# Country Gender Profile: Republic of Ghana

**Final Report** 

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The Japan International Cooperation Agency (JICA) commissioned M&Y Consultants Co., Ltd. to carry out a study to develop this Country Gender Profile in the Republic of Ghana. The views and analysis contained in the publication therefore do not necessarily represent JICA's views.

#### Summary

# General Situation of Women and Government Policy on Gender

General Situation of Women in Ghana

(1) According to the survey results, female-headed households are less poor compared to male-headed households of equivalent characteristics. However, the proportion of poor female-headed households rose only in the cities in northern Ghana between 1992 and 2006. Greater attention needs to be paid to the regional and urban-rural disparities among female-headed households. In addition, there is a possibility that the most vulnerable groups are those women attached to male-headed households, taking women's limited decision-making power within the households and access to resources such as land and credit into consideration.<sup>-</sup> Attention should also be devoted to the level of poverty among individual members of the households.

- (2) Women's decision-making is usually limited to the social aspects of the family and male members of the family are the key power holders. However, as women's financial contributions and educational levels have increased, women's positions in decision-making have added weight.
- (3) Women's representation in politics and public services is still low at the central level. Women have been generally underrepresented at the district level as well. To tackle the situation, legislation of Affirmative Action is in progress.
- (4) The Domestic Violence and Victim Support Unit was established in the Ghana Police Service in 1998. In 2007, the Domestic Violence Act was approved by Parliament.

#### **Government Policy on Gender**

- (1) The National Gender and Children Policy was developed by the Ministry of Women and Children's Affairs (MOWAC) in 2004 to mainstream gender concerns in the national development process. The National Gender and Children Policy was reviewed in 2011 and based on it, the MOWAC is currently developing a new National Gender Policy. As a conceptual framework of the new Policy, the following seven pillars are set: (1) Women empowerment, livelihoods and productivity, (2) Women's rights and access to justice, (3) Accountable governance, (4) Women's leadership, peace and security, (5) Macroeconomics & trade, (6) Gender roles and relations and (7) Sector-wide gender gaps.
- (2) Article 17 (2) of the 1992 Constitution prohibits discrimination on the ground of gender among other characteristics. Article 12 (2) (human rights regardless of gender among others), Article 22 (property rights of spouses) and Article 27 (women's rights) deal directly with gender issues.
- (3) Since 1985, the government has passed a number of laws that seek to restructure the traditional systems of inheritance such as the Intestate Succession Law in 1985 in order to ensure a fair distribution of a deceased person's property so as to cater more adequately to the otherwise excluded spouse and children.
- (4) Some of the recent achievements to protect women's and children's rights include the criminalization of harmful traditional practices under the Criminal Code Amendment Act in 1994, the criminalization of underage and forced marriage under the Children's Act in 1998, and the passage of the Human Trafficking Act in 2006 and the Domestic Violence Act in 2007.

National Machinery for the Advancement of Women

(1) The MOWAC was established in January 2001 as the national machinery for the advancement of

women in Ghana. The mandate of the MOWAC is to initiate/ formulate policies and promote gender mainstreaming across all sectors that will lead to the achievement of gender equality and empowerment of women, and survival, development and growth of children as well as the protection of the rights of women and children.

- (2) The functions of the MOWAC are: (a) formulation of a gender and child specific development policy framework, guidelines and advocacy strategies, (b) planning and the facilitation of the integration of women and children's policy issues into the National Development Agenda, (c) monitoring and evaluation of programs and projects on women and children, (d) provision of guidelines and advocacy strategies for all Ministries, Departments and Agencies and other development partners for effective gender mainstreaming, (e) provision of the necessary platform and mechanism to implement government's commitments expressed at international fora towards improving the status of women and children, and (f) coordination of all gender-related programs and activities at all levels of development.
- (3) Challenges identified by the MOWAC include a limited office space, budget, number of staff, office facilities and vehicles, inadequate training opportunities for the staff, and lack of public support.
- (4) Gender Desk Officers (GDOs) in line ministries and District Assemblies are expected to work in collaboration with the MOWAC. However, it is pointed out that the capacity of the majority of the GDOs is weak and coordination within the line ministries where a GDO is working is also weak, so that the gender perspectives often fail to be incorporated into the sectoral or district policy formulation.

#### **Current Situation of Gender by Sector**

#### Education

- (1) To close the gender gap in basic education, the Gender Education Strategic Plan (2012-2017) has been developed by the Girl's Education Unit (GEU) and is in the process of finalization.
- (2) The GEU was established in 1997 to improve girls' education. The GEU plays a coordinating role to facilitate, network, influence, focus, plan and evaluate, and to collect and disseminate data and good practices.
- (3) During the last decade, Ghana has made significant improvements in the areas of basic school enrollment both for girls and boys. At the kindergarten and primary education level, Ghana is close to achieving the target of gender equality in enrollment.
- (4) About 90% of pupils at primary school transition to junior high school; however, the completion rate is 70.4% for boys and 63.0% for girls at the junior high school level. Early marriage and teenage pregnancy could be factors contributing to the low completion rate of girls in addition to poverty, parents' attitude of not valuing the importance of education, especially for girls, distance to school and low school quality.
- (5) The gross enrollment ratio at the senior high school level stands at 39.7% for boys and 34.4% for girls. It is pointed out that the efforts to enhance girls' enrollment is mainly concentrated at the basic education level without establishing links with the post-basic education level.
- (6) The adult illiteracy rate stands at 21.7% for males and 34.7% for females. The Non-Formal Education Division of the Ministry of Education has implemented the National Functional Literacy Program since 1992.
- (7) In general, the quality of education in the rural areas is poorer than that in the urban areas. The

recruitment of trained female teachers has a positive effect for promoting girls' education; however, there is a tendency for more trained teachers, especially female teachers, to refuse posting in rural areas.

#### Health

- (1) In 2009, the Health Sector Gender Policy was developed by the Ministry of Health to promote gender mainstreaming in the health sector. The National Adolescent Reproductive Health Policy was also developed in 2000 to address teenage pregnancies, adolescent sexuality and early marriage.
- (2) Although maternal health care has improved over the past 20 years, the maternal mortality ratio is still higher than the target set by the government. In 2008 the government declared maternal mortality a national emergency and ensured pregnant women free access to maternal health care.
- (3) There is a great desire among married women to control the timing and number of births. However, only 24% of married women are currently using some method of contraception, while 35% of married women are not using contraception although they do not want any more children or want to wait two or more years before having another child.
- (4) Infant and under-five mortality levels in rural areas are consistently higher than those in urban areas. Mortality among children of mothers with less/ no education is substantially higher than mortality among children of mothers with better education.
- (5) Gender issues are vital in tackling the HIV/AIDS epidemic, especially in cases where socio-economic and cultural barriers hinder women from asserting their reproductive rights. In this context, the National HIV&AIDS Strategic Plan (2011-2015) places an emphasis on mainstreaming gender among others in the national response to HIV.

# Agriculture and Rural Development

- (1) In Ghana, about 52% of the total adult female population (70% of women in rural areas) is engaged in agriculture, with the majority being engaged in food production. Women account for about 70% of total food production in Ghana.
- (2) The Gender and Agricultural Development Strategy was developed by the Ministry of Food and Agriculture (MOFA) with the overall objective to address sustainable agriculture development issues through promoting gender equity concerns and addressing the diverse rural needs within the agricultural sector as a means to enhance national development.
- (3) The Women in Agricultural Development Directorate was established in the MOFA to promote gender mainstreaming into all agricultural policies, programs and projects, among other objectives.
- (4) There is a clear division of labor in farming communities in Ghana in terms of tasks performed and their participation in different farming activities. In general, women are more involved in food crop production whereas men are more engaged in production of cash crops. Women play major roles in processing and marketing agricultural produce. In addition, women in rural areas are obliged to carry out a large number of reproductive tasks. As a result, women carry a heavy load compared to men.
- (5) Female extension agents (officers) serve a higher proportion of female farmers than male extension agents; however, they represent only 20% of the total number of extension agents.
- (6) The majority of women in agriculture have limited access to land, labor and capital due to cultural and institutional factors.

#### **Employment and Economic Activities**

- (1) The 1992 Constitution as well as the Labour Act of 2003 ensures protection of the rights of working women.
- (2) It seems that the gap between men and women in occupation has decreased; however, overall, in many organizations women remain in supportive positions that are not central to the main operations of these institutions.
- (3) Women-owned businesses, both in formal and informal sectors, are not receiving sufficient financial and institutional support to expand their businesses. Women who operate small-scale businesses need networking with other businesswomen, management and leadership training, financial training, information on accessing markets, information on use of technology and so on.
- (4) As of 2005, Ghana's formal and semiformal microfinance institutions were reported to reach some 1.5 million clients, members and depositors. The clients of microfinance are predominantly women in both rural and urban centers. The effect of cash is more powerful for women who operate businesses with higher profit than those who operate subsistence-level enterprises. Also, women increase their profits when assistance is given in-kind such as equipment and materials, because women, especially those with lower profits, appear to spend the cash on household expenditures. If access to microfinance is necessary to foster business development, especially among poor, subsistence-level female enterprises, microfinance institutions may be suggested to adopt a similar strategy of providing assistance in-kind.

#### Gender Mainstreaming in JICA's Projects

The major findings from the review of JICA's projects are as follows:

- (1) When promoting the gender mainstreaming more certainly at all levels of a project, it is vital in the planning stage of a project to incorporate the gender perspectives into the planning of a project, assess the impact of the project on men and women respectively, prepare measures to mitigate the negative impacts of the projects if necessary, and share the plan among the stakeholders of the project.
- (2) There are good practices of incorporation of the gender perspectives into the projects.
- (3) Ghanaian counterparts are keen to incorporate the gender perspectives into JICA's projects. It may have contributed to making the JICA's projects more gender-sensitive.

Gender Issues and Mainstreaming Gender When Planning Future Interventions in Ghana

- (1) Women's economic empowerment and empowerment through education will contribute to promoting women's participation in decision-making in a household. Support for women's empowerment is of significant importance.
- (2) When any program/ project is planned, it is necessary to conduct gender analysis in the respective areas of interventions so as to identify the different roles played by men and women and gender-based disparities in access to and control over resources. The findings of the gender analysis might be incorporated into the Project Design Matrix (log frame) as indicators or specific activities to respond to the needs of women and men.
- (3) There is a possibility that Gender Desk Officers could be gender resource persons to the projects implemented at the regional and district levels.

# List of Abbreviations and Acronyms

AfDB	African Development Bank
ANC	Antenatal care
CIDA	Canadian International Development Agency
CSO	Civil Society Organization
DANIDA	Danish International Development Assistance
DFID	Department for International Development
DOVVSU	Domestic Violence and Victim Support Unit
DV	Domestic Violence
ESP	Education Strategic Plan
EU	European Union
FAO	Food and Agriculture Organization
FASDEP	Food and Agriculture Development Policy
FBO	Farmer-based Organization
FCUBE	Free Compulsory Universal Basic Education
GADS	Gender and Agricultural Development Strategy
GDHS	Ghana Demographic and Health Survey
GDO	Gender Desk Officer
GDP	Gross Domestic Product
GEO	Girl' Education Officers
GESP	Gender Education Strategic Plan
GEU	Girl' Education Unit
GHAMFIN	Ghana Micro Finance Institutions Network
GHANAP 1325	Ghana National Action Plan For the Implementation of the United Nations
	Security Council Resolution 1325
GHS	Ghana Health Service
GLSS 5	Ghana Living Standards Survey Report of the Fifth Round
GNI	Gross National Income
GPRS	Ghana Poverty Reduction Strategy/ Growth and Poverty Reduction Strategy
GRB	Gender Responsive Budgeting
GSGDA	Ghana Shared Growth and Development Agenda
GSS	Ghana Statistical Service
HIV/ AIDS	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome
JHS	Junior High School
JICA	Japan International Cooperation Agency
m	million
MDA	Ministries, Departments and Agency
MDG	Millennium Development Goal
MOFA	Ministry of Food and Agriculture
MOU	Memorandum of Understanding

MOWAC	Ministry of Women and Children's Affairs
NA	Not Available
NBSSI	National Board for Small Scale Industries
NGO	Non-governmental Organization
NDPC	National Development Planning Commission
NHIS	National Health Insurance Scheme
ODA	Official Development Assistance
PMTCT	Project for Strengthening Operational Capacity of Prevention of
	Mother-to-Child Transmission of HIV
SIP	Strategic Implementation Plan
SMTDP	Sector Medium Term Development Plan
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNW	United Nations Women
USAID	United States Agency for International Development
USD	United States Dollar
WFP	World Food Programme
WHO	World Health Organization
WIAD	Women in Agricultural Development



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#### 1. Basic Profiles

#### 1.1 Socio-Economic Profile

International Development Indicators	Year	Hur Develo Inc Value	pment	Gender Develo Inc Value	pment	Empo	ender werment surement	Geno	Ind	equality ex Rank	Reference
	2011	0.541	135	NA	NA		NA	0.59		122	(1)
	2005	0.553	135	0.549	117		NA	0.5	N/		(1)
	2005	0.555	155	0.547	117		1 1/1		142	1	(2)
Demographic			Рори	ulation			Urban	Populati	on		
Indicators	Year	т		% of f	emale	% o	f urban	%	of f	emale	Reference
		То	tai	popu	lation	рор	ulation	r I	opul	ation	
	2010	24,65	8,823	51.	2%	5	0.9%		N	A	(3)
	2006	22.2 n	nillion	51.	5%		NA		N	A	(4)
		Popu	lation			Hous	eholds by	head of	hous	eholds	
	Year		h rate	Media	an age		e-headed			headed	Reference
	2010	2.49	% <sup>(7)</sup>	2	0		5.3%	1.01	34.7		(3)(7)
	2006		% <sup>(7)</sup>	Ň			0.5%		29.5		(4)(7)
											(1)(1)
Economic Indicators	Year	GNI p capit		DP growth rate	Infla	ation	Gini in	dex	OD.	A/ GNI	Reference
	2011	USD 2,	392	14.4%	8.	7%	NA		5.3%	<sup>(7)</sup> ('10)	(5)(7)
	2006	USD 8	50	6.4% <sup>(7)</sup>	10.	9%	42.8	7)	6.	1% <sup>(7)</sup>	(6)(7)
Public expenditure by sector/ Total	Year	Healt	h	Education	and S	oyment Social fare	Agricul	ture	De	efense	Reference
government	2012	13.5%	6	22.5%	0.3	3%	2.0%	)	2	2.0%	(8)
expenditure	2005	10.0%	6	NA	N	A	NA			2.6%	(7)
Sectoral Share	Year	Agric		Indu			rvices				Reference
of GDP	2011	25.		25.			8.5%				(5)
	2006	30.	4%	20.	8%	4	8.8%				(6)
Labor Indicators	Year	Male		cipation rate (		Unemployment rate 15 years and older) ale Female		le	mir	ominal nimum e (Ghc)	Reference
	2010	71.6%	(7)	66.8% (7)	5.49	% <sup>(3)</sup>	6.3%	(3)		<sup>5)</sup> (2011)	(3)(5)(7)
	2006	71.0%	(7)	66.6% <sup>(7)</sup>	3.59	% <sup>(4)</sup>	3.6%	(4)	1	.6 <sup>(6)</sup>	(4)(6)(7)
				1							
Employment	Year	Agric		Indu			rvices	_		Referenc	
by Economic	2010	41.		15.			3.0%	(	Calcu	lation base	ed on (3)
Activity	2006	57.	2%	13.	6%	2	9.1%			(7)	
Access to		Dore	one havin	g mobile ph	ones	Dor	sons using	intorna	facil	litios	
Mobile phone/	Year	Url		Ru			sons using Irban		Ru		Reference
Internet	Teal	Male	Female	Male	Female	Male	Female	e Ma		Female	Kelefelice
facility	2010	68.1%	59.2%	36.1%	23.4%	17.0%	8.9%	2.9		1.4%	(3)
	2010	00.170	57.270	30.170	23.470	17.070	0.770	2.)	/0	1.470	(3)
Global Gender						Ran	k in 👘	2012		2006	Reference
Gap Index	Overal	ll (Rank/ o	ut of the t	otal number	otal number of countries)			1/135	5	58/115	
				nd Opport		,		26		5	1
				participati		le value		2		3	(9)(10)
			quality between women and men for similar work 8 NA								
				earned inco				30		4	1

(1) UNDP, Human Development Report 2011 (2) UNDP Ghana, Ghana Human Development Report 2007

(3) Ghana Statistical Service (2012). 2010 Population and Housing Census - Summary Report of Final Results"

(4) Ghana Statistical Service (2008). Ghana Living Standard Survey Report of the Fifth Round (GLSS 5)

(5) Ghana Statistical Service (2012). Ghana's Economic Performance 2011

(6) Ghana Statistical Service (2010). Ghana's Economic Performance 2009

(7) The World Bank Website (World Development Indicators), accessed 27 December 2012

(8) Calculation based on the Ministry of Finance and Economic Planning (2011), "The 2012 Budget Statement and Economic Policy of the Government of Ghana"

(9) World Economic Forum (2012). "The Global Gender Gap Report 2012"

(10) World Economic Forum (2006). "The Global Gender Gap Report 2006"

#### **1.2 Education Profile**

Education System				(2 years of kin ars of senior hig				Reference
Adult Literacy	Year	Total		Male	Female	;		Reference
Rate	2010	71.5%		78.3%	65.3%			(11)
	2006	50.9%		62.7%	40.3%			(12)
Kindergarten		Gros	ss Enrolment	Ratio	9	6 of Enrolme	nt	
8	Year		Total		Boy		Girl	Reference
	2011		99.4%		50.3%		49.7%	(13)
	2005		77.7%		51.2%		48.8%	(14)
Primary		Cre	ss enrolmen		N	et enrolment		
Education	Year	Total	Boy	Girl	Total	Boy	Girl	Reference
Education	2011	96.5%	97.9%	94.9%	81.7%	82.5%	80.8%	(13)
	2005	86.6%	88.7%	84.6%	69.0%	69.8%	68.1%	(14)
			Completion r		0,10,10	0,10,10	001170	
	Year	Total	Boy	Girl				Reference
	2011	93.7%	95.4%	91.9%				(13)
	2005	74.8%	77.8%	71.8%				(14)
Junion High		Cao	ss enrolmen	t notio	N	et enrolment	unta	
Junior High School	Year	Total	Male	Female	Total	Male	Female	Reference
Education	2011	80.6%	83.0%	78.1%	46.1%	46.9%	45.3%	(13)
Education	2011	73.3%	78.5%	67.9%	41.6%	41.5%	41.7%	(13)
	2005		Completion r		41.070	41.570	41.770	
	Year	Total	Male	Female				Reference
	2011	66.8%	70.4%	63.0%				(13)
	2005	63.4%	72.4%	53.9%				(14)
		~				-		
Senior High	Year		ss enrolmen			et enrolment		Reference
School Education	2011	Total	Male	Female	Total	Male	Female	(12)
Education	2011 2005	37.1%	39.7% 28.6%	34.4%	NA NA	NA NA	NA NA	(13) (14)
	2005	23.370	20.070	22.470	INA	INA	INA	(14)
Technical and	Year	Enrolmen	t in Technica	al and Vocationa	l Education (n	0.)		Reference
Vocational	Tear	Total		Male	Female			Reference
Education	2011	79,986		,088 (62.6%)	29,898 (37.			(13)
	2005	31,466	15	,766 (50.1%)	15,700 (49.	9%)		(14)
Collages of	Veen		Enrolment in	Colleges of Ed	ucation			Defense
Education	Year	Total		Male	Female			Reference
(Teacher	2011	28,200	16	,432 (58.3%)	11,768 (41.	7%)		(13)
Training)	2005	24,774	13	,227 (53.4%)	11,547 (46.	6%)		(14)
Tertiary		Enrol	nent in Poly	technics	No. of Stud	ents in Public	Universities	
Education	Year	Total	Male	Female	Total	Male	Female	Reference
	2000		30,519	13,163		72,656	34,984	(15)
	2009	43,682	(69.9%)	(30.1%)	107,640	(67.5%)	(32.5%)	(15)
					D 1 '		-	
Global Gender Gap Index	F.J.	tional Attain	nont		Rank in	2012	2006	Reference
Cap muex		tional Attain		mala value		113/135	94/115	-
		female litera		enrolment over	male value	112	99	(16)(17)
				el enrolment over		112	94	
						112	94	-
Ratio: female gross tertiary level enrolment over male value     117     98								

(11) Ghana Statistical Service (2012). "2010 Population and Housing Census – Summary Report of Final Results"

(12) Ghana Statistical Service (2008). "Ghana Living Standard Survey Report of the Fifth Round (GLSS 5)"

(13) Data of 2011/2012 academic year from the Education Management Information System (EMIS), Ministry of Education

(14) Data of 2005/2006 academic year, ibid

(15) Data of 2009/2010 academic year, ibid

(16) World Economic Forum (2012). "The Global Gender Gap Report 2012"(17) World Economic Forum (2006). "The Global Gender Gap Report 2006"

#### 1.3 Health Profile

	Life		Total			Mala	Eamola				Deference
	Life Expectancy at	2009	Total 60			Male 57		;			Reference (18)
Health Workforce         Year         Doctor to population ratio         Nurse to population ratio         Reference 971           2009         11,929         971         (20)           Reproductive Health         Year         Maternal mortality ratio         Total fertility rate prevalence         At least one antental visit         Reference (20)           2010         350/100,000         4.2         23.5% (2008)         90.1% (2008)         (18)(21)           2005         540/100,000         4.1         25.2% (2003)         90% (2003)         (19)           Year         Births attended personnel         Maternal anemia rate         Age at first marriage (per 1,000)         Adolescent fertility rate         Reference (per 1,000)           2010         54.7% (2008)         70% ('08)         '20)         NA (male) 21.1 (female)         70 (2006) <sup>(21)</sup> (21)(23)           2005         47% (2003)         NA         58         49         (23)           (per 1,000)         Year         Total         Male         Female         Reference (23)           2005         68         NA         NA         NA         (19)           Under-five         Year         Total         Male         Female         Reference           2005		-									
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	Ditti	2005	51			50	50				(1))
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	Health	Year	Docto	r to po	pulation	n ratio	Nurse	e to pop	ulation	n ratio	Reference
2005         17,899         1,508         1-1           Reproductive Health         Year         Maternal mortality ratio         Total fertility rate mortality ratio         Contraceptive antenatal visit 2010         Reference antenatal visit 2010         Reference antenatal visit 2010         Reference antenatal visit 2010         Reference antenatal visit 2010         Reference (per 1.000)           Year         Births attended by skilled health personnel         Maternal anemia rate         Age at first marriage         Adolescent (per 1.000)         Reference (per 1.000)           2010         54.7% (2008) <sup>(21)</sup> 70% ('08) <sup>(23)</sup> NA (male) 19.8 (female) <sup>(23)</sup> 70 (2006) <sup>(21)</sup> (21)(23)           2005         47% (2003)         NA         25.4 (male) 21.1 (female) <sup>(22)</sup> 74 (2001)         (19)(22)           Infant Mortality Rate (per 1.000)         Year         Total         Male         Female         Reference (23)           2005         68         NA         NA         (19)           Under-five Mortality Rate (per 1.000)         Year         Total         Male         Female         Reference (23)           2005         112         NA         NA         NA         (19)           Immunization (2005         2005         81%         99%         94%         94%	Workforce	2009		11,	929			97	71		(20)
Health         Year         montality ratio         Total fertility rate         prevalence         antenatal visit         Reference           2010         350/100,000         4.2         23.5% (2003)         90.1% (2008) <sup>(21)</sup> (18)(21)           2005         540/100,000         4.1         25.2% (2003)         90.1% (2008) <sup>(21)</sup> (18)(21)           2005         540/100,000         4.1         25.2% (2003)         90% (2003)         (19)           Year         Births attended by skilled health personnel         Maternal anemia rate         Age at first marriage         Adolescent (per 1,000)         Reference           2010         54.7% (2008) <sup>(21)</sup> 70% (08) <sup>(22)</sup> NA (male)         70 (2006) <sup>(21)</sup> (21)(23)           2005         47% (2003)         NA         25.4 (male)         74 (2011)         (19)(22)           Infant Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           Oots         112         NA         NA         54         (23)         (19)           Under-five Mortality Rate (per 1,000)         Year         Total         Male		2005		17,	899			1,5	508		(20)
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$		Year		, , , , , , , , , , , , , , , , , , , ,		fertility rate					Reference
Year         Births attended by skilled health personnel         Maternal anemia rate         Age at first marriage         Adolescent fertility rate (per 1,000)         Reference           2010         54.7% (2008) <sup>(21)</sup> 70% ('08) <sup>(23)</sup> NA (male) 19.8 (female) <sup>(22)</sup> 2005         70 (2006) <sup>(21)</sup> (21)(23)           2005         47% (2003)         NA         25.4 (male) 21.1 (female) <sup>(22)</sup> 74 (2001)         (19)(22)           Infant Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           2005         68         NA         NA         (19)         (19)         (19)           Under-five Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           2005         112         NA         NA         (19)         (19)           Under-five Mortality Rate (2005         112         NA         NA         (19)           Immunization Coverage         Year         Measles         DPT3         BCG <sup>(21)</sup> Polio <sup>(21)</sup> HepB3         Hib3         Reference           2010         14.3%         28.6%         NA         NA         (19)         (19)           Nutrition         Year         Access to safe water <td></td> <td>2010</td> <td>350/ 100,0</td> <td>000</td> <td></td> <td>4.2</td> <td>23.5% (200</td> <td>8) (21)</td> <td>90.19</td> <td>% (2008) (21)</td> <td>(18)(21)</td>		2010	350/ 100,0	000		4.2	23.5% (200	8) (21)	90.19	% (2008) (21)	(18)(21)
Year         by skilled health personnel         Maternal anemia rate         Age at first marriage         fertility rate (per 1.000)         Reference           2010         54.7% (2008) <sup>(21)</sup> 70% ('08) <sup>(23)</sup> NA (male) 19.8 (female) <sup>(23)</sup> 70 (2006) <sup>(21)</sup> (21)(23)           2005         47% (2003)         NA         25.4 (male) 21.1 (female) <sup>(22)</sup> 74 (2001)         (19)(22)           Infant Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           2005         68         NA         NA         NA         (23)           (per 1,000)         2005         68         NA         NA         (19)           Under-five Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           2005         112         NA         NA         (19)         (19)         (19)           Immunization (1-year-olds)         Year         Meales         DPT3         BCG <sup>(21)</sup> Polio <sup>(21)</sup> HepB3         Hib3         Reference           2010         93%         94%         99%         85%         84%         NA         (19)           Nutrition         Year         Underweight         Stunte		2005	540/ 100,0	000		4.1	25.2% (20	03)	90	0% (2003)	(19)
$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		Year	by skilled h	ealth	Mate				fei	rtility rate	Reference
$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		2010	54.7% (2008	3) <sup>(21)</sup>	709	% ('08) <sup>(23)</sup>	19.8 (femal	e) <sup>(23)</sup>	70	(2006) <sup>(21)</sup>	(21)(23)
Mortality Rate (per 1,000)         2008         NA         58         49         (123)           Under-five Mortality Rate (per 1,000)         2005         68         NA         NA         NA         (19)           Under-five Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           2008         NA         93         76         (23)         (19)           Immunization Coverage         2005         112         NA         NA         (19)           Immunization         Year         Measles         DPT3         BCG <sup>(21)</sup> Polio <sup>(21)</sup> HepB3         Hib3         Reference           2010         93%         94%         99%         94%         94%         94%         (18)(21)           Nutrition         Year         Underweight         Stunted         Iodine deficiency         Oral rehydration therapy use rate         Reference           2010         14.3%         28.6%         NA         NA         (19)         (18)(23)           2003         18.8%         35.6%         NA         NA         (18)         (200)           2010         86%         14%         (18)         (18)         (204)         88		2005	47% (200	3)		NA			7	4 (2001)	(19)(22)
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	Infant	Year	Total			Male	Female	;			Reference
Under-five Mortality Rate (per 1,000)         Year         Total         Male         Female         Reference           2008         NA         93         76         (23)           2005         112         NA         NA         (19)           Immunization Coverage         Year         Measles         DPT3         BCG <sup>(21)</sup> Polio <sup>(21)</sup> HepB3         Hib3         Reference           2010         93%         94%         99%         94%         94%         (18)(21)           1/-year-olds)         2005         83%         84%         99%         85%         84%         NA         (19)(21)           Nutrition         Year         Underweight         Stunted         Iodine deficiency         Oral rehydration therapy use rate         Reference           2010         14.3%         28.6%         NA         51.9% <sup>(23)</sup> (18)(23)           2003         18.8%         35.6%         NA         NA         (19)           Access to Safe         Year         Access to safe water         Access to improved sanitation         Reference           2010         86%         14%         (18)         (18)         (18)         (19)           HIV/AIDS         Yea	Mortality Rate	2008	NA			58	49				
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	(per 1,000)	2005	68			NA	NA				(19)
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	TT 1 C	37	T ( 1	_		N/ 1	F 1	_			DC
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$								;			
Immunization Coverage (1-year-olds)YearMeaslesDPT3BCG $^{(21)}$ Polio $^{(21)}$ HepB3Hib3Reference201093%94%99%94%94%94%(18)(21)(1-year-olds)200583%84%99%85%84%NA(19)(21)NutritionYearUnderweightStuntedIodine deficiencyOral rehydration therapy use rateReference201014.3% (2005-2011) (2005-2011)28.6% (2005-2011)NA51.9% $^{(23)}$ (18)(23)200318.8%35.6%NANA(19)Access to Safe Water and SanitationYearAccess to safe waterAccess to improved sanitation 14%Reference201086%14%(18)200488% (Urban), 64% (Rural)27% (Urban), 11% (Rural)(19)HIV/AIDSYearHIV Prevalence among pregnant women attending ANC clinicsPrevalence of HIV among adults aged 15 to 49 (%)Reference20092.9% $^{(20)}$ 1.8 (1.6 - 2.0) $^{(21)}$ (20)(21)20052.7% $^{(20)}$ 2.0 (1.8 - 2.2) $^{(21)}$ (20)(21)	•						1				
Coverage (1-year-olds) $2010$ $93\%$ $94\%$ $99\%$ $94\%$ $94\%$ $94\%$ $18)(21)$ Nutrition         Year         Underweight         Stunted         Iodine deficiency         Oral rehydration therapy use rate         Reference $2010$ $14.3\%$ $28.6\%$ NA $51.9\%^{(23)}$ $(18)(23)$ $2003$ $18.8\%$ $35.6\%$ NA         NA $(19)$ Access to Safe         Year         Access to safe water         Access to improved sanitation         Reference $2010$ $86\%$ $14\%$ $(18)$ $(18)(23)$ $2003$ $18.8\%$ $35.6\%$ NA         NA $(19)$ Access to Safe         Year         Access to safe water         Access to improved sanitation         Reference $2010$ $86\%$ $14\%$ $(18)$ $(19)$ HIV/AIDS         Year         HIV Prevalence among pregnant women attending ANC clinics         Prevalence of HIV among adults aged $15$ Reference $2009$ $2.9\%^{(20)}$ $1.8$ $(1.6 - 2.0)^{(21)}$ $(20)(21)$ $2005$	(per 1,000)	2005	112			INA	INA				(1))
(1-year-olds) $2005$ $83\%$ $84\%$ $99\%$ $85\%$ $84\%$ $NA$ $(19)(21)$ Nutrition       Year       Underweight       Stunted       Iodine deficiency       Oral rehydration therapy use rate       Reference $2010$ $14.3\%$ $28.6\%$ NA $51.9\%^{(23)}$ $(18)(23)$ $2003$ $18.8\%$ $35.6\%$ NA       NA $(19)$ Access to Safe       Year       Access to safe water       Access to improved sanitation       Reference $2010$ $86\%$ $14\%$ $(18)$ $(19)$ Access to Safe       Year       Access to safe water       Access to improved sanitation       Reference $2010$ $86\%$ $14\%$ $(18)$ $(19)$ HIV/AIDS       Year       HIV Prevalence among pregnant women attending ANC clinics       Prevalence of HIV among adults aged $15$ to $49$ (%)       Reference $2009$ $2.9\%^{(20)}$ $1.8$ ( $1.6$ - $2.0$ ) ( $^{(21)}$ $(20)(21)$ $(20)(21)$ $2005$ $2.7\%^{(20)}$ $2.0$ ( $1.8$ - $2.2$ ) ( $^{(21)}$ $(20)(21)$	Immunization	Year	Measles	DF	PT3	BCG <sup>(21)</sup>	Polio <sup>(21)</sup>	Hep	bB3	Hib3	Reference
NutritionYearUnderweightStuntedIodine deficiencyOral rehydration therapy use rateReference $2010$ $14.3\%$ $28.6\%$ NA $51.9\%^{(23)}$ $(18)(23)$ $2003$ $18.8\%$ $35.6\%$ NANA $(19)$ Access to SafeYearAccess to safe waterAccess to improved sanitationReference $2010$ $86\%$ $14\%$ $(18)$ $2004$ $86\%$ $14\%$ $(18)$ $2004$ $88\%$ (Urban), $64\%$ (Rural) $27\%$ (Urban), $11\%$ (Rural) $(19)$ HIV/AIDSYearHIV Prevalence among pregnant women attending ANC clinicsPrevalence of HIV among adults aged $1.5$ to $49$ (%)Reference $2009$ $2.9\%^{(20)}$ $1.8$ ( $1.6 - 2.0$ ) ( $^{(21)}$ $(20)(21)$ $2005$ $2.7\%^{(20)}$ $2.0$ ( $1.8 - 2.2$ ) ( $^{(21)}$ $(20)(21)$		2010	93%	94	1%	99%	94%	94	.%	94%	(18)(21)
Year         Underweight         Stunted         Iodine deficiency         therapy use rate         Reference           2010         14.3%         28.6%         NA         51.9% <sup>(23)</sup> (18)(23)           2003         18.8%         35.6%         NA         NA         (19)           Access to Safe         Year         Access to safe water         Access to improved sanitation         Reference           2010         86%         14%         (18)           2004         88% (Urban), 64% (Rural)         27% (Urban), 11% (Rural)         (19)           HIV/AIDS         Year         HIV Prevalence among pregnant women attending ANC clinics         Prevalence of HIV among adults aged 15 to 49 (%)         Reference           2009         2.9% <sup>(20)</sup> 1.8 (1.6 - 2.0) <sup>(21)</sup> (20)(21)         (20)(21)	(1-year-olds)	2005	83%	84	1%	99%	85%	84	.%	NA	(19)(21)
$2010$ $(2005-2011)$ $(2005-2011)$ NA $51.9\%^{1.07}$ $(18)(23)$ $2003$ $18.8\%$ $35.6\%$ NA       NA       (19)         Access to Safe       Year       Access to safe water       Access to improved sanitation       Reference         Water and $2010$ $86\%$ $14\%$ (18) $2004$ $88\%$ (Urban), $64\%$ (Rural) $27\%$ (Urban), $11\%$ (Rural)       (19)         HIV/AIDS       Year       HIV Prevalence among pregnant women attending ANC clinics       Prevalence of HIV among adults aged $15$ to $49$ (%)       Reference $2009$ $2.9\%$ ( $^{20}$ ) $1.8$ ( $1.6 - 2.0$ ) ( $^{21}$ )       ( $20)(21$ ) $2005$ $2.7\%$ ( $^{20}$ ) $2.0$ ( $1.8 - 2.2$ ) ( $^{21}$ )       ( $20)(21$ )	Nutrition	Year	Underwei	ght		Stunted	Iodine defic	iency			Reference
Access to Safe Water and SanitationYearAccess to safe water $2010$ Access to improved sanitationReference (18) $2010$ $86\%$ $14\%$ (18) $2004$ $88\%$ (Urban), $64\%$ (Rural) $27\%$ (Urban), $11\%$ (Rural)(19)HIV/AIDSYearHIV Prevalence among pregnant women attending ANC clinicsPrevalence of HIV among adults aged $15$ to $49$ (%)Reference $2009$ $2.9\%$ ( $^{200}$ ) $1.8$ ( $1.6 - 2.0$ ) ( $^{21}$ )(20)( $21$ ) $2005$ $2.7\%$ ( $^{20}$ ) $2.0$ ( $1.8 - 2.2$ ) ( $^{21}$ )(20)( $21$ )		2010		11)	(20		NA		5	51.9% <sup>(23)</sup>	(18)(23)
Water and Sanitation         2010 $86\%$ $14\%$ (18)           Year         2004         88% (Urban), 64% (Rural)         27% (Urban), 11% (Rural)         (19)           HIV/AIDS         Year         HIV Prevalence among pregnant women attending ANC clinics         Prevalence of HIV among adults aged $15 to 49 (\%)$ Reference           2009 $2.9\%$ ( $^{20}$ ) $1.8 (1.6 - 2.0)$ ( $^{21}$ )         (20)(21)           2005 $2.7\%$ ( $^{20}$ ) $2.0 (1.8 - 2.2)$ ( $^{21}$ )         (20)(21)		2003	18.8%			35.6%	NA			NA	(19)
Water and Sanitation         2010 $86\%$ $14\%$ (18)           Year         2004         88% (Urban), 64% (Rural)         27% (Urban), 11% (Rural)         (19)           HIV/AIDS         Year         HIV Prevalence among pregnant women attending ANC clinics         Prevalence of HIV among adults aged $15 to 49 (\%)$ Reference           2009 $2.9\%$ ( $^{20}$ ) $1.8 (1.6 - 2.0)$ ( $^{21}$ )         (20)(21)           2005 $2.7\%$ ( $^{20}$ ) $2.0 (1.8 - 2.2)$ ( $^{21}$ )         (20)(21)	Access to Safe	Veer	A.a	case to	safe w	ator	Access	to impr	oved se	nitation	Reference
Sanitation         2004         88% (Urban), 64% (Rural)         27% (Urban), 11% (Rural)         (19)           HIV/AIDS         Year         HIV Prevalence among pregnant women attending ANC clinics         Prevalence of HIV among adults aged 15 to 49 (%)         Reference           2009         2.9% <sup>(20)</sup> 1.8 (1.6 - 2.0) <sup>(21)</sup> (20)(21)           2005         2.7% <sup>(20)</sup> 2.0 (1.8 - 2.2) <sup>(21)</sup> (20)(21)			AC				Access	1		untation	
HIV/AIDSYearHIV Prevalence among pregnant women attending ANC clinicsPrevalence of HIV among adults aged $15 to 49 (\%)$ Reference2009 $2.9\%^{(20)}$ $1.8 (1.6 - 2.0)^{(21)}$ $(20)(21)$ 2005 $2.7\%^{(20)}$ $2.0 (1.8 - 2.2)^{(21)}$ $(20)(21)$			88% (			Rural)	27% (			Rural)	
Yearwomen attending ANC clinics15 to 49 (%)Reference2009 $2.9\%$ (20) $1.8 (1.6 - 2.0)$ (21)(20)(21)2005 $2.7\%$ (20) $2.0 (1.8 - 2.2)$ (21)(20)(21)		2001	00/0 (	ereun	, 0.70 (		2770 (	ereally	, 1170 (	rtara)	(17)
2005 $2.7\%^{(20)}$ $2.0(1.8 - 2.2)^{(21)}$ $(20)(21)$	HIV/AIDS		women attending ANC clinics			15 to 49 (%)					
						$\frac{1.8(1.6-2.0)^{(21)}}{2.8(1.6-2.0)^{(21)}}$					
Global Gender Rank in 2012 2006 Reference		2005		$2.7\%^{(20)} \qquad \qquad 2.0(1.8-2.2)^{(21)}$							(20)(21)
	Global Gender						Rank in	20	12	2006	Reference
Gap IndexHealth and Survival105/13589/11		Health	and Surviva	1							
Sex ratio at birth         1         1         (24)(25)		Sex	ratio at birth							1	(24)(25)
Ratio: female healthy life expectancy over male value10996		Rati	o: female heal	thy life	expect	ancy over mal	e value	10	)9	96	

(18) WHO (2012). "World Health Statistics 2012"

(19) WHO (2007). "World Health Statistics 2007"

(20) Ghana Health Service (2010). "The Health Sector in Ghana – Facts and Figures 2010"

(21) WHO Website (Global Health Observatory Data Repository), accessed 28 December 2012

(22) Ghana Statistical Service (2008). "Ghana Living Standard Survey Report of the Fifth Round (GLSS 5)"

(23) Ghana Statistical Service, Ghana Health Service and ICF Macro (2009). "Ghana Demographic and Health Survey 2008, Preliminary Report"

(24) World Economic Forum (2012). "The Global Gender Gap Report 2012"

(25) World Economic Forum (2006). "The Global Gender Gap Report 2006"

#### 1.4 Millennium Development Goals (MDGs) Indicators

#### (Figures in bold are the targets by 2015.)

	0 1 1	rtion of people below the ty line by 2015	Target: Halve the proportion of people who suffer from hunger	
Indicator	Proportion below extreme poverty line ( <b>18.5%</b> )	Proportion below upper poverty line (25.8%)	Proportion of children who are malnourished (Underweight 15.5% / Stunting 15%)	Reference
2008	18.0% (2006)	28.5% (2006)	13.9% / 28%	(26)
1999	26.8%	39.5%	25% / 30.5% (1998)	(26)

#### Goal 1: Eradicate extreme poverty and hunger

#### **Goal 2: Achieve universal primary education**

	Target: Achieve universal access to primary education by 2015 (100%)						
Indicator	Gross enrolment ratio	Net enrolment rate	Primary completion rate				
2010	94.9%	83.6%	87.1%	(27)			
1990	72.7%	54.0%	63.0%	(26)			

#### Goal 3: Promote gender equality and empower women

	Target: Eliminate gender of	Target: Eliminate gender disparity in primary and junior secondary education by 2015				
Indicat	Ratio of girls to boys in primary schools (1.0)	Ratio of females to males in junior secondary schools (1.0)	Percentage of female enrolment in senior secondary schools (NA)	Reference		
2010	0.96	0.92	NA	(27)		
2002	0.92	0.88	NA	(26)		

#### Goal 4: Under-five mortality

	Target: Reduce under-five mortality by two-thirds by 2015					
Indicator	Under-five mortality rate (53)	Immunization coverage (100%)	Reference			
2008	74 (2010) <sup>(3)</sup>	90% (20)	(26)(28)			
1990	122	61%	(26)			

#### **Goal 5: Maternal mortality**

	Target: Reduce maternal mortality ratio by three-quarters by 2015					
Indicator	Maternal mortality ratio (survey) (185)	Births attended by skilled health personnel (100%)	Reference			
2008	350 (2010) <sup>(22)</sup>	54.7% (23)	(28)(29)			
1990	740	40% (1988)	(26)			

#### Goal 6: Combat HIV/AIDS & Malaria

	<b>Target:</b> Halt and reverse the spread of HIV/ AIDS by 2015 ( <b>&lt;1.5%</b> )	Target: Halt and reverse the incidence of malaria (NA)	Reference
Indicator	National HIV prevalence rate	Under-five malaria case fatality	
2008	2.2% NA		
1999	1.5%	2.9% (2002)	(26)

#### Goal 7: Ensure environmental sustainability

	Target: Halve the proportion of persons without sustainable access to safe drinking			
	water and basic sanitation			
Indicate	IndicatorProportion of population with access to safe drinking water (78%)Proportion of population with access improved sanitation (52%)		- Reference	
2008	83.8%	83.8% 12.4%		
1999	56% (1990)	5% (1998)	(26)	

(26) NDPC and UNDP (2010). "2008 Ghana Millennium Development Goals Report"

(27) Ministry of Education (not dated), "Education Sector Performance Report 2010"

(28) WHO (2012). "World Health Statistics 2012"

<sup>(29)</sup> WHO Website (Global Health Observatory Data Repository), accessed 28 December 2012

#### 1.5 National Commitment to Gender Issues

Year	Parliament	Government		Private Sector			
	Member of Parliament	Minister	Deputy Minister	Manager	Professional	Technician	Reference
2012	28/ 275 (10.2%) <sup>(30)</sup>	6/ 36 (16.7%) <sup>(30)</sup>	7/ 35 (20.0%) <sup>(30)</sup>	2.4% (2010) <sup>(31)</sup>	4.1% (2010) <sup>(31)</sup>	0.9% (2010) <sup>(31)</sup>	(30)(31)
2006	25/230 (10.9%) ('04) <sup>(32)</sup>	NA	NA	0.1%	1.9%	1.3%	(32)(33)

#### Women in Decision-making Positions

#### **Global Gender Gap Index**

Rank in	2012	2006	Reference
Economic Participation and Opportunity	26/135	5/ 115	
Ratio: female legislators, senior officials and managers over male value	47	22	
Ratio: female professional and technical workers over male value	NA	NA	
Political Empowerment	100/ 135	80/115	(34)(35)
Ratio: females with seats in parliament over male value	116	77	(34)(33)
Ratio: females at ministerial level over male value	52	62	
Ratio: number of years of a female head of state or government (last 50 years) over male value	58	41	

#### Signature and Ratification of Treaty/ Convention

Signed in	Ratified in	Convention
1980	1986	Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) 1979
1995	-	Beijing Declaration and Platform for Action
2000	-	Millennium Declaration
2003	2007	Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa
2004	-	Solemn Declaration on Gender Equality in Africa (SDGEA)

#### Legislation for Gender Equality and Protection of Women

Year	Legislation
1985	Intestate Succession Law (amended in 1991)
1992	Article 12, 17, 22, 27 of the Constitution
1994	Criminal Code Amendment Act (Act 554): Criminalization of harmful traditional practices such as Female Genital Cutting/ Mutilation (FGC/ M) and Trokosi (ritual servitude)
1998	Children's Act: Criminalization of underage and forced marriage
2006	Human Trafficking Act (Act 694)
2007	Domestic Violence Act (Act 732)

#### **National Policy on Gender**

Year	Legislation
2004	The National Gender and Children Policy

#### National Machinery for the Advancement of Women

Organization	Established in	
Ministry of Gender, Children and Social Protection	2001 (restructured in 2013)	
(former Ministry of Women and Children's Affairs)	2001 (restructured III 2015)	

(30) Data based on the interview to the Ministry of Gender, Children and Social Protection held in January 2013

(31) Ghana Statistical Service (2012). "2010 Population and Housing Census - Summary Report of Final Results"

(32) UNDP Ghana (2007). "Ghana Human Development Report 2007"

- (33) Ghana Statistical Service (2008). "Ghana Living Standard Survey Report of the Fifth Round (GLSS 5)"
- (34) World Economic Forum (2012). "The Global Gender Gap Report 2012"
  (35) World Economic Forum (2006). "The Global Gender Gap Report 2006"

#### General Situation of Women and Government Policy on Gender 2.

### 2.1 General Situation of Women in Ghana

#### Summary

- (1) According to the survey results, female-headed households are less poor compared to male-headed households of equivalent characteristics. However, the proportion of poor female-headed households in the cities in northern Ghana rose between 1992 and 2006, though it declined in rural areas in northern Ghana and in both the urban and rural areas in southern Ghana during the same period. Greater attention needs to be paid to the regional and urban-rural disparities among female-headed households. In addition, there is a possibility that the most vulnerable groups are those women attached to male-headed households, taking women's limited decision-making power within the households and access to resources such as land and credit into consideration<sup>1</sup>. Attention should also be devoted to the level of poverty among individual members of the households.
- (2) Women's decision-making is usually limited to the social aspects of the family and male members of the family are the key power holders. However, as women's financial contributions and educational levels have increased, women's positions in decision-making have added weight.
- (3) Women's representation in politics and public services is still low at the central level. Women have been generally underrepresented at the district level as well. To tackle the situation, legislation of Affirmative Action is in progress.
- (4) In response to the increasing amount of abuse and violence against women and children, the Domestic Violence and Victim Support Unit was established in the Ghana Police Service in 1998. In 2007, the Domestic Violence Act was approved by Parliament.

#### [Socio-economic situation of Ghana]

In 1957 the Republic of Ghana (hereafter Ghana) became the first African state to gain independence. Ghana is a multiparty constitutional democracy. The population of Ghana is estimated at about 24.7 million, of which 51.2% are female and 48.8% are male. 71.2% of the population is estimated to be Christian and 17.6% to be Muslim. Ghana is made up of diverse socio-cultural groups that are classified into a few large ethnic groups, including the Akan, the Mole Dagbani, the Ewe and the Ga-Dangme. The proportion of the population living in urban areas is 50.9% nationally; however, except in the Greater Accra and Ashanti Regions, the remaining regions are predominantly rural<sup>2</sup>.

41.6 % of the economically active population is engaged in agriculture including forestry and fishing, followed by 18.9 % in the wholesale and retail trade, and 10.8% in manufacturing<sup>3</sup>. Agriculture practiced in Ghana is predominantly rain-fed and small-scale. Ghana is endowed with natural resources. Gold, cocoa beans and more recently oil<sup>4</sup> as well as migrant remittances are major sources of foreign earnings. In November 2010, Ghana declared that it had attained a lower middle-income

<sup>&</sup>lt;sup>1</sup> North-South Institute (1995). cited in Duncan (2004), p.51.

<sup>&</sup>lt;sup>2</sup> Ghana Statistical Service (2012). "2010 Population and Housing Census - Summary Report of Final Results" (hereafter "2010 Population and Housing Census").

<sup>&</sup>lt;sup>3</sup> ibid.

<sup>&</sup>lt;sup>4</sup> Ghana started commercial oil production in December 2010.

country status, which was the long-term goal of the country set in the Ghana - Vision 2020: (The First Step: 1996-2000), after rebasing of the national accounts. As a result of the rebasing exercise, the service sector became the major contributor to the GDP (48.5% in 2011), surpassing agriculture  $(25.6\%)^5$ .

Under the Ghana Poverty Reduction Strategy (GPRS I) 2003-2005 and the Growth and Poverty Reduction Strategy (GPRS II) 2006-2009, Ghana made substantial progress towards the realization of macroeconomic stability and the achievement of poverty reduction goals. Ghana became the first country in Sub-Saharan Africa to have achieved the target of halving the proportion of population in extreme poverty (Millennium Development Goal: MDG 1) in 2006<sup>6</sup>. The overall poverty rate (the proportion of the population living below the upper poverty line) has declined substantially over the past two decades, from 51.7% in 1991/92 to 28.5% in 2005/2006, indicating that the target of the MDG 1 could be achieved well ahead of the 2015 target of 26%. The proportion of the population living below the 2015 target of 26%, using the same period against the 2015 target of  $19\%^7$ .

However, despite the significant decline in poverty at the national level, regional, occupational and gender disparities exist. Poverty remains a disproportionately rural phenomenon. 86% of the total population living below the upper poverty line and 88% living below the extreme poverty line live in rural areas<sup>8</sup>. In particular, the incidence of poverty is very high in the three northern regions, namely the Northern, Upper East and Upper West. In addition, poverty is highest among food crop farmers. Almost half of those identified as poor (46%) are engaged in food crop cultivation<sup>9</sup>. As women farmers are highly concentrated in food crop farming (as will be discussed later), this high level of incidence of poverty among people in this economic activity suggests women's high vulnerability to poverty. Poverty remains an important challenge to the country.

#### [General situation of women]

The African Peer Review Mechanism (2005) stated that the marginalization of women remains a very real problem in Ghana despite constitutional and other legislative provisions to protect and preserve the rights of women<sup>10</sup>. It pointed out the low representation of women in politics, public service and private entities and the lack of progress in gender mainstreaming in socio-economic development as a result of cultural and other impediments.

According to the Ghana Statistical Service (2007), households led by women are less poor compared

<sup>&</sup>lt;sup>5</sup> Ghana Statistical Service (2012). "Ghana's Economic Performance 2011," p.6.

<sup>&</sup>lt;sup>6</sup> National Development Planning Commission and UNDP (2010). "2008 Ghana Millennium Development Goals Report," p.9. The Government of Ghana set the lower (extreme) poverty line at 2,884,700 cedis per adult equivalent per year and the upper poverty line at 3,708,900 cedis per adult equivalent per year [Ghana Statistical Service (2007), pp.4-6] (those figures are the ones before redenomination of the currency in 2007).

<sup>&</sup>lt;sup>8</sup> Ghana Statistical Service (2007). "Pattern and Trends of Poverty in Ghana 1991-2006," p.9. <sup>9</sup> ibid., p.14.

<sup>&</sup>lt;sup>10</sup> African Peer Review Mechanism (2005). "Country Review Report of the Republic of Ghana," p.122. The African Peer Review Mechnism is an instrument voluntarily acceded to by member states of the African Union as a self-monitoring mechanism for African states.

to those led by men of equivalent characteristics among the heads such as age, household size and education. The incidence of poverty among male-headed households decreased from 55% in 1990/ 91 to 31% in 2005/06, while those of female-headed households declined from 43% to 19% over the same period. However, the proportion of poor female-headed households in the cities in northern Ghana rose between 1992 and 2006, though it declined in the rural areas in northern Ghana and in both the urban and rural areas in southern Ghana during the same period, as it did among male-headed households in northern and southern Ghana. In northern Ghana, urban poverty is increasingly concentrated among female-headed households. In addition, there is a possibility that the most vulnerable groups are those women attached to male-headed households, taking women's limited decision-making power within the households and access to resources such as land and credit into consideration<sup>12</sup>. Attention should be also devoted to the level of poverty among individual members of the households.

In most traditional Ghanaian communities women do not take part in decision-making. Women's decision-making is usually limited to the social aspects of the family and male members of the family are the key power holders. However, studies show that with more women either in the labor force or engaged in income-generating activities with more contribution of resources to the household, women's position in decision-making has added weight<sup>13</sup>.

The 2008 Ghana Demographic and Health Survey collected information on women's participation in household decision-making. According to the survey, in general, women who have better education, who earn more than their husband and those in the higher wealth quintiles are more likely to make decisions alone or jointly with their husband about the use of the cash earnings of their husband and about household events such as the purchase of daily household needs, the wife's own health care, major household purchases, and visits to the wife's family. An interesting finding of the survey is that almost all women (94%), with little difference between urban-rural localities and educational and household wealth status, say that they mainly control their cash earnings or decide how to use their earnings jointly with their husband. Men in the higher quintiles and with better education are more likely than other men to think that a wife should have the greater say in the decisions in the household.

#### [Women's participation in key political and administrative positions]

The parliamentary system of Ghana is unicameral with 275 members. In the parliamentary election held in 2008, only 20 women out of 230 members were elected to Parliament. The number of women elected to Parliament increased to 28 in the 2012 parliamentary election, which led to an increase in the proportion of female representation in Parliament from 8.7% in 2008 to 10.2% at present. Still, the proportion is below the international average of 20.3% and the Sub-Saharan African average of 20.4%<sup>14</sup>. The Council of State, a presidentially appointed consultative body of 25 members, has only three female members. There are six female ministers out of 36, and seven

<sup>&</sup>lt;sup>11</sup> World Bank (2011). "Republic of Ghana Tackling Poverty in Northern Ghana," p.9.

<sup>&</sup>lt;sup>12</sup> North-South Institute (1995). cited in Duncan (2004), p.51.

<sup>&</sup>lt;sup>13</sup> Brown (1994). "Gender Roles in Household Allocation of Resources and Decision-making in Ghana," pp.35-36.

<sup>&</sup>lt;sup>14</sup> Website of Inter-Parliamentary Union, accessed 22 January 2013.

female deputy ministers out of 35. In public service there are only three female chief directors out of  $25^{15}$ .

To accelerate the achievement of equal rights and opportunities for women and promote women to decision-making positions, the policy guideline on Affirmative Action was formulated in 1998. Under the policy guideline, the government set the target of at least 40% representation of women at all levels of government and in Parliament<sup>16</sup>. There has been a steady increase in women's representation in positions of decision-making such as the election of Ms. Georgina Theodora Wood as Chief Justice in 2007 and Ms. Joyce Bamford Addo as Speaker of Parliament in 2009. The gender gap in positions of decision-making, however, is still wide, since the policy guideline lacks the necessary legal backing to enforce its provisions. In this context, the Ministry of Gender, Children and Social Protection (formerly the Ministry of Women and Children's Affairs, hereafter MOWAC<sup>17</sup>) has initiated legislation of Affirmative Action and it is now in the consultative process among stakeholders. Apart from government initiatives, NGOs and civil society institutions have been engaged in promotion of women's participation in politics.

#### [Gender and local governance]

Ghana is divided into 10 administrative regions and 216 decentralized districts<sup>18</sup>. Ghana has adopted a decentralized government system since 1988 with the view to devolving political, administrative and financial decision-making to the local level. Under the decentralized government system, regions are governed by the Regional Coordinating Councils, and districts are governed by District Assemblies, which consist of 70% elected members and 30% members appointed by the President.

The system of the District Assembly has considerable potential for enhancing the effective involvement of women in local development, as there is a government's commitment as a part of the policy guideline on Affirmative Action to provide a 50% female quota of the 30% appointed members in the District Assembly. Despite the quota system, women have been generally underrepresented in the District Assemblies (11% of all assembly members were women in 2009<sup>19</sup>) and other decision-making positions in the decentralized government system as shown in the table below.

Office	Total	Male	Female	% Female
Regional Minister (head of a Regional Coordinating Council)	10	9	1	10.0
District Chief Executive (Head of a District Assembly)		157	12	7.1
District Assembly Appointed (election in 2010)		NA	NA	NA
District Assembly Elected (election in 2010)		4403	331	7.0

Source: Interview with the Ministry of Gender, Children and Social Protection, 16th January, 2013

<sup>&</sup>lt;sup>15</sup> Data in this paragraph are based on the interview with the Ministry of Gender, Children and Social Protection held in January 2013.

<sup>&</sup>lt;sup>16</sup> The Government of Ghana, "Statement of Policy on the Implementation of Proposals and Recommendations for Affirmative Action towards Equality of Rights and Opportunities for Women in Ghana."

<sup>&</sup>lt;sup>17</sup> The Ministry of Women and Children's Affairs (MOWAC) was restructured as the Ministry of Gender, Children and Social Protection after the election held in December 2012.

<sup>&</sup>lt;sup>18</sup> The country is divided into ten administrative regions, under which there are six metropolitan populations over 250,000), 49 municipal (population over 95,000) and 161 districts (population over 75,000) (hereafter all are referred as district).

<sup>&</sup>lt;sup>19</sup> "Country Profile," Commonwealth Local Government Forum website.

Gender Desk Officers (GDOs) were introduced to all District Assemblies, though the actual number of those who have been recruited as GDOs was not available during this study. Efforts to mainstream the gender perspectives into the District Assembly system, however, have resulted in limited success as GDOs have not been provided proper roles and responsibilities to promote their mandate within the system. In this connection, MOWAC and other stakeholders such as the Ministry of Local Government, Rural Development and Environment and District Assemblies with the support of the Canadian International Development Agency (CIDA) are preparing for Memorandums of Understanding (MOUs) which stipulate that the GDOs should be higher-ranked officers (directors or deputy directors) with authority and deployed under the District Planning and Coordinating Units (this is called the Accountability Framework).

#### [Gender-related violence]

In response to the increasing amount of abuse and violence against women and children, the Domestic Violence and Victim Support Unit (DOVVSU), formerly the Women and Juvenile Unit, of the Ghana Police Service was established in 1998 within the Ghana Police Service in Accra with the mission to prevent violence, protect victims, and apprehend and prosecute perpetrators of domestic violence and child abuse<sup>20</sup>. The number of cases reported to the DOVVSU was 14,294 in 2007 and 12,247 in 2008<sup>21</sup>. The DOVVSU operates in all of the 11 police regions of the country, has 52 offices and desks nationwide and works in collaboration with NGOs, civil society and other relevant organizations<sup>22</sup>.

The Domestic Violence (DV) Act was approved by Parliament in 2007. A 10-year Domestic Violence National Plan of Action was also developed to make the DV Act operational. The Domestic Violence Secretariat was established within the MOWAC to coordinate domestic violence prevention and ensure that the DV Act is effectively disseminated in all 10 regions. The Domestic Violence Secretariat is planning to conduct a national survey on domestic violence, supported by the Department for International Development (DFID).

#### [Traditional and cultural aspects influencing gender relations]

In most traditional Ghanaian communities, there is a general gender inequality in personal and social spheres. Women were taught to accept their inferior position through the process of acquiring societal beliefs, values, attitudes and examples to conform to the norms and roles required for integration into a community (socialization), which often hinders women in participating in the decision-making positions in the public space<sup>23</sup>.

In both matrilineal and patrilineal societies, local traditions and customs such as traditional inheritance systems and the practice of polygamy combine to ensure that allocation of resources tends to favor

<sup>&</sup>lt;sup>20</sup> Setting up of the DOVVSU was aimed at creating a platform where women and children could have their problems properly addressed because most cases on violence against women and children were treated as family issues that were to be settled at home. (Ghana Police Service official website).

 <sup>&</sup>lt;sup>21</sup> MOWAC, "Sector Medium Term Development Plan (SMTDP) (2010 – 2013) Latest Version 22nd November."
 <sup>22</sup> Ghana Police Service official website.

<sup>&</sup>lt;sup>23</sup> It is pointed out that the colonial system further excluded some of the decision-making roles women played in Ghanaian society and property ownership and reinforced women's subordinate position in society.

male members of the household, thereby reinforcing the inferior status of women in Ghana. About 80% of the lands in Ghana are held under the customary law system<sup>24</sup>. Community-level decision making about land is the exclusive preserve of lineage chiefs who are in general men<sup>25</sup>. According to the customary law, all members of lineage are entitled to usufruct land rights (that is one's right to enter upon and use the land) or customary freehold regardless of their sex. In practice, however, land ownership (customary freehold) is generally attributed to men by lineage heads, and the women's rights of access to land are to a large extent regulated by, and dependent on, men<sup>26</sup>. Differences in access rights are also observed between different categories of women. Widows with children and biological daughters have greater access to land than widows without children, stepdaughters, adopted daughters, women involved in a non-marital relationship and physically challenged women<sup>27</sup>.

Various studies have shown that customary laws can adapt positively to new developments as a result of socio-economic change. Despite the constraints faced by women with regard to land ownership<sup>28</sup>, there has been an increase in land ownership among women because of commoditization of land and women's increased abilities to purchase land, and their increased receipt of land as gifts from parents, grandparents and/ or spouses $^{29}$ .

In Ghana, some socio-cultural practices constitute violence against children and tend to affect their development, especially that of girls. These include: underage and/ or forced marriage, trokosi (ritual servitude)<sup>30</sup> and Female Genital Cutting/ Mutilation (FGC/ M). The government passed the Criminal Code Amendment Act and the Children's Act, and criminalized those abusive cultural practices.

<sup>&</sup>lt;sup>24</sup> UNDP Ghana (2007). "The Ghana Human Development Report 2007," p.118.

<sup>&</sup>lt;sup>25</sup> ibid., p.118.

<sup>&</sup>lt;sup>26</sup> African Development Fund (2008). "Ghana Country Gender Profile," p.15.

<sup>&</sup>lt;sup>27</sup> Duncan and Brants (2004). "Access To and Control Over Land from a Gender Perspective – A Study Conducted in the Volta Region of Ghana," p.vi.

 $<sup>^{28}</sup>$  Land ownership here means one's ability to transfer land titles, whether by sale or inheritance (ibid., p.18). <sup>29</sup> ibid., p.25

<sup>&</sup>lt;sup>30</sup> Trokosi custom is practiced in south-eastern Ghana. A family must offer a daughter to the priest as a way of appeasing the gods for a relative's transgression, past or present. The tradition requires a girl to spend the rest of her life as a 'wife of the gods'. In addition to performing ritual duties and domestic chores at the shrine, a trokosi is usually also expected to work long hours on farmland belonging to the shrine. [UK Border Agency (2012). "Ghana Country of Origin Information (COI) Report"].

#### 2.2 Government Policy on Gender

#### **Summary**

- (1) The National Gender and Children Policy was developed by the MOWAC in 2004 to mainstream gender concerns in the national development process. The National Gender and Children Policy was reviewed in 2011 and based on it, the MOWAC is currently developing a new National Gender Policy. As a conceptual framework of the new Policy, the following seven pillars are set: (1) Women empowerment, livelihoods and productivity, (2) Women's rights and access to justice, (3) Accountable governance, (4) Women's leadership, peace and security, (5) Macroeconomics & trade, (6) Gender roles and relations and (7) Sector-wide gender gaps. The draft National Gender Policy was planned to be finalized by the end of March 2013.
- (2) Article 17 (2) of the 1992 Constitution prohibits discrimination on the ground of gender among other characteristics. Article 12 (2) (human rights regardless of gender among others), Article 22 (property rights of spouses) and Article 27 (women's rights) deal directly with gender issues.
- (3) Since 1985, the government has passed a number of laws that seek to restructure the traditional systems of inheritance such as the Intestate Succession Law in 1985 in order to ensure a fair distribution of a deceased person's property so as to cater more adequately to the otherwise excluded spouse and children.
- (4) Some of the recent achievements to protect women's and children's rights include the criminalization of harmful traditional practices under the Criminal Code Amendment Act in 1994, the criminalization of underage and forced marriage under the Children's Act in 1998, and the passage of the Human Trafficking Act in 2006 and the Domestic Violence Act in 2007.

#### [National policy on gender]

The National Gender and Children Policy was developed by the MOWAC (present Ministry of Gender, Children and Social Protection) in 2004 to mainstream gender concerns in the national development process in order to improve the social, legal/ civic, economic and cultural conditions of the Ghanaian, especially women and children (see 2.3 for details of the MOWAC/ Ministry of Gender, Children and Social Protection). The policy framework emphasizes the cross-cutting nature of gender and recognizes the importance of institutional linkages with other stakeholders to translate the goals into programs at all levels of the country.

Since a need to re-engineer the present National Gender and Children Policy was recognized among the stakeholders, it was reviewed in 2011 and based on it, the MOWAC is currently developing a new National Gender Policy. The overall goal presented in the draft National Gender Policy is to achieve gender equity and equality mainstreamed in society so that men and women will participate fully in all spheres of sectors of national development. As a conceptual framework to pursue the above-mentioned overall goal of the Policy, the following seven pillars are set: (1) Women empowerment, livelihoods and productivity, (2) Women's rights and access to justice, (3) Accountable governance, (4) Women's leadership, peace and security, (5) Macroeconomics & trade, (6) Gender roles and relations and (7) Sector-wide gender gaps<sup>31</sup>. The draft National Gender Policy was

<sup>&</sup>lt;sup>31</sup> MOWAC (2012). "revised National Gender Policy (working draft)."

planned to be finalized by the end of March 2013.

MOWAC's first Sector Development Plan was a four-year Strategic Implementation Plan (SIP), which spanned the period 2005 to 2008. The overall goal of the SIP was to build a decentralized national machinery with the capacity to reform policies, initiate innovative programs, and collaborate with stakeholders to advance the status of women and children, with the following objectives<sup>32</sup>:

- (1) Establish and strengthen national, regional and district institutions to support implementation of the mandate of the MOWAC
- (2) Formulate, reform and monitor policies affecting women and children
- (3) Develop sustainable programs that improve the social, economic and political status of women and children
- (4) Develop and strengthen strategic partnerships with public and civil society stakeholders and development partners.

The challenges identified from the four-year's implementation of the SIP are as follows: (1) inadequate capacity (technical, financial and human) of institutions to implement programs for women and children, (2) inadequate budgetary allocation, (3) overlapping of functions between the MOWAC and other Ministries, Departments, Agencies (MDAs) due to mandate, (4) weak monitoring and evaluation of programs and projects, (5) weak policy coordination on gender and children issues<sup>33</sup>.

The current Sector Medium Term Development Plan (SMTDP) (2010-2013), the four-year development plan, was formulated to provide a policy framework for the sector program implementation taking into account outstanding issues in the SIP and emerging issues confronting women and children in Ghana, with the following six objectives<sup>34</sup>:

- (1) To promote gender mainstreaming and gender responsive budgeting in MDAs and District Assemblies through capacity building
- (2) To enhance evidence-based decision-making on gender equality and women empowerment by collecting gender and sex-disaggregated data in the districts
- (3) To promote and protect the development and the rights of women and children through awareness creation and effective implementation of national and international policy frameworks and legislations
- (4) To improve the socio-economic status of women and children, the vulnerable and marginalized groups, through targeted interventions
- (5) To assess progress on the implementation of women and child related programs and projects and evaluate policy outcomes and impact through effective monitoring and evaluation framework to provide inputs for gender and children policy review and planning
- (6) To create awareness and support the implementation of government development policies affecting women and children in Ghana.

 <sup>&</sup>lt;sup>32</sup> MOWAC, "Sector Medium Term Development Plan (SMTDP) (2010 – 2013) Latest Version 22nd November."
 <sup>33</sup> ibid.

<sup>&</sup>lt;sup>34</sup> ibid.

The SMTDP will address among others the following key issues: (1) low participation of women in decision making at all levels, (2) harmful socio-cultural practices lapse, (3) violence against women, (4) increasing number of kayaayes (women porters)/ streetism in urban areas, (5) inadequate disaggregated data (gender, sex and age), (6) inadequate capacity (technical, financial and human) of institutions to implement programs for women and children, (7) inadequate shelters for women and children in extremely difficult situations, (8) low coverage of women under the Social Security Scheme, (9) low access to credit and support facilities by women, (10) low commitment to the observance and celebration of landmark days for children and women, (11) commercial sex exploitation of women and children, (12) low representation of women in conflict management and (13) inadequate capacity of Human Trafficking Secretariat (financial, technical and human).

As mentioned in Section 2.1, the government formulated the policy guideline on Affirmative Action in 1998. The policy guideline includes: appointment of a women's (gender) desk or focal persons in all the MDAs, setting the target of at least 40% representation of women at all levels of government, and measures to promote girls' education<sup>35</sup>.

For the implementation of the United Nations Security Council Resolution 1325 on Women, Peace and Security adopted in October 2000, a country-specific national action plan, the Ghana National Action Plan For the Implementation of the United Nations Security Council Resolution 1325 On Women Peace and Security (GHANAP 1325), was formulated by the MOWAC in 2012. GHANAP 1325 is based on three pillars, namely, "Protection and Promotion of the Human Rights of Women and Girls in Situations of Conflict and in Peace Support Operations", "Participation of Women in Conflict Prevention, Peace and Security Institutions and Processes", and "Prevention of Violence against Women including Sexual, Gender-based and Conflict-related Violence"<sup>36</sup>.

#### [Gender mainstreaming in the National Development Policy]

The latest national development policy, the Medium-Term National Development Policy Framework: Ghana Shared Growth and Development Agenda (GSGDA) 2010-2013, identifies several challenges that the country faces and gender inequality is seen as one of the major ones. These challenges include:

- (1) Accelerating progress towards the achievement of the Millennium Development Goals, especially those relating to maternal mortality, child mortality, gender equality and environmental sanitation
- (2) Major regional inequalities with the north experiencing significantly higher levels of poverty than the rest of the country, and
- (3) Major gender inequalities with women and girls performing worse across all the main social

<sup>&</sup>lt;sup>35</sup> The Government of Ghana, "Statement of Policy on the Implementation of Proposals and Recommendations for Affirmative Action towards Equality of Rights and Opportunities for Women in Ghana."

<sup>&</sup>lt;sup>36</sup> MOWAC (2010). "Ghana National Action Plan For the Implementation of the United Nations Security Council Resolution 1325 On Women Peace and Security (GHANAP 1325)." The United Nations Security Council Resolution 1325 reaffirms the needs, rights, experiences and role of women in the areas of armed conflict, peace building and peace keeping and encourages the member states to provide for the active participation of women in all aspects of conflict prevention, peace negotiations, peacekeeping, peace building and post-conflict reconstruction.

#### indicators<sup>37</sup>

The GSGDA well addresses the gender disparities by mainstreaming gender issues in the framework, especially in the sections on sustainable natural resource management, infrastructure and human settlements development (energy, water and environmental sanitation), human development (education, health, public awareness on women's issues), transparent and accountable governance (gender mainstreaming in local governance including Gender Responsive Budgeting). It is pointed out, however, that the policy initiatives and strategies outlined in the GSGDA target women as a homogenous group, so that the implementation of the agenda needs to recognize urban-rural differences and the levels of vulnerability of women in different households with gender smart indicators<sup>38</sup>.

#### [Gender-related laws and regulations]

Article 17 (2) of the 1992 Constitution prohibits discrimination on the grounds of gender among other characteristics. The main provisions on gender in the Constitution are shown in Chapter 5 which describes the Fundamental Human Rights and Freedoms. Specifically, Article 12 (2) (human rights regardless of gender among others), Article 22 (property rights of spouses) and Article 27 (women's rights) deal directly with gender issues.

Since 1985, the government has passed a number of laws that seek to restructure the traditional systems of inheritance such as the Intestate Succession Law in 1985 (amended in 1991)<sup>39</sup> in order to ensure a fair distribution of a deceased person's property so as to cater more adequately to the otherwise excluded spouse and children. The Spousal Property Rights Bill was drafted by the MOWAC in 2008. The draft bill focuses on the issues of the contribution of spouses to the acquisition of property, and their equal rights to ownership. However, there has been difficulty in building consensus among key stakeholders on the draft bill and as of January 2013 it was still in the consultation process with all the stakeholders.

Some of the recent achievements to protect women's and children's rights include the passage of the Human Trafficking Act in 2006 and the Domestic Violence Act in 2007. The criminalization of harmful traditional practices such as *trokosi* (ritual servitude) and Female Genital Cutting or Mutilation (FGC/ M) under the Criminal Code Amendment Act in 1994 and the criminalization of underage and forced marriage under the Children's Act in 1998 provide strong legal foundation to protect women and children. Ghana has made significant efforts to reform its legislations to protect the rights of women and children, especially girls. Still, full implementation of existing laws remains a challenge. The application of new laws requires better understanding among the legal professionals and increased awareness among the public.

<sup>&</sup>lt;sup>37</sup> Government of Ghana, "Medium-Term National Development Policy Framework: Ghana Shared Growth and Development Agenda (GSGDA), 2010-2013," p.3.

<sup>&</sup>lt;sup>38</sup> MOWAC (2012). "Rural Women and The MDGs 1 and 3: Ghana's Success and Challenges," Technical Paper, Ghana's Side Event, 56<sup>th</sup> CSW, New York, 29<sup>th</sup> February, 2012, p.17.

<sup>&</sup>lt;sup>39</sup> It is the first legal framework that provides equal rights of inheritance between spouses and increased rights of children. Until 1985, a widow was not considered to be part of her husband's family and therefore was not entitled to any property of her deceased husband who had died intestate. [Duncan and Brants (2004), p.7].

#### 2.3 National Machinery for the Advancement of Women

#### **Summary**

- (1) The Ministry of Women and Children's Affairs (MOWAC) was established in January 2001 as the national machinery for the advancement of women in Ghana. The mandate of the MOWAC is to initiate/ formulate policies and promote gender mainstreaming across all sectors that will lead to the achievement of gender equality and empowerment of women, and survival, development and growth of children as well as the protection of the rights of women and children. MOWAC has 85 staff (44 female staff and 41 male staff) at the central level and 10 regional offices to coordinate the issues of women and children at the regional level (as of January 2013).
- (2) The functions of the MOWAC are: (a) formulation of a gender and child specific development policy framework, guidelines and advocacy strategies, (b) planning and the facilitation of the integration of women and children's policy issues into the National Development Agenda, (c) monitoring and evaluation of programs and projects on women and children, (d) provision of guidelines and advocacy strategies for all Ministries, Departments and Agencies and other development partners for effective gender mainstreaming, (e) provision of the necessary platform and mechanism to implement government's commitments expressed at international fora towards improving the status of women and children, and (f) coordination of all gender-related programs and activities at all levels of development.
- (3) Challenges identified by the MOWAC include a limited office space, budget, number of staff, office facilities and vehicles, inadequate training opportunities for the staff, and lack of public support.
- (4) Gender Desk Officers (GDOs) in line ministries and District Assemblies are expected to work in collaboration with the MOWAC. However, it is pointed out that the capacity of the majority of the GDOs is weak and coordination within the line ministries where a GDO is working is also weak, so that the gender perspectives often fail to be incorporated into the sectoral or district policy formulation.

#### [Background]

The Ministry of Women and Children's Affairs (MOWAC) (present Ministry of Gender, Children and Social Protection) was established in January 2001 with Cabinet status as the national machinery for the advancement of women in Ghana<sup>40</sup>. The establishment of the MOWAC brought the National Council on Women and Development and the Ghana National Commission on Children<sup>41</sup> under one national institutional framework to coordinate national efforts in promoting and advancing the rights of women and children in Ghana. At present, they operate as the Department of Women and the Department of Children respectively.

The mandate of the MOWAC is to initiate/ formulate policies and promote gender mainstreaming

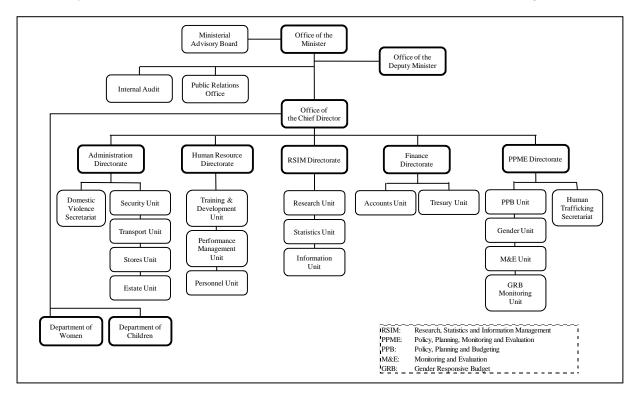
<sup>&</sup>lt;sup>40</sup> Details of the newly restructured ministry were not released during this study in Ghana, so that the data and information in Section 2.3 are confined to those of the MOWAC.

<sup>&</sup>lt;sup>41</sup> The National Council on Women and Development was established in 1975 to serve as the official national machinery for advising the government on all issues related to women, and the Ghana National Commission on Children was established in 1979 to advance the general welfare and development of children.

across all sectors that will lead to the achievement of gender equality and empowerment of women, and survival, development and growth of children as well as the protection of the rights of women and children<sup>42</sup>. Though the mandate of the newly restructured ministry, the Ministry of Gender, Children and Social Protection, has not yet been officially announced as of the end of January 2013, it is supposed to be expanded with the inclusion of the tasks related to social protection.

# [Organization<sup>43</sup>]

MOWAC has 85 staff (44 female staff and 41 male staff) at the central level. In 2012, MOWAC was allocated 15,688,201 Ghana cedis including the government's own budget and donors' contribution. Because of its characteristic as a policy advisory agency, the ministry's share of budgetary allocations is relatively small. The structure of the MOWAC at the central level is shown in the figure below.



MOWAC has 10 regional offices to coordinate the issues of women and children at the regional level. The representation, however, has not been decentralized to the district level except in a few districts.

# [Main activities]

The functions of the MOWAC are as follows:

- Formulation of a gender and child specific development policy framework, guidelines and advocacy strategies for use by all Ministries, Departments and Agencies (MDAs) and for collaboration with Ghana's Development Partners,
- (2) Planning and the facilitation of the integration of women and children's policy issues into the National Development Agenda,
- (3) Monitoring and evaluation of programs and projects on women and children being implemented,
- (4) Provision of guidelines and advocacy strategies for all MDAs and other development partners for

<sup>&</sup>lt;sup>42</sup> MOWAC, "Sector Medium Term Development Plan (SMTDP) (2010 – 2013) Latest Version 22<sup>nd</sup> November"

<sup>&</sup>lt;sup>43</sup> The data and information in this section are based on the interview with the MOWAC held in January 2013.

effective gender mainstreaming,

- (5) Provision of the necessary platform and mechanism to implement government's commitments expressed at international fora towards improving the status of women and children, and
- (6) Coordination of all gender-related programs and activities at all levels of development<sup>44</sup>.

The activities of the MOWAC have been planned based on the Sector Medium Term Development Plan (SMTDP) (2010-1013). The recent focuses of the MOWAC's activities are formulation of the new National Gender Policy, legislation of Affirmative Action and Spousal Property Rights, Gender Responsive Budgeting (GRB), Domestic Violence, preparation of the MOUs on the accountability framework for Gender Desk Officers at the district level to be signed between the MOWAC and the respective line ministries and District Assemblies, among others.

MOWAC established a GRB Monitoring Unit under its Policy, Planning, Monitoring and Evaluation Directorate in May 2011. Prior to it, the government took the pilot GRB initiatives in three line ministries, the Ministry of Food and Agriculture, the Ministry of Health and the Ministry of Education, in 2008. At the same time, a technical committee made up of the MOWAC, the Ministry of Finance and Economic Planning, the National Development Planning Commission and the above-mentioned three line ministries were set up to discuss and advance the GRB process. Since 2009, the target line ministries to introduce GRB have been expanded to eight ministries as well as the District Assemblies.

#### [Challenges of the Ministry]

Challenges identified by the MOWAC include: limited office space, budget, number of staff, office facilities and vehicles, inadequate training opportunities for the staff, and lack of public support (people do not understand the mandate of the MOWAC as a policy advisory agency and expect the MOWAC to directly support women)<sup>45</sup>. Currently, CIDA is supporting the re-engineering of the capacity building mechanism of the government including the MOWAC.

As the main mandate of the MOWAC is limited to policy formulation, coordination, monitoring and evaluation of the gender-related issues at the national level, it is the line ministries and District Assemblies that need to mainstream the gender perspectives into policy formulation and program development in the respective sectors at the central and district levels. In pursuance of it, Gender Desk Officers (GDOs) in line ministries and the District Assemblies are expected to work in collaboration with the MOWAC. However, it is pointed out that the capacity of the majority of the GDOs is weak and coordination within the line ministries where a GDO is working is also weak, so that the gender perspectives often fail to be incorporated into the sectoral or district policy formulation<sup>46</sup>. In this respect, preparation of the MOUs on the accountability framework for GDOs at the district level is in progress.

<sup>&</sup>lt;sup>44</sup> MOWAC, "Sector Medium Term Development Plan (SMTDP) (2010 – 2013) Latest Version 22<sup>nd</sup> November"

<sup>&</sup>lt;sup>45</sup> Interview with the staff of the MOWAC in January 2013

<sup>&</sup>lt;sup>46</sup> ibid.

# 3. Current Situation of Gender by Sector

# 3.1 Education

#### Summary

- (1) To close the gender gap in basic education, the Gender Education Strategic Plan (2012-2017) has been developed by the Girl's Education Unit (GEU) and is in the process of finalization.
- (2) The GEU was established in 1997 to improve girls' education. The GEU plays a coordinating role to facilitate, network, influence, focus, plan and evaluate, and to collect and disseminate data and good practices.
- (3) During the last decade, Ghana has made significant improvements in the areas of basic school enrollment both for girls and boys. At the kindergarten and primary education level, Ghana is close to achieving the target of gender equality in enrollment.
- (4) About 90% of pupils at primary school transition to junior high school; however, the completion rate is 70.4% for boys and 63.0% for girls at the junior high school level. Early marriage and teenage pregnancy could be factors contributing to the low completion rate of girls in addition to poverty, parents' attitude of not valuing the importance of education, especially for girls, distance to school and low school quality.
- (5) The gross enrollment ratio at the senior high school level stands at 39.7% for boys and 34.4% for girls. It is pointed out that the efforts to enhance girls' enrollment is mainly concentrated at the basic education level without establishing links with the post-basic education level.
- (6) The adult illiteracy rate stands at 21.7% for males and 34.7% for females. The Non-Formal Education Division of the Ministry of Education has implemented the National Functional Literacy Program since 1992.
- (7) In general, the quality of education in the rural areas is poorer than that in the urban areas. The recruitment of trained female teachers has a positive effect for promoting girls' education; however, there is a tendency for more trained teachers, especially female teachers, to refuse posting in rural areas.

# [Legal and policy framework on gender]

Article 25 of the 1992 Constitution ensures the right of every person to education. The Constitution also stated that "basic education shall be free, compulsory and available to all." With the Free Compulsory Universal Basic Education (FCUBE) reforms in 1996, free basic education was extended from 6 to 9 years with the addition of the 3-year Junior High School level. Under the 2007 National Education Reform program and resulting 2008 Education Act, free basic education was extended to 11 years by including two years of kindergarten.

The national vision for girls' education in Ghana is "all Ghana's girl-children – and their brothers – are healthy, attend safe, welcoming schools, are well taught by qualified teachers who understand their needs, achieve according to their potential, and graduate and become productive and contributing members of our nurturing society<sup>47</sup>.". MDG 3A – elimination of gender disparity in primary and

<sup>&</sup>lt;sup>47</sup> Girls' Education Unit, Ghana Education Service (2002), "A National Vision for Girls' Education in Ghana

junior secondary education by 2015 – is likely to be missed in Ghana because of lagging in gender parity at the junior high school education level. To close the gender gap in basic education, the Gender Education Strategic Plan (GESP) (2012-2017) has been developed by the Girl's Education Unit (see below) and is in the process of finalization. The GESP sits within the strategic framework outlined in the Education Strategic Plan (ESP) (2010-2020), which sets out the high priorities for ensuring a quality, equitable and efficient education to the children of Ghana<sup>48</sup>. One of the key challenges highlighted in the ESP is the issue of girls' education. The GESP shares the strategies stated in A National Vision for Girls' Education in Ghana and a Framework for Action – strategies to increase access, participation and retention in basic schools and beyond, strategies to improve the quality of teaching and learning and strategies to improve management efficiency for the Girls' Education Unit (GEU) – based on a review of their impact on girls' education<sup>49</sup>.

#### [Girls' Education Unit]

In 1997, the Girls' Education Unit (GEU) was established in the Basic Education Division of the Ghana Education Service with the intention of improving girls' education. The GEU plays a coordinating role to facilitate, network, influence, focus, plan and evaluate, and collect and disseminate data and good practices<sup>50</sup>. The GEU has seven staff nationally and a decentralized network of regional and district Girls' Education Officers (GEOs), whose task is to promote girls' education at the regional and district level. Currently there are 10 regional GEOs and 170 district GEOs<sup>51</sup>.

#### [Basic education]

During the last decade, Ghana has made significant improvements particularly in the areas of basic school enrollment both for girls and boys.

**Kindergarten**: The gross enrollment ratio increased at the kindergarten level from 50.6% in the 2003/04 academic year to 99.4% in  $2011/12^{52}$ , representing almost double the figure. The share of girls' enrollment was 49.7% in 20011/12.

**Primary School**: At the primary level, the net enrollment rate has increased from 69.0% in 2005/06 to 81.6% in 2011/12. The net enrollment rate stood at 82.5% for boys and 80.8% for girls in 2011/12, which indicates that the gender parity index was 0.97 (there were 97 girls for every 100 boys) in the same academic year. These figures show that Ghana is close to achieving the target of gender equality in primary school enrollment. The government has introduced a number of measures to promote access, retention and quality of education, especially for girls, such as abolition of school fees,

and a Framework for Action", p.11

<sup>&</sup>lt;sup>48</sup> Girls' Education Unit, Ghana Education Service (2012), "Gender Education Strategic Plan 2012-2017 (Draft for Consultation) May 2012"

<sup>&</sup>lt;sup>49</sup> ibid.

<sup>&</sup>lt;sup>50</sup> Girls' Education Unit, Ghana Education Service (2002), "A National Vision for Girls' Education in Ghana and a Framework for Action", p.6

<sup>&</sup>lt;sup>51</sup> Interview with the Girl's Education Unit held in January 2013

<sup>&</sup>lt;sup>52</sup> Statistical figures in this section are taken from the data in the Education Management Information System (EMIS) of the Ministry of Education, when no specific reference is mentioned.

capitation grants<sup>53</sup> to schools, the school feeding program, scholarship schemes for needy girls, provision of stationery, uniforms, etc., provision of food rations and gender-friendly toilet facilities in schools. However, educational disparities by gender, location and welfare level still exist, although those disparities have decreased as enrollment rates have increased. Various studies suggest that the most disadvantaged child in terms of education would be a girl who comes from a very poor household living in a rural area. The Volta Region exhibits the lowest net enrollment rate for girls in the country (70.7% in 2011/12) while the Central Region has the highest figure (91.4%). Girls appear to be dropping out more than boys. The completion rate stands at 95.4% for boys and 91.9% for girls, and in the Eastern Region the girl's completion rate was only 80.7% in 2011/12. Barriers to access, retention and achievement are: (1) direct costs (parents cannot afford the schooling) and opportunity costs (children need to work at home) of schooling, (2) parents do not value the importance of education, especially for girls, (3) distance to school, (4) low school quality, and so on<sup>54</sup>.

Junior High School: The net enrollment rate at the junior high school level also shows an increase from 41.5% for boys and 41.7% for girls in 2005/06 to 46.9% for boys and 45.3% for girls in 20011/12. About 90% of pupils at primary school transition to junior high school since education in junior high school is part of the free and compulsory basic education. Similarly to primary education, there exist educational disparities by gender, region and income group. The net enrollment rate for boys is higher than that of girls in almost all regions except the Upper East and Upper West Regions where the figure for girls is higher than that of boys. In 2011/12 the Central Region shows the highest net enrollment rate for both boys and girls (54.3% for boys and 53.9% for girls), while the lowest net enrollment rate stands at 32.7% for boys in the Upper East Region and 36.5% for girls in the Volta Region. The gender parity index is lowest in the Northern Region (0.75), followed by the Volta Region (0.85). The completion rate is 70.4% for boys and 63.0% for girls. Again, the Volta Region shows the lowest completion rate of 51.6% for girls. Apart from the barriers to education mentioned in the section on primary education, it should be noted that early marriage and teenage pregnancy could be a factor in the low completion rate for girls. Data show that the welfare level of the household affects the enrollment and retention at the junior high school level more strongly than at the primary school level<sup>55</sup>.

#### [Post-basic education]

**Senior High School:** Only about 37% of boys and 32% of girls who finish junior high school transitioned to senior high school in 2011/12. The gross enrollment ratio stood at 39.7% for boys and 34.4% for girls in the same year. Although such measures as rehabilitation of senior high school facilities including construction of female dormitories have encouraged female students to attend school, it is pointed out that the efforts to enhance girls' enrollment is mainly concentrated at the basic education level without establishing links with the post-basic education level<sup>56</sup>.

<sup>&</sup>lt;sup>53</sup> World Bank (2010) and Camfed Ghana (2011) indicate that capitation grants had a significant impact in the first year; however, there has been a limited impact on dropouts and educational outcomes.

<sup>&</sup>lt;sup>54</sup> World Bank (2010), "Education in Ghana, Improving Equity, Efficiency and Accountability of Education Service Delivery", p.16

<sup>&</sup>lt;sup>55</sup> ibid.

<sup>&</sup>lt;sup>56</sup> MOWAC, "Sector Medium Term Development Plan (SMTDP) (2010 – 2013) Latest Version 22<sup>nd</sup> November"

**Technical and Vocational Training:** In 2011/12, male students represented 63% of the students at technical and vocational institutions, while female students represented 37%. About 33% of the teachers at the technical and vocational institutions are female.

#### [Tertiary education]

The percentage of female students in public colleges of education (teacher training colleges) was 41.8% in 2011/12. In polytechnics, female students represent 30%, of which 80% majored in management/ business standard (about 1% major in engineering and 18% in applied mathematics and science) in 2009/10. About 35,000 female students are studying at six universities in 2009/10<sup>57</sup>. The proportion of female students in universities is 33%. Female students are enrolled in greater numbers in the faculties of art/ social studies, health science and education, while more male students are enrolled in the faculties of science, engineering and agriculture.

#### [Non-formal education]

The adult illiteracy rate stands at 21.7% for males and 34.7% for females<sup>58</sup>. At the regional level, the highest illiteracy levels are found in the three northern regions (about 75% in the Northern Region, 66% in the Upper East Region and 66% in the Upper West Region). The Non-Formal Education Division of the Ministry of Education has implemented two phases of the National Functional Literacy Program since 1992. Currently, the third phase of the Program is being implemented, in collaboration with other literacy providers such as NGOs, with the aim of increasing the basic functional literacy skills for adults and youths, with emphasis on females and the rural poor, through provision of health/ life skills, occupational skills and civic awareness. From August 2008 to May 2010, about 39,000 people were enrolled in the Program and the proportion of females was 62%. It is reported that the Program has brought about a strong awareness of education, particularly education for girls, and the participants in the Program are more likely to send their children to school<sup>59</sup>. One of the challenges of the Program is the low proportion of female facilitators who handle literacy classes (16% for the last two decades). Serious efforts need to be made towards encouraging more female facilitators to take part in the Program<sup>60</sup>.

#### [Quality of education]

In general, the quality of education in the rural areas is poorer than that in the urban areas. Children living in more remote, isolated and deprived areas tend to score lower than their counterparts in urban areas on the national examinations at the primary and junior high school levels due to poor quality instruction, lack of trained teachers, inadequate school materials, poor school infrastructure, etc., in combination with household-related issues such as student absenteeism associated with poverty and the indirect cost of schooling. The recruitment of trained female teachers has a positive effect on promoting girls' education; however, there is a tendency for more trained teachers, especially female teachers, to refuse posting in rural areas.

<sup>&</sup>lt;sup>57</sup> There are nine public universities in Ghana as of March 2013.

<sup>&</sup>lt;sup>58</sup> Ghana Statistical Service (2012), "2010 Population and Housing Census"

<sup>&</sup>lt;sup>59</sup> Mensah (2007), "Ghana Non-formal education, Country profile prepared for the Education for All Global Monitoring Report 2008", p.15

<sup>&</sup>lt;sup>60</sup> Ministry of Education, "Education Sector Performance Report 2010", pp.47-50

#### 3.2 Health

#### Summary

- (1) In 2009, the Health Sector Gender Policy was developed by the Ministry of Health to promote gender mainstreaming in the health sector. The National Adolescent Reproductive Health Policy was also developed in 2000 to address teenage pregnancies, adolescent sexuality and early marriage.
- (2) Although maternal health care has improved over the past 20 years, the maternal mortality ratio is still higher than the target set by the government. In 2008 the government declared maternal mortality a national emergency and ensured pregnant women free access to maternal health care.
- (3) There is a great desire among married women to control the timing and number of births. However, only 24% of married women are currently using some method of contraception, while 35% of married women are not using contraception although they do not want any more children or want to wait two or more years before having another child.
- (4) Infant and under-five mortality levels in rural areas are consistently higher than those in urban areas. Mortality among children of mothers with less/ no education is substantially higher than mortality among children of mothers with better education.
- (5) Gender issues are vital in tackling the HIV/AIDS epidemic, especially in cases where socio-economic and cultural barriers hinder women from asserting their reproductive rights. In this context, the National HIV&AIDS Strategic Plan (2011-2015) places an emphasis on mainstreaming gender among others in the national response to HIV.

#### [Policy framework on gender]

In 2009, the Health Sector Gender Policy was developed by the Ministry of Health to promote gender mainstreaming in the health sector. The policy focuses on gender barriers in access to health care, promotion of professional ethics and human rights, improvement of quality of care, gender inequalities in health service delivery, HIV/AIDS and gender-based violence, and health financing and governance. The National Adolescent Reproductive Health Policy was developed in 2000 by the National Population Council. It addresses teenage pregnancies, adolescent sexuality and early marriage.

#### [National Health Insurance Scheme]

The National Health Insurance Scheme (NHIS) was launched in 2005 with the objective of reducing financial barriers and increasing access to healthcare. Every Ghanaian must enroll in the NHIS and pay a premium to participate. The proportion of the national population covered by the NHIS (total card-bearing members) is  $59.5\%^{61}$ .

#### [Reproductive health/ maternal health]

Although maternal health care has improved over the past 20 years, the pace has been slow. The maternal mortality ratio has decreased from 740 deaths per 100,000 live births in 1990 to 451 per 100,000 live births in  $2007^{62}$ ; however, if the current trends continue, maternal mortality will only be

<sup>&</sup>lt;sup>61</sup> As of June 2010. The National Health Insurance Scheme website

<sup>&</sup>lt;sup>62</sup> Statistical figures in this section are taken from the Ghana Statistical Service, Ghana Health Service and Macro International Inc. (2009), "Ghana Maternal Health Survey 2007", when no specific reference is

reduced to 340 per 100,000 live births by 2015 instead of the MDG target of 185 per 100,000 by 2015<sup>63</sup>. In order to overcome the major cost barrier to supervised delivery and other maternal health care services, the government of Ghana declared maternal mortality a national emergency in 2008 and exempted pregnant women from paying NHIS premiums so as to ensure their free access to maternal health care<sup>64</sup>.

The Ghana Maternal Health Survey 2007 shows that the proportion of pregnant women who received antenatal care (ANC) from skilled providers stands at 96%. In urban areas, about 89% of women made four or more antenatal visits during pregnancy, compared with 70% of women in rural areas. In general, births to rural and poorly educated women were much less likely than others to receive medical assistance from a health professional at delivery and to be delivered in a health facility. Nationally, 54% of births were delivered in health facilities and 55% of births were delivered by a skilled provider (doctor, nurse/ midwife or auxiliary midwife). However, in the Northern Region, only 26% of births took place in health facilities and 27% of births were assisted by a skilled provider. 88% of women with secondary education or higher delivered in a health facilities were access problems (distance to facility, transportation problems, no one to accompany and not knowing where to go), that some of the women thought it was not necessary to do so, lack of money and so on<sup>65</sup>.

In order to accelerate the efforts to overcome bottlenecks towards improving maternal health, in 2011, the government identified family planning, emergency obstetric and neonatal care, and the need for a skilled attendant at delivery as three key priority interventions to improve maternal health and developed a Country Action Plan to accelerate the interventions and monitor progress<sup>66</sup>.

### [Family planning]

In 2008, the total fertility rate was 4.0. The total fertility rate for rural areas (4.9 births) is considerably higher than the rate for urban areas  $(3.1 \text{ births})^{67}$ . There is a great desire among married women (about 72%) to control the timing and number of births. About one in four married women (24%) is currently using some method of contraception, while 35% of married women are not using contraception although they do not want any more children or want to wait two or more years before having another child (an unmet need for family planning). In general, women in rural areas, with less education and in lower wealth quintiles, have a greater unmet need for family planning than their counterparts. The identified bottlenecks to promote further family planning are as follows: (1) poor stock utilization and inventory management, (2) poor counseling, (3) inadequate supervision and

mentioned.

<sup>&</sup>lt;sup>63</sup> Ministry of Health and UNDP (2011), "MDG Acceleration Framework and Country Action Plan – Maternal Health", p.23

<sup>&</sup>lt;sup>64</sup> Ghana Statistical Service, Ghana Health Service and Macro International Inc. (2009), "Ghana Maternal Health Survey 2007", p.3

<sup>&</sup>lt;sup>65</sup> ibid., p.59

<sup>&</sup>lt;sup>66</sup> Ministry of Health and UNDP (2011) "MDG Acceleration Framework and Country Action Plan – Maternal Health"

<sup>&</sup>lt;sup>67</sup> Statistical figures and information in this section are taken from the Ghana Statistical Service, Ghana Health Service and ICF Macro (2009) "Ghana Demographic and Health Survey (GDHS) 2008, Preliminary Report" when no specific reference is mentioned.

monitoring service delivery, (4) weak ownership and support for maternal health interventions by District Assemblies, (5) cultural issues including low male involvement, and (6) fear of side effects among women<sup>68</sup>.

#### [Infant and under-five mortality]

The Ghana Demographic and Health Survey (GDHS) 2008 showed the infant mortality rate was 50 per 1,000 live births in the most recent five-year period before the GDHS 2008 survey compared to 64 per 1,000 live births in the same period before the GDHS 2003 survey. The under-five mortality rate decreased from 111 per 1,000 live births in 2003 to 80 per 1,000 live births in 2008 in the same surveys. Acute respiratory illness, malaria, and dehydration from severe diarrhea are major causes of childhood mortality in Ghana<sup>69</sup>. There are strong relationships between childhood mortality and socio-economic and demographic factors. Mortality levels in rural areas are consistently higher than those in urban areas. There are marked differences among regions. The Upper West Region showed the highest infant mortality rate and the Upper West Region and Northern Region recorded the highest under-five mortality rates. Mortality among children of mothers with less/ no education is substantially higher than mortality among children of mothers with better education. In general, children in households in the highest wealth quintile are likely to survive. Childhood mortality is higher for boys than girls due mainly to their higher biological risk $^{70}$ . The results of the GDHS 2008 indicate that there has been a substantial increase in vaccination coverage over the past five years, from 69% fully vaccinated in 2003 to 79% in 2008<sup>71</sup>. In addition, malnutrition of children decreases as the mother's level of education and wealth quintile increase.

#### [HIV/ AIDS]

The HIV prevalence in the country seemed to be on a downward trend. The HIV prevalence from the sentinel survey conducted among pregnant women attending ANC was 2.1% and the national HIV prevalence among adults was estimated at 1.5% in 2011<sup>72</sup>. It is estimated that the number of people living with HIV is 225,478 in 2011, of which women represent 56%. According to the National HIV & AIDS Strategic Plan 2011-2015, key determinants of HIV in Ghana include the following: (1) marginalization of the most at-risk populations, (2) low condom use, (3) multiple concurrent sexual partners, (4) stigma and discrimination and (5) gender<sup>73</sup>. Gender issues are vital in tackling the HIV/AIDS epidemic especially in cases where socio-economic and cultural barriers hinder women from asserting reproductive rights. In this context, the National HIV&AIDS Strategic Plan (2011-2015) places an emphasis on mainstreaming gender among others in the national response to HIV. Key gender issues to be addressed in the plan are elimination of mother to child transmission, targeting of services in a way that reaches women and empowering women to protect themselves from HIV infection. It also highlights the role played and burden borne by women in the care for people living with HIV/ AIDS and children orphaned by AIDS and the need to support those women.

<sup>&</sup>lt;sup>68</sup> Ministry of Health and UNDP (2011), "MDG Acceleration Framework and Country Action Plan – Maternal Health", p.47

<sup>&</sup>lt;sup>69</sup> Ghana Statistical Service, Ghana Health Service, and ICF Macro (2009), "Ghana Demographic and Health Survey (GDHS) 2008, Preliminary Report", p.163

<sup>&</sup>lt;sup>70</sup> ibid., pp.140-141

<sup>&</sup>lt;sup>71</sup> ibid., p.168

<sup>&</sup>lt;sup>72</sup> Ghana AIDS Commission (2012), "Ghana Country AIDS Progress Report", p.12

<sup>&</sup>lt;sup>73</sup> Ghana AIDS Commission (2010), "National HIV & AIDS Strategic Plan 2011-2015", pp.25-26

#### 3.3 Agriculture and Rural Development

#### Summary

- (1) In Ghana, about 52% of the total adult female population (70% of women in rural areas) is engaged in agriculture, with the majority being engaged in food production. Women account for about 70% of total food production in Ghana.
- (2) The Gender and Agricultural Development Strategy was developed by the Ministry of Food and Agriculture (MOFA) with the overall objective to address sustainable agriculture development issues through promoting gender equity concerns and addressing the diverse rural needs within the agricultural sector as a means to enhance national development.
- (3) The Women in Agricultural Development Directorate was established in the MOFA to promote gender mainstreaming into all agricultural policies, programs and projects, among other objectives.
- (4) There is a clear division of labor in farming communities in Ghana in terms of tasks performed and their participation in different farming activities. In general, women are more involved in food crop production whereas men are more engaged in production of cash crops. Women play major roles in processing and marketing agricultural produce. In addition, women in rural areas are obliged to carry out a large number of reproductive tasks. As a result, women carry a heavy load compared to men.
- (5) Female extension agents (officers) serve a higher proportion of female farmers than male extension agents; however, they represent only 20% of the total number of extension agents.
- (6) The majority of women in agriculture have limited access to land, labor and capital due to cultural and institutional factors.

#### [Policy framework on gender]

In Ghana, about 53% of the total adult female population (71% of women in rural areas) is engaged in agriculture<sup>74</sup>, with the majority being engaged in food production. Women account for about 70% of total food production in Ghana<sup>75</sup>.

In 2000, the Gender and Agricultural Development Strategy (GADS) was developed by the Ministry of Food and Agriculture (MOFA) with the overall objective to address sustainable agriculture development issues through promoting gender equity concerns and addressing the diverse rural needs within the agricultural sector as a means to enhance national development. The following eight strategies were formulated under the GADS to incorporate gender perspectives into the policies and programs in the agricultural sector: (1) enhance the institutional capacity of the MOFA to address gender issues, (2) promote production and use of sex and age disaggregated data, (3) improve extension service delivery, (4) improve access by farmers to financial services, (5) improve access to information on land rights, (6) improve development and promotion of appropriate technologies in agriculture, (7) promote the diversification and development of new processed products, and (8) enhance environmental protection through appropriate agricultural practices<sup>76</sup>.

<sup>&</sup>lt;sup>74</sup> Ghana Statistical Service (2008) "Ghana Living Standards Survey Report of the Fifth Round (GLSS 5)", p.84

<sup>&</sup>lt;sup>75</sup> Ministry of Food and Agriculture (2000), "Gender and Agricultural Development Strategy", p.2

<sup>&</sup>lt;sup>76</sup> ibid.

The Food and Agriculture Development Policy (FASDEP II), a national policy on agriculture formulated in 2007, emphasizes the sustainable utilization of all resources and commercialization of activities in the sector with market-driven growth in mind<sup>77</sup>. FASDEP II well recognizes gender inequality in the agriculture sector and the importance of gender mainstreaming, in particular mainstreaming of the eight strategies of the GADS, into the work of the MOFA. For that purpose, the MOFA has developed the Accountability Framework for Implementation of the GADS which explains the linkage between the FASDEP II and the GADS, the strategies to achieve the policy objectives and responsible directorates<sup>78</sup>.

### [Institutional framework on gender]

The Women in Agricultural Development (WIAD) Directorate was established in the MOFA to promote gender mainstreaming into all agricultural policies, programs and projects, among other objectives. At the national level, the WIAD has 20 staff (13 female and 7 male) and at the regional level, there are 10 regional agricultural officers (one officer per region) in charge of the WIAD. Under the GADS, every district is supposed to have at least one gender focal point; however, not all the districts have district agricultural officers in charge of the WIAD (though the majority of districts do have those officers)<sup>79</sup>.

Female representation in the MOFA is low, with female staff making up 19% of the total workforce and 17% at higher positions (directors and deputy directors) to participate in decision making<sup>80</sup>.

#### [Gender division of labor in agriculture]

There is a clear division of labor in farming communities in Ghana in terms of the tasks performed and participation in different farming activities. Though there exist ethnic and cultural diversities in the country, in general, women are more engaged in tasks such as planting, weeding, watering, harvesting, transportation of farm produce, agro-processing and marketing of small amounts of farm produce, while men are more involved in the initial clearing of the land, tilling of the soils and marketing of larger amounts of farm produce especially at the farm gate level<sup>81</sup>. Furthermore, women are more involved in food crop production whereas men are more engaged in production of cash crops such as coccoa<sup>82</sup>. It is noted that women are less involved in cash crops because of their limited access to land, capital and labor demanded by the industry<sup>83</sup>.

A wife is required by tradition to assist her husband on his own farm and women tend to respond to

<sup>&</sup>lt;sup>77</sup> Ministry of Food and Agriculture (2007) "Food and Agriculture Development Policy (FASDEP II)", p.7

<sup>&</sup>lt;sup>78</sup> The document was obtained from the MOFA during the study in Ghana in January 2013.

<sup>&</sup>lt;sup>79</sup> Interview with the WIAD in January 2013.

<sup>&</sup>lt;sup>80</sup> ibid.

<sup>&</sup>lt;sup>81</sup> Duncan and Brants (2004) "Access To and Control Over Land from a Gender Perspective – A Study Conducted in the Volta Region of Ghana", p.5

<sup>&</sup>lt;sup>82</sup> According to Duncan (2004), this dichotomy of gender roles was traced back to colonial agricultural policy. In pre-colonial Ghana, men and women farmed together on the same plot of land, producing exclusively for home consumption. Under colonial rule, Ghana became a base for production of cash crops such as palm oil and cocoa and men were given the prerogative to cultivate cash crops whereas women were marginalized into production of food crops.

<sup>&</sup>lt;sup>83</sup> Duncan and Brants (2004) and Ackah and Lay (2009)

this by abandoning their own farms or by acquiring smaller portions of land for farming<sup>84</sup>. In addition, women in rural areas are obliged to carry out a large number of reproductive tasks such as fetching water, cooking, collecting firewood and childbearing/ rearing. As a result, women carry a heavy load compared to men and allocate less time to productive activities such as farming<sup>85</sup>.

About two thirds of the households in rural areas are involved in processing their produce and women have a greater share of responsibility (87.6%) among these households for processing agricultural produce<sup>86</sup>. Activities undertaken include processing of maize, oil extraction from nuts and pulses, processing of cassava into flour and dough, processing of other grains into flour and so on. In addition, in rural areas, 80% of trading businesses are operated by women<sup>87</sup>.

It is seen, however, that the traditional gender divisions of labor in farming activities have gradually changed over time. Women have been increasingly taking part in the tasks previously performed by men such as land clearance due mainly to the migration of male household members to other areas and/ or men's involvement in other income generating activities. Women have also been more involved in cash crop production because their involvement in this activity had become culturally acceptable due to an increased need for their labor<sup>88</sup>. However, it is necessary to observe with caution whether the increased involvement of women in food crop production, cash crop production and trading activities enhances their socio-economic positions and increases their control over farming activities and other issues in their households, or if it merely results in increased workloads.

#### [Extension services]

Under the supervision of district agricultural officers, there are front-line extension workers called agricultural extension agents. The ratio of one agricultural extension agent to farmers stands at 1: 1,700 to 2,500<sup>89</sup>. Dissemination of new and improved technologies through extension services is highly unbalanced between female and male farmers, with as little as 20% of services reaching women<sup>90</sup>.

A survey shows that female extension agents serve a higher proportion of female farmers than male extension agents<sup>91</sup>. However, female extension agents represent only 20% of the total number of extension agents<sup>92</sup>. According to the WIAD, constraints of agricultural extension services from the gender viewpoint are inadequate numbers of female extension agents, socio-cultural issues (for instance, a male extension agent faces difficulties in contacting female farmers and vice versa), that

<sup>&</sup>lt;sup>84</sup> Duncan (2004), "Women in Agriculture in Ghana (Second Edition)", p.31

<sup>&</sup>lt;sup>85</sup> Duncan and Brants (2004), "Access To and Control Over Land from a Gender Perspective – A Study Conducted in the Volta Region of Ghana", p.15

<sup>&</sup>lt;sup>86</sup> Ghana Statistical Service (2008), "Ghana Living Standards Survey Report of the Fifth Round (GLSS 5)", p.84 <sup>87</sup> ibid., p.89

<sup>&</sup>lt;sup>88</sup> Duncan (2004), Duncan and Brants (2004) and Doss (2002)

<sup>&</sup>lt;sup>89</sup> Interview with the WIAD in January 2013

<sup>&</sup>lt;sup>90</sup> Ministry of Food and Agriculture (2007), "Food and Agriculture Development Policy (FASDEP II)", p.17

<sup>&</sup>lt;sup>91</sup> World Bank and International Food Policy Research Institute (2010), "Gender and Governance in Rural Services : Insights from India, Ghana, and Ethiopia", p.149

<sup>&</sup>lt;sup>92</sup> Interview with the WIAD in January 2013. Total number of agricultural extension agents is 1,839 and the number of female agents is 366.

female extension agents tend to refuse to be deployed in rural areas and so on. It is also pointed out that extension agents tend to work with award-winning farmers and are discouraged from working with female farmers, whom they may perceive as less likely to win awards<sup>93</sup>.

#### [Women's access to resources]

The majority of women in agriculture have limited access to land, labor and capital due to cultural and institutional factors. Women's access to land is often restricted to usufruct rights (rights to enter upon and use the land) with few exceptions in some parts of the country, so that women cannot provide collateral for credit because they may not have legal ownership of tangible assets. Traders of agricultural produce are mostly women, yet official credit programs do not usually cover trading activities. Women also lack the financial capability to hire labor, utilize tractor services and purchase agricultural inputs such as fertilizer. Small-scale food crop farmers, especially women, are the least considered by formal financial institutions in the context of loans because of high administrative costs of large numbers of small loans to widely dispersed borrowers who lack collateral. Women mostly obtain capital from their savings and informal sources such as husbands, relatives, friends, money lenders, traders and the susu (saving collection) system<sup>94</sup>. Women's access to new technologies and resources are also constrained due to lack of extension services and their low literacy levels. When mechanization is introduced in agriculture, for instance, without increasing women's access to machinery and equipment, women could lose their roles in the tasks that they used to undertake and widen the gender gap in access to and control over resources among male and female farmers. Consideration is needed to closely examine the impacts of an intervention. Some farmers utilize radio programs and mobile phones to obtain market information. However, taking into account the low literacy levels and prevalence of mobile phones and internet access in rural areas, the majority of farmers have not benefited from Information and Communication Technology (ICT) for their marketing activities.

One of the measures to access loans from formal financial institutions without collateral is group credit schemes for small farmers, under which members are prepared to serve as guarantors to one another. Farmer-based Organizations (FBOs) are often formed to benefit from government programs such as provision of fertilizer or hybrid seeds, including credit. However, male household heads are significantly more likely to belong to an FBO than female household heads, which indicates that women tend to be excluded from an opportunity to access credit. It is suggested that groups such as church groups, parent-teacher associations and self-help women's groups have a high proportion of female members and might be a better medium than FBOs for reaching women in rural areas<sup>95</sup>.

If women are to increase their agricultural productivity, they need increased access to and control over

<sup>&</sup>lt;sup>93</sup> World Bank and International Food Policy Research Institute (2010), "Gender and Governance in Rural Services : Insights from India, Ghana, and Ethiopia", p.263

<sup>&</sup>lt;sup>94</sup> Susu, or daily deposit collection, is a traditional and informal financial institution in West Africa and can be traced back at least three centuries. The normal arrangement for mobilizing savings deposits from clients is for the Susu collectors to collect a pre-determined installment of money on a daily or weekly basis. The amount paid is recorded in a notebook that is held by the collector. At the end of a cycle of about thirty days, an accumulated sum is paid to the client, less one day's deposit as commission to the Susu collector [UNDP (2007)] <sup>95</sup> The World Park and Internetional Fand Palier Presents Institutes (2010). "Conden and Commence in Park

<sup>&</sup>lt;sup>95</sup> The World Bank and International Food Policy Research Institute (2010), "Gender and Governance in Rural Services : Insights from India, Ghana, and Ethiopia", pp.156-8

land, financial services, labor, inputs for agricultural production (e.g. seed, tools, animals or tractors), appropriate technology, extension services and so on.

# [Fisheries]

The fisheries sector is estimated to contribute 3% of the total GDP and 5% of the GDP in agriculture. About 10% of the country's population is engaged in various aspects of the fishing industry<sup>96</sup>. Small-scale (artisanal) fisheries produce 60-70% of the marine fish output of the country<sup>97</sup>. Women in fishing communities are engaged in processing, storing and marketing of fish, while men go fishing. There is disparity in the economic status among women in fishing communities. Successful women fish traders provide credit to fishermen and own fishing equipment such as boats, engines and nets<sup>98</sup>, whereas small-scale women traders face the challenges such as lack of access to credit, high cost of equipment for processing and lack of cold chain facilities at market places<sup>99</sup>.

<sup>&</sup>lt;sup>96</sup> Ghana Investment Promotion Centre website

<sup>&</sup>lt;sup>97</sup> FAO website

<sup>&</sup>lt;sup>98</sup> FAO (2011), "Fishing with beach seines" and Ragnhild Overa (2003), "Gender Ideology and Manoeuvring Space for Female Fisheries Entrepreneurs"

<sup>&</sup>lt;sup>99</sup> Interview with the WIAD in January 2013

#### 3.4 Employment and Economic activities

#### Summary

- (1) The 1992 Constitution as well as the Labour Act of 2003 ensures protection of the rights of working women.
- (2) It seems that the gap between men and women in occupation has decreased; however, overall, in many organizations women remain in supportive positions that are not central to the main operations of these institutions.
- (3) Women-owned businesses, both in formal and informal sectors, are not receiving sufficient financial and institutional support to expand their businesses. Women who operate small-scale businesses need networking with other businesswomen, management and leadership training, financial training, information on accessing markets, information on use of technology and so on.
- (4) As of 2005, Ghana's formal and semiformal microfinance institutions were reported to reach some 1.5 million clients, members and depositors. The clients of microfinance are predominantly women in both rural and urban centers. The effect of cash is more powerful for women who operate businesses with higher profit than those who operate subsistence-level enterprises. Also, women increase their profits when assistance is given in-kind such as equipment and materials, because women, especially those with lower profits, appear to spend the cash on household expenditures. If access to microfinance is necessary to foster business development, especially among poor, subsistence-level female enterprises, microfinance institutions may be suggested to adopt a similar strategy of providing assistance in-kind.

#### [Legal and policy framework on gender]

Article 24 of the 1992 Constitution gives every person the right to work under satisfactory, safe and healthy conditions and to receive equal pay for equal work without discrimination of any kind. Also, Article 27 provides special care to mothers during a reasonable period before and after childbirth and accords paid leave to working mothers during those periods, provides facilities for the care of children to enable women to realize their full potential, and guarantees equal rights to women for training and promotion without any impediments from any person. Article 36 requires that the State shall afford equality of economic opportunity to all citizens and, in particular, the State shall take all necessary steps to ensure the full integration of women into the mainstream of the economic development of Ghana. Part VI of the Labour Act of 2003 ensures protection of working women. The Labour Act also introduces the offense of sexual harassment. Ghana does not have a comprehensive policy on employment. The draft National Employment Policy is currently awaiting final approval. In spite of the relatively strong legal and institutional frameworks, a large majority of the workforce found in the informal sector (81% of males and 91% of females in the country<sup>100</sup>) remain unprotected by the standards.

#### [Gender and employment/ economic activities]

Even though women's economic participation rates are high in Ghana, men make up the bulk of the

<sup>&</sup>lt;sup>100</sup> Ghana Statistical Service (2012), "2010 Population and Housing Census", p.80

private formal sector representing nearly 70%<sup>101</sup>. In private sector enterprises, female employees only dominate in the beauty, entertainment, food processing and textiles sectors, while the rest of the sectors (e.g. manufacturing, transportation, construction) are dominated by males except in the health sector where the proportion is the same for both sexes<sup>102</sup>.

It seems that the gap between men and women in occupations has decreased and there are no significant disparities in the position of managers (2.5% for men and 2.4% for women), though there are some gaps in professionals (6.7% for men and 4.1% for women) and technicians/ associate professionals (2.9% and 0.9%). Yet, there was evidence of informal and formal discriminatory practices against women such as the lack of openness in assignment of tasks and nominations for further training and promotions. Overall, in many organizations women remain in supportive positions such as typists, secretaries, receptionists and caterers, which are not central to the main operations of these institutions<sup>103</sup>.

In urban areas, 47.2% (33.8% for males and 60.3% for females) are own account (self-employed) workers<sup>104</sup> in services (urban food traders and processors, chemical sellers, hair dressing, sewing, domestic workers, repair works, garages, etc), construction (masons, carpenters, plumbers, etc), manufacturing (food processing, textile and garments, wood processing, metal works, etc). The informal sector has more women because they can start up their own businesses even with a low level of education and small amount of capital.

A study found that women-owned businesses, both in the formal and informal sectors, are not receiving sufficient financial and institutional support to expand their businesses. Key challenges to business growth identified by female business owners include tax burdens, economic and regulatory uncertainty, macroeconomic instability, access to finance, access to new markets, access to property and land and so on. They also identified what is needed to improve their businesses as follows: networking with other businesswomen, management and leadership training, financial training, information on accessing markets, information on use of technology and so on<sup>105</sup>. In this respect, the National Board for Small Scale Industries (NBSSI) could play a significant role. The NBSSI has 10 regional offices and 110 business advisory centers at the district level, so that advisory and counseling services on small-scale businesses can be provided at the district level too. The NBSSI also provides training programs, marketing support, and assistance for formalization of informal businesses. Currently, the NBSSI does not operate any credit programs; however, it provides assistance to link their clients to financial institutions<sup>106</sup>. NGOs like EMPRETEC also provide training for microenterprises and small businesses.

<sup>&</sup>lt;sup>101</sup> ibid.

<sup>&</sup>lt;sup>102</sup> World Bank (2009), "Private Sector Demand for Youth Labour in Ghana and Senegal", pp.29-31

<sup>&</sup>lt;sup>103</sup> UNDP Ghana (2007), "Ghana Human Development Report 2007", p.116

 <sup>&</sup>lt;sup>104</sup> Ghana Statistical Service (2008), "Ghana Living Standards Survey Report of the Fifth Round (GLSS 5)", p.36
 <sup>105</sup> International Finance Corporation and MOWAC (2007), "Gender and Economic Growth Assessment for

<sup>&</sup>lt;sup>103</sup> International Finance Corporation and MOWAC (2007), "Gender and Economic Growth Assessment for Ghana 2007"

<sup>&</sup>lt;sup>106</sup> Interview with the NBSSI in January 2013

## [Access to finance/ microfinance]

The savings culture in Ghana is strong relative to that in other Sub-Saharan African countries. 64% of adult Ghanaians claim to save. 84% of the people believe that saving regularly, even small amounts, will secure their future<sup>107</sup>. Ghana has an active branchless banking market. Three mobile network operators lead mobile money deployments, with a total of 12 partnering banks and almost 3 million registered customers<sup>108</sup>. In this context, as of 2005, Ghana's formal and semiformal microfinance institutions, which include rural and community banks, savings and loan companies, credit unions, and financial non-governmental organizations, were reported to reach some 1.5 million clients, members and depositors<sup>109</sup>. In addition, there are informal suppliers of microfinance such as susu collectors and clubs and public sector programs on microfinance.

The proportion of adults at the age of 15 or above who have an account at a formal financial institution stands at 29.4%. There is a gap in the proportion between male adults (31.8%) and female adults  $(27.1\%)^{110}$ . In contrast, it is said that the clients of microfinance are predominantly women in both rural and urban centers. According to the Ghana Micro Finance Institutions Network (GHAMFIN), which is the first network of apex bodies (associations) on microfinance, 85% of the clients under the schemes of the member associations are women.

Evidence from the urban informal sector indicates that the effect of cash is more powerful for women who operate businesses with higher profit than those who operate subsistence-level enterprises. Also, women increase their profits when assistance is given in-kind such as equipment and materials, because women, especially those with lower profits, appear to spend the cash on household expenditures. If access to microfinance is necessary to foster business development especially among poor subsistence-level female enterprises, microfinance institutions may be suggested to adopt a similar strategy of providing assistance in kind. It is also pointed out that microfinance programs may be ignoring male-owned small-scale enterprises with a need for more capital<sup>111</sup>.

#### [Child labor]

The Children's Act prescribes that the minimum age at which a person can be employed is 15 years. According to the GLSS 5, about 13% of children aged 7 to 14 are in the labor force (14% for boys and 12% for girls). Nearly six times as many male and three times as many female children in rural areas are economically active than the respective children in urban areas. The majority (89.3%) of these children are engaged in agriculture in rural areas, while in urban areas children are engaged in two main activities, agriculture and trade.

 <sup>&</sup>lt;sup>107</sup> Consultative Group to Assist the Poor (2011) "Technology Program Country Note Ghana", p.4
 <sup>108</sup> ibid., p.2

<sup>&</sup>lt;sup>109</sup> World Bank (2005), "Comparative Review of Microfinance Regulatory Framework Issues in Benin, Ghana and Tanzania", p.11. Out of 1.5 million members and depositors, less than a third have loans.

<sup>&</sup>lt;sup>110</sup> World Bank (2012) "The Little Data Book on Financial Inclusion 2012", p.66

<sup>&</sup>lt;sup>111</sup> Fafchamps, M. et al. (2011), "When is Capital Enough to Get Female Enterprises Growing? Evidence from a Randomized Experiment in Ghana"

# 4. Gender Mainstreaming in JICA's Projects

The objective of reviewing JICA's projects in this Gender Country Profile is to draw lessons learned on gender mainstreaming in their planning and implementation phases, which are to be utilized for formulation and implementation of more gender-sensitive projects in the future. For this objective, the following projects in respective sectors were selected to be reviewed:

Project	Priority Area/ Sector
Project for Strengthening Operational Capacity of Prevention of	Health
Mother-to-Child Transmission of HIV (PMTCT)	
Project for Institutional Capacity Development of the Civil Service	Capacity Development of
Training Centre	Administrative and Financial
	Management
Project for Strengthening the Capacity of INSET Management	Science/ Mathematics Education
Project on Sustainable Development of Rain-fed Lowland Rice Production	Agriculture
The Study on Comprehensive Urban Development Plan for Greater Kumasi	Infrastructure

The major findings from the review are as follows:

#### (1) Importance of incorporating the gender perspectives at the planning stage of a project

The *PMTCT* targets pregnant women visiting antenatal and postnatal care and children as beneficiaries as well as health workers. In addition, the importance of gender issues when tackling the HIV epidemic is well understood by the project team and other stakeholders. Therefore, the gender perspectives are incorporated into each of the activities. In other projects, the gender perspectives are not specifically integrated at their planning stage. The target groups (beneficiaries) of these projects are set "households" or "officers", and no gender-disaggregated indicators are set to assess the impact of the projects on men and women respectively. This results, for example in an agricultural project, in women losing processing work that they used to be engaged in as a result of the introduction of an activity aimed at enhancing the "household's livelihood." There is a possibility that this kind of activity may influence the balance of power between men and women in a household.

Gender mainstreaming at the implementing stage of a project may be influenced by the knowledge of and interests in the gender issues among the project team and the Ghanaian counterparts (see the section below about the Ghanaian counterparts). However, when promoting the gender mainstreaming more certainly at all levels of a project, it is vital in the planning stage of a project to incorporate the gender perspectives into the planning of a project, assess the impact of the project on men and women respectively, prepare measures to mitigate the negative impacts of the projects if necessary, and share the plan among the stakeholders of the project.

# (2) Good practices of incorporation of the gender perspectives into the projects

The Study on Comprehensive Urban Development Plan for Greater Kumasi includes several activities/ components which encourage women's participation in the formulation of the urban development plan and contribute to women's empowerment: (a) women's organizations and

prominent women such as queen mothers and market queens are invited to the stakeholders' meetings to reflect their views on urban development to the Plan, (b) planning of public transportation takes into consideration the needs of such groups as women, children and elderly people who have no means of traveling without public transportation services, (c) the study team will propose a new town equipped with day nursery facilities where women live and work, (d) the Plan will include construction of parks and open spaces easily accessed by women and their families. In addition to promoting women's participation in the stakeholders meetings, group discussions with a small number of participants have been organized by the study team to listen to the women's voices. In the early stage of the study, the gender perspectives were not necessarily integrated into the activities; however, in the process of development of the Plan in consultation with the Ghanaian counterparts, the gender perspectives have been taken into account.

The *Project for Strengthening the Capacity of INSET Management*, whose aim is to strengthen an INSET (training of servicing teachers) model for primary school teachers in the core subjects of mathematics and science, has integrated "gender issues" as one of the modules prepared for their training program. Integration of gender issues into the modules was an outcome of a workshop for preparation of those modules, where an officer of the Basic Education Division of the Ghana Education Service was invited as a resource person on gender. It indicates that the Ghanaian counterparts were interested in gender issues from the beginning and took the initiative to integrate gender issues into the modules by inviting a resource person on gender issues. The purpose of integrating gender issues into the modules is to provide newly recruited/ young teachers with an opportunity to think about gender issues found in school environments. Instructions on gender from the Ghanaian counterparts to teachers are specific, such as: not to use only girls' names for people doing the shopping at the market, not to use only boys' names for people engaged in manual labor. The effects of integration of gender issues into the modules have not been measured, however, the results of a survey conducted by the Project indicate that participation in the training program has enhanced the teaching ability of teachers.

The *Project for Institutional Capacity Development of the Civil Service Training Centre* has also integrated gender issues in a training course named "Ethical Leadership Course." When the course was developed in Phase I of the Project, gender issues were not included in the course. As the Ghanaian counterparts as well as the participants of the training course have recognized the importance of gender issues, in Phase II it was integrated into the course contents. Effects of integration of gender issues into the course have not been measured. However, judging from the participants' comments on the course, such as "we recognize the importance of the integration of gender perspectives" or "it is necessary to incorporate gender perspectives into every activity", it seems that the participants' awareness of the gender issues has been enhanced and gender perspectives have been incorporated into their daily duties.

# (3) Ghanaian counterparts are keen to incorporate the gender perspectives into JICA's projects.

Ghanaian counterparts of JICA's projects, for instance, counterparts of the Project for

Institutional Capacity Development of the Civil Service Training Centre, the Project for Strengthening the Capacity of INSET Management and The Study on Comprehensive Urban Development Plan for Greater Kumasi, are keen to mainstream the gender perspectives into not only JICA's projects but also other activities for which they are responsible. Officers at Kumasi requested the study team of *The Study on Comprehensive Urban Development Plan for Greater Kumasi* to integrate the gender perspectives into the urban development plan and the study team has responded to it. The principal of the Civil Service Training Centre mentioned that they are in consultation with the MOWAC on how to incorporate the gender perspectives into the training programs for public servants, though it is not directly related to the JICA project.

One of the reasons for the keen interest in gender issues among the Ghanaian counterparts is that there are a large number of female staff in the public sector in Ghana. The Ministry of Education, which is a counterpart of the *Project for Strengthening the Capacity of INSET Management*, has quite a number of female staff, and 6 out of 10 counterparts of *The Study on Comprehensive Urban Development Plan for Greater Kumasi* are female. Those female counterparts recognize the low status of women in rural areas in Ghana and are motivated to improve their situation. Their interest in gender mainstreaming may have contributed to making JICA's projects more gender-sensitive.

#### 5. Gender Issues and Mainstreaming Gender When Planning Future Interventions in Ghana

#### 5.1 Support for Women's Empowerment

As discussed earlier, in Ghana, women's decision-making is traditionally limited to the social aspects of the family and male members of the family are the key power holders. However, as survey results show, women's decision-making power increases as women's financial contributions to a household and educational levels increase. It indicates that women's economic empowerment and empowerment through education will contribute to promoting women's participation in decision-making in a household.

In urban areas, the majority of economically active women make livelihoods by operating various small-scale services and trade in the urban informal sector. Thus, promotion of growth of the informal sector is of great importance to enhance the economic situation of women in urban areas. According to the NBSSI, female clients who are provided assistance by the NBSSI, in general, set up in small-scale businesses in food processing, textiles and services such as hairdressing. In the urban informal sector, the profit margin of the small-scale businesses is very low due to keen competition among the people engaged in the same activity. The growth of women-owned small-scale businesses requires access to financial resources and markets, upgrades of the managerial skills, quality improvements in their products as well as an enabling environment for growing their businesses. In addition, support to the informal sector needs to be oriented to identify the businesses that have the potential to grow and provide women with the necessary measures to enter such businesses.

In rural areas, the majority of women are engaged in agriculture, agro-processing (fish-processing in fishing communities) and marketing of agricultural produce. As discussed earlier, men and women play different roles in the production, harvesting, processing and marketing in agriculture. It indicates that interventions in agriculture might have different impacts on men and women. Modernization of agriculture is one of the Ghana's national development themes; however, attention should be paid to the impacts of such a national policy on women's economic activities and livelihoods. Mechanization or introduction of new technologies could undermine women's roles that they used to play in agriculture. When planning interventions in the agricultural sector, it is critical for project planners to pay particular attention to gender-based division of labor and disparities in access to new technologies and resources, and take necessary measures to mitigate the negative impacts on women.

The focus on education for girls has shifted from primary education to junior high school education, since Ghana is close to achieving the target of gender equality in enrollment at the primary level. There are strong relationships not only between women's decision-making position in a household and the level of education, but also between childhood mortality and nutritional status of children and mother's level of education. Further assistance is needed for girls to stay in school and complete their education at the junior high school level.

#### 5.2 Integration of the Gender Perspectives at the Planning Stage

When planning interventions targeting women and girls such as girls' education and maternal health care, the importance of including gender mainstreaming in the plans is well understood by all the stakeholders. The challenge for program/ project designers is promoting gender mainstreaming in the programs/ projects that are not explicitly aimed at gender equality and women's empowerment. The majority of the programs/ projects in the priority areas of JICA's assistance in Ghana, namely agriculture (rice cultivation), infrastructure (electricity and transport), health and science/ mathematics education, capacity development of administrative and financial management, fall within this category of programs/ projects.

By reviewing JICA's projects implemented in Ghana, it is found that when promoting the gender mainstreaming more certainly at all levels of a project, it is vital in the planning stage of a project to incorporate the gender perspectives into the planning of the project and share the plan among the stakeholders of the project. When any program/ project is planned, it is necessary to conduct gender analysis in the respective areas of interventions so as to identify the different roles played by men and women and gender-based disparities in access to and control over resources, and mainstream the gender perspectives appropriately into the programs/ projects. The findings of the gender analysis might be incorporated into the Project Design Matrix (log frame) as indicators, outcomes or specific activities to respond to the needs of women and men. Even if the beneficiaries of the intervention is a set household, it makes it possible to monitor the impacts of the intervention on each member of the household. A gender-sensitive plan will make the program/ project more gender-sensitive at the implementation and monitoring stage.

#### 5.3 Ghanaian Counterparts as Gender Resource Persons

Under the decentralized government system, line ministries and the District Assemblies have assigned Gender Desk Officers (GDOs) at the regional and district levels. Although it is pointed out that the capacity of GDOs is weak in general, there is a possibility that they could be gender resource persons to the projects implemented at the regional and district levels. As mentioned earlier, the MOWAC is preparing the MOUs on the accountability framework for Gender Desk Officers at the district level. Once the MOUs are signed between the MOWAC and the line ministries and District Assemblies, the capacity and responsibilities of the GDOs will be strengthened and it is expected that the GDOs will provide the projects with the gender perspectives from the locally available point of view.

# 6. Gender-related Strategies and Projects by Other Major Donors and NGOs

# 6.1 Major Bi-lateral Donors' Strategy on Gender

## (1) Department for International Development (DFID)

Under the Strategic Vision for Girls and Women, four pillars for action were identified: delay first pregnancy and support safe childbirth, get economic assets directly to girls and women, get girls through secondary school, and prevent violence against girls and women. DFID also identified and have supported actions for improvements in the enabling environment which underpins the above-mentioned four pillars. These include: locally-led action for social change, support to women and girls' participation in national and local decision making processes, improved legal frameworks that protect women's and girls' rights, ensuring national policies, planning and budgeting processes respond to women's and girls' needs. In addition, DFID has mainstreamed gender across all other areas of program. The country office in Ghana has formulated and implemented the gender-related projects based on the strategies above<sup>112</sup>.

# (2) Canadian International Development Agency (CIDA)

Gender equality, environment and governance are cross-cutting issues in CIDA's programs and projects. The gender equality policy focuses on human rights, access to and control over resources and participation in decision-making. Thematic focuses of CIDA in Ghana are food security and children and youth in respect of access to safe drinking water. The gender perspectives are integrated in the projects in those sectors<sup>113</sup>.

# 6.2 List of Gender-related Projects by Other Major Donors and NGOs

Project/ Program	Implementing Agency	Donor Agency	Duration	Budget	Area
Gender/ Assistance to the Mi	nistry of Gender, C	hildren and So	cial Protection		
The 6 <sup>th</sup> Country Program	Ministry of	UNFPA	2012-2016	US\$ 51.0m	Gender Equity
	Gender,			(including	
	Children and			health sector)	
Capacity development of	Social	CIDA	Ongoing	NA	Capacity
MOWAC	Protection				Development
Gender Responsive Skills	(former	AfDB	2009-	UAC (UA:	Capacity
& Community	MOWAC)			Unit of	Development,
Development Project				Account)	Vocational skills
				9,400,000	training services
Strengthening of GRB and		UNW	2013	NA	Strengthening of
Monitoring Unit					GRB and
					Monitoring Unit
Capacity building for the		DFID	Waiting for the approval		Capacity building
National Survey on DV					of Research Unit
					of DV Secretariat
Women's Participation in	Women in Law	DFID	2010-2013	€ 434,330	Women'
Politics	and				participation in
	Development in				decision making
	Africa (NGO)				in local and

<sup>112</sup> Interview and data obtained from the DFID in January 2013

<sup>113</sup> Interview and data obtained from the CIDA in January 2013

Project/ Program	Implementing Agency	Donor Agency	Duration	Budget	Area
	ngoney				national government structure
Education Girls Unite and		DEID	2011 2016	017 170 000	
Participatory Approaches to Students Success (PASS) in Ghana	Ministry of Education, Camfed (NGO)	DFID	2011-2016	£17,470,000	Girls' education in secondary school
Take Home Ration for Girls in Basic Education	WFP	District Assembly Common Fund	2000-2016	US\$ 19.6m	Attendance and completion of girls in basic education
Transition and Persistence Project	Plan Ghana	USAID	2010-2013	US\$ 8m +1.6m (matched by Plan)	JHS enrolment and completion especially among girls
Health			-	-	
The 6 <sup>th</sup> Country Program	NA	UNFPA	2012-2016	US\$ 51.0m	Reproductive Health, HIV/ AIDS
The Country Program 2012-2016	NA	UNICEF	2012-2016	US\$ 183m (including education and child protection)	IMCI, PMTCT, Child health, Nutrition, sanitation and water
Adolescent Reproductive Health in Ghana	NA	DFID	2011-2016	€17,100,000	Reproductive health needs of adolescents age
Multi Annual Strategic Plan 2012-2015	NA	Embassy of Kingdom of Netherland	2012-2015	NA	Sexual and Reproductive Health and Rights
Project for improving Reproductive Health in Kwahu East	JOICFP (NGO)	Government of Japan	2011-2014	NA	Reproductive Health
Agriculture and Rural Devel		T	I	L :	Γ
Greater Rural Opportunities for Women (GROW)	Mennonite Economic Development Associates	CIDA	2012-2017	\$ 18,500,000	Agricultural development, especially for women
Agricultural Development and Value Chain Enhancement (ADVACNE) Project	ACDI/ VOCA	USAID	2011- Ongoing	NA	Food security and competitiveness in the domestic markets
Economic activities	-				
Business Sector Advocacy Challenge Fund (BUSAC) II	COWI	USAID, EU, DANIDA	2010- Ongoing	NA	Empowerment of private sector institutions
Market Development in the North	NA	DFID	2013-2017	€ 530,000	Market access for the poor and increase in trade
Others		1			
Strengthening Transparency Accountability & Responsiveness in Ghana (STAR)	CSOs and NGOs	DFID, DANIDA, USAID, EU	2010-2015	US\$ 360,000 (STAR Fund)	Governance (Gender equality component in each activity)

# 7. Gender Information Sources

# 7.1 List of Gender-related Organizations

Name of Organization	Area of responsibility/ Activity	Contact address
Ministries and Government Or	· · · · · · · · · · · · · · · · · · ·	
Ministry of Gender, Children	• Formulation of gender and children	Mr. Gershon Kumor
and Social Protection (former	specific policies and guidelines	Chief Director,
Ministry of Women and	• Domestic Violence (Secretariat)	P.O. Box M186, Accra
Children's Affairs:	• Human Trafficking (Secretariat)	Tel +233-30-2688183
MOWAC)	• Gender Responsive Budgeting, etc.	
Girls' Education Unit (GEU),	• Coordination to facilitate, network,	Ms. Matilda Bannerman-Mensha
Ghana Education Service	influence, focus, plan and evaluate, and	Director, GEU,
	collect and disseminate data and good	Literacy House, P. O. Box M45,
	practices on girls' education	Accra,
		Tel +233-50-9041923
Women in Agriculture	Improved nutrition interventions	Ms. Victoria Aniaku
Development Directorate	• Value addition to agricultural produce	Assistant Director, WIAD,
(WIAD), Ministry of Food	• Food safety along the agricultural value	P.O. Box MB 37, Accra,
and Agriculture	chain	Tel +233-(0)21662253
C	• Gender mainstreaming of all	
	agricultural policies, programs and	
	projects	
National Board for Small	• Facilitating the improvement of the	Ms. Anna Armo-Himbson
Scale Industries (NBSSI)	environment for small-scale business	Director, Entrepreneurship
	creation and growth	Development Department,
	• Facilitating small-scale enterprises	(There is the Women
	access to business development	Entrepreneurship Development
	services	Department in the NBSSI.)
	<ul> <li>Providing advisory and counseling</li> </ul>	7 Gamal Abdul Nasser Extention
	services	Ministries, Accra
	• Promoting group formation and	Tel +233-(0)21661393
	strengthening associations	
Bi-lateral Agencies		
DFID Ghana	• Delaying first pregnancy and support	Ms. Fauzia Issaka
	safe childbirth	Gender Equality and Social
	• Getting economic assets directly to	Development Advisor,
	girls and women,	British High Commission, Osu
	• Getting girls through secondary school	Link off Gamel Abdul Nasser
	• Preventing violence against girls and	Avenue, P.O. Box GP 296
	women	Tel: +233-(0)302-253243 ext 1522
CIDA	Capacity building	Ms. Francesca Pobee-Hayford
	• Food security	Senior Gender Advisor,
	Children and youth	Program Support Unit,
		38 Independence Avenue,
	<u> </u>	Tel: +233-(0)30-7011729 ext 1216
NGOs		
JOICFP	Reproductive health	Ms. Ryoko Nishida
	• Family planning	Project for Strengthening
	Prevention of Mother-to-Child	Operational Capacity of Prevention
	Transmission of HIV	of Mother-to-Child Transmission of
		HIV
Others		
Ghana Micro Finance	• Network organization of apex bodies	Mr. Moses N. Oppong
Institutions Network	(associations) on microfinance	Business Development Officer,
(GHAMFIN)		47 Blohum Street, Dzorwulu, P.O.
		Box AH 1392
		Tel+233-302-769961

# 7.2 List of Gender-related Reports and References

Title	Author	Publisher/ Source	Year
General Situation of Women and Government Polic	cy on Gender		
National Gender and Children Policy	MOWAC	MOWAC	NA
Sector Medium Term Development Plan 2010-2013	MOWAC	MOWAC	
Statement of Policy on the Implementation of	Government of Ghana	Government of	NA
Proposals and Recommendations for Affirmative		Ghana	
Action towards Equality of Rights and Opportunities			
for Women in Ghana			
Rural Women and The MDGs 1 and 3: Ghana's	MOWAC	Ghana's Side	2012
Success and Challenges (Technical Paper)		Event, 56 <sup>th</sup> CSW,	
		New York, 29 <sup>th</sup>	
		February, 2012	
Ghana Human Development Report 2007/ 2008	UNDP Ghana	UNDP Ghana	2007
A Situation Analysis of Ghanaian Children and	UNICEF and MOWAC	UNICEF and	2011
Women		MOWAC	
2010 Population and Housing Census	GSS	GSS	2012
Education			
A National Vision for Girls' Education in Ghana and	Girls' Education Unit	GEU	2002
a Framework for Action	(GEU)	677V	
Gender Education Strategic Plan 2012-2017 (draft)	GEU	GEU	2012
What Works in Girls' Education in Ghana – A	Camfed Ghana	DFID and	2011
critical review of the Ghanaian and international		Ministry of	
literature	Education Management	Education	Variana
Statistical data in education	Education Management	Ministry of Education	Various
	Information System (EMIS)	Education	years
Health			
Health Sector Gender Policy	Ministry of Health	Ministry of Health	2009
Ghana Maternal Health Survey 2007	Ghana Health Service	GHS	2009
Shaha Matemai Heatai Suivey 2007	(GHS)	OIID	2007
Ghana Demographic and Health Survey 2008	GSS, GHS and ICF	GSS, GHS and	2009
	Macro	ICF Macro	
MDG Acceleration Framework and Country Action	Ministry of Health and	Ministry of Health	2011
Plan – Maternal Health	UNDP	and UNDP	
Agriculture and Rural Development			
Gender and Agricultural Development Strategy	Ministry of Food and	Ministry of Food	2000
	Agriculture	and Agriculture	
Gender and Governance in Rural Services: Insights	World Bank and	World Bank and	2010
from India, Ghana and Ethiopia	International Food	International Food	
	Policy Research	Policy Research	
	Institute	Institute	
Employment and Economic Activities			
Gender Inequalities in Rural Employment in Ghana –	FAO	FAO	2012
Policy and Legislation			
Gender and Economic Growth Assessment for Ghana	International Finance	International	2007
2007	Corporation and	Finance	
	MOWAC	Corporation and	
		MOWAC	
The Informal Sector in Ghana	Clara Osei-Boateng and	Friedrich Ebert	2011
	Edward Ampratwum	Stiftung	

# 8. Definitions

Access and	Productive, reproductive and community roles require the use of resources. In general, women
Control	and men have different levels of both access (the opportunity to make use of something) to the
	resources needed for their work, and control (the ability to define its use and impose that
	definition on others) over those resources.
	(http://info.worldbank.org/etools/docs/library/192862/introductorymaterials/Glossary.html)
Affirmative	Specific actions in recruitment, hiring, upgrading and other areas designed and taken for the
Action	purpose of eliminating the present effects of past discrimination, or to prevent discrimination.
	(http://www.evansville.edu/offices/diversity/downloads/Diversity%20Dictionary.pdf)
Empowerment	Empowerment is the process of enhancing the capacity of individuals or groups to make
-	choices and to transform those choices into desired actions and outcomes. Central to this
	process are actions which both build individual and collective assets, and improve the
	efficiency and fairness of the organizational and institutional context which govern the use of
	these assets.
	(http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTPOVERTY/EXTEMPOWER
	MENT/0,,contentMDK:20272299~menuPK:486417~pagePK:148956~piPK:216618~theSiteP
	<u>K:486411,00.html</u>
Functional	A person is functionally literate who can engage in all those activities in which literacy is
Literacy	required for effective functioning of his/ her group and community and also for enabling him/
Enteracy	her to continue to use reading, writing and calculation for his own and the community's
	development.
	(http://www.unesco.org/education/GMR2006/full/chapt6_eng.pdf)
Gender	
Gender	Gender refers to the social attributes and opportunities associated with being male and female
	and the relationships between women and men and girls and boys, as well as the relations
	between women and those between men. These attributes, opportunities and relationships are
	socially constructed and are learned through socialization processes. They are context/
	time-specific and changeable.
~ .	(http://www.un.org/womenwatch/osagi/conceptsandefinitions.htm)
Gender	Gender analysis refers to the variety of methods used to understand the relationships between
Analysis	men and women, their access to resources, their activities, and the constraints they face
	relative to each other. Gender analysis provides information that recognizes that gender, and
	its relationship with race, ethnicity, culture, class, age, disability, and/or other status, is
	important in understanding the different patterns of involvement, behavior and activities that
	women and men have in economic, social and legal structures. Gender analysis is an
	essential element of socio-economic analysis. A comprehensive socio-economic analysis
	would take into account gender relations, as gender is a factor in all social and economic
	relations. An analysis of gender relations provides information on the different conditions that
	women and men face, and the different effects that policies and programs may have on them
	because of their situations. Such information can inform and improve policies and programs,
	and is essential in ensuring that the different needs of both women and men are met. At the
	local level, gender analysis makes visible the varied roles women, men, girls and boys play in
	the family, in the community, and in economic, legal and political structures. A gender
	perspective focuses on the reasons for the current division of responsibilities and benefits
	and their effect on the distribution of rewards and incentives. (http://www.international.gc.ca/devel
	opment-developpement/priorities-priorites/ge-es/gender analysis-analyse comparative.aspx?lang=eng)
Gender	Gender Division of Labor is the result of how each society divides work among men and
Division of	among women according to what is considered suitable or appropriate to each gender.
Labor	(http://iite.unesco.org/gender_equality/PublicationsGuidelinesPriorityGenderEquality.pdf)
	The Gender Empowerment Measure (GEM) is a measure of agency. It evaluates progress in
Gender	advancing women's standing in political and economic forums. It examines the extent to
Empowerment	advancing women's stationing in political and economic forums. It examines the extent to

	I
Measurement	which women and men are able to actively participate in economic and political life and take
(GEM)	part in decision-making. While the Gender-related Development Index (GDI) focuses on
	expansion of capabilities, the GEM is concerned with the use of those capabilities to take
	advantage of the opportunities of life.
	(http://classguides.lib.uconn.edu/content.php?pid=57374&sid=420303)
Gender	Gender equality refers to the equal rights, responsibilities and opportunities of women and
Equality	men and girls and boys. Equality does not mean that women and men will become the same
	but that women's and men's rights, responsibilities and opportunities will not depend on
	whether they are born male or female. Gender equality implies that the interests, needs and
	priorities of both women and men are taken into consideration, recognizing the diversity of
	different groups of women and men. Gender equality is not a women's issue but should
	concern and fully engage men as well as women. Equality between women and men is seen
	both as a human rights issue and as a precondition for, and indicator of, sustainable
	people-centered development.
	(http://www.un.org/womenwatch/osagi/conceptsandefinitions.htm)
Gender Equity	Entails the provision of fairness and justice in the distribution of benefits and responsibilities
	between women and men. The concept recognizes that women and men have different needs
	and power and that these differences should be identified and addressed in a manner that
	rectifies the imbalances between the sexes.
	(http://info.worldbank.org/etools/docs/library/192862/introductorymaterials/Glossary.html)
Gender	The Gender Inequality Index (GII) was introduced in the Human Development Report 2010.
Inequality	The GII reflects women's disadvantage in three dimensions-reproductive health,
Index (GII)	empowerment and the labor market—for as many countries as data of reasonable quality
	allow. The index shows the loss in human development due to inequality between female and
	male achievements in these dimensions. It ranges from 0, which indicates that women and
	men fare equally, to 1, which indicates that women fare as poorly as possible in all measured
	dimensions. The health dimension is measured by two indicators: maternal mortality ratio and
	the adolescent fertility rate. The empowerment dimension is also measured by two indicators:
	the share of parliamentary seats held by each sex and by secondary and higher education
	attainment levels. The labor dimension is measured by women's participation in the work
	force. The Gender Inequality Index is designed to reveal the extent to which national
	achievements in these aspects of human development are eroded by gender inequality, and to
	provide empirical foundations for policy analysis and advocacy efforts.
C	(http://hdr.undp.org/en/statistics/gii/)
Gender	Gender Mainstreaming is a globally accepted strategy for promoting gender equality.
Mainstreaming	Mainstreaming is not an end in itself but a strategy, an approach, a means to achieve the goal of gender equality. Mainstreaming involves ensuring that gender perspectives and attention to
	the goal of gender equality are central to all activities - policy development, research,
	advocacy/ dialogue, legislation, resource allocation, and planning, implementation and
	monitoring of programs and projects.
	(http://www.un.org/womenwatch/osagi/gendermainstreaming.htm)
Gender Parity	Ratio of girls to boys (gender parity index) in primary, secondary and tertiary education is the
Index (GPI)	ratio of the number of female students enrolled at primary, secondary and tertiary levels of
	education to the number of male students enrolled at primary, secondary and tertuary levels of the
	population structure of the appropriate age groups, the Gender Parity Index (GPI) of the Gross
	Enrolment Ratio (GER) for each level of education is used. A GPI of 1 indicates parity
	between the sexes; a GPI that varies between 0 and 1 typically means a disparity in favor of
	males; whereas a GPI greater than 1 indicates a disparity in favor of females.
	(http://mdgs.un.org/unsd/mdg/Metadata.aspx?IndicatorId=9)
Gender-related	The Gender-related Development Index (GDI) measures achievement in the same basic
Development	capabilities as the Human Development Index (HDI) does, but takes note of inequality in
	1

Index (CDI)	achievement between women and man. The methodology used impresses a nonelty for
Index (GDI)	achievement between women and men. The methodology used imposes a penalty for
	inequality, such that the GDI falls when the achievement levels of both women and men in a
	country go down or when the disparity between their achievements increases. The greater the
	gender disparity in basic capabilities, the lower a country's GDI compared with its HDI. The
	GDI is simply the HDI discounted, or adjusted downwards, for gender inequality.
	(http://classguides.lib.uconn.edu/content.php?pid=57374&sid=420303)
Gender	Gender-responsive budgeting (GRB) is government planning, programming and budgeting
Responsive	that contributes to the advancement of gender equality and the fulfillment of women's rights. It
Budgeting	entails identifying and reflecting needed interventions to address gender gaps in sector and
(GRB)	local government policies, plans and budgets. GRB also aims to analyze the
	gender-differentiated impact of revenue-raising policies and the allocation of domestic
	resources and Official Development Assistance.
	(http://www.gender-budgets.org/)
Gini Index	Gini index measures the extent to which the distribution of income (or, in some cases,
	consumption expenditure) among individuals or households within an economy deviates from
	a perfectly equal distribution. A Lorenz curve plots the cumulative percentages of total income
	received against the cumulative number of recipients, starting with the poorest individual or
	household. The Gini index measures the area between the Lorenz curve and a hypothetical line
	of absolute equality, expressed as a percentage of the maximum area under the line. Thus a
	Gini index of 0 represents perfect equality, while an index of 100 implies perfect
	inequality. (http://search.worldbank.org/data?qterm=gini%20coefficient&language=EN)
Gross	Number of pupils or students enrolled in a given level of education, regardless of age,
Enrolment	expressed as a percentage of the official school-age population corresponding to the same
Ratio	level of education. For the tertiary level, the population used is the 5-year age group starting
	from the official secondary school graduation age.
	(http://www.uis.unesco.org/Pages/Glossary.aspx?SPSLanguage=EN)
Infant	Infant mortality rate is the probability of a child born in a specific year or period dying before
Mortality Rate	reaching the age of one, if subject to age-specific mortality rates of that period. Infant
	mortality rate is strictly speaking not a rate (i.e. the number of deaths divided by the number of
	population at risk during a certain period of time) but a probability of death derived from a life
	table and expressed as rate per 1000 live births.
	(http://www.who.int/gho/publications/world_health_statistics/WHS2012_IndicatorCompendiu
	m.pdf)
Labor Force	The labor force participation rate is a measure of the proportion of a country's working-age
Participation	population that engages actively in the labor market, either by working or looking for work.
Rate	The labor force participation rate is calculated by expressing the number of persons in the
	labor force as a percentage of the working-age population. The labor force is the sum of the
	number of persons employed and the number of unemployed. The working-age population is
	the population above a certain age – ideally aged 15 and older – prescribed for the
	measurement of economic characteristics.
	(http://kilm.ilo.org/2011/download/kilm01EN.pdf)
Maternal	The maternal mortality ratio (MMR) is the annual number of female deaths from any cause
Mortality Ratio	related to or aggravated by pregnancy or its management (excluding accidental or incidental
Listanty Rullo	causes) during pregnancy and childbirth or within 42 days of termination of pregnancy,
	irrespective of the duration and site of the pregnancy, per 100,000 live births, for a specified
	year.
	(http://www.who.int/gho/publications/world_health_statistics/WHS2012_IndicatorCompendiu
	m.pdf)
National	A national machinery for the advancement of women is the central policy-coordinating unit
Machinery	inside government. Its main task is to support government-wide mainstreaming of a
intucininei y	gender-equality perspective in all policy areas.
	Sender equality perspective in an poney areas.

	(http://www.un-documents.net/bpa-4-h.htm)
Net Enrolment	Total number of pupils or students in the theoretical age group for a given level of education
Rate	enrolled in that level, expressed as a percentage of the total population in that age group.
	(http://www.uis.unesco.org/Pages/Glossary.aspx?SPSLanguage=EN)
Non-formal	Education that is institutionalized, intentional and planned by an education provider. The
Education	defining characteristic of non-formal education is that it is an addition, alternative and/or a
Luuruuon	complement to formal education within the process of the lifelong learning of individuals. It is
	often provided to guarantee the right of access to education for all. It caters for people of all
	ages, but does not necessarily apply a continuous pathway-structure; it may be short in
	duration and/or low intensity, and it is typically provided in the form of short courses,
	workshops or seminars. Non-formal education mostly leads to qualifications that are not
	recognized as formal qualifications by the relevant national educational authorities or to no
	qualifications at all. Non-formal education can cover programs contributing to adult and youth
	literacy and education for out-of-school children, as well as programs on life skills, work
	skills, and social or cultural development.
	(http://www.uis.unesco.org/Pages/Glossary.aspx?SPSLanguage=EN)
Oral	Proportion of children aged 0–59 months who had diarrhea in the last 2 weeks and were
Rehydration	treated with oral rehydration salts or an appropriate household solution (ORT)
Therapy Use	(http://www.who.int/gho/publications/world_health_statistics/WHS2012_IndicatorCompendiu
Rate	m.pdf)
Reproductive	Reproductive health is a state of complete physical, mental and social well-being and not
Health/ Rights	merely the absence of disease or infirmity, in all matters relating to the reproductive system
mountil reights	and to its functions and processes. Reproductive health therefore implies that people are able
	to have a satisfying and safe sex life and that they have the capability to reproduce and the
	freedom to decide if, when and how often to do so. Implicit in this last condition are the right
	of men and women 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 that 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. In line with the above
	definition of reproductive health, reproductive health care is defined as 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, the
	purpose of which is the enhancement of life and personal relations, and not merely counseling
	and care related to reproduction and sexually transmitted diseases.
	(http://www.un.org/esa/population/publications/2003monitoring/WorldPopMonitoring_2002.p
	df)
Total Fertility	The average number of children a hypothetical cohort of women would have at the end of
Rate	their reproductive period if they were subject during their whole lives to the fertility rates of a
	given period and if they were not subject to mortality. It is expressed as children per woman.
	(http://www.who.int/gho/publications/world_health_statistics/WHS2012_IndicatorCompendiu
	<u>m.pdf</u> )
Under 5	Probability of a child born in a specific year or period dying before reaching the age of five, if
Mortality Rate	subject to age-specific mortality rates of that period.
2	(http://www.who.int/gho/health equity/outcomes/health equity child mortality.pdf?ua=1)

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