 2016; and Human Rights Council Compilation [South Africa], 2017, para. 59.

Most of the countries permit exceptions to the legal age of marriage usually with parental consent (see box 3.3 for some examples). In Chad, Ordonnance No006/PR/2015 sets the minimum age for marriage at 18 years of age for both males and females. The law prescribes sentences from 5 to 10 years' imprisonment and fines of 500,000 to 5,000,000 CFA francs for persons convicted of perpetrating child marriage, including any civil, religious and traditional authorities that are involved. In 2016, the Constitutional Court of Zimbabwe ruled that no individual under age 18 may enter into marriage, including customary law unions (box 3.4).

37 CEDAW – Committee on the Right of the Child Concluding Observations [Seychelles] (2018, para. 16).

Box 3.4 Constitutional Court bans child marriage in Zimbabwe

In a landmark case, two young women aged 19 and 18 years approached the Constitutional Court of Zimbabwe to complain about the infringement of the fundamental rights of girl children subjected to early marriages. On 20 January 2016, the Constitutional Court of Zimbabwe delivered its verdict and declared that:

- Section 78(1) of the Constitution of the Republic of Zimbabwe Amendment (No. 20) 2013 sets 18 years as the minimum age of marriage in Zimbabwe.
- Section 22(1) of the Marriage Act [chapter 5:11] or any law, practice or custom authorizing a person under 18 years of age to marry or to be married is inconsistent with the provisions of section 78(1) of the Constitution and therefore invalid to the extent of the inconsistency. The law is hereby struck down.
- With effect from 20 January 2016, no person, male or female, may enter into any marriage, including an unregistered customary law union or any other union including one arising out of religion or religious rite, before attaining the age of 18 years.

Source: ECA analysis based on the findings of the Constitutional Court of Zimbabwe, 2016.

The factors that lead to child marriage include poverty, a lack of educational and employment opportunities for girls, and social and cultural norms that assign specific gender roles to men and women (Wodon and others, 2017). The custom of paying bride prices (payments by the groom to the bride's family) practiced in some countries, may also contribute to child marriage especially for girls from poor households. In a joint general recommendation, the Committee on the Elimination of Discrimination against Women and the Committee on the Rights of the Child noted that "bride prices ... could constitute a sale of children"³⁸ under the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography (United Nations, 2000c).

Girls who marry early tend to have earlier and more frequent pregnancy and childbirth, resulting in higher than average child and maternal morbidity and mortality rates (see chapter 5 for further details). Marrying as a child also significantly reduces the likelihood of enrolling and completing secondary school, especially among girls, and contributes to forced exclusion from school and an increased risk of domestic violence³⁹ (see chapter 4 for further details).

3.2.2 FEMALE GENITAL MUTILATION

"Female genital mutilation, female circumcision or female genital cutting is the practice of partially or wholly removing the external female genitalia or otherwise injuring the female genital organs for non-medical or non-health reasons. ... Female genital mutilation ... within some cultures, is a requirement for marriage and believed to be an effective method of controlling the sexuality of women and girls. It may have various immediate and/or long-term health consequences, including severe pain, shock, infections and complications during childbirth (affecting both the mother and the child), long-term gynaecological problems such as fistula, psychological effects and death."

CEDAW – Committee and the Committee on the Rights of the Child (2014, para. 19).

The Committee on the Elimination of Discrimination against Women recommends that State parties to CEDAW take steps to eradicate the practice of FGM.⁴⁰ In response, countries have endeavoured to elimi-

38 CEDAW – Committee and the Committee on the Rights of the Child (2014, para. 24).

39 Ibid., (para. 22); and Wodon, and others, (2017).

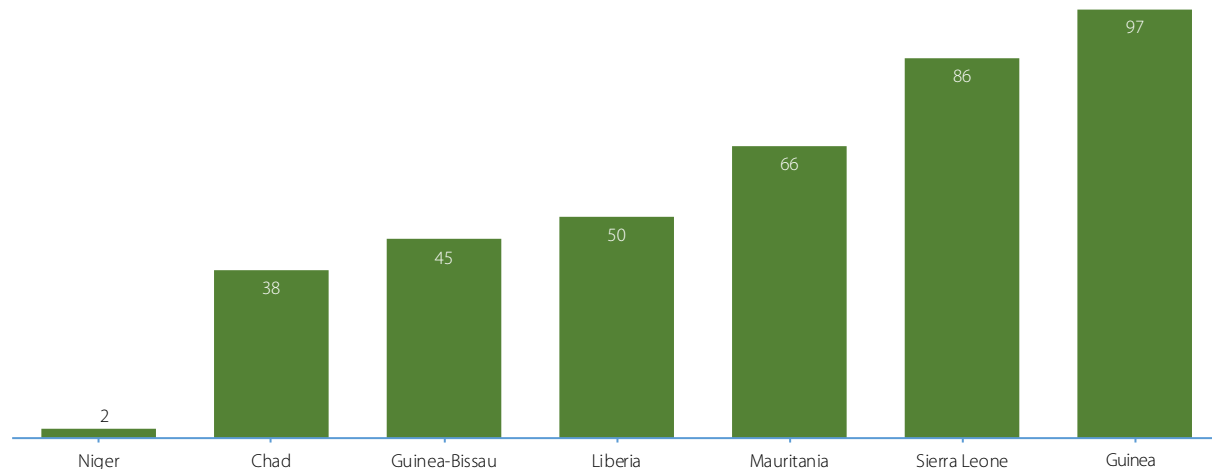
40 CEDAW Committee (1990, no. 14).



nate the practice. Chad has banned the practice.⁴¹ Guinea enacted the Law on Reproductive Health (2000) that prohibits all forms of FGM supported by the Strategic Plan against FGM (2012–2016).⁴² Guinea-Bissau has adopted the Law to Prevent, Fight and Suppress Female Genital Mutilation (2011) and the 2010–2015 National Action Plan to Combat Female Genital Mutilation/Cutting.⁴³ Although there is no explicit law on FGM in Sierra Leone, section 33 (1) of the Child Right Act (2007) states that: “No person shall subject a child to torture or other cruel, inhuman, or degrading treatment or punishment including any cultural practice which dehumanizes or is injurious to the physical and mental welfare of a child”. In Liberia, the Executive Order on Domestic Violence signed by former president Ellen Johnson Sirleaf in January 2018, defines the offense of domestic violence, which includes, “female genital mutilation performed on a person under the age of 18 or a person 18 years old or over without their consent”.⁴⁴ In Mauritania, the Children's Code of 2005 (Ordonnance No. 2005-015 du 5 décembre 2005 portant protection pénale de l'enfant) prohibits and provides punishments for FGM.⁴⁵

Figure 3.II shows that at least half of girls and women from 15 to 49 years of age had undergone FGM in Liberia (50 per cent), Mauritania (69 per cent), Sierra Leone (90 per cent) and Guinea (97 per cent). The figures for Chad and Guinea-Bissau were 44 per cent and 45 per cent respectively. The practice, however, is a deep-rooted social custom and still persists despite efforts to eliminate it (see box 3.5 for the case of Liberia). Furthermore, the laws are seldom enforced effectively.

Figure 3.II Percentage of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, 2012–2017



Source: ECA analysis based on data from *Demographic and Health Surveys for Chad, 2014; Liberia, 2013; the Niger, 2012; and from Multiple Indicators Cluster Surveys for Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2015; and Sierra Leone, 2017.*

Note: For Liberia, the figure is for the share of women who are members of the Sande society.

41 Government of Chad (2013, para. 43).

42 Human Rights Council Compilation [Guinea] (2014a, para. 31).

43 Human Rights Council Compilation [Guinea-Bissau] (2014b, para. 21).

44 Government of Liberia (2018, p. 7).

45 Committee on the Rights of the Child [Mauritania] (2017a, p. 15, para. 72).

Box 3.5 Persistence in using harmful practices in Liberia

Cultural societies, such as the Sande (for women) and Poro (for men), form an important part of Liberian society. They have historically provided training for young adults in the absence of formal educational structures. However, some traditional and cultural practices common to many Liberian ethnic communities have a significant negative impact on the enjoyment of fundamental human rights. These include female genital mutilation, forcible initiation into secret societies, trial by ordeal, accusations of witchcraft and ritualistic killings. These practices have affected specific groups, such as women, children, elderly persons, persons with disabilities and the poorest Liberians.

These harmful practices are sustained by specific legal provisions, including the Hinterland Regulations and article 5(b) of the Constitution promoting "positive culture". Adopted in 1949, the Hinterland Regulations created separate legal and administrative structures for "civilized" and "native" Liberians, placing the latter under customary or tribal law jurisdiction with "native courts". Article 5(b) of the Constitution calls for the preservation, protection and promotion of "positive Liberian culture" with the aim of "ensuring that traditional values which are compatible with public policy and national progress are adopted and developed as an integral part of the growing needs of the Liberian society."

The Government of Liberia has faced significant challenges in fighting these practices as they are deeply rooted in Liberian society. Attempts to curtail them are often strongly resisted by local communities, which perceive Government intervention in this area as an attack on their cultural heritage. In addition, it is often difficult to engage in discussion on these topics, as they are linked to the practices of secret societies and therefore may not be considered suitable for discussion with non-members.

Source: ECA analysis based on the United Nations Mission in Liberia and OHCHR, 2015; and Government of Liberia, 2015, para. 54.

3.3 DOMESTIC VIOLENCE

"Ensure that all forms of gender-based violence against women in all spheres, which amount to a violation of their physical, sexual, or psychological integrity, are criminalized and introduced, without delay, or strengthen legal sanctions commensurate with the gravity of the offence as well as civil remedies."

CEDAW Committee (2017b, para. 29).

Women are more likely than men to be victims of domestic violence. For example, the national report on AGDI for Mauritius notes that, out of 1,680 cases of domestic violence reported at the Ministry of Gender Equality, Child Development and Family Welfare in 2014, nearly 90 per cent were against women.

For countries in which data are available, the proportion of ever-partnered women between 15 and 49 years of age who have experienced physical and/or sexual intimate partner violence over their lifetime ranges from 25 per cent in Namibia to 45 per cent in Sierra Leone (see table 3.2). In Liberia, 35 per cent of ever-partnered women between 15 and 49 years of age have experienced physical and/or sexual intimate partner violence in the past year.

Table 3.2 Proportion of ever-partnered women aged 15-49 years experiencing physical and/or sexual intimate violence in selected countries

Country	Lifetime physical and/or sexual intimate partner violence (percentage)	Physical and/or sexual intimate partner violence in the last 12 months (percentage)
Chad	29	18
Liberia	39	35
Namibia	25	20
Rwanda	34	21
Sao Tome and Principe	28	26
Sierra Leone	45	29
Zimbabwe	35	20

Source: ECA analysis based on data from UN-Women Global Database on Violence against Women (<http://evaw-global-database.unwomen.org/en>).

Table 3.3 Legislation on domestic violence, marital rape and sexual harassment, 2018

	Domestic violence				Marital rape	Sexual harassment
	Separate domestic violence legislation exists	Legislation covers all four types of domestic violence*	Clear criminal penalties exist	Protection orders exist	Legislation explicitly criminalized marital rape	Legislation specifically addresses sexual harassment
Chad	x	-	-	-	x	✓
Eswatini	x	-	-	-	x	x
Guinea	x	-	-	-	x	✓
Guinea-Bissau	✓	✓	✓	✓	✓	✓
Liberia	✓	✓	✓	✓	✓	x
Mauritania	x	-	-	-	x	x
Mauritius	✓	✓	✓	✓	✓	✓
Namibia	✓	✓	✓	✓	✓	✓
Niger	x	-	-	-	x	✓
Rwanda	✓	✓	✓	x	✓	✓
Sao Tome and Principe	✓	✓	✓	✓	✓	✓
Seychelles	✓	x	x	✓	x	✓
Sierra Leone	✓	✓	✓	✓	✓	✓
South Africa	✓	✓	✓	✓	✓	✓
Zimbabwe	✓	✓	✓	✓	✓	✓

Source: ECA analysis based on Government of Liberia, 2018; and World Bank, 2018a.

Notes: * = Physical, sexual, psychological and economic violence (see box 3.1).

(✓) means "Yes", (x) means "No" and (-) means not applicable to the questions asked.

The countries under review have developed pieces of legislation and other measures to tackle domestic violence to meet their obligations as State parties to various international and regional human rights treaties. These measures are discussed sections below and organized around the framework recommended in the United Nations Handbook for Legislation on Violence against Women (Department of Economic and Social Affairs, 2010).

3.3.1 DOES LEGISLATION ON DOMESTIC VIOLENCE EXIST?

According to the Women, Business and the Law (World Bank Group, 2018a), Chad, Eswatini, Guinea, Mauritania and the Niger do not have separate legislation that deals specifically with domestic violence (see table 3.3). The Domestic Violence Act (1998) of South Africa acknowledges that domestic violence is a form of discrimination against women, while the Executive Order on Domestic Violence of Liberia that took effect on 19 January 2018 acknowledges that domestic violence is perpetuated against women, men and children. Both legal instruments specifically refer to the state towards ending violence against women and children, including obligations under CEDAW and the Convention on the Rights of the Child.

3.3.2 DOES THE LEGISLATION INCLUDE A COMPREHENSIVE DEFINITION OF DOMESTIC VIOLENCE?

Of the countries having separate domestic violence laws, those of Guinea-Bissau, Liberia, Namibia, Rwanda, Sao Tome and Principe, Sierra Leone, South Africa and Zimbabwe cover all four types of domestic violence mentioned in box 3.1 (see table 3.3). The Protection from Domestic Violence Act in Mauritius was amended in 2016 to broaden the definition of domestic violence to cover economic violence. Seychelles is developing new domestic violence legislation to replace the Family Violence (Protection of Victims) Act 2000 to broaden the definition of domestic violence. The current act defines "family violence" as "conduct, whether actual or threatened, by a person towards, or towards the property of, a member of

the person's family that causes that or another member of the person's family to fear for or to be apprehensive about, the personal safety or well-being of that or the other member of the person's family."⁴⁶

3.3.3 DOES THE LEGISLATION TAKE A HOLISTIC APPROACH TO DOMESTIC VIOLENCE?

In addition to criminalization of domestic violence, laws in Guinea-Bissau, Liberia, Mauritius, Namibia, Rwanda, Sao Tome and Principe, Sierra Leone, South Africa and Zimbabwe set clear criminal penalties for transgressions (see table 3.3). Complainants/survivors of domestic violence can obtain protection orders in all countries that have domestic violence laws, except in Rwanda. In Namibia, the Combating of Domestic Violence Act 2003 provides for protection orders that may allow for "no-contact" provisions, removal of the perpetrator from the joint residence, directing the perpetrator to pay rent on behalf of the complainant and granting temporary custody of a child, among other provisions.

Countries have set up a number of specialized mechanisms to protect victims and deal with cases of domestic violence and sexual violence (discussed below). Guinea-Bissau, Liberia, Mauritius, Namibia, Rwanda, Sao Tome and Principe, Seychelles, Sierra Leone, South Africa and Zimbabwe have either specialized courts or procedures to deal with domestic and sexual violence (World Bank Group, 2018b). According to the national report on AGDI for Mauritius, the National Coalition Against Domestic Violence Committee was set up in 2015 to reduce and prevent the incidence of domestic violence and provide guidance on cases of domestic violence and ensure that victims receive appropriate treatment and care. In addition, the Family Protection Unit of the National Police interviews victims in privacy and ensure sufficient emotional support. Eswatini has established Domestic Violence and Victim Support Centres in all police stations.⁴⁷ The Niger plans to build 140 "safe centres" for victims of domestic violence.

Overall, countries scored themselves high on involvement of civil society followed by development of a plan and policy commitment on domestic violence on the African Women's Progress Scoreboard, and low on budget, targets, monitoring and evaluation, capacity enhancement and accountability/transparency (see annex III, table AIII.2). Chad, Mauritius, Rwanda and Sao Tome and Principe scored themselves above 90 per cent, while Guinea scored itself lowest at 38 per cent. Although Chad does not have separate legislation to combat domestic violence, it scored itself 2 for "law".

⁴⁶ Government of Seychelles (2000, article 2).

⁴⁷ SADC (2016, p. 60).



3.4 SEXUAL VIOLENCE: RAPE AND STATUTORY RAPE

"Sexual violence means any non-consensual sexual act, a threat or attempt to perform such an act, or compelling someone else to perform such an act on a third person. These acts are considered as non-consensual when they involve violence, the threat of violence, or coercion. Coercion can be the result of psychological pressure, undue influence, detention, abuse of power or someone taking advantage of a coercive environment, or the inability of an individual to freely consent. This definition must be applied irrespective of the sex or gender of the victim and the perpetrator, and of the relationship between the victim and the perpetrator."

African Commission on Human and People's Rights (2017, p. 14).

Overall, countries scored themselves high on law and involvement of civil society, followed by policy commitment and institutional mechanism for actions against rape on the African Women's Progress Scoreboard (see annex III, table AIII.3). The weakest areas were perceived to be budget and capacity enhancement, followed by targets and research. Sao Tome and Principe scored itself 100 per cent, while Chad, Namibia and Rwanda scored themselves 92 per cent and Mauritius scored itself lowest at 27 per cent followed by Guinea with 50 per cent.

Eswatini, South Africa and Zimbabwe have enacted separate acts to address sexual violations and sexual abuse of women and children to enact all matters relating to sexual offences in a single statute.⁴⁸ The Judicial Matters Second Amendment Act 2013 in South Africa allows for the designation of courts as sexual offences courts to hear sexual offences, while Victim Friendly Courts in Zimbabwe deal with sexual abuse cases involving children.⁴⁹ Sao Tome and Principe has set up a Counselling Centre against Domestic Violence to facilitate the implementation of long-term programmes for tackling the root causes of violence and abuse.⁵⁰ Marital rape is explicitly criminalized in Guinea-Bissau, Liberia, Mauritius, Namibia, Rwanda, Sao Tome and Principe, Sierra Leone, South Africa and Zimbabwe (see table 3.3).

Statutory rape refers to sexual activities in which one participant is below the age required to legally consent to the behaviour. Overall, countries scored themselves high on law and policy commitment on the measures undertaken to tackle statutory rape on the African Women's Progress Scoreboard, followed by involvement of civil society (see annex III, table AIII.4). The weakest areas were targets, budget and monitoring and evaluation. Chad, Rwanda, and Sao Tome and Principe scored themselves above 90 per cent, while Eswatini, Guinea, Seychelles and South Africa scored themselves lowest at 62 per cent. Box 3.6 shows the interventions adopted by Liberia to tackle the issue of sexual and gender-based violence.

48 Ibid., p. 58).

49 Ibid.

50 Human Rights Council, Compilation [Sao Tome and Principe] (2015e, para. 10).

Box 3.6 Gender-based violence interventions in Liberia and Namibia

In Liberia, the main issue is that the incidence of sexual and gender-based violence is alarmingly high. Rape remains one of the most frequently reported crimes. Survivors of sexual assault face stigmatization and are often pressured by their family members or communities not to pursue formal charges against the perpetrators (a practice known as “compromising” rape).

Institutional mechanisms. The Gender-Based Violence Inter-Agency Taskforce coordinates the implementation of the Gender-Based Violence Action Plan. The Sexual and Gender-based Violence Crimes Unit of the Ministry of Justice oversees the prosecution of Sexual and Gender-based Violence Crimes at Criminal Court “E” a specialized court for sexual offences. The Unit also provides support to victims of gender-based violence, including them having access to medical treatment, psychosocial services, temporary protective shelter at safe homes, education and empowerment packages, and start-up grants for small businesses and farming activities. The Women and Children Protection Unit, which was established in the police service in 2009, investigates sexual and gender-based violence crimes. There are one-stop centres for victims of sexual and gender-based violence in 7 of the 15 counties.

Awareness-raising/information and dissemination. Former President Sirleaf launched the National Anti-Rape Campaign in 2013, condemning rape and sexual and gender-based violence through radio programmes, community forums, dialogue with traditional leaders and other activities, while educating the public on the rape law. The Law Reform Commission published simplified versions of the rape law.

Involvement of civil society: The Association of Female Lawyers and the National Bar Association established legal clinics in which women and victims of sexual violence can get free legal aid.

The Fifth National Development Plan for Namibia was launched in 2017 and covers the financial years 2017/18 to 2021/22. On the issue of gender-based violence, the following strategic issues were identified.

Desired outcome: By 2022, Namibian women are empowered and free from gender-based-violence.

Desired outcome indicator: Reduce the gender-based-violence prevalence rate from 33 per cent in 2013 to 20 per cent in 2021/22.

Two main challenges were identified:

- A lack of effective coordination and a referral system between service providers for effective gender-based-violence and Trafficking in Persons services (e.g., Memorandum of Understanding and Standards Operating Procedures);
- The absence of a comprehensive legislative framework on children in conflict with the law and Trafficking in Persons law that should be in line with international standards.

The following interventions were proposed:

- Increase the financial and human capacity (police, justice, security and education) of services providers for integrated prevention, protection and response services for victims of gender-based-violence, human trafficking and violence;
- Enact laws protecting the rights of women and children that are in line with international standards.

Source: ECA analysis based on the reports of the Government of Liberia, 2014 and 2015; Government of Namibia, 2017; and CEDAW Committee, Concluding Observations [Liberia], 2015b.

3.5 SEXUAL HARASSMENT

“There is sexual harassment when a person, in circumstances in which a reasonable person would have foreseen that the other person would be humiliated, offended or intimidated, either (i) makes an unwelcome sexual advance, or an unwelcome request for a sexual favour, to another person, or (ii) engages in any other unwelcome conduct of a sexual nature towards another person.”

Equal Opportunity Commission [Mauritius] (2014).



Overall, countries scored themselves high on law, policy commitment and involvement of civil society; and low on accountability/transparency and budget on measures to deal with sexual harassment on the African Women's Progress Scoreboard (see annex III, table AIII.5). Sao Tome and Principe scored itself highest with 100 per cent, followed by Rwanda scoring itself highest at 92 per cent and Guinea scoring itself lowest at 19 per cent.

According to the World Bank's Women, Business and the Law, all countries covered by the present report has legislation that specifically addresses sexual harassment, except Eswatini, Liberia and Mauritania (see table 3.3). The Niger amended their Labour Code in 2012 to prohibit sexual harassment in the workplace; however, the prohibition is limited to individuals exercising authority and does not include co-workers.⁵¹ Mauritius and Namibia have legislation against sexual harassment in schools, while Guinea-Bissau and Seychelles have legislation prohibiting sexual harassment in public spaces. In Guinea⁵² and Chad,⁵³ new Penal Codes enacted in 2016 and 2017, respectively, provides for stiffer penalties for sexual harassment when the victim is under the age of 18.

3.6 PROTOCOL TO PREVENT, SUPPRESS AND PUNISH TRAFFICKING IN PERSONS, ESPECIALLY WOMEN AND CHILDREN

"Trafficking in persons' shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs."

United Nations (2000a, article 3(a)).

The Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children requires Governments to adopt legislative measures, establish criminal offences relating to trafficking and to assist and protect victims of trafficking. All countries covered by the present report have ratified the Protocol, although South Africa and Zimbabwe have reservations with part of the Protocol (see table 3.1). Overall, countries scored themselves high on law, policy commitment and involvement of civil society on measures undertaken to meet their obligations under the Protocol on the African Women's Progress Scoreboard (see annex III, table AIII.6). The weakest areas were accountability/transparency and setting targets. Mauritius, the Niger, Rwanda, Sao Tome and Principe and Seychelles scored themselves 80 per cent and above, while Chad and Sierra Leone scored themselves lowest at 53 per cent.

Eswatini, Guinea-Bissau, Liberia, Mauritania, Mauritius, Namibia, the Niger, Rwanda, Seychelles, Sierra Leone, South Africa and Zimbabwe have specific legislations to combat trafficking in persons (see table 3.4). Namibia and Rwanda enacted their laws in 2018. Liberia has launched the Anti-Human Trafficking Action Plan (2014–19)⁵⁴, while the Niger established the National Coordinating Committee and the National Agency for Combating Trafficking in Persons, with an associated action plan (2014–2018).⁵⁵

51 CEDAW Committee, Concluding Observations [the Niger] (2017, para. 30(b)).

52 Government of Guinea (2016a, article 277).

53 Government of Chad (2017, article 341).

54 Human Rights Council, Compilation [Liberia] (2015d, para. 37).

55 CEDAW Committee, Concluding Observations [the Niger] (2017a, para. 24).

Table 3.4 Legislation addressing trafficking in persons

Country	Legislation specifically addressing trafficking in people
Chad	Code Pénal 2017 Loi n°2017-01 du 8 mai 2017
Eswatini	The People Trafficking and People Smuggling (Prohibition) Act (2009)
Guinea	Loi N°2016/059, portant Code Pénal (2010)
Guinea-Bissau	Law on Prevention and Fight against Trafficking in Persons, Especially Women and Children (2011)
Liberia	Act to Ban Trafficking (2005)
Mauritania	Law on suppression of trafficking in persons (2003)
Mauritius	Combating of Trafficking in Persons Act (2009)
Namibia	Combating of Trafficking in Persons Act (2018)
Niger	Ordonnance No. 2010-86 du 16 décembre 2010 relative à la Lutte contre la Traite des Personnes
Rwanda	Law on trafficking in persons (2018)
Seychelles	Prohibition of Trafficking in Persons Act (2014)
Sierra Leone	Anti-Human Trafficking Act (2005)
South Africa	Prevention and Combating of Trafficking Persons Act (2013)
Zimbabwe	Trafficking in Persons Act (2014)

Source: ECA analysis based on AGDI national reports; SADC, 2016, table 6.4; *The New Times* [Rwanda], 2018; Human Rights Council, Compilation [Guinea-Bissau], 2014b; Human Rights Council, Compilation [Liberia], 2015d; and Human Rights Council, Compilation [Sierra Leone], 2015b.

3.7 OPTIONAL PROTOCOL TO THE CONVENTION ON THE RIGHTS OF THE CHILD ON THE SALE OF CHILDREN, CHILD PROSTITUTION AND CHILD PORNOGRAPHY

"1. Each State Party shall ensure that, as a minimum, the following acts and activities are fully covered under its criminal or penal law (...):

(a). ... (i) Offering, delivering or accepting, by whatever means, a child for the purpose of:

- a. Sexual exploitation of the child;*
- b. Transfer of organs of the child for profit;*
- c. Engagement of the child in forced labour; ...*

(b). Offering, obtaining, procuring or providing a child for child prostitution;

(c). Producing, distributing, disseminating, importing, exporting, offering, selling or possessing for the above purposes child pornography."

United Nations (2000c, annex II, article 3).

This Optional Protocol obliges State Parties to prohibit the sale of children, child prostitution and child pornography. All countries have ratified the Optional Protocol except for Liberia and Sao Tome and Principe (see table 3.1). Overall, countries scored themselves high on law and policy commitment, followed by ratification, institutional mechanism and development of plan on measures undertaken to meet their obligations under the Protocol on the African Women's Progress Scoreboard (see annex III, table All.7). The weakest area was reporting, followed by monitoring and evaluation and accountability/transparency. Mauritius and Rwanda scored themselves 90 per cent and above, while Eswatini scored itself lowest at 63 per cent. Box 3.7 highlights the achievements and challenges that Guinea is encountering in the implementation of the Optional Protocol.

Box 3.7 Progress in implementing the optional protocol in Guinea

Guinea is a country of origin, transit and destination for men, women and children who are the victims of forced labour and trafficking for sexual purposes, with the majority of victims being children. Girls are often subjected to domestic servitude and commercial sexual exploitation, while boys are forced to beg in the streets or to work as street hawkers, shoe shiners or labourers in the gold and diamond mines. Some Guinean men are subjected to forced agricultural labour. Many young girls between 13 and 19 years of age and some women, including married women, engage in prostitution. In most cases, the girls drop out of school and jobs to become sex workers in order to meet the needs of their families. Despite a lack of data, girls are sexually exploited in brothels in the capital and specific mining towns in the interior of the country.

Ratification: Guinea ratified the Optional Protocol without reservations in 2011 (see table 3.1).

Legislation: Although the provisions of the Optional Protocol are incorporated into the Children's Code 2008, it does not define or criminalize all cases of the sale of children, including forced labour, child prostitution and child pornography.

Institutional mechanisms: The following institutional mechanisms have been set up to implement the provisions of the Optional Protocol:

- National Committee to Combat Human Trafficking in 2005;
- Division for the Promotion and Protection of Children's Rights of the National Police in 2008;
- Office for the Protection of Gender, Children and Morals;
- The national policy for the promotion and protection of the rights and welfare of the child in Guinea in 2015, with associated three-year plan for the period 2017–2019.

In 2017, the Committee on the Rights of the Child noted the lack of strategic action for the prevention of the sale of children, child prostitution and child pornography, and so recommended that the fight against the sale of children, child prostitution and child pornography be incorporated into the national policy for the promotion and protection of the rights and welfare of the child.

Coordination: The Committee on the Protection of Children's Rights is responsible for monitoring the implementation of all legal instruments on children's rights to which Guinea is a party. The Committee on the Rights of the Child, however, expressed concern of the number of institutions, divisions and subdivisions involved in the implementation of the Optional Protocol and the how it could influence the effectiveness of coordination, as well as the lack of human, technical and financial resources allocated to the Committee.

Data and research: The Committee on the Rights of the Child highlighted the absence of a comprehensive mechanism for the collection of disaggregated data concerning all offences prohibited under the Optional Protocol. It recommended the development and implementation of a comprehensive, coordinated and effective data collection system on all areas covered by the Optional Protocol, including on the sale of children, child prostitution, child pornography and illegal adoption. In addition, it recommended the conduct of a study on the situation of the sale of children, including its links with child marriage, FGM, child pornography, child prostitution, child trafficking and irregular migration, as well as the collection of data on the number of prosecutions and convictions for offences prohibited under the Optional Protocol.

Source: ECA analysis based on Government of Guinea, 2016b, and CEDAW, Committee on the Rights of the Child, 2017.

3.8 OPTIONAL PROTOCOL TO THE CONVENTION ON THE RIGHTS OF THE CHILD ON THE INVOLVEMENT OF CHILDREN IN ARMED CONFLICTS

"States Parties shall take all feasible measures to ensure that members of their armed forces who have not attained the age of 18 years do not take a direct part in hostilities. States Parties shall ensure that persons who have not attained the age of 18 years are not compulsorily recruited into their armed forces."

United Nations (2000d, annex I, articles 1 and 2).

"All countries have ratified the Optional Protocol except for Liberia, Mauritania and Sao Tome and Principe (see table 3.1). Overall, countries scored themselves high on law, policy commitment and development of plan on the measures they have undertaken to meet their obligations under the Protocol (see annex III, table AIII.8). The weakest area was reporting, followed by budget and capacity enhancement. Chad, Rwanda, Sao Tome and Principe, and Seychelles scored themselves above 80 per cent, while South Africa scored itself lowest at 60 per cent followed by Eswatini with 63 per cent. Box 3.8 highlights the efforts made by Chad in meeting its obligations under the Protocol.

Box 3.8 Chad and the "children, not soldiers" campaign

The campaign "Children, not soldiers" was launched in 2014 by the Special Representative of the Secretary-General for Children and Armed Conflict with UNICEF, formally ended in December 2016. Chad was one of the eight countries involved in the campaign, which involved each country signing action plans with the United Nations. In a report prepared in 2017, the Special Representative reported that Chad, along with the Democratic Republic of the Congo have met the benchmarks set out in their action plans to end and prevent the recruitment of children in their armed forces.

Source: ECA analysis based on data from the United Nations, 2017.

3.9 CONCLUDING REMARKS

This chapter looked at the progress made by the selected countries in meeting their commitments set in global and regional human rights instruments on violence against women. Gender-based violence encompasses physical, sexual, psychological and economic violence whether occurring in public or in private life. It includes sexual abuse of female children in the household, rape, marital rape, sexual harassment, FGM and other traditional practices harmful to women, trafficking in women and forced prostitution. The chapter also discussed the performance of the countries in implementing the provisions of the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography and the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict.

Harmful practices. Countries have undertaken a number of measures to eliminate discriminatory stereotypes and practices that are harmful to and discriminate against women. These practices include FGM, forced marriages, including child marriage, exchange or trade-off marriages, servile marriages, levirate marriages (coercing a widow to marry her dead husband's brother) and polygamy. As such practices are deep-rooted social customs, they still persist even with efforts made to eliminate them. Furthermore, the measures are usually not effectively enforced and implemented.

Child marriage and genital mutilation. Early marriage and FGM are prevalent in some of the countries under review, in particular those from Central and West Africa. In addition to social customs and poor enforcement and implementation of the measures, child marriages are facilitated by laws that permit exemptions to the legal age of marriage and the absence of laws that invalidate child marriages.

Domestic and sexual violence. In general, the prevalence of domestic and sexual violence is high in the countries under review. In response, countries are enacting separate legislation to deal specifically with domestic and sexual violence. Domestic violence laws are increasingly covering all forms of domestic violence. In addition to the criminalization of domestic and sexual violence, some laws impose clear penalties and permit protection orders to protect the complainants and victims. Some countries have set up a number of specialized mechanisms to protect victims and deal with cases of domestic violence



and sexual violence, including specialized courts, committees, special protection units and “safe houses”. Other countries have now made marital rape a criminal offence.

Sexual harassment. The majority of countries have legislation prohibiting sexual harassment in the workplace; however, few countries have legislation banning sexual harassment in schools and in public places.

Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children. All countries covered by the present report have ratified the Protocol.

Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography. Liberia and Sao Tome and Principe have not ratified the Optional Protocol.

Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict. Liberia, Mauritania and Sao Tome and Principe have not ratified the Optional Protocol.

Scoring on the African Women's Progress Scoreboard. Overall, countries scored themselves well on enacting legislation and policy commitment, followed by involvement of civil society organizations in terms of meeting their international and regional commitments on violence against women. Weak areas were accountability and transparency, followed by capacity enhancement, monitoring and evaluation and setting targets.

3.10 RECOMMENDATIONS

Governments should undertake the following interventions to combat and eliminate violence against women:

- **Ratification of human rights instruments.** For countries that have not yet done so, expedite the ratification of the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography and the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict;
- **Harmonize the age of marriage.** Harmonize current legislation to remove any discrimination between boys and girls by setting a uniform age of marriage;
- **Legislation.** Expedite the enactment of laws that comprehensively covers all forms of violence against women where they do not exist, and strengthen the enforcement of current laws, in line with the provisions of international and regional human instruments, and the constitution. In particular, ensure that there are separate legislations dealing with domestic violence, sexual violence and trafficking in persons;
- **Operationalizing legislation.** Put in place mechanisms, including the development of action plans, the creation of specialized institutions and the provision of support services to victims, in order to implement the current legislation;
- **Capacity enhancement.** Provide training for judges, prosecutors, the police and law enforcement officers on the application of the punitive and enforcement measures in the laws prohibiting violence against women to ensure that perpetrators are effectively investigated, prosecuted and punished and that victims are provided with assistance and rehabilitation;

- **Awareness-raising.** In collaboration with civil society organizations, undertake education-awareness programmes targeted at both men and women about the need to eliminate harmful practices, including FGM, with special emphasis on the health risks of the practice;
- **Dissemination.** Continue to disseminate the contents of the laws that deal with violence against women, including translating them into local languages;
- **Resources.** Allocate adequate organizational, human, technical and financial resources for the effective enforcement of laws, implementation of policies and the operation of institutions involved in combating violence against women;
- **Data.** Enhance the collection, analysis and dissemination of comprehensive data, disaggregated by sex, age, disability, location and type of offence and relationship between the victim and the perpetrator, which should be used to monitor the progress made towards eliminating of all forms of violence against women.

ANNEX III COUNTRY SCORES ON COMMITMENT TO COMBAT VIOLENCE AGAINST WOMEN ON THE AFRICAN WOMEN'S PROGRESS SCOREBOARD

Table AIII.1 Scores for harmful practices on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	1	2	2	2	2	1	2	24	26	92	
Guinea	2	1	1	1	1	1	1	2	2	1	1	1	16	26	62	
Namibia	2	2	2	2	1	2	1	1	1	2	1	1	19	26	73	
Niger	2	2	2	2	2	2	2	2	2	1	1	1	22	26	85	
Sao Tome and Principe	0	2	0	0	2	0	0	0	0	0	0	1	0	5	26	19
South Africa	2	2	1	1	2	1	1	1	2	1	1	1	17	26	65	

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AIII.2 Scores for domestic violence on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	0	2	2	2	2	2	2	2	24	26	92
Eswatini	1	2	2	2	1	1	1	1	2	1	1	1	1	17	26	65
Guinea	0	0	0	0	1	1	1	1	2	1	1	1	1	10	26	38
Mauritius	2	2	2	2	2	2	2	2	2	2	2	2	1	25	26	96
Namibia	2	2	2	2	2	2	1	1	2	1	1	1	1	20	26	77
Niger	1	1	2	1	1	0	1	2	2	2	1	1	1	16	26	62
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	1	2	2	2	1	2	2	2	2	2	1	2	2	23	26	80
Sierra Leone	2	2	2	2	2	1	2	1	2	1	2	1	2	22	26	85
South Africa	2	2	2	1	2	1	1	1	2	2	1	1	1	19	26	73

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AIII.3 Scores for rape on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	0	2	2	2	2	2	2	2	24	26	92
Eswatini	1	2	2	1	1	1	1	1	2	1	1	1	1	16	26	62
Guinea	2	1	1	1	1	1	1	0	2	1	1	1	0	13	26	50
Mauritius	1	0	0	0	2	1	1	0	0	1	0	0	1	7	26	27
Namibia	2	2	2	2	2	2	1	2	2	2	2	1	2	24	26	92
Niger	2	2	1	2	1	1	1	2	2	2	1	1	1	19	26	73
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Sierra Leone	2	2	2	2	2	1	2	1	2	1	2	1	2	22	26	85
South Africa	2	2	1	1	2	1	1	1	2	1	1	1	1	17	26	65

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AIII.4 Scores for statutory rape/defilement on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	0	2	2	2	2	2	2	2	24	26	92
Eswatini	1	2	2	1	1	1	1	1	2	1	1	1	1	16	26	62
Guinea	2	2	1	2	1	1	1	0	2	1	1	1	1	16	26	62
Mauritius	2	1	2	0	1	1	2	2	2	1	0	1	1	20	26	77
Namibia	2	2	2	2	2	2	1	2	1	1	1	1	1	20	26	77
Niger	2	2	1	2	1	1	2	2	2	2	2	2	2	23	26	88
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	2	2	0	0	2	1	1	0	1	2	1	2	2	16	26	62
South Africa	2	2	1	1	1	1	1	1	2	1	1	1	1	16	26	62

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AIII.5 Scores for sexual harassment on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	0	2	2	2	1	1	1	1	20	26	77
Eswatini	1	2	2	1	1	1	1	1	2	1	1	1	1	16	26	62
Guinea	0	0	0	1	1	1	1	0	1	0	0	0	0	5	26	19
Mauritius	2	1	0	1	2	1	2	1	1	2	1	2	0	16	26	62
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	1	18	26	69
Niger	1	1	1	2	1	1	1	2	2	1	1	1	1	16	26	62
Rwanda	2	2	2	0	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	1	2	1	1	1	1	1	1	1	1	1	1	1	14	26	54
Sierra Leone	2	2	2	2	0	1	2	1	2	1	2	1	2	20	26	77
South Africa	2	1	1	1	2	1	1	1	2	1	1	1	1	16	26	62

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AIII.6 Scores for Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially in Women and Children (2000) on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/transparency	Total	Maximum score	Percentage
Chad	0	0	1	2	1	1	2	0	2	1	2	1	1	2	0	16	30	53
Eswatini	2	2	1	2	2	1	2	1	1	1	1	1	1	1	1	20	30	67
Guinea	2	2	2	1	1	1	2	1	2	1	2	1	1	2	1	22	30	73
Mauritius	2	2	2	2	2	2	2	1	1	1	2	2	2	2	2	27	30	90
Namibia	2	2	2	2	2	1	2	2	1	1	1	1	1	1	1	22	30	73
Niger	2	2	2	2	2	2	2	1	2	2	2	2	2	2	1	28	30	93
Rwanda	2	2	2	2	2	0	2	2	2	2	2	2	2	2	2	28	30	93
Sao Tome and Principe	0	0	2	2	2	2	2	2	1	2	2	2	2	2	2	25	30	83
Seychelles	2	0	2	2	2	2	2	2	2	1	2	2	1	2	1	25	30	83
Sierra Leone	2	0	1	1	1	1	1	1	1	1	2	1	1	1	1	16	30	53
South Africa	2	2	2	2	1	0	2	1	2	1	2	1	2	1	1	22	30	73

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Although they have not yet ratified the Protocol, Chad and Sao Tome and Principe scored themselves on the other dimensions.

Table AIII.7 Scores for Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography (2000) on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/transparency	Total	Maximum score	Percentage
Chad	2	0	2	2	1	1	1	0	2	2	2	1	1	2	2	21	30	70
Eswatini	2	0	2	2	2	2	1	1	1	1	1	1	1	1	1	19	30	63
Guinea	2	2	2	2	2	2	2	1	1	2	0	1	1	1	1	22	30	73
Mauritius	2	2	2	2	2	2	2	2	2	2	2	2	2	2	1	29	30	97
Namibia	2	2	2	2	2	2	2	1	1	1	1	1	1	1	1	22	30	73
Niger	2	2	2	2	2	2	2	1	1	1	2	2	1	1	1	24	30	80
Rwanda	2	2	2	2	2	0	2	2	2	2	2	2	2	2	2	28	30	93
Sao Tome and Principe	0	0	2	2	2	2	2	2	2	2	2	2	2	2	2	26	30	87
Seychelles	2	0	2	2	2	2	2	2	2	1	2	2	1	2	1	25	30	83
South Africa	2	2	2	2	1	1	2	2	2	1	2	1	1	1	1	23	30	77

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

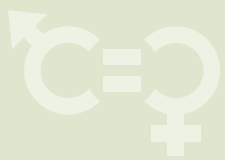
Note: Although it has not yet ratified the Protocol, Sao Tome and Principe scored themselves on the other dimensions.

Table AIII.8 Scores for Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflicts 2000, on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	0	2	2	2	2	2	1	2	2	2	2	2	2	2	27	30	90
Eswatini	2	0	2	2	2	2	1	1	1	1	1	1	1	1	1	19	30	63
Guinea	2	2	2	2	2	2	2	1	1	2	0	1	1	1	1	22	30	73
Namibia	2	2	2	2	2	2	2	1	1	1	1	1	1	1	1	22	30	73
Niger	2	2	2	2	2	2	2	1	1	1	2	1	1	1	1	23	30	77
Rwanda	2	2	2	2	2	0	2	2	2	2	2	2	2	0	2	26	30	87
Sao Tome and Principe	0	0	2	2	2	2	2	2	2	2	2	2	2	2	2	26	30	87
Seychelles	2	0	2	2	2	2	2	2	2	1	2	2	1	2	1	25	30	83
South Africa	2	2	2	2	2	0	1	0	1	0	2	1	1	1	1	18	30	60

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Although the Protocol is not yet ratified, Sao Tome and Principe scored themselves on the other dimensions.



4. COMMITMENT TO EDUCATION FOR ALL

4.1 INTRODUCTION

"Advance the goal of equal access to education by taking measures to eliminate discrimination in education at all levels on the basis of gender ...; ... provide universal access to basic education and ensure completion of primary education by at least 80 per cent of primary school-age children; close the gender gap in primary and secondary school education ...; provide universal primary education in all countries ...; Eliminate gender disparities in access to all areas of tertiary education ...; Increase enrolment and retention rates of girls by ... means to minimize the costs of girls' education to their families and to facilitate parents' ability to choose education for the girl child; Promote an educational setting that eliminates all barriers that impeded the schooling of pregnant adolescents and young mothers. ... Eliminate the gender gap in basic and functional literacy; ... Diversify vocational and technical training and improve access for and retention of girls and women in education and vocational training in such fields as science, mathematics, engineering, environmental sciences and technology, information technology and high technology, as well as management training."

Beijing Platform for Action, (United Nations, 1995, paras. 80 (a) – (c), (f) and (g); 81(c) and (e)).

The right to education is enshrined in the Universal Declaration on Human Rights⁵⁶ and the United Nations Convention on the Rights of the Child.⁵⁷ In recognizing this right, the Convention recommends that Governments make primary education compulsory and available free to all, make secondary and higher education accessible to all on the basis of capacity, and take measures to encourage regular attendance at schools and the reduction of drop-out rates.⁵⁸ The African Charter on the Rights and Welfare of the Child calls upon Governments to take "special measures in respect of female, gifted and disadvantaged children."⁵⁹

In addition to the human rights issue, since (at least) the adoption of the Beijing Platform for Action in 1995,⁶⁰ it is now widely recognized that the promotion of gender equality and the empowerment of women are also important for the achievement of sustainable economic development. Closing gender gaps in educational attainment can have a positive impact on the productivity of current and future labour forces and the economic performance of a nation and its social and political well-being.

One comprehensive review of studies on the private returns to investment in education concluded that, overall, females have a higher return to education than males – a return of 11.7 per cent, compared with 9.6 per cent to another year of schooling (Montenegro and Patrinos, 2014). The return to education is higher for females at primary, secondary and at tertiary education. The review noted that returns to

⁵⁶ United Nations (1948, article 26).

⁵⁷ Ibid (1989, article 28(1)).

⁵⁸ Ibid.

⁵⁹ Organization of African Unity (1990, article 11(3)(e)).

⁶⁰ United Nations (1995, para. 69).

another year of schooling for females in Rwanda (24.4 per cent) and South Africa (23.3 per cent) were the highest out of the 139 countries for which data were available.

The above economic effects of girls' education may be supplemented by the potential effects of demographic changes. There is evidence that fertility is inversely related to female education in virtually all populations (Schultz, 2002). A decline in fertility reduces the youth-dependency ratio,⁶¹ increasing the share of the population of working age and raising national income per capita. Reduced fertility might also increase the amount of resources available to each child that will have long-term beneficial effects on economic growth when healthier and more educated children enter the labour force (Canning and Schultz, 2010).

In addition to higher economic returns, female schooling bestows social and political benefits to society. Female education is associated with reduced child and maternal mortality, reduced incidence of HIV infection, reduced rates of child marriage, increased children's schooling and increased female political participation (Sperling and Winthrop, 2016). A review of recent microlevel evidence concluded that: first, mothers' and fathers' education are important for child mortality and other children outcomes; second, income or assets in the hands of women is associated with larger improvements in children's health and larger relative expenditure on household nutrients, health and housing, compared with income or assets in the hands of men; and third, women leaders do a better job in meeting the needs of women than men (Duflo, 2012). Furthermore, Barro (1999) found that democracy is negatively and significantly related to the gap between male and female primary attainment, and concluded that "expanded educational opportunity for females goes along with a social structure that is generally more participatory and, hence, more receptive to democracy."⁶²

The Beijing Platform for Action not only calls for all having access to basic education and closing the gender gap in primary and secondary education, but also for eliminating those gender disparities in gaining access to all areas of tertiary education and improving women's access to vocational training, science and technology, together with continuing education, developing non-discriminatory education and training, and allocating appropriate budgetary resources that can eliminate barriers to education (see above quote). The 2030 Agenda on Sustainable Development adopted in 2015, includes Sustainable Development Goal 4, "Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all", which reinforces the commitments in the Beijing Platform for Action. Table 4.1 summarizes the gender-related targets in Goal 4.

Table 4.1 Gender-related education targets in Sustainable Development Goal 4

Priority area	Sustainable Development Goal 4 target for 2030
All levels of education and vocational training	Eliminate gender disparities in education and ensure equal access to all levels of education and vocational training; Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all.
Pre-primary education	Ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education.
Primary and secondary education	Ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.
Technical and vocational education	Ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university.
Literacy	Ensure that all young people and a substantial proportion of adults, both men and women, achieve literacy and numeracy.

61 The ratio of people younger than 16 years of age to those between 16 and 64 years of age.

62 Robert Barro (1999, p.167).



This chapter looks at the education component of AGDI. The education component of the index is part of the Social Power Block of GSI and the African Women's Progress Scoreboard. It consists of six indicators in GSI – pre-primary, primary, secondary and tertiary enrolment rates, primary completion rate and literacy rate for young people between 15 and 24 years of age. Policies to prevent female dropouts and human rights education are evaluated in the Progress Scoreboard.

Box 4.1 Gross and net enrolment ratios

Enrolment in education can be measured either on a gross basis or a net basis.

Gross enrolment ratio (GER)

Definition: The number of students enrolled in a given level of education, regardless of age, expressed as a percentage of the official school-age population corresponding to the same level of education.

Calculation: $GER = (\text{number of students enrolled in a given level of education regardless of age} / \text{population of the age group, which officially corresponds to the given level of education}) \times 100$.

Note: GER can exceed 100 per cent due to late entry and/or grade repetition.

Net enrolment ratio (NER)

Definition: The total number of students in the theoretical age group for a given level of education enrolled at that level, expressed as a percentage of the total population in that age group.

Calculation: $NER = (\text{number of students enrolled who are of the official age group for a given level of education} / \text{population for the same age group}) \times 100$.

Notes: (a) Cannot in theory exceed 100 per cent; (b) Not pertinent for tertiary education because of the difficulties in determining an appropriate age group due to the wide variations in the duration of programmes at this level of education.

Source: UNESCO Institute for Statistics Glossary. Available at <http://uis.unesco.org/en/glossary>.

4.2 PRE-PRIMARY EDUCATION

Having access to quality early childhood education has a positive effect on children's primary education outcomes, including increasing the likelihood of enrolment, avoiding repetition and dropout and improving academic performance (UNESCO, 2015a). These effects are especially salient for disadvantaged children, including those from low-income families. In addition to benefitting children directly, publicly financed quality early childhood education and care is an important way to redistribute unpaid work away from households to the public sphere. Given that women and older siblings, especially girls, are the main providers of unpaid care for young children, having access to quality early childhood education and care could leave women and girls with more time that can be used to participate more effectively in education, the labour force and political and public life (Fontana and Elson, 2014).

Calculating pre-primary education participation rates and comparing them throughout countries is very difficult. This is because the age groups and starting ages are not standardized and pre-primary education takes diverse forms in various (UNESCO, 2016). Data collected and compiled as part of the Demographic and Health and Multiple Indicator Cluster Surveys, show that the proportion of 3 to 6 year olds who are attending early childhood education ranged from below 3 per cent in Chad to more than 30 per cent in Sao Tome and Principe for both sexes (see figure 4.I (a)). Girls are at a significant disadvantage relative to boys in Chad with a GSI score of 0.84, while there is a slight gender disparity at the expense of girls in Guinea-Bissau (see figure 4.I (b)). There is gender parity for Mauritania with GSI of 1. Boys are at a significant disadvantage relative to girls in Eswatini with a GSI score of 1.27. In South Africa, 45.3 per cent of males and 46.1 per cent of females under 4 years of age were attending early childhood development facilities in 2015,⁶³ which translates into a GSI of 1.02. In the same year, 93.3 per cent of girls attending

63 South Africa, Department of Basic Education (2016, table 1, p. 8).

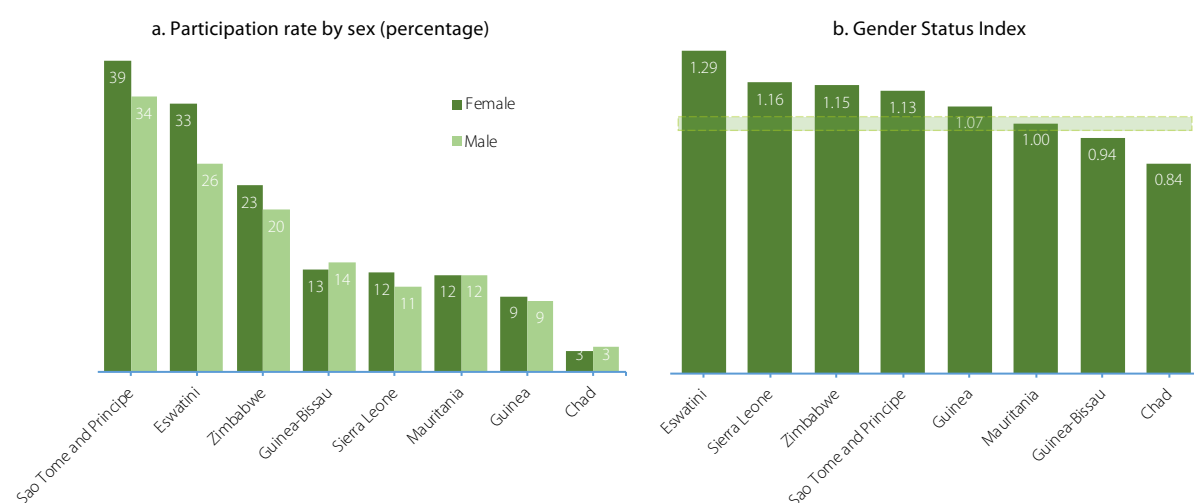
grade 1 had attended grade R (a pre-school year at primary school), compared with 96.1 per cent of boys⁶⁴ giving a GSI of 0.97.

Furthermore, although 65 per cent of children who entered grade 1 had gone through pre-primary education in 2014 in Eswatini, approximately 40 per cent and 35 per cent of children from the predominantly rural Lubombo and Shiselweni regions, respectively, had done so.⁶⁵ In Sao Tome and Principe, 52 per cent of children aged 36 – 59 months and whose mothers attained secondary education or higher were attending an organized early childhood education programme, compared with 29 per cent of children whose mothers attained only primary education or lower.⁶⁶

The quality of services also varies in countries. In Seychelles, a study carried out by the Institute for Early Childhood Development in 2013 revealed that informal, home-based child-minding facilities varied widely in levels of quality.⁶⁷ Even when services are provided for free by the State, having access to and quality of services may be insufficient as a result of the limited awareness among parents, inadequate facilities and trained personnel, lack of standards and weak enforcement of the current standards. Box 4.2 highlights the policies on Early Childhood Care and Education in Eswatini, Namibia, Rwanda and Seychelles, which are aimed at the promotion of, and having access to equitable and quality services.

Figure 4.1 Share of children aged 36–59 months attending early childhood education by sex(percentage) and Gender Status

Index, 2014–2017



Source: ECA analysis based on data from Demographic and Health Surveys for Chad, 2014; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2015; Sao Tome and Principe, 2014; Sierra Leone, 2017; and Zimbabwe, 2014. Source: ECA analysis based on data from Demographic and Health Surveys for Chad, 2014; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2015; Sao Tome and Principe, 2014; Sierra Leone, 2017; and Zimbabwe 2014.

Source: ECA analysis based on data from Demographic and Health Surveys for Chad, 2014; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2015; Sao Tome and Principe, 2014; Sierra Leone, 2017; and Zimbabwe 2014.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

64 Ibid. (figure 6, p. 10).

65 The data are incomplete given that pre-primary education institutions are not yet compelled to provide data to the Ministry as part of the annual census (Eswatini, Ministry of Education and Training, 2014).

66 National Institute of Statistics [Sao Tome and Principe] (2016, table CD.1, p. 138).

67 Seychelles, Ministry of Education (2015, p. 16).

Box 4.2 Policies on early childhood care and education in Eswatini, Namibia, Rwanda and Seychelles

According to UNESCO, early childhood education “provides learning and educational activities with a holistic approach to support children’s early cognitive, physical, social and emotional development and ... to prepare them for entry into primary education”. *Early childhood education is only one component of early childhood care and education (ECCE).

Eswatini. The Government has taken the following actions in order to tackle low enrolment rates and improve the quality of ECCE: registration of ECCE centres starting in 2008 with a view to institute their regulation; launch of the Early Learning and Development Standards in 2014; strengthening of supervision and monitoring of ECCE centres at both the national and regional levels; introduction of a three-year part-time diploma programme for ECCE teachers at the Ngwane Teacher Training centre in 2013/2014; regional awareness-raising campaigns to create demand for the ECCE programme; and establishment of an ECCE panel to plan, coordinate, monitor and evaluate the provision and quality of ECCE services, standards and activities. The Government is planning to introduce grade 0 in every public primary schools throughout the country.

Namibia. A survey undertaken by the Ministry of Education, Arts and Culture in 2015 recommended that the early childhood development (ECD) programme for children aged 0–4 years should be integrated into the formal education sector by linking an ECD centre to every primary school. Also a pre-primary class should be established in every primary school for children aged 5–6 years. All ECD centres and pre-primary schools should follow a formal curriculum and all teachers should be properly trained and provided with the teaching aids necessary to teach at these level.

Rwanda. The Early Childhood Policy, 2011 defines ECD as a range of processes and mechanisms by which children from pre-conception to 6 years old grow and thrive physically, mentally, emotionally, morally and socially. Pre-primary education is aimed at enhancing the school readiness of children aged 3–6 years. Most of pre-primary schools are community-based and located in public schools and, starting in the 2014 school year onwards, those schools have been classified as public. The school readiness programme avails a pre-primary classroom at every public and Government aided primary school for one year before the child’s entry into primary education. The community provides salaries for teachers and the Government offers teaching learning and play materials such as ECD kits, books and chalk. The number of public pre-primary schools increased from 2 in 2013 to 1,420 in 2014, while the number of private pre-primary schools fell from 2,074 in 2013 to 1,011 in 2014. Net enrolment rate in pre-primary education increased from 6.1 per cent in 2010 to 13.3 per cent in 2014.

Seychelles. Children from the ages of 3 years and 3 months up to 5 years and 3 months are catered for in crèches, which correspond to the two years immediately prior to entry into primary schools. Crèche education is free in State run institutions and available in all districts. For children below the age of three, there are two main forms of structured education and care provision which are privately owned: Day Care Centres that are monitored by the Ministry of Education; and Child Minding services. In addition, many families leave their children with family members, especially grandmothers, or employ a person to look after the child in their own homes. Since 2015, all childminding establishments have been regulated by the Institute for Early Childhood Development, established by the Institute for Early Childhood Development Act, 2014. The main functions of the Institute are to: advise the Government on the development of policies, guidelines and standards to regulate the childminding service; grant registration; ensure that childminders comply with the guidelines and standards of childminding service and establishment prescribed by regulations; and monitor and evaluate the childminding establishment and service provided by a childminder.

Source: ECA analysis based on Seychelles, Ministry of Education, 2015; Namibia, Ministry of Education, Arts and Culture, 2016; Eswatini, Ministry of Education and Training, 2015; and Rwanda, Ministry of Education, 2011.

Note: * UNESCO, Institute of Statistics, Glossary (source definition ISCED, 2011).

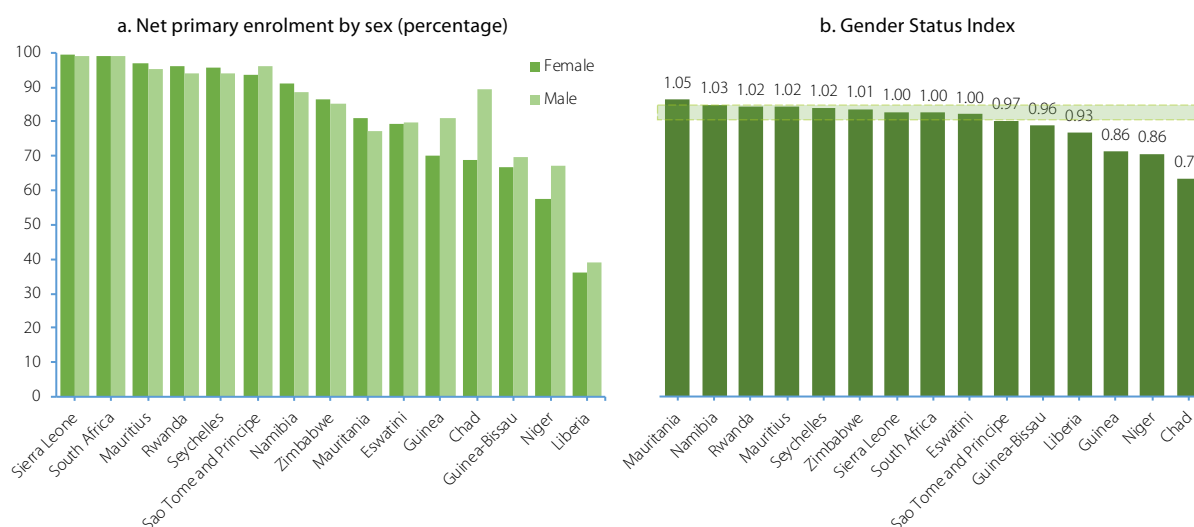
4.3 PRIMARY EDUCATION

4.3.1 ENROLMENT

Net primary enrolment rates were above 90 per cent for both sexes in Mauritius, Rwanda, Sao Tome and Principe, Seychelles, Sierra Leone and South Africa, and for females in Namibia (see figure 4.II [a]). In Liberia, the net enrolment rates in 2015 were below 40 per cent for both females and males, while the rate for females in the Niger was below 60 per cent. Eswatini, Mauritius, Namibia, Rwanda, Sao Tome and Principe, Seychelles, Sierra Leone, South Africa, and Zimbabwe had achieved gender parity in net primary

enrolment with GSI scores between 0.97 and 1.03 (see figure 4.II [b]). Guinea (20 per cent), Liberia (20 per cent) and the Niger (25 per cent) improved their GSI scores by at least 20 per cent between 1999 and 2000 and 2014 and 2015.⁶⁸ Mauritania had a slight gender disparity at the expense of boys in 2015 with 105 girls for every 100 boys enrolled in primary education. Chad had a GSI of 0.77, while both Guinea and the Niger had GSI scores of 0.86. Between 2000 and 2015, Chad, Guinea and the Niger had increased net enrolment by more than 30 percentage points (ECA and others, 2016).

Figure 4.II (a) Net primary enrolment by sex and (b) Gender Status Index, 2010–2015



Source: ECA analysis based on data from published and draft national reports on AGDI and Department of Basic Education [South Africa], 2016.

Source: ECA analysis based on data from published and draft national reports on AGDI and Department of Basic Education [South Africa], 2016.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

4.3.2 COMPLETION

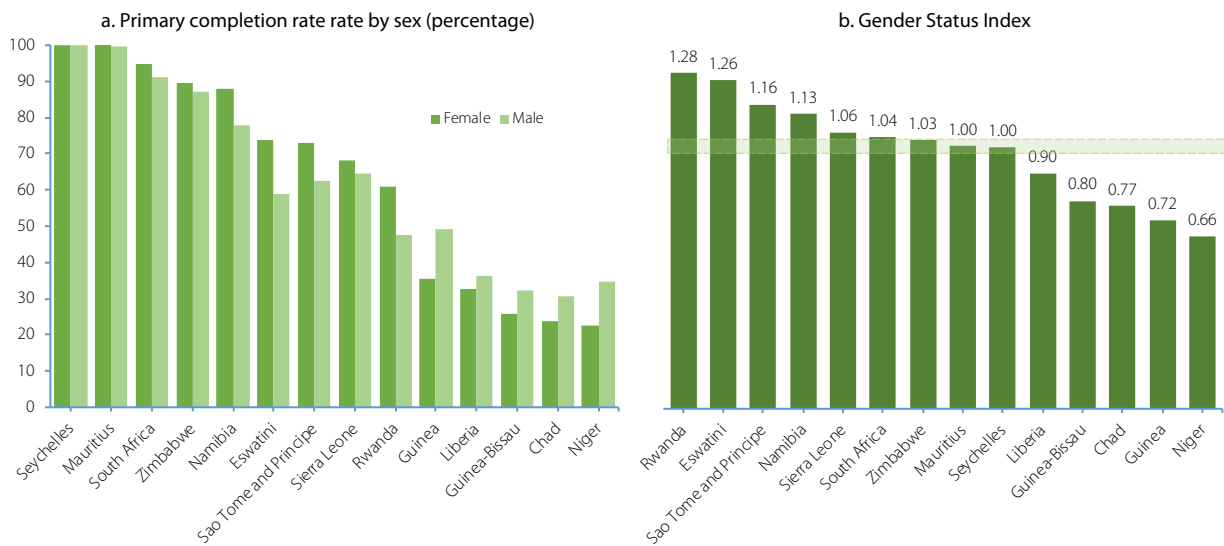
In addition to enrolment, having access to primary education should include progression and retention through primary school. In order to ensure that the measure of completion is comparable in the countries under review, both graphs (a) and (b) in figure 4.III use available data from the UNESCO Institute of Statistics database.⁶⁹ Completion rates at the primary level were above 80 per cent for both sexes in Mauritius, Seychelles, South Africa and Zimbabwe, and for females in Namibia (see figure 4.III (a)). Completion rates were below 40 per cent in Chad, Guinea-Bissau, Liberia and the Niger for both sexes, and for females in Guinea and Mauritania.

There is gender parity in completion rates in primary education in Mauritius, Seychelles and Zimbabwe with GSI scores of between 0.97 and 1.03 (see figure 4.III (b)). There is a significant gender disparity in favour of males in Chad, Guinea, Guinea-Bissau and the Niger, with GSI of the latter being 0.66. In Eswatini, Namibia, Rwanda and Sao Tome and Principe there is significant gender disparity favouring females. In Guinea, with an overall GSI of 0.72, the GSI for completion rate for the poorest quintile was 0.42, compared with 0.84 for the richest quintile.

⁶⁸ UNESCO Institute of Statistics Glossary [Homepage]database. Available at <http://uis.unesco.org/en/glossary>.

⁶⁹ The UNESCO Institute of Statistics defines the completion rate for primary education as the percentage of a cohort of children or young people three to five years above the intended age for the last grade of each level of education who have completed that grade.

Figure 4.III Completion rate for (a) primary education by sex and (b) Gender Status Index, 2009-2015



Source: ECA analysis based on data from UNESCO Institute of Statistics database published and draft national reports on AGDI for Mauritius and Seychelles.

Source: ECA analysis based on data from UNESCO Institute of Statistics database published and draft national reports on AGDI for Mauritius and Seychelles.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Both completion rates and GSI scores are relatively low for Chad, Guinea, Guinea-Bissau, Liberia and the Niger (see figure 4.III). Figure 4.II highlights that this relationship is also the case for net enrolment rates. This means that in countries with low overall enrolment, girls are less likely to be enrolled and complete primary education than boys.

4.3.3 BARRIERS TO GIRLS' EDUCATION

Notwithstanding the progress made in closing gender gaps in primary enrolment, significant barriers to girls' education remain. One of the barriers is poverty and marginalization. Poverty and marginalization affect both girls and boys; however, gender biases mean that girls tend to be affected more negatively than boys. Poor children (especially girls) are at a higher risk of not enrolling in primary school. In 2012, 5 per cent of the richest boys had never attended school in Guinea, compared with almost 65 per cent of the poorest girls (UNESCO, 2015b). The corresponding figures were approximately 20 per cent and 60 per cent for Chad (for 2010) and 15 per cent and 70 per cent for the Niger. In the latter, enrolment rates are disproportionately low for girls from rural areas and nomadic populations, and girls who are victims of slavery, descendants of slavery and with disabilities.⁷⁰ In Rwanda, girls with disabilities, Batwa girls and refugee girls experience societal, infrastructural and economic barriers to gaining access to education.⁷¹

A second important barrier is the costs involved in educating children. The main cost of attending schools are school fees. School fees are not required for attending primary schools for all countries except for South Africa.⁷² In the latter, there are no school fees at quintile 1 to 3 schools and at public schools in which a majority of parents have adopted a resolution not to charge fees. In 2015, 65 per cent of learners attending schools were not paying school fees.⁷³ The removal of school fees usually leads to an increase

⁷⁰ CEDAW Committee Concluding Observations [the Niger] (2017, para. 28 (a)).

⁷¹ CEDAW Committee Concluding Observations [Rwanda] (2017, para. 32(f)).

⁷² Based on data from published and draft national reports on AGDI National Reports, the Africa Child Policy Forum (2016) and the World Policy Centre Gender Database.

⁷³ In South Africa, public schools are expected to supplement government spending by charging school fees. Each year the Minister of Basic Education determines the quintiles of public schools. Quintile one public schools are the poorest 20 per cent of schools and quintile five the richest (South Africa, Department of Basic Education, 2016).

in enrolment. In Eswatini, for example, as a result of the enactment of the Free Primary Education Act 2010, total primary enrolment rose by 7 per cent from 231,555 in 2009 to an estimated 247,717 in 2015.⁷⁴

Countries have compulsory schooling laws to ensure that children enrol and attend primary school. Primary school attendance is compulsory for all children of primary school age for all countries covered by the present report.⁷⁵ In Mauritius and Seychelles, education is compulsory for all children up to 16 years of age, while in South Africa education is compulsory for all children from 7 to 15 years of age.⁷⁶ Compulsory schooling laws, however, may have limited effect on enrolment if they are not enforced. In Seychelles, the Education Act, 2004 makes provision for a School Attendance Officer to ensure that children of compulsory age attend school. A parent who refuses to ensure that their children of school age attend school regularly is committing an offence and can be fined. No cases have been filed to date. In Mauritius, a Student Tracking System has been set up to reinforce compulsory attendance at school up to the age of 16 years.

Even when there are no direct school fees as a result of a no-fee policy, parents still face financial barriers in sending their children to school, which may discourage attendance. These are indirect fees charged by schools and indirect and opportunity costs of attending school (see box 4.3). Whereas some of these costs are similar for boys and girls, others are higher for girls, including those that are related to ensuring that schools are safe for girls and cultural requirements are met, and to the opportunity costs of attending school in terms of the unpaid work that will not be performed by attending school.

74 Eswatini, Ministry of Education and Training (2015, p. 19).

75 Based on data from published and draft national reports on AGDI and the World Policy Centre Gender database.

76 SADC (2016, p. 35).

Box 4.3 Costs to parents for educating their children

A major barrier faced by poor parents in sending their children to school is the costs involved. There are four main costs that parents face in educating their children: direct fees to attend school; indirect fees to attend school; indirect costs of attending school, including transportation and clothing; and opportunity costs of attending school including foregone contribution to household income and unpaid work. These are summarized in the table below.

Type of cost	Examples	Are costs higher for girls than for boys?
Direct fees	Tuition fees	✗
	Other fees, including for books, uniforms and pencils	✗
Indirect fees	Parent-teacher associations	✗
	To escort children to get to school	✓ if safety is an issue
	To supplement teacher salaries	✗
	To find secure housing for female teachers	✓ if female teachers are being used as role models for girls
Indirect costs	Transportation	✓ if safety is an issue
	Clothing	✓ cultural requirements
	Food	✗
Opportunity costs	Unpaid work including fetching water, collecting firewood, caring for elderly family members, the sick and younger siblings	✓ girls are traditionally more likely to perform these tasks compared to boys
	Contribution to household income	Depends on social norms

The cost of educating girls can be reduced by reducing or eliminating school fees; providing merit scholarships and stipends to girls that cover part or all of the direct and indirect costs of schooling, and/or that compensate for some of the opportunity costs of girls attending school; providing free uniforms, school meals and textbooks; building new schools closer to the homes of potential students and providing students with a means of transportation to school to reduce the time children spend commuting to school; providing school-based health programmes; and building school latrines.

Source: ECA analysis based on Herz and Sperling, 2004; Kremer and Holla, 2009; and Ganimian and Murnane, 2016.

In addition to cost and poverty, other barriers to girls' education are cultural and social norms, early marriage, low level of awareness of the importance of schools, insecurity on the way to and from schools, having to travel long distances to and from schools, low quality schools, school violence, lack of appropriate water and sanitation facilities, lack of female teachers, and the use of inappropriate pedagogical practices (Global Partnership for Education, 2017). Early marriage, early and teenage pregnancy, gender-based violence, preference for boys' education relative to girls' and gendered division of household labour are often manifestations of discriminatory gender norms (UNESCO, 2015c). In Sierra Leone, most families chose to educate their males rather than their girls and women as they believe that "by educating their boys they will support their own kin, whereas educating their girls they will benefit the families those girls marry into."⁷⁷ These gender norms can also be conveyed in learning resources.

These barriers are interdependent. For example, if as a result of poverty or income shocks parents face financial constraints that lead them to decide to withdraw their children from school, girls may be at a disadvantage relative to boys: if there is preference for boys' education as a result of social norms about

⁷⁷ Sierra Leone, Ministry of Social Welfare, Gender and Children's Affairs (2014, p. 15).

gender roles; if girls face higher burdens of household production; and if there are security concerns combined with a lack of proximity to schools and safe transportation.

Table 4.2 shows the key barriers to girls' education mentioned in the education sector plans for Guinea, the Niger, Sierra Leone and Zimbabwe. Sociocultural factors⁷⁸ are mentioned as a barrier in all four countries, while opportunity costs, early marriage, school violence and lack of private latrine are each mentioned in three of the national plans. Distance from school and inappropriate pedagogical practices were not mentioned as barriers.

Table 4.2 Barriers to girls' education in selected countries

	Opportunity costs	Direct costs	Sociocultural factors	Early marriage	Awareness*	Poverty/malnutrition	Insecurity on the way/from school	Distance from school	Low-quality schools	School violence	Lack of private latrine	Lack of water access points	Lack of female teachers	Inappropriate pedagogical practices
Guinea			•	•		•			•	•	•			
Niger	•		•	•		•							•	
Sierra Leone	•		•							•	•			
Zimbabwe	•	•	•	•	•		•			•	•	•		

Source: ECA analysis based on *Global Partnership for Education, 2017, annex 3*.

Note: * low level of awareness of the importance of schools.

4.4 SECONDARY AND TERTIARY EDUCATION

"States Parties shall take specific positive action to promote education and training for women at all levels and in all disciplines, particularly in the fields of science and technology".

Maputo Protocol (African Union, 2003, article 12 (2)(b)).

Achieving gender parity at the primary level provides a good opportunity for boys and girls to attend secondary and tertiary institutions and acquire skills that will enable them to participate effectively in the formal labour market. Data on enrolment in secondary and tertiary education in the countries covered by the present report are more limited, compared with primary enrolment.

4.4.1 SECONDARY EDUCATION

Of the 12 countries that have data on net enrolment in secondary education during the period 2010–2015, only Zimbabwe had achieved parity (see figure 4.IV (b)) even though enrolment for both females and males was below 50 per cent (see figure 4.IV (a)). Six countries – Eswatini, Mauritius, Namibia, Rwanda, Sao Tome and Principe and Seychelles – all had GSI of above 1.03, meaning that boys were at a disadvantage. In Mauritius, girls were more likely than boys to be enrolled at the secondary level as they generally performed better than boys at the Certificate of Primary Education examinations at the end of primary schooling. In 2014, the pass rate for girls was nearly 80 per cent against 67 per cent for boys. In Namibia

⁷⁸ The plans are not explicit as to what the sociocultural factors are.



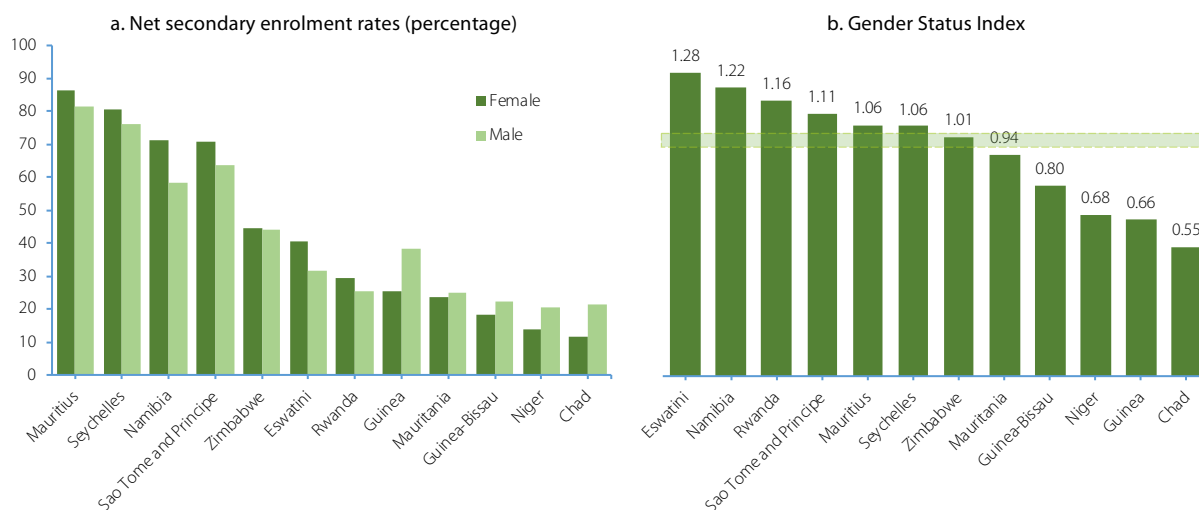
(GSI of 1.22) and Eswatini (GSI of 1.28) boys are at a severe disadvantage. In Mauritius, Namibia, Sao Tome and Principe and Seychelles, girls had net enrolment rates of above 70 per cent, exceeding the net enrolment rates of boys (figure 4.IV (a)).

Girls are at a severe advantage in Chad (GSI of 0.55), Guinea (GSI of 0.66), the Niger (GSI of 0.68) and Guinea-Bissau (GSI of 0.80). For primary education, however, these four countries along with Mauritania have some of the lowest net enrolment rates overall, with net enrolment rates of below 30 per cent for females.

4.4.2 TERTIARY EDUCATION

Calculating net enrolment rates for tertiary education is not applicable because of the difficulties in determining an appropriate age group, given the wide variations in the duration of programmes and age of students at this level of education (see box 4.1). Gross tertiary enrolment rates for females ranged from below 5 per cent in Chad, Mauritania and the Niger to 42 per cent in Mauritius (see figure 4.V (a)). As is the case for net primary and secondary enrolment, low overall enrolment at the tertiary level is associated with gender disparity in favour of males in Chad, Guinea, Mauritania and the Niger. There are severe gender disparities in favour of males in Chad, Guinea, Liberia, Mauritania and the Niger with GSI scores below 0.70, and in favour of females in Mauritius, Namibia, Seychelles and South Africa (figure 4.V (b)).

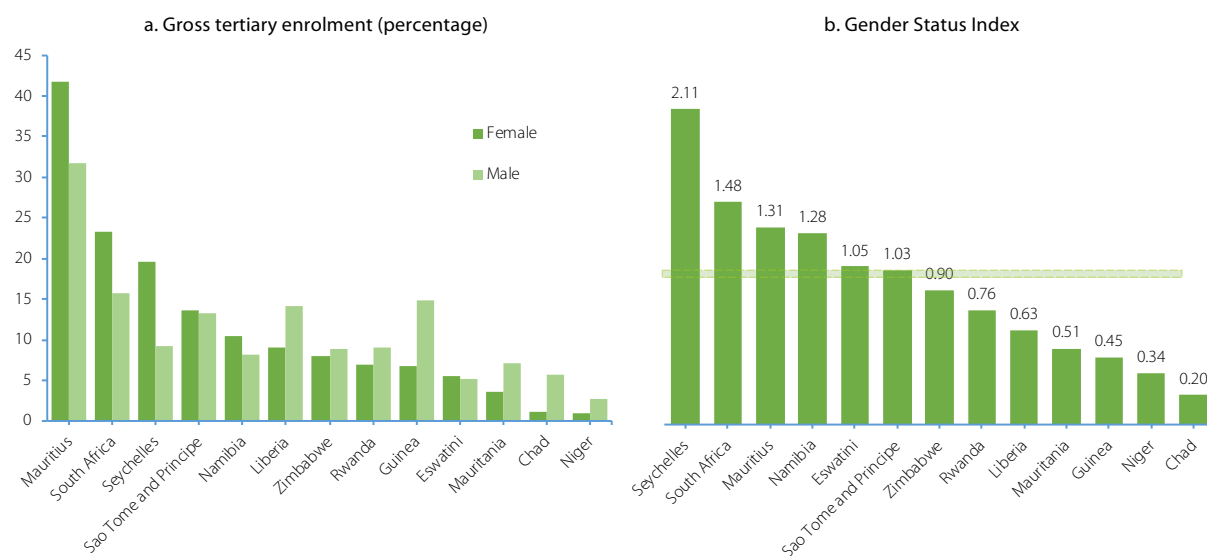
Figure 4.IV (a) Net secondary enrolment by sex and (b) gender status index, 2010–2015



Source: ECA analysis based on data from UNESCO Institute of Statistics database.

Source: ECA analysis based on data from UNESCO Institute of Statistics database.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Figure 4.V (a) Gross tertiary enrolment by sex and (b) gender status index, 2008–2015


Source: ECA analysis based on data from UNESCO Institute of Statistics database.

Source: ECA analysis based on data from UNESCO Institute of Statistics database.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

The relatively low GSI score of 0.76 for tertiary education in Rwanda, as noted in its national report on AGDI, can be explained by the limited number of females who obtain the required cut-off points during national examinations, which is a requirement for accessing public tertiary education. In turn, the poor performance can be attributed to social expectations, including the need to get married in their early twenties. Young women take a significant amount of time to respond to these expectations, leaving them with inadequate time to focus on their studies.

For those young women who make it to post-secondary educational institutions, a minority enrolls in science, technology, engineering and mathematics programmes even in countries in which tertiary education enrolment rates are biased in favour of girls. Young women tend to study social sciences and humanities subjects, while young men tend to focus on courses in science, engineering and computer sciences. This state of affairs leaves young women relatively unprepared for the world of work given that employment opportunities are increasingly more limited in the social sciences and humanities, than in the science, engineering and technological fields.

In Eswatini, females are disadvantaged in terms of enrolment in tertiary institutions offering technical and vocational subjects (the first five universities listed in table 4.3), while the opposite is true for those institutions that offer health sciences and teacher training, save for William Pitcher College.

Table 4.3 Gross enrolment rates in tertiary institutions in Eswatini, 2014

	Gross enrolment			Enrolled (percentage)	
	Male	Female	Total	Male	Female
Tertiary education institution					
Manzini Industrial Training Centre	185	26	211	87.7	12.3
Nhlangano Industrial Training Centre	81	21	102	79.4	20.6
Siteki Industrial Training Centre	71	36	107	66.4	33.6
Gwamile Vocational and Commercial Training Institute	127	37	164	77.4	22.6
Swaziland College of Technology	562	268	830	67.7	32.3
Limkokwing University of Technology	1 327	1 044	2 371	56.0	44.0
Southern Africa Nazarene University	502	719	1,221	41.1	58.9
Ngwane Teacher Training College	171	324	495	34.5	65.5
William Pitcher College	200	186	386	51.8	48.2
Swaziland Christian University	133	162	295	45.1	54.9
University of Swaziland	2 809	3 090	5 899	47.6	52.4
Total	6 168	5 913	12 081	51.1	48.9

Source: Eswatini, Ministry of Education and Training, 2014.

Note: Institutions that offer part-time courses, the police and correctional services have not yet been included although they offer opportunities for enrolment in tertiary education.

In Mauritius, of all those enrolled in science and technology-related courses in 2015, 61.5 per cent were males, notwithstanding a higher number of females enrolled in tertiary education than males (see table 4.4). On an encouraging note, more females than males had studied mathematics, medicine and the sciences. The number of females that enrolled in education and social science courses were three and four times those of males, respectively.

Table 4.4 Gross enrolment rates in tertiary institutions by field of study in Mauritius, 2015

Field of study	Gross enrolment			Percent enrolled (percentage)	
	Male	Female	Total	Male	Female
Science and technology-related	5 270	3 294	8 564	61.5	38.5
Engineering	1 682	403	2 085	80.7	19.3
Health Sciences	246	366	612	40.2	59.8
Information technology	2 205	1 011	3 216	68.6	31.4
Mathematics	245	347	592	41.4	58.6
Medicine	481	568	1 049	45.9	54.1
Science	165	253	418	39.5	60.5
Other	246	346	592	41.6	58.4
Others	8 613	15 023	23 636	36.4	63.6
Accounting	2 562	3 602	6 164	41.6	58.4
Administration/Management	2 126	3 189	5 315	40.0	60.0
Banking/Finance	822	1 214	2 036	40.4	59.6
Business/Commerce/Marketing	509	797	1 306	39.0	61.0
Economics	188	342	530	35.5	64.5
Education	603	1 602	2 205	27.3	72.7
Languages	191	944	1 135	16.8	83.2
Law	531	881	1 412	37.6	62.4
Social science	120	456	576	20.8	79.2
Travel/Hotel/Tourism	501	669	1 170	42.8	57.2
Other	460	1 327	1 787	25.7	74.3
Total	14 095	18 493	32 588	43.3	56.7

Source: Tertiary Education Commission, Mauritius, 2016.

Note: Enrolment in public and private institutions, excluding self-studies through distance learning and overseas students.

According to the national report on AGDI for South Africa (2016), although women accounted for 58 per cent of those enrolled in tertiary education in 2013, women accounted for 40 per cent in science, engineering and technology subjects, and above 70 per cent in humanities and social sciences, education

and health, and clinical sciences. The percentage of students enrolled at the University of Namibia in 2012 according to selected faculties were: Faculty of Humanities and Social Science (30 per cent males and 70 per cent females); School of Nursing and Public Health (19 per cent males and 81 per cent females); and Engineering and Information Technology (76 per cent males and 24 per cent females) (Namibia, Ministry of Gender Equality and Child Welfare, 2014).

4.5 POLICIES TO IMPROVE THE EDUCATION OF GIRLS

"States Parties shall take all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on a basis of equality of men and women, the reduction of female student drop-out rates and the organization of programmes for girls and women who have left school prematurely."

CEDAW (United Nations, 1979, article 10(f)).

As discussed above, the returns on investment in closing the gender gap and promoting the education of girls are clear. In order for countries to reap the economic, political and social benefits of increased female education, Governments need to identify the root causes of gender disparities and invest in policies and programmes to tackle them, and ensure that girls enrol, attend, remain and succeed in schools.

Gross and net enrolment ratios may conceal high drop-out rates from the education system. In general, drop-out rates remain high at both primary and lower secondary levels in the countries under review.

In addition to the barriers that prevent girls from enrolling in primary schools (see section 4.3.3), teenage pregnancy also contributes to girls either not enrolling or dropping out of secondary school. In some countries, girls are excluded from school for a period after pregnancy, while others exclude girls from returning to the same school after pregnancy. In the Niger, Decision No. 65/MEN/DEST/EX (1998) temporarily excludes girls who become pregnant from school and definitively excludes them in case they get married.⁷⁹ In Rwanda, girls who become pregnant are suspended for one year.⁸⁰ In March 2015, the Ministry of Education of Sierra Leone instituted a policy barring "visibly pregnant girls" from attending school and sitting their Basic Education Certificate Examination.⁸¹

Even when "re-entry policies" do exist, harsh social sanctions and cost considerations may make it difficult for pregnant and parenting female learners to return to school. In Eswatini, although government policy dictates that girls can return to school after pregnancy, in practice, "adolescent mothers do not return to the same school as the communities and schools often resist this."⁸² In South Africa, as a result of negative attitudes and practices from teachers and peers, only approximately one in three pregnant girls return to school after childbirth although the law allows them to do so.⁸³ In 2014, 18 per cent of girls between 12 and 19 years of age who were not attending school reported that they had fallen pregnant sometime during the past 12 months (Statistics South Africa, 2015). In Seychelles, the Pregnancy Policy, 2008 makes provision for students who are pregnant to reintegrate into the school system. However, a review of the policy revealed that only a small percentage of pregnant girls returned to school after delivery, mainly because of financial problems and a lack of affordable childcare facilities.

79 CEDAW Committee Concluding Observations [the Niger] (2017, para. 29 (b)).

80 CEDAW Committee Concluding Observations [Rwanda] (2017, para. 32(c)).

81 Committee on the Rights of the Child [Sierra Leone] (2016, para. 34).

82 Eswatini, Ministry of Education and Training (2015, p. 34).

83 UNESCO (2015c, p. 28).



Other important contributors to girls dropping out of school include gender-based violence in, or on the way to and from school by community members and teachers, and the lack of female teachers to act as role models for adolescent girls. In Eswatini, one in three girls have experienced some form of sexual violence by 18 years of age. Almost a third of reported cases of girls being forced or coerced into sex in Sierra Leone are perpetrated by male teachers, even though there is a Code of Conduct for Teachers. In Chad and Guinea, less than 12 per cent of secondary teachers were females in 2012 (UNESCO, 2015b).

Given that some students cannot adapt well to a strictly academic curriculum can also lead them to be absent from school and ultimately drop out of school altogether. In order to deal with this, all secondary schools in Seychelles since 2011 offers a Technical and Vocational Education and Training programme in partnership with post-secondary training institutions and workplaces that take students on attachment. Students can opt to join the programme for the final two years of secondary schooling. According to the Ministry of Education, "[T]he large majority of students choosing this option are boys, although the number of girls is gradually increasing – from a ratio of 1:7 in 2011 to 1:3 in 2014".⁸⁴ In Mauritius, boys accounted for two thirds of total enrolment in the schools offering pre-vocational education in 2016. In 2013, 4.2 per cent of females undertook vocational training in Sierra Leone, compared with 7.1 per cent of males, with women favouring studies in catering, hairdressing and gara tie dyeing, while the main common courses for males were carpentry, masonry and automobile mechanics (Statistics Sierra Leone, 2015).

Other factors that bring about student drop-outs are the value placed on education and the need to contribute to household economic activities. In the General Household Survey undertaken in South Africa in 2015, 7.6 per cent of children from 7 to 15 years of age and 9.5 per cent from 16 to 18 years of age stated that the reason for not attending school was because they regarded education as being useless (South Africa, Department of Basic Education, 2016). It was reported in the Education for All Monitoring Report 2015 for sub-Saharan Africa that in Namibia, boys were taken out of school to herd cattle.⁸⁵ In Liberia, girls dropped out of school and were recruited into the Sande secret society.⁸⁶

Besides reducing the costs of attending school (see box 4.3) and compulsory schooling laws, Governments can undertake other cost-effective interventions that are likely to increase the enrolment and retention of boys and girls in the formal educational system. These include: increasing the construction of schools in proximity of the populations; recruiting teachers; increasing the quantity and quality of educational resources at schools that are appropriate to the particular setting; providing school grants; expanding instructional time; ensuring that school curricula are relevant and prepare children with skills for the labour market and further education; informing families of the long-term benefits of schooling; and increasing parents' involvement in school management (Ganimian and Murnane, 2016).

In addition to introducing a school feeding programme, Namibia introduced mobile schools to ensure that children from nomadic communities remain in school and complete compulsory primary education, and gives allowances to schools in which San learners are enrolled for transport and other logistical expenses incurred.⁸⁷ The Government of Rwanda, in addition to completely removing school fees, provided school stipends, school feeding and cash transfer schemes on a means testing basis to students from households that cannot afford other costs of education, such as uniforms and learning materials.⁸⁸

84 Seychelles, Ministry of Education (2014, p. 37).

85 UNESCO (2015b, p. 6).

86 CEDAW Committee Concluding Observations [Liberia] (2015, para. 35 (a)).

87 Government of Namibia (2015, para. 40).

88 Government of Rwanda (2015b, para. 79).

In terms of interventions specifically focused on increasing the enrolment and retention of girls in schools, these include: tackling biased cultural and social norms that impede the educational achievement of girls, through education-awareness programmes at school, at the community level and in the media; and making schools more “girl-friendly”. Girl-friendly (Clarke, 2011; Herz and Sperling, 2004; Kremer and Holla, 2009) includes the following criteria:

- Building conveniently located schools close to girls' homes;
- Providing sex-segregated sanitation facilities especially for pubescent students;
- Ensuring that school environments are healthy, safe and free of gender-based violence;
- Providing gender-sensitive curriculum and textbooks, free of gender stereotypes;
- Providing more female teachers;
- Ensuring that teacher recruitment, deployment and training are gender-sensitive.

Box 4.4 summarizes the impact of girl-friendly schools on girls' enrolment in primary schools in Burkina Faso.

Box 4.4 Effects of “girl-friendly” schools on primary school enrolment in Burkina Faso

In 2005, the Government of Burkina Faso instituted the Burkinabe Response to Improve Girls' Chances to Succeed (BRIGHT) programme financed by the Millennium Challenge Corporation. The aim of the programme was to increase the enrolment of girls in primary schools by implementing a package of integrated education interventions in 132 rural villages. One component of the programme consisted of the construction of well-resourced schools, which included classrooms, desks, chairs, offices, housing for teachers, separate latrines for boys and girls, and clean water. Complementary interventions included free school meals, school kits and textbooks, take-home rations for girls based on attendance, information campaigns on the benefits of girls' education, placement of more female teachers, and gender-sensitivity training for teachers and school officials. The programme increased overall enrolment by 19 per cent and increased girls' enrolment by almost 5 per cent more than that of boys.

Source: *Kazianga and others, 2013.*

The countries covered by the present report have undertaken a number of these policies to prevent and support female drop-outs. Table 4.5 highlights the interventions planned in the education sector plans of Chad, Guinea, the Niger, Sierra Leone and Zimbabwe. The most popular interventions planned by the five countries were incentive measures for girls, followed by awareness-raising campaigns, gender-sensitive curriculum and construction of private latrines. Incentive measures include school kits (Chad and Guinea), rations (Chad) and performance-based awards and scholarships (the Niger).

A number of countries has re-entry and/or continuation policies for pregnant learners. Namibia, Seychelles, Sierra Leone and South Africa have policies⁸⁹ that make provisions for girls who become preg-

⁸⁹ Policy for the Prevention and Management of Learner Pregnancy in the Education Sector (2009), Pregnancy Policy (2008), Education Act (2004) and Prevention and Management of Learner Pregnancy (2007), respectively.

nant to go back to school once they have delivered safely. The policies in Namibia and Rwanda advocates for a one-year waiting period. The policy in South Africa is that pregnant learners have a two-year waiting period before girls can return to school in the interest of the rights of the child. The policy was challenged in a court case in 2013 in which the Court held that it violated the constitutional rights of pregnant learners and had to be reviewed.⁹⁰ In Namibia, although the one-year absent rule also applies to schoolboys who impregnate girls, they are rarely identified.⁹¹ In Seychelles, the policy is being revised to ensure that pregnant learners and young mothers are better supported psychologically and financially to continue their studies. Pregnant and parenting female learners in South Africa have access to unconditional cash transfers so that they can continue their studies.⁹² Although there is no policy yet in Mauritius, pregnant girls are allowed to return to school to pursue their education after giving birth.

In Rwanda, the Imbuto Foundation rewards the best performing girls in various school cycles under the Promotion of Girls' Education Campaign launched in 2005, which is under the leadership of the First Lady.⁹³ Liberia offers special scholarships for girls specializing in education and natural sciences.⁹⁴ Chad, Guinea, Liberia, the Niger and Rwanda have developed policies on girls' education,⁹⁵ while units dedicated to the promotion of girls' enrolment in schools have been set up in the ministry responsible for education in Liberia (Gender Education Unit) and the Niger (Directorate for the Promotion of Girls' School Enrolment). Sierra Leone has a Code of Conduct for Teachers and Other Education Personnel (2009) to, among others, ensure that sexual abuse and harassment in schools are confronted and punished. Box 4.5 summarizes the objective and key actions identified in the policy on girls' education for Rwanda.

Table 4.5 Strategies to improve girls' education identified in the education sector plans, selected countries

	Awareness-raising campaign	Recruitment of female teachers	Incentive measures for girls	Girls' schools/ boarding schools	Support to communities	Capacity building*	School grants	Gender-sensitive curriculum	Gender training for teachers	Girls' clubs	Support courses for girls	Fight against violence	Construction of private latrines	Construction of water access points
Chad			•											
Guinea	•		•			•		•	•			•	•	•
Niger	•	•	•			•		•	•				•	
Sierra Leone	•		•								•		•	
Zimbabwe								•				•		

Source: ECA analysis based on data from the Global Partnership for Education, 2017, annex 4.

Note: * = capacity-building of management committees or women's associations.

90 Government of South Africa (2017, para. 79).

91 Namibia, Ministry of Education, Arts and Culture (2016, p. 20).

92 UNESCO note on early and unintended pregnancy (n.d., p. 7).

93 For more information, see Imbuto Foundation website (2017). Available at <http://imbutofoundation.org/>.

94 Government of Liberia (2014, p. 23).

95 For more information, see Global Partnership for Education (2017); Sierra Leone, Ministry of Social Welfare, Gender and Children's Affairs (2014); and draft national report on AGDI for Rwanda.

Box 4.5 Planned interventions in the girls' education policy of Rwanda, 2008

The overall objective of the policy is to guide and promote sustainable action that is aimed at the progressive elimination of gender disparities in education, training and in management structures.

Some of the key actions envisioned by the policy include:

- Mainstream gender disaggregation and analysis into all reporting, data collection and research by developing a tracking system for all school pupils;
- Provide alternative non-formal means of education for children (catch up centres) who are unable to attend formal school and introduce the means of moving between the two systems;
- Strengthen sex and family life education in the school curriculum;
- Establish and increase numbers of technical schools in each province to offer a diversified education programme for girls and boys;
- Provide separate facilities for boys and girls, in particular sanitation and playgrounds;
- Provide subsidies and scholarships for areas in which retention and completion rates are low;
- Develop laws, codes of conduct for teachers and pupils to protect special needs children, especially girls, from sexual, physical and mental abuse.

Affirmative actions to increase girls having access to and participation in secondary and higher education, included:

- Review teaching methods and assessments of learning achievement at secondary schools and higher educational institutions to ensure girls' participation is not inhibited;
- Provide remedial courses for girls who are at risk of failing or dropping out of secondary or higher education and place special emphasis for re-entry for girls who become pregnant during their education;
- Provide intensive remedial holiday courses for girls who wish to enter male-dominated fields;
- Provide free tuition for 20 girls a year who qualify for science and/or technology training and education;
- Raise the awareness of families and local communities through Parents-Teachers Associations about the importance of girls completing formal education;
- Consider supplementary points to girls or use a lower cut-off point for their entry into higher education;
- Set five-year binding targets (50:50) for the enrolment of girls and boys into institutions in which girls are under-represented;
- Build more girls-only boarding schools and establish them as centres of excellence for demonstrating girls' achievements in schooling;
- Work towards 50:50 balances of appointments of females and males as head teachers and principals;
- Identify and train women with potential at entry and middle management levels and fast track them into education management positions.

Source: Rwanda, Ministry of Education, 2008.

Table AIV.1 (see annex IV) measures how far Governments have met the regional and global commitments to prevent and support female drop-outs in the countries covered by this report. Countries scored themselves highest on institutional mechanism, followed by policy commitment and monitoring and evaluation. Weak areas were research and budget. Chad, Sao Tome and Principe, and Seychelles scored themselves at 100 per cent, followed by Mauritius with 81 per cent on this indicator, while Guinea and South Africa scored themselves lowest at 58 per cent. Some of the policies taken by Liberia to promote the education of girls are highlighted in box 4.6.

Box 4.6 Selected interventions to improve the education of girls in Liberia

- The Girls' Education Policy (2006) approved.
- The Education Reform Act adopted in 2011. In terms of advancing the education of girls at all levels, the Act aims to:
 - Free and compulsory education for all students of primary school nationally;
 - Recruiting and training more female teachers;
 - Providing counselling in schools for girls;
 - Effecting appropriate sanctions against teachers who commit sexual abuse and assault of students;
 - Offering life skills at school to raise the self-esteem of girls;
 - Increasing the availability of school scholarships for girls.
- The Policy on Girls' Education revised in 2013 to align with the Education Reform Act.
- The Gender Education Unit of the Ministry of Education raises awareness to promote the reporting, investigation and prosecution of gender-based violence.

Source: Government of Liberia, 2014.

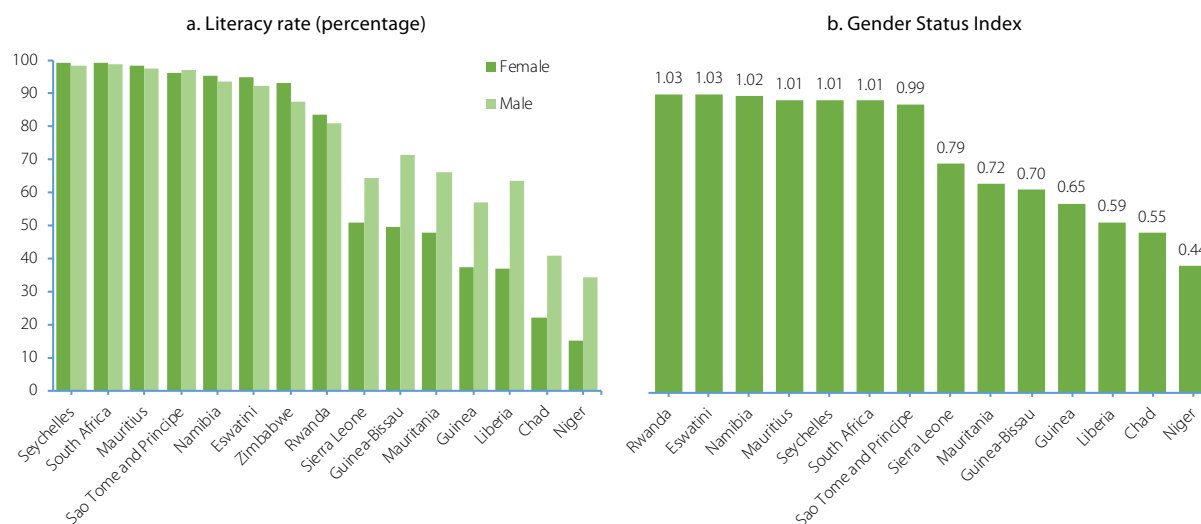
4.6 LITERACY RATE

"States Parties shall take specific positive action to promote literacy among women."

- Maputo Protocol, African Union (2003, article 12(2)(a)).

Participation in formal education is important to ensure that men and women participate fully in the economic and political life of their communities and to improve their health outcomes and the level of social welfare for them and their children.

Figure 4.VI (a) Literacy rates for young people aged 15–24 years by sex and (b) Gender Status Index, 2007–2016



Source: ECA analysis based on data from UNESCO Institute of Statistics database.

Source: ECA analysis based on data from UNESCO Institute of Statistics database.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

The literacy rates of young people between 15 and 24 years of age were above 80 per cent for both sexes, and gender parity has been noted in literacy rates in Rwanda, the small island developing States and Southern African countries covered by this report (see figure 4.VI (a) and (b)). Except for Sao Tome and Principe, literacy rates for young women are higher than that of young men for these countries. For the other countries in Central and West Africa, literacy rates for young women are below 51 per cent and there are severe gender disparities at the expense of girls with respect to literacy rates, in particular in Chad, Liberia and the Niger. Box 4.7 highlights the efforts of Eswatini, Liberia, Seychelles and Sierra Leone to improve literacy.

Box 4.7 Literacy programmes in Eswatini, Liberia, Seychelles and Sierra Leone

Both Eswatini and Seychelles have attained gender parity in the literacy rates of young people with rates of above 90 per cent for both sexes (see figure 4.VII). Young women in Liberia and Sierra Leone are at a disadvantage in terms of literacy rate.

Eswatini. As part of the Government's aim of reducing illiteracy, Sebenta National Institute within the Ministry of Education and Training runs three general education and training programmes. These are: basic literacy, a nine-month course in reading, writing and arithmetic with some focus on encouraging awareness of social and economic development; basic and post-basic English and numeracy, a two-year course that reaches a grade 4 equivalence and includes an internal examination; and non-formal upper primary education, a two-year programme in primary school subjects, with an external examination at the grade 7 level.

Liberia. Adopted in 2011, the Alternative Basic Education is a non-formal education program targeting overage youth and adults of both sexes who have not attended school. It incorporates family planning, HIV and AIDS, computer and livelihoods in its curriculum. In addition, the Special Girls' Education Initiative is a night school programme designed for pregnant teenage girls, dropouts and mothers in 2 of the 15 counties in Liberia.

Seychelles. The Adult Learning and Distance Education Centre offers district-based adult literacy programmes free of charge. The programme starts with literacy in Kreol and then moves to English and French, and basic numeracy. Courses are offered at three progressive levels and each level may last from one to two years. An average of 120 participants per year successfully completed the programme during the past ten years, the large majority of whom were women (more than 80 per cent) who also tended to remain on the programme for longer.

Sierra Leone. In 1992, the Government established the Non-Formal Education Programme targeting school-age girls, of 14 years and above, in peri-urban communities and remote villages with little or no formal schooling. Features and incentives included free tuition, placement or enrolment in schools with close proximity to pupils' homes, flexible and shorter school hours. These incentives encouraged communities to release girls who were typically engaged in household chores and street hawking, to attend these less conventional schools.

Source: ECA analysis based on data from the Government of Liberia, 2014; Government of Seychelles, Ministry of Education, 2015; Government of Eswatini, Ministry of Education and Training, 2015; and Government of Sierra Leone, Ministry of Social Welfare, Gender and Children's Affairs, 2014.

4.7 EDUCATION ON HUMAN RIGHTS

"[H]uman rights education should involve more than the provision of information and should constitute a comprehensive life-long process by which people at all levels in development and in all strata of society learn respect for the dignity of others and the means and methods of ensuring that respect in all societies."

United Nations Decade for Human Rights Education, (1994, para. 6).

"State parties to the present Charter shall have the duty to promote and ensure through teaching, education and publication, the respect of the rights and freedoms contained in the present Charter and to see to it that these freedoms and rights as well as corresponding obligations and duties are understood."



African Charter on Human and Peoples' Rights (Organization of Africa Unity, 1981, article 25).

"States Parties shall take all appropriate measures to integrate gender sensitisation and human rights education at all levels of education curricula including teacher training."

Maputo Protocol (African Union, 2003, article 12 (1(e)).

Table AIV.2 (see annex IV) measures how far Governments have met the regional and global commitments to integrate human rights education into all levels of the education system in the countries covered by this report. Countries gave themselves a high score on policy commitment, institutional mechanism and involvement of civil society. The overall weakest area was research. Chad and Sao Tome and Principe scored themselves highest at 100 per cent, followed by the Niger at 92 per cent. Eswatini scored itself lowest on this indicator at 38 per cent, followed by Seychelles with 50 per cent.

In Guinea-Bissau, the Ministry of Education had incorporated the "Education for Citizenship" programme into the school curriculum starting in the academic year 2014/2015 to tackle the issues relating to human rights.⁹⁶ In Mauritania and Mauritius, a Human Rights Curriculum has been developed as part of the civic and religious instruction syllabus and social studies for lower secondary, respectively (Government of Mauritania, 2017; Government of Mauritius, 2017). In Seychelles, secondary school students are taught their rights and duties as citizens under the Constitution (Government of Seychelles, 2015). In addition, citizenship education has also been incorporated into primary school curriculums, which touches upon human rights issues. In South Africa, a booklet entitled *The Constitution Made Easy for Learners* has been distributed to learners throughout the country (Government of South Africa, 2017).

4.8 CONCLUDING REMARKS

The key issues emerging from the analysis in this chapter are summarized below.

Overall. Rwanda, the four countries from Southern Africa and the small island developing States are doing well in terms of participation and progression at all levels of the education system, with gender disparity at the expense of males. Countries from the Central and Western African regions, however, tend to have low participation rates overall, and girls are less likely to be enrolled and complete education at all levels than boys.

Pre-primary education. Given that State facilities providing free pre-primary education services are not readily available in all countries, young children from the rural and remote areas and whose families are less wealthy tend to have reduced access to pre-primary education. Even when services are provided for free by the State, having access to and quality of services may be insufficient as a result of limited awareness among parents, inadequate facilities and trained personnel, lack of standards, and weak enforcement of current standards.

Primary, secondary and tertiary education. Although there is no great disparity throughout countries in terms of gender parity in net enrolment rates, overall, there is significant gender disparity in favour of males in Central and Western African countries and either gender parity or gender disparity in favour of females in Rwanda, Southern African countries and small island developing States for primary completion, net secondary enrolment and gross tertiary enrolment rates. Primary school attendance is compulsory for all children of primary school age in all countries. There are no school fees for attending primary

⁹⁶ Government of Guinea-Bissau (2015, para. 81).

schools, except for South Africa, where there is a means-testing system that exempt students of poor households from paying school fees.

Sex segregation in choice of subjects. Even countries in which a greater proportion of young women attend tertiary education than young men, the former tend to study social sciences and humanities subjects, while the latter tend to focus on courses in science, engineering and computer sciences.

Barriers to girls' education. There are several interlocking barriers that limit girls' participation and progression through the educational system. These barriers affect disadvantaged girls in particular, including those from poor families, those living in rural and remote areas, girls with disabilities, and who are refugees, victims of slavery and descendants of former slaves.

Drop out as a result of pregnancy. Pregnancy is an important contributor to girls either not enrolling or dropping out of school, especially starting at the secondary level. In some countries, girls are excluded from school for a period after pregnancy while others exclude girls from returning to the same school after pregnancy. Even when countries have "re-entry policies", harsh social sanctions and cost considerations may make it difficult for pregnant and parenting learners to return to school.

Policies to improve girls' education. Countries have undertaken a number of girl-friendly interventions to promote the participation and progression of girls in the educational system. To effectively implement these interventions, some countries have developed policies on education (Chad, Guinea, Liberia, the Niger and Rwanda), and set up dedicated units to promote girls' enrolment in schools (Liberia and the Niger). On this indicator, countries scored themselves high on institutional commitment and policy commitment, and weak on research and budget.

Literacy rate. Significant gender disparities at the expense of females in the participation of females in the education system in Central and Western African countries, translate into gender disparities in literacy rates of young people between 15 and 24 years of age.

Data. Data on participation rates in pre-primary and tertiary education, and technical and vocational education and training, remain limited in the countries covered in this report.

Resources. The implementation of policies, plans and other measures to promote girls' education and improve literacy levels requires the allocation of adequate organizational, human, technical and financial resources.

4.9 RECOMMENDATIONS

Governments should undertake the following interventions to promote inclusive education for all:

- Pre-primary education. Review and update national policies in line with commitments to provide free pre-primary education to all children in target 4.2 of the Sustainable Development Goals, and allocate adequate budgetary resources to ensure at least one year of free pre-primary education to all children;
- Promote enrolment and retention of girls, especially those that are disadvantaged. Introduce programmes that encourage the enrolment and retention of girls in school by, among other things, removing both direct and indirect costs associated with education, improving the quality of teaching,



improving school facilities and infrastructure, including the provision of appropriate sanitary facilities for girls, and recruiting more female teachers;

- Post-secondary education. Develop programmes and step up current efforts to encourage girls and young women to choose non-traditional fields of study and professions, such as science, technology, computer studies and engineering;
- Literacy. Strengthen adult literacy programmes, especially in rural areas;
- Gender-based violence. Adopt new measures and strengthen current ones to prevent and eliminate abuse of and sexual violence against girls at school, and ensure that perpetrators are adequately punished;
- Sexual and reproductive health and rights. Integrate age-appropriate education on sexual and reproductive health and rights into school curricula, including comprehensive sex education for adolescent girls and boys, focused on preventing early pregnancy;
- Pregnant and parenting learners. Develop a comprehensive policy promoting re-entry into school for girls after they have given birth, which includes them having access to support services such as counselling and childcare facilities;
- Awareness-raising. Undertake education awareness programmes that target parents and community leaders in order to tackle the biased cultural and social norms that impede the educational achievement of girls; and programmes that highlight the importance of education and the harmful effects of early and child marriage;
- Data. Strengthen the collection and management of data and statistics disaggregated by sex, age, geographical location, socioeconomic status and other relevant factors on participation and progression in education and its quality, especially at the pre-primary and post-secondary levels;
- Resources. Allocate adequate organizational, human, technical and financial resources to ensure the provision of inclusive education for all and that policies providing free primary education and programmes promoting girls' education are well resourced.

ANNEX IV COUNTRY SCORES ON COMMITMENT ON EDUCATION FOR ALL ON THE AFRICAN WOMEN'S PROGRESS SCOREBOARD

Table AIV.1 Scores for policies to prevent and protect female dropout on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	2	2	2	2	2	1	1	1	1	1	2	1	1	19	26	73
Guinea	0	1	1	1	2	1	2	1	2	1	1	1	1	15	26	58
Mauritius	2	2	1	2	2	2	2	0	1	2	2	2	1	21	26	81
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	2	19	26	73
Niger	2	2	2	2	2	1	1	1	1	2	1	1	1	19	26	73
Rwanda	1	2	0	0	2	1	1	1	2	2	2	1	2	19	26	73
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
South Africa	1	1	2	1	1	0	1	1	1	1	2	2	1	15	26	58

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

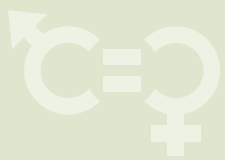
Note: Mauritania and Sierra Leone did not report on this indicator.

Table AIV.2 Scores for education on human and women's rights on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	0	1	0	0	1	1	1	1	1	1	1	1	1	10	26	38
Guinea	1	2	2	2	2	1	2	1	2	1	1	1	1	19	26	73
Mauritius	1	2	2	1	2	2	2	0	2	2	1	2	1	20	26	77
Namibia	2	2	2	2	2	1	1	2	1	1	1	1	2	20	26	77
Niger	2	2	2	2	2	1	2	2	2	2	1	2	2	24	26	92
Rwanda	2	2	1	1	2	2	2	0	2	2	2	1	2	21	26	82
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	1	1	1	1	1	1	1	1	1	1	1	1	1	13	26	50
South Africa	2	1	2	1	1	1	1	2	2	1	2	1	1	18	26	69

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania and Sierra Leone did not report on this indicator.



5. COMMITMENT TO QUALITY HEALTH CARE

"Women's right to the enjoyment of the highest standard of health must be secured throughout the whole life cycle in equality with men. Women are affected by many of the same health conditions as men, but women experience them differently. The prevalence among women of poverty and economic dependence, their experience of violence, negative attitudes towards women and girls, racial and other forms of discrimination, the limited power many women have over their sexual and reproductive lives and lack of influence in decision-making are social realities which have an adverse impact on their health. ... The trend [for adolescent girls] towards early sexual experience, combined with a lack of information and services, increases the risk of unwanted and too early pregnancy, HIV infection and other sexually transmitted diseases, as well as unsafe abortions."

Beijing Platform for Action (United Nations, 1995, paras. 92–93).

5.1 INTRODUCTION

Having access to quality health care is not only a human right, it is also important as it enables participation in the economic, social and political life of the community by keeping people productive, preventing illnesses and saving lives. Given that women and girls often bear most of the burden of unpaid work, including caring for sick members of the family, this works directly by affecting the quality of life of individuals suffering from mortality and morbidity, and indirectly by affecting those who care for them when they are sick.

The health component of AGDI is part of the Social Power block of both GSI and the African Women's Progress Scoreboard. It includes issues relating to child and maternal health, having access to family planning services, HIV and unsafe abortions. The health component consists of five indicators in GSI; three on child health (under-five stunting, underweight and mortality) and two on HIV (prevalence rate for 15–24 years of age) and having access to antiretroviral therapy. The issues evaluated in the Progress Scoreboard relate to four key areas of sexual and reproductive health in the Programme of Action of United Nations International Conference on Population and Development adopted in Cairo in 1994.

The Programme of Action contains recommendations for countries to implement universal access to a full range of reproductive health-care services, including family planning by 2015.⁹⁷ The main objectives were to: provide affordable, acceptable and accessible family planning services to allow couples to choose the number, spacing and timing of the birth of their children, prevent unwanted pregnancies, reduce adolescent pregnancies and the incidence of high-risk pregnancies and reduce unsafe abortion;⁹⁸ prevent and reduce the incidence of, and provide treatment for, sexually transmitted diseases, including

⁹⁷ United Nations (1996, para. 7.6).

⁹⁸ Ibid., paras. 7.14 and 7.44.

HIV/AIDS;⁹⁹ and achieve a rapid and substantial reduction in maternal morbidity and mortality.¹⁰⁰ In the global review and appraisal of the implementation of the Programme in 1999, member States recommended key actions to speed up implementation. Box 5.1 presents the key actions and targets for family planning, maternal mortality and HIV/AIDS.

Box 5.1 Selected key actions for the implementation of the programme of action of the International Conference on Population and Development

Family planning services (para. 58): "Where there is a gap between contraceptive use and the proportion of individuals expressing a desire to space or limit their families, countries should attempt to close this gap by at least 50 per cent by 2005, 75 per cent by 2010 and 100 per cent by 2050."

Unsafe abortions (para. 63): "Governments should take appropriate steps to help women avoid abortion, which in no case should be promoted as a method of family planning, and in all cases provide for the humane treatment and counselling of women who have had recourse to abortion. ... [I]n circumstances where abortion is not against the law, health systems should train and equip health-service providers and should take other measures to ensure that such abortion is safe and accessible."

Maternal mortality and morbidity (para. 64): "By 2005, where the maternal mortality rate is very high, at least 40 per cent of all births should be assisted by skilled attendants; by 2010 this figure should be at least 50 per cent and by 2015, at least 60 per cent."

Adolescents (para. 73(e)): "[E]nsure that adolescents, both in and out of school, receive the necessary information, including information on prevention, education, counselling and health services to enable them to make responsible and informed choices and decisions regarding their sexual and reproductive health needs, in order to, inter alia, reduce the number of adolescent pregnancies."

Source: *Report of the International Conference on Population and Development, United Nations, 1996.*

The Millennium Declaration of 2000 included four Millennium Development Goals relating to gender and health to be achieved by 2015. The aim of Goal 1 was to halve the proportion of individuals suffering from hunger. Goal 4 and Goal 5 called for reductions by two thirds of under-five mortality and maternal mortality ratio, respectively. The aim of Goal 6 was to halt and begin to reverse the spread of HIV/AIDS, and achieve universal access to treatment for HIV/AIDS.

Building on the Programme of Action of the International Conference on Population and Development and the Millennium Development Goals, Sustainable Development Goals 2, 3 and 5 sets a number of targets that relate to childhood malnutrition, sexual and reproductive health, maternal, newborn and child health, and HIV/AIDS to be met by 2030. The African Union's Agenda 2063 set a number of related targets to be achieved by 2023. Table 5.1 summarizes the targets for the Sustainable Development Goals and for the first 10 years of Agenda 2063 in priority areas in health.

⁹⁹ Ibid., para. 7.29.

¹⁰⁰ Ibid., para. 8.20.

Table 5.1 Gender-related health targets in Sustainable Development Goals and Agenda 2063

Priority area	Sustainable Development Goals target for 2030	Agenda 2063 target for 2023
Malnutrition	End all forms of malnutrition, including achieving by 2025 the internationally agreed targets on stunting and wasting in children under 5 years of age*, and address the nutritional needs of adolescent girls, pregnant and lactating women, and older persons (target 2.2)	Reduce stunting in children to 10 per cent and underweight to 5 per cent (Goals 1, 3 and 5)
Maternal mortality	Reduce the global maternal mortality ratio to less than 70/ 100,000 live births and no country should have a maternal mortality ratio greater than 140/100,000 live births (target 3.1)	Reduce 2013 maternal, neo-natal and child mortality rates by at least 50 per cent (Goal 3)
Infant and child mortality	End preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-five mortality to at least as low as 25 per 1,000 live births (target 3.2)	Reduce 2013 maternal, neo-natal and child mortality rates by at least 50 per cent (Goal 3)
HIV/AIDS	End the epidemics of AIDS (target 3.3)	Access to antiretroviral drugs is 100 per cent (Goal 3)
Sexual and reproductive health	Ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes (targets 3.7 and 5.6)	Increase 2013 levels of access to sexual and reproductive health services to women by at least 30 per cent (Goal 2)
Universal health coverage	Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all (target 3.8)	Increase 2013 levels of access to quality basic health care and services by at least 40 per cent (Goal 3)

* Note: World Health Assembly Resolution 65.6. Targets adopted by the World Health Organization in 2012: a 40 per cent reduction in the number of children who are stunted; and reduce and maintain childhood wasting to less than 5 per cent (WHO, 2014a).

5.2 CHILD HEALTH

State parties "shall take appropriate measures: to diminish infant and child mortality; to ensure the provision of necessary medical assistance and health care to all children ...; to combat disease and malnutrition ...; to ensure appropriate pre-natal and post-natal health care for mothers; ... to develop preventive health care, guidance for parents and family planning education and services".

Convention on the Rights of the Child, (United Nations, 1989, article 24).

The Child Health subcomponent in GSI consists of three indicators. These are the prevalence rates of under-five stunting, under-five underweight and under-five mortality.

5.2.1 CHILDHOOD MALNUTRITION

Malnutrition has a negative impact on children's well-being and reflects social inequalities. Two of the main indicators of childhood malnutrition are stunting and underweight (see box 5.2). In 2016, an estimated 155 million children under 5 years of age were stunted worldwide of whom 38 per cent lived in Africa (UNICEF, World Health Organization (WHO) and World Bank Group, 2017). Although the proportion had dropped from 38 per cent in 2000 to 31 per cent in 2016, the number of stunted African children under 5 years of age rose by 17 per cent during that period to reach 59 million in 2016. An estimated 19 per cent of children under 5 years of age in sub-Saharan Africa were underweight from 2000 to 2015 (UNICEF, 2016).

Box 5.2 Stunting and underweight: definitions, causes, consequences and interventions

Definitions. Childhood stunting refers to being too short for one's age. Underweight refers to a child who is too thin for his or her age. Stunting (underweight) is defined as a height (weight) that is more than two standard deviations below the median height-for-age (weight-for-age) of the WHO Child Growth Standards. A child who is below two standard deviations from the reference median for weight-for-height is considered wasted. Children can be underweight for their age because they are stunted, wasted, or both.

Causes. The main factors contributing to stunted growth and development are poor maternal health and nutrition, inadequate child feeding practices and infection in the first 1,000 days of the child's life. More specifically the main risk factors are: poor maternal health and nutrition status before, during and after pregnancy; short birth spacing; adolescent pregnancy; non-exclusive breastfeeding; severe infectious diseases; and infections from exposure to contaminated environments and poor hygiene. Household and socioeconomic factors, including household poverty and quality of care, exacerbate these factors. The causes of underweight are similar to those for stunting.

Consequences. Both stunting and underweight have long-term effects on individuals and societies. These include: diminished cognitive and physical development, reduced educational outcomes, reduced productive capacity and poor health, and an increased risk of diseases in adulthood.

Interventions. The following interventions are recommended to reduce undernutrition and its effects:

- Improve identification, measurement of and understanding of undernutrition;
- Improve maternal nutrition, including nutrient supplementations, and health, starting with adolescent girls;
- Promotion of early and exclusive breastfeeding for six months and continued breastfeeding for up to two years of life;
- Nutritious and safe foods in early childhood;
- Improve water, sanitation and hygiene to protect children from infections and diseases;
- Manage acute malnutrition;
- Implement early childhood development programmes to limit the negative education and cognitive consequences of undernutrition;
- Institute policies to alleviate poverty and improve food security, population health and access to health services.

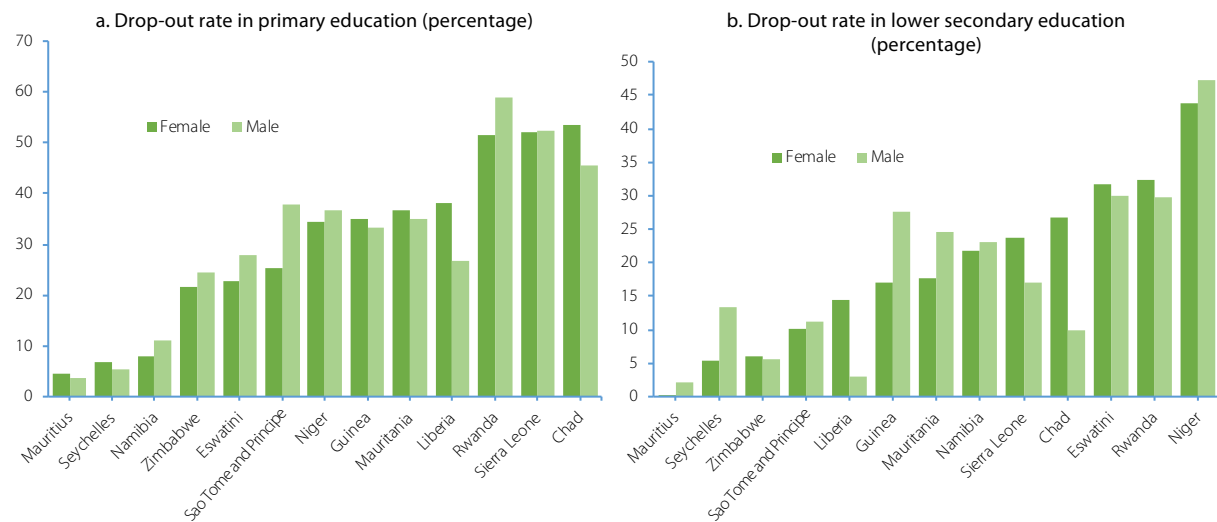
Source: ECA analysis based on Bhutta and others, 2013; WHO, 2014b; and UNICEF, WHO and World Bank Group, 2017.

Rates of stunting among under-fives range from 7 per cent for girls in Seychelles to 42 per cent for girls in the Niger (see figure 5.1(a)). There is gender parity for Seychelles with a GSI of 1.02 (see figure 5.1(b)). Girls are at an advantage relative to boys for all other countries in which data are available except for Namibia and Sierra Leone. The advantage in favour of girls is especially significant for Eswatini (GSI=1.11) and Rwanda (GSI=1.17). Seychelles has achieved the target of 10 per cent set in the first 10-year plan for Agenda 2063 for both sexes. The rates for other countries with data are significantly above target. Analysis of data from Demographic and Health Surveys reports published after 2006 shows that stunting rates are lower for children: from the highest wealth quintiles relative to the lowest; living in urban areas, compared with those living in rural areas except for Sao Tome and Principe, where there is no difference; with mothers who were 18 years of age or older at the time of birth, compared with mothers who were less than 18 years of age at the time of birth, except in Liberia where there is no difference; and whose mothers have a higher education, compared with those with no education.¹⁰¹

¹⁰¹ International Food Policy Research Institute (2016) and South Africa, National Department of Health, and others (2017). Data from Demographic and Health Surveys for the following countries were used in the analysis: Guinea (2014/15), Liberia (2013), Namibia (2014), the Niger (2012), Rwanda (2014), Sao Tome and Principe (2008/09), Sierra Leone (2014), South Africa (2016), Eswatini (2008) and Zimbabwe (2015).



Figure 5.I Prevalence of under-five (a) stunting by sex and (b) Gender Status Index



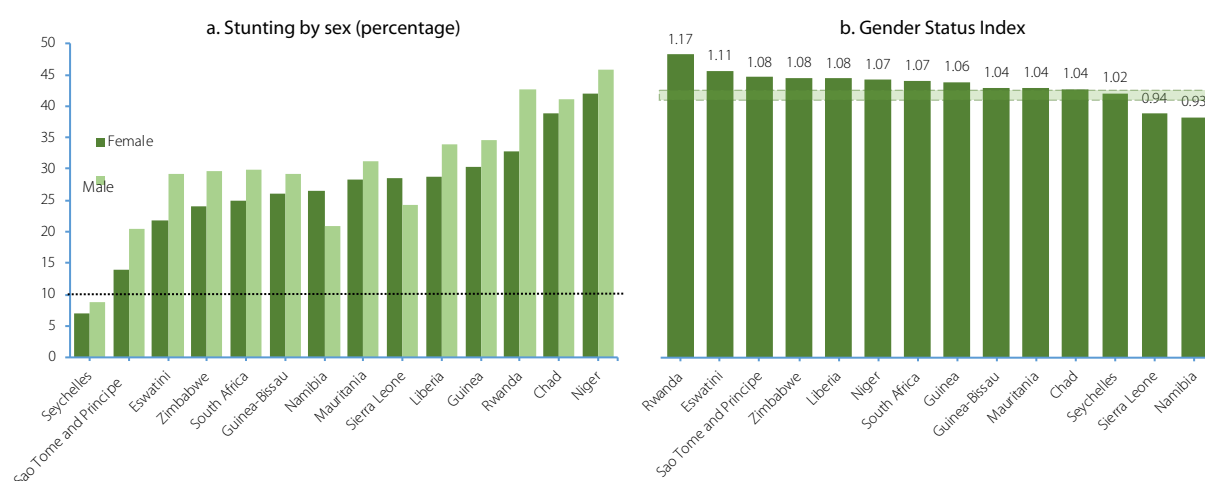
Source: ECA analysis based on data from national report on AGDI for Seychelles, Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2011; Sao Tome and Principe, 2014; and Sierra Leone, 2017.

Note: Dotted line represents target of 10 per cent set for the first 10 years in Agenda 2063.

Source: ECA analysis based on data from national report on AGDI for Seychelles, Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2011; Sao Tome and Principe, 2014; and Sierra Leone, 2017.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

The prevalence of under-fives who are underweight tend to be less than for stunting for both sexes (see figure 5.II(a)). All countries in which data are available have broadly attained gender equality for this indicator (see figure 5.II(b)). Eswatini, Seychelles and South Africa are performing very well relative to the target set for the first 10 years in Agenda 2063, with Seychelles having reached the target for both sexes, and South Africa and Eswatini having reached the target for females. The prevalence of underweight children is significant in Chad and the Niger with rates above 25 per cent for both girls and boys, and Mauritania with a rate above 25 per cent for boys.

Figure 5.II Prevalence of (a) under-five underweight by sex and (b) Gender Status Index


Source: ECA analysis based on data from the draft national report on AGDI for Seychelles, Demographic Health Surveys for Chad (2014), Liberia (2013), Namibia (2013), Niger (2012), Rwanda (2014/15), South Africa (2016), and Zimbabwe (2015), and Multiple Indicator Cluster Surveys for Eswatini (2014), Guinea (2016), Guinea-Bissau (2014), Mauritania (2011), Sao Tome and Principe (2014) and Sierra Leone (2017).

Note: Dotted line represents target of 5 per cent set for the first 10 years in Agenda 2063.

Source: ECA analysis based on data from the draft national report on AGDI for Seychelles, Demographic Health Surveys for Chad (2014), Liberia (2013), Namibia (2013), Niger (2012), Rwanda (2014/15), South Africa (2016), and Zimbabwe (2015), and Multiple Indicator Cluster Surveys for Eswatini (2014), Guinea (2016), Guinea-Bissau (2014), Mauritania (2011), Sao Tome and Principe (2014) and Sierra Leone (2017).

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

5.2.2 CHILD MORTALITY

The world has made substantial progress in improving child survival with the global under-five mortality rate dropping from 91 deaths per 1,000 live births in 1990 to 43 in 2015 (UNICEF and others, 2015). Northern Africa reduced the under-five mortality rate from 73 in 1990 to 24 in 2015, and sub-Saharan Africa experienced a cut in its rate from 180 in 1990 to 83 in 2015. However, in spite of the progress, Africa is the region with the highest under-five mortality rate and more than 3 million children having died before they reached their fifth birthday in 2015. In sub-Saharan Africa, one out of every three deaths of under-fives are due to new-born deaths.¹⁰²

There is gender parity in terms of prevalence of under-five child mortality for all countries with data, with GSI ranging from 0.98 in Mauritania and 1.02 in Chad, Eswatini, Guinea-Bissau, the Niger, Sao Tome and Principe and Sierra Leone (see figure 5.III(b)). Mauritius and Seychelles have met the Sustainable Development Goal target of 25 for both sexes, and Mauritania has met the target for boys. However, mortality rates remain high for both sexes for the other countries in which data are available (see figure 5.III(a)). They are especially high for Chad, Liberia and the Niger where the rates exceed 100 for both sexes. Liberia, the Niger and Rwanda are among the 11 African countries to reduce under-five mortality by more than two thirds between 1990 and 2015 as was required by the fourth Millennium Development Goal.¹⁰³

Most deaths of children under the age of five are caused by undernutrition, infectious diseases and conditions, such as pneumonia, diarrhoea, malaria, meningitis, tetanus, HIV, measles diseases, and complications before, during and just following birth (UNICEF and others, 2015). Deaths caused by diseases are

¹⁰² UNICEF (2016b, p. 10).

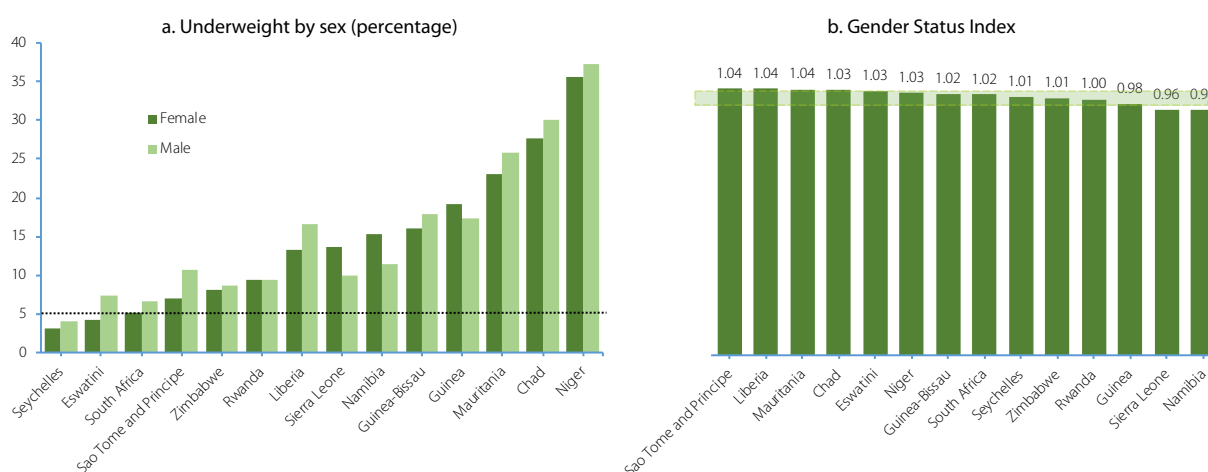
¹⁰³ The other eight African countries are Egypt, Ethiopia, Eritrea, Madagascar, Malawi, Mozambique, the United Republic of Tanzania and Uganda (UNICEF and others, 2015).



readily preventable or treatable with proven, cost-effective interventions. The most important of such interventions are increasing access to child care services, including antenatal care, care by a skilled birth attendant, giving birth in well-equipped health facilities, emergency obstetric care and immediate newborn care (UNICEF, 2016c), increasing the coverage of interventions to ensure that children survive these diseases, and better child nutrition. Box 5.3 highlights the application of these interventions in the case of the Niger.

Several socioeconomic and demographic factors, however, work against the utilization of these interventions and services and children surviving these diseases (see table 5.2). Mortality in urban areas is generally lower than in rural areas, except for Eswatini, Sao Tome and Principe and Sierra Leone. Mortality rates decline markedly as mother's education increases and as the wealth of the household increases, except in Sierra Leone (education) and Guinea-Bissau (wealth). In general, mortality is relatively higher among children born to mothers under 20 years of age than among children born to mothers between 20 and 29 years of age, with the exception of Namibia. A child born less than two years after a preceding birth is almost at least twice as likely to die before his or her fifth birthday as a child born four or more years after a preceding birth; the probability of this is at least three times in Liberia.

Figure 5.III (a) Under-five child mortality by sex and (b) Gender Status Index



Source: ECA analysis based on data from the published report on AGDI for Mauritius, Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; and Zimbabwe, 2015; Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2011; Sao Tome and Principe, 2014; and Sierra Leone, 2017; and UNICEF Child Mortality Estimates (Seychelles, South Africa).

Note: Dotted line represents Sustainable Development Goal target of 25.

Source: ECA analysis based on data from the published report on AGDI for Mauritius, Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; and Zimbabwe, 2015; Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2011; Sao Tome and Principe, 2014; and Sierra Leone, 2017; and UNICEF Child Mortality Estimates (Seychelles, South Africa).

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Box 5.3 Interventions to reduce child mortality in the under-fives in the Niger

The mortality rate in children younger than 5 years of age in the Niger declined rapidly from 328 for each 1,000 livebirths in 1990 to 96 in 2015 with an annual decline rate of 4.9 per cent. In 2000, the Niger achieved the fourth Millennium Development Goal, which is to reduce under-five mortality by two thirds by 2015. Three main categories of interventions have contributed to achieving these results). First, improving access to primary health care for women and children by: increasing coverage of interventions aimed at reducing deaths from malaria, pneumonia, diarrhoea and measles; increasing geographical access by building community health posts (Case de Santé) in rural and remote areas since 2000 and resourcing those trained community health workers with essential drugs and commodities; and abolishing user fees for pregnant women and children under 5 years of age in 2006. Community health-care workers (Agents de Santé Communautaire) are paid, have a minimum of secondary school education and are selected by the community. The community health posts provide treatment and referral for malaria, pneumonia and diarrhoea; screening and referral of acute malnutrition; promotion of good health, nutrition and hygiene practices; and promotion and distribution of family planning products and services. Second, using mass campaigns to rapidly increase the coverage for insecticide-treated bednets, measles vaccination and vitamin A supplementation. Third, steps were taken to address child malnutrition.

Major policies and interventions relating to child survival in the Niger, 1998–2009

Access to child health-care services	Mass campaigns	Child nutrition
<ul style="list-style-type: none"> - National IMCI Policy 1996–1998 - 2000: Presidential declaration for rural development and improvement of access to basic services - 2000: Introduction of clinical ICMI training of 190 health workers - 2000: Construction of first community health posts in rural and remote communities - 2005: Malaria Policy Revision - 2006: Free health-care policy for children and pregnant women - 2007: 1,700 community health posts created with 431 trained community health workers - 2008: Malaria and diarrhoea policy - 2009: 1,444 ICMI-trained health workers - 2009: Total of 1,938 functioning health post with 2,308 trained community health workers. 	<ul style="list-style-type: none"> - 2000: National Vitamin A supplementation campaigns (twice a year through 2009) - 2004: National measles campaign - 2005: Mass distribution of 2.3 million insecticide-treated bednets - 2005–2009: Rollout of tetanus toxoid vaccine - 2008: National measles campaign - 2009: Mass distribution of 2.8 million insecticide-treated bednets 	<ul style="list-style-type: none"> - 2005: Network of National Nutrition Rehabilitation centres established - 2006: Nutritional Policy – Management of malnutrition - 2009: Total of 39 inpatient and 671 outpatient nutrition centres

These interventions resulted in significant increases in the take-up of vaccinations against childhood diseases and micronutrient supplementations, ownership of insecticide-treated bednets, antenatal care, and care seeking for childhood diseases. Amouzou, and others (2012) concluded that the increase of insecticide-treated bednets and nutritional interventions aimed at reducing stunting and wasting, together, contributed to about half of the total lives of under-five children saved in 2009.

There are, however, a number of challenges that may imperil the sustainability of the decline in under-five mortality rates. These include: persistently high fertility rates; the influx of refugees from neighbouring countries, which contributes to increased demand for health services; chronic food insecurity issues; heavy dependence of the health system on external donors; and the lack of progress in reducing newborn mortality.

Source: ECA analysis based on Amouzou and others, 2012; Besada and others, 2016; and UNICEF and others, 2015.

Note: IMCI, Integrated Management of Childhood Illness.

These socioeconomic and demographic factors interact with other structural barriers to undermine children's survival. The structural barriers include, delays in choosing and booking delivery facilities in advance, arriving at the facilities on time, seeking, and receiving adequate treatment once at the facilities (Cohen, Lofgren and McConnell, 2017). Reasons for these include, last-minute decisions about delivery facilities, expecting mothers and children having to travel long distances to receive care, poor transportation infrastructure, lack of information on when to seek care, cost considerations, and a lack of quality equipment and trained midwives, doctors or nurses to provide the care. In addition to these factors, a

study undertaken in the Niger in 2012 identified a lack of electricity and clean water, poor sanitation and exposure to household air pollution as potential additional risk factors to child survival (Koffi, and others, 2016).

In order to reduce child mortality, Governments will have to further focus interventions and services on the most disadvantaged children. These are children from poor households, those living in rural areas, and those whose mothers are uneducated and very young. Improving access to quality family planning information and services to enable women and adolescent girls to delay pregnancies and lengthen birth spacing is important. In addition, improving access to education up to secondary school for girls and promulgating and implementing laws that prevent child marriage will be needed. Preventing mother-to-child transmission of HIV, especially in countries where the prevalence of HIV is high, by expanding antiretroviral medicines for mothers living with HIV (both during and after their pregnancies as part of comprehensive maternal, newborn and child health services) is important to improve child survival. Box 5.4 highlights how interventions to reduce child mortality in Sierra Leone benefitted the poor the most.

Table 5.2 Under-five mortality rates by background characteristics, 2012–2017 (per thousand live births).

Background characteristics	Chad	Eswatini	Guinea	Guinea-Bissau	Liberia	Namibia	Niger	Rwanda	Sao Tome and Principe	Sierra Leone	Zimbabwe
<i>Residence</i>											
Rural	149	105	104	96.9	120	64	163	70	69	92	92
Urban	141	107	52	74.8	106	54	83	51	74	97	60
<i>Mother's education</i>											
No education	140	151	98	100.1	122	76	158	89	138	88	106
Secondary and higher	135*	102*	45	54.8	97	55*	91	43	49	102	26#
<i>Wealth quintile</i>											
Lowest (poorest)	161	118	128	75.8	130	67	144	84	90	90	102
Fifth (richest)	138	101	38	76.6	99	31	114	40	28	86	52
<i>Mother's age at birth</i>											
Below 20 years' old	159	107	86	87.1	129	56	177	83	88	111	96
20-29 years' old	141	104	83	78.7	110	58	144	62	51	87	76
<i>Birth spacing</i>											
Less than 2 years	192	134	137	172.4	190	96	203	99	111	118	162
4 years and above	71	102	56	56.7	60	59	86	49	65	80	68

Source: ECA analysis based on data from Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; and Zimbabwe, 2015; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Sao Tome and Principe, 2014; and Sierra Leone, 2017.

Notes: *secondary education only; and # more than secondary education only.

Box 5.4 Interventions to reduce under-five mortality in Sierra Leone

In 2010, Sierra Leone introduced a package of basic services targeting the major killers of vulnerable children and women. These services included insecticide-treated nets, promotion of early and exclusive breastfeeding, immunization and birth attendance. To support this effort, the Government trained 15,000 community health workers between 2000 and 2015, and provided on-the-job training for primary health-care workers at each of the country's 1,200 primary health-care centres. In addition, Sierra Leone conducted mass malaria prevention campaigns every two years, distributing insecticide-treated nets to pregnant women and children. In 2010, Sierra Leone launched the Free Health Care Initiative to improve access to health care for mothers and children. It is projected that the under-five mortality in Sierra Leone between 2008 and 2013 fell annually by an estimated 14 deaths per 1,000 live births among the poor, compared with 9 deaths per 1,000 live births among non-poor groups.

Source: UNICEF, 2017a.

5.3 SEXUAL AND REPRODUCTIVE HEALTH

“Reproductive health care is the constellation of methods, techniques and services that contribute to reproductive health and well-being by preventing and solving reproductive health problems. It also includes sexual health, . . . Men and women have the right to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health-care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant.”

Programme of Action of the International Conference on Population and Development (United Nations, 1996, para. 7.2).

The Programme of Action of the International Conference on Population and Development defined reproductive health to include sexual health (see quotation above). The key reproductive and sexual health interventions are: provision of family planning services; improving maternal and newborn health; reducing sexually transmitted infections, including HIV; eliminating unsafe abortion and providing post-abortion care; and promoting healthy sexuality, including adolescent health and reducing harmful practices.¹⁰⁴ Integration of services “has the potential to address the multiple needs of patients, reduce service costs, enhance the effectiveness and sustainability of programmes, and generate wider health benefits.”¹⁰⁵

The following sections discuss the performance of the countries covered by the report in four areas of sexual and reproductive health, namely HIV/AIDS, maternal mortality, family planning and safe abortions. HIV is covered under both the African Women's Progress Scoreboard and GSI, while the other three are covered under the Progress Scoreboard only.

104 United Nations Millennium Project (2006) reported that the WHO outlined these interventions in 2004 as necessary for good sexual and reproductive health.

105 The Lancet (2015, p.194).



5.3.1 HIV/AIDS

States Parties shall ensure that women have "the right to self-protection and to be protected against sexually transmitted infections, including HIV/AIDS; the right to be informed of one's own health status and that of one's partner, particularly infected with sexually transmitted diseases, including HIV/AIDS."¹⁰⁶

Protocol to the African Charter on Human and Peoples' Rights of Women in Africa, African Union (2003, article 14 (1)(d) and (e)).

HIV progressively weakens the immune system and peoples' defence against infection. AIDS is the most advanced stage of an HIV infection. The first reported cases of AIDS were in 1981. Although many people infected with HIV now have access to life-saving antiretroviral therapy, HIV/AIDS is still a major threat to public health (WHO, 2016a).

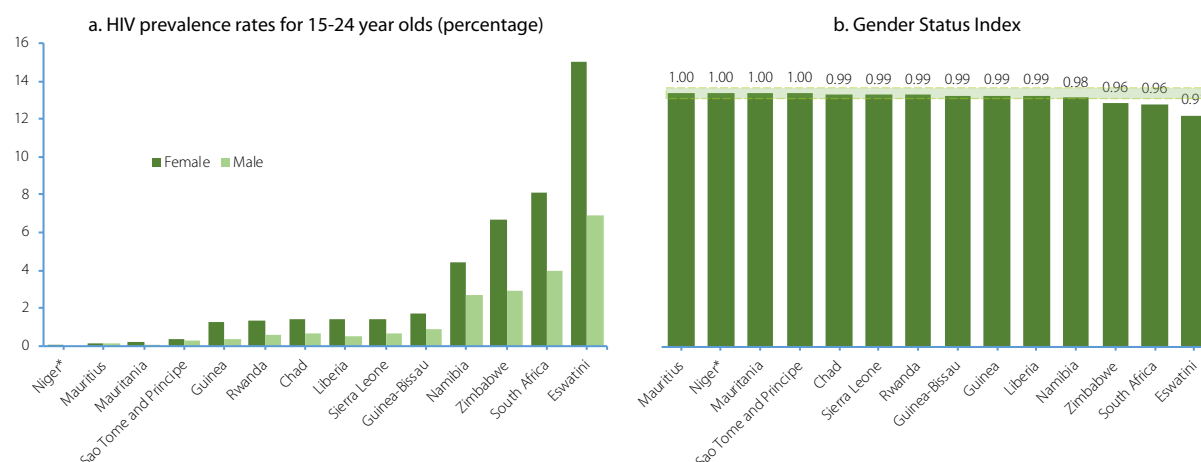
HIV prevalence

An estimated 1.4 million new HIV infections were recorded in central, eastern, southern and western Africa in 2015, bringing the total number of people living with HIV in those regions to almost 26 million. Eastern and southern Africa subregion experienced the largest reduction in new adult HIV infections between 2010 and 2015 of approximately 40,000 or a 4 per cent decline. In sub-Saharan Africa, adolescent girls and young women accounted for 25 per cent of new HIV infections among adults, and women accounted for 56 per cent of new HIV infections among adults (Joint United Nations Programme on HIV/AIDS [UNAIDS], 2016a).

There is gender parity for all countries with data, with GSI between 0.97 and 1.03 for all countries except Eswatini (GSI = 0.91) and South Africa and Zimbabwe (GSI = 0.96) in terms of prevalence of HIV infection among young people aged 15–24 years (see figure 5.IV(b)). The prevalence of HIV infection was 1 per cent or less for both sexes in Mauritania, Mauritius, the Niger and Sao Tome and Principe; 1 per cent or less for adolescent boys and young men and above 1 per cent for their female counterparts in Chad, Guinea, Guinea-Bissau, Liberia, Rwanda and Sierra Leone (see figure 5.IV(a)). Eswatini, Namibia, South Africa and Zimbabwe have HIV prevalence rates of above 2 per cent for both sexes, with rates of 7 per cent, 8 per cent and 15 per cent for females in Zimbabwe, South Africa and Eswatini, respectively. Eswatini had the highest reported adult prevalence of HIV infections in the world in 2015 with a rate estimated at 28.8 per cent.¹⁰⁷

¹⁰⁶ African Union (2003, article 14 (1)(d) and (e)).

¹⁰⁷ See, s.org/en/regionscountries/countries/eSwatini.

Figure 5.IV (a) HIV prevalence for 15–24 year olds by sex and (b) Gender Status Index, 2012–2015


Source: ECA analysis based on data from published and draft national reports on AGDI for Eswatini, Mauritius and South Africa, Demographic Health Surveys for Chad, 2014; Guinea, 2012; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; Sierra Leone, 2013; and Zimbabwe, 2015; and UNICEF Country Reports for Guinea-Bissau, Mauritania and Sao Tome and Principe.

Note: * figure for the Niger is weighted average of prevalence rate for 15-19 and 20-24 age groups.

Source: ECA analysis based on data from published and draft national reports on AGDI for Eswatini, Mauritius and South Africa, Demographic Health Surveys for Chad, 2014; Guinea, 2012; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; Sierra Leone, 2013; and Zimbabwe, 2015; and UNICEF Country Reports for Guinea-Bissau, Mauritania and Sao Tome and Principe.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

The prevalence of HIV infection for adolescent girls and young women between 15 and 24 years of age was higher than for males in the same age group for all countries (see figure 5.IV(a)). The prevalence rate of HIV infection for adolescent girls and young women is more than twice that for their male counterparts in Eswatini, Guinea, Liberia, Rwanda and Zimbabwe. According to the South African National HIV Prevalence, Incidence and Behaviour Survey 2012, the estimated prevalence of HIV infection among females between 15 and 19 years of age (5.6 per cent) was eight times that of males in the same age group, while that of females between 20 and 24 years of age was estimated at 17.7 per cent, compared with 5.1 per cent for their male counterparts (Shisana, and others, 2014). In Guinea and Eswatini, adolescent girls between 15 and 19 years of age are more than five times likely to be infected by HIV than boys (UNAIDS, 2015).

The main factors that increase the risk and susceptibility of adolescent girls and young women to HIV infection are prevalence of relationships between young women and older men, early sexual debut, intimate partner violence, unwanted and forced sexual activity, lack of access to information about HIV and health services, limited access to and use of condoms, and biological makeup of females that exposes them to more infection than males (Shisana, and others, 2014; Dellar, Dlamini and Karim, 2015). The percentages of adolescent girls between 15 and 19 years of age who reported having sexual relationships in the previous 12 months with someone at least 10 years older than them were: Sierra Leone (22 per cent), Sao Tome and Principe (32 per cent), Chad (38 per cent), the Niger (41 per cent) and Guinea (50 per cent).¹⁰⁸ Other reasons noted in the national reports on AGDI are: cultural beliefs that one man, whether married or not, can have sexual intercourses with several female partners; female economic dependence on males, which can reduce women's ability to negotiate for the use of condoms when having sexual relations; limited awareness on current legal measures in place protecting women's rights; inadequacies of laws prohibiting gender-based violence; and poor implementation of laws where they exist.

108 Demographic and Health Surveys (various years).

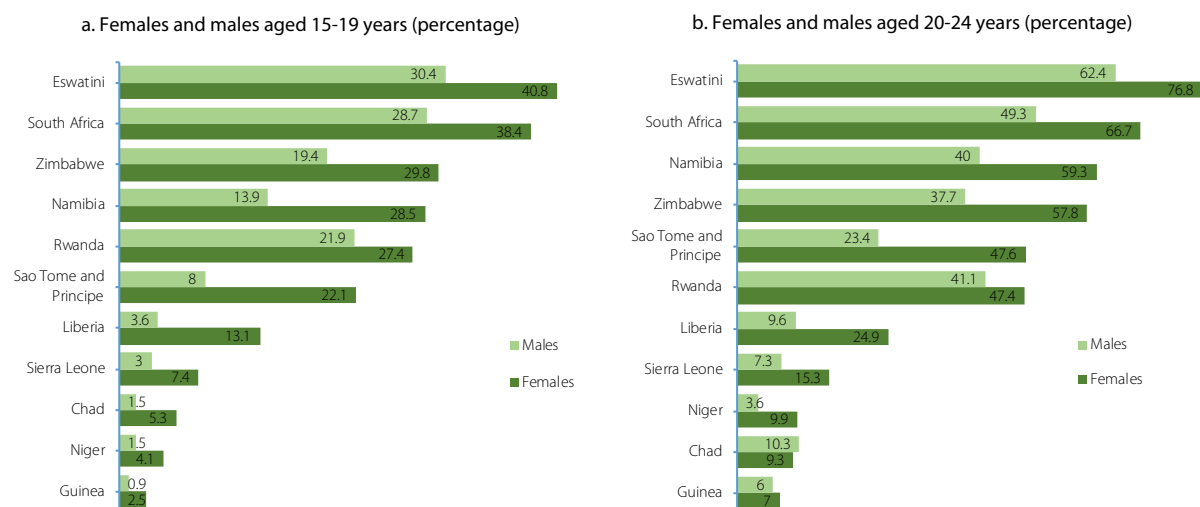


Another factor that may explain the higher reported prevalence of HIV infection in young females is that more women than men present themselves for HIV tests. Data from Demographic and Health and Multiple Indicator Cluster Surveys show that, except for Chad, a greater percentage of adolescent and young females have tested for HIV and received their results than their male counterparts (see figure 5.V). This can partly be explained by the fact that pregnant women are having more opportunities for HIV testing as part of the integration of HIV services with antenatal care in many countries. In addition, men are more likely to work outside the home and are therefore less likely to be targeted by HIV community outreach and awareness-raising campaigns. Other contributors to low rates of testing for both women and men are the stigma associated with HIV testing, fear of testing and knowing one's HIV status, and a poor understanding of the risk to HIV infection (The Lancet, 2015). As an example of the latter, research undertaken in Eswatini in 2015 found that those who reported few sexual partners felt that they were not at risk of HIV infection given the perception that HIV is linked to prostitution (Horter, and others, 2017).

Figure 5.V(a) also shows that a lower percentage of adolescents between 15 and 19 years of age having tested for HIV and received their results, than young people between 20 and 24 years of age for both males and females (see figure 5.V(b) for all countries with available data).

In addition to adolescent girls and young women, other specific populations are at higher risk of being infected with HIV. According to Demographic and Health Surveys for Chad, Guinea, Liberia, Namibia, Rwanda and Sierra Leone, the HIV prevalence among young people between 15 and 24 years of age is higher in urban areas than in rural areas for both sexes. In Seychelles, although the prevalence of HIV infection among the general population is low (0.87 per cent), it is high among men who have sex with men (13.2 per cent), people who inject drugs (5.8 per cent) and female sex workers (4.6 per cent) (National Aids Council, 2015). In 2015, the prevalence of HIV infection for people who inject drugs, female sex workers, men who have sex with men and prison inmates in Mauritius were 44 per cent, 22 per cent, 20 per cent and 22 per cent, respectively (Mauritius, Ministry of Foreign Affairs, Regional Integration and International Trade, 2015).

Figure 5.V (a) Share of females and males aged 15–19 years and (b) females and males aged 20–24 who have been tested for HIV in the past 12 months and received their results



Source: ECA analysis based on data from Demographic Health Surveys for Chad, 2014; Guinea, 2012; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Sao Tome and Principe, 2014; and Sierra Leone, 2017.

Source: ECA analysis based on data from Demographic Health Surveys for Chad, 2014; Guinea, 2012; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Sao Tome and Principe, 2014; and Sierra Leone, 2017.

The prevalence of HIV infection among female sex workers was upwards of 30 per cent in Eswatini, Guinea-Bissau, Rwanda, South Africa and Zimbabwe, 9.8 per cent in Liberia in 2013, and 6.7 per cent in Sierra Leone in 2015. In South Africa, a survey undertaken in 2013 and 2014 estimated that HIV prevalence among female sex workers was 71.8 per cent in Johannesburg, 39.7 per cent in Cape Town and 53.5 per cent in Durban. Although high risk behaviour explains in part the higher prevalence of HIV infections for those population groups, the criminalization of commercial sex, violence against sex workers that goes unreported, the stigma associated with sex work and discrimination, all contribute to ensure that sex workers do not have access to HIV services (The Lancet, 2015; UNAIDS, 2016b; National Aids Commission, 2017; National AIDS Council, 2015; University of California-San Francisco, and others (2015).

Access to antiretroviral therapy

There is no cure for HIV infection; however, timely access to antiretroviral treatment substantially reduces mortality from HIV infections, prevents illness by reducing the risk of tuberculosis infection in people living with HIV, and allows working-age adults living with HIV to return to work earlier. In addition, strong adherence to the treatment greatly reduces the risk of transmitting the virus to others by up to 96 per cent (UNAIDS, 2013).

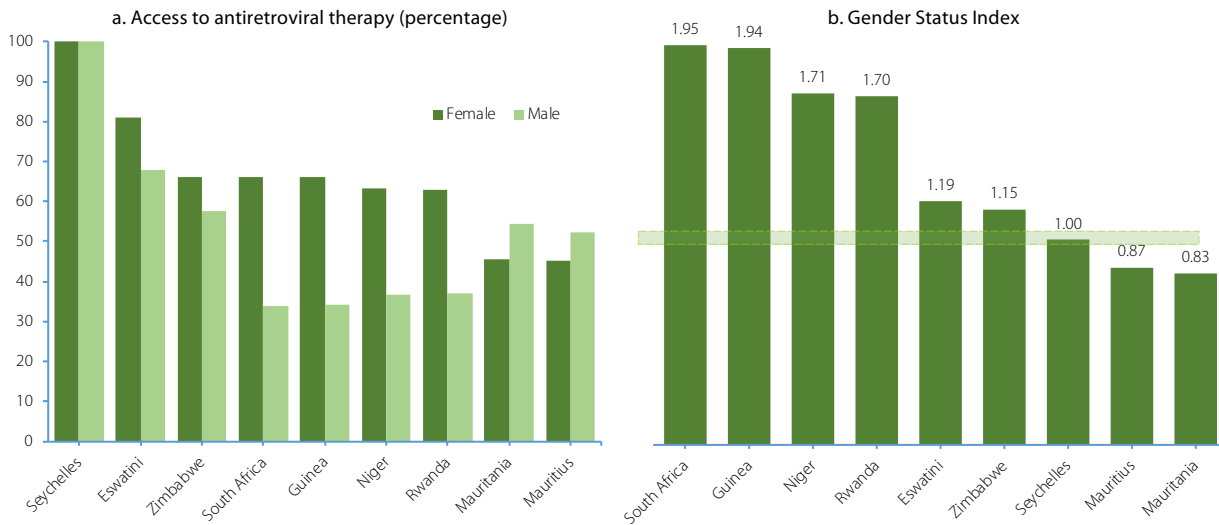
The Eastern and Southern Africa subregions have seen an increase in the coverage of the antiretroviral treatment from 24 per cent in 2010 to 54 per cent in 2015. In South Africa, which has the largest treatment programme in the world, 3.7 million people living with HIV had initiated this treatment in 2017, compared with 1.3 million in 2008. Approximately 133,574 adults and adolescents in Rwanda were receiving the treatment by June 2014, an increase of 60 per cent, compared with 2010 (UNAIDS, 2016a; South African National AIDS Council (2017); The Lancet, 2015; Rwanda, Ministry of Health, 2014).

In all countries where data are available, a higher proportion of females have access to the antiretroviral treatment, compared with men, except for Mauritania and Mauritius. Both men and women have 100 per cent access to the treatment in Seychelles (see figure 5.VI). Gender disparities in favour of females are significant in Guinea, Guinea-Bissau, the Niger, Rwanda and South Africa in that the percentage of females who have access to the treatment is at least 1.7 times more than their male counterparts. In South Africa, deaths due to HIV dropped from 681,434 in 2006 to an estimated 150,375 in 2016, partly as a result of the expanded access to the antiretroviral treatment. Consequently, the median age at death rose from 41.7 years for females and 43.4 years for males in 2004 to 60 years for females and 52.1 years for males in 2015 (South African National Aids Council, 2017; Statistics South Africa, 2017).

As discussed above, women are more likely than men to undertake HIV testing. Consequently, women are more likely to know their HIV status and have access to the treatment. In addition to this, males tend to initiate the treatment a bit later than women. For example, in Eswatini, 54 per cent of women initiating the treatment while in stage 1 – the earliest stage of HIV infection – of HIV, compared with 37 per cent of men, and 31 per cent of males initiating treatment in stages 3 and 4, compared with approximately 20 per cent of women (Eswatini, Ministry of Health, 2015). This state of affairs reduces the preventive effects of treatment and may lead to more AIDS-related deaths among men.



Figure 5.VI (a) Access to antiretroviral therapy by sex and (b) Gender Status Index



Source: ECA analysis based on data from published and draft national reports on AGDI.

Source: ECA analysis based on data from published and draft national reports on AGDI.

Notes: Highlighted area represents gender parity with an index between 0.97 and 1.03.

A growing set of interventions has been developed for the prevention and treatment of HIV infections. The main interventions include: prevention of mother-to-child-transmission programmes; condom promotion and distribution; expanding access to the antiretroviral treatment; voluntary male circumcision; and behaviour change programmes (The Lancet, 2015). These have to be underpinned and enabled by political commitment and advocacy, appropriate and effective laws, policies, plans and institutional mechanisms based on quality evidence, and awareness-raising campaigns. As much as possible, these HIV interventions have to be integrated into other health services. They should also target marginalized communities, including adolescent girls and young women and those subpopulations most at risk of HIV infections, such as sex workers, men who have sex with men, people who inject drugs, and prisoners.

Structural interventions are increasingly seen as important for successful HIV prevention and treatment. These interventions include empowerment programmes that promote economic opportunities for women and laws, policies and programmes that are aimed at reducing gender-based violence and HIV-related discrimination and stigma. Other important structural interventions are social protection programmes that make it worthwhile for girls to stay in or return to school, and removal of laws and policies that make it mandatory for parental and/or spousal consent in accessing sexual and reproductive rights services.

Table AV.I (see annex V) measures how far Governments have met the regional and global commitments to implement universal access to HIV prevention, treatment, care and support. Countries scored themselves high on having a plan and setting targets, followed by policy commitment, involvement of civil society, information and dissemination, and monitoring and evaluation. The overall weak areas were having laws on HIV/AIDS, human resources and capacity enhancement. Chad, Mauritius Sao Tome and Principe and Seychelles scored themselves very high on this issue, while Sierra Leone scored itself lowest at 50 per cent.

Most national HIV/AIDS plans aim to meet UNAIDS 90-90-90 fast track targets by 2020, to diagnose 90 per cent of all people living with HIV, to treat 90 per cent of all people with an HIV diagnosis with sustained antiretroviral treatment, and 90 per cent of all people receiving this treatment to achieve viral suppression. A synthesis undertaken in 2015 by UNAIDS and the World Bank in 18 countries in Eastern and Southern Africa, found that Mauritius, Namibia, Rwanda, South Africa, Eswatini and Zimbabwe all identified female

sex workers in national AIDS plans or strategies as being essential to reach with effective programme implementation.¹⁰⁹ Box 5.5 summarizes selected interventions planned by South Africa in the National Strategic Plan on HIV, TB and STIs 2017 – 2022 towards HIV prevention and treatment.

Box 5.5 Planned HIV prevention and treatment interventions in South Africa

In 2016, an estimated 270,000 people in South Africa became newly infected with HIV. Approximately 40 per cent of people living with HIV are still unaware of their status and the 3.7 million receiving antiretroviral treatment represent a little more than half of those who are eligible. It is estimated that a quarter of patients receiving treatment is lost to follow up within the first year.

Against this backdrop, the South African National Strategic Plan on HIV, TB and STIs 2017 – 2022 was adopted in 2017 to direct and coordinate the national effort in responding to HIV, tuberculosis (TB) and sexually transmitted infections (STIs). The plan was based on wide consultations involving the Government at all levels, civil society sectors, development partners and private sector organizations.

The plan focuses on:

- High impact and targeted prevention programmes combining biomedical prevention methods, such as medical male circumcision, condom promotion and distribution, the preventive use of antiretroviral treatment and social and behaviour change communication that encourage people to reduce their risk of HIV infection.
- Achieving UNAIDS 90-90-90 targets by 2020: 90 per cent of all people living with HIV will know their HIV status; 90 per cent of all people with an HIV diagnosis will receive sustained antiretroviral therapy; and 90 per cent of all people receiving antiretroviral therapy will achieve viral suppression.
- Providing targeted services to prevent mother-to-child transmission of HIV both before and after birth.
- Specific populations that are more severely affected by HIV than the general population to overcome the barriers of having access to HIV prevention and treatment programmes. These include sex workers, transgender people, men who have sex with men, people who use drugs, and inmates of correctional facilities.
- Interventions to address social and structural factors that increase the risk of prevalence to HIV infection.
- Adolescent girls and young women, by expanding national campaigns such as She Conquers, retaining girls in school, and providing comprehensive sexuality education in schools and young people-friendly sexual reproductive health and contraception services at clinics. The objectives of the She Conquers campaign are to: decrease new HIV infections in girls and young women; decrease teenage pregnancies; increase the retention of adolescent girls and young women in school; decrease sexual and gender-based violence among adolescent girls and young women; and increase economic opportunities for young people, in particular for young women.
- Increased access to justice and the reduction of stigma associated with HIV.
- Generation and use of relevant, timely data to monitor progress on implementation and track the impact that interventions have on HIV.

Accelerating the Test and Treat approach to antiretroviral treatment, which introduces treatment for all people who test positive for HIV as soon as they are medically and emotionally ready to start. The Test and Treat model was adopted in September 2016.

Reducing stigma of people living with HIV by conducting community education programmes.

Establishing AIDS council structures at national, provincial and local level, and ensuring all stakeholders, including vulnerable and subpopulations at high risk of HIV prevention, are represented in decision-making structures at all levels.

Source: ECA analysis based on South African National AIDS Council, 2017, p. 15; and South Africa, Department of Health, 2016.

109 The other 12 countries were: Angola, Botswana, Ethiopia, Kenya, Lesotho, Madagascar, Malawi, Mozambique, South Sudan, Uganda, the United Republic of Tanzania and Zambia (UNAIDS and the World Bank Group, 2016).



5.3.2 MATERNAL MORTALITY

"States Parties shall take all appropriate measures to establish and strengthen existing pre-natal, delivery and post-natal health and nutritional services for women during pregnancy and while they are breastfeeding"

Protocol to the African Charter on Human and Peoples' Rights of Women in Africa (African Union, 2003, article 14 (2)(b)).

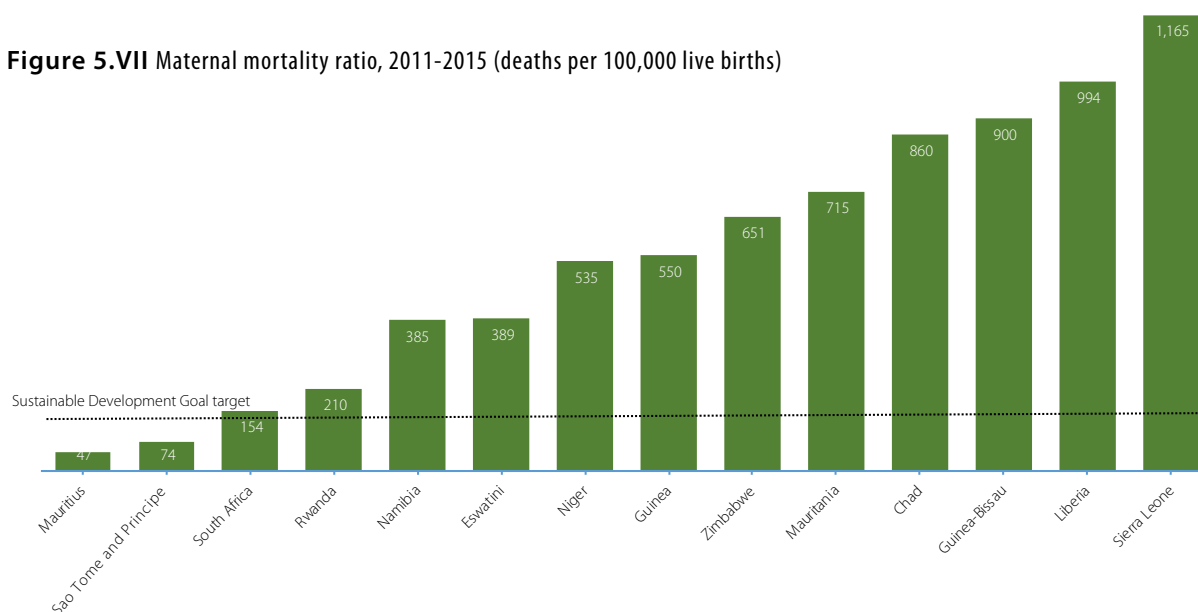
African women continue to face severe health risks associated with pregnancy and childbirth. These health risks may lead to temporary or permanent disability, and in far too many cases, to death. Estimates for 2015 show that the maternal mortality ratio for Northern Africa were 70 per 100,000 live births and for sub-Saharan Africa 546 per 100,000 live births, representing declines of 59 per cent and 45 per cent, respectively, since 1990.¹¹⁰ Africa accounted for 62 per cent of all maternal deaths in 2015.

Seychelles registered only four cases of maternal death in the period 2006–2015. At 53 and 138 deaths per 100,000 live births, respectively, Mauritius and South Africa have met the target for maternal mortality in Sustainable Development Goal 3 (see figure 5.VII). Rwanda met the Millennium Development Goal to reduce maternal mortality by 75 per cent between 1990 and 2015 by reducing its ratio by 78 per cent from 1,300 in 1990 to 290 in 2015. In addition to Rwanda, all the small island developing States and countries from Southern Africa under review with data had ratios below 500 deaths per 100,000 live births. Chad, Guinea, Guinea-Bissau, Liberia, Mauritania, the Niger and Sierra Leone all had maternal mortality ratios of above 500 in the period 2011–2015. Sierra Leone had the highest maternal mortality ratio in the world in 2015 with a ratio of 1,360.¹¹¹

Most maternal deaths in Africa are a result of haemorrhage especially after childbirth, high blood pressure during pregnancy, pre-existing medical conditions including HIV/AIDS, infections, unsafe abortions and complications from delivery (Graham, and others, 2016). In 2015, more than 10 per cent of maternal deaths were due to HIV infection in five African countries: South Africa (32 per cent), Eswatini (19 per cent), Botswana (18 per cent), Lesotho (13 per cent) and Mozambique (11 per cent) (WHO, and others, 2015).

¹¹⁰ Northern Africa includes Algeria, Egypt, Libya, Morocco and Tunisia (WHO and others, 2015).

¹¹¹ Ibid.

Figure 5.VII Maternal mortality ratio, 2011-2015 (deaths per 100,000 live births)

Source: ECA analysis based on data from published national reports on AGDI for Mauritius and South Africa, Demographic Health Survey for Chad, 2014; Guinea, 2012; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; Sierra Leone, 2013; and Zimbabwe, 2015; and Multiple Indicator Cluster Surveys Guinea-Bissau, 2014; Mauritania, 2014; and Sao Tome and Principe, 2014; and UNICEF's State of the World's Children 2017 for Eswatini.

Note: Dotted line represents the Sustainable Development Goal target for countries of 140 deaths per 100,000 live births.

Most maternal deaths are preventable. Prevention requires women having access to antenatal care, safe delivery in health facilities with the help of skilled birth attendants,¹¹² emergency obstetric care, postnatal care and support, and quality family planning services. Figure 5.VII and figure 5.VIII show that low skilled attendants at delivery is broadly associated with high maternal mortality ratios. More than 85 per cent of births were attended by skilled professionals in Rwanda, the small island developing States and countries from Southern Africa (except for Zimbabwe) with figures in excess of 90 per cent for Mauritius, Sao Tome and Principe and South Africa (see figure 5.VIII(a)). In Chad, Guinea-Bissau and the Niger, less than 60 per cent of births were delivered by a skilled birth attendant, below the target set in the Plan of Action of the International Conference on Population and Development (see box 5.1).

A number of socioeconomic, demographic and structural factors conspire to ensure that women do not have access to the maternal health care they need in order to prevent deaths. Similar to child mortality, these include poverty, having to travel long distances to reach health facilities, poor transportation infrastructure, lack of information on when to seek care, inadequate health facilities, shortages of quality equipment and trained midwives, doctors or nurses to provide the care during labour, delivery and just after birth and cultural attitudes that prevent women from travelling or that cause women to work until immediately prior to and after delivery. These factors are especially important for women in rural and remote areas.

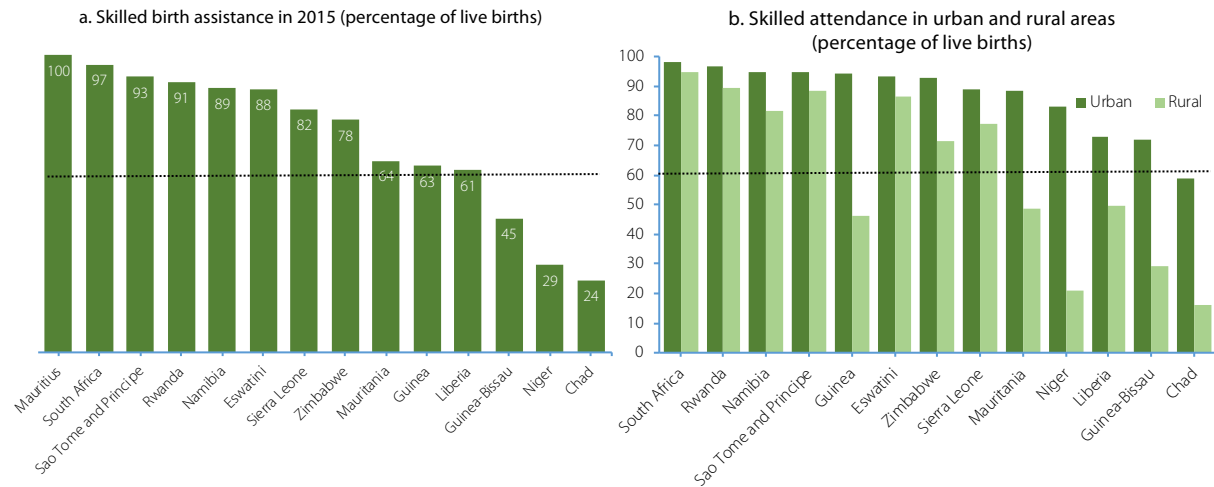
Using data from recent Demographic and Health, and Multiple Indicators Cluster Surveys for countries covered by the present report, a lower percentage of births are assisted by skilled birth attendants in rural areas than in urban areas (see figure 5.VIII(b)). The urban-rural differential is especially significant in Guinea (2.0 times), Guinea-Bissau (2.5 times), Chad (3.7 times) and the Niger (3.9 times) where the proportion of births delivered by skilled birth attendants in urban areas is more than twice that for rural areas (see figure 5.VIII(b)). The urban-rural differential is 3.4 per cent in South Africa, 6.8 per cent in Sao Tome and Principe and 7.7 per cent in Rwanda.

112 WHO classifies skilled birth attendants as "an accredited health professional — such as a midwife, doctor or nurse — who has been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate postnatal period, and in the identification, management and referral of complications in women and newborns" (WHO, 2004, p.1).



Box 5.6 gives a summary of a number of steps that the selected African countries have taken to reduce maternal deaths.¹¹³ The steps taken were organized under the five strategic objectives proposed by WHO for reducing maternal mortality.

Figure 5.VIII (a) Skilled birth attendance (percentage of live births) and (b) skilled attendance in urban and rural areas (percentage of live births)



Source: ECA analysis based on data from Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; Multiple Indicator Cluster Surveys for Eswatini, 2014; and Sierra Leone, 2017; and UNICEF/WHO joint database on skilled attendance at birth (Mauritius).

Note: Dotted line represents ICPD target of 60 per cent (see box 5.I).

Source: ECA analysis based on data from Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; and Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2011; Sao Tome and Principe, 2014; and Sierra Leone, 2017.

Note: Dotted line represents ICPD target of 60 per cent (see box 5.I).

113 This section is based on findings from the AGDI National Reports. Other sources consulted are referenced separately where appropriate.

Box 5.6 Strategies for reducing maternal mortality

Most maternal deaths occur during labour, delivery and in the first 24 hours following childbirth. In order to prevent maternal deaths, all women need to have access to antenatal care during pregnancy, skilled care during childbirth, and care and support in the weeks after childbirth. Antenatal care allows for the screening and detection of early signs of or risk factors for disease, followed by timely intervention to reduce maternal and infant mortality and morbidity. Antenatal care also promotes birth preparedness and serves as a means to distribute antimalarial drugs and antiretroviral therapy. WHO recommends that all women should have at least four antenatal care visits. Skilled care during childbirth is best provided when women deliver in health facilities with the assistance of midwives and the help of other attendants. This is important for safety, primary prevention, and early detection and management of problems, including life-threatening ones. In addition, the provision of affordable and quality family planning services and, where abortion is legal, safe abortion services, to allow women to delay pregnancy, space births, avoid unintended pregnancies and reduce unsafe abortions are important to reduce maternal deaths.

WHO has proposed the following five strategic objectives for reducing maternal deaths:

- Address inequities in access to and quality of reproductive, maternal and newborn health-care services;
- Ensure universal health coverage for comprehensive reproductive, maternal and newborn health care;
- Address all causes of maternal mortality, reproductive and maternal morbidities, and related disabilities;
- Strengthen health systems to respond to the needs and priorities of women and girls;
- Ensure accountability in order to improve quality of care and equity.

Source: *ECA analysis based on Campbell and Graham, 2006; WHO, 2015 and 2016b.*

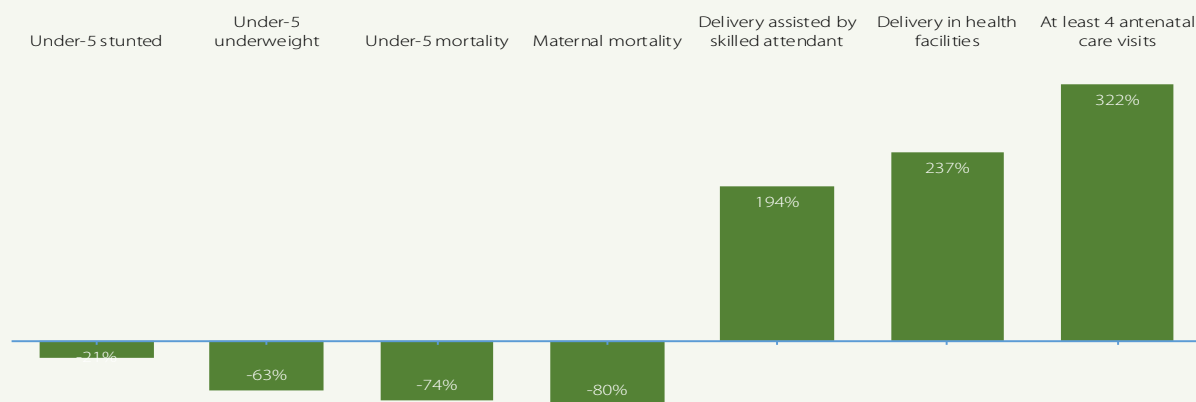
Ensure universal health coverage for, and address the inequities in having access to and quality of sexual, reproductive, maternal and newborn health care. Health services in public health facilities are free at the point of use to all citizens of Mauritius and Seychelles. Public health-care services for pregnant women, lactating mothers and children under 5 years of age have been free in South Africa, the Niger and Sierra Leone since 1994, 2006 and 2010, respectively. The National Sexual and Reproductive Health Strategy and Plan of Action 2017–2020 of Mauritius have family planning, safe motherhood, infant and child health and adolescent and young people's sexual and reproductive health among its components. In Seychelles, the maternal and child health programme ensures that appropriate ante- and post-natal care is available to all women in regional centres throughout the country. In Rwanda, the Health Sector Strategic Plan III (2012–2018) is aimed at ensuring the universal accessibility of quality health services for all Rwandans. This involves a comprehensive and community-based health insurance scheme to ensure that vulnerable populations have access to primary health care with a focus on reproductive, maternal, newborn and child health services. Community health workers are in charge of maternal and newborn health in the Niger (see box 5.3), Sierra Leone (see box 5.4) and Rwanda (see box 5.7) in remote and rural areas as part of a decentralized health system. Eswatini has accelerated enrolment opportunities to antiretroviral therapy by decentralizing services to lower level facilities, integrating HIV into other programmes, such as Maternal Child Health service and the tuberculosis programme.

Box 5.7 Interventions to reduce child and maternal deaths in Rwanda

In response to high rates of child and maternal mortality, the Government of Rwanda implemented major health sector reforms that prioritized reproductive, maternal, newborn and child health. The following reforms were the main ones implemented:

- The community-based health insurance. The scheme known as Mutuelle de Santé was piloted in 1999 and extended nationally in 2006 through a network of 30 district-based mutuelles aimed at reducing excessive out-of-pocket payments. By 2012, 90 per cent of the population was enrolled in the scheme. Services covered by the scheme include antenatal care, deliveries, emergency obstetric and neonatal care, family planning, laboratory tests and essential drugs, and ambulance transport;
- Health workforce development. Rwanda established elected female community health workers who are in charge of maternal and newborn care. The tasks of the community health worker include: identifying and registering women of reproductive age, promoting family planning services utilization, identifying pregnant women in the community, and encouraging them to utilize antenatal care services, especially all four visits to achieve birth preparedness and delivery at health facilities. The community health worker even accompanies women in labour to health facilities to help them to get delivery assistance by qualified personnel. Pregnant women are tested for HIV/AIDS as one of the antenatal care services provided;
- Performance-based financing. Health facility staff and community health workers receive financial incentives in addition to their monthly salaries. The incentives are based on a number of indicators, including the proportion of women delivering at health facilities, the percentage of children receiving a full course of basic immunizations;
- Outcomes monitored using evidence. A web-based Health Management Information System has been developed in 2007 to inform health-sector strategic plans, monitor results, assess progress and facilitate priority setting, planning and resource allocation;
- Use of technology. All community health workers have mobile phones that are linked to a central Ministry of Health server by RapidSMS, an information tracking tool that uses short-message-service text messages. Using this tool, the community health workers stay connected with pregnant women, monitor antenatal care, identify and refer women at risk and alert the nearest health facility in case of an emergency, and report births and maternal and child deaths.

These reforms have contributed to significant improvements in health outcomes (see the graph below) Improvement in selected child and maternal health indicators in Rwanda, 2000–2015



Source: ECA analysis based on published and draft national reports on AGDI; Rwanda, Ministry of Health and others, 2015; National Institute of Statistics of Rwanda and others, 2012 and 2015.

Address all causes of maternal mortality, reproductive and maternal morbidities, and related disabilities. In Seychelles, an antenatal programme follows mothers and their pregnancies, providing dental care, voluntary counselling and testing for HIV and other blood-borne diseases such as Hepatitis C. Antiretroviral treatment is available to all pregnant women who are HIV positive to prevent progression to AIDS and transmission to the child. High risk pregnancies are referred to antenatal specialized referral points at Victoria or Praslin Hospitals. Early booking for antenatal care is encouraged, with the aim of more than 95 per cent of women booked within the first 10 weeks of pregnancy. All women receive a postnatal home visit within 2 weeks of delivery by a midwife at community level. Almost 100 per cent of births are attended to by trained and skilled health staff in Mauritius (see figure 5.VIII) and all maternal deaths are investigated and recommendations made in order to prevent any such death. In South Africa, the National Committee for Confidential Enquiry into Maternal Deaths was initiated in 1998 to investigate the causes of maternal mortality and offer recommendations for reducing maternal mortality. Rwanda undertakes maternal death reviews in three forms: facility-based audits, verbal autopsies (community-based reviews) and confidential enquiries. Drones are used for quick transportation of blood to health facilities in remote areas; blood loss is the leading cause of death for pregnant women. In South Africa, 2,967 doctors and 6,776 professional nurses have been trained in the management of obstetric haemorrhaging in particular, which continues to be a major cause of maternal mortality.

Strengthen health systems to respond to the needs and priorities of women and girls. In Mauritius and Seychelles, almost 100 per cent of births are attended to by trained and skilled health staff. The Niger and Rwanda recruited community health workers and trained them to provide essential health services at the village level. In Rwanda, there is a single integrated monitoring and evaluation framework for maternal and child health services (see box 5.7). Nationwide Internet access and rapid SMS technology was developed to facilitate communication between the various stakeholders in the community health system.

Ensure accountability to improve quality of care and equity. In Rwanda, health facilities and community health workers are rewarded financially based on a number of indicators (see box 5.7). Each pregnancy is registered, the parents educated, and the couple urged to seek prenatal, safe delivery, and postnatal care and family planning services, including effective engagement with community health workers. Various community committees verify health facility activity reports and provide feedback on health service provision (Rwanda, Ministry of Health, and others, 2015). In South Africa, the National Committee for Confidential Enquiry into Maternal Deaths produces regular Saving Mothers reports on the causes of maternal deaths and recommendations for their reduction.

Table AV.2 (see annex V) shows that in general, countries score themselves high for policy commitment, development of a plan, targets, institutional mechanism and involvement of civil society in reducing maternal mortality. Budget and human resources are weak areas. There is a fairly strong correlation between the African Women's Progress Scoreboard scores and the maternal mortality ratio, with Sao Tome and Principe, Seychelles and Mauritius scoring very high and Sierra Leone having the lowest score with 50 per cent. Notwithstanding its high maternal mortality ratio, Chad also scores at the maximum (100 per cent) on this dimension of the Progress Scoreboard. Box 5.8 highlights the health-related gender issues raised by the Ebola epidemic that affected Guinea, Liberia and Sierra Leone in 2014.

Box 5.8 Gender aspects of the Ebola outbreak in Guinea, Liberia and Sierra Leone

The Ebola epidemic affected Guinea, Liberia and Sierra Leone in 2014. For women, the effects included direct impacts on their health and lives because of the added responsibilities in their traditional roles in caring for the sick and dying. In addition, the Ebola outbreak affected women through the loss of livelihoods attributable to reduced productivity in agriculture, trade (including cross-border trade), small businesses and service sector activities. Maternal deaths increased because of reduced antenatal and neonatal care. In addition, gender gaps in education widened with school closures and because of girls' increased dropout rates, owing to teenage pregnancies and early marriages. The responsibility to care for the Ebola-orphaned children also falls on women. Toward the end of 2014, it was estimated that there were more than 30,000 Ebola-orphaned children in the three countries.

Source: UNDP, 2016b.

5.3.3 FAMILY PLANNING

"States Parties shall ensure that women have "the right to control their fertility; the right to decide whether to have children, the number of children and the spacing of children; the right to choose any method of contraception; ... the right to have family planning education."

Protocol to the African Charter on Human and Peoples' Rights of Women in Africa (African Union, 2003, article 14 (1)(a), (b), (c) and (f)).

Having access to family planning services is important in fertility planning, the prevention of childhood and maternal mortality and mother-to-child transmission of HIV, as it facilitates in reducing the risk of HIV infections, unwanted pregnancies and the number of unsafe abortions, and improving women's educational and economic prospects. This is especially important for adolescent girls who face increased risks of death in childbearing, their children are at higher risks of dying in childhood, and along with young women, face a higher risk of being infected with HIV. A survey undertaken by UNDP concluded that a 10 per cent increase in adolescent birth rate increases maternal mortality by about 2 per cent.¹¹⁴

As with their achievement in meeting commitments on maternal mortality, countries scored themselves high on policy commitment, development of a plan, targets, institutional mechanism and involvement of civil society in providing quality family planning services (see annex V, table AV.3). Weak areas were law, budget, human resources, capacity enhancement and accountability/transparency. Chad, Mauritius, Sao Tome and Principe and Seychelles scored themselves 100 per cent on this indicator, while Sierra Leone and South Africa scored themselves less than 60 per cent. Box 5.9 highlights the evolution of family planning policies in Mauritius and Sierra Leone.

¹¹⁴ UNDP (2016b, p. 36).

Box 5.9 Family planning in Mauritius and Sierra Leone

Mauritius was one of the first countries in Africa to formulate a population policy in the early 1970s. It now has the highest contraceptive prevalence rate and lowest unmet need for family planning in Africa. At first, because of the religious diversity of the population, the Government decided not to become directly involved in family planning activities but rather to encourage private, voluntary organizations to promote family planning. The Mauritius Family Planning and Welfare Association (MFPWA), which was established in 1957, introduced contraception in 1958. In addition, a private Catholic organization, Action Familiale, was established in 1962 to encourage the use of natural family planning methods only. MFPWA was given official status in 1967 and in 1969 the Government established nationwide family planning services. In 1972, MFPWA was absorbed by the Government and the family planning programme was integrated into the State maternal and child health programme.

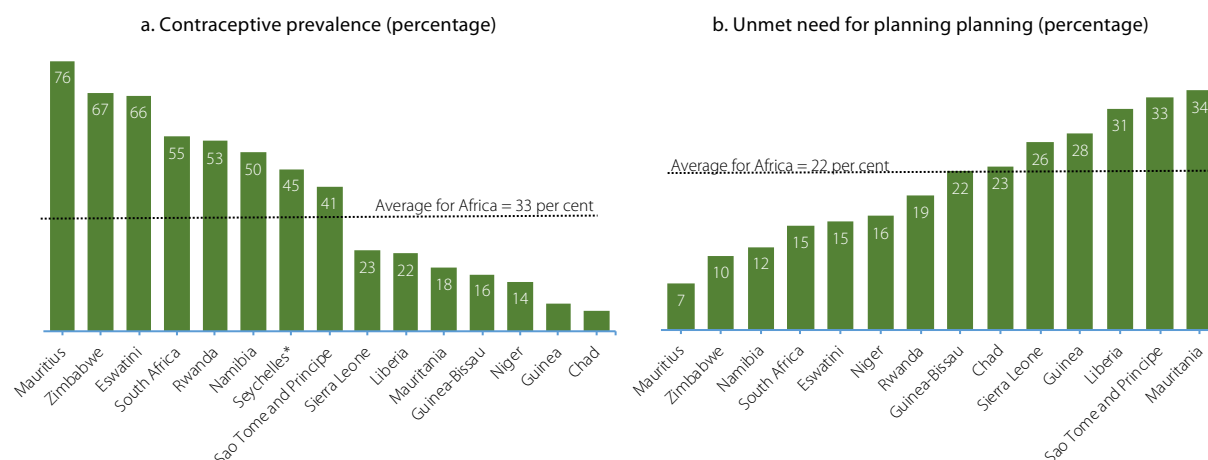
The results of the programme have been significant. Fertility has declined by approximately two thirds and is presently below replacement level, whereas the total fertility rate in the early 1970s was approximately six children per woman. Several factors have contributed to this rapid fertility decline. The small size of the country rendered the issue of overcrowding a threat to economic and social stability. In addition, private family planning agencies and then public agencies conducted widespread campaigns, influencing public opinion through the press and other media. To date, Mauritius has the highest contraceptive prevalence rate in Africa.

Sierra Leone has one of the highest maternal mortality rate in the world (see section 5.3.2). The unmet need for family planning was 26 per cent in 2015 (see figure 5.IX(b)) and to date, is not on track to meet its goal of reducing unmet need to 10 per cent by 2020. The main reasons for this relatively high unmet need are unawareness of contraceptive methods, high cost, lack of access, and concern about side effects or health issues as reasons why they do not currently use contraception. The country's plan to achieve the goal on unmet need lacks detail and is not thorough. Sierra Leone lacks specific information regarding unmet need for contraception broken down by specific regions or areas of the country, making it difficult to ascertain the family planning situation in rural, hard-to-access, and marginalized communities. This information would be useful both to the Government and non-governmental organizations working to improve access to contraception, such as Marie Stopes International and Family Planning 2020.

Source: ECA analysis based on data from national report on AGDI for Mauritius, 2017; ECA and others, 2016; and Sochacki, 2018.

Countries covered by the report from Central and West Africa have relatively low contraceptive prevalence rates (see figure 5.IX(a)). Rwanda, the small island developing States and Southern African countries have relatively high prevalence rates of 33 per cent, above the average for Africa with Mauritius recording a high of 76 per cent. Mauritius, the four Southern African countries, Rwanda and the Niger have unmet need for family planning below 20 per cent (see figure 5.IX(b)). The countries from Central and West Africa, except Guinea-Bissau and the Niger, have unmet need for family planning above the African average of 22 per cent, with Mauritania having the highest rate at 34 per cent.

Figure 5.IX (a) Contraceptive prevalence and (b) unmet need for family planning, 2015



Source: ECA analysis based on data from Seychelles AGDI report, Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2015; Sao Tome and Principe, 2014; and Sierra Leone, 2017; and UNDESA, 2015 (Mauritius).

Note: *Rate for Seychelles for 2014; Contraceptive prevalence = percentage of women currently using any method of contraception among all women age 15 to 49 years who are married or in a union.

Source: ECA analysis based on data from Demographic Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; South Africa, 2016; and Zimbabwe, 2015; Multiple Indicator Cluster Surveys for Eswatini, 2014; Guinea, 2016; Guinea-Bissau, 2014; Mauritania, 2015; Sao Tome and Principe, 2014; and Sierra Leone, 2017; and UNDESA, 2015 (Mauritius).

Note: Unmet need for family planning = percentage of married or in-union women aged 15 to 49 years who want to stop or postpone childbearing but who report that they are not using any method of contraception to prevent pregnancy.

Even if all the countries covered by this report have policies to reduce adolescent fertility in 2013, adolescent girls often face significant barriers to gaining access to and use of sexual and reproductive information, goods and services. The chief barriers include laws and policies that place age restrictions on accessing these services, along with social norms that hinder their ability to seek information about their sexual and reproductive health, early marriage and sexual coercion and violence. These barriers have contributed to an increase in teenage pregnancies (Department of Economic and Social Affairs, 2015; OHCHR (n.d.); Chandra-Mouli, and others, 2017).

In South Africa, young people under 12 years of age need their parents' consent to use these services; the corresponding age for both Eswatini and Zimbabwe is 16 years of age and 18 years of age for Seychelles (UNFPA [n.d.]; draft national report on AGDI for Seychelles). Table 5.3 shows that the percentage of girls between 15 and 19 years of age have begun childbearing in Chad, Guinea, Liberia and the Niger were above 30 per cent.

Table 5.3 Percentage of adolescent girls between 15 and 19 years of age who have begun bearing children, 2006–2016

Less than 10 (percentage)	Between 10 and 20 (percentage)	Between 20 and 30 (percentage)	Between 30 and 40 (percentage)	More than 40 (percentage)
Rwanda: 7.3	South Africa: 15.6 Eswatini: 17.4 Namibia: 18.6	Sao Tome and Principe: 20.6 Zimbabwe: 21.6 Sierra Leone: 23.3	Guinea: 30.7 Liberia: 31.3 Chad: 35.9	Niger: 40.4

Source: ECA analysis based on data from Demographic and Health Surveys for Chad, 2014; Liberia, 2013; Namibia, 2013; the Niger, 2012; Rwanda, 2014/15; and Multiple Indicator Cluster Surveys for Eswatini, 2016; Guinea, 2016; and Sierra Leone, 2017.

As with having access to HIV services discussed above, an important gender issue regarding family planning services is that men are less likely to use these services, compared with women. As discussed in the draft national report on AGDI for Rwanda, this can be partly explained by gender norms that perceive men who are concerned about their health as weak. A study undertaken in Eswatini reported that men indicated a lack of privacy and confidentiality as barriers to accessing sexual and reproductive services, especially if the provider was a young female (Integra, 2014).

5.3.4 SAFE ABORTIONS

"State Parties shall take appropriate measures to protect the reproductive rights of women by authorising medical abortion in cases of sexual assault, rape, incest, and where the continued pregnancy endangers the mental and physical health of the mother or the life of the mother or the foetus."

Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (African Union, 2003, article 14 (2)(c)).

Ensuring that people have universal access to sexual and reproductive health-care services, including contraceptive services, would help women to avoid unintended pregnancies and the need for abortion. However, given that no contraception method is 100 per cent effective and that women may not want to carry a pregnancy to term as in the case of rape, women need to have access to safe abortion services (WHO, 2012). Otherwise, seeking abortion may resort to women undergoing unsafe procedures that put them at risk of physical harm.

Guaranteeing safe abortions is in line with the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (the Maputo Protocol). Chad, Mauritius, the Niger, Sao Tome and Principe and Sierra Leone have not ratified the Maputo Protocol (see chapter 2, table 2.1 in the section on women's rights). Table 5.4 shows the legal grounds on which abortion is permitted in the 15 countries covered by the report in 2017.

Table 5.4 Legal grounds on which abortion is permitted, 2017

	On request	Economic or social reasons	Foetal impairment	Rape	Incest	Intellectual or cognitive disability of the woman	Mental health	Physical health	Health	Life
Chad	x	x	✓	x	x	x	x	x	✓	✓
Eswatini	x	x	✓	✓	✓	x	✓	✓	x	✓
Guinea	x	x	✓	✓	✓	x	x	x	x	✓
Guinea-Bissau	x	x	x	x	x	x	x	x	x	x
Liberia	<i>i</i>	<i>i</i>	✓	✓	✓	<i>i</i>	✓	✓	<i>i</i>	<i>i</i>
Mauritania	x	x	x	x	x	x	x	x	x	x
Mauritius	x	x	✓	✓	x	x	✓	✓	x	✓
Namibia	x	x	✓	✓	✓	✓	✓	✓	x	✓
Niger	x	x	✓	x	x	x	x	x	✓	✓
Rwanda	x	x	✓	✓	✓	x	x	x	✓	✓
Sao Tome and Principe	✓	x	✓	✓	✓	x	✓	✓	x	✓
Seychelles	<i>i</i>	<i>i</i>	✓	✓	✓	✓	✓	✓	<i>i</i>	✓
Sierra Leone	<i>i</i>	<i>i</i>	<i>i</i>	<i>i</i>	<i>i</i>	<i>i</i>	<i>i</i>	<i>i</i>	<i>i</i>	<i>i</i>
South Africa	✓	✓	✓	✓	✓	✓	✓	✓	<i>i</i>	✓
Zimbabwe	x	x	✓	✓	✓	x	x	✓	x	✓

Source: ECA analysis based on data from the United Nations Department of Economic and Social Affairs and WHO Global Abortion Policies Database, 2017.

Notes: A tick (✓) indicates that abortion is permitted. A cross (x) indicates that abortion is not permitted on that specific ground. *i* means no explicit reference to an issue.



Guinea-Bissau and Mauritania do not permit abortion under any circumstances. All other countries permit abortion if the continuation of pregnancy will seriously affect the health of the unborn baby and the life of the mother. Chad and the Niger do not permit abortion in the case of either rape or incest. Chad, Guinea, the Niger and Rwanda do not permit abortion to preserve a woman's physical or mental health. Sao Tome and Principe and South Africa allow abortion upon request. In South Africa, the Choice on Termination of Pregnancy Act 1996 allows abortion on demand up to the twelfth week of pregnancy, under broadly specified circumstances from the thirteenth to the twentieth week, and only for serious medical reasons after that.

Providing safe abortions is the area among the four in this section in which countries scored themselves low in general. In particular, Chad, the Niger, Guinea, Sao Tome and Principe and Sierra Leone scored themselves less than 50 per cent with Chad and the Niger scoring 0 in all areas (see annex V, table AV.4). Seychelles and Mauritius scored themselves very high for safe abortions. In general, countries scored themselves relatively high for law, policy commitment and institutional mechanisms and relatively low on budget, setting targets and research. Box 5.10 highlights the concluding observations issued by three treaty bodies from 2013 to 2017 regarding the policies on unsafe abortions of the countries covered by this report.

Box 5.10 Concluding observations issued by treaty bodies related to abortion, 2013–2017

Eswatini: "The Committee remains concerned, however, at the high prevalence of HIV/AIDS and of clandestine abortions, which have contributed to the increase in maternal mortality in recent years. The Committee calls upon the State party: (...) (b) To step up efforts to reduce the incidence of maternal mortality, such as providing safe abortion and post-abortion care services."

Mauritania: "[T]he Committee is concerned that abortion is criminalized in the State party, even in cases of incest, rape and severe foetal impairment."

Namibia: "The Committee remains concerned ... at the high prevalence of HIV/AIDS and unsafe abortions, which have contributed to the increase in the maternal mortality ratio in the State party. The Committee is particularly concerned that, while abortion is permissible on prescribed grounds such as rape, incest, threat to the health and life of the pregnant woman and foetal malformation, pursuant to the Abortion and Sterilization Act of 1975, women still undergo complex and onerous administrative procedures to obtain approval for abortion."

Rwanda: "The Committee (...) is also concerned that: (a) Maternal mortality is further exacerbated by unsafe abortions, to which many women must resort due to the criminalization of abortion and its legalization under restrictive exceptions only, with particularly cumbersome requirements, namely a court order in cases of rape, incest or forced marriage and the authorization of two doctors, if the health of the pregnant woman or the foetus is in danger, which in practice render legal abortion inaccessible; (b) An alarming number of women are serving prison sentences for abortion, many of whom were arrested when seeking emergency health care following abortion complications."

Seychelles: "[T]he Committee is concerned about ... the increase in the number of unsafe abortions and the provision, in the Penal Code, of heavy sanctions in case of illegal abortion."

Sierra Leone: "The Committee ... notes with concern: (...) (d) The fact that the law on abortion criminalizes the procedure without providing any exception, the high incidence of sexual violence and unwanted pregnancies resulting in unsafe abortions, which account for 13 per cent of maternal mortality, and delays in adopting the abortion bill, which decriminalizes the termination of pregnancy based on various socioeconomic grounds."

South Africa: "The Committee welcomes the following legislative and institutional measures taken by the State party: (...) (f) The passing of the Choice on Termination of Pregnancy Act in 1996 and other measures designed to increase access to safe abortion resulting in a significant decrease in maternal mortality and morbidity."

Zimbabwe: "[T]he Committee is ... extremely concerned about: (...) (c) The restrictive abortion law and the lengthy procedures for authorizing abortions, which result in illegal and unsafe abortions."

Source: ECA analysis based on CEDAW Concluding Observations [Seychelles], 2013, para. 34(b); CEDAW Concluding Observations [Eswatini], 2014, paras. 34 and 35(b); CEDAW Concluding Observations [Mauritania], 2014, para. 38; CEDAW Concluding Observations [Sierra Leone], 2014, para. 32(d); CEDAW Concluding Observations [Namibia], 2015, para. 34; CEDAW Concluding Observations [Rwanda], 2017, para. 38(a)-(b); Committee on the Rights of the Child [Zimbabwe], 2016, para. 60(c); and Human Rights Council [South Africa], 2016, para. 3(f).

5.4 CONCLUDING REMARKS

The key issues emerging from the analysis of this chapter are summarized below.

Overall. The countries in the Central and Western African regions tend to have high rates of under-five stunting, underweight and mortality, low HIV prevalence rates for young people between 15 and 24 years of age, high maternal mortality ratios as a result of the relatively low percentage of births delivered in health facilities with the help of skilled birth attendants, and low contraceptive prevalence rates. Southern African countries in general tend to have moderate rates of childhood malnutrition and mortality, high HIV prevalence rates for young people between 15 and 24 years of age, moderate maternal mortality ratios and relatively high contraceptive prevalence rates. Rwanda and small island developing States combine low rates of childhood malnutrition and mortality rates, low maternal mortality rates, low HIV prevalence rates and relatively high contraceptive prevalence rates.



Child health. In general, either there is gender parity or girls are at an advantage for the child health indicators covered by AGDI. Prevalence of under-five stunting, underweight and mortality is generally high for both females and males, compared with regional and international targets especially for Central and Western African countries. To date, Seychelles meets regional targets for these indicators.

Child malnutrition. The prevalence of malnutrition, especially stunting, is generally lower for children: from the highest wealth quintiles relative to the lowest; living in urban areas, compared with those living in rural areas; with mothers who begin childbearing early; and whose mothers have a higher education compared to those with no education.

Child and maternal mortality. Countries have made tremendous progress in reducing child and maternal mortality, with Rwanda reducing its under-five mortality rate and maternal mortality ratio by 74 per cent and 80 per cent, respectively, between 2000 and 2015. The rates, however, remain high especially in the Central and Western African countries covered by the present report. The main factors keeping ratios high include poverty, having to travel long distances to reach health facilities, poor transportation infrastructure, lack of information on when to seek care, inadequate health facilities, and shortages of quality equipment and trained midwives, doctors or nurses to provide the care during labour, delivery and just after birth. These factors are especially important for children and women in rural and remote areas. The Niger, Sierra Leone and South Africa have abolished fees for health services in public health facilities for pregnant women, lactating mothers and children under 5 years of age, those services are available for free at the point of use to all citizens of Mauritius and Seychelles.

HIV/AIDS. In general, the prevalence of HIV infection for adolescent girls and young women between 15 and 24 years of age is higher than for males in the same age group. In addition to adolescent girls and young women, female sex workers are at higher risk of being infected with HIV. Women are more likely than men to undertake HIV testing, to know their HIV status and initiate antiretroviral treatment at an earlier stage, compared with men.

Family planning. Central and Western African countries have rates of contraceptive prevalence below the rate for Africa as a whole, while Rwanda, the small island developing States and Southern African countries all have prevalence rates above the African average. Adolescent girls often face significant barriers to gaining access to and use of sexual and reproductive information, goods and services, leading to high teenage pregnancies. As with having access to HIV services, an important gender issue regarding family planning services is that men are less likely to access these services, compared with women.

Safe abortions. Most countries permit abortion under certain conditions. Lengthy procedures for authorizing abortions, however, result in illegal and unsafe abortions and in some cases, exacerbating maternal mortality.

Data. The availability of data on the extent of child malnutrition, extent and causes of child and maternal mortality, contraceptive use, prevalence of HIV and having access to antiretroviral treatment remains limited in the countries covered by this report.

Resources. The implementation of policies, plans and other measures to promote people having inclusive access to quality health care requires the allocation of adequate organizational, human, technical and financial resources.

Scores for the health component of the African Women's Progress Scoreboard. In general, countries scored themselves high on policy commitment, having a plan, setting targets, involvement of civil society, institutional mechanisms in reducing maternal mortality, HIV prevention and treatment, family planning and increasing access to safe abortions. Weak areas were budget, human resources and capacity enhancement.

5.5 RECOMMENDATIONS

Governments should undertake the following interventions to promote inclusive access to quality health care.

- **Child malnutrition.** Introduce new and strengthen existing programmes to improve child nutrition in line with target 2.2 of the Sustainable Development Goals by, among other interventions, improving maternal nutrition, promoting age-appropriate feeding – including exclusive breastfeeding for six months and safe and appropriate infant diet thereafter – and managing acute malnutrition.
- **Child and maternal mortality.** Strengthen programmes for the reduction of maternal, new-born and child mortality to increase women's access to antenatal care, care by skilled birth attendants in well-equipped health facilities, emergency obstetric care, post-natal care and support and quality family planning services, manage preventable diseases and improve child and maternal nutrition and sanitary conditions, with wider geographical coverage.
- **Human resources.** Strengthen the training of doctors, midwives and nurses to improve the access of women and children to adequate health care in general, and to better respond to the causes of maternal and child mortality and reproductive and maternal morbidities.
- **HIV/AIDS.** Step up the implementation of strategies to combat HIV/AIDS, in particular preventive strategies, early diagnosis of HIV infections, and early initiation of and improved access to antiretroviral treatment to all women and men living with HIV. Particular focus should be on pregnant women in order to prevent mother-to-child transmission.
- **Family planning.** Provide for people to have access to comprehensive information regarding sexual and reproductive health and rights and affordable, modern methods of contraception to all women and girls to reduce unwanted and teenage pregnancies and unsafe abortions. In particular, remove barriers for women in rural areas and adolescent girls to gaining access to family planning information and methods.
- **Sexual and reproductive health education.** Integrate sexual and reproductive health education into the school curriculum targeted at adolescent girls and boys, with special attention on preventing early pregnancy and sexually transmitted infections, especially HIV.
- **Men's access to sexual and reproductive health services.** Step up activities to encourage men and boys to use sexual and reproductive health services, including family planning services, HIV testing and early initiation of antiretroviral treatment.
- **Safe abortions.** For State parties to the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa decriminalize abortion in line with the Protocol, and remove barriers for accessing legal abortion and post-abortion services.

- Awareness-raising. Carry out targeted awareness-raising meetings to inform pregnant women and mothers of infants the importance of choosing and booking delivery facilities in advance, arriving at the facilities on time, seeking and receiving adequate treatment once at the facilities, and of age-appropriate feeding of infants.
- Data. Strengthen the collection and management of data and statistics disaggregated by sex, age, geographical location, socioeconomic status, education attainment and other relevant factors on child malnutrition, the extent and causes of child and maternal mortality, contraceptive use, HIV prevalence and access to antiretroviral treatment.
- Resources. Allocate adequate organizational, human, technical and financial resources to ensure the provision of comprehensive sexual, reproductive, maternal and newborn health care, in particular with regard to women in rural and remote communities and adolescent girls.

ANNEX V COUNTRY SCORES ON COMMITMENT ON QUALITY HEALTH CARE ON THE AFRICAN WOMEN'S PROGRESS SCOREBOARD

Table AV.1 Scores for HIV/AIDS on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	1	2	2	2	1	1	1	1	2	2	2	1	2	20	26	77
Guinea	2	2	2	2	2	2	2	1	2	2	2	2	2	25	26	96
Mauritius	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Namibia	2	2	2	2	2	1	1	1	2	2	1	1	2	21	26	81
Niger	2	2	2	2	1	2	2	2	1	2	2	2	1	23	26	88
Rwanda	0	2	2	2	2	2	1	2	2	2	2	1	2	22	26	85
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Sierra Leone	1	1	1	1	1	1	1	1	1	1	1	1	1	13	26	50
South Africa	1	1	2	2	1	1	1	2	2	1	2	1	1	18	26	69

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania did not report.

Table AV.2 Scores for maternal mortality on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	2	2	2	2	2	1	1	1	2	2	2	1	1	21	26	81
Guinea	1	1	2	2	2	1	2	1	2	1	1	1	1	18	26	69
Mauritius	X	2	2	2	2	2	2	2	2	2	2	2	2	24	24	100
Namibia	2	2	2	2	2	1	1	2	2	1	1	2	2	22	26	85
Niger	2	2	2	2	1	1	1	1	1	1	2	1	1	18	26	69
Rwanda	0	2	2	2	2	2	1	2	2	2	2	1	2	22	26	85
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Sierra Leone	1	1	1	1	1	1	1	1	2	1	1	1	1	14	26	54
South Africa	1	2	2	1	2	1	1	2	2	1	2	2	1	20	26	77

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania did not report.

Table AV.3 Scores for family planning on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	1	2	2	2	2	1	1	1	2	2	2	1	1	20	26	77
Guinea	1	1	1	2	2	1	2	1	2	2	1	1	1	18	26	69
Mauritius	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Namibia	2	2	2	2	2	1	1	2	2	1	1	1	1	20	26	77
Niger	2	2	2	2	1	1	1	1	1	1	2	1	1	18	26	69
Rwanda	0	2	2	2	2	2	1	2	2	2	2	1	2	22	26	85
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Sierra Leone	1	1	1	1	1	1	1	1	2	1	1	1	1	14	26	54
South Africa	1	2	2	1	1	1	1	1	1	1	1	1	1	15	26	58

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania did not report.

Table AV.4 Scores for safe abortions on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/transparency	Total	Maximum score	Percentage
Chad	0	0	0	0	0	0	0	0	0	0	0	0	0	0	26	0
Eswatini	2	2	2	1	2	1	1	1	2	2	2	2	1	21	26	81
Guinea	1	1	0	1	1	0	1	0	1	1	1	1	1	10	26	38
Mauritius	2	2	1	1	2	2	2	2	2	2	2	2	2	24	26	92
Namibia	2	2	2	2	2	1	1	2	1	1	1	1	1	19	26	73
Niger	0	0	0	0	0	0	0	0	0	0	0	0	0	0	26	0
Rwanda	2	1	2	0	2	1	1	0	0	2	2	1	2	18	26	69
Sao Tome and Principe	1	1	0	1	0	0	1	0	0	2	0	1	0	7	26	27
Seychelles	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Sierra Leone	1	1	1	1	1	0	1	1	2	1	0	1	1	12	26	46
South Africa	2	2	1	1	1	1	1	1	2	1	1	2	1	17	26	65

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania did not report.



6. ACCESS TO ECONOMIC OPPORTUNITIES AND RESOURCES

6.1 INTRODUCTION

"Women's poverty is directly related to the absence of economic opportunities and autonomy, lack of access to economic resources, including credit, land ownership and inheritance, lack of access to education and support services and their minimal participation in the decision-making process."

"[L]egal and customary barriers to ownership of or access to land, natural resources, capital, credit, technology and other means of production, as well as wage differentials, contribute to impeding the economic progress of women."

"For those women in paid work, many experience obstacles that prevent them from achieving their potential. While some are increasingly found in lower levels of management, attitudinal discrimination often prevents them from being promoted further. The experience of sexual harassment is an affront to a worker's dignity and prevents women from making a contribution commensurate with their abilities. The lack of a family-friendly work environment, including a lack of appropriate and affordable child care, and inflexible working hours further prevent women from achieving their full potential."

– Beijing Platform for Action (United Nations, 1995, paras. 51, 156 and 161).

The Beijing Platform for Action recognizes that the absence of economic opportunities and autonomy and the lack of access to economic resources contribute to women's poverty (see above). It further notes that discrimination in hiring and remuneration, sexual harassment in the workplace, lack of access to productive resources and inadequate sharing of family responsibilities, combined with insufficient services such as child care, restrict employment, economic, professional and other opportunities for women. It calls upon Governments to ensure that the productive capacity of women is increased through their having access to capital, resources, land, technical assistance and training; and that measures are taken to promote women's access to employment, appropriate working conditions and control over economic resources.¹¹⁵

As mentioned in previous chapters, CEDAW had obligated member States to ensure equal rights in all matters relating to marriage and family relations, including "the same rights for both spouses in respect to ownership, acquisition, management, administration, enjoyment and disposition of property".¹¹⁶ Member States made similar commitments in the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa¹¹⁷ (Maputo Protocol), and the Sustainable Development Goals (see box 6.1). In addition, members of the International Labour Organization (ILO) had adopted three conventions that committed them to undertake measures that would ensure equal pay for work of equal value (Convention No. 100 of 1951), eliminate discrimination in respect of employment and occupation (Convention No. 111 of 1958) and mandate maternity leave of at least 14 weeks for pregnant women (Convention No. 183 of 2000).

115 United Nations (1995, para. 55 and strategic objective F1).

116 Ibid. (1979, article 16.1(h)).

117 African Union (2003, articles 13 and 19).



Box 6.1 Sustainable Development Goals and access to economic opportunities and resources

Goal 5.4: Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate.

Goal 5.A: Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws.

Goal 5.B: Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women.

The present chapter reviews the relative performance of men and women, and progress made by the countries covered by this report in meeting their commitments included in the Economic Block of AGDI. The Economic Power block of GSI consists of 20 indicators organized into three components: income; time use and employment; and access to resources. The income component is further divided into the wages and income subcomponents, while time use and employment subcomponents make up the second component. Access to resources is divided into the means of production and management. The indicators tracked under the various components are discussed in the relevant sections below. Under the Economic Power block of the African Women's Progress Scoreboard, countries score their own performance on the implementation of the provisions in Conventions 100, 111 and 182 of ILO, three issues relating to article 19 of the Maputo Protocol, and access to technology.

6.2 INCOME

The income component in GSI is made up of the wages and income subcomponents. The indicators under the former are wages in agriculture, civil service, the formal sector and the informal sector. The income subcomponent focuses on income earned from informal enterprises and small agricultural household businesses, as well as the proportion of population living under the poverty line. The ILO Convention 100 on Equal Remuneration in the African Women's Progress Scoreboard is also discussed in this section.

6.2.1 WAGES

In general, data on wages are not widely available for the countries under review.

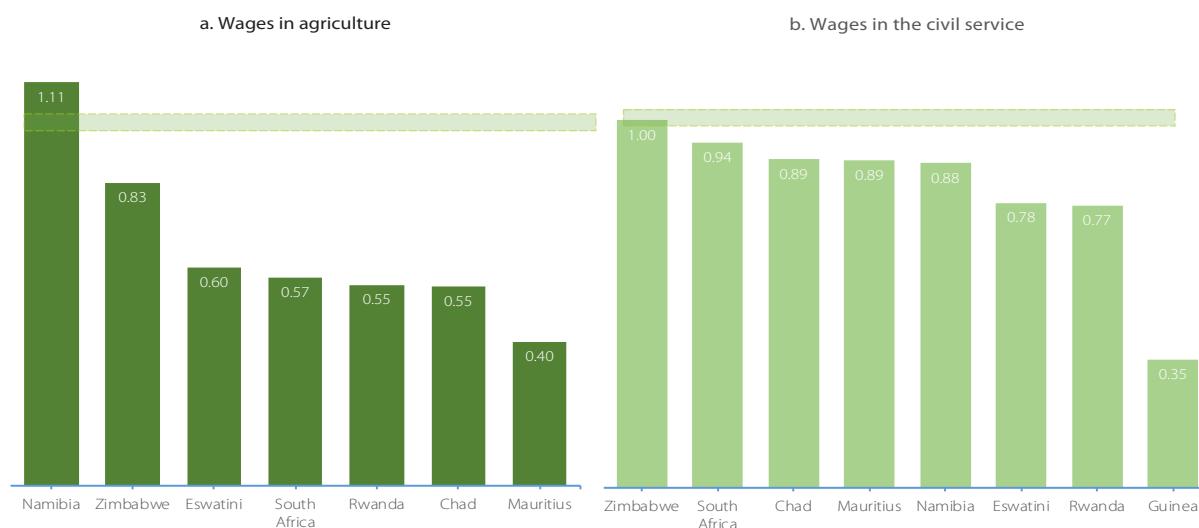
Wages in agriculture

Data for wages in agriculture are available for only seven of the countries. Figure 6.1(a) shows that there is significant gender disparity in favour of men in Chad (GSI = 0.55), Eswatini (GSI = 0.60), Mauritius (GSI = 0.40), Rwanda (GSI = 0.55) and South Africa (GSI = 0.57). In 2015, men working in agriculture in Mauritius earned more than twice what their female counterparts earned. In Namibia, the mean monthly wages earned by women working in agriculture was higher than what men earned as reflected in a GSI of 1.11. Average wages for both men and women in agriculture are lowest, compared with all other industries in Namibia, except for those working in private households (Namibia Statistics Agency, 2017).

Wages in the civil service

Regarding wages in the civil service, there is gender parity in Zimbabwe with men and women earning the same on average, while South Africa has almost reached gender parity with a GSI of 0.94 (see figure 6.1(b)). Chad, Mauritius and Namibia have GSI values of just under 0.9, while there is significant gender disparity in favour of males in Guinea (GSI = 0.35).

Figure 6.I Gender Status Index for (a) wages in agriculture and (b) wages in the civil service



Source: ECA analysis based on data published and draft national reports on AGDI and the ECA-African Development Bank Africa Gender Index database.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Source: ECA analysis based on data published and draft national reports on AGDI and the ECA-African Development Bank Africa Gender Index database.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Wages in the formal and informal sectors

Data for wages in the formal and informal sectors are available for only five of the countries. Gender gaps at the expense of females exist in the formal and informal sectors for all countries where data are available, with GSI values ranging from 0.70 for Guinea and Mauritius to 0.88 for South Africa for the formal sector (see figure 6.II(a)), and 0.44 in Chad to 0.87 in Rwanda and South Africa for the informal sector (see figure 6.II(b)). According to the national report on AGDI for Guinea, a survey that was undertaken in 2012 estimated that women accounted for 58 per cent of workers in the informal sector, compared with 48 per cent in Namibia (Namibia Statistics Agency, 2017).



Figure 6.II Gender Status Index for (a) wages in the formal and (b) wages in the informal sectors



Source: ECA analysis based on data published and draft national reports on AGDI and the ECA-African Development Bank Africa Gender Index database.

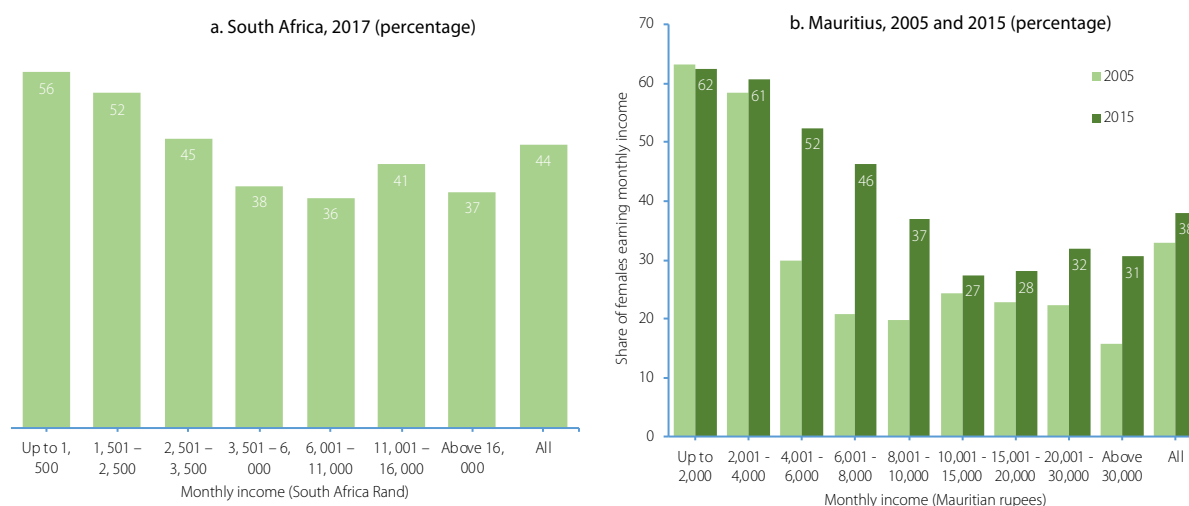
Source: ECA analysis based on data published and draft national reports on AGDI and the ECA-African Development Bank Africa Gender Index database.

Note: Data for wages in the private sector was used for Mauritius.

Factors affecting the gender wage gap

A number of factors may explain the gender wage disparity, which requires further analysis beyond the numbers reported above. In addition to discrimination, these include differences in education attainment, accumulated work experience, choice of educational specialization, occupational segregation and labour market institutions as well as policies, including trade unions and minimum wage (ILO, 2016). As discussed in chapter 4, while girls in Rwanda, Southern African countries and the small island developing States are doing well in terms of participation and progression at all levels of education, girls in countries from the Central and Western African regions are less likely to be enrolled and complete education at all levels than boys. Furthermore, young women tend to study social sciences and humanities subjects at tertiary education institutions, while young men tend to focus on courses in science, engineering and computer sciences. In South Africa, between 2001 and 2017 the share of females earning below two thirds of median salary dropped by 40 percentage points for graduates and 20 percentage points for those with other tertiary qualifications to reach 42 per cent and 55 per cent, respectively (Statistics South Africa, 2018). In comparison, the share of females without Matric – minimum university entrance requirements – earning below two thirds of median salary rose from 40 to 57 per cent over the same period.

Figure 6.III shows that a higher proportion of women than men find themselves in the lowest income brackets in Mauritius and South Africa. Men dominate in higher income brackets, while women are more likely to be found in the lower income categories. For example, women earned 44 per cent of monthly income in South Africa in 2017, but less than this average for incomes above 3,500 rand per month (see figure 6.III(a)). The situation is similar in Mauritius. On a positive note, the proportion of women in the highest income brackets has increased significantly in Mauritius in the past decade (see figure 6.III(b)). According to the South African Labour Force Survey of 2014, the situation is similar in South Africa for the period 2001–2014.

Figure 6.III Proportion of women by income bracket in (a) South Africa, 2017 and (b) Mauritius, 2005 and 2015


Source: ECA analysis based on data from Statistics South Africa, 2018.

Source: ECA analysis based on data from the national report on AGDI for Mauritius.

The gender wage gap also varies across industries. In Mauritius, gender disparity in earnings at the expense of females is more pronounced in the agricultural sector, elementary occupations and service and retail industries. Women also tend to be concentrated in occupational areas, which tend to be lower paid. In South Africa, 96 per cent of those working for households as domestic workers were women, while women accounted for 72 per cent of all workers working as clerks (Statistics South Africa, 2018).

6.2.2 INCOME

Similar to wages, there is a paucity of data for the indicators under the income subcomponent.

Income from informal enterprises

Data on income from informal enterprises were available only for Chad and Mauritania, and in urban areas for Guinea. In Chad and Mauritania, GSI is very low at 0.14 and 0.15, respectively, female-owned informal enterprises earning a much lower income than male-owned informal enterprises. On average in urban Guinea, with a GSI of 0.6 the situation is somewhat better though far from parity. According to the national report on AGDI for Guinea, 92 per cent of female-owned informal enterprises earn less than one million Guinean Francs per month, whereas 80 per cent of male-owned informal enterprises earn at least two million Guinean francs per month. In 2017, three out of four females (76.5 per cent) in South Africa were operating businesses in the informal sector, compared with 64 per cent of males (Statistics South Africa, 2018).



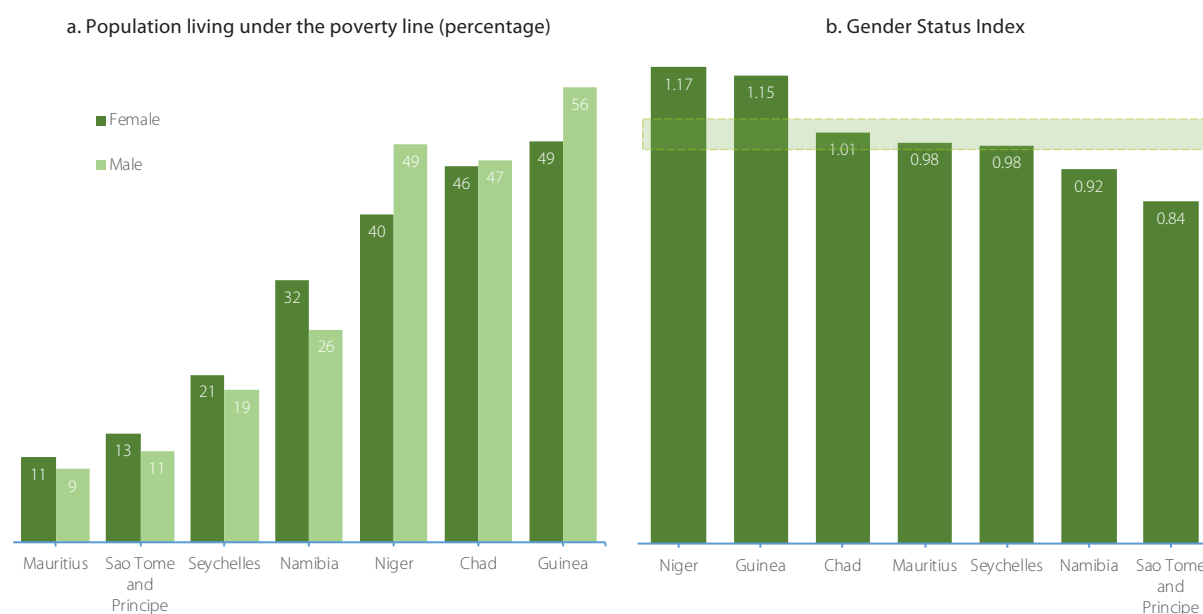
Income from small agriculture household enterprises

Data on income from small agricultural household enterprises were available for Chad, Eswatini, Guinea and Namibia. There is gender disparity in favour of males in all four countries, with moderate disparity in Eswatini (GSI = 0.75) and Namibia (GSI = 0.79), and severe disparity in Guinea (GSI = 0.13) and Chad (GSI = 0.23).

Share of population living under the poverty line

The gender dimensions of poverty are most commonly analysed by comparing the poverty level of female-headed households with that of male-headed households. For the seven countries with data, there are a greater proportion of female-headed households under the poverty line in Mauritius, Namibia, Sao Tome and Principe and Seychelles, compared with male-headed households, while the reverse is true for Chad, Guinea and the Niger (see figure 6.IV(a)). The GSI values for Chad, Mauritius and Seychelles fall between 0.97 and 1.03 (see figure 6.IV(b)), which denotes gender parity. In general, the proportion of the population living under the poverty line is high for both females and males, especially in Chad, Guinea and the Niger, where it is above 40 per cent for both sexes.

Figure 6.IV Proportion of the (a) population living under the poverty line by sex and (b) Gender Status Index



Source: ECA analysis based on data from published and draft national reports on AGDI.

Source: ECA analysis based on data from published and draft national reports on AGDI.

Note: Highlighted areas represent gender parity with an index between 0.97 and 1.03.

6.2.3 INTERNATIONAL LABOUR ORGANIZATION CONVENTION 100 ON EQUAL REMUNERATION, 1951

"Each Member shall, by means appropriate to the methods in operation for determining rates of remuneration, promote and, in so far as is consistent with such methods, ensure the application to all workers of the principle of equal remuneration for men and women workers for work of equal value.

This principle may be applied by means of: (a) national laws or regulations; (b) legally established or recognised machinery for wage determination; (c) collective agreements between employers and workers; or (d) a combination of these various means."

ILO Convention 100 (1951, articles 1 and 2,).

The ILO Convention 100 on Equal Remuneration calls on member States to take measures to ensure that men and women receive the same remuneration for work of equal value. The Convention also deals with basic and/or minimum wages. All countries covered by the present report have ratified Convention 100, except for Liberia. Countries have taken a number of measures to apply the provisions of the Convention. These are discussed below, organized by the main provisions of the Convention.

National laws or regulations on equal remuneration

- In Rwanda, Law N° 86/2013 (2013) provides that salaries in the public service shall be based on the weight of the work done and not the person performing it.
- Seychelles has revised the Employment Act (1995), which is under consideration, to align the definition of the concept of "equal work for equal pay" with that of the Convention.
- In South Africa, the section of the Employment Equity Act (1998) that deals with remuneration for work of equal value was amended in 2014. The amendment provides that differentials in wage and other conditions of employment will be deemed as unfair discrimination unless the employer can show that they reflect fair criteria, such as experience, skill and responsibility. Claims of unfair sex and gender discrimination based on unequal pay can be heard by the Commission for Conciliation Mediation and Arbitration, the Labour Court and the Equality Courts.

Article 2 of the Convention recommends using collective agreements between employers and workers as one of the avenues to apply the principle of equal pay for work of equal value. In Namibia, 19 per cent of women were members of a union in 2016, compared with 17 per cent of males (Namibia Statistics Agency, 2017). In Seychelles, however, the two main trade unions have issues of legitimacy. For the countries covered by this report, which have available data, women are underrepresented in senior positions in trade unions (see discussion in chapter 7). In South Africa, trade unions have a historical undertaking to tackle racial discrimination in the workplace. This situation limits the effectiveness of trade unions in confronting sex discrimination in the workplace.

Machinery for wage determination

- In Mauritius, a National Remuneration Board has been established to make recommendations to the Government on rates of remuneration and conditions of employment in the private sector.



- In South Africa, the National Economic Development and Labour Council was established in 1994 as a national social dialogue institution to deal with economic, labour and development issues. It consists of representatives of the Government, business, organized labour and civil society organizations.

Minimum wage

- In Mauritius, the National Wage Consultative Council began operations in 2017 to introduce a national minimum wage.
- In South Africa, the Basic Conditions of Employment Act (1997) allows the Minister of Labour to set minimum terms and conditions of employment, including a minimum wage for vulnerable workers.

Scores on the African Women's Progress Scoreboard

Overall, countries scored themselves highly on ratification of the Convention, reporting, enacting legislation, policy commitment and involvement of civil society organizations on the Progress Scoreboard (see annex VI, table AVI.1). From the countries' point of view, weak areas were research and monitoring and evaluation. The national report on AGDI for South Africa noted that while the measures taken to integrate the provisions of Convention 100 into laws are based on research, monitoring and evaluation remains a challenge. Research to assess the impact of the Employment Equity Act (1998) recommended setting benchmarks and targeting policy interventions at the sector level. Several national reports highlighted inadequate compliance and enforcement of laws under that area. Sao Tome and Principe and Seychelles scored themselves highest at 100 per cent on the implementation of the Convention, followed by Chad and Mauritius. Guinea and South Africa scored themselves below 70 per cent. Box 6.2 highlights the measures taken by Mauritius to domesticate the provisions of the Convention.

Box 6.2 Implementation of the International Labour Organization Convention 100 in Mauritius

- The provisions of the Convention 100 on Equal Remuneration (1951) are enshrined in the Employment Rights Act (2008). Section 20 states that: "Every employer shall ensure that the remuneration of any worker shall not be less favourable than that of another worker performing work of equal value". Section 4 is aimed at combatting, prohibiting and curbing all forms of discriminatory practices at the workplace; and section 38(1) provides for the protection of workers against unlawful dismissal, including dismissal on the basis of discriminatory practice. The latter provides protection against dismissal by reason of pregnancy, sex, sexual orientation, marital status, family responsibilities or absence from work during maternity leave.
- The National Remuneration Board make recommendations to the Government regarding minimum remuneration and terms of employment in the private sector in line with the Remuneration Order Regulations.
- The National Wage Consultative Council was established under the National Wage Consultative Council Act (2016) to make recommendations to the Government regarding the introduction of a national minimum wage in both the public and private sectors. The Council is managed by a board consisting of representatives of the Government, trade unions and employers' associations.
- Labour and Industrial Relations Officers of the Ministry of Labour, Industrial Relations, Employment and Training carry out regular inspections at work sites to ensure compliance with laws and regulations.

Source: ECA, published national report on AGDI for Mauritius.

6.3 PROMOTING EQUITABLE ACCESS TO EMPLOYMENT

This section analyses the results of indicators under the time use and employment component of GSI and ILO Conventions 111 and 183 in the African Women's Progress Scoreboard. There are five indicators under the time use and employment component. The time-use subcomponent is made up of three time-use indicators, while the employment subcomponent consists of the share of population in non-agricultural wage employment and youth unemployment. Given the lack of data for the indicators included in GSI, analysis of the rate of labour force participation is included to complement the analysis and add further insights.

6.3.1 TIME USE

Women continue to shoulder the heavy burdens of unpaid work, including those relating to caring for children, the elderly and the sick, cooking and household chores. This state of affairs leaves less time for them to devote to remunerative employment, participation in political and public life and learning. Time-use surveys provide comprehensive information about how individuals allocate their time among a range of paid and unpaid productive activities, and personal care, leisure and learning.

Table 6.1 shows that males spend more time in market economic activities than females in all countries with data. There is significant gender disparity in favour of males in Mauritius, with a GSI of 0.39. There is moderate gender disparity in the other countries with data, with GSI values ranging from 0.73 in the Niger to 0.92 in Namibia. Women spend less time than men in non-market economic activities in all countries with data, except in the Niger where women spend more than three times longer engaging in non-market economic activities than men. Females tend to spend considerably more time in domestic, care and volunteer activities than males as reflected in GSI values below 0.6, except in Namibia where the GSI value is 0.93.

Mauritius (in 2003) and South Africa (in 2000 and 2010) had undertaken nationally representative time-use surveys that allowed for further analyses of the relative time spent by women and men in unpaid and paid work. In Mauritius, the time spent by women in unpaid work accounted for approximately 71 per cent of their total work (defined as the sum of unpaid and paid work) (see figure 6.V(a)). This is more than eight times the share of unpaid work in total work for men. In South Africa, women spent almost 65 per cent of total work time in unpaid work, while men spent just under 20 per cent. The time spent by women doing unpaid work in South Africa and Mauritius are two and four times that for men, respectively (see figure 6.V(b)). Women work longer hours than men in both countries.

Table 6.1 Gender Status Index of time spent in economic, domestic care and volunteer activities, selected countries

	Chad	Eswatini	Guinea	Mauritius	Namibia	Niger	Rwanda	South Africa
Time spent in market economic activities (as paid employee, own account or employer)	0.89	0.87	0.88	0.39	0.92	0.73	0.89	0.88
Time spent in non-market economic activities or as unpaid family worker in market economic activities	1.39	-	1.26	1.02	1.16	0.33	-	1.24
Time spent in domestic, care and volunteer activities	0.55	-	0.46	0.26	0.93	0.18	0.32	0.40

Source: ECA analysis based on published and draft national reports on AGDI.



Figure 6.V Time spent in unpaid and paid work by women and men in Mauritius and South Africa, 2000–2010



Source: ECA analysis based on data from Charmes, 2015.

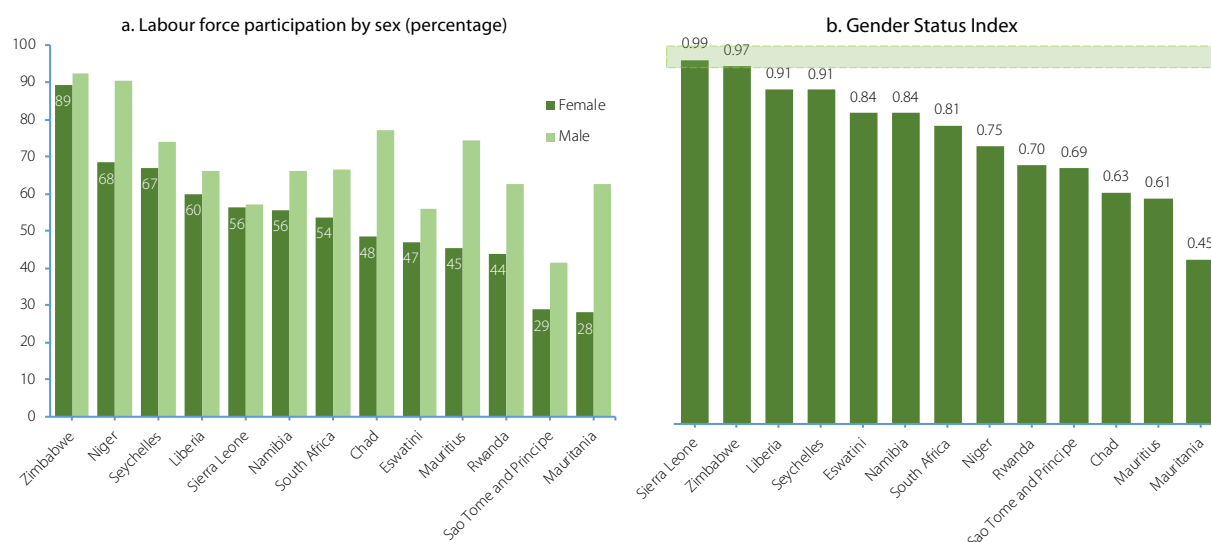
Source: ECA analysis based on data from Charmes, 2015.

For the other countries, data are not strictly comparable with Mauritius and South Africa. This is because they have not been collected through a time-use survey, but rather from a short list of stylized questions added to surveys on living conditions.

6.3.2 EMPLOYMENT

Labour force participation

Labour force participation rate for women is lower than that for men in the countries covered by this report (see figure 6.VI(a)). The female labour participation rate is below 50 per cent in Chad, Eswatini, Mauritania, Mauritius, Sao Tome and Principe and South Africa, and above the average (65 per cent) for sub-Saharan Africa (ILO, 2018) in the Niger, Seychelles and Zimbabwe. There is gender parity in Sierra Leone and Zimbabwe, and significant gender disparity at the expense of females in Mauritania (see figure 6.VI(b)).

Figure 6.VI (a) Labour force participation rates by sex and (b) Gender Status Index, 2006–2017


Source: ECA analysis based on data from and the ECA-African Development Bank Africa Gender Index database (Chad, Seychelles and Zimbabwe); ILOSTAT (Eswatini, Liberia, Mauritania, Mauritius, Namibia, the Niger, Sao Tome and Principe and Sierra Leone); National Institute of Statistics of Rwanda, 2017; and Statistics South Africa, 2018.

Note: Labour force participation for men and women more than 15 years of age, except for Rwanda, which measures participation for those 16 years of age and above.

Source: ECA analysis based on data from and the ECA-African Development Bank Africa Gender Index database (Chad, Seychelles and Zimbabwe); ILOSTAT (Eswatini, Liberia, Mauritania, Mauritius, Namibia, the Niger, Sao Tome and Principe and Sierra Leone); National Institute of Statistics of Rwanda, 2017; and Statistics South Africa, 2018.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

A number of factors explains the lower labour force participation rates for females relative to males. Figure 6.VII(a) shows that participation rate for rural women in South Africa in 2017 was 40 per cent, compared with 62 per cent for urban females and 74 per cent for urban males. The presence of minor children in households is also expected to have an effect on the relative participation of men and women.

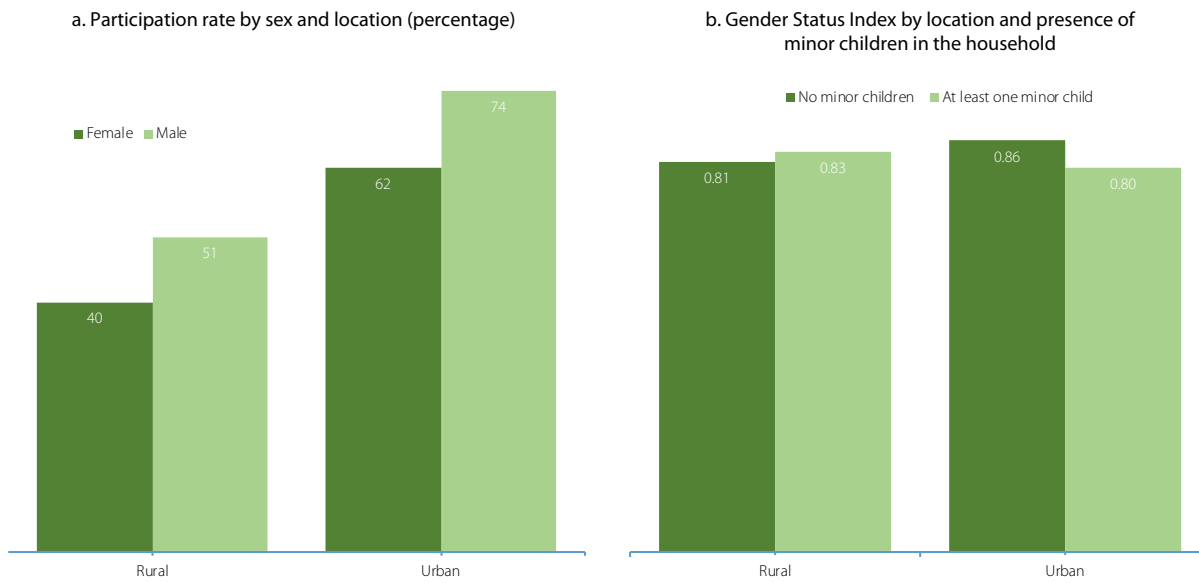
Figure 6.VII(b) shows that the participation rate for females is lower than that for males, whether or not there is a minor child in the household. Urban females with at least one minor child, however, is the group most disadvantaged relative to their male counterparts with a GSI value of 0.82, compared with 0.86 for urban females without minor children.

Given that women in general have more limited access to education and vocational opportunities than men, relatively more of them end up working either as own account workers or as contributing family workers (ILO, 2018). In the Niger, 3 per cent of women were employed in the formal sector and covered by social protection in 2012. Furthermore, women were “concentrated in low-paid domestic work, where they are often exploited, exposed to precarious working conditions and subject to abuse by their employers.”¹¹⁸

118 CEDAW Committee Concluding Observations (2017, para. 30(a)).



Figure 6.VII South African labour force (a) participation rate by sex and location and (b) Gender Status Index by location and presence of minor children in the household, 2017



Source: ECA analysis based on data from Statistics South Africa, 2018.

Source: ECA analysis based on data from Statistics South Africa, 2018.

Box 6.3 highlights ways to increase women's participation in the labour force. Box 6.4 showcases the Back-to-Work Programme in Mauritius, targeting women over 35 years of age.

Box 6.3 Increasing women's participation in the labour force

African women continue to face a number of barriers that limit their access to paid, formal employment. Factors that prevent the creation of an enabling environment for women's employment include: discriminatory practices against women by employers; unequal pay for equal work; cultural and legal restrictions on certain types of jobs for women; unpaid work that compensates for a lack of weak infrastructure, especially energy, transportation, sanitation and water borne mostly by women; unpaid care work, including the caring for children, the elderly and the sick that is performed mainly by women; weak and insecure property rights for women; and lack of access to financial services, land and technology.

Countries can increase the participation and effectiveness of women in the labour force by pursuing policies that prepare women for and enable them to join the labour force. Having been empowered through education and the acquisition of relevant skills, women have to be supported through a broad range of policies to enable them to join the labour force. These policies include:

- Investing in women's skills and education including tertiary education and vocational training;
- According women equal rights in terms of inheritance, property ownership, family law and economic independence;
- Providing support to encourage women to move from low-productivity, low-income and vulnerable jobs in the informal sector with little job security and fewer social benefits (such as unpaid work, casual agricultural labour and most domestic service) to higher-productivity jobs in the formal sector;
- Investing in female entrepreneurs by promoting their access to financial and business support services;
- Reducing the burden of household work through better infrastructure – principally energy, water, sanitation, and transportation;
- Reducing the burden of unpaid care work through provision of affordable care services for children, the elderly and the sick;
- Balancing the gender division of paid and unpaid work aimed at dividing unpaid care work more equitably between men and women;
- Compensating for unequal employment opportunities based on gender – principally compensating for the adverse impact of career breaks through paid leave and right of return to post;
- Public campaigns to challenge gender stereotypes, and for the proper implementation of legislation against discrimination;
- Producing quality gender-disaggregated data on the situation of boys, girls, men and women.

These policies have the potential to boost women's participation in the labour force and, as a consequence, increase economic growth. Booz & Company (Aguirre, and others, 2012) had estimated the effect of raising female employment to the male employment level, taking into account the lower productivity of the new entrants as a result of limited experience and lower educational attainment, and lower average hours worked throughout the overall population on account of women more likely to work part-time and to be primary caregivers for children, the elderly and the sick. In South Africa, raising female employment to the male employment level is estimated to raise gross domestic product by 10 per cent over time.

Source: ECA analysis based on data from Aguirre and others, 2012; ECA, 2009a; ILO, 2012.

Share of population in non-agricultural wage employment

A lower share of women than men were employed in the non-agricultural wage sector in the four countries that data were available. The GSI value was almost 0.6 in Mauritania and Zimbabwe, 0.8 in the Niger and 0.9 in Guinea. According to the AGDI country reports, the share of women in the non-agricultural wage employment was below 5 per cent in the Niger, approximately 40 per cent in Mauritania and Zimbabwe, and 78 per cent in Guinea.

Box 6.4 Back-to-work programme for women in Mauritius

Female unemployment in Mauritius is approximately two times more than that of their male counterpart. In June 2017, the Ministry of Labour, Industrial Relations, Employment and Training introduced the Back-to-Work programme for women above 35 years of age who wished to join or re-join the labour force. The objectives of the programme is to:

- Ensure that Mauritian women above 35 years of age can have employment in private enterprises or with individual employers;
- Help women to gain back their self-confidence and learn to integrate or re-integrate into the labour market by undergoing a training programme designed to build or re-build self-awareness, self-esteem, social responsibility and entrepreneurial skills and to strengthen interpersonal and communication skills.

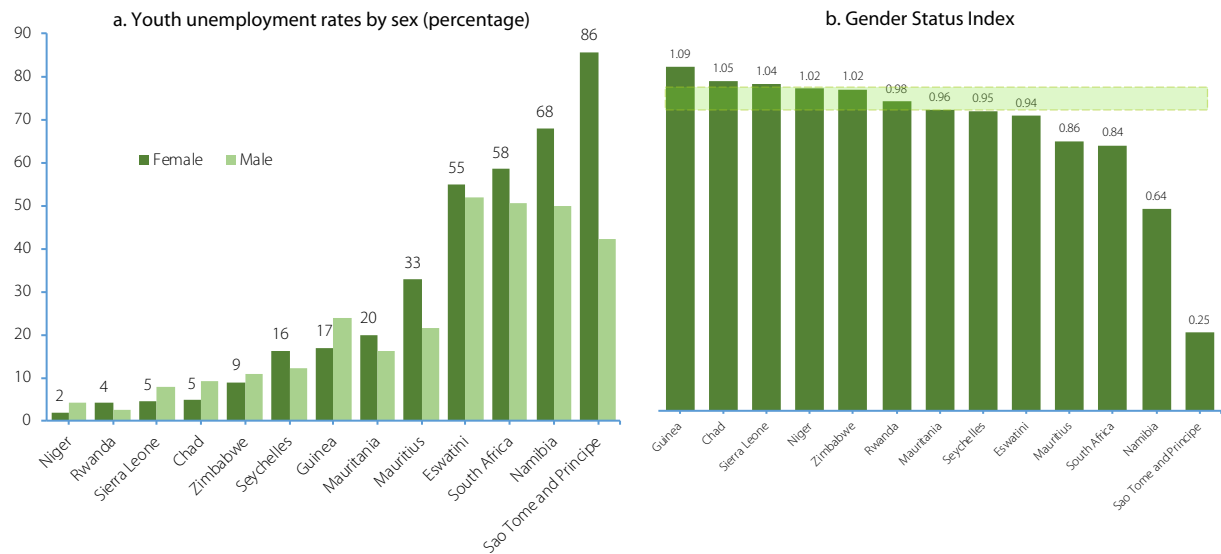
As at April 2017, out of 1,388 who had registered, 580 women had secured a placement opportunity in 165 private sector organizations. In addition, 249 unemployed women had followed the training course "Induction to World of Work" under the Back-to-Work programme delivered and sponsored by the Mauritius Institute of Training and Development.

Source: ECA, national report on AGDI for Mauritius.

Youth unemployment rate

For young people between 15 and 24 years of age, female unemployment rates tend to be higher than for males in countries where unemployment rates are high (see figure 6.VIII(a)). Youth unemployment rates for females are above 30 per cent in Eswatini, Mauritius, Namibia, Sao Tome and Principe, and South Africa, and below 10 per cent in Chad, the Niger, Rwanda, Sierra Leone and Zimbabwe.

Figure 6.VIII (a) Youth unemployment rates by sex and (b) Gender Status Index



Source: ECA analysis based on published and draft national reports on AGDI, Namibia Statistics Agency, 2017; National Institute of Statistics of Rwanda, 2017; and Statistics South Africa, 2018.

Source: ECA analysis based on published and draft national reports on AGDI, Namibia Statistics Agency, 2017; National Institute of Statistics of Rwanda, 2017; and Statistics South Africa, 2018.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

There is gender parity in the youth unemployment rate for the Niger, Rwanda and Zimbabwe, with GSI values between 0.97 and 1.03 (see figure 6.VIII(b)). There is a slight gender disparity in favour of females in Chad, Guinea and Sierra Leone, and in favour of males in Eswatini, Mauritania and Seychelles. There is significant gender disparity to the advantage of females in Guinea, while there is significant gender disparity favouring males in Namibia (GSI = 0.64) and Sao Tome and Principe (GSI = 0.25). Box 6.5 gives a summary of the status of women's employment in South Africa.

Box 6.5 Status of gender equality in work in South Africa

Gender equality in work is still a long way from being achieved. Some of the main challenges are:

- Women's share of employment has risen, but men still form the majority of the employed;
- African women and black women in general are least likely, of all women and men, to be in paid employment. They are most likely to be counted as "economically inactive" meaning that they have never had a paid income of their own, nor are they seeking one;
- The growth in women's employment has not reflected an improvement in the quality of jobs and economic position of women;
- The new areas of employment for women have tended to be insecure, with increased flexibility, low pay and low status, thus the 'feminization' of work has been accompanied by the declining quality of jobs, pay and working conditions;
- Unemployment remains high for women, young African women in particular;
- African women are still clustered within the lowest income groups;
- Women in general, and African women particularly, continue to occupy jobs associated with "women's work" and the gendered division of labour in the home, such as domestic work, cleaning, nursing and teaching.

Source: Orr and van Melees, 2014, pp. 31 and 32.

International Labour Organization Convention 111 on Discrimination, 1958

"Each Member for which this Convention is in force undertakes to declare and pursue a national policy designed to promote, by methods appropriate to national conditions and practice, equality of opportunity and treatment in respect of employment and occupation, with a view to eliminating any discrimination in respect thereof.

Each Member for which this Convention is in force undertakes, by methods appropriate to national conditions and practice: (a) to seek the co-operation of employers' and workers' organisations and other appropriate bodies in promoting the acceptance and observance of this policy; (b) to enact such legislation and to promote such educational programmes as may be calculated to secure the acceptance and observance of the policy; (c) to repeal any statutory provisions and modify any administrative instructions or practices which are inconsistent with the policy; (d) to pursue the policy in respect of employment under the direct control of a national authority".

ILO Convention 111 (1958, articles 2 and 3).

All countries have ratified the ILO Convention 111 on Discrimination (Employment and Occupation) of 1958. Overall, countries scored themselves high on ratification of the Convention, enacting legislation, policy commitment, institutional mechanism and involvement of civil society on the African Women's



Progress Scoreboard (see annex VI, table AVI.2), similar to the scoring for Convention 100. Countries scored research and monitoring and evaluation as the weakest areas, followed by budget allocation and capacity enhancement. Chad, Mauritius, Sao Tome and Principe and Seychelles scored themselves 90 per cent and above on the implementation of the Convention. Rwanda and South Africa scored themselves below 70 per cent. Box 6.6 highlights some of the gender issues relating to Convention 111 in Mauritius, Rwanda and South Africa.

Box 6.6 Measures to implement Convention 111 in Mauritius, Namibia, Rwanda and South Africa

Some gender issues in terms of the implementation of the ILO Convention 111 on Discrimination (Employment and Occupation) in Mauritius, Rwanda and South Africa are discussed below.

The Labour Act (2008) in Namibia, Law No 13/2009 (2009) in Rwanda, and the Employment Equity Act (1998) in South Africa forbid any discrimination, directly and indirectly, that aims to deny an individual worker the right to equal opportunity or to the salary. The bases on which discrimination is prohibited in both countries include sex, marital status, family responsibilities and previous, current or future pregnancy, among other grounds.

- In South Africa, the Employment Equity Act (1998) requires employers to compile and implement an employment equity plan, submit statutory employment equity reports, conduct employment equity and diversity awareness training. The Labour Court may impose penalties on non-compliant employers.
- The Employment Equity (Amendment) Act of 2013 provides that a difference in terms and conditions of employment between employees of the same employer performing the same work or substantially the same work or work of equal value constitutes unfair discrimination.
- In Namibia, the Affirmative Action (Employment) Act 29 of 1998 (amended in 2007) has “redress through appropriate affirmative action plans the conditions of disadvantage in employment experienced by persons in designated groups arising from past discriminatory laws and practices” as one of its aims. One of the designated groups is women. The act also provides for the establishment of an Employment Equity Commission to ensure that employers adopt and implement affirmative action plans in line with the act.
- According to the national report on AGDI for Mauritius (2017), the current legislative framework does not cover the following provisions in ILO Convention 183 on Maternity Protection (2000): additional leave in case of illness, complications or risk of complications arising out of pregnancy or childbirth; entitlement of women workers with less than 12 months of service to cash benefits from employers or out of social assistance funds; and prohibition of terminating employment on grounds of “nursing of unweaned child” or else during a period following her return from work from maternity leave.

Source: ECA analysis based on published and draft national reports on AGDI, Government of Namibia, 1998, p. 2, and 2008.

International Labour Organization Convention 183 on Maternity Protection, 2000

“[A] woman to whom this Convention applies shall be entitled to a period of maternity leave of not less than 14 weeks.”

ILO Convention 183 (2000, article 4 (1)).

The availability of maternity leave and income security ensures that women workers do not have to interrupt or reduce their participation in paid work to give birth and take care of a newborn.¹¹⁹ Furthermore,

¹¹⁹ This paragraph draws on Addati, Cassirer and Gilchrist (2014, p. 8).

without adequate maternity protection, women may continue to work too far into their pregnancy and return to work too soon after childbirth, increasing the risks to themselves and their children's health. Lack of time off and income replacement reduce women's access to prenatal, childbirth and postnatal care and the duration of breastfeeding, which is crucial in the first six months of life. Adequate job-protected leave is also important to avoid labour dismissal, loss of pay and loss of employment status for pregnant and parenting workers.

The ILO Convention on Maternity Protection (2000) focuses on issues of maternity, paternity, parental and adoption leave, protection against dismissal during pregnancy, birth and nursing of infants, gender-specific interventions for pregnant and breastfeeding workers and support for breastfeeding at work. Among the selected countries, only Sao Tome and Principe has ratified the Convention, which entered into force in June 2018.

Table 6.2 shows that South Africa, with a leave period of 17 weeks, has the longest leave period among the selected countries and in Africa. In addition, Chad, Guinea, Mauritania, Mauritius, the Niger, Sao Tome and Principe, Seychelles and Zimbabwe have met the 14-week minimum standard set by the Convention. Guinea-Bissau has the shortest leave period with 9 weeks. Chad, Mauritania, Mauritius, Rwanda and Seychelles all provide for paternity leave, while Chad, Guinea and South Africa provide for parental leave. Guinea-Bissau, Sao Tome and Principe and Zimbabwe offer women no protection from unlawful dismissal. Women have the right to return to work in the same or equivalent position in Eswatini, Rwanda and South Africa.

Overall, countries scored themselves high on institutional mechanism and enacting legislation on the African Women's Progress Scoreboard for this Convention (see annex VI, table AVI.3). Ratification, reporting and research were the weakest areas, followed by information and dissemination. Chad, Eswatini, Guinea and the Niger scored themselves 2 and Mauritius scored itself 1 on ratification even though they have not ratified the Convention. In general, countries scored themselves lower on their performance to meet their commitments under this Convention, compared with Conventions 100 and 111 given that most of them have not ratified the convention. Chad, Mauritius, the Niger and Sao Tome and Principe scored themselves above 85 per cent on this indicator. Namibia, Rwanda, Seychelles and South Africa scored themselves zero as they have not ratified the Convention. Box 6.7 highlights the relevant provisions of the legal frameworks of Mauritius, Rwanda and Seychelles that relate to the Convention.

Table 6.2 National statutory provisions on maternity and paternity leave, 2013

Country	Maternity leave		Paternity leave*	Parental leave#	Employment protection			Right to return to work	Non-discrimination	Health protection
	Duration (weeks)	Duration (days)			Protection from unlawful dismissal	Burden of proof	Right to return to work			
Chad	14	10		Up to 52 weeks (6 months, renewable once) (either parent)	Pregnancy	Employer	Not guaranteed	Sex	No protection	
Eswatini	12	x	x	x	Pregnancy, Leave, Additional period	Not provided	Same position or equivalent	Sex	No protection	
Guinea	14			38 weeks (only mothers)	Pregnancy, Leave, Additional period	Not provided	Not guaranteed	Sex	Prohibition	
Guinea-Bissau	9	x	x	x	No protection	Not provided	Not guaranteed	Sex	No obligation	
Mauritania	14	10		x	Pregnancy, Leave, Additional period	Employer	Not guaranteed	Sex	No obligation	
Mauritius	14	5 working days		x	Pregnancy	Not provided	(.)	Sex, Pregnancy, Family responsibilities	Prohibition	
Namibia	12			x	Pregnancy, Leave, Additional period	Worker	Not guaranteed	Sex, Pregnancy, Family responsibilities	No protection	
Niger	14	x	x	x	Pregnancy, Leave	Not provided	Not guaranteed	Sex	No protection	
Rwanda	12	4	x	x	Leave	Not provided	Same position or equivalent	Sex, Pregnancy, Family responsibilities	No obligation	
Sao Tome and Principe	14	x	x	x	No protection	Not provided	Not guaranteed	Sex	No obligation	
Seychelles	14	4	x	x	Leave	Not provided	Not guaranteed	No prohibition	No protection	
Sierra Leone	12	(.)	(.)	(.)	(.)	(.)	(.)	(.)	(.)	
South Africa	17			3	Pregnancy	Employer	Same position	Sex, Pregnancy	Prohibition	
Zimbabwe	14	x	x	x	No protection	Not provided	Not guaranteed	Sex, Pregnancy	No protection	

Sources: ECA analysis based on Addati, Cassier and Gilchrist, 2014; South Africa, Commission for Gender Equality, 2015; Government of Mauritius, 2015; and ILO, 2002.

Notes: A cross (x) indicates that paternity and parental leave are not available. (.) means information is not available or could not be identified, no data were available. * Paternity leave includes "special" leave provisions in addition to annual leave that may be used by fathers at the time of birth but which are not strictly "paternity leave" (e.g., Seychelles). # Parental leave provisions can be used by the father or mother or parts of maternity leave entitlements that the mother can transfer to the father.

Box 6.7 Maternity Protection Convention measures in Mauritius, Rwanda, Sao Tome and Principe, and Seychelles

Mauritius. The National Assembly voted on 13 May 2015 the Employment Rights (Amendment) Bill to extend the duration of maternity leave from 12 weeks to 14 weeks. The decision to increase the duration of maternity leave is in line with the ILO Maternity Protection Convention 2000. Before, it had not been possible for Mauritius to ratify the Convention given that the Employment Rights Act and all Remuneration Orders provided a 12-week maternity leave. With the 2015 amendment, Mauritius will be able to ratify the Maternity Protection Convention 2000, which is an important instrument to promote equality of women in the workforce and the health and safety of the mother and child.

Rwanda. The Government has approved a draft law on maternity protection that grants mothers their full (100 per cent) remuneration while on a 12-week maternity leave. The previous law only gave to mothers the right to their full salary during the first half of their maternity leave, while in the second half, they were required to surrender 80 per cent of their salary or return to work. With the new law, the employer will pay half the salary while the fund covers the remaining half. Every employee, either private or public, will surrender 0.6 per cent of their salary to contribute to a mother's pay on maternity leave.

Sao Tome and Principe. Presidential Decree No. 3/2004 of February 2004 provides that: "A woman to whom this Convention applies shall be entitled to a period of maternity leave of not less than 14 weeks, on production of a medical certificate or other appropriate certification, as determined by national law and practice, stating the presumed date of childbirth."

Seychelles. According to a research undertaken by the Seychelles' Institute for Early Childhood Development in 2013, more than 90 per cent of women were working mothers, of whom 60 per cent were single parents. Approximately 36 per cent of women took additional leave and more than 10 per cent stopped work or took leave without pay to complement maternity leave. The Institute recommended maternity leave for a period of six months to elevate the role of the mother as the first provider of early childhood care and education. The Employment Act allows the mother three-months maternity leave. The Public Service Orders: provides for paid maternity leave of 14 weeks and 4 weeks' unpaid leave for all female workers in full time or part-time employment (Reg. 16 (1)); regulates overtime and night duty for women from the time they are six months pregnant up to three months after confinement (Reg. 16 (1)); and provides for job transfer without loss of wages upon production of a medical certificate if current work is detrimental to the health of mother and child (Reg. 23). The Employment Policy under Strategy 8: Non-discrimination in the workplace, the Government commits to monitor discrimination against pregnant and lactating female workers in the private sector, and ensuring compliance with the law.

Source: ECA analysis based on the draft national report on AGDI for Seychelles; Mauritius, 2015; Rwanda, 2015; and Sao Tome and Principe, 2015, p. 16, para. 123.

6.4 PROMOTING EQUITABLE ACCESS TO ECONOMIC RESOURCES

"Women shall have the right to fully enjoy their right to sustainable development. In this connection, the States Parties shall take all appropriate measures to:

- *Introduce the gender perspective in the national development planning procedures;*
- *Ensure participation of women at all levels in the conceptualization, decision-making, implementation and evaluation of development policies and programmes;*
- *Promote women's access to and control over productive resources such as land and guarantee their right to property;*
- *Promote women's access to credit, training, skills development and extension services at rural and urban levels in order to provide women with a higher quality of life and reduce the level of poverty among women."*

African Union (2003, article 19, Right to Sustainable Development).



In addition to inadequate time and opportunities to participate effectively in education and the formal labour force, one of the main factors affecting women's economic autonomy is not having access to productive economic resources, including land, capital and credit. This section of the report assesses countries' performance in promoting equitable access to economic resources. The access to resources component on GSI includes the means of production and management subcomponents. The former includes indicators on ownership of rural land/farms, urban plots/houses and livestock, and access to credit. The extent of gender parity in the number of employers, own-account workers, high-level civil servants and members of professional syndicates are addressed in the management subcomponents. The African Women's Progress Scoreboard covers engendering national poverty reduction strategies, and access to land, agricultural extension services and technology.

6.4.1 MEANS OF PRODUCTION

Women make essential contributions to agriculture and to the rural economy in most African countries. The share of women in the agricultural labour force ranges from 36 per cent in the Niger to more than 60 per cent in Sierra Leone;¹²⁰ however, they produce less per hectare on average than men. The main reasons for women's lower agricultural productivity include differences in access and use of agricultural inputs; tenure security and incentives to invest in land improvements and adopt improved technologies; market and credit access; human and physical capital, and cultural and social norms that assign different roles to females and males¹²¹ (see box 6.8). The Food and Agriculture Organization of the United Nations (FAO), indicated in a 2011 report that if women had the same access to productive resources such as land, livestock, extension and financial services, and technology as men, they could increase yields on their farms by 20–30 per cent, which could raise total agricultural output in developing countries by 2.5–4 per cent (FAO, 2011a).

Men control and operate, on average, 85 per cent of agricultural landholdings in sub-Saharan Africa, and as high as 95 per cent of agricultural landholdings in North Africa.¹²² In addition, the land that women have access to in Africa, is often smaller and of lesser quality than that which is available to men (FAO, 2011a). Generally, on farms that grow both cash and food crops, the fields dedicated to food crops, in which women and girls are more likely to be active, are often located farther away (Chicago Council, 2011). This places an additional time burden on women. Goldstein and Udry (2008) found evidence to show that weak property rights for women in Ghana resulted in lower productivity for their land and lower output.

120 FAO (2011a, pp. 7 and 8).

121 Kilic, Palacios-Lopez and Goldstein (2013, p. 3).

122 FAO (2011a, pp. 23 and 25).

Box 6.8 Gendered differences in agriculture in the Niger

Women face the following gendered differences in agriculture, compared with their male counterparts:

- Operating smaller farms, on average only half to two-thirds as large;
- Keeping fewer livestock, typically of smaller breeds, and earning less from the livestock they do own;
- Having a greater overall workload that includes a heavy burden of low-productivity activities such as fetching water and firewood;
- Having less education and less access to agricultural information and extension services;
- Using less credit and other financial services;
- Being much less likely to purchase inputs, such as fertilizers, improved seeds and mechanical equipment;
- Being more likely, if employed, to be in part-time, seasonal and low-paying jobs;
- Receiving lower wages for the same work, even when they have the same experience and qualifications.

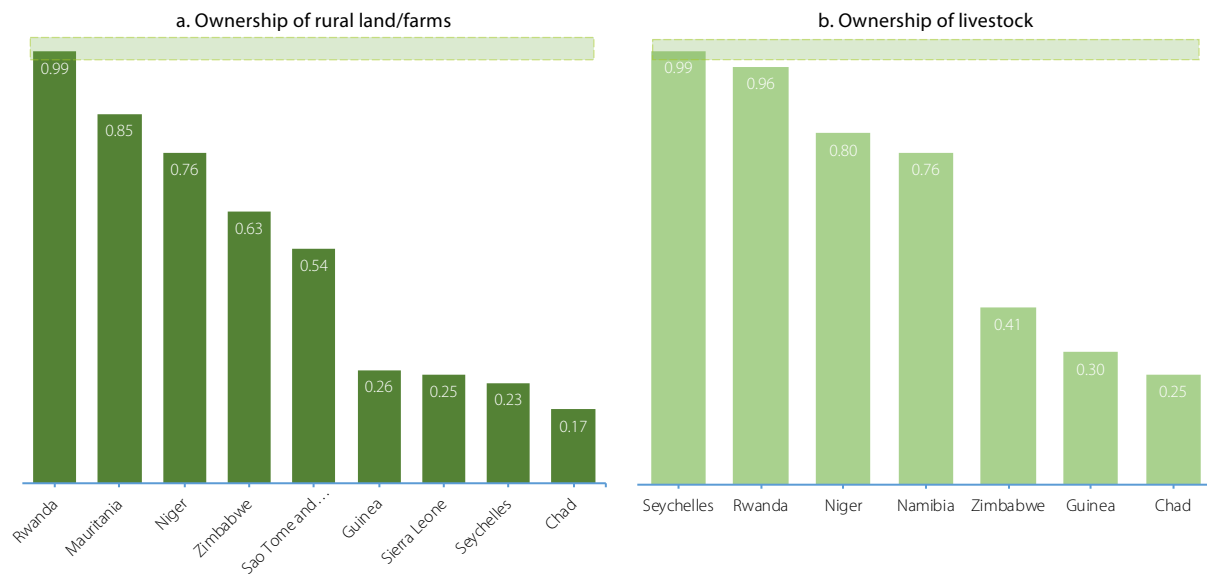
In the Niger, plots managed by women produce 19 per cent less per hectare than plots managed by men. The reasons for this lower productivity of plots managed by women are as follows: women face significant challenges in accessing, using and mobilizing male farm labour; women use less organic and inorganic fertilizer per hectare than men; women are less likely to report owning land and to enjoy higher returns to ownership than men; and women's larger role in childcare and household responsibilities reduce their time being on the land. Policy interventions should be aimed at facilitating women's access to and use of hired farm labour; increase women's efficient use of fertilizer; and support women's access to and control over land.

Sources: *FAQ, 2011b; and World Bank and ONE, 2014.*

Access to land

Land is the most important asset for agricultural communities. Figure 6.IX(a) shows that a greater proportion of men owned rural land/farm than women in the nine countries that data are available. Rwanda has attained parity with a GSI value of 0.99. There is severe gender disparity for Chad, Guinea, Seychelles and Sierra Leone, and moderate gender disparity in Mauritania, the Niger and Zimbabwe. In Rwanda, Law N° 22/99 (1999) provided for women to inherit from their parents' properties and contributed to close gender gaps in land ownership. According to the draft national report on AGDI for Rwanda, to date, 88.8 per cent of women own land, compared with 89.5 per cent of men, representing a GSI value of 0.99 and gender parity (see figure 6.IX(b)).

Figure 6.IX (a) Ownership of rural land/farms and Gender Status Index (b) ownership of livestock



Source: ECA analysis based on data from published and draft national reports on AGDI.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Source: ECA analysis based on data from published and draft national reports on AGDI and National Institute of Statistics of Rwanda, 2016.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Inheritance remains the main regime through which women acquire and control property. Some countries have adopted formal legislation to guarantee women's land rights. For example, Mauritius is a Forced Heirship jurisdiction, whereby men and women have an equal right to inheritance. According to the draft national report on AGDI for Rwanda, around 90 per cent of legally married couples are married under the community of property matrimonial regime for which Law N° 22/99 (1999) provides that spouses share equality in the common property in the event that the regime is altered.

Adoption of formal legislation, however, need not guarantee women's equal land rights. Implementation often remains problematic due to a number of factors, including women having inadequate access to information, their poor representation on local decision-making bodies, and their having very limited access to complementary assets and capital to make productive use of ownership of land (Chicago Council, 2011). As discussed in chapter 2, customary laws that are recognized in some countries undermine statutory laws that give equal rights to women and men to property inheritance and ownership.

Overall, countries scored themselves high on involvement of civil society, followed by policy commitment, institutional mechanism, capacity enhancement and information and dissemination in terms of promoting access to land on the African Women's Progress Scoreboard (see annex VI, table AVI.4). Weak areas from countries' perspectives were development of a plan, setting targets, budget allocation and human resources. Sao Tome and Principe scored itself highest at a 100 per cent followed by Rwanda with 92 per cent. Eswatini and Guinea scored themselves the lowest at 42 per cent.

Access to urban plots/houses

Data on access to urban plots and houses were available for only five of the countries covered by this report. There are large gender gaps in favour of females in the Niger (GSI = 1.34) and in favour of males in Chad (GSI = 0.29), Eswatini (GSI = 0.26) and Guinea (GSI = 0.26). Sao Tome and Principe has moderate

gender disparity favouring males with a GSI value of 0.80. Ownership of urban plots/houses is low for both sexes in Guinea (3 per cent of females, compared with 13 per cent of males) and relatively high in the Niger (50 per cent of females, compared with 37 per cent of males). Females in Eswatini own 20 per cent of all urban plots/houses.

Access to livestock

In rural areas especially, livestock is an important source of income, wealth and power for ploughing, land clearing and transportation, as well as a coping mechanism against shocks.¹²³ Figure 6.IX(b) shows that there are gender inequalities in the countries that have available data on the ownership of livestock, except for Seychelles. The inequalities are especially acute in Chad, Guinea and Zimbabwe where the GSI values are below 0.5. There is moderate gender disparity at the expense of women in Namibia, the Niger and Rwanda, and gender parity in Seychelles. According to the draft national report on AGDI for Rwanda, male-headed households tend to own a larger share of large animals, such as cattle, goats, sheep and pigs, while female-headed households own a larger share of smaller animals such as chicken and rabbits.

Access to credit

Having access to credit is important in enabling enterprises to grow and become more efficient. As a result of poverty and a lack of suitable assets to act as collateral, women tend to have less access to credit markets than their male counterparts. Although a larger proportion of males have access to credit for the four countries that have available data from the national reports and draft reports on AGDI, the GSI scores are moderately high. The value is 0.77 in Chad and 0.85, 0.89 and 0.92 in the Niger, Guinea and Rwanda, respectively.

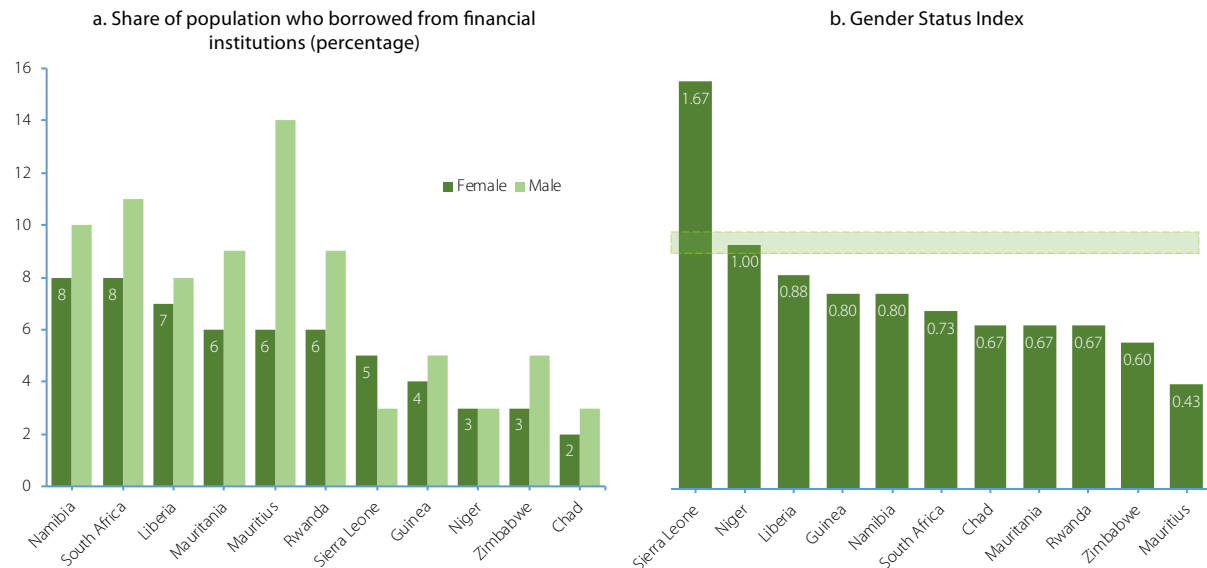
The World Bank Global Findex Database of 2017 provides further data on access to credit. Figure 6.X(a) shows the share of population who borrowed from financial institutions, ranging from 2 per cent for females in Chad to 14 per cent for male in Mauritius. A higher share of men borrowed from financial institutions relative to women in all countries that have available data, except in the Niger and Sierra Leone. There is gender parity in the Niger, whereas in Sierra Leone 5 per cent of women borrowed from financial institutions, compared with 3 per cent of men. There is significant gender disparity at the expense of females in Mauritius with a GSI value of 0.43 (see figure 6.X(a)).

¹²³ FAO (2011a, p. 24).



Figure 6.X (a) Share of population who borrowed from financial institutions by sex (percentage) and (b) Gender Status Index,

2017



Source: ECA analysis based on data from the World Bank, 2018b.

Source: ECA analysis based on data from the World Bank, 2018b.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Box 6.9 discusses how the development of the financial inclusion strategy in Zimbabwe take account of differences between men and women.

Box 6.9 Gender-sensitive development of financial inclusion strategy in Zimbabwe

According to the World Bank's Global Findex Database for 2017, 5 per cent of men borrowed from financial institutions, compared with 3 per cent of women in Zimbabwe. Several women's empowerment organizations were consulted in the development of the national financial inclusion strategy concept paper and its subsequent development. The focus on women financial inclusion in the strategy was informed by the disproportionate lower levels of financial inclusion among women, notwithstanding women comprising the majority of the population and having higher levels of engagement in small-scale enterprises. Two of the key barriers to women's financial inclusion identified as facing women in the country, include higher illiteracy levels and a lack of acceptable collateral. As part of its national financial inclusion strategy implementation, the Reserve Bank of Zimbabwe is analysing sex disaggregated data to inform the development of specific financial inclusion targets for women.

Source: Alliance for Financial Inclusion, 2017 and World Bank, 2018b.

Access to agricultural extension services

Extension services provide information to farmers on the most effective agricultural technology and techniques with the ultimate aim of increasing agricultural productivity. One of the factors that limit the access of female farmers to extension services is the lack of female extension agents. According to the draft national report on AGDI for Rwanda, female extension agents represent less than 25 per cent of all agents in all the agricultural zones throughout the country. In Mauritius, the Ministry of Agro Industry and Food Security has set up a Women and Youth Unit in the Extension Department of the Food and Agricultural Research and Extension Institute to promote agriculture among women and young people, and

to encourage women entrepreneurship. According to the national report on AGDI for Mauritius, the Institute's support is provided mainly through the activities of Agricultural Clubs, training in agricultural production and value addition through agro-processing.

Overall, countries scored themselves high on policy commitment and institutional mechanisms in terms of promoting access to agricultural extension services on the African Women's Progress Scoreboard (see annex VI, table AVI.5). Weak areas were human resources, involvement of civil society, information and dissemination, monitoring and evaluation and accountability/transparency. Mauritius, Rwanda and Sao Tome and Principe scored themselves above 80 per cent on this indicator, while South Africa scored itself the lowest at 65 per cent followed by Eswatini and Namibia (67 per cent).

Access to technology

Access to technology is important for improving the productive capacity of women and men. Overall, countries scored themselves high on policy commitment, development of a plan, setting targets and institutional mechanisms in terms of promoting access to technology on the Progress Scoreboard (see annex VI, table AVI.6). Countries scored themselves low on budget, on involvement of civil society, information and dissemination and capacity enhancement. Chad, Mauritius and Rwanda South Africa scored themselves at 92 per cent on this indicator, while Sao Tome and Principe scored itself the lowest at 63 per cent followed by Eswatini at 67 per cent.

Box 6.10 Promoting access to information and communications technology in Mauritius

One of the national objectives of Mauritius is to make information and communications technology (ICT) one of the major pillars of the economy. In line with that objective, the National Computer Board aims to create an information society by promoting ICT literacy; democratizing access to ICT and free Internet services and promoting ICT for social development. The National Broadband Policy 2012 – 2020 facilitates the provision of affordable, accessible, universal access to broadband infrastructure and services. Under the Community Empowerment Programme, the National Computer Board has set up 270 computer clubs to provide free access to ICT tools and the Internet. Fifteen of these clubs have been set up in women's clubs, contributing to improved communication, knowledge sharing, networking, electronic commerce activities and e-learning for women. The Board also operates three cyber caravans to provide basic ICT training to various segments of the community, including women.

Source: *National report on AGDI for Mauritius, 2017.*

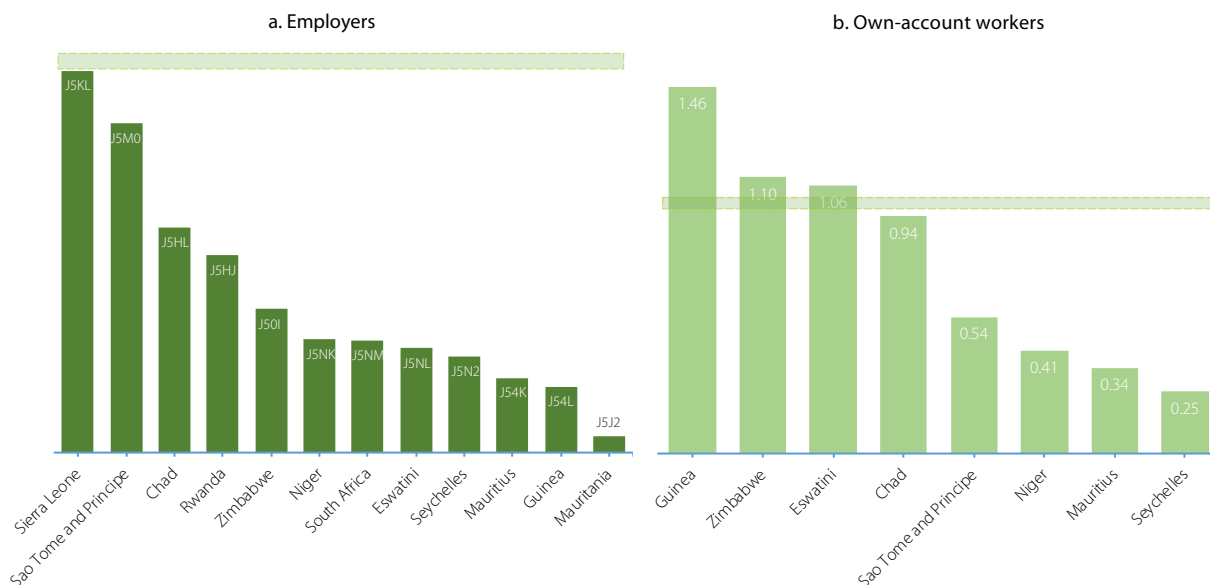
6.4.2 MANAGEMENT OF RESOURCES

Employers and own-account workers

There is gender parity in the number of employers for Sierra Leone with a GSI value of 0.97 (see figure 6.XI(a)). For the rest of the countries with available data, there are significant gender disparity at the expense of women, except for where the GSI value is 0.83 (Sao Tome and Principe). The GSI values for Eswatini, Guinea, Mauritania, Mauritius, the Niger, Seychelles, South Africa and Zimbabwe are all below 0.50.

There is a higher proportion of women own-account workers than men own-account workers in Eswatini, Guinea, and Zimbabwe (see figure 6.XI(b)). In Mauritania, Mauritius, the Niger, Sao Tome and Principe and Seychelles, women are at a severe disadvantage compared with men when it comes to being own-account workers.

Figure 6.XI Gender Status Index for (a) employers and (b) own-account workers



Source: ECA analysis based on data from published and draft national reports on AGDI.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

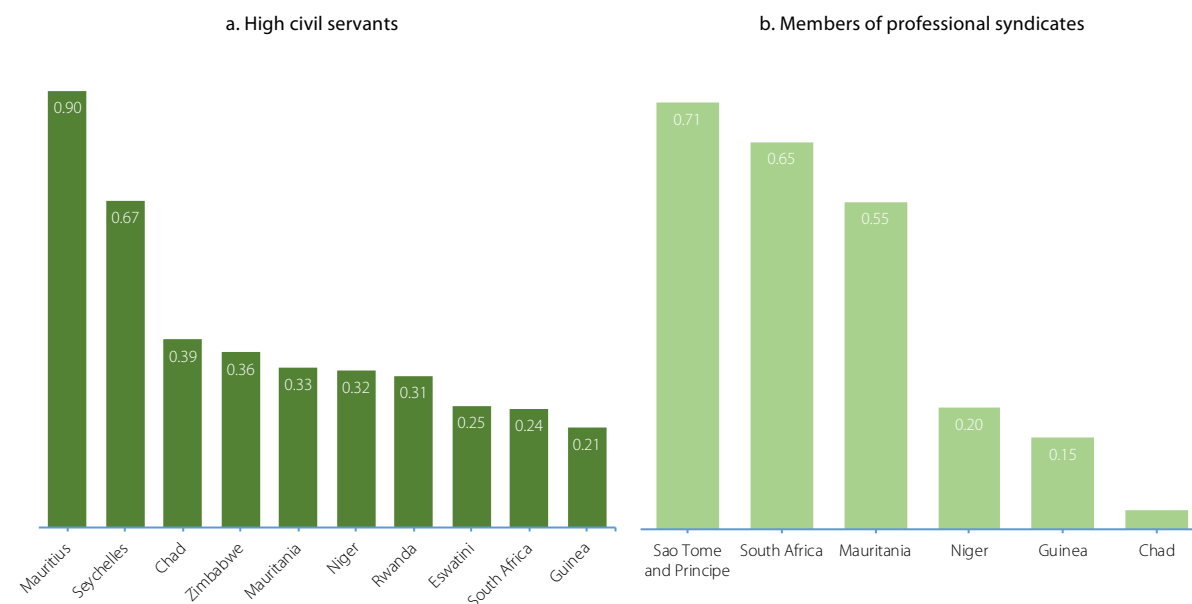
Source: ECA analysis based on data from published and draft national reports on AGDI.

Note: Highlighted area represents gender parity with an index between 0.97 and 1.03.

High civil servants and members of professional syndicate

Apart from Mauritius and Seychelles, there is acute gender disparity in the number of high civil servants in countries with available data (see figure 6.XII(a)). The GSI values ranges from 0.21 in Guinea to 0.9 in Mauritius. In terms of members of professional syndicates (see figure 6.XII(b)), the GSI values for the three countries with data are 0.15 (Guinea), 0.2 (the Niger) and 0.65 (South Africa).

Figure 6.XII Gender Status Index for (a) high civil servants and (b) members of professional syndicates



Source: ECA analysis based on data from published and draft national reports on AGDI.

Source: ECA analysis based on data from published and draft national reports on AGDI.

6.4.3 ENGENDERING THE NATIONAL POVERTY REDUCTION PROGRAMME

"The lack of gender disaggregated data in agriculture, fisheries, business and economy and data emanating from the private sector make it difficult to assess the situation of women in those areas and set realistic targets."

Draft national report on AGDI for Seychelles.

Overall, countries scored themselves high on development of a plan and institutional mechanism in terms of integrating gender perspectives into their national development programmes on the African Women's Progress Scoreboard (see annex VI, table AVI.7). Policy commitment, setting of targets and involvement of civil society also received relatively high scores by countries. Countries gave themselves low scores for budget, human resources, research, information and dissemination, monitoring and evaluation, and capacity enhancement. Chad, Mauritius, Rwanda and Sao Tome and Principe scored themselves 100 per cent, while South Africa scored itself the lowest at 62 per cent. No country gave itself a zero on any of the areas on which scoring is based.

6.5 CONCLUDING REMARKS

This chapter provided a review of the progress made by the selected countries in using the indicators under the Economic Power block of AGDI. It assessed the extent to which countries have been meeting their commitments in promoting access to economic opportunities and resources.

Women's access to economic opportunities and resources. Women continue to face limited access to economic opportunities and resources, including land and credit. In general, a lack of sex-disaggregated data is a major challenge in this area.

Wages and income. In general, there is gender disparity in favour of males in terms of wages and income, with a higher proportion of women in the lowest income brackets. This is a result of differences in education attainment, accumulated work experience, choice of educational specialization, occupational segregation and labour market institutions, which favour men in the main.

Time use. Women spend more time engaging in unpaid work than men, leaving them less time to devote to remunerative employment, participation in political and public life and learning.

Employment. Labour force participation rates are generally high for both women and men. Limited access to education and vocational opportunities, compared with men, contributes to women being overrepresented in low-paid domestic work with limited social protection and precarious working conditions. Female unemployment rates tend to be higher than that of males in countries where unemployment rates are high.

Access to the means of production. Differences in access to and use of agricultural inputs, tenure security and incentives to invest in land improvements and adopt improved technologies, market and credit access, human and physical capital, and cultural and social norms that assigns different roles to females and males contribute to relatively low productivity for women in agriculture and the economy as a whole. The lack of women's participation in the delivery of services is important as it limits women's access to extension services.



Management of resources. Like for the other areas in the Economic Power block, sex-disaggregated data are not readily available on the indicators in this component. Data that are available suggest that women are disadvantaged in terms of managing economic resources for the countries covered by this report.

Conventions of the International Labour Organizations. Liberia is the only country covered by the report that has not ratified Convention 100 on equal pay for work of equal value. All countries have ratified Convention 111 on discrimination. Although Sao Tome and Principe is the only country that has ratified Convention 183 on maternity protection, other countries have taken some measures that are in line with the main provisions of the Convention.

Scoring on the African Women's Progress Scoreboard. Overall, countries score themselves well on policy commitment and institutional mechanism in terms of promoting women's access to economic opportunities and resources. Weak areas were information and dissemination, budget, research and capacity enhancement.

6.6 RECOMMENDATIONS

Governments should undertake the following interventions to promote women's access to economic opportunities and resources.

- **Women's land rights and access to property ownership.** Strengthen women's property and land ownership and land rights by, among others, increasing tenure security and reforming family, property ownership and inheritance laws.
- **Women's entrepreneurship.** Undertake new measures and strengthen current ones to promote women's entrepreneurship and ensure that they have greater access to skills, and financial and business support services.
- **Unpaid care work.** Undertake new measures and strengthen current ones to reduce the burden of unpaid work through better infrastructure, in particular energy, water, sanitation and transportation, the provision of affordable care services for children, the elderly and the sick, and maternity, paternity and parental leave programmes.
- **Gender-sensitive delivery of public services.** Take steps to increase the number of women at the frontline of services delivery, including in agricultural extension.
- **International Labour Organization Conventions.** Ratify International Labour Organization's Convention 100, 111 and 183, and take steps to domesticate their provisions in the national legal framework.
- **Implementation and enforcement.** Strengthen the implementation of policies and programmes and the enforcement of legislation aimed at promoting women's access to economic opportunities and resources.
- **Awareness-raising 1: Rights and services.** In collaboration with civil society organizations, carry out awareness-raising campaigns that target the general public, the judiciary, law enforcement institutions and traditional and customary institutions on the legislation, policies and programmes to promote women's access to economic opportunities and resources.

- **Awareness raising 2: Conventions.** Conduct awareness-raising campaigns that target employers' associations, trade unions officials and the general public on the main provisions of Conventions 100, 111 and 183 of the International Labour Organization.
- **Resources.** Allocate adequate organizational, human, technical and financial resources to implement plans, programmes and policies, and enforce legislation aimed at promoting women's access to economic opportunities and resources.
- **Data.** Enhance the collection, analysis and dissemination of comprehensive data, including time-use data, disaggregated by sex, age, geographical location and educational attainment on income, participation in the labour market, and access to and management of economic resources.

ANNEX VI COUNTRY SCORES ON ACCESS TO ECONOMIC OPPORTUNITIES AND RESOURCES ON THE AFRICAN WOMEN'S PROGRESS SCOREBOARD

Table AVI.1 Scores for International Labour Organization Convention 100 (1951) on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	0	2	2	2	2	2	2	2	2	2	2	2	2	2	28	30	93
Eswatini	2	2	2	2	2	2	2	1	2	1	2	1	1	1	1	24	30	80
Guinea	2	2	2	1	2	2	1	1	1	0	2	1	1	1	1	20	30	67
Mauritius	2	2	2	2	1	1	2	2	2	1	2	2	2	2	2	27	30	90
Namibia	2	2	2	2	2	2	2	1	1	1	1	1	1	1	2	23	30	77
Niger	2	2	2	2	2	2	2	1	2	1	2	1	1	1	1	24	30	80
Rwanda	2	2	2	2	0	0	2	2	2	0	2	2	0	2	2	22	30	73
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	30	30	100
Seychelles	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	30	30	100
South Africa	2	2	2	2	1	0	1	1	1	2	1	1	1	1	1	19	30	63

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Guinea-Bissau, Mauritania, Sierra Leone and Zimbabwe did not report.

Table AVI.2 Scores for International Labour Organization Convention 111 (1958) on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/transparency	Total	Maximum score	Percentage
Chad	2	0	2	2	2	2	2	2	2	2	2	2	2	2	2	28	30	93
Eswatini	2	2	2	2	2	2	2	1	2	1	2	1	1	1	1	24	30	80
Guinea	2	2	2	2	2	2	2	1	1	1	2	1	1	1	1	23	30	77
Mauritius	2	2	2	2	2	2	2	2	2	1	2	2	2	2	2	29	30	97
Namibia	2	2	2	2	2	2	2	1	1	1	1	1	1	1	2	23	30	77
Niger	2	2	2	2	1	2	2	1	2	2	2	2	2	1	1	26	30	87
Rwanda	2	0	2	2	0	0	2	2	2	0	2	2	0	2	2	20	30	67
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	30	30	100
Seychelles	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	30	30	100
South Africa	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	19	30	63

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania and Sierra Leone did not report.

Table AVI.3 Scores for International Labour Organization Convention 183 (2000) on the African Women's Progress Scoreboard

	Ratification	Reporting	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/transparency	Total	Maximum score	Percentage
Chad	2	0	2	2	2	2	2	2	2	2	2	2	2	2	2	28	30	93
Eswatini	2	1	1	1	2	2	2	1	1	1	1	0	1	1	1	18	30	60
Guinea	2	2	2	2	2	2	2	1	1	2	1	1	1	1	1	23	30	77
Mauritius	1	2	2	1	2	2	2	2	2	1	2	2	2	2	2	27	30	90
Namibia	0	0	2	2	2	2	2	1	1	1	1	1	1	1	1	18	30	60
Niger	2	2	2	2	2	2	2	1	2	1	2	2	2	1	1	26	30	87
Rwanda	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	30	0
Sao Tome and Principe	2	0	2	2	2	2	2	2	2	2	2	2	2	2	2	28	30	93
Seychelles	0	0	2	1	0	0	2	2	2	0	2	1	2	2	2	18	30	60
South Africa	0	0	2	2	1	0	2	1	1	1	2	1	1	1	1	16	30	53

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania and Sierra Leone did not report.

Table AVI.4 Scores for access to land on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	1	2	1	1	2	1	2	1	2	1	1	2	2	19	26	73
Eswatini	1	1	1	0	1	1	1	0	1	1	1	1	1	11	26	42
Guinea	x	1	1	1	1	1	1	1	1	1	0	1	0	10	24	42
Mauritius	2	1	1	1	1	0	0	1	2	2	2	2	2	17	26	65
Namibia	2	2	2	2	2	1	1	2	1	1	2	1	2	21	26	81
Niger	2	2	2	2	2	1	2	2	2	2	1	2	1	23	26	88
Rwanda	2	2	0	2	2	2	2	2	2	2	2	2	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
South Africa	1	1	1	1	1	1	1	2	2	2	2	1	1	17	26	65

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania and Sierra Leone did not report.

Table AVI.5 Scores for access to agricultural extension services on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	1	1	2	2	2	1	2	1	1	1	1	2	19	26	73
Eswatini	x	2	2	2	2	1	1	1	1	1	1	1	1	16	24	67
Guinea	x	2	2	2	2	1	1	2	1	1	1	1	1	17	24	71
Mauritius	2	2	1	1	2	2	2	2	2	2	2	2	2	24	26	96
Namibia	x	2	2	2	2	1	1	1	1	1	1	1	1	16	24	67
Rwanda	x	2	1	0	2	2	2	2	2	2	2	2	2	21	24	88
Sao Tome and Principe	x	2	2	2	2	2	2	2	2	2	2	2	2	24	24	100
South Africa	1	2	1	2	1	2	1	1	1	1	1	2	1	17	26	65

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania and Sierra Leone did not report.

Table AVI.6 Scores for access to technology on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	1	2	2	2	2	2	1	2	2	2	2	2	2	24	26	92
Eswatini	x	2	2	2	2	1	1	1	1	1	1	1	1	16	24	67
Guinea	x	2	2	2	2	1	2	2	1	1	1	1	1	18	24	75
Mauritius	2	2	2	2	2	2	2	1	2	2	2	2	2	25	26	96
Namibia	x	2	2	2	2	1	1	2	1	1	2	1	2	19	24	79
Rwanda	x	2	2	2	2	2	2	2	2	2	2	2	2	24	24	100
Sao Tome and Principe	x	2	2	2	1	1	1	1	1	1	1	1	1	15	24	63
South Africa	2	2	2	2	2	1	2	1	1	1	2	1	1	20	26	77

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania and Sierra Leone did not report.

Table AVI.7 Scores for engendering national poverty reduction programme on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	x	2	2	2	2	1	1	1	2	1	1	1	1	17	24	71
Guinea	x	2	2	2	2	1	1	1	2	1	1	1	1	17	24	71
Mauritius	x	2	2	2	2	2	2	2	2	2	2	2	2	24	24	100
Namibia	x	2	2	2	2	1	1	1	1	1	1	1	2	17	24	71
Rwanda	x	2	2	2	2	2	2	2	2	2	2	2	2	24	24	100
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
South Africa	1	1	2	1	2	1	1	1	2	1	1	1	1	16	26	62

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: Mauritania and Sierra Leone did not report.

7. WOMEN'S AGENCY AND DECISION-MAKING

7.1 INTRODUCTION

The Political Power block of GSI consists of the public sector component and civil society component. The public sector consists of eight indicators and compares women's performance with that of men in senior positions of the legislative, judicial, executive and administrative levels of Government. The civil society component consists of five indicators on the relative performance of women and men in senior positions in traditional institutions, political parties, trade unions, employers' organizations and non-governmental organizations. The political power block of the African Women's Progress Scoreboard consists of issues relating to women's participation in political and public life, traditional governance, peace and security, and gender mainstreaming.

Women's participation in political and public life. In colonial and postcolonial African societies, women were excluded from political life and decision-making processes. Under article 7 of CEDAW, States Parties are required to "take all appropriate measures to eliminate discrimination against women in the political and public life of the country" and ensure that women participate in political and public life on equal terms with men.¹²⁴ In its general recommendation 23, the Committee on the Elimination of Discrimination against Women explained that political and public life refers to the exercise of legislative, judicial, executive and administrative powers at the international, national, regional and local levels.¹²⁵ It also includes, among other things, public boards, local councils and the activities of political parties, trade unions, professional and industry associations, women's organizations and community-based organizations.

Excluding women from political and public life is undemocratic.¹²⁶ According to the Beijing Platform for Action, society also loses out as the participation of women in political and public life "contributes to redefining political priorities, placing new items on the political agenda that reflect and address women's gender-specific concerns, values and experiences, and providing new perspectives on mainstream political issues".¹²⁷ Furthermore, an increasing number of women participating in political and public life may act as role models encouraging more women to become involved in politics (Bauer and Burnet, 2013).

Women face a number of barriers that prevent them from fully participating in political and public life. These include discriminatory attitudes and practices that reinforce patriarchal notions of the incapability of female leadership, perpetuation of violence against women during the electoral cycle, illiteracy, the burden of unpaid care work, women's economic dependence on men and the high cost of seeking and holding public office. Gender stereotypes are common in which women are viewed as having policy expertise in education, gender, health care and social affairs, while men are viewed as strong in defence, foreign policy and economics (Thomas and Adams (2010). These act as barriers to women's full par-

124 United Nations (1979, article 7).

125 CEDAW Committee (1997, para. 5).

126 Ibid., para. 14.

127 United Nations (1995, para. 182).



ticipation in political and public life. An important set of institutional barriers relates to the electoral system. Scholars have proposed that first-past-the-post electoral systems create additional constraints for women candidates, whereas proportional representation systems with a large number of contested seats are associated with higher women's participation (ECA, 2014; United Nations, 1994; CEDAW Committee, 1997).

The Beijing Platform for Action set a target of having 30 per cent women in positions at decision-making levels. The Protocol on Gender and Development of the Southern African Development Community (SADC) set a target of 50 per cent. Eswatini, Mauritius, Namibia, Seychelles, South Africa and Zimbabwe are members of SADC.

The recognition of the important role of women's full participation in conflict prevention and resolution and post-conflict rebuilding, is enshrined in six resolutions adopted by the United Nations Security Council. These resolutions also exhort member States to protect women and girls from gender-based violence in armed conflict. Resolution 1325 of 2000 acknowledges that conflict disproportionately affects women and calls upon member States to adopt a gender perspective to ensure women's full participation in conflict prevention, conflict resolution and peacebuilding. Subsequent resolutions reiterate the message in resolution 1325, to strengthen women's role in peace building in post-conflict contexts (see box 7.1).

Box 7.1 Security Council resolutions regarding women's participation in conflict resolution and peacebuilding

The Security Council has adopted six resolutions that deal with the participation of women in conflict prevention and resolution and peacebuilding. These relevant articles are summarized in the table below.

Table B7.1

United Nations Security Council Resolutions regarding women's participation in conflict prevention and resolution, and peacebuilding

Resolution	Component on women's participation	Year
1325	Urges women's leadership and equal participation in conflict resolution and peacebuilding; requires gender mainstreaming for peace operations.	2000
1820	Emphasizes the need to increase women's roles in decision-making on conflict prevention and resolution.	2008
1888	Expresses concern regarding the lack of female mediators.	2009
1889	Calls for further strengthening of women's participation in peace processes and the post-conflict period, as well as the development of indicators, monitoring, and reporting to measure progress on resolution 1325.	2009
1960	Encourages efforts to increase the participation of women in formal peace processes.	2010
2122	Calls on all parties to peace talks to facilitate equal and full participation of women in decision-making; aims to increase women's participation in peace making by increasing resources and improving information on women in conflict zones; acknowledges the critical contributions of women's civil society organizations to conflict prevention, resolution, and peacebuilding.	2013

Source: O'Reilly, Súilleabháin and Paffenholz, 2015.

Gender mainstreaming. In the Agreed Conclusions of resolution 1997/2, the Economic and Social Council (ECOSOC) defined gender mainstreaming as:

[T]he process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in all areas and at all levels. It is a strategy for making women's and men's concerns and experiences an integral dimension 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 is to achieve gender equality (ECOSOC, 1997).

The national machinery for the advancement of women is responsible for mainstreaming a gender-equality perspective in all policy areas.¹²⁸ In order to be effective, a national gender machinery should: be located at the highest possible level in Government; facilitate decentralized planning, implementation and monitoring; involve non-governmental organizations and community organizations; have sufficient resources in terms of budget and professional capacity; and have the opportunity to influence the development of all government policies.¹²⁹

This chapter reviews the progress made by the selected countries in meeting their commitments in promoting women's participation in political and public life, including in conflict prevention and resolution, peacebuilding and traditional governance, and in mainstreaming a gender perspective into all departments.

7.2 WOMEN'S PARTICIPATION IN POLITICAL AND PUBLIC LIFE

"States Parties shall take specific positive action to promote participative governance and the equal participation of women in the political life of their countries through affirmative action, enabling national legislation and other measures to ensure that:

- (a) Women participate without any discrimination in all elections;*
- (b) Women are represented equally at all levels with men in all electoral processes;*
- (c) Women are equal partners with men at all levels of development and implementation of*

States Parties shall ensure increased and effective representation and participation of women at all levels of decision-making."

**Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa
(African Union, 2003, article 9).**

Participation in political and public life is one area in which gender disparity against women is particularly stark. This has an especial significance as key decisions about policies and budgetary allocation that have a bearing on the economic, political and social life of communities are taken in governance structures where women are underrepresented.

¹²⁸ United Nations (1995, para. 205 (a)).

¹²⁹ *Ibid.*, para. 201.

7.2.1 REPRESENTATION IN NATIONAL PARLIAMENTS

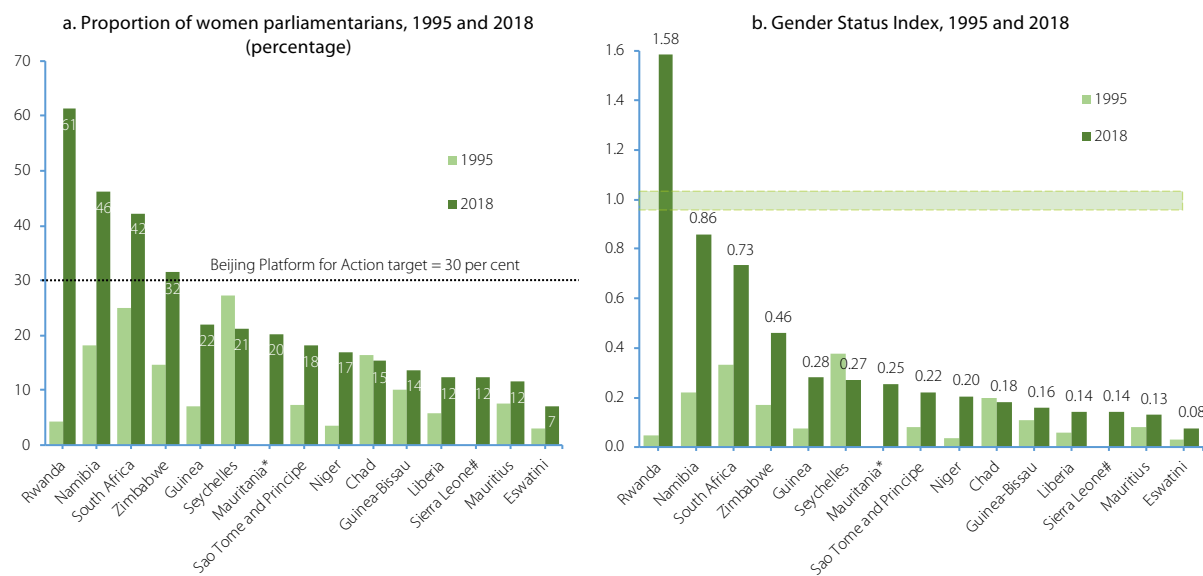
"States Parties (...) shall ensure to women, on equal terms with men, the right to vote in all elections and public referenda and to be eligible for election to all publicly elected bodies."

United Nations (1979, article 7 (a)).

Figure 7.1(a) shows that as at the beginning of September 2018, four countries – Zimbabwe (32 per cent), South Africa (43 per cent), Namibia (46 per cent), and Rwanda (61 per cent) – had reached the target of at least 30 per cent of women in the national parliament (lower parliament in bicameral parliamentary systems), a target that was set in the Beijing Platform for Action. These countries all have quotas and proportional representation electoral systems (see discussion below). According to data compiled by the Inter-Parliamentary Union, Rwanda was ranked first in the world in terms of the proportion of women in parliament in September 2018; Namibia and South Africa were ranked sixth and tenth, respectively. No member of SADC has achieved the target of 50 per cent of women in parliament. In Eswatini, women currently hold 4 of the 65 available seats in the Lower House, the House of Assembly.

In all countries, except Rwanda where women hold 49 of the available 80 seats in the Lower House, there is gender disparity to the disadvantage of women (see figure 7.1(b)). Namibia had a GSI value of 0.86, while GSI for South Africa was 0.75. Chad, Eswatini, Guinea-Bissau, Liberia, Mauritius and Sierra Leone all have GSI values lower than 0.2, which imply that women are at a severe disadvantage relative to men in legislative participation.

Figure 7.1 (a) Proportion of women parliamentarians and (b) Gender Status Index, 1995 and 2018



Source: ECA analysis based on data from Inter-Parliamentary Union, 2015 and 2018.

Notes: Data for 2018 is correct as at 1 October 2018. * = no women represented in parliament in Mauritania in 1995. # = no data for Sierra Leone in 1995.

Source: ECA analysis based on data from Inter-Parliamentary Union, 2015 and 2018.

Notes: * = no women represented in parliament in Mauritania in 1995. # = no data for Sierra Leone in 1995. Highlighted area represents gender parity with an index between 0.97 and 1.03.

Table 7.1 Proportion of women in countries with bicameral parliamentary systems, 2018

Country	Lower House		Upper House	
	Percentage of women	Date of election	Percentage of women	Date of election
Eswatini	6.2	20-09-2013	33.3	30-10-2013
Liberia	9.9	10-10-2017	10.0	20-12-2014
Namibia	46.2	29-11-2014	23.8	08-12-2015
Rwanda	61.3	16-09-2013	38.5	26-09-2011
South Africa	42.7	07-05-2014	35.2	21-05-2014
Zimbabwe	31.5	30-07-2018	43.8	30-07-2018

Source: ECA analysis based on data from Inter-Parliamentary Union, 1 September 2018.

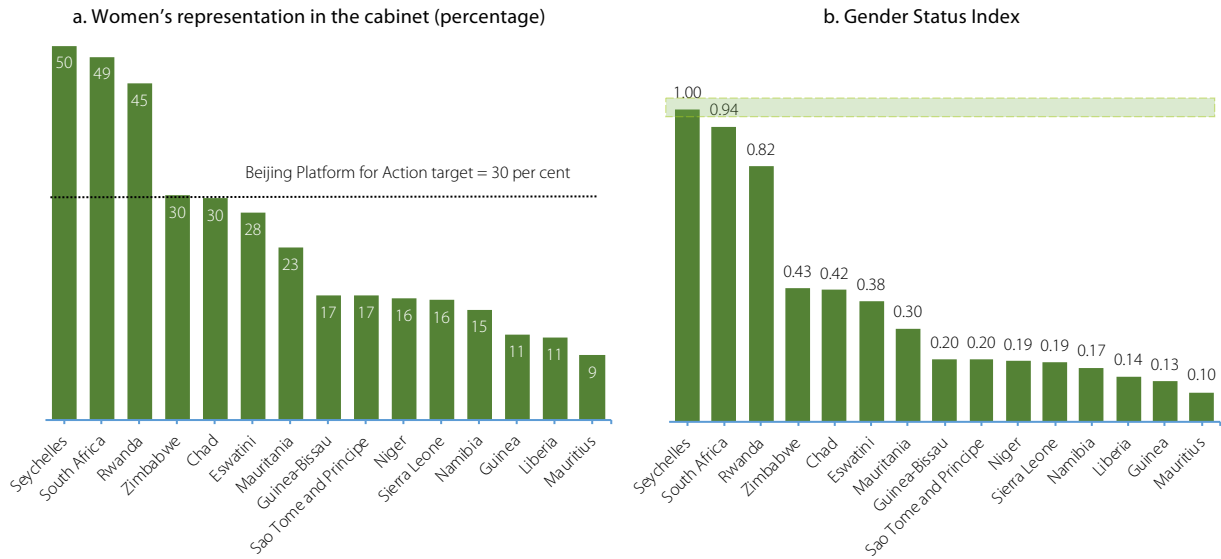
A positive aspect is that the participation of women in parliament has progressed since the Beijing Platform for Action was adopted in 1995, except for Chad and Seychelles. Rwanda registered the most impressive performance moving from a GSI value of 0.04 in 1995 to 1.58 in 2017. As of 1 September 2018, seven of the selected countries had women speakers of parliament: Eswatini (Senate); Liberia (Senate); Mauritius (National Assembly); Namibia (National Council); Rwanda (Chamber of Deputies); South Africa (National Assembly and National Council of Provinces); and Zimbabwe (Senate) (Inter-Parliamentary Union, 2018).

Eswatini, Liberia, Namibia, Rwanda, South Africa and Zimbabwe have bicameral parliamentary systems consisting of two houses of parliament. The proportion of women in the Upper House is highest in Zimbabwe at 44 per cent and lowest in Liberia at 10 per cent (see table 7.1). In Eswatini and Zimbabwe, the proportion of women in the Upper House is higher than in the Lower House.

7.2.2 REPRESENTATION IN THE CABINET OF MINISTERS

Overall, women tend to be underrepresented in cabinet appointments, while the proportion of women ministers represented in cabinet is generally lower than that in parliament for the countries covered by this report. Seychelles has the same number of female and male ministers – five. The share of women in the cabinet of ministers is 47 per cent in South Africa and 45 per cent in Rwanda (see figure 7.II(a)). The proportion of women in cabinet is below 20 per cent in eight of the countries. Rwanda (GSI = 0.82), Seychelles (GSI = 1.00) and South Africa (GSI = 0.89) have GSI values of at least 0.80. There is severe gender disparity in favour of males in the other countries with GSI values of below 0.45 (see figure 7.II(b)).

Figure 7.II (a) Women's representation in the cabinet and (b) Gender Status Index, 2018



Source: ECA analysis based on data from published and draft national reports on AGDI, government websites and France Diplomatie, 2018.

Notes: Calculation include prime ministers and vice-prime ministers. Presidents, vice-presidents, deputy ministers and secretaries of state are excluded from the calculations.

Source: ECA analysis based on data from published and draft national reports on AGDI, Government websites and France Diplomatie, 2018.

Notes: Calculation include prime ministers and vice-prime ministers. Presidents, vice-presidents, deputy ministers and secretaries of state are excluded from the calculations. Highlighted area represents gender parity with an index between 0.97 and 1.03.

Notwithstanding the overall dismal performance, there has been some notable achievements. In Liberia, Ellen Johnson Sirleaf was the first African woman to be elected president in 2006; she was re-elected in 2011. Ameenah Gurib-Fakim was the first woman President in Mauritius from July 2015, before resigning in March 2018 over a financial scandal (BBC News, 2018). The President in Mauritius is the Head of State but does not hold executive power. In Namibia, the current Prime Minister and Deputy Prime Minister are women and in Mauritius, the Vice-Prime Minister is a woman (see table 7.2). In Seychelles, the “Designated Minister” – third senior member of the cabinet after the President and the Vice-President – is a woman.

Another positive development is that women are being appointed to a wider range of ministerial portfolios. Although women are still concentrated in ministries responsible for education, health, community development, gender and social welfare, table 7.2. highlights that women are presently responsible for planning and economic development (Guinea and Sierra Leone), defence (Zimbabwe), agriculture, fisheries and natural resources (Eswatini, Guinea, Guinea-Bissau, Rwanda, Sierra Leone and South Africa), international relations (Guinea, Namibia, the Niger, Rwanda and South Africa), energy (Eswatini and the Niger), land, public works and transport (Eswatini, Seychelles and South Africa), science and technology (South Africa) and state security (South Africa).

Table 7.2 Ministerial portfolios that women presently occupy in selected countries

Country	Ministerial portfolios held by women
Eswatini (5)	Home affairs; natural resources and energy; public works and transport; health; and labour and social security.
Guinea (4)	Planning and economic development; social affairs, gender and children affairs; international cooperation and African integration; and agriculture.
Guinea-Bissau (3)	Fisheries; health, family and social cohesion; and territorial administration.
Liberia (2)	Health; and women affairs, children and social protection.
Mauritius (2)	Vice-Prime Minister, community development, gender equality, family affairs, and child welfare; and education, human resources and research.
Namibia (4)	Prime Minister; Deputy Prime Minister and international relations; gender equality and child welfare; and education, arts and culture.
Niger (7)	Public administration; communication; energy; population; promotion of women and child protection; international cooperation and African integration; and home affairs.
Rwanda (9)	Agriculture and animal resources; cabinet secretary; refugees and natural disasters; foreign affairs; gender and promotion of the family; health; presidency; Public administration and labour; and culture and sport.
Sao Tome and Principe (2)	Justice, public administration and human rights; and health.
Seychelles (5)	"Designated Minister" (third in hierarchy after the President and the Vice-President); home affairs; local government; young people, sport, culture; risk and disaster management; family affairs; education and human resource development; employment, immigration and civil status; and habitat, lands, infrastructure, and land transport.
Sierra Leone (4)	Maritime resources; social protection, gender equality and children; planning and economic development; and tourism and culture.
South Africa (17)	Public service and administration; labour; rural development and land reform; small business development; higher education and training; international relations and cooperation; planning, monitoring and evaluation; social development; defence and military veterans; communications; science and technology; sport and recreation; state security; basic education; human settlements; women; and environmental affairs.
Zimbabwe (6)	Defence and war veterans; public service, labour and social welfare; information; environment and tourism; young people, sport, arts and culture; women's affairs, community development, and small and medium enterprises.

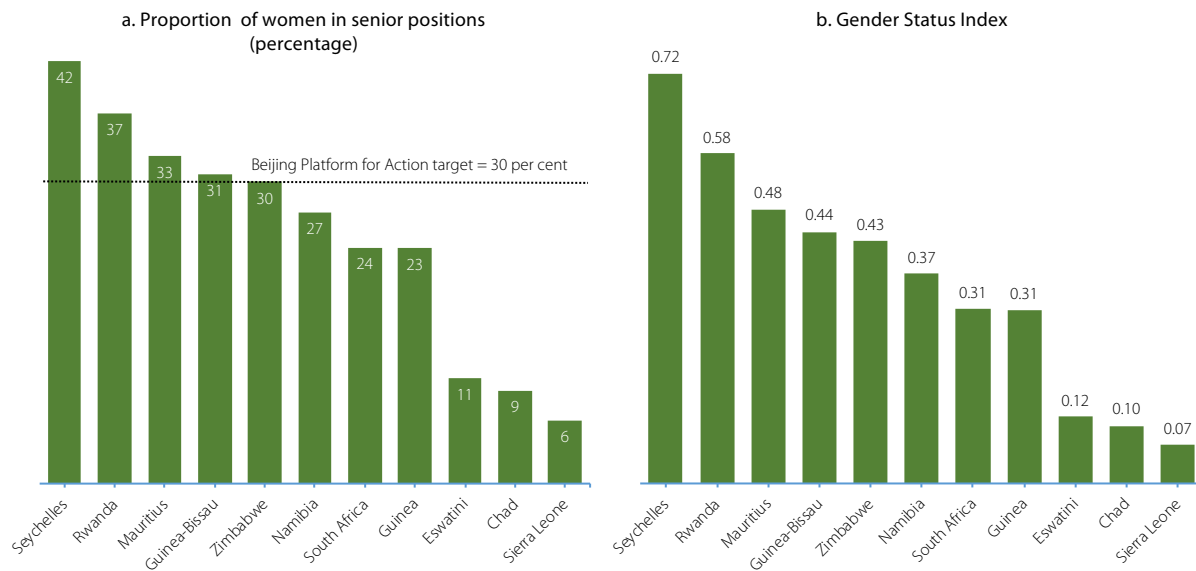
Source: ECA analysis based on SADC, 2016; government websites and France Diplomatie (www.diplomatie.gouv.fr/fr/dossiers-pays/).

Note: The number of women ministers is presented in brackets next to the name of the country.

7.2.3 REPRESENTATION IN HIGHER POSITIONS IN CIVIL SERVICE AND PARASTATALS

The proportion of women in senior positions (at the Principal Secretary and Director General level) in the civil service and parastatals either meets or exceeds 30 per cent in Guinea-Bissau, Mauritius, Rwanda, Seychelles and Zimbabwe (see figure 7.III(a)). The proportion is in the 20-30 per cent range in Guinea, Namibia and South Africa. Sierra Leone registered the lowest proportion at 6 per cent, followed by Chad with 9 per cent and Eswatini with 11 per cent. Apart from Rwanda (GSI = 0.58) and Seychelles (GSI = 0.72), all other countries had GSI values of below 0.5 (see figure 7.III(b)). The Governor of the Central Bank in Sao Tome and Principe and Seychelles are women, while the national statistics offices in Mauritius, Sao Tome and Principe and Seychelles are headed by women (United Nations, 2015a).

Figure 7.III (a) Proportion of women in senior positions in the civil service and parastatals and (b) Gender Status Index



Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

Data compiled by the secretariat of SADC show that, for the SADC countries covered by this report, the proportion of women at the level of permanent secretary and director general had fallen between 2011 and 2016.¹³⁰ In Eswatini and South Africa, the proportion fell from 34 to 25 per cent and from 24 to 11 per cent, respectively. In Mauritius, the share of women who were senior chief executives and permanent secretaries were 3 per cent at the beginning of 2017 (Government of Mauritius, 2016). On the other hand, the proportion of women at the level of deputy permanent secretary, director and head of department is higher overall, compared with the proportion of women at the level of permanent secretary and director general. This is especially the case for Eswatini, Mauritius and South Africa. Accordingly, this shows that that there is an ample supply of talented women to fill senior posts in the civil service in the future.

7.2.4 EMPLOYMENT IN SECURITY SERVICES

The proportion of women working in the security services is above 30 per cent in Eswatini, Namibia, Seychelles and South Africa (see table 7.3). In Mauritius, women have only recently been employed in that sector and account for 8 per cent of total employment. According to the national report on AGDI for Mauritius (2017), women working in the Mauritius Police Force are concentrated at lower levels with 91 per cent at the rank of police constable and trainee in 2015. In the same year, the highest ranked female was at the rank of Police Superintendent; 167 men were either at that rank or at higher ranks.

Table 7.3 Women's employment in security services (percentage) and Gender Status Index

	Women	Men	Gender Status Index
Eswatini	30.9	69.1	0.45
Mauritius	8.4	91.6	0.09
Namibia	34.1	65.9	0.52
Sao Tome and Principe	4.6	95.4	0.05
Seychelles	38.6	61.4	0.63
South Africa	34.1	65.9	0.52
Zimbabwe	23.1	76.9	0.30

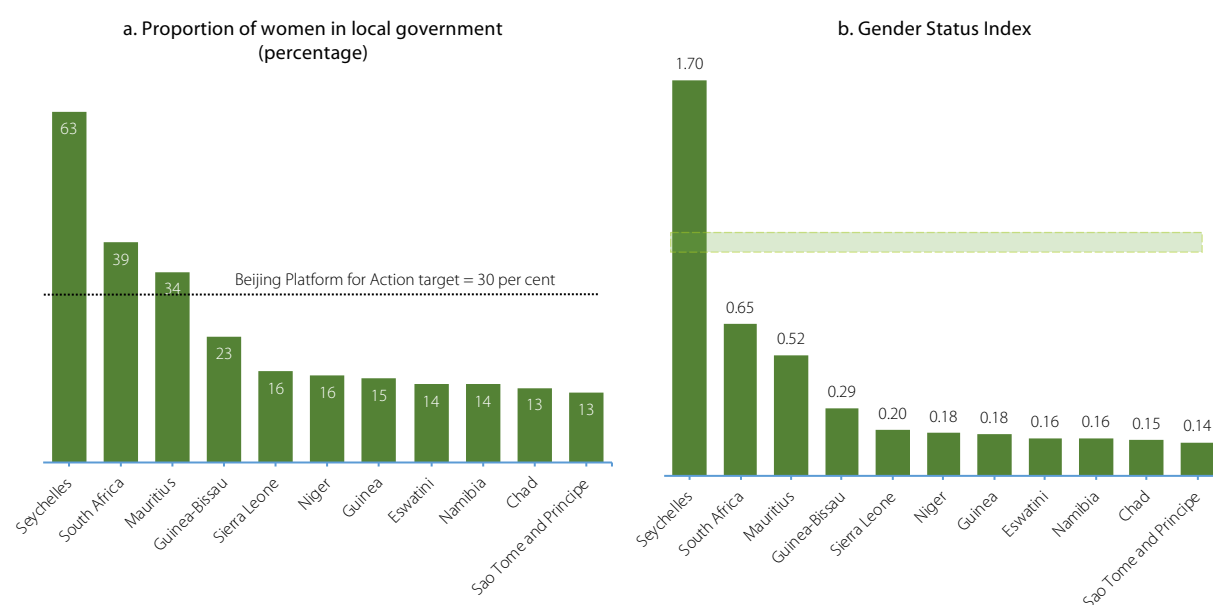
Source: ECA analysis based on data from published and draft national reports on AGDI, and SADC, 2016, table 8.2.

¹³⁰ SADC (2016, table 2.10).

7.2.5 REPRESENTATION IN LOCAL GOVERNMENT

Overall, women tend to be underrepresented in local government. Seychelles has more women than men in local government, with 63 per cent of officials that are women (see figure 7.IV(a)) translating into a GSI value of 1.7 (see figure 7.IV(b)). The proportion of women in local government is also above 30 per cent in Mauritius and South Africa. The proportion is below 25 per cent in Chad, Eswatini, Guinea, Guinea-Bissau, Namibia, the Niger, Sao Tome and Principe and Sierra Leone. Consequently, there is severe gender disparity in favour of males in the latter countries with GSI values of below 0.3.

Figure 7.IV (a) Proportion of women in local government and (b) Gender Status Index



Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

Notes: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Box 7.2 Women in regional and local councils in Namibia

Table B7.2 shows the representation in senior positions in local and regional councils in Namibia by gender. Overall, women are disadvantaged compared with men in terms of representation. The representation of women is better for local councils than for regional councils. Women are performing relatively well in terms of mayors and deputy-mayors in local councils, and governors and chief regional officers in regional councils, with GSI values of at least 0.50. Positions in which women are faring less well are chief executive officers in local councils (7 women out of 57 officers), chairpersons of regional councils (1 woman out of 13 chairpersons) and management committee members in regional councils (6 women out of 65 members).

Table B7.2 Membership of local and regional councils in Namibia

	Females	Males	Gender Status Index
Members of local councils			
Mayors	18	36	0.50
Deputy-mayors	24	36	0.67
Chief executive officers	7	50	0.14
Total	49	122	0.40
Members of regional councils			
Governors	5	9	0.56
Chairpersons	1	13	0.08
Management Committee members	6	59	0.10
Ordinary members	18	103	0.17
Chief regional officers	6	8	0.75
Total	36	192	0.19
Total: Local and regional councils	85	314	0.27

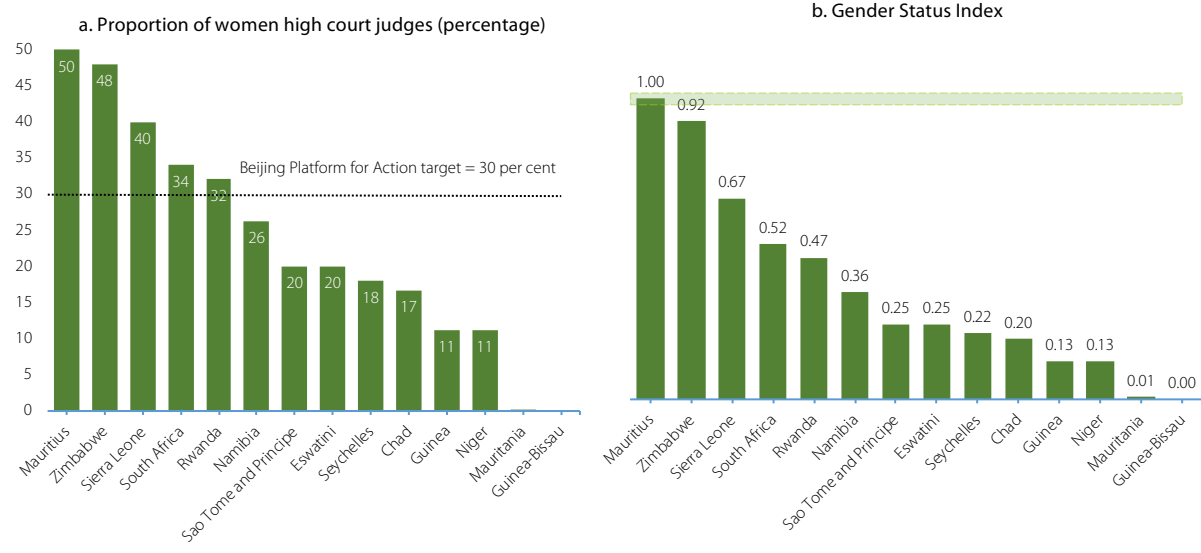
Source: ECA, draft national report on AGDI for Namibia.

Box 7.2 highlights the representation of men and women in senior positions in local and regional councils in Namibia.

7.2.6 REPRESENTATION IN THE JUDICIARY

In terms of representation in positions of seniority in the judiciary, men still predominate although women's presence in the judiciary is increasing overall. Mauritius has achieved parity in terms of women's representation as high court judges (see figure 7.V(a)). In addition to Mauritius, Rwanda, Sierra Leone, South Africa and Zimbabwe have met the target set in the Beijing Platform for Action. Of the eleven high court judges in Guinea-Bissau none is a woman, and only 2 of the 285 high court judges in Mauritania are women. There is severe gender disparity in favour of males in Chad, Eswatini, Guinea, Guinea-Bissau, Mauritania, the Niger, Sao Tome and Principe and Seychelles with GSI values of 0.20 and less. A woman has occupied the position of Chief Justice in Seychelles since 2015.

Figure 7.V (a) Proportion of women high court judges and (b) Gender Status Index



Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

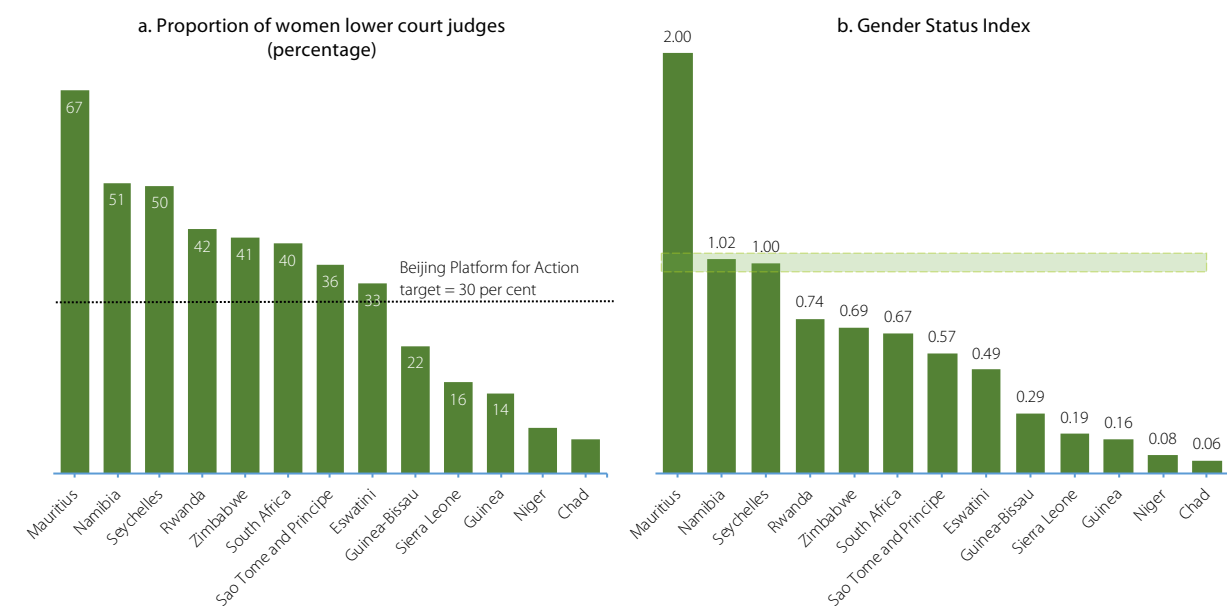
Notes: * None of the 11 high court judges in Guinea-Bissau is a woman. #2 out of the 285 high court judges in Mauritania are women.

Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

Notes: * None of the 11 high court judges in Guinea-Bissau is a woman. #2 out of the 285 high court judges in Mauritania are women. High-lighted area represents gender parity with an index between 0.97 and 1.03.

The proportion of women magistrates is generally higher than that of high court judges. The proportion is 50 per cent and more in Mauritius, Namibia and Seychelles (see figure 7.VI(a)). There is gender parity in Namibia and Seychelles and a substantial gender disparity in favour of women in Mauritius (see figure 7.VI(b)). In addition to the two countries, six other countries – Eswatini, Namibia, Rwanda, Sao Tome and Principe, South Africa and Zimbabwe – have exceeded the 30 per cent benchmark. The proportion of women magistrates in Chad, Guinea, the Niger and Sierra Leone is below 20 per cent.

Figure 7.VI (a) Proportion of women lower court judges and (b) Gender Status Index



Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

Source: ECA analysis based on data from published and draft national reports on AGDI and SADC, 2016.

Notes: Highlighted area represents gender parity with an index between 0.97 and 1.03.

Only the draft national reports for Chad, Eswatini and Namibia had sex-disaggregated data on the number of traditional court judges. In Chad, out of 1,000 traditional court judges, 5 were women and 1 out of the 21 in Namibia. None of the 26 judges in Eswatini were women.

7.2.7 REPRESENTATION IN CIVIL SOCIETY ORGANIZATIONS

Encourage efforts by non-governmental organizations, trade unions and the private sector to achieve equality between women and men in their ranks, including equal participation in their decision-making bodies and in negotiations in all areas and at all levels."

Beijing Platform for Action (United Nations, 1995, para. 192 (d)).

"A balanced representation in senior positions of trade unions and employers' organizations is important to ensure that the various roles, needs and priorities of men and women are taken into consideration in the workplace. Sex-disaggregated data on representation in these two areas are limited for the countries under review. The proportion of women in senior positions in trade unions range from less than 10 per cent in Guinea, Guinea-Bissau and Sao Tome and Principe to more than 30 per cent in Chad, Eswatini and South Africa (see table 7.4). For employers' associations, women in senior positions account for less than 15 per cent in Eswatini, Guinea and Sao Tome and Principe, and 40 per cent in Mauritius.

For countries with available data, women are doing well in terms of occupying senior positions in non-governmental organizations. The proportion of women in senior positions in non-governmental organizations is more than the target of 30 per cent set in the Beijing Platform for Action in the six out of eight countries with data (see table 7.5). There is gender parity in Eswatini and Seychelles with GSI values of 1.03. The situation is less desirable for political parties, except for Rwanda where women occupy 41 per cent of senior positions in political parties.

Table 7.4 Proportion in senior positions in trade unions and employers' associations by sex (percentage) and Gender Status Index

	Trade unions			Employers' associations		
	Women (percentage)	Men (percentage)	Gender Status Index	Women (percentage)	Men (percentage)	Gender Status Index
Chad	32.4	67.6	0.48	17.7	82.3	0.22
Eswatini	36.3	63.7	0.57	14.3	85.7	0.17
Guinea	9.1	90.9	0.10	13.0	87.0	0.15
Guinea-Bissau	3.6	96.4	0.04	28.6	71.4	0.40
Mauritius	11.9	88.1	0.14	40.0	60.0	0.67
Sao Tome and Principe	0.0	100.0	0.00	10.0	90.0	0.11
Seychelles	20	80.0	0.25	25.0	75.0	0.33
South Africa	34.5	65.5	0.53	26.7	73.3	0.36

Source: ECA analysis based on data from published and draft national reports on AGDI.

Table 7.5 Proportion in senior positions in political parties and non-governmental organizations by sex and Gender Status Index

	Political parties			Non-governmental organizations		
	Women (percentage)	Men (percentage)	Gender Status Index	Women (percentage)	Men (percentage)	Gender Status Index
Chad	..	..	..	21.0	79.0	0.27
Eswatini	..	..	..	50.8	49.2	1.03
Guinea	9.4	90.6	0.10	42.4	57.6	0.74
Mauritania	7.6	92.4	0.08	32.6	64.4	0.55
Mauritius	9.1	90.9	0.10	31.3	68.9	0.45
Rwanda	40.7	59.3	0.69	..	..	..
Sao Tome and Principe	10.7	89.3	0.12	26.6	73.4	0.36
Seychelles	21.1	78.9	0.27	50.8	49.2	1.03

Source: ECA analysis based on data from published and draft national reports on AGDI.

Note: (..) indicates that data are not available.

7.3 PARTICIPATION IN TRADITIONAL GOVERNANCE

"1. The institution, status and role of traditional leaders under customary law are recognized.

2. A traditional leader is responsible for performing the cultural, customary and traditional functions of a Chief, headperson or village head, as the case may be, for his or her community."

Constitution of Zimbabwe (Government of Zimbabwe, 2013, p. 119, section 280, Traditional leadership).

Traditional governance authorities and institutions play an important role as alternative dispute mechanisms; however, some of the practices of these institutions are at odds with gender equality principles. According to its latest report to the Committee on the Elimination of Discrimination Against Women, the Niger noted that the traditional chieftainship, which administers townships and villages, is exclusively male in accordance with customary law.¹³¹ Similarly, the women in Sierra Leone may be precluded from standing in chieftaincy elections under the Chieftaincy Act (2009).

Table 7.6 Number of traditional chiefs by sex and Gender Status Index

	Women (percentage)	Men (percentage)	Gender Status Index
Chad	1	800	0.001
Eswatini	0	341	0
Guinea	0	33	0
Namibia	3	39	0.08
Niger	0	247	0
Zimbabwe	19	731	0.03

Source: ECA analysis based on data from published and draft national reports on AGDI.

Of the 42 traditional chiefs in Namibia, 3 are females (table 7.6). In Zimbabwe, there are 19 traditional chiefs who are females and 731 who are males. None of the traditional chiefs in Eswatini, Guinea and the Niger are women.

¹³¹ CEDAW Committee, Concluding Observations [the Niger] (2017a, paras. 27(b) and 37(b)).



Overall, countries scored themselves high on institutional mechanism, followed by law, policy commitment, plan and involvement of civil society on the participation of women in traditional governance on the African Women's Progress Scoreboard (see annex VII, table AVII.1). The weakest areas were budget, human resources, research, information/dissemination, monitoring and evaluation, and capacity enhancement. Namibia scored itself highest on this indicator at 73 per cent, followed by Chad and South Africa (both at 62 per cent). Chad scored itself relatively well given that only 1 of the 801 traditional chiefs is a woman (see table 7.6). The Niger and Guinea, which have no female traditional chiefs, scored themselves 0 and 4 per cent, respectively.

7.4 PARTICIPATION IN CONFLICT PREVENTION AND RESOLUTION AND PEACE BUILDING

Most of the countries covered by this report have experienced armed conflict, including coup d'état and civil war at some time in their history. Often times in conflict-affected countries, women and girls have to assume responsibilities traditionally meant to be carried by men. In addition, they suffer disproportionately from gender-based violence and other abuses and violations of their human rights, both during and after armed conflict.

To include women in conflict prevention and resolution and in peacebuilding is not only the right thing to do to ensure that the needs, interests and priorities of the whole population are taken into account. A growing body of research suggests that women's participation in peacemaking, constitution-making and national dialogues is also positively correlated with the conclusion and sustainability of peace talks, and the implementation of peace agreements. Most peace negotiations, however, mostly involve the military and political parties of conflict and focus on high-level processes in which women remain under-represented (United Nations, 2015b).

One of the ways for member States to show their commitment with the provisions of the Security Council resolution 1325 (United Nations, 2000b) and subsequent resolutions that deal with the participation of women in conflict prevention and resolution and peacebuilding is through the development of a national plan of action. Of the countries covered by this report, Guinea, Guinea-Bissau, Liberia, Rwanda and Sierra Leone have developed national plans of actions. It was noted in the Report of the Secretary-General on women, peace and security that for these plans to be effective they will need to have the following elements: "strong leadership and effective coordination, inclusive design processes, costing and allocated budgets for implementation, monitoring and evaluation as well as flexibility to adapt to emerging situations."¹³²

Overall, countries scored themselves high on law followed by policy commitment on women, peace and security on the African Women's Progress Scoreboard (see annex VII, table AVII.2). The weakest areas were budget, research, monitoring and evaluation, and capacity enhancement. Of the countries that scored this indicator, Chad and Sao Tome and Principe scored themselves highest at 100 per cent, followed by Rwanda at 88 per cent. The Niger scored itself lowest at 54 per cent. Box 7.3 highlights the role played by women in conflict resolution and peacebuilding in Liberia.

¹³² United Nations (2000b, para. 98).

Box 7.3 Role of women in conflict resolution and peace building in Liberia

After the 1989 coup, in which Charles Taylor assumed the presidency, Liberia spiralled into two successive waves of armed violence, the second of which killed over two hundred thousand people and displaced one third of the country's population. The combatants were mostly men; women and girls throughout the country were subjected to widespread sexual violence, abductions, forced labour and forced marriages.

In April 2003, a group of Liberian women led by activist and future Nobel Peace Laureate, Leymah Gbowee, launched the Women of Liberia Mass Action for Peace. The group became instrumental in forcing formal talks, holding belligerents accountable to negotiation timetables, and mobilizing national support for the process. The group met Mr. Taylor and successfully pressured him to participate in peace talks in Accra, Ghana. In Accra, women staged a sit-in and refused to let any party leave the premises before they reached a negotiated resolution; the talks culminated in the signing of the 2003 Comprehensive Peace Agreement.

After the cessation of hostilities, women led a nationwide voter and civic education campaign that reinvigorated public trust and participation in the political process. Subsequent elections brought into power the country's first female Head of State, Ellen Johnson Sirleaf, and resulted in higher female representation in the security sector. In recognition of women's contributions to peacekeeping, the Liberian National Police ultimately adopted an ambitious 20 per cent quota for women in the police and armed forces, and established recruiting and training programmes to expand the pool of women qualified for service.

Source: Bigio and Vogelstein, 2006.

7.5 SUPPORT FOR WOMEN'S QUOTAS AND AFFIRMATIVE ACTION

In its general recommendation 23, the Committee on the Elimination of Discrimination against Women recommended the use of "temporary special measures" (see box 7.4) to achieve equality in participation in political and public life.¹³³ These measures included allocation of resources, preferential treatment, targeted recruitment and promotion and quota systems.

Box 7.4 Temporary special measures in political and public life

Temporary special measures are part of a necessary strategy by States parties to achieve de facto or substantive equality of women with men in the enjoyment of their human rights and fundamental freedoms. States parties that adopt and implement such measures under the Convention do not discriminate against men.

Temporary special measures are designed to serve a specific goal and must be discontinued when their desired results have been achieved and sustained for a period of time. The measures encompass a wide variety of legislative, executive, administrative and other regulatory instruments, policies and practices. Examples include outreach or support programmes; allocation and/or reallocation of resources; preferential treatment; targeted recruitment, hiring and promotion; numerical goals connected with time frames; and quota systems.

Source: CEDAW Committee, 2004, recommendation no. 25, article 4, para. 1.

Eswatini, Guinea, Mauritania, the Niger, Rwanda and Zimbabwe all have constitutional- and legislative-mandated quotas for either the number or proportion of women in the national parliament (see table 7.7). The constitutions of Eswatini and Rwanda stipulate that women should hold a minimum of 30 per cent of parliamentary seats. Table 7.1 shows that Rwanda is meeting this goal in both houses, while Eswatini only meets the target in the Upper House, the Senate. In addition to Eswatini and Rwanda, Guinea, Mauritania and Zimbabwe have some sort of system of reserved seats for women.

In Zimbabwe, the Constitution that came into effect in 2013 provides for 210 members of the National Assembly to be elected on a first-past-the-post basis and an additional 60 seats are reserved for women.

¹³³ CEDAW Committee (1997, para. 43).

For the Upper House, the Senate, 60 senators out of 88 are elected through a proportional representation system using the so-called “zebra list” in which male and female candidates are listed alternatively with a woman at the top of the list. These measures have contributed to the increase of the proportion of women in the National Assembly from 15 per cent to 33 per cent in the 2013 elections, and reaching 48 per cent in the Senate. Following the 2018 elections, the share of women in the National Assembly and Senate is 32 per cent and 44 per cent, respectively.

In Guinea, Mauritania and the Niger, the introduction of quotas is associated with an increased proportion of women in parliament (see figure 7.1(b)). In contrast to Guinea and Mauritania, the Niger has gender-neutral quotas. Box 7.5 discusses the effect of the quota in the Niger in more detail. In a White Paper on Electoral Reform released in 2014, the Government of Mauritius recommended a gender-neutral quota whereby at least one third of the total number of candidates from the first-past-the-post constituencies be of either gender, that neither gender represents less than 33 per cent of candidates on the party list and that there is at least one person of a different gender out of every three sequential candidates on the Proportional Representation System (see note # to table 7.7).

Table 7.7 Electoral gender quotas

Country	Parliamentary system	Electoral system	Availability and description of quota
Chad	Unicameral	Party block vote*	No information
Eswatini	Bicameral	First-past-the-post / indirectly elected and appointed	Constitution: women should constitute 30 per cent of the Parliament. Parliament: at least 30 per cent of the candidates on proportional representation lists must be women. District councils: one third of the seats reserved for women. Communal council elections: at least 30 per cent of candidates on the lists must be women. 10 per cent of public fund is allocated to political parties that have women elected as members of the parliament (5 per cent) and as municipal counsellors (5 per cent).
Guinea	Unicameral	Proportional representation / first-past-the-post	No information
Guinea-Bissau	Unicameral	Proportional representation	No quota
Liberia	Bicameral	First-past-the-post	Twenty seats are reserved for women candidates running in a single nationwide list. Political parties are required to nominate at least one woman in one out of four constituencies. Women shall be allocated at least 20 per cent of the seats on municipal councils. Political parties that elect more women than required by the quota obtain a financial benefit. The electoral administration shall reject candidate lists that do not comply with the quota regulations.
Mauritania	Bicameral	Two-round system	Minimum of one-third representation of either sex in municipalities and village councils (Local Government Act, 2012).
Mauritius	Unicameral	Block vote system#	Legislated candidate quotas for elections of local authority council, municipal council and town council. Voluntary quotas by political parties.
Namibia	Bicameral	Proportional representation	

Country	Parliamentary system	Electoral system	Availability and description of quota
Niger	Unicameral	Proportional representation	Parliamentary and local elections: candidate lists should include candidates of both sexes; proportion of elected candidates of either sex should not be less than 15 per cent. Constitutional Court rejects candidate lists that do not comply with the gender quota requirements. 10 per cent of public grant is allocated proportionately to political parties which have women elected at all level.
Rwanda	Bicameral	Proportional representation / indirectly elected and appointed	Constitution (article 9[4]): women are granted at least 30 per cent of posts in decision-making organs. Political party: at least 30 per cent of posts that are subjected to elections are occupied by women.
Sao Tome and Principe	Unicameral	Proportional representation	National Assembly resolution established a quota of 30 per cent for female representation in the Parliament (R74/08/2009).
Seychelles	Unicameral	First-past-the-post / proportional representation	No quota
Sierra Leone	Unicameral	First-past-the-post	Ward committees: 50 per cent must be women (Local Government Act, 2004).
South Africa	Bicameral	Proportional representation	Local councils: 50 per cent of the candidates on the party list must be women. Voluntary quotas by political parties.
Zimbabwe	Bicameral	First-past-the-post / proportional representation	National Assembly: 60 reserved seats for women. Senate: 60 senators out of 88 are elected through a proportional representation system in which male and female candidates are listed alternatively.

Source: ECA analysis based on ECA, 2009a; Quota project, SADC, 2016; and Government of Sao Tome and Principe, 2015.

Notes: Under a first-past-the-post system, the candidate with the most votes wins. The proportion of votes a party receives in an election determines its number of seats in a proportional system. * Voters in Chad vote for political parties; the party that wins the most votes gets every seat in the electoral district. # The National Assembly in Mauritius consists of 70 members of whom 62 are elected in accordance with the first-past-the-post and the remaining 8 are allocated seats from among the best losers at general elections on a communal and party basis.

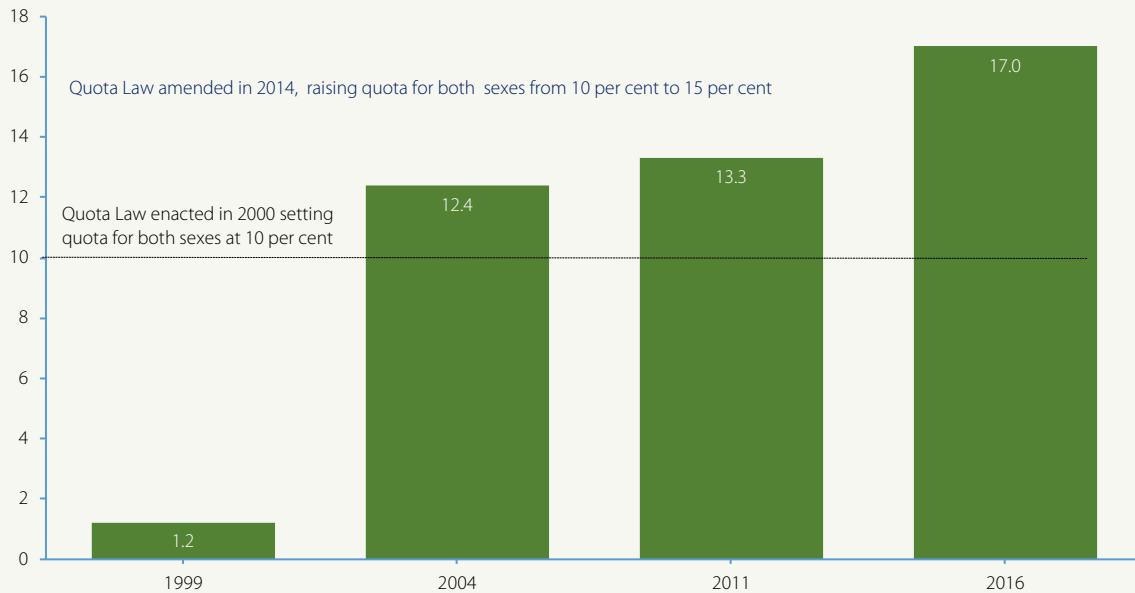
In Rwanda, the quota of 30 per cent also applies to political parties (see table 7.7). Although having no mandatory quota, the main political parties in Namibia and South Africa have voluntary quotas. The African National Congress in South Africa adopted the 50/50 quota at a party level in 2007.¹³⁴ This explains in part the relatively high proportion of women in the lower house of the two countries (see figure 7.1(a)).

134 South Africa, Department of Women, Children and People with Disabilities (2014, p. 35).

Box 7.5 Gender quotas in the Niger

- The Niger has a unicameral parliamentary system with a single house of parliament.
- May 2000: The National Assembly approved bill to create a quota system in elected offices, the Government and public administration.
- June 2000: The Quota Law (Loi N 2000-008) is enacted. The law set a quota of 10 per cent for both sexes in parliament. It also set a quota of 25 per cent for the cabinet and senior positions in the public service.

Figure B7.3 Effect of the gender quota on the proportion of women elected to parliament, 1999–2016



- February 2001: Decree on the application of the gender quota law (Decret N 2001-056) is passed requiring political parties to ensure that the proportion of elected candidates in legislative and local elections of either sex is 10 per cent. The decree made provision for the Constitutional Court to challenge the list of elected candidates and for the administrative division of the Supreme Court to challenge the list of executive and senior administrative appointments in the event of violations of the law.
- 2014: The Quota Law is amended to increase the quota for legislative and local elections to 15 per cent.
- The adoption of the quota led to a significant increase in the presence of women in parliament. The proportion of women in parliament jumped from 1.2 per cent in 1999 through 12.4 per cent in 2004 to 13.3 per cent in 2011 (see figure B7.3). Following the increase in the quota in 2014, the number of women parliamentarians increased further to 17 per cent in the 2016 elections.
- Although the proportion of women in the cabinet increased from 5.2 per cent in 1999 to 24 per cent in 2005, the Committee on the Elimination of Discrimination against Women noted that in 2016 women accounted for 19 per cent of ministers, 12 per cent of regional, municipal and town councillors, and 0 per cent of governors and prefects, below the target of 25 per cent set in the Quota Law. The Committee also noted that women were underrepresented in decision-making posts in the public service and were excluded from full participation in traditional political functions (see table 7.6).

Source: ECA analysis based on Inter-Parliamentary Union, 2018; Kang, 2013; and CEDAW Committee Concluding Observations [the Niger], 2017a, para. 26.

Guinea, Mauritania, Mauritius, Namibia, the Niger, Rwanda, Sierra Leone and South Africa have gender quotas at the subnational levels (see table 7.7). These range from 15 per cent in the Niger to 50 per cent in South Africa for local elections and Sierra Leone for Ward Committees. In order to promote parity of representation between female and male traditional leaders in district and local municipalities, the Traditional Leadership and Governance Framework Act (2003) in South Africa requires at least 30 per cent

of members of the National House of Traditional Leaders to be women.¹³⁵ Box 7.6 highlights the effect of the introduction of a gender-neutral quota at the local government level in Mauritius.

Box 7.6 Gender quota at the local government level in Mauritius

Women's participation in decision-making at the level of local government in Mauritius has historically been low. This changed with the proclamation of the Local Government Act (2012), which provides for a mandatory gender neutral quota at the level of local government with a minimum of one-third representation of either sex in municipalities and village councils. The adoption of this quota led to a significant increase in the presence of women in local government starting in 2012. In the Municipal Council Elections of 2012 and 2015, women won nearly 37 per cent and 34 per cent of the seats, respectively, compared with 13 per cent in 2005.

Source: *National report on AGDI for Mauritius, 2017.*

Mauritius is one of the few African countries with a gender quota in its corporate governance framework to increase female participation on the boards of companies. The National Code of Corporate Governance (2016) stipulates that all companies should have at least one male and one female director.

In a study of the gender quota in the Niger, Kang (2013) concluded that the design of a quota, the institutional context and women's participation determine the impact of the quota. In terms of quota design, the higher the quota's minimum threshold, the more effective it is in terms of electing women. This receives some support in the Niger where an increase in the quota from 10 to 15 per cent in 2014 resulted in an increase in the proportion of women in parliament, more than 15 per cent in the 2016 elections, after hovering just above 10 per cent in the previous two elections (see box 7.5). This is also the case in Rwanda and Zimbabwe in both houses, and Eswatini in the lower house.

In addition, a conducive institutional environment is required for quotas to work, which includes having an enforcement mechanism. The electoral administration in Mauritania and the constitutional court (for legislative elections) and the supreme court (for executive and senior administrative appointments) in the Niger can reject candidate lists that do not comply with the legislated quota laws (see table 7.7). The Committee on the Elimination of Discrimination against Women indicated that the quota is not being respected with regard to appointments in the cabinet and at senior levels of public administration in the Niger (see box 7.5). Guinea, Mauritania and the Niger also recompensed political parties that have more women elected than required by the quota.

A strong women's movement is also important in contributing to making a gender quota work in a country. In the Niger, women activists had "spread awareness about the gender quota law, provided support to female candidates, framed the quota law as legitimate, put pressure on political parties to respect the quota law by using the Constitutional Court, and appealed to international organizations and donors".¹³⁶ The latter provided women leaders in the civil society and Government with access to skills and financial resources, and exposure to a progressive women's agenda (Bauer and Burnet, 2013).

A strong women's movement may also be instrumental in translating descriptive representation of women in parliament into substantive representation, through a positive impact on women through policy outputs. Bauer (2012) has argued that in Rwanda, the Forum of Rwandan Women Parliamentarians, working closely with women's organizations and government ministries, had helped to enact the "Inheritance Law" in the 1990s that enabled women to inherit property and own property in their own names; and to enact the Gender-Based Violence Bill in 2008.

¹³⁵ Ibid.

¹³⁶ Kang (2013, p. 98).



In addition to quotas, countries have taken other measures to improve the balance of women and men in political and public life. In 1998, Namibia enacted the Affirmative Action (Employment) Act that compels relevant employers to prepare and implement a three-year affirmative action plan that specifies measures to “eliminate employment barriers against persons in designated groups; make available positions of employment to such persons, provided that it is reasonably possible; and ensure that such persons are equitably represented in the various positions of employment.”¹³⁷ Women are included as a designated group for the purpose of this legislation. In 2011, a Directorate for the Promotion of Female Leadership was created in the Niger to initiate strategies and mechanisms for the promotion of human rights and women's political leadership, among other objectives.

Gender quotas and other affirmation measures to boost female participation in political and public life are not without their detractors. Some critiques have argued that these measures are at variance with principles of equality as women are given preference at the expense of their male counterparts (but see the position of the Committee on the Elimination of Discrimination Against Women on this issue in box 7.4). In some countries, the requisite number of women are nominated but they are then not given the support (including financial resources) necessary to wage a successful campaign (Inter-Parliamentary Union, 2015).

Overall, countries scored themselves high on law, policy commitment and involvement of civil society, followed by setting targets and institutional mechanism on support for women's quotas and affirmative action on the African Women's Progress Scoreboard (see annex VII, table AVII.3). The weakest areas were budget and development of a plan. Chad scored itself 100 per cent, while Mauritius and Namibia scored themselves above 70 per cent. Eswatini and Guinea scored themselves lowest at 50 per cent. Box 7.7 lists some of the concerns raised by the Committee for the Elimination of Discrimination against Women and the Human Rights Council in relation to women's participation in political and public life in the countries covered by this report.

137 Government of Namibia (1998, para. 23(a)(i)–(iii)).

Box 7.7 Concerns raised by treaty bodies for selected countries

Eswatini: Women were largely excluded from participating in decision-making on matters of rural development and policy because of persisting negative social and cultural norms regarding their participation.

Liberia: Women are still underrepresented at decision-making levels, including in the parliament, in senior leadership positions in the civil service and at the ministerial level.

Mauritania: There is a lack of economic support for women candidates in elections, and a low number of women at the ministerial level, the regional level, the communal level, in the foreign service and in the judiciary.

Mauritius: Systematic barriers exist that impede women's equal participation in political life, including negative cultural attitudes, doubts about women's leadership capabilities, lack of quotas for women and lack of capacity-building of potential candidates.

Namibia: There is low representation of women in the judiciary, ministerial positions and senior positions in the diplomatic service, and at the regional and local levels of Government.

Rwanda: Mandatory quotas have not been reached at the local level; representation of women is low at the district level, especially in leadership positions; and there is persisting inequality between women and men with regard to leadership positions in the private sector.

Sierra Leone: The participation of women in decision-making is low and there is a lack of measures to tackle the underlying causes, including prevailing social and cultural attitudes; and there is an absence of an overall quota system that aims at accelerating women's participation in political life, including in decision-making at all levels.

Source: ECA analysis based on CEDAW Committee Concluding Observations [Eswatini], 2014b, para. 36; CEDAW Committee Concluding Observations [Mauritania], 2014c, para. 30; CEDAW Committee Concluding Observations [Sierra Leone], 2014a, para. 24; CEDAW Committee Concluding Observations [Liberia], 2015b, para. 29; CEDAW Committee Concluding Observations [Namibia], 2015c, para. 26; CEDAW Committee Concluding Observations [Rwanda], 2017b, para. 30; and Human Rights Council [Mauritius], 2013, para. 45.

7.6 GENDER MAINSTREAMING

"[C]reate a national machinery, where it does not exist, and strengthen, as appropriate, existing national machineries, for the advancement of women at the highest possible level of Government; it should have clearly defined mandates and authority; critical elements would be adequate resources and the ability and competence to influence policy and formulate and review legislation; among other things, it should perform policy analysis, undertake advocacy, communication, coordination and monitoring of implementation."

Beijing Platform for Action (1995, para. 203 (b)).

"Give all ministries the mandate to review policies and programmes from a gender perspective and in the light of the Platform for Action; locate the responsibility for the implementation of that mandate at the highest possible level; establish and/or strengthen an inter-ministerial coordination structure to carry out this mandate, to monitor progress and to network with relevant machineries."

Beijing Platform for Action (1995, para. 204 (e)).

In line with the Beijing Platform for Action, all countries have established national gender machinery to coordinate the mainstreaming of a gender perspective into all departments. This takes various forms, including a stand-alone ministry of gender and women's affairs (South Africa), a gender directorate under a ministry (Chad, Guinea, Guinea-Bissau, Liberia, Mauritania, Mauritius, Namibia, the Niger, Rwanda, Sierra Leone and Zimbabwe), a gender unit in a key ministry (Eswatini) and a gender secre-



tariat or institute (Seychelles). In South Africa, the Minister in the Presidency has the responsibility for women's empowerment and gender equality as the national gender machinery, while all members of the cabinet, Government entities, the private sector and civil society, and at all levels of decision-making, are responsible for mainstreaming gender into their respective area of responsibility.¹³⁸ Most countries have set up gender focal persons in all government ministries, departments and agencies to institutionalize the national gender mainstreaming framework.

Some countries have developed a national gender policy, with associated institutional mechanisms, action plan, targets and monitoring and evaluation framework. The Niger has adopted the National Gender Policy (2008) and its national action plan (2009–2018), established the National Centre for the Advancement of Gender Equality, placed gender focal points in all ministries and created a parliamentary network on gender.¹³⁹ Mauritius has developed the National Gender Policy Framework (2008) to guide the formulation of gender policy statements by sectoral ministries. A National Plan on Gender Mainstreaming is also being developed. Box 7.8 highlights the institutional mechanism for the implementation of the National Gender Policy in Namibia.

An analysis of the national reports prepared as part of the Beijing Plus 20 review in 2014, showed that national gender machineries were hampered by inadequate budgetary allocations, human resources and technical capacity to effectively coordinate gender mainstreaming and the implementation of gender policies, plans and programmes at the national and local level (ECA, 2014). Gender focal persons are often-times at middle-management level and unable to influence policy decisions from a gender perspective. Lack of institutional structures at the local level and the lack of data disaggregated by sex in many areas further compound the situation.

¹³⁸ South Africa, Department of Women, Children and People with Disabilities (2014, p. 40).

¹³⁹ CEDAW Committee Concluding Observations [Niger] (2017, para. 16).

Box 7.8 Institutional framework for implementing the gender policy in Namibia and Sao Tome and Principe

The National Gender Policy 2010–2020 for Namibia revises the previous policy initiated in 1997. It takes into account a number of new emerging issues, such as the worsening of the HIV/AIDS pandemic, globalization and climate change, human trafficking, and the escalating and worsening of gender-based violence.

In 2014, the Cabinet approved the National Coordination Mechanism to ensure the effective implementation of the National Gender Policy across sectors. The coordination mechanism consists of the following:

At Cabinet level, the High-level Gender Advisory Committee to coordinate and monitor the implementation of the Policy.

- The National Gender Permanent Task Force, which is the highest technical consultative body comprising of permanent secretaries and senior representatives from the public and private sector, development partners and civil society organizations.
- National Gender Plan of Action Implementation Clusters comprising of gender focal persons.
- Regional Gender Permanent Task Force, which includes representatives of regional governors, regional and local authority councillors, and traditional authorities and representatives of the public and private sector, development partners and civil society organizations based in the regions.

In Sao Tome and Principe, Decree-Law No. 18/2007 created the National Institute for the Promotion of Gender Equality and Equity (INPG). INPG is responsible for promoting and implementing the Government's policy on the advancement of women, and gender equality and equity (articles 1 and 3). Decree No. 14/2007 adopted the national strategy for the Promotion of Gender Equality and Equity and tasked INPG with promoting and implementing the Government's policy on the advancement of women and gender equality and equity in the country, by coordinating the implementation of the strategy and monitoring the cross-cutting integration of gender into all national development programmes and policies. The strategy was updated in 2012.

Source: *Government of Namibia, 2014 and Government of Sao Tome and Principe, 2015.*

Overall, countries scored themselves high on policy commitment and institutional mechanism, followed by setting targets and involvement of civil society on gender mainstreaming in all departments on the African Women's Progress Scoreboard (see annex VII, table AVII.4). The weakest areas were law and capacity enhancement. The Niger, Rwanda and South Africa scored themselves 85 per cent and above, and Chad and Sao Tome and Principe at 100 per cent. Eswatini scored itself lowest at 46 per cent. Box 7.9 summarizes the efforts undertaken by Rwanda to remedy some of these challenges.

Box 7.9 Gender mainstreaming in Rwanda

Institutional mechanisms: The Ministry of Gender and Family Promotion, within the Office of the Prime Minister Office ensures effective coordination of policy implementation in the area of gender across sectors. Other relevant institutions include the Gender Monitoring Office, the National Women's Council and Rwanda Women Parliamentary Forum. The Gender Monitoring Office has the sole responsibility of monitoring the implementation of gender equality principles in all sectors and at all levels. The National Women Council, with its central and decentralized structures, mobilizes women to contribute to national development at both national and community levels.

Implementation plans and targets: The Ministry of Gender and Family Promotion developed the strategic plan for the implementation of the National Gender Policy (2010), which includes milestones, targets, and a monitoring and evaluation mechanism.

Budget: Under Organic Budget Law (2013), all government budget agencies are required to submit gender budget statements with their budgets to the Ministry of Finance and Economic Planning. The Ministry, working closely with the Ministry of Gender and Family Promotion and the Gender Monitoring Office, oversees the mainstreaming of gender into the planning, policy formulation and co-ordinates the Gender Responsive Budgeting process. At the decentralized levels, gender budgeting has been institutionalized through the district performance contracts (Imihigo).

Source: *ECA, draft national report on AGDI for Rwanda.*



7.7 CONCLUDING REMARKS

This chapter provides a review of the progress made by the selected countries in using the indicators under the Political Power block of AGDI. In addition, it provides an assessment of the extent to which countries have been meeting their commitments in promoting women's participation in political and public life, including in conflict prevention and resolution, peacebuilding and traditional governance, and in mainstreaming a gender perspective into all departments.

Women's participation in political and public life. Women continue to face a number of barriers that prevent them from fully participating in political and public life. These include discriminatory attitudes and practices which reinforce patriarchal notions of the incapability of female leadership, perpetuation of violence against women during the electoral cycle, illiteracy, the burden of unpaid care work, women's economic dependence on men and the high cost of seeking and holding public office. This chapter has highlighted that participation in political and public life is one area in which gender disparity against women is especially stark.

Representation in national parliaments. The participation of women in parliament has progressed since the Beijing Platform for Action was adopted in 1995, with the share of women in parliaments increasing in most countries since that time. Rwanda, Namibia and South Africa are ranked in the top 10 countries in the world in terms of the proportion of women in the lower house of parliament. Notwithstanding the progress made in the past 20 years, overall, women remain underrepresented in parliament.

Representation in the cabinet of ministers. Overall, the proportion of women ministers represented in the cabinet is generally lower than the proportion of women members in parliament. Women occupy more than 30 per cent of cabinet posts in South Africa and Rwanda. Women are also increasingly being elected and/or appointed as President and Prime Minister, and being appointed to a wider range of ministerial portfolios.

Representation in higher positions in the civil services and parastatals. Compared with other areas covered in this chapter, countries are faring better in terms of representation at the level of principal secretary and director general, especially in the small island developing States; however, women still have some way to go to achieve parity in this area. Women are at a severe disadvantage in Eswatini and Sierra Leone, although in the latter there is a high proportion of women one level below the most senior positions in the civil service.

Representation in the judiciary. There is still male predominance in terms of representation in positions of seniority, although women's presence in the judiciary is increasing, especially at the magistrate level. Mauritius has reached gender parity for higher court judges, with Zimbabwe not far from reaching gender parity. Namibia and Seychelles has achieved gender parity in terms of magistrates, while Mauritius has significantly more female magistrates than male magistrates.

Representation in civil society organizations. Data are not readily available on the indicators in this component. Overall, women are well represented at the senior level of non-governmental organizations in the countries that have available data. There is gender parity in Eswatini and Seychelles. The situation is less desirable for women's representation in senior positions in political parties (except for Rwanda), trade unions (except for Eswatini and South Africa) and employers' associations (except for Mauritius).

Participation in traditional governance. Women are extremely underrepresented in traditional governance institutions. There are no women traditional chiefs in Chad, Eswatini, Guinea, the Niger and Zimbabwe.

Participation in conflict prevention and resolution and peacebuilding. Guinea, Guinea-Bissau, Liberia, Rwanda and Sierra Leone have developed National Plans of Actions for the implementation of Security Council resolution 1325. Effective implementation of these plans, however, is limited by lack of organizational, human and financial resources.

Support for women's quotas and affirmative action. Countries have undertaken a number of measures to promote the participation of women in political and public life. The main measures have been constitutional- and legislative-mandated quotas for either the number or proportion of women in the national parliament and in local governance structures. In addition, the main political parties in Namibia and South Africa have voluntary quotas. In general, the introduction of quotas is associated with an increasing proportion of women in parliaments and local governance structures. To be effective, gender quotas have to be set at a high enough level, supported by an effective enforcement mechanism, an infrastructure to assist female candidates wage electoral campaigns and a strong women's movement.

Gender mainstreaming. All countries have established a national gender machinery to coordinate the mainstreaming of a gender perspective into all departments. Some countries have also developed a national gender policy, with associated institutional mechanisms, action plan, targets and monitoring and evaluation framework. Notwithstanding these achievements, national gender machineries are often hampered by inadequate budgetary allocations, human resources and technical capacity and a lack of sex-disaggregated data to effectively coordinate gender mainstreaming into, and the implementation of, gender policies, plans and programmes at the national and local level.

Scoring on the African Women's Progress Scoreboard. Overall, countries score themselves well on policy commitment, institutional mechanism, involvement of civil society organizations and setting targets in terms of promoting women's participation in political and public life. Weak areas were capacity enhancement and budget. The inadequacy of legislation was highlighted in terms of women's participation in traditional governance institutions.

7.8 RECOMMENDATIONS

Governments should undertake the following interventions to promote the participation of women in political and public life.

Framework for gender mainstreaming. Where it does not exist and in collaboration with civil society organizations and key stakeholders, adopt a national gender strategy with associated costed action plan, targets and monitoring and evaluation framework to guide the gender mainstreaming efforts as a matter of priority.

Gender quotas and affirmative action. Consider introducing new quotas and other affirmative action measures and strengthen current ones, including through appropriate enforcement mechanisms to promote women's participation in political and public life at all levels.

Awareness-raising. In collaboration with civil society organizations, undertake education awareness programmes targeting politicians, the media, leaders of traditional governance institutions and the general



public to highlight the importance of women's full and equal participation in political and public life, in particular in leadership positions at all levels.

Resources. Allocate adequate organizational, human, technical and financial resources to the national gender machinery to enable it to carry out its mandate to coordinate, monitor and assess the impact of the implementation of public policies and national action plans for the advancement of women, including by implementing a comprehensive strategy to tackle barriers that hinder the participation of women in decision-making positions.

Data. Enhance the collection, analysis and dissemination of comprehensive data, disaggregated by sex, age, and seniority on the participation of women in legislative, judicial, executive and public administration, in the private sector and civil society organizations.

ANNEX VII COUNTRY SCORES ON COMMITMENTS ON WOMEN'S AGENCY AND DECISION-MAKING ON THE AFRICAN WOMEN'S PROGRESS SCOREBOARD

Table AVII.1 Scores for the participation of women in traditional governance on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	1	1	2	2	2	1	1	1	1	1	1	1	1	16	26	62
Guinea	0	0	0	0	0	0	0	0	1	0	0	0	0	1	26	4
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	2	19	26	73
Niger	0	0	0	0	0	0	0	0	0	0	0	0	0	0	26	0
South Africa	2	2	1	0	2	1	1	1	2	1	1	1	1	16	26	62

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Table AVII.2 Scores for Security Council resolution 1325, resolution 1820, resolution 1888 and resolution 1889 on Women, Peace and Security on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	2	2	1	1	2	1	1	1	1	2	1	1	1	17	26	65
Guinea	2	2	2	2	2	1	1	0	2	2	1	1	1	19	26	73
Mauritius	2	x	x	x	x	x	x	x	x	x	x	x	x	2	2	100
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	2	19	26	73
Niger	2	2	1	2	1	0	2	0	1	1	0	1	1	14	26	54
Rwanda	2	2	2	2	2	2	1	1	2	2	2	1	2	23	26	88
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
South Africa	2	2	1	0	2	0	1	2	2	1	1	1	1	16	26	62

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: No scores for Guinea-Bissau, Liberia, Mauritania, Seychelles and Sierra Leone.

Table AVII.3 Scores for the support for women's quotas and affirmative action on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	1	1	1	1	1	1	1	1	1	1	1	1	1	13	26	50
Guinea	0	2	1	1	1	1	1	0	2	1	1	1	1	13	26	50
Mauritius	2	1	1	2	1	x	1	2	1	2	2	2	0	17	24	71
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	2	19	26	73
Niger	2	1	0	2	2	1	1	1	2	1	1	1	1	16	26	62
Rwanda	2	2	0	0	2	0	1	0	2	2	2	1	2	16	26	62
Sao Tome and Principe	1	2	1	1	1	1	1	1	1	1	1	1	1	14	26	54
South Africa	2	1	0	2	1	0	1	2	2	1	1	0	1	14	26	54

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

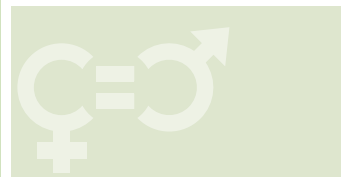
Note: No scores for Guinea-Bissau, Liberia, Mauritania and Sierra Leone.

Table AVII.4 Scores for gender mainstreaming in all departments on the African Women's Progress Scoreboard

	Law	Policy commitment	Development of a plan	Targets	Institutional mechanism	Budget	Human resources	Research	Involvement of civil society	Information and dissemination	Monitoring and evaluation	Capacity enhancement	Accountability/ transparency	Total	Maximum score	Percentage
Chad	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Eswatini	0	1	1	1	1	1	1	1	1	1	1	1	1	12	26	46
Guinea	0	2	1	2	2	1	1	2	2	1	1	1	1	17	26	65
Mauritius	1	2	1	1	2	2	2	0	1	1	1	2	1	17	26	65
Namibia	2	2	2	2	2	1	1	1	1	1	1	1	2	19	26	73
Niger	2	2	2	2	2	1	2	2	2	2	2	1	1	23	26	88
Rwanda	2	2	2	2	2	2	1	2	2	2	2	1	2	24	26	92
Sao Tome and Principe	2	2	2	2	2	2	2	2	2	2	2	2	2	26	26	100
Seychelles	0	2	1	1	2	1	1	0	2	2	1	1	1	15	26	58
South Africa	2	2	2	2	2	1	1	2	2	2	2	1	1	22	26	85

Source: ECA analysis based on data from published and draft national reports on the African Gender and Development Index.

Note: No scores for Guinea-Bissau, Liberia, Mauritania and Zimbabwe.



8. CONCLUDING REMARKS

This report highlights the status of gender equality in the 15 African countries that were part of Phase 3 and Phase 4 of AGDI, and highlights the disparities between men and women in the areas covered by the index. It is based on the findings from national reports prepared by countries as part of the AGDI process, and those prepared under the aegis of United Nations Treaty Bodies. These were supplemented by additional data and information from international databases and publications.

Overall, the selected countries have made good progress in ratifying regional and global instruments to condemn discrimination against women and pursue a policy to eliminate such discrimination against, and to take appropriate measures to ensure the full development and advancement of women. Furthermore, countries have made considerable progress in incorporating the principles and provisions of these legal instruments in their national constitutions and legislative and policy frameworks, and have set up institutional mechanisms to implement those frameworks.

The implementation of those legal and policy frameworks, however, are undermined by plural legal systems that recognize systems of customary and religious laws, which are often discriminatory. The lack of adequate organizational, human, technical and financial resources required for the effective enforcement of laws, implementation of policies and the operation of institutions, also undermines progress.

An important conclusion is that certain deep-rooted customs and practices are harmful and discriminate against women (such as early and forced marriage and female genital mutilation), but they continue, despite the laws that prohibit them. Targeted awareness campaigns are recommended to effect changes in attitudes and encourage women and girls to claim their legal rights. In addition, the crucial role of women and civil society organizations in such campaigns, and in the process leading to the domestication of the provisions of international and regional instruments on women's rights, should be emphasized.

An important message is that the average performance at the national level often masks the plight of marginal communities, including the girls and women from poor households and those living in rural and remote areas. There is a need to collect, analyse and disseminate comprehensive data, disaggregated by sex, age, location, socioeconomic status and other relevant characteristics, to fully assess trends in the situation of women and progress towards the realization of gender equality in all areas covered by the international and regional instruments.

Lastly, the report highlights the necessity for capacitating national gender machineries so that they effectively coordinate gender mainstreaming and the implementation of gender policies, plans and programmes at the national and local levels. Towards that end, the recommendation is that each country should have an up-to-date national gender strategy with a costed action plan linked to it, together with targets and a monitoring and evaluation framework to guide gender mainstreaming efforts.



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