

Ongoing Gender-Based Challenges in Post-2015 Development Agenda: A Comparative Study between Qatar and Arab States

Abdel-Samad M. Ali, Ali A. Hadi Al-Shawi

Abstract—Discrimination against women and girls impairs progress in all domains of development articulated either in the framework of Millennium Development Goals (MDGs) or in the Post-2015 Development Agenda. Paper aspires to create greater awareness among researchers and policy makers of the challenges posed by gender gaps and the opportunities created by reducing them within the Arab region. The study reveals how Arab countries are closing in on gender-oriented targets of the third and fifth MDGs. While some countries can claim remarkable achievements particularly in girls' equality in education, there is still a long way to go to keep Arab's commitments to current and future generations in other countries and subregions especially in the economic participation or in the political empowerment of women. No country has closed or even expected to close the economic participation gap or the political empowerment gap. This should provide the incentive to keep moving forward in the Post-2015 Agenda. Findings of the study prove that while Arab states have uneven achievements in reducing maternal mortality, Arab women remain at a disadvantage in the labour market. For Arab region especially LDCs, improving maternal health is part of the unmet agenda for the post-2015 period and still calls for intensified efforts and procedures. While antenatal care coverage is improving across the Arab region, progress is marginal in LDCs. To achieve proper realization of gender equality and empowerment of women in the Arab region in the post-2015 agenda, the study presents critical key challenges to be addressed. These challenges include: Negative cultural norms and stereotypes; violence against women and girls; early marriage and child labour; women's limited control over their own bodies; limited ability of women to generate their own income and control assets and property; gender-based discrimination in law and in practice; women's unequal participation in private and public decision making autonomy; and limitations in data. However, in all Arab states, gender equality must be integrated as a goal across all issues, particularly those that affect the future of a country.

Keywords—Gender, equity, millennium development goals, post-2015 development agenda.

I. INTRODUCTION

MORE recently, at the United Nations Sustainable Development Summit on 25 September 2015, world leaders adopted the 2030 Agenda for Sustainable Development, which includes a set of 17 Sustainable Development Goals (SDGs) to end poverty, fight inequality and injustice, and tackle climate change by 2030. The SDGs

were recognized as more comprehensive and complex and a springboard for continued progress. The new agenda includes a stand-alone goal on gender equality and the empowerment of women and girls as well as gender sensitive targets in other goals. The new sustainable development agenda builds on MDGs framework drafted in 2000. MDGs were adopted as a set of eight "time-bound, measurable" goals that Member States of the United Nations are committed to achieve by 2015. These goals mainly aimed at eradicating extreme poverty and improving living conditions for both men and women [1]. Arab countries reaffirmed their commitment to these goals in resolutions adopted at the Arab developmental summits (Kuwait 2009, Sharm Al-Sheikh 2011 and Riyadh 2013), and through efforts made by the Arab Social Affairs Council and other Arab specialized ministerial councils and organizations. The new SDGs and broader sustainability agenda aim at completing what the MDGs did not achieve. SDGs go much further to address the root causes of poverty and inequality and the universal need for development that works for all people [2]. Realizing the ideals of the post 2015-agenda and achieving SDGs in the Arab region requires not only a serious shift in political will and a reallocation of resources, both domestically and internationally, but also necessitates collective action in terms of achieving consensus and integrating priority gender issues and gender measurements into the post-2015 framework.

Rhetoric of development argues that it is not possible to reach the development goals reported in the post-2015 development framework in a country or a region if we do not ensure that all people there benefit from interventions for improving the quality of life [3]-[5]. In all countries, certain groups are disadvantaged because of discrimination because of gender and identity. These people are more likely to be poor, they are restricted from contributing to and benefiting from development, and are often the least visible. Development interventions are likely to fail to reach excluded people unless they are specifically designed to do so [6]. To ensure that development agencies are effective in reaching excluded groups, national as well as local policies and programs need to be grounded in a thorough exclusion analysis, which identifies the barriers to inclusion and entry points for change.

Current study undertakes the gender based MDGs to recognize such barriers so that effectively target such excluded groups in post-2015 framework within the Arab countries. Typically, it investigates the third and fifth MDGs as expressions of gender issues that must be included in the post-

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2015 framework to highlight the realities of women and men's living conditions, and to highlight their problems and concerns in Arab states. The inclusion of gender issues in this study is also required to identify causes and effects with regard to outlining gender-sensitive strategies to overcome challenges.

The present study responds to calls raised by 2014 Human Development Report that the development community should start to consider the next set of global goals and how to build on the current progress [7]. It aims at recognizing the progress, which has been made in achieving the third and fifth MDGs in the Arab States. Additionally, it highlights where Arab countries are falling short of meeting their targets. This would also be in line with the analysis by Fukuda-Parr [8]. She draws a distinction between the uses of global goals, such as the MDGs as:

- Normative objectives that define long-term visions. She argues that such normative goals are particularly useful for political leaders in forging a consensus on a common aim of the efforts of many in their community, be it a village or the world.
- Evaluative benchmarks against which progress can be measured.
- Planning targets to frame priorities for policy and for resource allocation.

II. GEOGRAPHIC CONTEXT

This study goes through comparison between Qatar and Arab States in terms of the two gender related MDGs. Qatar represents good geographic study site for investigating the entry points for change in post-2015 agenda. Choosing Qatar is well justified as a model country occupies high rank in most indices of human development and MDGs. To mention such a model may represent a road map for many other Arab countries to achieve the rest of MDGs and the just determined SDGs. As stated in [7], Qatar occupies the first rank among all Arab States in terms of human development index (HDI) (Fig. 1). Qatar's HDI value for 2013 is 0.851, which lies in the very high human development category—positioning the country at 31 out of 187 countries and territories. Between 1980 and 2013, Qatar's HDI value increased from 0.729 to 0.851, an increase of 16.7 percent or an average annual increase of about 0.47 percent. Based upon human development indicators coupled with MDGs reports, Qatar represents good geographic study site for investigating the entry points for change in post-2015 agenda.

Despite persistent progress in HDI indicators, Qatar needs to spend much effort in terms of Gender Inequality Index (GII) that reflects gender-based inequalities in three dimensions – reproductive health, empowerment, and economic activity. The GII points to the loss in human development because of inequality between female and male achievements in the three GII dimensions. As shown in Fig. 2, Qatar's GII value is 0.524 versus 0.545 for Arab States collectively, ranking it 114 out of 149 countries in the 2013. In Qatar, Qatari women hold 0.1 percent only of parliamentary seats. In addition, 66.7 percent of adult women have reached at least a secondary level of education compared to 59.0 percent of their male counterparts.

Qatari female participation in the labour market is 50.8 percent, which is almost double its counterpart in Arab States (24.7 percent). For every 100,000 live births, 7.0 women in Qatar die from pregnancy related causes, which is better than developed countries; and the adolescent birth rate is 9.5 compared to 43.9 births per 1000 live births for Arab countries.

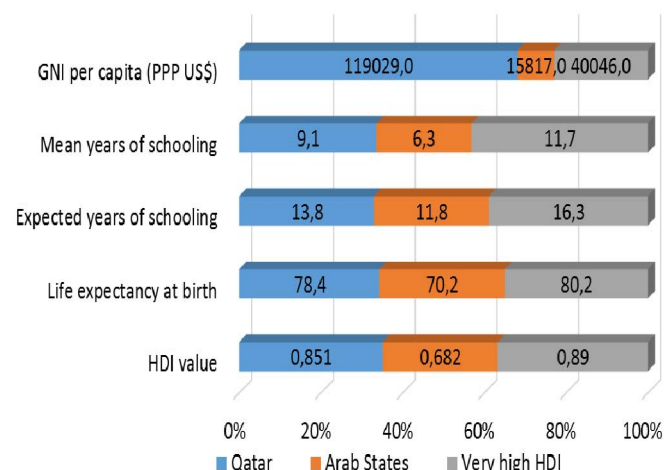


Fig. 1 Qatar's HDI indicators relative to Arab States and Very High Development Countries (2013)

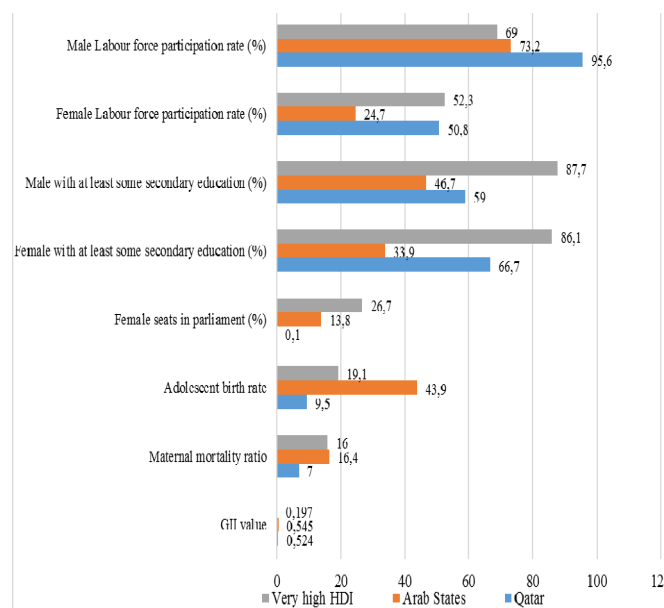


Fig. 2 Qatar's Gender Inequality Index relative to Arab States and Very High Development Countries (2013)

III. RESULTS AND DISCUSSION

The ambitious post-2015 agenda seeks to end poverty by 2030 and promote shared economic prosperity, social development and environmental protection for all countries. The new agenda is based on 17 goals, including a stand-alone goal on gender equality and the empowerment of women and girls as well as gender sensitive targets in other goals. Thus,

gender equality will definitely occupy a crucial interest by the global society in the following years. Engendering the monitoring and reporting process of MDGs in the Arab region requires concerted and collaborative action among different partners in international development organizations, women's NGOs, research centers, think tanks and academia in order to achieve consensus on priority gender issues in the context of MDGs and corresponding gender indicators. In line with these calls and trends, among others, the current study explores the gender inequalities as a first step to bridge the gap between females and males in the three dimensions of the third MDG — education, employment and political participation, in addition to two dimensions of the fifth MDG — maternal mortality and universal access to reproductive health.

A. Goal 3: Promote Gender Equality and Empower Women

1. Gender Parity in Education

The defined target in this MDG is to eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015. Undoubtedly, the education of women and girls has a positive multiplier effect on the progress across all domains of development. In this sense, the targeted MDG is to eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015. The importance of a rights-based approach to achieve gender equity in education is derived from two sources. First, under international law, the obligation to guarantee the right to education without discrimination is immediate, and urgent measures need to be taken in this regard. The Committee on Economic, Social and Cultural Rights (CESCR) has stated clearly that this obligation applies fully and immediately to all aspects of education and covers all forms of discrimination prohibited by international agreement, including gender-based discrimination. Second, international human rights norms oblige States to adopt positive measures to guarantee the right

to gender equality. It is not enough to increase access to education in general in the hope that girls will benefit indirectly. As the Committee points out, the duty to protect means that States must ensure that third parties, including parents and employers do not prevent girls from going to school.

Driven by national and international efforts and the MDG campaign, many more girls in the Arab region are now in school compared with 15 years ago [9]. Gender disparity has narrowed substantially at all levels of education since 2000. However, although there has been strong regional progress towards gender parity in education, there are some obstacles to achieving equal opportunities for women and men especially in secondary education. Many more girls now go to primary school in the region. Gender Parity Index (GPI) for primary education reached 0.95 in 2013 in the Arab countries collectively (Fig. 3). More than 7 million additional pupils were enrolled in primary education in the Arab region in 2013 compared to 1999. This is however still below the parity level, set at 1 with a margin of plus or minus 0.03. Despite significant progress in the Least Developed Countries (LDCs): the Comoros, Djibouti, Mauritania, Somalia, the Sudan and Yemen, GPI remained at 0.85 in 2011, well below the parity level, which emphasizes the need for accelerated efforts. In Qatar, GPI for primary education reached the optimal standard in the same year. Qatar has paid more interest to education as a right as well as an avenue for personal advancement. The country believes that education should improve labour insertion and foster both autonomy and participation in civic life in Qatari society. However, although gender equality in education remains an issue in some places of the Arab region especially LDCs, there is hope that different countries will take a lead from the Qatar's success. According to 2013 Arab MDGs Report, Arab countries still have to enroll around 9 million children to achieve universal primary education.

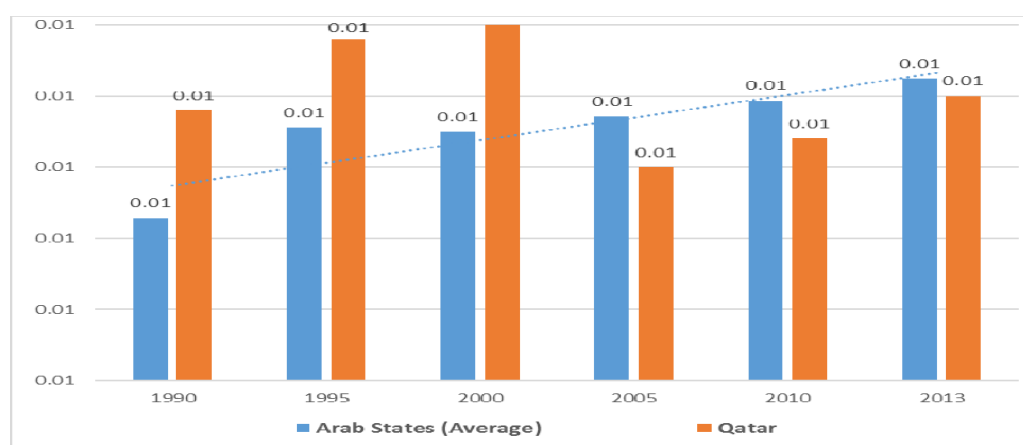


Fig. 3 Gender Parity Index in Primary Level Enrolment

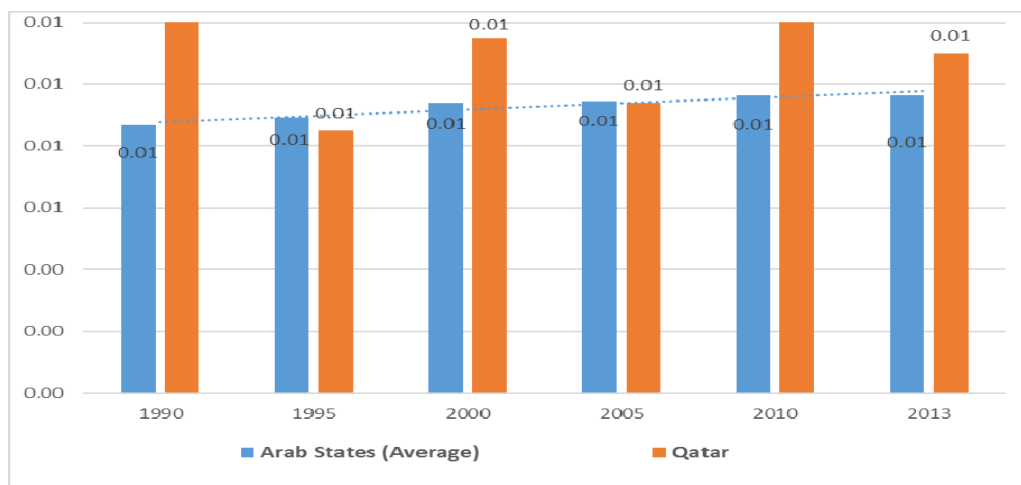


Fig. 4 Gender Parity Index in Secondary Level Enrolment

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In secondary education, gender parity in the Arab region remains well below the parity level at GPI of 0.91. This is mainly attributed to the low level of GPI in LDCs where there are more difficulties with secondary education than with primary education. Girls remain at a disadvantage there due to the higher cost of secondary schooling forcing parents to ration resources among children. In addition, early marriage among the poorest households may play a crucial role that decreases fulfilling gender parity in secondary education in many Arab States. In Qatar, the situation of gender parity in secondary education is completely different. Qatar is a place where boys remain at a disadvantage with a GPI of almost 1.2 in secondary education (Fig. 4). This may be attributed to the Qatari's policy, which puts the issue of women's empowerment at the top of its priorities during the past decade, through institutional arrangements and legislative changes [10]. In addition, a large number of initiatives and procedures have been initiated.

In tertiary education, the Arab regional average is within the accepted range of gender parity at 1.03. However, this result hides large sub-regional differences. While some countries experience many more women than men in tertiary education such as GCC countries, other countries like LDCs face challenges that decrease GPI to 0.43 (Fig. 5). Early marriage may be the most significant obstacle to achieving gender parity in secondary education within LDCs. In Qatar, the tertiary education enrolment rate for women is higher than their partners for men. Men of the tertiary education age in Qatar outnumber women by more than three times, but only three men are enrolled for every five women. GPI reached 5.93 in 2011 and raised to 6.66 in 2013 for tertiary education in the country. This may be attributed to several factors, including men going abroad for tertiary education or choosing a military career.

2. Share of Women in Wage Employment in the Non-Agricultural Sector

While the proportion of women in paid employment outside the agriculture sector has increased globally from 35 percent in 1990 to 41 percent in 2015, their share has actually

decreased in the Arab region from 18 percent to 16.8 percent in the last 20 years. The situation of women in Qatar is less than the average of Arab countries. In Qatar, the participation of women has decreased from about 14 percent during the 1990s to 12.1 percent in 2015. As of 2014, about 52 percent of all working-age Qatari women (aged 15 and above) are in the labour force, compared to 96 percent of men. Despite their progress in education, Arab women face a more difficult transition to paid work and receive lower earnings than men receive. Barriers to women's employment include household responsibilities and cultural constraints. The latter barrier may play the predominant role in Qatar. However, such factors contribute to limiting women's earnings. The gender pay gap remains poorly unexplained, beyond the general notion of gender discrimination as a factor in persistent exclusion. There can also be gender differences in time use, as women may prefer part-time or lower-paying occupations to carry out their care responsibilities at home. Women are more likely than men to work as contributing family workers, who have little or no financial security or social benefits.

3. Women's Political Participation

Although women's political representation has increased, parity remains a distant goal. Since the adoption of the Beijing Platform for Action on women's empowerment in 1995, the global average proportion of women in parliament has nearly doubled. In the Arab region, women's share of parliament seats (female-male ratio) has grown from 0.049 in 2000 to 0.133 in 2011. However, despite the increase of women's representation in parliaments within Arab states, the region is still far behind the rest of the world. The ratio of female to male in Qatar has not witnessed any change with a ratio of 0.001. Qatar has closed none of the political empowerment gaps according to this measure [11]. The low level of Arab women's political participation can be a result of different factors including cultural norms and stereotypes. Arab political systems have long discouraged broad participation regardless of gender in general but for women in particular. To overcome barriers to women's political participation, some

countries introduced gender quotas. Quotas can help increase the number of female parliamentarians, but they should not be the only option. To encourage women's participation,

supporting measures in Arab countries can include training women leaders, designing electoral systems and mobilizing women's vote in political parties.

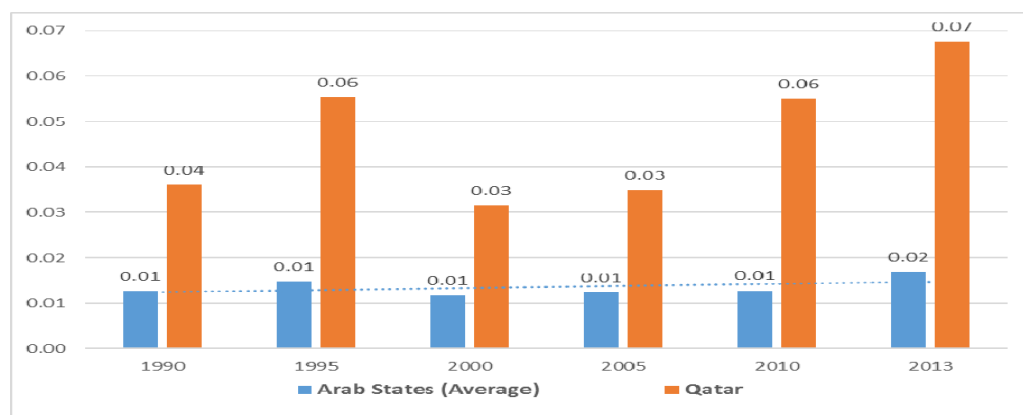


Fig. 5 Gender Parity Index in Tertiary Level Enrolment

B. Goal 5: Improve Maternal Health

1. Target 5A: Reduce by Three Quarters, between 1990 and 2015, the Maternal Mortality Ratio

The commitment of Arab states towards improving maternal health, in addition to their many national programs, have reflected into a large and impressive reduction maternal mortality ratio and in a higher proportion of births attended by skilled personnel. The maternal mortality ratio within the Arab region has dropped by 49 per cent between 1990 and 2013. Such a result is consistent with the global rate, which counts for 45 per cent versus 46 percent in developing countries collectively [12]. The maternal mortality ratio in Qatar has decreased by 45 percent between 1990 and 2013, from 11 to 6 maternal deaths per 100,000 live births, thus achieving more progress than developed regions where the average was about 15 deaths per 100,000 live births in the same year. Qatar has an unmet need in the maternal mortality counts for 3 deaths per 100,000 only to reach the MDG target concerning maternal mortality. Many Arab countries and subregions have made steady progress in improving maternal health, including Mashreq and Maghreb subregions and GCC countries. Despite this progress, everyday many women die during pregnancy or from childbirth-related complications. Regional disparities in all the available measures for maternal and reproductive health, especially in LDCs countries, require more effective targeting. In LDCs countries, a number of attributes underlie maternal mortality, i.e., the lack of access to health care and poor-quality health care. Legal barriers to reliable but safe contraception may also impede progress in those countries. However, experiences from many developing countries prove that most of these challenges are preventable. Proper policies can overcome such complications through proven health-care interventions including antenatal care in pregnancy, skilled care during childbirth and care and support in the weeks after childbirth.

2. Target 5B: Achieve, by 2015, Universal Access to Reproductive Health

To ensure that every birth occurs with the assistance of skilled health personnel is a key strategy for reducing maternal mortality and securing reproductive health. Due to the lack of universal access to maternal healthcare, progress in raising the proportion of births delivered with skilled attendance has been involved in the course of the MDG. World has witnessed significant growing in the proportion of deliveries attended by skilled health personnel through MDGs timeframe increased from 59 percent in 1990 to 71 percent in 2014. In the Arab region, births attended by skilled health personnel have increased from 54 percent in the 1990s to 71 percent in 2014 (Fig. 6). Despite overall increases in the Arab region in the share of births attended by skilled health personnel, large disparities persist between subregions and countries. While some areas such as GCC countries are close to universal births delivered by skilled health personnel, the progress rate in LDCs is almost null. Qatar has already reached the full coverage in births attended by skilled health personnel by the end of last century.

The additional and significant aspect related to women's health is the antenatal care. The World Health Organization argues that the time before birth is significantly important for reaching women with interventions and information that enhance the health, wellbeing and survival of mothers as well as babies. The Arab region has achieved many gains through the adoption of a reproductive health policy. Antenatal care by at least one visit to skilled health personnel has risen in the Arab region from 53 percent during 1990s to 70 percent in 2010 (Fig. 7). However, thorough inequalities in access to and use of reproductive health services persist within and across the Arab countries and subregions. While GCC countries can claim significant achievements mounts to 98 percent in 2010, antenatal care coverage does not exceed 40 percent in LDCs countries. In Qatar, the coverage rate is around 90 percent leaving one in ten babies and their mothers without access to

crucial medical care through childbirth.

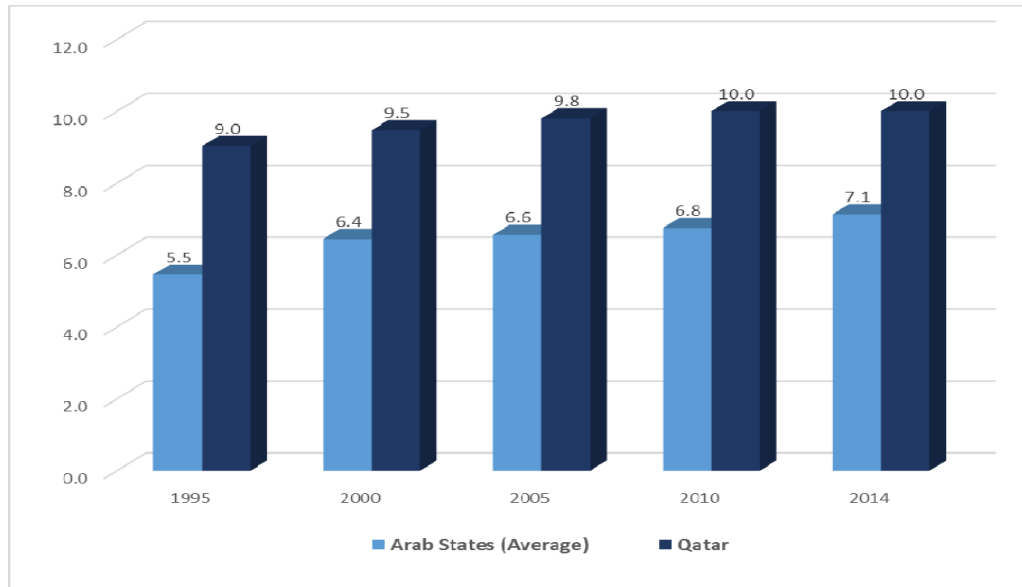


Fig. 6 Births Attended by Skilled Health Personnel, Percentage

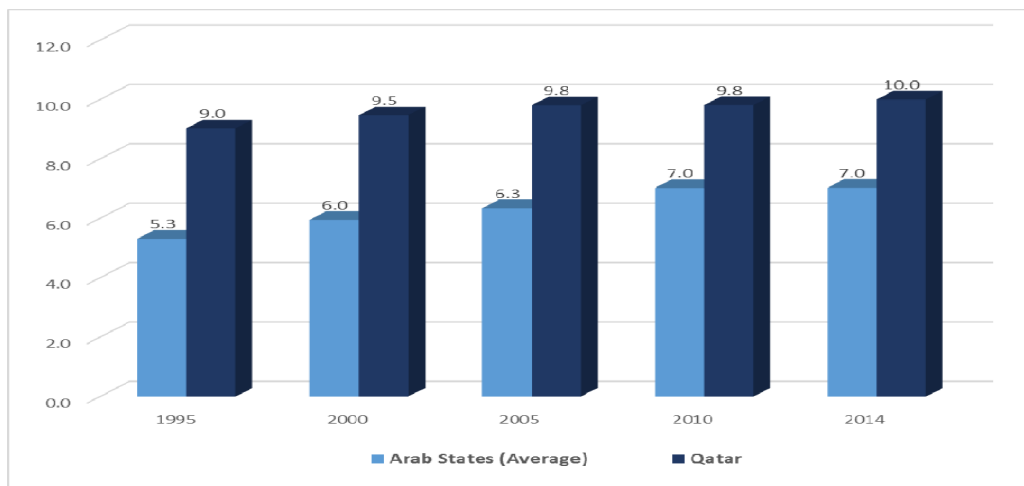


Fig. 7 Antenatal Care Coverage, At Least One Visit, Percentage

C. Main Policy Challenges

As reported by the most recent Arab MDGs report, the region as a whole remains far behind on gender equality [1]. This section briefly describes some main policy challenges that emerge from the trends outlined and which are closely linked to the structural problems confronting the region in advancing towards a more integrated society. These challenges and setbacks must be overcome if there is to be progress towards equality within and across the region. Followings are the gender equity challenges that the majority or Arab subregions and countries face based exclusively on a review of progress towards the quantitative targets established for MDGs.

1. Challenges to Girls' Education

Different challenges to girls' education persist and further

disrupt their education throughout the Arab world especially in LDCs countries, spanning from supply-side obstacles to negative social norms. Such challenges particularly linked with secondary education than with primary education. These obstacles may include: household obligations and child labour; strong cultural norms and gender stereotypes favoring boys' education especially when a family has limited resources; early marriage common among the poorest households; bad classroom environments, where girls may face violence or corporal punishment; lack of sufficient numbers of female teachers; and inadequate sanitation facilities in schools such as lack of private and separate latrines.

2. Challenges to Economic Autonomy

Most of the Arab region faces barriers to the ability of women to generate their own income and control assets and resources or what so called 'economic autonomy'. The

increase in the incidence of poverty among women relative to men is the first contributors to gender inequality where economic autonomy is concerned. In addition, the rise of female-headed households is closely connected to economic autonomy. A revealing paradox appears, if the gender dimension of poverty is specifically examined. Despite the intrinsic reduction in poverty over the past 15 years, households with female heads are still poorer than those headed by men within the Arab region. Legislation, therefore, should ensure non-discrimination in employment, which means not only better legislation but also strengthening of those public instruments responsible for securing compliance.

3. Challenges to Physical Autonomy

Physical autonomy of women means control over their own bodies. It encompasses the right to live a life free of the physical and psychological violence whose main victims are women. Development literature proves that the lack of physical autonomy in a region often follows from the lack of economic autonomy. This is closely linked to the elimination of violence against women in all its forms and to the fulfilment of new target 5B of MDGs on access to reproductive health. Although the Arab countries have recognized the importance of this target to continue moving forward, the implementation gap must be bridged.

4. Challenges to Decision-Making Autonomy

Decision-making autonomy points to the full women's participation in decisions that affect their lives and their community. It implies empowering women through their engagement in critical spheres of representation i.e., the executive, parliament, political parties, local and municipal government. This is very crucial for women because to avoid reproducing gender inequalities. Despite continuous progress, the Arab states still have far to go towards equal gender representation in private and public decision-making. Some Arab countries have applied the quota laws mechanism to empower women in the public sphere, by enabling them to improve their representation in parliaments especially at national levels. Prejudices and stereotypes are at the top barriers that prevent full women's participation in decision making within Arab societies. Violence against women is still one of the region's biggest challenges, denying women's representation and participation in decision-making positions. Fear of violence may prevent many Arab women from seeking employment or running for political office.

5. Challenges to Data Availability

There is a need to strength national capacities to produce data and monitor progress, underpinning achievements with respect to the gender-relevant MDGs or in other domains. The study therefore suggests that the Arab region requires actions that entail the development and dissemination of handbooks and manuals on definitions, concepts and methodologies for more gender-sensitive data collection, analysis and dissemination. Without solid information, we cannot check where we are and what needs to be fulfilled. If Arab cannot get the right numbers, they cannot come out with the right

solutions.

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