

REVIEW ARTICLE

Progress towards Millennium Development Goals with women empowermentShobha Chaturvedi¹, Geetu Singh², Preeti Rai³¹Professor, Department of Community Medicine, Government Medical College, Jalaun; ²Assistant Professor, Department of Community Medicine, S N Medical College, Agra; ³Lecturer, Department of Community Medicine, GSVM, Kanpur, India

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Abstract

Background: Women empowerment is a powerful determinant of their own, children's and their families' health. Perhaps, due to this fact, promotion of gender equality and empowering women was kept as one of the eight Millennium Development Goals (MDGs). **Objective:** The present analysis was undertaken to study the effect of women empowerment on health of women, family planning and various health indicators of children. **Methods:** Available data from National Surveys in India, various research studies and evidences from published global studies were gathered and further analyzed. **Results:** Census 2011 (India) have shown that states having higher women literacy, like Tamil Nadu and Maharashtra (75%), have better positive indicators of health than states like Rajasthan with 53 % literacy. NFHS -3 (India) showed that empowered women had better access to maternal services (76 %), more use of contraception (66.6%) and resultantly, had lower neonatal mortality (36%). As against this, for less empowered women, access to maternal services (72 %) is low, lesser use of contraception (44%) and relatively higher neonatal mortality (43%). A systematic analysis of 175 countries (Lancet, 2010) has established that increase in women education decreases under five child mortality. **Conclusions:** Investments in women's employment, health and education, are correlated with a range of positive outcomes, including greater economic growth and children's health and survival.

Key Words

Millennium Development Goals; Systematic Analysis

Introduction

United Nation's defined Women Empowerment as women's sense of self-worth, their right to have and to determine choices, their right to have access to opportunities and resources, their right to have the power to control their own lives, both within and outside the home and their ability to influence the direction of social change to create a more just social and economic order, nationally and internationally. The UNDP has developed a gender empowerment measure (GEM) which focuses on three variables that reflect women's participation in society-political power or decision-making, education, and health (1)

Empowerment of women is important, is evident in the fact that promotion of gender equality and empowering women is one of the Eight Millennium Development Goals (MDGs).(2)

Women need to be empowered as they hold up half the sky, it will give them a position of dignity and equality and is a powerful determinant of women's health, children's health, and the health of families, and communities. But still the women do not find world a better to live as 70% of the 1.2 billion people living in poverty are female. Women do more than 67% of the hours of work done in the world but they are paid 30-40% less than men for comparable work.

Approximately 67% of the world's 875 million illiterate adults are women. 3 out of 5 women in Southern Asia and an estimated 50% of all women in Africa and in the Arab region are still illiterate.

In the year 2010, there were about 80 million unwanted pregnancies, 20 million unsafe abortions, 5,00,000 maternal deaths and accounted for 50% of all people living with HIV/AIDS globally. Under nutrition- Anaemia (more than 80% among women and girls) results in high maternal mortality, still births, low birth-weight baby, poor sexual and reproductive health, post-delivery hemorrhage and infection.(3) Largest absolute gap exist between the enrollment of girls and boys in primary education is India.(4). Low literacy and early marriage are two important factors which are responsible for majority of problems. Majority of maternal and neonatal deaths are preventable if proper interventions are taken.(5)

Aims & Objectives

To study the effect of women empowerment on health of women, family planning and various health indicators of children.

Material and Methods

Available data from National Surveys (Census 2011, NFHS-3 in India), various research studies and evidences from published national and global studies were gathered and further analyzed. Data of maternal and child health indicators like Maternal Mortality Ratio, Infant Mortality Rate, Under Five Mortality Rate, Maternal Health Services, use of family planning methods, Sexual Behavior, Sexually Transmitted Diseases status, Domestic Violence, Child Nutritional status in relation to & with empowerment of women is summarized.

Results & Discussion

Education of women and Health

Education is considered a vehicle in promoting gender equality in various outcomes. Census 2011 from India shows that states having higher women literacy like Tamil Nadu and Maharashtra (75%) have better positive indicators of health in comparison to state like Rajasthan with low literacy (53%).(6) Data from NFHS-3 (India) shows empowered women have better access to maternal services (76%), more use of contraception (66.6%), less neonatal mortality (36%) while for less empowered women access to maternal services (72 %), use of contraception (44%) is less and neonatal mortality (43%) is more.(7)

Studies confirm education plays role in reducing gender inequalities with countries that invest in promoting the economic and social status of women found to have lower poverty rates (8) as a consequence better health indicators. Similarly, girls in school were also more likely than girls not in school to boil water before drinking. (9) Two decades of research shows that children benefit when their mother's status is raised.(10) The increase in women's education from 1970 to 1995 is one indicator of women's empowerment that has contributed to a reduction of more than 50 per cent in the prevalence of underweight.(11) Literature on women's education suggests that educated mothers are more likely to adopt safe hygienic practices and medical treatment leading to lower infant mortality rates and low fertility.(12)

Mridula *et al* (1998) reported that women's education leads to reduction in family size, greater attention by mothers towards health, education and character building of their children, greater participation of women in labor market and greater per capita income and better quality of human capital.(13) In a model including data for 65 countries, Subbarao and Rainey estimated that doubling the proportion of girls educated at secondary level from 19% to 38%, holding constant all other variables (including access to family planning and health care), would have cut the fertility rate from 5.3 children per woman to 3.9 and the infant mortality rate from 81 deaths per 1000 births to 38.(14) Researchers have also shown that women's education improves their use of maternal health services, independent of a host of other factors.(15,16)

Education of women and Sexual Behavior

Studies of HIV in Africa and Latin America have shown that women's education lowers their risk of HIV infection and prevalence of risky behaviors associated with sexually transmitted infections including HIV and increases their ability to discuss HIV with a partner, ask for condom use, or negotiate sex with a spouse. Primary education has a substantial positive effect on knowledge of HIV prevention and condom use, but secondary education has an even greater effect. Girls who attend secondary school are far more likely to understand the costs of risky behavior and even to know effective refusal tactics in difficult sexual situations. (17,18,19)

Girls that do not finish secondary education are more likely to have an earlier age of sexual initiation, engage in risky sexual behavior, and consequentially be at greater risk of dying from pregnancy-related causes. Girls in school were more likely to have heard of sexually transmitted diseases or infections than girls not in school.(9) Recent evidence from a randomized controlled trial in Uganda shows how empowering adolescent girls improves their health and economic outcomes by improving HIV and pregnancy related knowledge, sexual behaviour and increasing condom use by 50 per cent as well as improving the likelihood of girls being engaged in income generating activities.(20)

Employment of women and Health

Similarly, women employment increases resources devoted to children leading to better health and force participation and women's overall development education of the children. So improving women education is the most crucial step for improving health status (World Development Report 1993). A Domestic activities consume about seven hours day even for working women causing considerable health risk to women because of their high activity levels coupled with low nutritional intake. These empowerment issues need to be addressed in depth for easing the structural constraints and women burdens.(21) Economic activity of young women in vocational training programs or microcredit enterprises increases "household per capita consumption expenditure and reduces their fertility". Studies also show that mothers who contribute more to total household income are less likely to have malnourished children and that the majority of mothers' incomes are used to provide to their children.(22,23)

Domestic Violence and Health

The higher the education level of the women the less the likelihood of experiencing physical intimate partner violence. Recent surveys have found that the prevalence of domestic violence ranges from 22 per cent to 60 per cent in developing countries. Several recent studies have also found that maternal experience of physical and sexual violence is significantly associated with an increased risk of under-five mortality, infant and fetal death, and low birth weight. Merchant *et al* found that both marital disharmony and less decision-making power for the mother contributed to slower child growth. In a longitudinal study of slum children in Mumbai, India poor growth in children was found to be significantly

associated with illiteracy, experience of marital disharmony, younger age at marriage and less decision-making power among mothers.

Female secondary education can have a crucial role in reducing violence against women, which has severe health consequences, including unwanted pregnancies, sexually transmitted infections (including HIV/AIDS), and complications of pregnancy. Women's empowerment and experience of domestic violence are associated not only with child nutrition but that these associations also extend to child nutritional status as children grow older. Women's empowerment appears to promote child growth.(24,25,26,27)

Other Evidences

Mental health and illness were understood by women as the product of cultural and socio-economic factors. Links between empowerment of women through income generation and education, reduction of discrimination based on caste and sex, and promotion of individual and community mental health were recognized. Therefore, development interventions to strengthen communities may also promote mental health and well-being.(28) Social and political marginalization impacts demand for prenatal and antenatal interventions. The exposure to the intervention had a significant, positive net effect on such indicators as use of contraceptives to delay the first birth, comprehensive antenatal care, delivery preparations, routine postpartum check-ups and breastfeeding practices in one or both sites. (29,30)

Conclusion

The study concluded that better education, employment and a shift in the attitude of society in general towards women will lead to their empowerment. Education of girls should be made national priority. Literacy, education, and empowerment known to improve access to prenatal, delivery and postnatal care. The effective implementation part has to be taken care of to make women more independent. Empowering the women also leads to better health facilities as women's health is of crucial importance, which is greatly affected by the ways in which they are treated and the status they are given in the society as a whole.

Recommendation

There is a need for the people in the field of health and other related socio-economic development sectors to be motivated and to create awareness

among people for the empowerment of women and raise health issues for the betterment of women and society as a whole.

Authors Contribution

SC, GS, PR: All have contributed equally in this paper.

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