



THE ABCs OF IDA—  
KEY ACHIEVEMENTS BY COUNTRY

# Gender



**IDA**

The World Bank's  
Fund for the Poorest  
WORLD BANK GROUP

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**Photography:**

- Cover, Dominic Chavez/World Bank—Students participate in class while listening to class teacher at the Sujat Nagar urban slum school in Dhaka, Bangladesh.
- p. 4, Dominic Chavez/World Bank—Factory workers produce shirts for overseas clients in Accra, Ghana.
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# ABCs OF IDA: GENDER

The world today is a better place for women and girls than it was even a few years ago, but not for everyone and not everywhere. This is especially true in the world's poorest countries, where gaps are great in what women learn, earn, and are taught they can hope to achieve in their lives. As just one example, a 2017 study shows that child marriage is likely to cost trillions of dollars to developing countries by 2030 due to its impacts on fertility, health, education, and earnings, among others.

Empowering girls and women so they survive childbirth, get a better education, and secure better paying jobs is vital to ending extreme poverty by 2030, boosting shared prosperity, and building resilient communities. It can help set countries on a sustainable path toward more diversified economies, higher productivity, and better prospects for the next generation.

Gender equality is a key priority for the International Development Association (IDA), the World Bank's fund for the poorest. IDA works to close gender gaps by getting—and

keeping—girls in school, helping women gain access to land titles and other vital assets, providing women with training in sustainable farming practices, and ensuring they can obtain financing to start businesses. This helps improve the economic prospects for individuals, families and whole economies. IDA's work is consistent with the World Bank Group's Gender Equality Strategy. The strategy focuses on closing persistent gender gaps by leveraging the growing data and evidence about what works in a range of areas—from health and education to access to economic opportunities—all of which pose unique challenges for women in many countries. In addition, under IDA18, projects will prioritize prevention and mitigation of sexual exploitation and abuse, as well as other forms of gender-based violence.

IDA is uniquely suited to support gender equality outcomes, which requires integrating work across multiple sectors and sustaining efforts over long periods. Progress on key gender indicators—such as girls' school enrollment and

completion rates, maternal mortality, labor force participation, and asset ownership—also depends on investments in water, sanitation, transport, energy, financial inclusion, and other key enablers such as technology, fertilizers, and skills training.

While many agencies address gender inequality through education and health, few can match IDA's potential to provide complementary support in infrastructure, private sector development, agriculture, and financial services delivery. Many challenges remain, but IDA's work is yielding results. From 2011 to 2016 for example, more than 23 million pregnant women in IDA countries received prenatal care from a health provider. Life expectancy for women in IDA countries is now three years longer than men. In sub-Saharan Africa, girls' enrollment in primary education increased from 76.1 percent in 2000 to 96.3 percent in 2015.

Since 2012, IDA has helped support more than 10,000 women entrepreneurs in Ethiopia with loans and business training. Many

## By the Numbers Key IDA achievements



# 30 MILLION

pregnant women received prenatal care from a health provider  
2011-2017

of these women were stuck in the "missing middle," needing loans that were too large for microfinance and too small for traditional banks. Today, IDA supports lenders to disburse between \$2 million and \$4 million in loans per month to women entrepreneurs who previously had no access to credit.

As the following examples illustrate, IDA is helping close gender gaps in many countries. Be sure to see our other "ABCs" (achievements by country) of IDA, including our work in Africa and on governance and institution building, climate, and conflict and fragility at [ida.worldbank.org/abcs](http://ida.worldbank.org/abcs).

## AFGHANISTAN

From 2003 to 2015, the National Solidarity program and 31 partners, including IDA, have helped establish 33,400 community development councils to identify and implement small-scale development activities. The councils are democratically elected and half of all seats are allocated to women, giving them the opportunity to participate in decision-making at the village level and to voice their opinions.

## ANGOLA

From 2013 to 2014, 2.3 million people accessed a basic package of health, nutrition, or reproductive health services.

## BANGLADESH

IDA support is helping improve health outcomes in Bangladesh by ensuring essential health services and strengthening health systems. Maternal mortality has been reduced by 40 percent—down to 194 deaths per 100,000 live births in 2010 from 320 deaths in 2000.

## BOLIVIA

From 2008 to 2014, 2,891 families—the majority from indigenous populations—accessed 151,579 hectares of land to grow crops and raise livestock through productive associations, helping increase average household incomes by 39 percent. Some 38 percent of participants in agricultural and administrative skills training were women, and women were active board members in 74 percent of the associations established through the project.

## CAMBODIA

85 percent of births were attended by a trained health professional in 2014, up from 58 percent in 2008. 98 percent of children under one year old received immunizations against diphtheria, pertussis, tetanus and hepatitis B in 2014, up from 84 percent in 2008.



## GHANA

**5.9 million** days of employment were provided to a total of **123,106** unskilled workers, with women making up about **60 percent** of the beneficiaries, from **2010 to 2015**.

## CAMEROON

3.3 million people received access to a basic package of health, nutrition or reproductive health services from 2009 to 2015. Over the same time period, 197,333 children were immunized and 197,333 births were attended by a skilled professional.

## CENTRAL AFRICAN REPUBLIC

327,843 people received access to a basic package of health, nutrition or reproductive health services from 2012 to 2015.

119,000 people were tested for HIV from 2000 to 2012, including more than 10,000 pregnant women, 2,000 teachers, and nearly 7,000 military personnel and their families.

## CÔTE D'IVOIRE

44 percent of HIV-infected pregnant women were receiving antiretroviral treatment in 2012 to reduce the risk of mother-to-child transmission, up from 0 in 2007.



## DEMOCRATIC REPUBLIC OF CONGO

From 2014 to 2015, 3,845 survivors of sexual violence received holistic services, 3,244 received gynecological services, and 58,627 community members participated in sensitization and advocacy activities to improve awareness and knowledge of sexual and gender-based violence.

## DJIBOUTI

From 2012 to 2015, 6,752 pregnant or lactating women, adolescent girls and children under age 5 received basic nutrition services, including provision of micronutrient powders and supplements and growth monitoring for children under two. More than 3,000 people also participated in a public works program that created 179,600 days of employment.

## DEMOCRATIC REPUBLIC OF CONGO

From 2014 to 2015, **3,845** survivors of sexual violence received holistic services, 3,244 received gynecological services, and 58,627 community members participated in sensitization and advocacy activities to improve awareness and knowledge of sexual and gender-based violence.

From 2013 to 2015, 374,272 people benefited from a project to improve the quality of health care in Djibouti. 24,113 pregnant and lactating women, adolescent girls and children under age 5 received basic nutrition services from 2014 to 2015. Over the same time period, 4,139 women gave birth assisted by qualified personnel.



## SRI LANKA

**In 2015, 85 percent of students in Sri Lanka—88 percent of girls and 82 percent of boys—stayed in school through grade 11, an increase from 82 percent overall in 2011.**

## ETHIOPIA

More than 3,000 women are benefiting from a special line of credit to help female entrepreneurs grow their businesses. About \$2

million is being disbursed per month, with the average loan size about \$10,000.

58.5 percent of pregnant women received at least one prenatal care

visit in 2014, up from 43 percent in 2012 and deliveries attended by skilled birth providers increased by more than 50 percent during the same period.

## GHANA

5.9 million days of employment were provided to a total of 123,106 unskilled workers, with women making up about 60 percent of the beneficiaries, from 2010 to 2015.

## HONDURAS

From 2013 to 2015, 14,388 people in targeted neighborhoods, including more than 8,000 women, participated in programs to prevent violence as part of efforts to create safer communities in Honduras. The project is supporting nine initiatives that address psychosocial support, violence prevention, and community-based interventions.

## INDIA

Secondary school enrollment has increased by 10 million from 2009 to 2015. 91.6 percent of elementary students transitioned to secondary school in India in 2014, up from 83 percent in 2009. 89 girls per 100 boys completed grade 10 in 2014, compared to 79 girls for every 100 boys in 2009.

## MADAGASCAR

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762,882 people were provided with access to a basic package of health, nutrition or reproductive health services from 2012 to 2014.

149,376 children were immunized between 2012 and 2015 and 74,593 births were attended by skilled health personnel between 2012 and 2014.

## MALI

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As of end of September 2015, 43,613 households, representing 349,031 people, were benefiting from cash transfers and accompanying measures. More than half of the beneficiaries are women and children.

## MAURITANIA

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In just over a year starting in May 2014, Mauritania completed contracts for 13 planned secondary schools to attract girls to lower secondary education; provided training for nearly 8,800 primary school teachers; printed and distributed 322,000 kits to students in grades 4 and 5; and

began development and printing of more than 1 million textbooks for basic education.

## NEPAL

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From 2011 to 2015, 54,821 people benefited from urban services and infrastructure improvements in Nepal. 45 percent of the beneficiaries were women and 53 percent were from disadvantaged groups.

In 2015, 6 million women received prenatal care during a visit to a health provider, up from 2.6 million in 2010. 1.3 million children had been immunized in 2015, up from 580,000 in 2010.

55.6 percent of births in 2015 were attended by a skilled professional in 2015, up from 28.8 percent in 2009.

The government of Nepal introduced gender-sensitive budgeting, and allocations to activities that are directly supportive of women have steadily increased to 19 percent in the country's 2015 budget.



## NEPAL

**55.6 percent** of births in 2015 were attended by a skilled professional in 2015, up from 28.8 percent in 2009.

## NICARAGUA

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458,557 people, more than half women, benefited from a project to strengthen property rights through improved land titling and registry services from 2012 to 2015. More than 42,000 families have received legal documents for their property.

## NIGER

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1.8 million days of temporary employment were created, of which 477,630 days were for women, between 2011 and 2015.



## PAKISTAN

From 2009 to 2016, **359,887** new borrowers accessed micro-credit loans through the Pakistan Poverty Alleviation Fund. Women made up 78 percent of borrowers.

## NIGERIA

63,350 pregnant women living with HIV received a complete course of antiretroviral prophylaxis to reduce the risk of mother-to-child transmission in 2015, an increase of more than 140 percent since 2010.

## PAKISTAN

5 million households in Pakistan, mostly headed by women, received social safety net payments as of March 2016, up from 2 million in 2009.

From 2009 to 2016, 359,887 new borrowers accessed micro-credit loans through the Pakistan Poverty Alleviation Fund. Women made up 78 percent of borrowers.

## SENEGAL

870,902 hectares of forests in Senegal were being sustainably managed in 2014, up from 400,000 hectares in 2008. The project also led to an increase in charcoal-making revenue going to villages from 6 percent in 2009 to 52 percent in 2013. The project has also helped increase the share of income going to women from 3

percent in 2009 to 12 percent in 2013.

## SOLOMON ISLANDS

From 2010 to 2016, construction of community infrastructure employed 12,000 young people from vulnerable communities and created more than 664,000 days of employment in the Solomon Islands. 60 percent of the people employed were women and 53 percent were between the ages of 16 and 29.

## SRI LANKA

In 2015, 85 percent of students in Sri Lanka—88 percent of girls and 82 percent of boys—stayed in school through grade 11, an increase from 82 percent overall in 2011.

## TAJIKISTAN

37 percent of students enrolled in higher education in Tajikistan in 2015 were female, compared to 28 percent in 2013. The country also saw a 24 percent increase in women who registered for the national university entrance exam from 2013 to 2014.



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From 2013 to 2015, 395,988 days of employment were generated, 91,864 days of which were generated for women.

### **TANZANIA**

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From 2012 to 2016, women made up 54 percent of beneficiaries of a conditional cash transfer program in Tanzania. The program reaches about 1.1 million households.

### **UGANDA**

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170,900 people accessed a basic package of health, nutrition or reproductive health services in Uganda between 2009 and 2014. 961 health personnel received training and 230 health facilities were constructed, renovated or equipped during the same time period.

### **YEMEN**

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From 2013 to 2014, 2.35 million people received cash transfers to alleviate a sharp increase in the poverty rate—from 43 percent in 2009 to 55 percent in 2012 following a crisis in Yemen in 2011. More than half of the recipients were women.



### **TANZANIA**

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CAMBODIA

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