



Executive Summary

Background. Throughout the 20th century, the debate on women's rights and their role in Afghan society has been closely interlinked with the national destiny. Women not only carry the burden of symbolizing the honor of the family, but often are seen as embodying the national honor as well. Gender has thus been one of the most politicized issues in Afghanistan over the past 100 years, and attempts at reform have been denounced by opponents as un-Islamic and a challenge to the sanctity of the faith and family. During the years of turmoil, concerns about women's security led to the imposition of ever-stricter interpretations of socially acceptable female behavior, supported by the most conservative reading of the holy scriptures. Despite the rhetoric, women suffered from very serious human rights violations throughout the conflict. While it justified itself on the basis of protecting women, the Taliban regime's retrogressive views on gender resulted in the opposite, as women were not allowed to work or receive even basic education, and restrictions on their mobility obstructed their access to medical care.

With the overthrow of the Taliban regime in 2001, Afghanistan embarked upon a new beginning, recognizing anew the contribution of the female half of its society. The Bonn Agreement called for specific attention to the role of women and established a dedicated government structure for this purpose, the Ministry of Women's Affairs. The core strategy for women's advancement is defined as 'gender mainstreaming' in the National Development Framework.

This report is intended to serve as an input for the government's efforts to address gender disparities. *The Role of Women in Afghanistan's Future* synthesizes existing information and

identifies critical areas in which gender-responsive actions are likely to enhance growth, poverty reduction and human well-being. The extent of gender discrimination in Afghanistan is pervasive, and the present report focuses on a few key sectors deemed particularly important for both short- and long-term interventions. Gender gaps are widespread in health, education, access to and control over resources, economic opportunities and power and political voice, and while women and girls bear the direct cost of these inequalities, the negative effects are felt throughout society.

Health. Afghanistan's health indicators are among the worst in the world, particularly in the areas of child health and women's reproductive health. When reconstruction started in 2002, the following indicators were reported: an under-five mortality rate of 257, infant mortality rate of 165, and estimated maternal mortality rate of 16 (per 1,000 live births); rate of chronic malnutrition (moderate or severe stunting) around 50%; and very high rates of disability due to polio, cerebral palsy, and conflict (including landmines). Among children, diarrhea, acute respiratory infections, and vaccine preventable illnesses account for 60% of deaths. Among adults tuberculosis results in an estimated 15,000 deaths per year with 70% of detected cases being among women. Recent surveys have revealed that almost half of all deaths among women of reproductive age are a result of pregnancy and childbirth - and that more than $\frac{3}{4}$ of these deaths are preventable. Life expectancy is estimated at 44.5 years.

A range of factors contributed to this situation, such as the lack of access to basic health facilities - only 40% of the population is in the coverage areas of basic health facilities, and only 9% of rural households surveyed in 2003 reported a health facility in their village;¹ lack of female staff at the existing facilities particularly in rural areas; marked rural-urban disparities in availability of health facilities; and lack of infrastructure (roads and transport) and security that reduce mobility and access. Furthermore, the overall lack of clean drinking water and sanitation facilities contributes to a very high level of water-borne diseases.

The alarming health conditions of Afghan women do not reflect deliberate gender discrimination in households, but rather the result of poverty and the general lack of health facilities, which together with a number of social factors affect women particularly hard.

¹ World Bank, 2004, p. 105

These factors also include low marriage age and very high fertility among Afghan women - in other words, too many and too frequent child-births, without access to proper health care. To this should be added the widespread reluctance to let women seek medical assistance from male health workers, lack of awareness of maternal health care among men and women, and insufficient awareness of health, hygiene and nutrition.

Education. The adult literacy rate in Afghanistan is estimated to be 36%, while for adult women it is estimated at 21%² (2001). A significant leap in school enrollment has taken place during the last couple of years, and more than four million children are now in school, one-third of them girls, but this still represents only a little more than half of school-age children and 40% of girls. These figures hide dramatic regional disparities, with girls representing less than 15% of the total enrollment in nine provinces in the east and south. Besides gender disparity, such figures also reflect the persistent enormous urban-rural gaps. Furthermore, the schools are also struggling with high drop-out rates, which in 1999 were reported as 74% for girls of grades 1-5 as compared to 56% for boys.

The government aims for 100% enrollment as part of the MDG targets for 2015, with girls' enrollment share being 50%. Various obstacles to achieving this goal exist, such as lack of school facilities, in particular girls' schools in rural areas. The problem is even greater for girls' secondary schools, which are very few and scattered. Insecurity, combined with distance and lack of transport, prevents especially girls from accessing school facilities. Lack of female teachers particularly in rural areas; outdated curricula including the portrayal of gender roles; and schools lacking water supply and toilet facilities - all work as obstacles to girls accessing educational facilities. The custom of marrying girls off at a very young age also causes parents to consider school education for girls as unnecessary or even wasteful, and married girls in most cases do not continue their education.

A number of social factors have a negative impact on school enrollment for girls and on their retention rate: The major issue here is security, as political opponents to the present government are targeting girls' schools and carrying out terrorist attacks such as bombing or burning down schools, and campaigning against female education. Poverty is another major

² World Bank, 2004, p. 13. Adult literacy rate relates to the age group 15 and above

factor; although education is free, the cost of school uniform and stationery along with loss of girls' domestic labor/income earning activities are disincentives to enrollment for poor families. Low marriage age in particular leads to low retention rates for girls. Finally, a key issue is parents' negative attitude toward girls' education, particularly that of illiterate fathers'.

Work and Employment. Women play an extremely important role in all dimensions of agricultural production. In certain regions, women's time input equals men's, but in other regions traditions restrict their work to the household where they are involved in crop processing (threshing, cleaning, drying, preserving) and also are in charge of most of the household-based activities (water and fuel collection, cooking, cleaning, sewing, tailoring, weaving, and child rearing). Women play an increasingly important role in opium production, livestock production and processing of dairy products. Most of women's labor is non-monetized, but they make major labor contributions to a number of marketed products, such as dried fruits, poppy, fuel wood, dairy products and handicrafts. Women's contribution to pastoral livestock production both for domestic consumption and for the national and international market is high, which is reflected in a range of key export products, such as carpets, hides, karakul skins and wool. Even when women's domestic production such as carpet weaving forms the main income of the household, they rarely control the marketing of these products, which is most often managed by male relatives or middlemen.

Women's involvement in the formal sector has mainly been urban-based, as civil servants in the health and education sectors, where they had a sizeable presence before the conflict. This was severely disrupted by the strong restrictions on female employment during the Taliban period. Currently, close to one-third of all teachers are female, while an estimated 40% of all basic health facilities lack female staff, a clear constraint to delivering basic services (health, in particular) to women.

The traditional role of women in Afghanistan is a constraint to their more equitable participation in economic activities. In particular, female wage labor is still viewed as a solution of last resort for households in desperate straits, and their wage rates are normally only half the level of men's or less. Women have few marketable skills and generally poor education, with an estimated female literacy rate of 21%. With a fertility rate of 6.3 and a maternal mortality rate of 1,600 per 100,000, live births, reproduction and related health issues occupy much of women's time. The absence of many services and the need to produce

agricultural products for subsistence also imposes an opportunity cost for women who want to join the labor market. Women often lack ownership, control, and access to productive assets such as land, equipment and materials, and their legal right to inheritance is usually bypassed. The lack of working capital (until recently an absence of credit as well) reduces opportunities to start activities that require an initial investment.

Legal Rights and Voice. In Afghanistan, the patrilineal family with its notions of honor and shame defines gender relations in terms of complementarities rather than equality. Since women are the prime bearers of the family honor, their seclusion and chastity reflect the honor of the extended family, which controls (and limits) their relations with the outside world. The purdah norms to which all women must subscribe in varying degrees, on the other hand also require the man to protect and provide for the women of the family - they are his *nang* and *namus* (honor and reputation) and he is responsible for their well-being and for providing for them, if he wants to be counted as a man of honor.

As citizens, Afghan women face constitutional equality but legal inequality. Furthermore, there are great discrepancies between customary law, civil law and Islamic Law - as well as the informal justice system, which tends to grant women even less rights. Years of conflict and violence have further eroded the protection of women's (limited) rights, and a culture of impunity reigns as far as violence is concerned, including violence against women inside and outside the household. The present deteriorating security situation in many parts of the country constitutes the most serious obstacle to promoting rule of law, respect for human rights and introduction of legal reform, which would benefit women more than any other group in society.

The Cost and Consequences of Continued Gender Exclusion. Afghanistan is one of the poorest countries in the world with a GDP of US \$ 4.7 billion and GDP per capita of \$212³ excluding illicit opiate receipts. The overthrow of the Taliban regime and the establishment of relative peace and security in the country give the government in Afghanistan (as well as international agencies working in Afghanistan), a rare opportunity to work towards sustained economic development.

The structure of the economy in 2003 was heavily skewed in favor of agriculture (52% of GDP) with smaller contributions from industry and services at 24% each. *Securing Afghanistan's Future*

³ World Bank, 2004, p. 2

(2004) asserts that an annual economic growth rate of 9% over a 12-year period is needed to achieve adequate progress toward the MDGs while phasing out the drug economy. It is highly unlikely that such a growth rate could be tenable in the long run without making special efforts to involve women in the development process. Clear data on the role of women in each sector are difficult to get, partly because of the general shortage of data, and partly because in Afghanistan, as elsewhere, women's role and contributions to the economy are often invisible and undervalued. However, using the information available, it is possible to demonstrate the key role women play currently as well as point towards potential contribution in the future.

The report suggests that under the prevailing social, economic and political conditions, the main areas of intervention in support of gender equity and gender mainstreaming should be:

- ✓ substantial strengthening of women's employment in the health and education sectors, which will have direct positive effects on girls' school enrollment, women's access to health services, maternal mortality and general child and family health
- ✓ strengthening women's involvement in agricultural and livestock production in the form of extension and training, credit facilities and expanding marketing opportunities
- ✓ development of socially acceptable skilled and unskilled employment opportunities for women in the urban sector in response to the high level of poor female-headed households
- ✓ legal reforms to remove gender inequities within Family Law, in terms of marriage, marriage age, divorce and inheritance
- ✓ collection of adequate sex-disaggregated data across all sectors to document women's and men's involvement and to enable monitoring of future developments and effects of investments

These interventions call for a series of actions, including creation of an appropriate institutional framework to support women's training, market linkages, access to credit and child care facilities, schooling infrastructure including incentives designed to reduce the drop out rate for girls, and maternal health care facilities to be spread out into remote rural areas. Given the current state of data in and about Afghanistan and the limited experience with a variety of actions, it is not possible to quantify precisely the impact of these actions. However, on the basis of other countries' experience, it can be shown that not only would the well-being of women, men and children improve as a result, but that this will also have positive growth outcomes from a country perspective. While it is difficult to quantify the benefits precisely, given the current magnitude of gender disparities it is almost certainly the case that at the margin the direct and indirect benefits of policy actions to address these priority areas are much greater than the costs.