



Report No 56

Gender and Development: Facts and Figures

**Prepared for the Department for International Development (DFID)
for its gender mainstreaming intranet resource**

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1. INTRODUCTION¹

1.1 Background

‘If development is not engendered, it is endangered’ (UNDP, 1997:7)

The Beijing Platform for Action (1995) highlighted the different needs of women and men, girls and boys. They are affected by policies in different ways and hence experience development differently. But all have the right to share in the benefits of development. If sustainable development is to be achieved, an engendered approach to development policy and practice is essential.

The shift from a focus on women in isolation, to a focus on gender, ensures a more comprehensive view of the co-operation and conflict between women and men. Of key concern are inequalities in the division of responsibilities, and access to and control over resources. Gender relations within the household are an important mediator of women’s life outcomes, as are gender relations within other institutions such as the community, market, and the state. In addition, other aspects of social differentiation which cross-cut gender - such as class, caste, age, race, and ethnicity – cannot be ignored.

What evidence is there of these gender inequalities in outcomes between women and men? The following ‘facts and figures’ expose gender inequalities and provide evidence of the need to engender development. This collection does not claim to be comprehensive but offers an insight into the available gender statistics in the following areas:

- measures of inequality
- poverty
- health
- access to resources
- education
- globalisation
- governance
- conflict and emergencies
- human rights
- references

1.2 Gender statistics

‘Statistics help promote changes, demolish stereotypes and promote understanding of the actual situation of women and men in society’
(Hedman, Perucci, and Sundström, 1996)

There is a growing demand for gender statistics, as an important tool in the furtherance of gender equality. Statistics disaggregated by gender can challenge the *status quo*, inform policies, and stimulate and measure change by:

- raising awareness amongst policy-makers of the need for the engendering of development;

¹ This was produced for DFID’s gender mainstreaming intranet resource.

- providing a foundation for the formulation of gender-sensitive policies and programmes;
- assisting the monitoring and evaluation of policies for their gendered effect, and measure progress towards addressing gender inequities;
- challenging unhelpful stereotypes in society that misrepresent women's contribution to social and economic life.

'Only if we know where we were and where we are now, can we take a confident step forward' (Evans, 1992:39)

The value of data disaggregated by sex cannot be underestimated, but is not alone sufficient. Increasingly it is being recognised that gender issues need to be mainstreamed into the production and dissemination of all statistics. The very categories of data collection need to be challenged to ensure they reflect the realities of both women's and men's lives and relations. There is therefore a need to create new indicators, for example to more accurately record and value women's unpaid labour and their work in the informal sector. These are areas which standard official statistics have tended to ignore, hence underestimating women's economic contribution.

International efforts have filled some of the information gaps, and certain measurement problems have been addressed. However, there remain areas of concern. Deficiencies in existing statistics continue to mar progress towards goals of gender equality, such as the reliance on the household as the basic unit of analysis for poverty measures. The process of engendering national and international statistics has made relatively slow progress due to a combination of cost, and lack of commitment.

Limitations

It is important to reflect on the limitations of certain statistics and the validity of certain indicators:

- certain data are still not available by gender in many countries.
- the extent to which data is comparable between countries or over time varies greatly, hence caution is necessary.
- the data represented here is only as reliable as the original research, and it is therefore advisable to turn to the original source to examine the methodology and any assumptions made.
- the validity of certain indicators are questionable, such as 'productive activity', as it usually excludes non-market activities and the informal sector, particularly significant for women.

There are also problems with certain measurement techniques that may be used, which might affect women's responses in surveys. In general, where surveys are used, the value of the data is dependent on the accuracy of the responses from those interviewed. The data on domestic violence, for example, underestimate the incidence of physical violence by an intimate partner due to the sensitivity of the issue and fears of repercussions against or from women's partners. For a detailed discussion of these issues see the 'further reading' below.

Further reading

BRIDGE, 1994, 'Annotated bibliography on statistical source methodologies for the collection, analysis and presentation of gender-disaggregated data', **BRIDGE Bibliography**, No.2, IDS, Brighton

Hedman, B., Perucci, F., and P. Sundström, 1996, **Engendering Statistics: A Tool for Change**, Statistics Sweden, Stockholm

Evans, A., 1992, 'Statistics', in Østergaard, L., 1992, **Gender and Development: A Practical Guide**, London, Routledge

2. MEASURES OF GENDER EQUALITY

‘No society treats its women as well as its men’ (UNDP, 1997:39)

Gender disparities in development can be captured by using the Gender-related development index (GDI) and the gender empowerment measure (GEM) devised by UNDP (1995). These measures can be used to rank countries in order of achievements on gender equality, rather than just on human development, as with the Human Development Index (HDI).

‘The Gender-related Development Index value of every country is lower than its Human Development Index value’ (UNDP, 1997:39)

The GDI attempts to capture achievement in the same set of basic capabilities included in the HDI – life expectancy, educational attainment and income – but adjusts the HDI for gender inequality. The GEM measures gender inequality in key areas of economic and political participation and decision making, such as seats held in parliament, and percentage of managerial positions held by women. The GEM thus differs from the GDI, which is an indicator of gender inequality in basic capabilities (UNDP, 1995: 39).

Higher GDP does not guarantee greater gender equality. Some developing countries outperform much richer industrial countries in gender equality in political, economic, and professional activities. Progress towards gender equality can be achieved at different income levels and stages of development. For example, Table 1 shows interesting comparisons between Trinidad and Tobago and the UK, Mexico and Japan, and Botswana and France. Despite the significantly lower gross domestic product (GDP) of the developing country, it outperforms the developed country in terms of gender empowerment. Likewise, Mozambique beats the richer Zambia on empowering women.

Table 1: Gender disparity: comparisons of GEM, GDI and HDI ranks, with GDP

Country	GEM rank	GDI rank	HDI rank	Real GDP per capita (PPP\$) ² 1992
Developed/ing country comparisons:				
Trinidad and Tobago	17	27	32	9,760
UK	20	12	14	17,160
Mexico	31	41	38	7,300
Japan	34	11	6	20,520
Botswana	39	54	59	5,120
France	40	5	2	19,510

² Purchasing power parity: ie the number of units of a country’s currency required to purchase the same representative basket of goods and services as in the US, expressed in dollars for comparison. The GDP of these countries is then converted into these PPP dollars.

Africa:				
Mozambique	43	85	91	380
Zambia	71	77	83	1,230
Mali	83	86	92	550
Asia:				
Bangladesh	76	80	84	1,230
India	86	75	80	1,230
Pakistan	92	76	81	2,890

Source: Adapted from UNDP, 1995: 41, Table 2.9

3. POVERTY

‘Gender inequality is a structural impediment to poverty elimination. It is in everyone’s interests to remove it’ (DFID, 1999)

The poverty and rights-based approach described in the UK Government’s White Paper on International Development (DFID, 1997) gives a clear commitment to gender equality as central to their poverty elimination strategies. It is recognised that both women and men must play full roles and play on equal terms as actors in the development process and the fight against poverty. Poverty is multidimensional, and hence limiting measures to income shortfalls and poverty lines, masks the true extent of poverty, particularly for women and children. And using the household as the basic unit of analysis, gender inequities within the household fail to be captured.

‘Human development’, as the process of enlarging people’s choices, has increasingly won favour. This in turn has led to the idea of ‘human poverty’ (introduced by UNDP) as a shortfall in outcomes rather than a shortfall in incomes. UNDP have developed the Human Poverty Index (HPI) which measures deprivation in the same indicators as used for the Human Development Index (HDI), relating to premature death, illiteracy, and access to health services, for example. However, the HPI is not yet being reported at a gender disaggregated level.

Gender subordination does not arise out of poverty *per se*, although a strong association is often made between gender and poverty. Women are said to form the majority of the poor. According to UNDP (1995: 4):

‘Poverty has a woman’s face - of 1.3 billion people living in poverty, 70 percent are women.’

It is often asserted that there is a ‘feminisation of poverty’ occurring, i.e. that poverty among women is rising faster than poverty among men. For example, IFAD (1992: 22) found that between 1965-70 and the mid-1980s, the number of rural women living in poverty increased by 48 percent. By comparison, the number of rural men living in poverty increased by 30 percent in the same period.

However, the lack of systematic data that disaggregates expenditure or consumption by gender means that such broad statements are often based on questionable assumptions. There is a need for further research to avoid making simplistic correlations, such as between increases in female headship and any ‘feminisation of poverty’.

Standard income/expenditure data fail to capture the complexity of gender differences in poverty. It can therefore be helpful to examine broader indicators of well-being:

- health indicators eg nutrition, life-expectancy, maternal mortality;
- access to resources eg employment participation and earnings, land ownership, and access to safe water and sanitation.

These reflect the outcomes of income/expenditure decisions rather than the means whereby well-being is achieved (Kabeer, 1996). Income-based measures of poverty do not correlate neatly with a gender-differentiated assessment of well-being.

4. HEALTH

'The gaps between the health status of rich and poor are at least as wide as they were half a century ago, and are becoming wider still' (WHO, 1998a). Policies to improve the health status of the poor have been an important focus of development policy over the past 25 years.

Gender gaps are also persistent in health status, in access to health services, and in health outcomes. This signals that gender inequality, as well as poverty, needs to be addressed in health sector reform. In 1990, over one third (36 percent) of 'healthy life' lost by adult women (15-44) was caused by reproductive health problems, especially maternity-related causes and sexually transmitted diseases (STDs), compared to only 12 percent for men (World Bank, 1993, cited in WHO, 1995: 21). An additional five percent of 'healthy life' lost by women was estimated to be due to gender violence and rape.

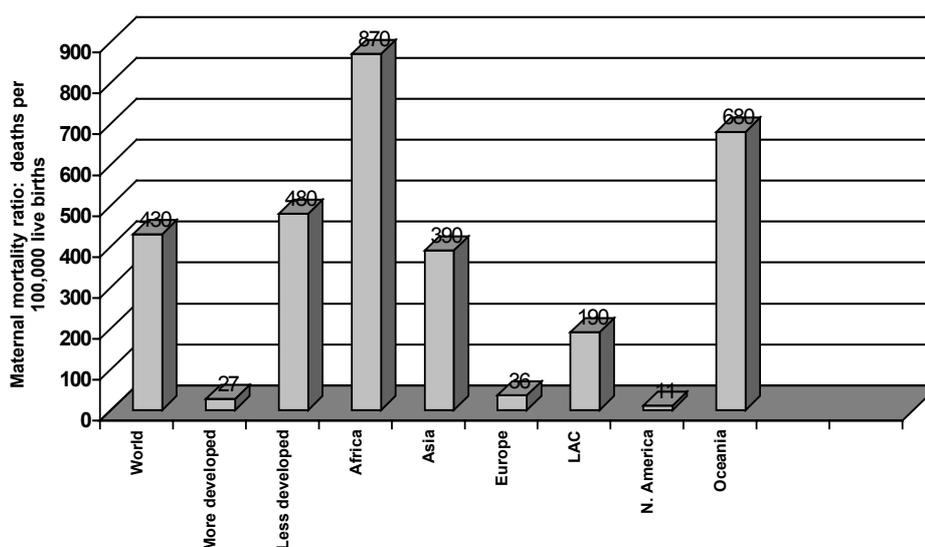
4.1 Maternal mortality

The disparity between developed and developing countries in maternal mortality ratios is greater than for any other indicator. Every year, around **200 million** women become pregnant, of these:

- approximately **150 million** carry to term;
- around **20 million** of these pregnancies end in unsafe abortions, many of which lead to complications, disability and death;
- of the remainder, there are **500,000** maternal deaths;
- however in 1996, new estimates for maternal mortality showing that **585,000** women die per year from pregnancy-related causes, **85,000** higher than previous estimates (WHO);
- a further **20 million** women (15 percent of all live births) suffer severe and long-term disability as a result of poorly managed pregnancy or delivery (WHO, 1995: 23).

While considerable progress has been made in reducing infant and child mortality, progress in reducing maternal mortality has slowed and in some regions (sub-Saharan Africa) trends may be negative (World Bank, 1994: 2; WHO, 1995; WHO/UNICEF, 1996). Figure 1 shows maternal mortality ratios (MMR) by region; there are 870 maternal deaths per 1000 live births in Africa in comparison to 190 maternal deaths in Latin America and the Caribbean.

Figure 1: Maternal mortality ratio (MMR) by region, 1990



Source: adapted from WHO/UNICEF, 1996: 3

Table 2: GDP: maternal mortality comparisons

	<i>GDP (1994) (1987 \$)</i>	<i>MMR (1990)</i>
Mozambique	132	1,500
Malawi	133	560
Indonesia	522	650
Sri Lanka	676	140

Source: adapted from UNDP, 1997: 166-7; 174-5

4.2 Life expectancy

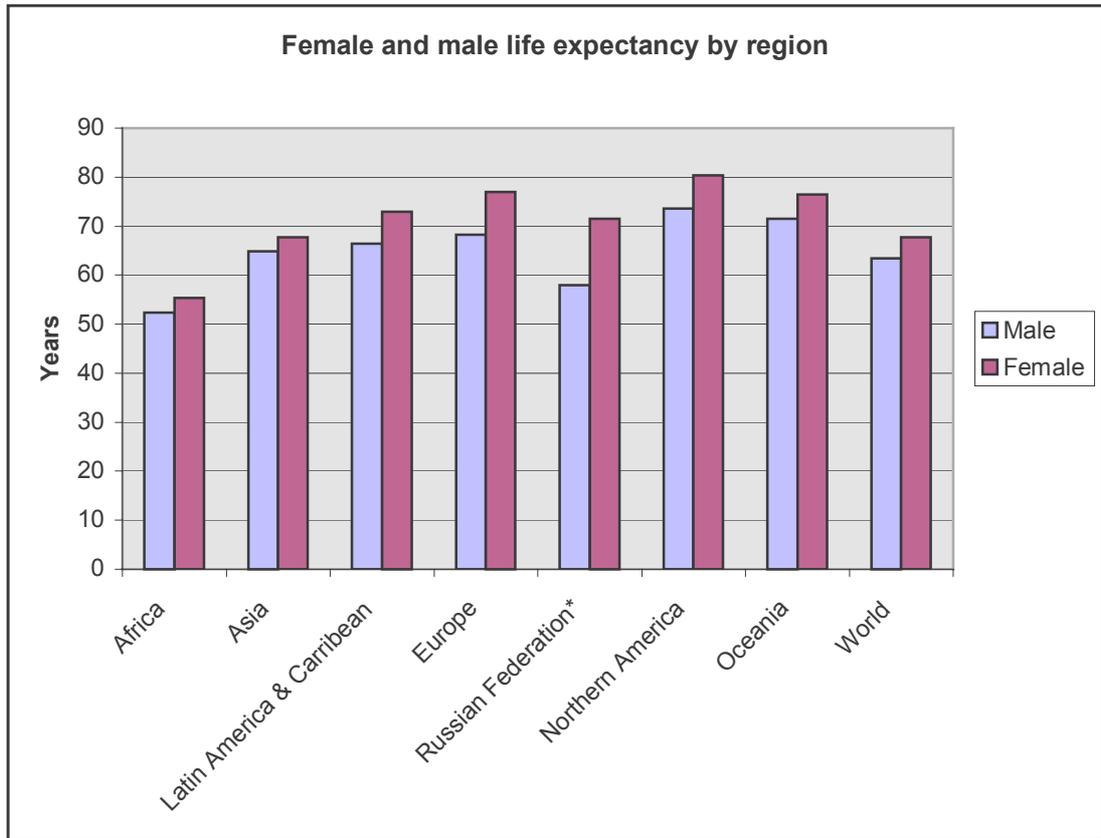
Whilst women tend to live longer than men in all regions of the world, the absolute gap varies greatly. This is determined by a combination of biological and socio-economic factors that are little understood. However, maternal mortality, female infanticide, and male-bias in food and health care allocation in the household, are factors that can reduce female life expectancy. Figure 2 shows that women outlive men in all regions although there are significant differences in the absolute life expectancy between regions and the life expectancy between women and men between regions.

Whilst in Central Asia women's life expectancy is six to eight years in their favour, in South Asia there is no gender difference in life expectancy (UNFPA, 1998). In South Asia there is some evidence of son preference and active discrimination against girls, through sex-selective abortion, female infanticide and discriminatory feeding. Sex discrimination is even greater against high birth order children (UN, 1995).

In Western societies the gap between men and women has widened in the last decade. Women's life expectancy has increased whereas male life expectancy has

stagnated or even decreased, as in Eastern Europe (UN, 1995:67). Contributing factors for men in addition to greater vulnerability in infancy are causes of mortality associated with life-style such as from car accidents, violence, alcoholism, diseases of affluence, and HIV/AIDS. Significantly, in the Russian Federation (see Figure 2) a twelve-year difference in favour of women is found, primarily as a result of a decrease in male life expectancy (rather than any improvement in women's life expectancy).

Figure 2: Female and male life expectancy at birth, by region



Source: adapted from UNFPA 1998, Statistical tables

* as no aggregated data was available, the Russian Federation stands as one example of "countries with economies of the former USSR" (UNFPA 1998)

In Nepal women live on average half a year less than men, compared to the UK where women live on average five years longer than men. Table 3 shows the absolute life expectancy at birth of females and males, and the absolute gap in years between them. In India, where families tend to favour boys to girls, women outlive men only by an average of one month. However, in Sri Lanka, women outlive men by four and a half years on average. We can see larger absolute gaps in life expectancy on average between women and men in the African countries listed compared to Asia. However, both men and women in nine African countries, according to UNFPA data, have an average life expectancy below fifty years (UNFPA, 1998).

Table 3: Female and male life expectancy in selected countries

Country	Male (years)	Female (years)	Absolute gap (years)
Asia			
Nepal	57.6	57.1	-0.5
India	62.1	62.2	0.1
China	68.2	71.7	3.5
Sri Lanka	70.9	75.4	4.5
Africa			
Uganda	40.4	42.3	1.9
Botswana	48.8	51.7	2.9
Ghana	56.2	59.9	3.7
South Africa	62.3	68.3	6
Europe and N.America			
United Kingdom	74.5	79.8	5.3
United States of America	73.4	80.1	6.5
Finland	73.0	80.8	7.8
Hungary	64.5	73.8	9.3

Source: adapted from UNFPA, 1998, Statistical tables

Child mortality data for some countries show higher mortality rates among girls than boys. While infant mortality rates are generally higher among boys than girls for biological reasons, child mortality data for some countries show higher mortality rates among girls than boys. This is the case for India and China (World Bank, 1993, cited in World Bank, 1994: 15). For Pakistan, the ratio is as high as 1.6 female deaths per 1 male death. Other countries with a female: male ratio of child deaths of over 1 include: Togo, Dominican Republic, Cameroon, Mexico, Burundi, Niger, Guatemala, Peru, Zimbabwe, and Mali (*ibid*:17).

4.3 HIV/AIDS

Whilst more men than women have contracted HIV to date, the gap is closing:

- **41 percent** of those currently infected with HIV/AIDS are female;
- **31 percent** of the 11.7 million persons who have died of AIDS are women;
- **46 percent** of those who died of AIDS in 1997, were women;
- **8 million** children under 15 have lost their mothers to AID, and many also lost their fathers, since the beginning of the epidemic (UNAIDS estimates, 1997).

The transmission of HIV/AIDS from men to women is 2-4 times more efficient than from women to men (WHO, 1995: 28) and adolescent girls may be more physiologically vulnerable to HIV infection than many older women (World Bank, 1994: 19). Women also progress to AIDS earlier than men.

In sub-Saharan Africa, women now form half of the estimated 20 million HIV-infected persons (see Table 4). In the Caribbean, with the next highest adult prevalence rate of 1.82 percent, 33 percent of those infected are female. In other developing regions, the proportion of those infected that are women varies from 20-33 percent (UNAIDS, 1998).

The percentage of women infected is high where heterosexual transmission dominates, again mainly in sub-Saharan Africa and the Caribbean. The percentage of women among those infected is particularly low in East Asia and the Pacific (13 percent) and Australia/New Zealand (six percent). Overall, the highest concentration of infected women occurs in Africa (80 percent of the global total) followed by South and Southeast Asia (13 percent).

Table 4: Regional patterns of HIV/AIDS

Estimations, 1997	Epidemic started*	Main modes of transmission*	% adults living with HIV/AIDS	% of adults living with HIV/AIDS which is female	distribution of adult women living with HIV/AIDS (%)
Sub-Saharan Africa	Late 70's, early 80's	Hetero	7.41	50	81.1
North Africa & Middle East	Late 80's	IDU, Hetero	0.13	20	0.3
South & South-East Asia	Late 80's	Hetero	0.61	26	12.3
East Asia & Pacific	Late 80's	IDU, Hetero, MSM	0.05	13	0.4
Latin America	Late 70's, early 80's	MSM, IDU, Hetero	0.52	18	2.0
Caribbean	Late 70's, early 80's	Hetero, MSM	1.82	33	0.8
North America	Late 70's, early 80's	MSM, IDU, Hetero	0.55	20	1.4
Western Europe	Late 70's, early 80's	MSM, IDU	0.23	21	0.8
Eastern Europe & Central Asia	Early 90's	IDU, MSM	0.09	21	0.3
Australia & New Zealand	Late 70's, early 80's	MSM, IDU	0.11	6	0.0
Total:			0.97	41	100.0
Million			29.5	12.1	12.1

Source: adapted from UNAIDS 1998; * UNAIDS, 1997. For more recent data on estimations of female/male HIV/AIDS infections and reported AIDS cases see WHO, 1998)

Note:

Hetero: heterosexual

MSM: men who have sex with men

IDU: Intravenous drug users

4.4 Nutrition

Malnutrition indicators are rarely disaggregated by sex and when they are, show a mixed picture. Malnutrition rates, in fact, tend to be slightly worse for boys than girls in most countries. There are some exceptions, for example, in Sri Lanka, Tunisia and Yemen, stunting is more prevalent among girls than boys. In some countries, girls are more likely

than boys to be underweight (e.g. Cameroon, Seychelles, Mali and Zimbabwe in Africa; China, Indonesia and Sri Lanka in Asia) (UN, 1995: 67-8).

In South Asian countries, there is evidence of girls having poorer nutritional outcomes than boys:

- 59 percent of girls suffer from chronic malnutrition in Bangladesh compared to 56 percent of boys.
- 10 percent of girls suffer from acute malnutrition, compared with 7 percent of boys.
- overall, females achieve 88 percent of the satisfactory nutritional intake (UNDP, 1995:35).

Women's nutritional status and their vulnerability to malnutrition vary throughout their life-cycle. Indicators that describe women's nutritional status include trends in anaemia, low birth weight deliveries, measures of the body mass index (BMI), arm circumference, stunting (retarded growth due to chronic malnutrition) or underweight (ACC/SCN, 1992:53).

Anaemia

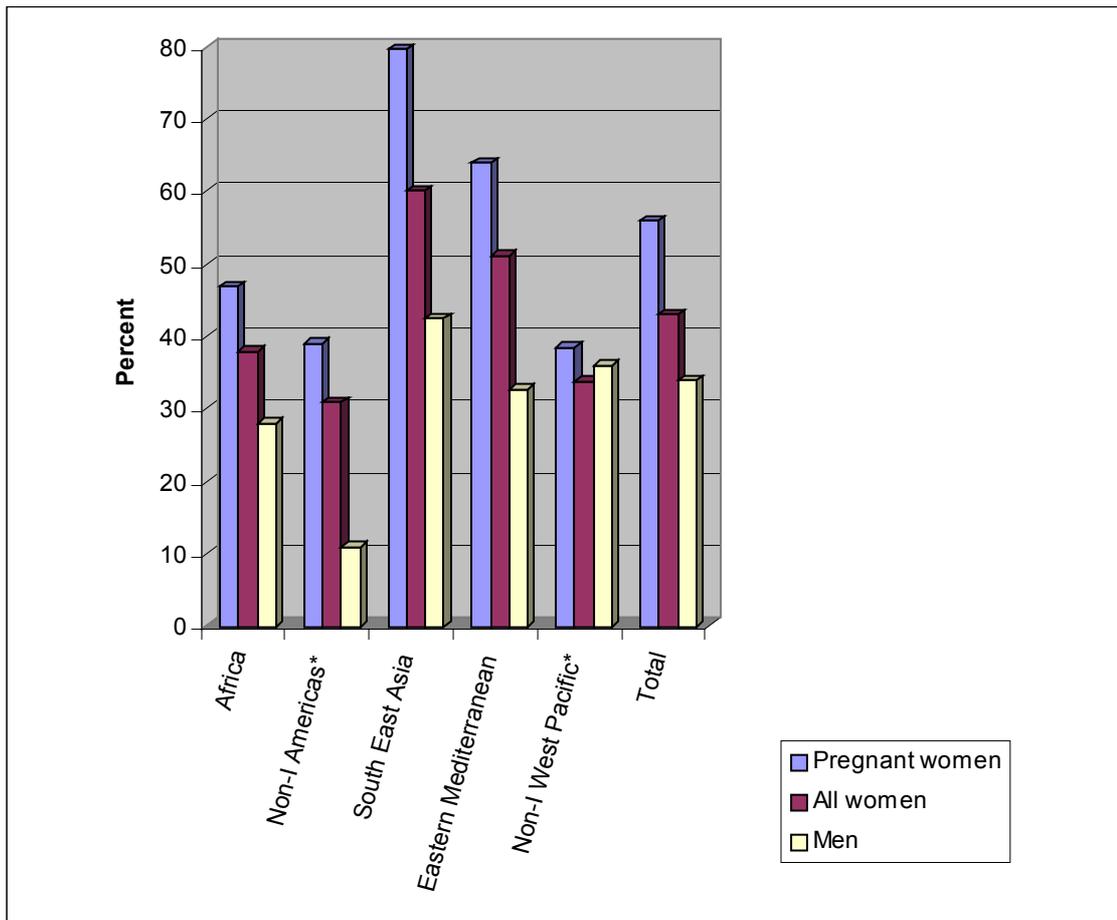
43 percent of all women and 34 percent of all men are anaemic in the developing world (ACC/SCN, 1997). Iron deficiency anaemia (IDA) is the most common nutritional deficiency worldwide with 90 percent of all affected people living in developing countries. Figure 3 reveals the significantly higher incidence of anaemia in women, particularly of pregnant women. South East Asia is particularly noted for the high incidence of anaemia; almost 80 percent of pregnant women are anaemic and over 40 percent of men.

Anaemic women experience a higher risk of maternal mortality and morbidity.

In general, anaemia causes weakness and fatigue and thus reduces the capacity for production. In infants and children iron deficiency is associated with impaired physical and cognitive development which has life-long irreparable consequences.

Causes of anaemia include inadequate intake of iron, increased need for iron (e.g. during growth or pregnancy), chronic blood loss, and limited capacity of the body to utilise iron (e.g. in the case of parasites and sickle cell anaemia) (ACC/SCN 1997:35). In order to sustain comparable levels to men, women would have to take in comparably greater amounts of iron, which is best accessible through meat products and green vegetables. Food taboos during pregnancy and biases in household food distribution may contribute to higher rates of anaemia in women in certain countries (as illustrated in figure 3).

Figure 3: Prevalence of anaemia among different populations



Source: adapted from ACC/SCN, 1997:35, based on national data from WHO
Note: *Non-I = Non-industrialised

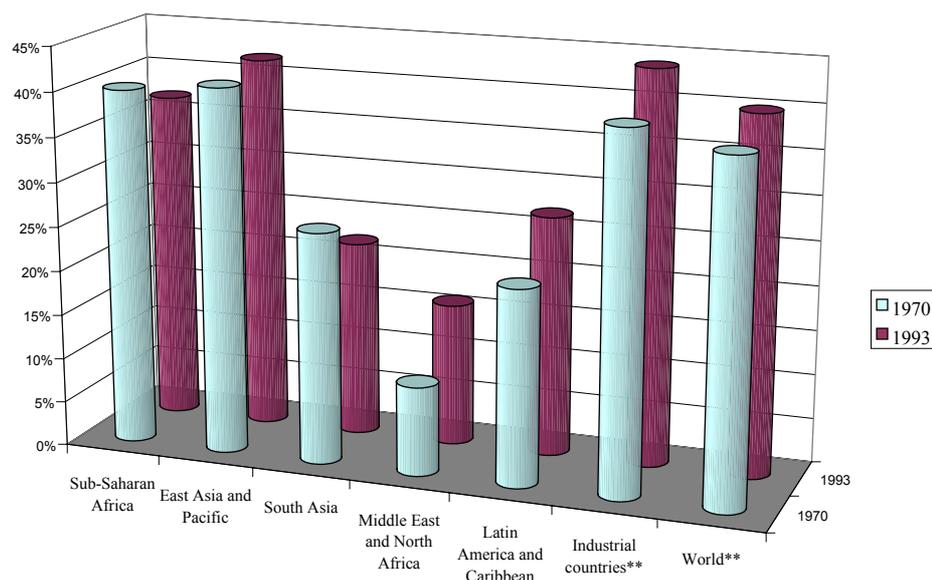
5. ACCESS TO RESOURCES

5.1 Employment

Labour Force Participation

There is a trend towards women's increased economic activity, across many countries. The gap between women and men in paid employment, however, remains wide in many parts of the world (Hedman *et al*, 1996). Figure 4 shows that the female share of the labour force globally has risen over the last 23 years and this is true also of all regions except sub-Saharan Africa and South Asia. In East Asia and the Pacific women have over 40 percent share, rivaling women's share in industrial countries.

Figure 4: Female share of labour force by region, 1970, 1993



Source: adapted from: World Bank, 1995: 219³ and UNDP, 1997: 183. Data from 1970 based on ILO, 1996 and World Bank, 1995.

Official labour force statistics on women's economic participation have tended to underestimate women's contribution, particularly by excluding work in the informal sector. Micro-studies in Middle Eastern countries (e.g. Syria), which have very low declared female activity rates, indicate that much of women's work inside households contributes to marketed production and should be counted as employment, but is not (Anker and Dixon-Mueller, 1988). Data collection methods are improving, so that some of the apparent increase in female labour force participation may reflect the tendency over time for data to classify more of women's activities as 'economic'.

³ Data based on ILO data, which shows the extent to which women are "gainfully employed" in the formal sector. These numbers exclude homemakers and other unpaid caregivers and in several developing countries reflect a significant underestimate of female participation rates. All summary measures are country data weighed by each country's share in aggregate population or population subgroup.

The trend for the past thirty years has been for female labour force participation to rise while the male participation rate has been falling, especially in industrialised countries. Table 5 shows that just over half of all the developing countries in the table also displayed this dual pattern. For example, women's participation rates rose and men's fell between 1975 and 1995 in Pakistan, under conditions of a contracting overall labour force.

In three quarters of the developing countries in Table 5, the female activity rate rose. In the majority of cases, the female activity rate rose so strongly that it outweighed the fall in the male rate, leading to a rise in the overall population activity rate. This can be seen in Egypt, for example, where women's participation rate has increased, and men's has fallen despite conditions of expansion in the overall labour market.

Table 5: Variations in adult⁴ male and female activity rates between 1975 and 1995

	Country category	Women rose	Women fell	Women no change
Men rose	Developing	Chile, Guatemala, Jamaica, Mexico, Panama, Korea Rep., Thailand	Decline⁵: <i>Cameroon</i> No change: <i>Ecuador</i>	
	Developed	Switzerland		
Men fell	Developing	Increase: <i>Argentina, Peru, Venezuela, Uruguay, Egypt, Mauritius, Bahrain, Kuwait, Singapore, Sri Lanka</i> Decline: <i>Bolivia, Costa Rica, Puerto Rico, Netherlands Antilles, Trinidad and Tobago, Algeria, Israel, Pakistan</i>	Barbados, Haiti, Hong Kong, Zimbabwe	Indonesia
	Developed	Increase: Germany, Iceland, Portugal, Canada, New Zealand, Japan No change: <i>Netherlands, Sweden, USA, South Africa</i> Decline: <i>Denmark, Spain, Italy</i>	Austria, Finland, France	Australia, Greece, Norway

⁴ Age coverage is around 15-64, for exceptions, see original table

⁵ Countries with increase/decline/no change in total labour force participation

Men no change	Developing	Honduras		Philippines, Syrian Arab Republic
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Source: adapted from Standing, 1996: tables 2-5, using data from ILO, Year Book of Labour Statistics (various years)

It is important, however, to recognise the limitations of the above table in that there is little coverage, for example, of Africa where we saw a falling female share of the labour force between 1970 and 1993 (Figure 4).

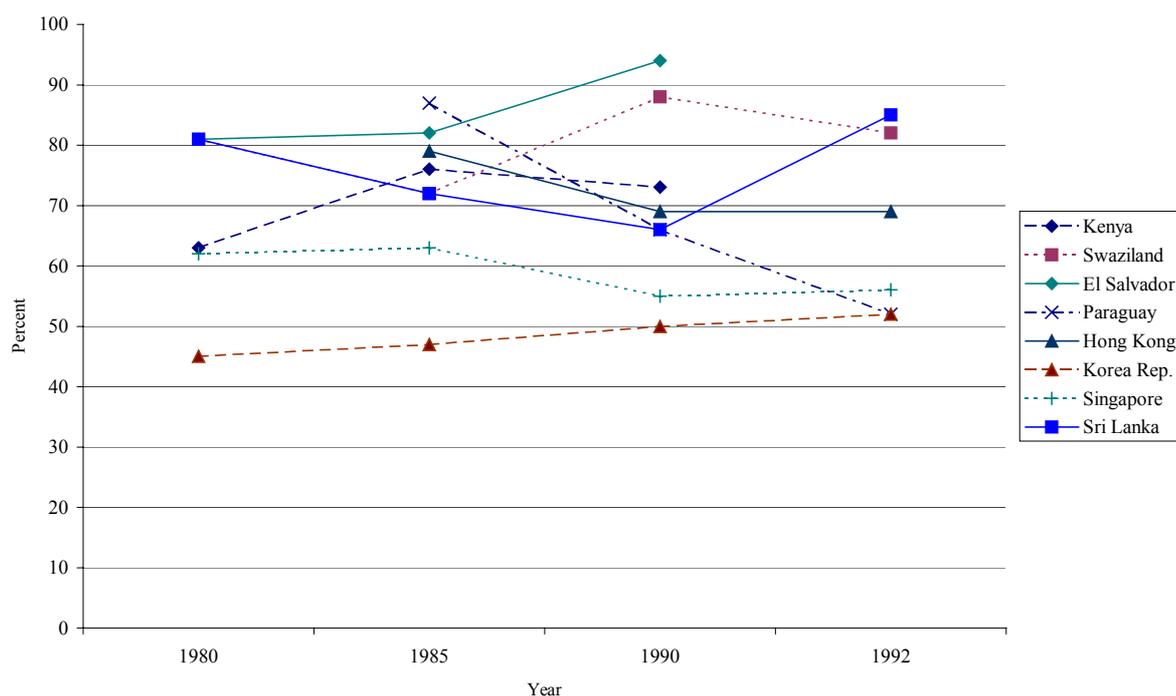
Gender differentials in earnings

‘Almost everywhere, women are worse paid than men for the same kinds of work’
(Hedman *et al*, 1996:19)

Gender inequalities in the labour market can also be seen in terms of earnings differentials. Evidence shows that women are paid less than men for equivalent work. Women’s earnings range from a low of around 50 percent to around 85 percent of men’s earnings. In some countries the ratio has fallen, in others it has risen, in some there is no consistent rise or fall.

Greater flexibility in labour markets is not reducing women’s systematic pay disadvantage. Figure 5 gives data on women’s earnings as a percentage of men’s earnings in manufacturing. This is the sector in which employment and earnings data are most reliable. Even so the data are only available for a small number of countries and are inadequate to establish firm trends. In any event, there is no common pattern of change over time across these countries. The only clear country trends can be seen with the gradual increase of women’s relative earnings in the Korean Republic versus the major fall of women’s relative earnings in Paraguay up to 1992.

Figure 5: Female earnings as percentage of male earnings in manufacturing (selected developing countries)



Source: adapted from Standing, 1996: 18

These data do not take account of differences between individuals in terms of hours of work, qualifications and work experience, or differences in wage rates between different types of job. Thus, for example, if female workers have less education than male workers (as data indicate that they often do) their earnings would also be lower, other things being equal.

Different hours of work or personal endowments do not explain the earnings differences between women and men according to econometric analyses, which allow these factors to be properly controlled for. A survey of such studies reveals that in most countries only 4-40 percent of the earnings gap is explained by 'human capital' differences. The rest is due to gender discrimination, the application of different wage payments systems to different groups of workers, where the only ground for differential treatment is the individual's gender (Terrell, 1992:393).

5.2 Water and sanitation

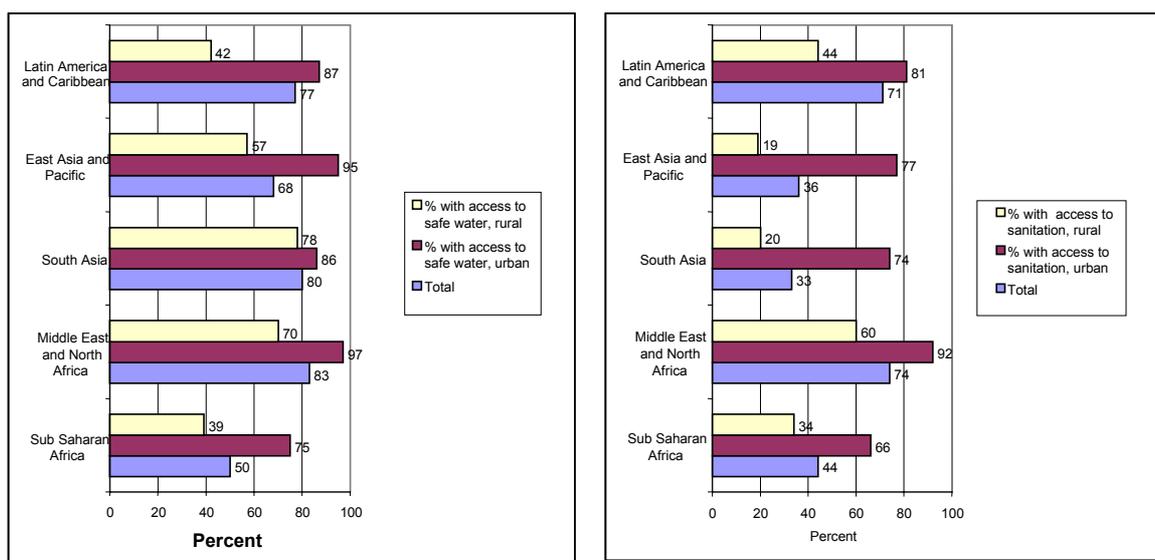
Access

Women bear a disproportionate burden of any water scarcity, as the main water collectors and primary carers. If there is no access to safe water in the immediate neighbourhood, this does not only add to the time a woman spends collecting water (see Table 6), but also increases the likelihood of infection of household members through contaminated water and sanitation facilities. This adds to women's unpaid labour burden as it requires time and resources for treatment and care. More than 80 percent of the people in North Africa and the Middle East, and South Asia have access to safe water, compared to only half of the population in sub-Saharan Africa (see Figure 6).

Rural women are particularly affected by water scarcity. For example, 43 percent of the rural population in East Asia and the Pacific, 58 percent in Latin America and the Caribbean, and 61 percent in sub-Saharan Africa (UNICEF, 1999). Figure 6 highlights the disparities not only between regions but between urban and rural contexts within regions. Across all regions, the access to safe water is higher in urban areas, with the difference particularly marked in Latin America and the Caribbean where urban populations have over double the level of access to safe water than do rural populations.

If we view sanitation access in Figure 6, the access in some regions appears to correlate with their access to safe water, such as in the case of sub-Saharan Africa, Latin America and the Caribbean, and the Middle East and North Africa. However, there are significant differences in the rural regions of East Asia and Pacific, and of rural South Asia, where around 80 percent of the rural populations have inadequate access to sanitation. In contrast, urban access in both of these regions is over 70 percent.

Figure 6: Regional comparison of populations with access to safe water and sanitation



Source: adapted from UNICEF, 1999: 105

Water collection

In the dry-season women can spend between 3.5 and 28 hours collecting water per week, suggests evidence from twenty-two studies in Africa and Asia (Hedman *et al*, 1996). Table 6 demonstrates the variety of time spent by women collecting water in selected countries/regions (UN, 1995:50). It also reveals the significance of the combination of seasonality (ie dry season versus rainy seasons) and general water scarcity (as seen in the previous Figure, where rural access is more scarce than urban) on collection time.

Table 6: Time women spend collecting water (hours/week)

Country	Hours/week
Africa	
Kenya villages, dry season	4.2
Rainy season	2.2
Ivory Coast, rural	4.4
Botswana rural areas	5.5
Mozambique villages, dry season	15.3
Rainy season	2.9
Senegal, farming village	17.5
Asia	
West Bengal, age 10-14	2.5
Age 15+	2.9
India, Baroda Region	7.0
Nepal villages, age 10-14	4.9
Age 15+	4.7
Nepal hills, dry season	11.2
Rainy season	6.3
Yemen, Arab Republic	19.3

Source: adapted from UN, 1995:50, compiled from different surveys by R Billsborough for UN Statistical Division

As the assistance by children may ease women's time burden for water collection (see data for Nepal and West Bengal), the length of time for fuelwood and water collection has been shown to positively correlate with high fertility in some cultures. Degradation of water supplies necessitate more hours spent collecting water, which has an impact on women's overall labour burden and the time that can be spent on other activities (UN, 1995:50).

5.3 Land ownership and access

Women's rights to land are often restricted by local customs and laws. The status of women's and men's rights often differ greatly, and women may need to rely on male partners or kin for access to land. However, very little systematic data is available on land holdings by gender.

Research undertaken in Burkina Faso, Kenya, Nigeria, and Zambia (Saito, 1994) revealed that women smallholders dominate the agricultural sector and account for over three-

quarters of the food produced. This entails a lengthy working day for women, combining their reproductive and household maintenance duties with agricultural work – the report showed that rural women work on average 50 percent more hours per day than men. However, with increasing population pressure and deteriorating land, women’s rights to land have in effect worsened, with the effect of reducing plot size compared to men (and with women owning fewer plots).

In Kenya and Nigeria female household heads and female household members farm considerably smaller areas. Table 7 gives some illustrative data for Kenya and Nigeria from this research. In Kenya, women-headed households cultivated two-thirds of hectares that men cultivated. In Nigeria, holdings of households headed by men were over three times that of women-headed households, and still over twice the area when adjusted for the smaller household size of women headed households. Overall, the average (mean) holding of female household members (ie those not heading households) is significantly lower in both Kenya and Nigeria than male household members.

Table 7: Landholdings of farmers in Kenya and Nigeria by gender

	Kenya		Nigeria	
	M	F	M	F
Households: by gender of household head				
Mean total size of household holding	2.6	1.7	2.6	0.8
Hectares per person	0.3	0.21	0.34	0.16
Holdings: by gender of land user				
Mean holding size of household head (hectares)	3.1	1.3	2.2	0.7
Mean holding of household members	1.9	0.6	1.8	0.7

Source: adapted from Saito, 1994: 52

6. EDUCATION

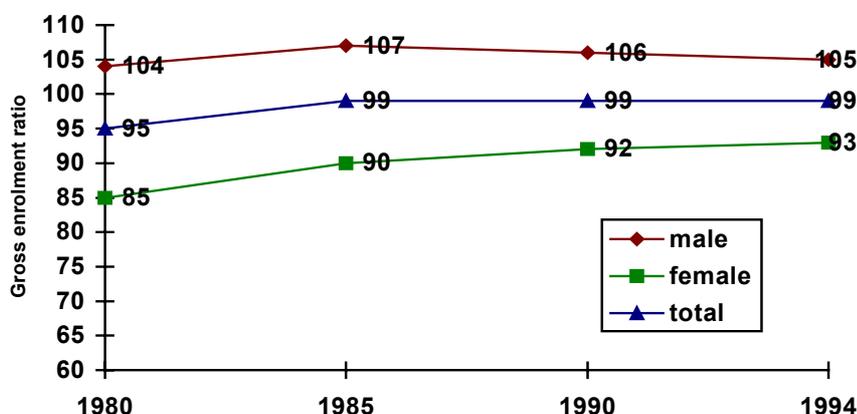
6.1 Trends in enrolment

Whilst the gender gap in enrolment has narrowed, the rate of progress has slowed in the 1990s. Significant improvements have been made in primary school enrolments in developing countries since 1960. The gross enrolment ratio (GER) is 100 percent for boys in developing countries overall and the gender gap has narrowed but at a decreasing pace (as shown in Figure 7). In spite of this progress in enrolment, 85 million of the 145 million children aged 6-11 not in school in 1995 were girls. This is equivalent to 24 percent of the female school age population, compared to 16 percent of the male school age population (UNESCO, 1995: 19).

Only in Latin America and the Caribbean does female enrolment attain 100 percent. For both boys and girls, enrolment ratios are substantially lower in sub-Saharan Africa. Between 1980-1990, GERs here declined on average due to a 'levelling down': boys' enrolments decreased by 8 percent while girls' decreased by only 2 percent (Rose and Tembon, 1997: 3).

However, enrolment ratios do not allow estimates about average enrolment, drop-outs and children who repeat years. In the following graph elements of efficiency, such as the percentage of boys and girls who graduate, or quality of education, are not represented.

Figure 7: Trends in primary gross enrolment ratio (GER) by gender, developing countries, 1980-1994



Source: adapted from Rose and Tembon, 1997:3

At secondary level, gross enrolment ratios are lower at 49 percent overall. A gender gap persists (54 percent GER for males compared to 44 percent for females in 1995), although it has narrowed considerably and the size of the gap also varies considerably by region (*ibid.*; UNESCO, 1997).

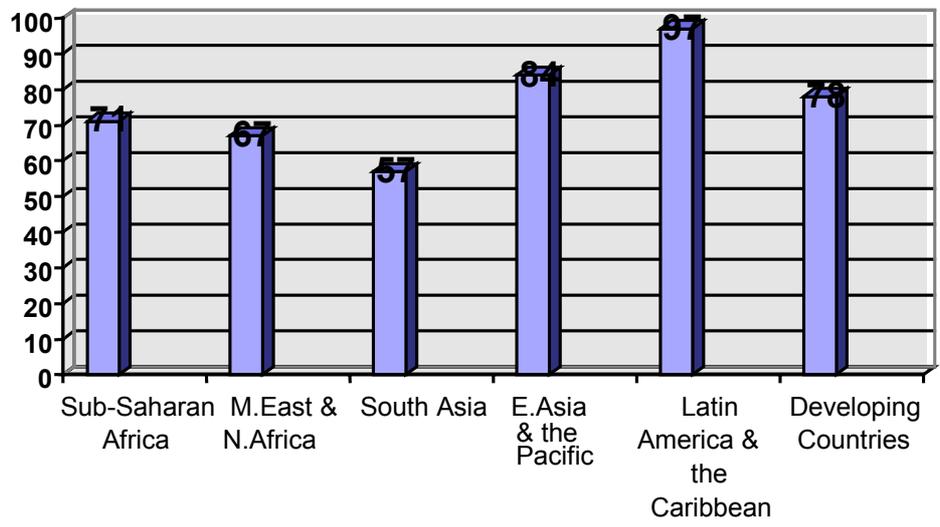
6.2 Literacy

About two thirds of the 872 million illiterate people in developing countries are women. Although people with no literacy have ways to use alternative systems of communication, they face constraints in their every-day life in the modern world that can affect their well-being negatively. Being illiterate makes people dependent on others to obtain written information about market prices, their civil rights or health care choices and may inhibit people from pursuing their interests.

The largest gaps in literacy between women and men exist in South Asia. According to Figure 8, the largest gaps in literacy between women and men exist in South Asia where women are most likely to be excluded from public life. Here women have 71 percent of the level of literacy that men do. This corresponds to gaps in primary school enrolment. In these circumstances parents experience a lesser incentive to send girls to school, and women are less likely to practice their skills, even after basic schooling. In comparison, women in Latin America and the Caribbean have 97 percent of the literacy level that men do.

Gender differences in enrolment also translate into differences in educational attainment. While the gap between male and female illiteracy is closing, older women in particular are over-represented among the illiterate population (UNESCO, 1995:18-19; UNESCO, 1997:Table 2-2).

Figure 8: Female:male adult literacy ratio, by region, 1995



Source: adapted from UNICEF, 1998

7. GLOBALISATION

7.1 Employment trends

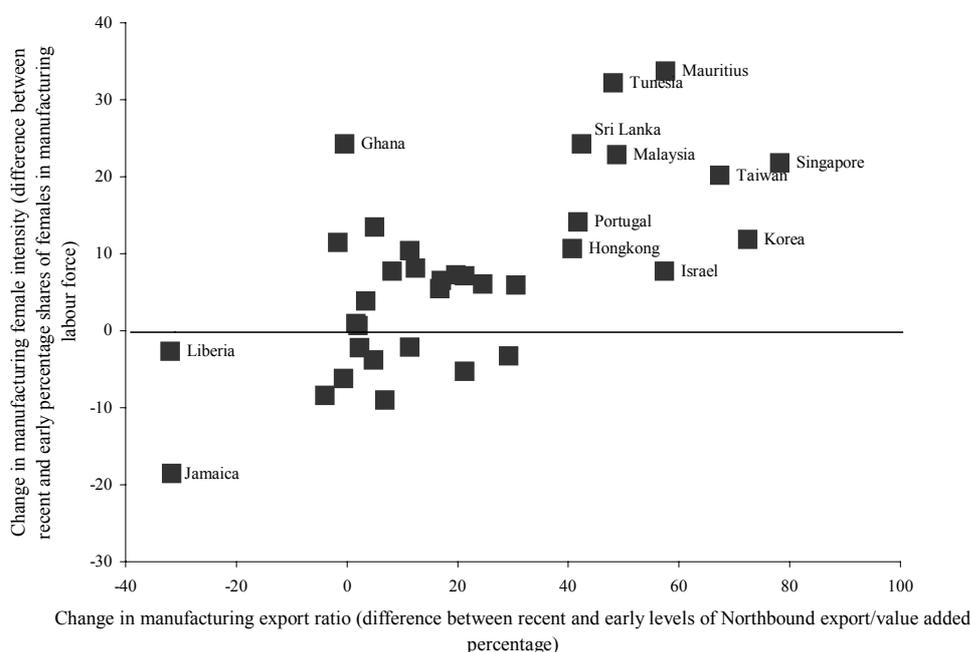
Globalisation has mobilised many more women into the industrial wage labour force. It has also affected the sectoral distribution of women and men in the labour force. The best documented gender-differentiated effect of globalisation relates to the demand for labour in export industries in developing countries.

Export Manufacturing

The share of women workers who are employed in the non-agricultural wage labour force has risen in many countries, driven by the widespread export-led patterns of industrialisation in the past forty years. This absorption of female labour has, in some views, influenced the terms and conditions of work negatively for all workers (Standing, 1996).

A strong relationship exists between the growth of exports and absorption of female labour into the manufacturing sector (see Figure 9). The relationship extends even into the negative quadrant of the graph. Those few countries that saw a fall in the export share in manufacturing, such as Jamaica and Liberia, also experienced a fall in the proportion of women in the workforce. This suggests that developing countries' international competitiveness in manufacturing may be associated with the increasing use of female labour.

Figure 9: Changes in female intensity and export orientation of Southern manufacturing⁶, 1960-1985



Source: Wood, 1991: 175

⁶ Each observation on the graph expresses the situation in a particular country over the period in question, 1960-85. The data is used in incremental form, that is it relates *increases* in the share of exports in manufacturing output to *increases* in the share of women workers in the workforce in that sector.

Informal sector

The importance of the informal sector for women cannot be underestimated.

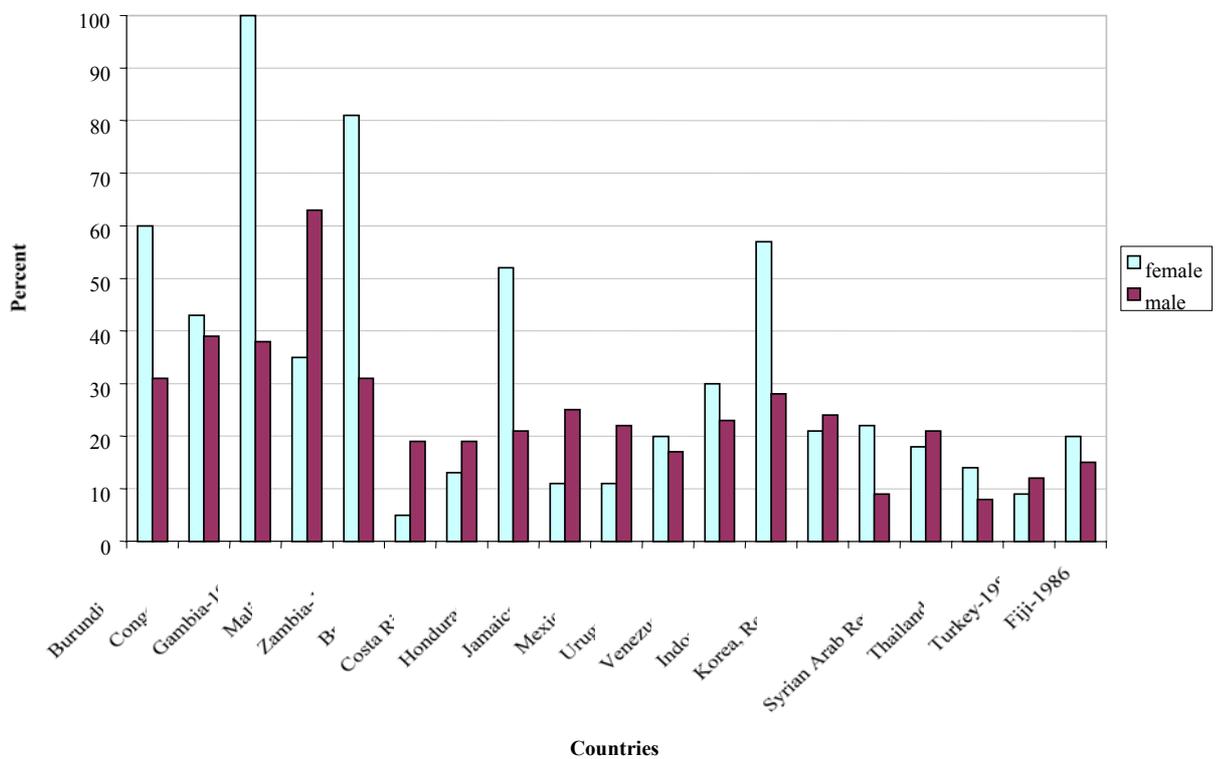
Figure 10 is a reminder that wage employment in the formal sector, where most manufacturing production for exports is recorded, is of small importance relative to the informal sector in many developing countries. This is particularly the case for women. Being constrained by the limited availability of formal employment opportunities for women in many countries, they seek work in the insecure informal sector. This is characterised by low pay, low level of organisation, and limited technology.

Participation levels in the informal sector are difficult to measure given the nature of the work, which can often be home-based. Micro studies indicate a high level of sub-contracting to informal sector workshops and home-based workers in many export product lines. The links between the formal and informal sector under trade liberalisation and expansion need further research.

Eleven out of the nineteen countries in Figure 10 show a higher percentage of the total female manufacturing labour force being active in the informal sector compared to men. For example, all women in the Gambian manufacturing labour force work within the informal sector compared to just under 40 percent of men. In those countries where over 50 percent of women in the manufacturing labour force are in the informal sector, the gap between men's participation and women's is significant, for example in Burundi, Gambia, Zambia, Honduras, and Indonesia.

In eight of the countries in Figure 10, a higher percentage of the male labour force is in the informal sector compared to women. But the differences tend to be smaller, other than in Mali. In certain countries, such as Thailand and Turkey, the informal sector is much less significant for both women and men.

Figure 10: Percentage of manufacturing labour force in the informal sector; selected developing countries, by gender



Source: adapted from UN, 1995: 135

8. GOVERNANCE

8.1 Women in national government

Globally, women formed just over 10 percent of representatives in national government in 1995. Table 8 and Figure 11 show the gradual increase in women's representation in the post-war era. From 1945 to 1995:

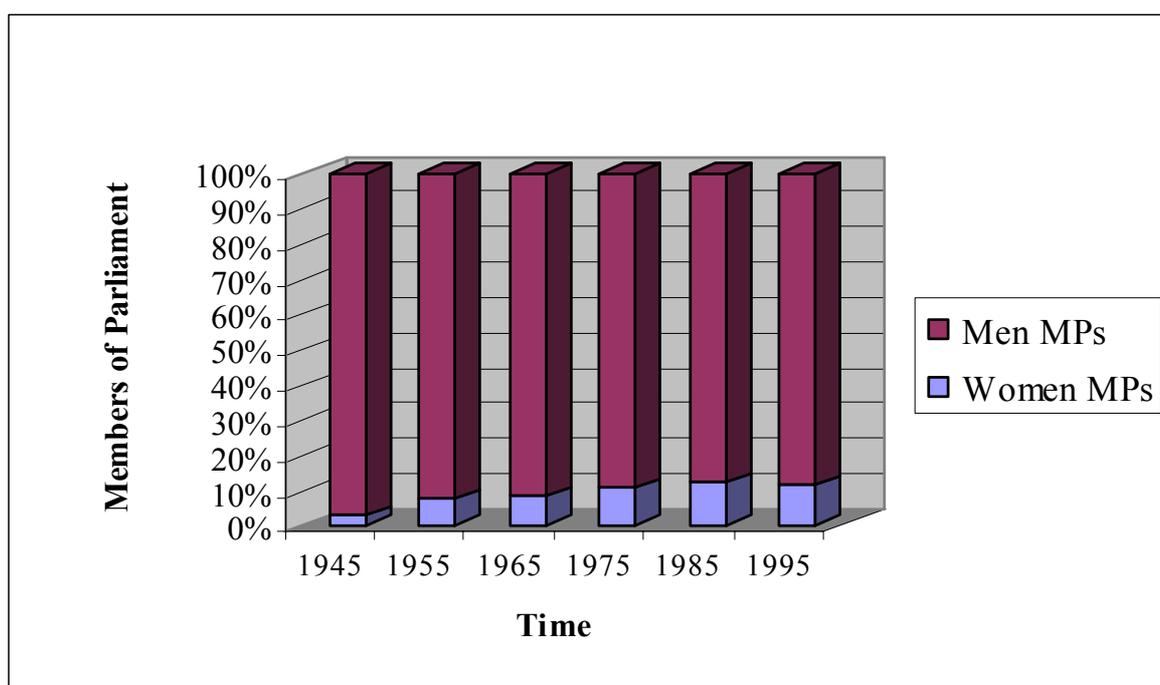
- the number of sovereign states having a Parliament has increased seven-fold;
- the percentage of women representatives in Parliaments or National Assemblies worldwide has increased four-fold;
- the record average level of representation was reached in 1988 with 14.8 percent of National Assemblies composed by women.

Table 8: Women in national parliaments worldwide: 1945-1995

Year	1945	1955	1965	1975	1985	1995
Number of Parliaments	26	61	94	115	136	176
% of women MPs	3.0	7.5	8.1	10.9	12.0	11.6
% of women Senators	2.2	7.7	9.3	10.5	12.7	9.4

Source: adapted from IPU, 1998, Women in Parliaments, History, <http://www.ipu.org/wmn-e/history.htm>

Figure 11: Members of Parliament worldwide, 1945-1995, by gender



Source: adapted from IPU, 1998, Women in Parliaments, History, <http://www.ipu.org/wmn-e/history.htm>

Progress in women's political participation is mixed and varies widely among regions. Women's political representation in parliament has declined in eastern and western Asia, and dropped sharply in Eastern Europe (but improved again in some countries in recent elections). By contrast, women's representation in parliament has increased slightly in Africa and Latin America, and more so in developed regions outside Eastern Europe (UN, 1995).

8.2 Women in local government

Local government contains the highest proportion of women, but this is still significantly lower than men. Table 9 shows women's representation in local government in selected countries, 1990-94, and how it varies widely between countries.

Table 9: Women's representation in local municipalities, 1990-94

Country	Female Council Members %	Female Mayors %
High human development		
France	17	5
New Zealand	35 ^b	13
Korea, Rep. Of	1	--
Mauritius	1	0
Medium human development		
Saint Lucia	41	33
Egypt	1	--
Vietnam	22 ^b	--
Cameroon	8 ^b	18
Low human development		
Kenya	3	--
Zambia	1	6
Yemen	11	--
Mozambique	27	--

Source: adapted from UNDP, 1995:60-62.

Note: ^b Before 1990-94

Table 9 shows that, although they were all classified as 'high human development countries,' Korea and Mauritius had only one percent of council members that were female in 1990-4, while New Zealand had over one third women in local government. Similarly, Zambia had only one percent women in local government, compared to 27 percent in Mozambique, while both are 'low human development' countries (UNDP, 1995).

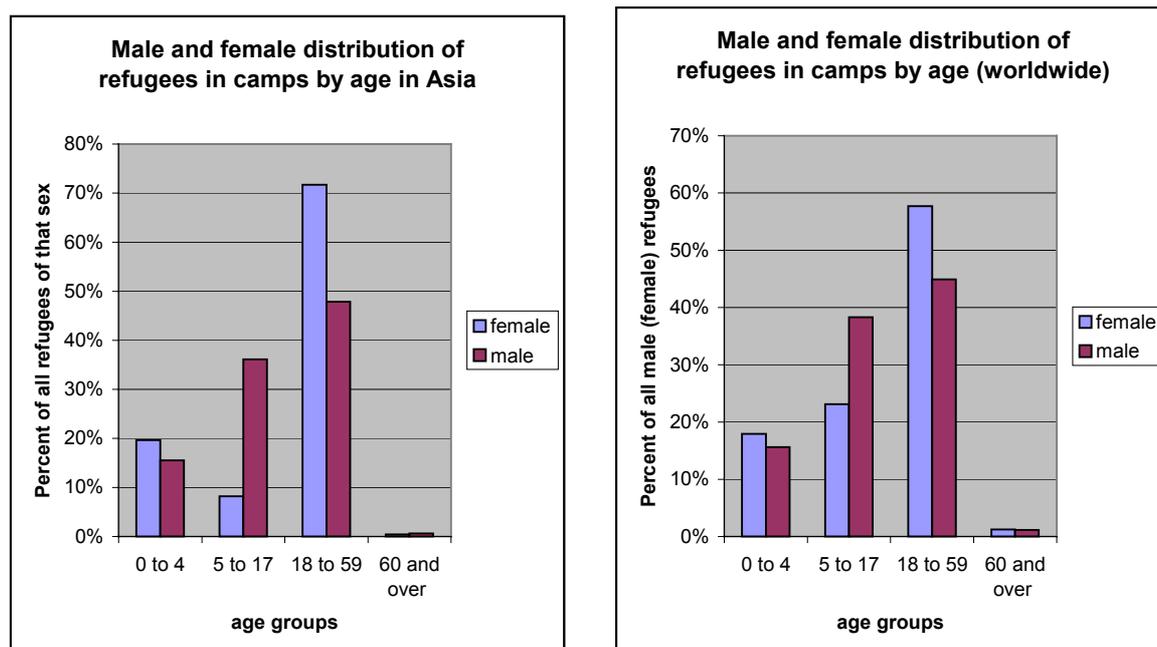
9. CONFLICT AND EMERGENCIES

Enormous increases in refugee numbers across the world have been seen over the past twenty-five years; from 2.8 million in 1976 to 19 million in 1993 (Hedman *et al*, 1996). The most reliable data available is based only on a section of the refugee population - refugees assisted by the United Nations High Commissioner for Refugees (UNHCR):

- women and girls comprise approximately **50 percent** of UNHCR-assisted refugees.
- overall there were 91 women refugees per 100 men refugees assisted by UNHCR
- in Latin America there were 89 women per 100 men.
- in Asia and the Pacific, only 75 women per 100 men.
- in contrast, there were more women than men refugees in Africa, 102 women to 100 men (1993 UNHCR estimates in UN, 1995).

Refugees in UNHCR camps are mainly under 60, but a closer look shows that there are large differences between women and men in comparable age groups (see Figures 12a and 12b). Women refugees are much more likely to fall into the 18-59 age category, which is particularly true in Asia (the continent with the largest total refugee population). For the age group of 5 to 17, the opposite is true (UNHCR, 1998).⁷

Figures 12a and 12b: Male and female distribution of refugees in camps, by age



Source: adapted from UNHCR (1998), Statistical tables

⁷ It should be noted that the highest proportion of the world's refugee population is not in camps.

There is evidence to suggest that women refugees are more vulnerable than their male counterparts at every stage of their flight. In camps women experience sexual and physical abuse, and discrimination in assistance, including in receiving appropriate nutrition and health services (UN, 1995). Data compiled by UNHCR (1993) suggest that the rape of women is a common occurrence of camp life (in UN, 1995).

10. HUMAN RIGHTS

'Most of the world's governments are committed, on paper, to equality for women'
(Seager, 1997:14)

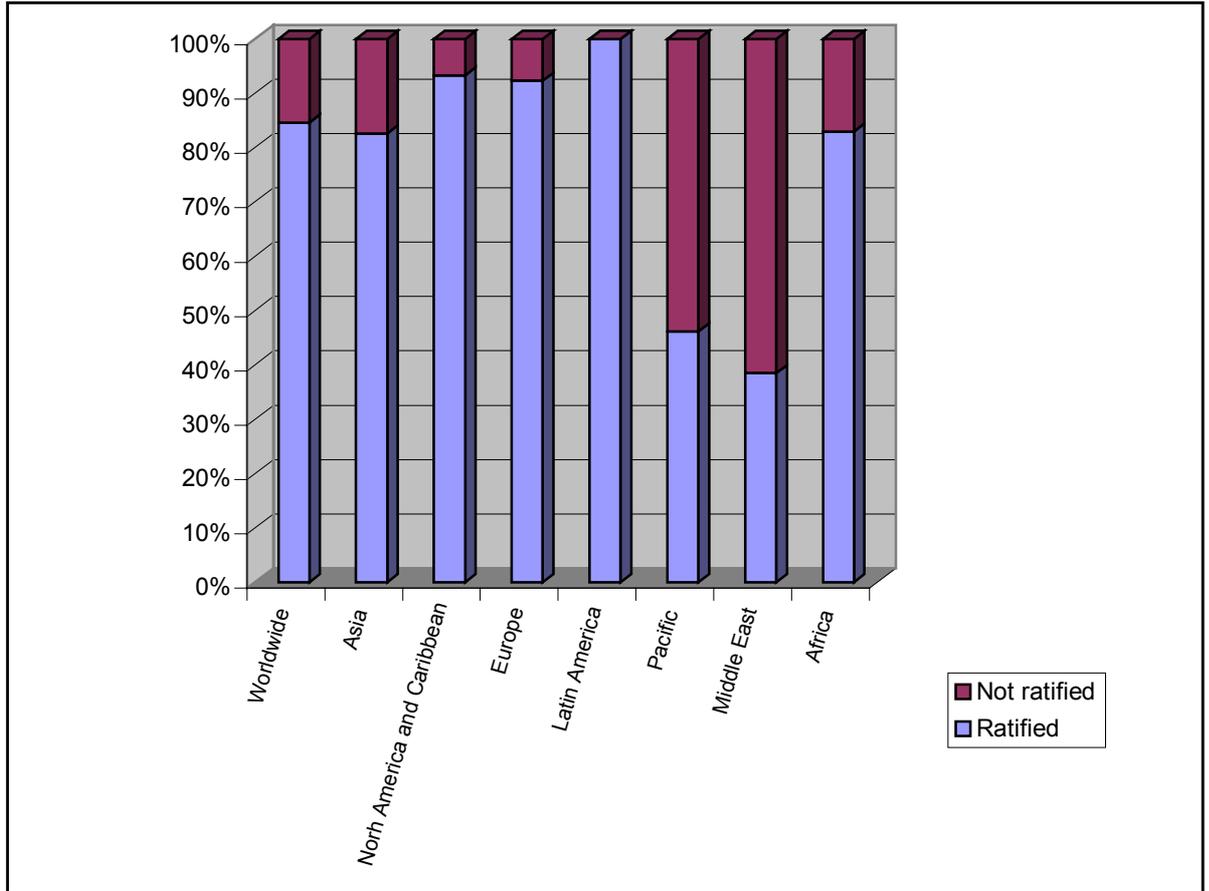
Since the first UN Women's Conference in Mexico (1975) women have continued to build international networks and coalitions to lobby for their gender interests. This has resulted in the formulation and adoption of numerous conventions, of which the Convention on the Elimination of all forms of Discrimination Against Women (Women's Convention) is the most widely known. It aims to shape national policies in all countries towards guaranteeing women equal rights with men in areas such as education, employment, and marriage.

10.1 Women's Convention

Women activists regard the Convention as a powerful tool to continue their struggle against discrimination, even where reservations are made or where states have refused to ratify it. Women's pressure groups can push governments towards attaining these internationally recognised minimum standards (Seager, 1997:104). However, there are some concerns that even where certain countries have fully ratified the Women's Convention this can be a paper exercise alone. To address this, the Committee on the Elimination of all forms of Discrimination Against Women (CEDAW), monitors compliance with the Women's Convention. As yet, women have no right for individual complaint or petition at an international tribunal in the case of violation of the Convention. However, CEDAW is currently working at a draft protocol to ensure this right.

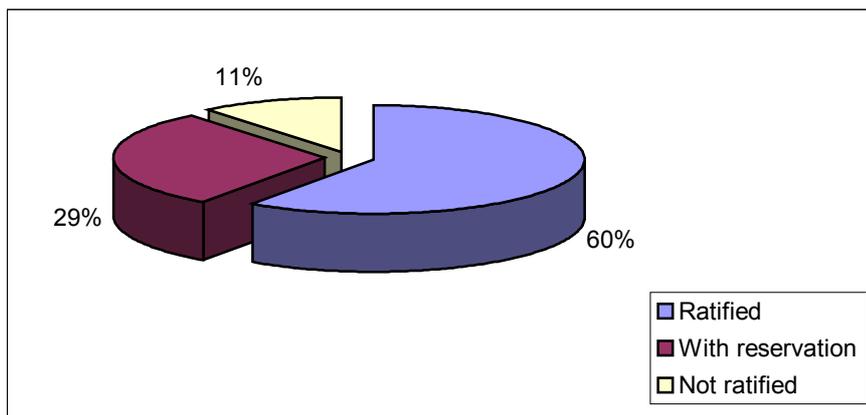
Worldwide, 89 percent of countries have ratified the Women's Convention. Figures 13, 14, and Table 10 demonstrate that the degree of ratification of the Women's Convention varies greatly between regions and more so between countries. Figure 14 shows that 29 percent have ratified, but with reservations.

Figure 13: Percentage of countries which have ratified the Women's Convention by Region, as of May 1997



Source: adapted from IWTC 1998: 126ff

Figure 14: Percentage of countries ratified the Women's Convention worldwide



Source: adapted from PANOS, 1998

All Latin American countries have ratified the Convention, whereas no country in the Middle East has fully adopted it (see Figure 13 and Table 10). Many European countries,

such as the Netherlands, Germany and the United Kingdom have reservations, and the US has failed to ratify at all. Interestingly, ‘young’ states such as South Africa - which have developed new constitutions and legislative systems - have adopted the Convention promptly.

Table 10: Examples of country responses to the Women’s Convention

Region	Ratified	Ratified with reservation	Not ratified
Europe and N. America	Canada	United Kingdom	USA
	Japan	Netherlands	Monaco
L.America and Caribbean	Colombia	Argentina	
	Mexico	Brazil	
Africa	Chad Mali	Morocco Lesotho	Sudan Niger
Asia and Pacific	Cambodia Kazakhstan	India China	Korea (Rep) Afghanistan
Middle East		Iraq Israel	Saudi Arabia Iran

Source: adapted from PANOS 1998

10.2 Gender violence

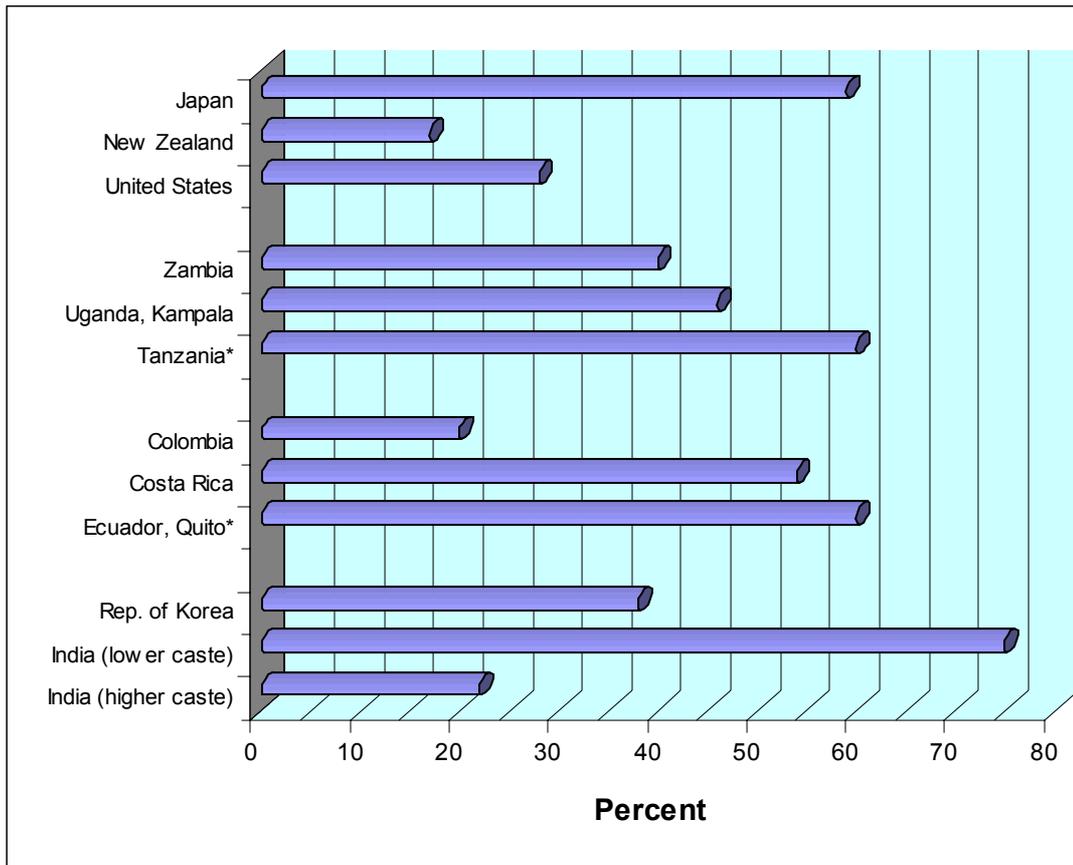
Violence against women is a disturbingly common phenomenon across geographical, religious, ethnic, and class boundaries. Only recently have states recognised the limitations of their legal systems to address this problem. Official figures are scarce, and under reporting is rife, especially when the violence involves another family member. It is necessary that women feel safe to report violence to the police and pursue court cases as a consequence.

Incidence of Domestic violence

‘Domestic violence is a leading cause of injury and death to women worldwide’
(Seager, 1997:26)

Domestic violence is often ignored by the state as a ‘private matter’. Figure 15 and Table 11 demonstrate that significant proportions of women experience sexual assault by their intimate partners. These figures are likely to underestimate the actual incidence of domestic violence. In making comparisons between the countries below it is important, however, to be cautious due to the differing methodologies of these surveys and the particular problems of accurately measuring the incidence of domestic violence.

Figure 15: Survey results on percentage of women who have been physically assaulted by an intimate partner, selected countries



Source: adapted from UN 1995:160, data compiled by L Heise for UN based on national reports and individual studies

*see Table 11 below for full details

Table 11: Survey results on percentage of women who have been physically assaulted by an intimate partner

Developed regions	%
Japan	59
Netherlands	21
New Zealand	17
United States	28
Africa	
Zambia	40
Kenya, Kissi District	42
Uganda, Kampala	46
United Republic of Tanzania, (Dar es Salaam and 3 districts)	60
Latin America and the Caribbean	
Colombia	20
Chile, San Diago	26
Mexico, Mexico City (low to middle income)	34
Costa Rica	54
Ecuador, Quito (low income)	60
Asia and the Pacific	
Rep. of Korea	38
India scheduled (lower caste)	75
Higher caste	22
Sri Lanka, Colombo (low income)	60
Papua New Guinea, urban	58
rural	67

Source: adapted from UN 1995:160, data compiled by L Heise for UN based on national reports and individual studies

National action

Since the Fourth World Conference on Women in Beijing (1995), many countries have started to address domestic violence as an issue for law reforms. However, only a few countries recognise marital rape as a crime (Seager, 1997:107). Table 12 lists the national action in law taken against domestic violence and rape in various countries. But even where countries have issued appropriate legislation, additional support activities, such as the provision of shelters, training of the police and lawyers, as well as financial support are required to encourage women to pursue their rights.

Table 12: National action against domestic violence, 1995

Country	Rape reform law(s) passed	Domestic violence reforms passed
Developed Regions		
Japan	X	X
New Zealand	√	√
United Kingdom	Pending	√
United States	√	√
Africa		
Mali	X	√
Tanzania	√	X
Nigeria	X	X

Latin America and Caribbean		
Costa Rica	X	√
Nicaragua	√	X
Ecuador	Pending	Pending
Asia and Pacific		
Bangladesh	X	√*
Pakistan	X	X
Thailand	√	X

Source: adapted from UN 1995, p 162, selected countries

Note: as 1995 data some 'pending' reforms will have been now implemented, such as in the UK

*No general domestic violence law, but prohibiting dowry harassment and cruelty to women passed

Women's shelters have been opened in a number of countries, although often lacking in official support. There are fewer than ten shelters in Israel, Japan, Brazil, and Bangladesh. In certain Latin American countries, however, there are women's police stations for women to contact if they suffer domestic/sexual violence – this includes Brazil, Colombia, Costa Rica, Ecuador, and Peru (Seager, 1997).

REFERENCES

- ACC/SCN (1992), **Second Report on the World Nutrition Situation**, United Nations Administrative Committee on Coordination/ Sub-Committee on Nutrition, Geneva
- ACC/SCN (1997), **Third Report on the World Nutrition Situation**, United Nations Administrative Committee on Coordination/ Sub-Committee on Nutrition, Geneva
- Anker, R., and Dixon-Mueller, R., 1998, 'Assessing women's economic contribution to development', **World Employment Programme/UNFPA Background Paper for Training in Population, Human Resources and Development Planning**, No.6, ILO, Geneva
- BRIDGE, 1994, 'Annotated bibliography on statistical source methodologies for the collection, analysis and presentation of gender-disaggregated data', **BRIDGE Bibliography**, No.2, IDS, Brighton
- DFID, 1997, **Eliminating World Poverty: A Challenge for the 21st Century**, (DfID White Paper on International Development, UK), Department for International Development, London
- Evans, A., 1992, 'Statistics', in Østergaard, L., 1992, **Gender and Development: A Practical Guide**, Routledge, London
- Hedman, B., Perucci, F., and P. Sundström, 1996, **Engendering Statistics: A Tool for Change**, Statistics Sweden, Stockholm
- IFAD, 1992, **The State of the World Rural Poverty: An Inquiry into its Causes and Consequences**, by Jazairy, I., and Alamgir, M., International Fund for Agricultural Development, Rome
- ILO, 1995, **World Labour Report**, ILO, Geneva
- International Women' Tribute Centre (IWTC), 1998, **Rights of Women - A Guide to the Most Important United Nations Treaties on Women's Human Rights**, IWTC, New York
- IPU, 1998, 'Women in Parliaments', History, <http://www.ipu.org/wmn-e/history.htm>
- Kabeer, N., 1996, 'Agency, well-being and inequality: reflections on the gender dimensions of poverty', **IDS Bulletin**, Vol 27, no.1, Brighton
- Oxaal, Z., with Baden, S., 1996, 'Challenges to women's reproductive health: maternal mortality', **BRIDGE Report** No. 38, Prepared for the Overseas Development Administration, IDS, Brighton
- Panos, 1998, 'Women's health - Using human rights to gain reproductive rights', **Media Briefing** No 32, <http://www.oneworld.org/panos/briefing/brief32.htm>
- Rose, P., and Tembon, M., 1997, 'Do boys and girls benefit equally as enrolments increase? Evidence from two African countries,' Paper presented at the Oxford Conference 1997, 'Education and Geopolitical Change'

- Saito, K., 1994, 'Raising the productivity of women farmers in sub-Saharan Africa', **World Bank Discussion Papers: Africa Technical Department Series**, No.230, The International Bank for Reconstruction and Development/The World Bank, Washington DC.
- Seager, J., 1997, **The State of Women in the World Atlas**, Penguin, London
- Standing, G., 1996, 'Global feminisation through flexible labour: A theme revisited', ILO, Geneva, September 1996, *unpublished*
- Terrell, K., 1992, 'Female-male earning differentials and occupational structure', **International Labour Review**, Vol 131, No 4-5, 1992
- UN, 1995, **The World's Women: Trends and Statistics**, Social Statistics and Indicators Series K, No.12, United Nations, New York
- UNAIDS, 1997, **Report of the Global AIDS Situation**, UNAIDS, Geneva
- UNAIDS, 1998, 'Global HIV/AIDS surveillance', Internet version
- UNDP, 1995, **Human Development Report 1995**, Oxford University Press, Oxford and New York
- UNDP, 1997, **Human Development Report 1997**, Oxford University Press, Oxford and New York
- UNDP, 1998, **Human Development Report 1998**, Oxford University Press, Oxford and New York
- UNESCO, 1995, **World Education Report**, UNESCO, Paris
- UNESCO, 1997, **Statistical Yearbook**, UNESCO and Berman Press, Paris
- UNFPA, 1998, 'The state of the world's population - The new generations'
<http://www.unfpa.org/swp/swpmain.htm>;
- UNHCR, 1998, 'Refugees and others of concern to UNHCR - 1997 Statistical Overview'
<http://www.unhcr.ch/refworld/refbib/refstat/1998/98intro.htm>
- UNICEF, 1999, 'The state of the world's children', <http://www.unicef.org/sowc99/>
- WHO, 1995, **Women's Health: Improve our Health, Improve the World**, Position Paper, World Health Organisation, Geneva
- WHO/UNICEF, 1996, **Revised 1990 Estimates of Maternal Mortality: A New Approach**, WHO/UNICEF, WHO, Geneva
- WHO/World Bank, 1997, 'Maternal health around the world', Poster
- WHO, 1998a, **The World Health Report**, WHO, <http://lynx.who.ch/whr/1998/whr-en.htm>
- WHO, 1998b, 'Global AIDS surveillance - Part I', **Weekly Epidemiological Record**, 73 (48), p373-381

Wood, A., 1991, 'North-south trade and female labour in manufacturing: an asymmetry', **The Journal of Development Studies**, Vol 27, No 2, p168-189

World Bank, 1994, 'A new agenda for women's health and nutrition,' **Development in Practice**, World Bank, Washington, DC

World Bank, 1995, World Development Report: Workers in an Integrating World, World Bank, Oxford University Press