



REPUBLIC OF GHANA

MINISTRY OF GENDER, CHILDREN  
AND SOCIAL PROTECTION

# **ROADMAP FOR STRENGTHENING THE GENDER RESPONSIVENESS OF SOCIAL PROTECTION PROGRAMMES IN GHANA**

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## List of Acronyms

### Entity

BAC	Business Advisory Centre
BCC	Behaviour Change Communication
CBT	Community Base Targeting
COVID-19	Coronavirus Pandemic
CSOs	Civil Society Organisations
DoG	Department of Gender
DOVVSU	Domestic Violence and Victims Support Unit
DSW	Department of Social Welfare
DSWCD	Department of Social Welfare and Community Development
ESF	Environmental and Social Framework
FCDO	Foreign Commonwealth Development Office
GE	Gender Empowerment
GEA	Ghana Enterprise Agency
GBV	Gender-Based Violence
GHS	Ghana Health Service
GNHR	Ghana National Household Registry
GRASSP	Gender-Responsive Age-Sensitive Social Protection
GRM	Grievance Redress Management
GSFP	Ghana School Feeding Programme
GSS	Ghana Statistical Service
IMF	International Monetary Fund
IPV	Intimate Partner Violence
ISS	Integrated Social Services
LEAP	Livelihood Empowerment Against Poverty
LIPW	Labour Intensive Public Works
MASLOC	Microfinance and Small Loans Centre
M&E	Monitoring and Evaluation
MDAs	Ministries, Departments and Agencies

MLGDRD	Ministry of Local Government, Decentralisation and Rural Development
MMDAs	Metropolitan, Municipal and District Assemblies
MoGCSP	Ministry of Gender, Children and Social Protection
NGOs	Non-Governmental Organisations
NHIA	National Health Insurance Authority
NHIS	National Health Insurance Scheme
NSPP	National Social Protection Policy
OECD	Organization for Economic Cooperation and Development
OVC	Orphaned and Vulnerable Children
PMT	Proxy Means Test
PwDs	Persons with Disabilities
SEA/SH	Sexual Exploitation and Abuse and Sexual Harassment
SGBV	Sexual and Gender Based Violence
SP	Social Protection
SPD	Social Protection Directorate
SWCES	Single Window Citizens Engagement Services
SWIMS	Social Welfare Information Management System
UN	United Nation
UNICEF	United Nations Children’s Fund
UNDP	United Nations Development Programme
UNSCR	United Nations Security Council Resolution
WE	Women Empowerment

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We are also enormously appreciative of the support, collaboration, and participation of our stakeholders from the national and subnational levels including flagship social protection programme implementers, civil society organizations, academia, and development partners; your technical input, insights, perspectives, and suggestions enriched and shaped this Roadmap. Thank you for your unwavering support and partnership.

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This collaborative effort underscores our collective commitment to advancing gender equality, protecting vulnerable populations, and building resilient social protection mechanisms in Ghana.

## Foreword

This document is a comprehensive roadmap for Strengthening the Gender and Shock-responsiveness of Ghana's Social Protection System. This roadmap was developed in response to the gap identified in the implementation of social protection systems; the limited gender responsiveness of programmes and to guide how it should be carried out effectively.

The roadmap addresses six key gender and shock-related issues: economic shocks, unpaid care responsibilities, old age vulnerabilities, gender-based violence, teenage pregnancies, child marriages, and underrepresentation in decision-making that were identified through national stakeholder consultations.

The methodology used included the Gender-Responsive Age-Sensitive Social Protection (GRASSP) Framework and the participatory approach adopted –including workshops, focus group discussions, and stakeholder consensus building –guaranteed its national ownership and relevance for the sector.

Ghana's commitment to addressing gender and shock-related issues is evident in the interventions, gaps, and opportunities outlined in the roadmap. It presents strategic adjustments to key social protection programs, focusing on short, medium, and long-term goals.

This roadmap is a pact to build a society where every individual, regardless of gender, enjoys equal opportunities, protection, and dignity. It is our fervent hope that all stakeholders will support the full implementation of the roadmap to ensure that the social protection system better recognizes and responds to the specific needs of women, men, boys and girls.

# 1. Introduction

In September 2021, the UN Secretary-General called for strengthening social protection systems to shield individuals and families from the harsh impacts of the COVID-19 pandemic, adjunct economic recessions, climate shocks, and environmental degradation. These effects are gendered, meaning that women and girls suffer disproportionately from crises and shocks more than men. They experience more financial insecurity during economic shocks, bear the brunt of caregiving responsibilities, vulnerabilities in old age, gender-based violence, teenage pregnancies and child marriage, and limited participation in political decision-making (UN Women and UNDP, 2022). These challenges exposed the weaknesses in social protection systems globally and prompted calls to reform social protection systems to better respond to shocks and recognize the specific needs of women and girls.

In Ghana, these demands build on several pre-pandemic commitments to strengthen the gender and shock-responsiveness of the social protection system. The National Gender Policy outlines the objective of “mainstreaming gender, women’s empowerment and social protection concerns into the national development process to improve the social, legal, civic, political, economic and cultural conditions of the people of Ghana” (Government of Ghana, 2015: 23). The National Social Protection Policy also emphasizes gender mainstreaming and the use of gender-sensitive instruments in programme design, monitoring, data collection, and evaluation. However, the review of the NSPP implementation plan indicates relatively limited progress in the systematic mainstreaming of gender into social protection programming, highlighting the need for critical attention.

To achieve these ambitious commitments, the Ministry of Gender, Children and Social Protection (MOGCSP) together with support from UNICEF have initiated processes towards the development of a roadmap for strengthening the design and implementation of gender and shock-responsive social protection system in Ghana. This process involved 1) a review of evidence on what works, what does not and why in terms of reforming social protection policy processes; 2) participatory actions in the form of zonal and central stakeholder meetings; and 3) a set of expert consultations.

Based on the findings from the evidence review and consultative process, this document proposed a roadmap designed to enhance the Ministry’s work on enhancing gender- and shock-responsiveness of Ghana’s national flagship social protection programs - including The Livelihood Empowerment Against Poverty (LEAP), The Ghana School Feeding Program (GSFP), The National Health Insurance Scheme (NHIS), Labor-Intensive Public Works (LIPW) and Productive Inclusion (PI). To ensure the roadmap is useful and put into practice, the roadmap has been validated in a stakeholder meeting and accompanied by a process engaging representatives of the social protection flagship programs to refine and adjust the roadmap as needed and guarantee it is fit-for-purpose.

The document proceeds in three main sections: Section 2 briefly explains the methodological approach. Section 3 presents the findings in relation to the identified most pressing gender problems as well as opportunities and gaps in the current social protection system in responding to gender-specific poverty and vulnerabilities. Section 4 proposes the way forward for the Ministry, outlining directions and strategies for enhancing key social protection programs, fostering partnerships and collaborations, as well as potential challenges.



## 2. Methodology

**To develop a roadmap towards gender and shock-responsive social protection in Ghana, a twin-track approach was followed, consisting of an evidence-based and a participatory approach.** Annex 1 provides a detailed overview of the involved steps. The evidence-based approach consisted of a screening of a range of evidence and research on what works, what does not and why in terms of strengthening the gender and shock-responsiveness of social protection systems. This included policy process theory, empirical findings, and studies of social protection, gender and shock responsiveness. This evidence review was taken as a starting point for developing our approach and methodology.

The participatory approach included consultations in the form of two zonal workshops in Tamale and Kumasi, and a central workshop in Accra. The objective of the workshops was to provide specialized knowledge inputs, identify context-specific gender and shock-related problems and solutions, and build consensus. Participants included officials from the regional and district levels, and representative of Civil Society Organizations (CSOs) and faith-based organizations. The Tamale workshop had 26 participants and took place on February 13-14, 2023; and the Kumasi workshop involved 29 participants and was held on February 16-17, 2023. The central workshop, which took place on February 22, 2023, included 41 policymakers from relevant Ministries, Departments and Agencies, Development Partners, Regional and District officials, and representatives of CSOs. Additionally, six expert focus group discussions were conducted on May 3-4, 2023, to clarify minor and substantial questions that arose from the zonal and central workshops. Moreover, the roadmap was validated in a national stakeholder meeting on June 7, 2023 and subsequently further refined with input from representatives of social protection flagship programs to ensure its suitability.

The [Gender-Responsive Age-Sensitive Social Protection \(GRASSP\) Framework](#), was leveraged to design the consultative process and analyze findings. Developed by the UNICEF Office of Research-Innocenti in 2020, with support from the FCDO, this framework provides a macro view of the policy process and core components for developing a gender-responsive social protection system. It maps out conceptual linkages between drivers of Gender Inequality, Poverty, and Vulnerability, with interrelated elements of a Gender-Responsive Social Protection System and expected Gender-Responsive and Gender Equality Outcomes while also considering moderating factors and implementation challenges (Kuss et al., 2023). By utilizing this framework, different elements of the process were delineated and discussed, enabling the group to build consensus on the support that should be provided to men, women, boys and girls during normal times and shocks.

## 3. Towards a gender- and shock-responsive social protection system

**A gender and shock-responsive social protection system aims at reducing the deprivation, risks, vulnerabilities, discrimination, and inequality faced by different genders during times of shock as well as during normal times (Atkins et al., 2022; Holmes, 2019; Jones, 2021).** Importantly, the responses can take different forms depending on the prevailing gender problems in a specific country context. While the gender-responsive social protection system focuses on who benefits, engaging with shock-responsive social protection means thinking about when people benefit – namely during shocks. Beyond that, shock-responsive social protection can extend its scope to encompass preventive and protective functions in a non-emergency context. A shock-responsive social protection system can thus be understood as a **system that responds to new vulnerabilities created by sudden events, such as economic**

crisis, the COVID pandemic, climate disasters, or conflict. Therefore, in order to strengthen the gender and shock responsiveness of Ghana's social protection system, a necessary entry point is the identification of the prevailing gender problems and shocks.

### 3.1 Most Pressing Problems

In Ghana, women tend to be severely disadvantaged compared to men. They tend to be poorer (Awumbila, 2006, Wrigley-Asante 2008), lack economic opportunities (Amu, 2005), face heavier burdens on their time (Orkoh, 2022), are less likely to own productive resources (Doss, 2006) and are disadvantaged in access to decision-making compared to men (Bawa & Sanyare, 2013; Opare, 2005). **Given the myriad of challenges, a useful starting point is to identify the most pressing problems for women at different times in the Ghanaian context, based upon consultations.** The consultations suggest the following key gender and shock- related problems in Ghana.

#### Ghana's most pressing gender and shock related problems

1. **Economic shocks:** Women in Ghana bear the brunt of economic shocks due to inequalities in work, opportunities, and resources.
2. **Unpaid care responsibilities:** Ghanaian women shoulder two-thirds to three-quarters of household chores, limiting their engagement in productive activities.
3. **Old age vulnerabilities:** Elderly women face reduced income security, inadequate pensions, and limited access to land, housing, and assets due to lifelong disadvantages and discrimination.
4. **Gender-based violence:** Over a quarter of women in Ghana have experienced physical violence, and about a third have endured sexual violence in their lifetime.
5. **Teenage pregnancies and child marriages:** Ghana has one of the highest rates of adolescent pregnancies in sub-Saharan Africa, leading to detrimental economic, health, and social consequences.
6. **Participation in decision-making:** Women in Ghana are significantly underrepresented in public decision-making, from parliament to local government and community leadership.

#### 1. Economic shocks

Ghana is facing a challenging economic and social situation due to the COVID-19 pandemic and the global economic shocks resulting from the war in Ukraine. This has led to severe fiscal and debt imbalances, high inflation, loss of employment and reduced wages (IMF, 2022; Peter-Brown, 2022). **Women have been disproportionately affected by economic shocks stemming from health pandemics, food crises, and global conflicts due to inequalities in access to decent work, opportunities, and resources.** According to UNICEF (2021) gender inequalities in employment and household income have been exacerbated following the COVID-pandemic. This is because women tend to have lower wages than men and are more likely to work in low-paying or low-skilled jobs. In Ghana, 90.9% of all women work in the informal sector, such as subsistence agriculture and small-scale production aggregation and marketing, making them vulnerable to financial crises as they have less to fall back on than men during times of economic hardship (GSS, 2010: 79). Additionally, the economic downturn and lockdown policies during the COVID-pandemic increased unpaid care obligations for Ghanaian women, limiting their workforce engagement and bargaining power within formal employment, and exposed them to increased risks of gender-based violence and intimate partner violence (see UNICEF, 2021).

## 2. Unpaid Care Responsibilities

Women in Ghana are responsible for around two-thirds to three-quarters of household chores, and they spend almost double the amount of time on childcare compared to men (Nanko & Teng-Zeng, 2022; OECD, 2014; Orkoh et al., 2022). The majority of their unpaid tasks involve cooking and caring for children, representing 13% and 21% of their total working time, or 20% and 35% of their unpaid working time, respectively (ibid). Other unpaid activities such as collecting firewood, fetching water, washing clothes, and dishes require approximately three hours per day (ibid). This burden is particularly pronounced among certain groups of women, such as the elderly caring for orphaned and vulnerable children and caregivers of children with disabilities. Moreover, this burden is often exacerbated by the lack of social support systems and inadequate infrastructure, such as access to clean water and electricity. Structural drivers include prevailing societal norms that view men as economic providers and women as caregivers, and a lack of awareness of the negative implications of women's unpaid care work on their participation in the economy and public life.

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“Every minute more that a woman spends on unpaid care work represents one minute less that she could be potentially spending on market-related activities or investing in her educational and vocational skills” (OECD, 2014: 1)

**The inequality in unpaid care work translates into substantial gaps in labor outcomes** (link to problem area 1 – economic shocks). Women have less time available to enter and remain in the labor market, as well as invest into education or vocational skills and thus harness well-paid jobs (ibid.). Many women who are employed in the formal sector merely have part-time, low paid, or low-skilled jobs. The majority of women burdened with care responsibilities find themselves employed in informal, precarious, unorganized, and vulnerable work arrangements. This reality renders them less likely to access crucial support systems and services such as childcare, which can make it even more difficult to balance their care duties with their work responsibilities. Furthermore, their limited access to social security benefits like maternity leave and pensions creates a vicious cycle of poverty and vulnerability, underscoring the urgency of ensuring comprehensive coverage of social assistance to women throughout their lifecycle. In short, unpaid care work represents a brake on women's economic empowerment (OECD, 2014).

**The amount of time spent on unpaid care work is also negatively linked to women's participation in decision-making, particularly in public affairs** (link to problem area 8 – participation in decision making). The unequal burden of care work on women places them at a disadvantage when it comes to pursuing leadership positions and actively participating in decision-making (Antonopoulos & Hirway, 2010; Asiedu & Boampong, 2022). Additionally, inflexible gender roles and societal expectations surrounding women's domestic and caregiving responsibilities can further expose them to intra-marital conflict if these tasks are perceived as unmet. The substantial time and energy dedicated to fulfilling caregiving responsibilities, often at the expense of other pursuits, restricts women's availability to engage in public affairs. As a result, women's perspectives, experiences, and priorities tend to be underrepresented or overlooked in decision-making processes, leading to an imbalanced and incomplete decision-making landscape. Hence, women's attention to care work remains pivotal to solve between women and men, if women are to have the same ability to contribute to public life as men.

## 3. Old Age Vulnerabilities

Ghana's population is ageing at a rate comparable to the global population. The proportion of individuals aged 60 and above in Ghana is among the highest in Sub-Saharan Africa, with 4.7% of the population being 65 or older in 2010 (GSS, 2010). Among this demographic, women

constitute the majority, accounting for 58.8% of individuals aged 60 years and above. Almost 50% of old women are widowed, compared to only 16% of old men (Essuman & Mate Kole, 2021). This puts women at a greater disadvantage as they are often left without a source of income or support. **Women are less likely to enjoy income security, an adequate pension, access to land, housing and other assets in old age due to disadvantages and discrimination that accumulate throughout their life cycle.** Throughout their working years, women tend to participate less in the formal labor market, earn lower wages, take more breaks from works than men to care for dependents, and are more likely to work in the informal work sectors (CSS, 2010; Orkoh et al., 2022). For example, only 7.2% of women above statutory pensionable age receive pensions compared to 21.2% of men (UN Women, n.d.). Moreover, they often do not hold ownership over the assets they produce with their labor. Widows are particularly disadvantaged because control over household land reverts to husbands' families leaving widows vulnerable to losing their source of subsistence and income generation.

**Old women in Ghana are not only economically more vulnerable than old men but also socially.** This is due to pervasive myths, stigmatization, and stereotypes about their mental capacity, which increase their risk of social exclusion, discrimination, GBV and abuse (Essuman & Mate-Kole, 2021; Kpessa-Whyte, 2018; Mabefam & Appau, 2020). For instance, negative attitudes towards older women are prevalent, with some labeling them as witches and blaming them for misfortune (Essuman & Mate Kole, 2021). These attitudes are reinforced by superstitious cultural and religious beliefs in Ghana (ibid).

#### 4. Gender-Based Violence

**Violence against women remains widespread in Ghana.** Approximately 27% of women have experienced at least one act of physical violence and 34% experienced sexual violence at least once over their lifetime (GSS, 2018). GBV begins at a young age, with 37% of women between ages 15-49 reporting the experience of physical violence since age 15 (Addo-Lartey et al., 2019). Intimate partner violence (IPV) is reportedly the most common form of GBV in Ghana (Addo-Lartey et al., 2019; WAGE, 2022). Beyond IPV, domestic violence affecting unmarried women and girls is often overlooked as a distinct concern. Moreover, community-driven GBV is another distressing reality, as elderly women are labeled as witches and subjected to maltreatment. These diverse sources of GBV may require different programming responses.

**GBV in Ghana is fueled by deeply ingrained cultural norms and beliefs that reinforce traditional gender roles, restrict women's autonomy, and perpetuate harmful attitudes towards women.** Domestic violence is often regarded as a private family matter, with nearly a third of women agreeing with at least one justification for beating a wife (Ghana Demographic and Health Survey, 2014). These beliefs and values contribute to the prevalence of violence against women and harmful practices, while also preventing survivors from reporting abuse and seeking help due to social stigma and shame (Mann & Takyi 2009; Owusu Adjah & Agbemafle 2016; Sikweyiya et al., 2020). Certain religious and community leaders exacerbate the problem by promoting the idea that women should always support their husbands, even when they are abusive, and failing to condemn marital rape and domestic violence (UN Human Rights Council, 2016; WAGE, 2022: 25).

**Moreover, women and girls who experience GBV in Ghana encounter significant challenges when trying to access services.** Survivors may lack the financial means to seek medical or legal assistance, even though they are entitled to free emergency medical care. Purchasing medical equipment for forensic exams, such as sexually transmitted disease and pregnancy tests, along with transportation costs, create additional financial burdens. Additionally, the quality and availability of these essential services are often compromised, further impeding survivors' paths to recovery and justice. Furthermore, national health



insurance benefits do not cover services like family planning, safe abortion, and post-abortion care. Because of the exorbitant expenses associated with pursuing legal action through the formal legal system, numerous survivors choose to discontinue their cases, thereby perpetuating a prevailing sense of impunity for those responsible for gender-based violence (GBV). Furthermore, domestic violence is frequently regarded as an issue confined to the private domain of the family, resulting in women refraining from seeking protective orders for their safety (WAGE, 2022: 25; Addo-Lartey et al., 2019; Proulx, 2012; Tenkorang, 2021; UN Women, 2016).

## 5. Teenage Pregnancies and Child marriages

**Ghana has one of the highest adolescent pregnancy rates in sub-Saharan Africa**, with an estimated 14% of girls aged 15-19 years having already given birth (UNFPA, 2016). This means that 76 per 1000 births are born by teenage mothers between the age ranges of 15 to 19 years old (GDHS, 2014). **Early pregnancies have several detrimental economic, health, and social consequences.** Teenage mothers often drop out of school, leading to decreased education and employment opportunities, perpetuating a cycle of poverty (Nang-Bayi et al., 2021; Agbey, 2023; Boateng et al., 2023). Early pregnancies are also linked to sexual and reproductive health problems (e.g. sexually transmitted infections, repeated pregnancies, fistula), as well as separation from the child's father, divorce or separation, possible discrimination and denial by family or community members, and stigmatization (Nang-Bayi et al. 2021; Ahinkorah et al., 2019). Child marriage is a concerning outcome, as teenage pregnancies are pushing young mothers into early or forced marriages, further restricting opportunities. Socio-economic disadvantages, particularly poverty and lack of sexual health knowledge, are major risk factors for teenage pregnancy in Ghana. Additionally, dysfunctional families, peer group influence, and early marriage are other key contributing factors (Ahinkorah et al., 2018).

## 6. Participation in Decision-Making

**Women in Ghana are significantly underrepresented in public decision-making at all levels, including in parliament, local government, and community leadership.** As of 2020, women held only 13.8% of parliamentary seats in Ghana, well below the global average of 23.7% (UNDP, 2020). Additionally, women only hold 8% of District Executive Chief positions at the local level (Osei-Assibey, 2013; WAGE, 2022). This lack of participation in public and political life limits women's ability to advocate for their rights and interests and to shape policies and programs that affect their lives. **Women face multiple barriers to public and political participation, including cultural and social norms.** Prevailing norms place women in subordinate positions to men and depict decision making as a male preserve (Munemo, 2017). Custom, law and even religion have been used to rationalize and perpetuate these discriminatory norms to the extent that women either stay away from politics on their own or are discouraged by spouses or others. Women who attempt to enter male-dominated spaces, such as politics, often face verbal, emotional, and physical violence (ibid; GENCED, 2020; WAGE, 2022). Beyond this, the traditional roles of women as wives, mothers, and caretakers leave them with little time to engage in political activities, putting them at a disadvantage in competing with men in political arenas (Munemo, 2017). Other barriers include limited access to education, economic resources, and political networks (Amu, 2005; Bawa & Sanyare 2013; Isaksson et al. 2014; Shabaya & Konadu-Agyemang, 2004). Hence, the goal is to extend beyond mere token representation and, rather, empower women and capacitate them to engage meaningfully in decision-making processes.

## 3.2 Interventions, Gaps and Opportunities

Within Ghana's social protection system, a range of initiatives exist to offer some solutions to the six most pressing problems faced by women in the country. However, significant gaps and challenges hamper their effectiveness. To overcome these limitations, it is vital to address the gaps, introduce additional programs or components, and establish robust linkages with other sectors. This section offers an overview of existing interventions, highlighting areas for improvement and potential opportunities. For more details see Annex 6.4.

### 1. Economic shocks

Several initiatives are in place that can address the economic challenges women face during economic shocks due to pre-existing gender inequalities in employment and income. **Some existing initiatives can mitigate the impact of such shocks by providing social assistance, increasing household income and reducing healthcare and childcare costs** (see Gavrilovic, n.d.). Notable programs include the Livelihood Empowerment Against Poverty (LEAP) program which aims at reducing extreme poverty and addressing economic shocks, as well as Ghana's School Feeding program (GSFP), and the National Health Insurance Scheme (NHIS). **It is crucial for these programs to operate timely and efficiently and ensure that they provide adequate support and coverage for women during economic shocks.**

Moreover, several productive social protection programs exist that strengthen the economic capacities and opportunities of women by providing short-term employment opportunities, start-up capital, skills trainings and business advisory services, and resilience capacities to mitigate shocks. This includes the Productive and Financial Inclusion (PI) program, the Labor-Intensive Public Works (LIPW) program, the Microfinance and Small Loans Centre (MASLOC), the Ghana Enterprise Agency (GEA) program, the Business Advisory Centre (BAC) as well as other capacity building for women by CSOs. However, these programs tend to put the responsibility for shielding their family from the negative consequences of economic shocks on the individual. **This can result in an increased work burden for women, juggling both productive work and care responsibilities. It is therefore vital to also alleviate the care burden of women.**

**Only a limited number of programs, such as private sector child-friendly spaces, exist to reduce women's unpaid care work.** However, to adequately address women's dual roles as mothers and workers, a comprehensive policy or program on care services is necessary. Investments in childcare facilities and safe spaces are crucial. Such initiatives provide women with access to support systems that alleviate their work burden caused by increased labor demands or limited access to affordable childcare services during economic shocks.

#### Addressing Economic shocks

- **Strengthen existing Social Assistance initiatives:** Ensure that social assistance programs operate timely and efficiently, with a particular focus on providing adequate support for women during economic shocks, by including a robust targeting system that can effectively identify and enroll vulnerable girls and women into the program.
- **Rethink Productive Social Protection programs in light of women's unpaid care burden:** To adequately address women's dual roles as mothers and workers, a comprehensive policy or program on care services is necessary (e.g. childcare facilities, reduced working hours, maternity leave etc.).

### 2. Unpaid Care Responsibilities

**Recognizing women's unpaid care responsibilities is imperative in Ghana's pursuit to enhance women's available time for paid work, education, and political participation, along**

with improving their overall psychological and physical well-being. Existing initiatives like child-friendly spaces, nursing homes and maternity leave tend to be limited to the formal employment, catering only to a small fraction of women. This leaves a significant gap in support for the majority of women who are engaged in informal work as well as those who cannot afford private-sector care-services.

**To reduce women's unpaid care responsibilities, there is an urgent need to expand the availability and accessibility of care services for women in informal employment and marginalized communities.** Productive social protection initiatives like the PI, LIPW, and MASLOC can serve as entry points to address this need. Notably, the LIPW program has acknowledged the time constraints and care responsibilities faced by women and has made gradual adaptations by providing on-site childcare and offering and maternity leave. Supplementary payments or top-ups especially for women who are especially burdened – such as those caring for numerous children, orphaned and vulnerable children (OVCs), and individuals with disabilities (PwDs) could further strengthen the programme. To alleviate women's care burden, **it is crucial to ensure the widespread implementation and adoption of these provisions while also integrating similar care-related measures into other productive social protection programs** (see World Bank, 2023).

**While maternity leave and care services contribute to reducing gender disparities in economic and political participation in the short to midterm, they do not address the underlying structural causes associated with prevailing gender norms and roles that would foster a more structural redistribution of women's unpaid care responsibilities.** To achieve a more equitable distribution of domestic responsibilities, it is crucial to critically challenge existing gender norms while advocating for better recognition and validation of unpaid care work. The PI program has taken a step in this direction by incorporating sessions that encourage participants to reflect on how gender norms impact their behaviors. **However, to generate meaningful change, more transformative initiatives are required. These may include initiatives such as social behavior change communication, deliberative discussions, advocacy efforts, evidence creation, and various forms of awareness-raising activities.**

### Addressing Unpaid Care Responsibilities

Unlocking women's potential for paid work, education, and political participation in Ghana hinges upon a strategic investment in reducing their unpaid care responsibilities.

- **Expand care services:** Increase investment in care services to reduce women's unpaid care responsibilities and support for women engaged in informal work or those who cannot afford private care services, while ensuring that services are of good quality and affordable to incentivize women to readily embrace and utilize essential care services.
- **Integrate care measures in Productive Social Protection programs:** To address the burden of care responsibilities that women might face while participating in Productive Social Protection programs, incorporate care-related provisions (e.g. childcare facilities, reduced working hours, maternity leave etc.) into these programs and ensure the widespread implementation and adoption of measures.
- **Transform gender norms:** To address the unequal distribution of care work between men and women, there is also need to integrate transformative components into existing social protection interventions, such as social behavior change communication, deliberative discussions, advocacy efforts, evidence creation, and awareness-raising activities.

### 3. Old Age<sup>1</sup> Vulnerabilities

**The LEAP and NHIS, can address the economic vulnerability of women in their old age.** The LEAP program provides a social transfer for poor persons above the age of 65. It thereby provides essential assistance to old women who often experience limited income security due to the lifelong myriad of disadvantages and discrimination. The NHIS program plays a crucial role in ensuring access to healthcare services for old women. By reducing user fees, this program enables them to receive essential medical care without enduring significant financial burden.

**To effectively reduce the vulnerabilities faced by elderly women, timely delivery of cash transfers is paramount for LEAP, alongside reevaluating benefit levels and considering top-ups for women caring for multiple dependents. Moreover, it is vital to further strengthen the collaboration between these two programs.** This collaboration should focus on improving registration processes and targeting methods, which not only helps save costs but also ensures that old women are reached and can benefit from these social assistance programs. The Integrated Social Services (ISS) initiative constitutes a useful entry point in this regard.

**Beyond economic vulnerabilities, there is also need to address the social vulnerabilities of old women in Ghana who are at risk of social exclusion, discrimination, and abuse arising from prevailing myths, stigmatization, and stereotypes.** Changing harmful norms and practices around old women requires transformative initiatives - such as social behavior change communication, deliberative discussions, advocacy efforts, evidence creation, or other forms of awareness-raising activities (see World Bank, 2023). **Such transformative initiatives can be integrated with existing initiatives, including the LEAP program.**

#### Addressing Old Age Vulnerabilities

- **Strengthen collaboration between LEAP and NHIS:** LEAP and NHIS have important synergies as one focuses on increasing income and the other focuses on reducing costs. The collaboration on registration processes and targeting methods can promote inclusion, maximize impact, and generate cost savings.
- **Transform social vulnerabilities:** Integrate transformative components into existing social protection interventions, (e.g. social behavior change communication, deliberative discussions, advocacy efforts, evidence creation, and awareness-raising activities) to make communities, for instance, recognize the implications of the issue and thereby address the social vulnerabilities faced by old women in Ghana, such as social exclusion, discrimination, and abuse.

### 4. Gender-Based Violence

The Government of Ghana is actively addressing Gender-Based Violence (GBV) through various interventions. **A range of different measures are currently being implemented that offer immediate action and economic and psychological assistance.** In terms of immediate action, a referral system for GBV victims has been instituted through the Social Welfare Information Management System (SWIMS) under ISS. Additionally, the NHIS supports some of the medical treatment of GBV victims. Moreover, the Single Window Citizens Engagement Services (SWCES), and the Orange Support Centre have been established. To enhance immediate support for GBV victims, **it is crucial to foster collaboration, expand the reporting structure, sensitize frontline workers, and eliminate medical fees for GBV victims, including medico-legal services.**

<sup>1</sup> Here understood as persons above the age of 65.



**In terms of economic and psychological assistance, a range of measures exist that can support GBV victims to start a new life.** This includes the Domestic Violence Fund which (at least on paper) aims to establish women's shelters and offer financial support for women to access medico-legal services. Moreover, the GSFP offers free meals to school-going children and this also includes children of GBV victims. LEAP, PI, and LIPW, in different capacities, provide social cash transfers or employment opportunities and can provide GBV victims with some form of income. LEAP, in its design, has the capacity to target GBV victims who are already beneficiaries of the program. However, the program's targeting approach is fixed and lacks the ability to dynamically expand its coverage to include such victims (if eligible). In the long term, the department of social welfare and community development should explore certification and potential LEAP enrollment (for GBV victims who qualify per LEAP targeting criteria) as enduring solutions.

Moreover, some counselling services are available within public and private agencies to provide support and facilitate recovery. However, the current measures are frequently underfunded, ineffective, and fail to effectively address the needs of GBV survivors (see World Bank, 2023). **It is crucial to prioritize and strengthen the focus on GBV within programs like LEAP, PI, and LIPW by enrolling GBV victims or allowing for a referral pathway to these programs for survivors once identified in support services and implementing comprehensive training and sensitization initiatives. Additionally, dedicated resources must be allocated to support the recovery of GBV survivors, including by providing psychological support.**

**Beyond addressing the consequences of GBV, there is need to address the causes and transform harmful gender norms and beliefs.** While this may prevent GBV, it can also encourage victims to take action and report cases. Interventions can include social media campaigns, working with men and boys, sensitization of students and frontline workers, engaging traditional and religious leaders, deliberative discussions, evidence creation, and other forms of awareness-raising activities. **Such transformative initiatives need to be integrated with existing initiatives, including LEAP, PI, and LIPW.**

Different departments and sectors are involved in addressing GBV. The Ministry of Gender, Children, and Social Protection has a Domestic Violence Secretariat that focuses on policy development. The Commission on Human Rights and Administrative Justice protects women's rights and advances the legal framework. The Domestic Violence and Victim Support Unit of the Police prevents, investigates, and prosecutes cases of domestic violence, gender-based violence, and child abuse. **To effectively protect women and prevent violence, it is crucial to strengthen inter-sectoral collaboration through the implementation of the Integrated Social Services initiative (see Gavrilovic, n.d.)<sup>2</sup> as well as streamline data and reporting systems.**

#### **Addressing GBV**

- **Expand and Strengthen Immediate Action:** Expand reporting structure, sensitize frontline workers, and eliminate medical fees.
- **Enhance Economic and Psychological Assistance:** Prioritize and strengthen the focus on GBV within social protection programs, such as LEAP, PI, and LIPW, by actively enrolling GBV victims (if eligible), implementing comprehensive training and sensitization initiatives, and allocating dedicated resources to support the recovery of survivors, including psychological assistance.

<sup>2</sup> Plans are underway to link the Judicial Service and the Commission on Human Rights and Administrative Justice to the ISS programme

- **Address Root Causes and Transform Harmful Gender Norms:** Go beyond addressing the consequences of GBV and focus on transforming harmful gender norms and beliefs by integrating transformative components into existing social protection interventions, such as social behavior change communication, deliberative discussions, advocacy efforts, evidence creation, and awareness-raising activities. By making communities realize the drawbacks and seriousness of GBV, this will not only change the social norms around the issue but also encourage victims to take action and report cases.
- **Strengthen Inter-Sectoral Collaboration:** Enhance collaboration between different departments and sectors involved in addressing GBV by implementing Integrated Social Services and streamline data and reporting systems.
- **Address child marriage:** Address child marriage as a prevailing issue precipitating GBV, through, for instance, preventing the economic need to marry a girl child.

## 5. Teenage Pregnancies and Child Marriage

**Social protection programmes such as LEAP, GSFP and PI can play a vital role in preventing teenage pregnancies.** By increasing household income and reducing financial burdens, social protection initiatives can help alleviate the economic challenges that contribute to teenage pregnancies. Additionally, these programs can provide economic skills training and opportunities, empowering girls to become more economically independent and reducing their vulnerability. Moreover, they can also promote their continued engagement in school, which is one of the key protective strategies. **Ensuring timely and efficient operation of these programs while considering the vulnerability of young women and girls is crucial in preventing teenage pregnancies.**

**Beyond addressing economic vulnerabilities of young women and girls, it is vital to provide comprehensive sexual health knowledge and raise societal awareness about the problem of early pregnancies and prevailing harmful norms.** The Department of Gender has implemented a range of educational and awareness-raising programs to empower girls to make informed decisions and ensure access to sexual and reproductive health information and services (see Ministry of Gender, Children and Social Protection, 2017). It is particularly important to strengthen continuous sensitization programs, peer education, media campaigns, public education initiatives, and engage with students, parents, traditional authorities, religious bodies, and boys and men. **Additionally, such transformative initiatives should be integrated into existing social protection programs, such as LEAP and PI to challenge and change harmful gender norms and beliefs related to teenage pregnancies.**

To comprehensively tackle the issue of teenage pregnancies, effective collaboration among various departments and sectors is essential (see Gavrilovic, n.d.). **The Integrated Social Services (ISS) initiative has provided an entry point to enhance inter-sectoral collaboration between social welfare, social protection, and gender.**

### Addressing Teenage Pregnancies

- **Strengthen existing Social Protection initiatives:** Ensure that social protection programs such as LEAP, GSFP and PI operate timely and efficiently, with a particular focus on providing adequate support to young women and teenage mothers.
- **Promote Comprehensive Sexual Health Education:** Ensure access to comprehensive sexual health knowledge for girls and young women to make informed decisions.
- **Integrate Transformative Initiatives into Social Protection Programs:** Integrate transformative initiatives into existing social protection programs (e.g. such as social behavior change communication, deliberative discussions, advocacy efforts, evidence

creation, and awareness-raising activities that make communities understand the individual and social benefit of preventing teenage pregnancies) in order to challenge harmful gender norms and beliefs related to teenage pregnancies, such as norms around child marriages.

- **Enhance Inter-Sectoral Collaboration:** Foster effective collaboration among various departments and sectors involved in addressing teenage pregnancies by strengthening the implementation of the Integrated Social Services.

## 6. Participation in Decision-Making

To enhance women's participation in governance and decision-making at all levels, it is crucial to provide economic support to women as well as promote women's active participation in leadership and decision making. **Social protection, such as PI and LIPW, can play a vital role in assisting women in establishing businesses and elevating their social status within communities. To maximize the effectiveness of these initiatives, it is vital to increase the grant size, providing more substantial support to enable recipients to establish successful businesses, while also ensuring timely and efficient delivery of grants and expanding skills and vocational training.**

Efforts are already underway to advance women's leadership skills, enhance their educational achievements, and challenge societal norms that hinder their active participation in decision-making processes. For instance, the Department of Gender has implemented various initiatives, including advocacy programs, mentorship initiatives, engagement with traditional and civil society leaders, establishment of youth clubs and gender equality clinics, and implementation of admission quota systems in universities to improve women's access to education and leadership positions. In this regard, **social protection interventions like LIPW and PI can play an important supportive function. By integrating transformative and awareness-raising measures, such as sensitizing frontline workers, involving traditional and religious leaders, facilitating deliberative discussions, engaging men and boys, and generating evidence, into existing programming, these interventions can help to challenge harmful gender norms and encourage women's active participation in decision-making processes.**

### Addressing Participation in Decision-Making

- **Strengthen existing productive social protection:** Strengthen social protection initiatives like PI and LIPW to assist women in business establishment and social empowerment by enhancing grant size, ensuring substantial support for successful ventures, prioritizing timely delivery, and expanding skills training and vocational programs.
- **Transform social norms limiting women's participation in public decision-making:** Maximize the impact of protection interventions like LIPW and PI by integrating transformative measures, sensitizing frontline workers, involving traditional and religious leaders, facilitating deliberative discussions, engaging men and boys, and generating evidence to challenge harmful gender norms and empower women's decision-making participation.

## 4. Directions for the Department of Social Welfare and the Social Protection Directorate

The Ministry of Gender, Children, and Social Protection traces its origins back to the establishment of the Ministry of Women and Children's Affairs in 2001, the first ministry dedicated to addressing women and children's affairs in Ghana. The Ministry is mandated to ensure gender equality and equity, promote the welfare and protection of the rights of children, and empower the vulnerable, excluded, the aged and persons with disability for sustainable national development. The Department of Social Welfare and the Social Protection Directorate operate within this mandate and are responsible for promoting policy guidelines, standards, and programs aimed at efficiently delivering social development services to vulnerable and excluded individuals, groups, and communities. Ensuring the gender and shock responsiveness of Ghana's social protection system is vital for effectively carrying out its function.

### **The Ministry of Gender, Children, and Social Protection (MoGCSP)**

#### **Vision**

A harmonious society in which the survival and development of the sexes, children, the vulnerable, and persons with disability are guaranteed.

#### **Mission**

MoGCSP exists to contribute to the development of the nation by achieving gender equality and equity; facilitate the enforcement of the rights of children; promote the integration and protection of the vulnerable, excluded and persons with disabilities in the development process working with integrity, excellence, fairness and respect for diversity.

This section presents essential entry points for enhancing the gender and shock responsiveness of Ghana's social protection system, offering guidance for key social protection programs and intersectoral partnerships, and acknowledging potential challenges and moderating factors. To ensure the practicality and adoption of the proposed directions and recommendations, a validation process consisting of a high-level validation meeting and bilateral discussions was undertaken, with key flagship programs geared towards refining and adapting the directions.

### 4.1 Strengthening key social protection programs

While Ghana is implementing a range of social protection initiatives that offer some solutions to the most pressing gender and shock-related problems in the country, there are significant gaps and challenges that impede their effectiveness. To fulfill the Ministry's vision and mandate, it is crucial to amplify the impact of these interventions and make strategic modifications to address the identified problems. Table 1 below illustrates the extent to which the different social protection initiatives can contribute towards addressing different gender- and shock-related problems in Ghana.

**Table 1: Potential contributions mapped onto problem area.**

	<i>Economic shocks</i>	<i>Unpaid care responsibilities</i>	<i>Women's old age vulnerabilities</i>	<i>Gender-based violence</i>	<i>Teenage pregnancies and child marriages</i>	<i>Participation in decision-making</i>
<b>LEAP</b>	✓	✓	✓	✓	✓	✓
<b>GSFP</b>	✓			✓	✓	✓
<b>NHIS</b>	✓		✓	✓	✓	
<b>LIPW</b>	✓	✓		✓	✓	✓
<b>PI</b>	✓	✓		✓	✓	✓

✓ Can play a crucial role in addressing the respective issue

✓ Can, to a lesser extent, address the respective issue.

Overall, the proposed program modifications are scheduled to be implemented during the second phase of the social protection policy, which spans from 2024 to 2032. Below we categorize the modifications into short-term (1-3 years), mid-term (4-6 years), and long-term (7-8 years) implementations.

## 1. The Livelihood Empowerment Against Poverty (LEAP)

LEAP is a social assistance program that provides bimonthly unconditional cash payments to extremely poor households, predominantly targeted using the Proxy Means Test (PMT) and the categorical criteria reaching – orphans and vulnerable children, older persons 65 years and above with no productive capacity, persons with severe disability, and pregnant women, lactating mothers with children under 12 months.

### **LEAP can play a crucial role in addressing:**

- Women's old age economic vulnerabilities
- Women's vulnerability to economic shocks
- Teenage pregnancies and child marriages
- GBV
- Women's underrepresentation in public decision-making at the micro level

### **It also has the potential, though to a lesser extent, to address:**

- Women's unpaid caregiving responsibilities

Realizing LEAP's full potential requires some modifications to the program.

### **SHORT-TERM**

#### **1) Increase women's participation in decision making spaces**

- Prioritize females in the selection of duty bearers such as Facilitators, Trainers, Social Welfare Officers, Supervisors and within committees and Beneficiary Welfare Association.



- Deliver sensitization messages to encourage women to become facilitators and committee members and promote community support in women's engagement in those roles.
- Train women to develop necessary technical and soft skills, build their confidence and provide incentives to engage effectively in those roles and decision-making processes.
- Collaborate with the Department of Gender to strengthen mechanisms and modalities to encourage women's participation. Also, collaborate with PI and other livelihood programs to enroll women to acquire technical and soft skills needed to encourage women's participation.

## **2) Strengthen LEAP's potential to address and reduce GBV<sup>3</sup>**

- Ensure that LEAP participants have access to grievance and redress mechanisms, or other channels through which they can safely report GBV; participants also need to be properly informed that such mechanisms exist and empowered to take up these services.
- Integrate GBV messaging on access to reporting mechanisms and referral system in the routine communication and sensitization activities (e.g. at LEAP pay points or provide information through tailored communication outputs, such as SMS texts, as well as posters, fliers at other relevant sites and meetings of LEAP participants and wider community)
- Strengthen referral pathways for the existing LEAP beneficiaries who report exposure to GBV to ensure that victims have timely access to necessary services through the ISS program (e.g. safety shelters, psychosocial support, medical services, legal support).
- Ensure that vulnerable members of the community (non-beneficiaries of LEAP) who experience cases of GBV are linked to available support through the ISS referrals in the short-term. Social workers can enlist and register these individuals and households for potential enrolment into the LEAP program during re-targeting exercises if they qualify per eligible criteria.
- Ensure that all duty bearers participate in GBV prevention trainings and sensitization and handle GBV reporting and referrals with care and confidentiality. Set up a monitoring system to ensure staff complies with GBV prevention protocols and reduce the risk of staff mistreatment.

## **3) Integrate transformative components to change harmful gender norms at all levels<sup>4</sup>**

- For senior staff, provide gender trainings and sensitization about harmful norms that lead to the unequal distribution of unpaid care work, stigmatization of old women, GBV, teenage pregnancies and child marriages, as well as low representation of women in public decision-making.
- At the grassroots, include awareness raising to change harmful norms that lead to the unequal distribution of unpaid care work, stigmatization of old women, GBV, teenage pregnancies and child marriages, as well as low representation of women in public decision-making.
- Collaborate with the Department of Gender, international partners and women's organizations in order to develop an adequate strategy to change gender norms. This can consist of critical group communications, deliberative discussions, engaging traditional and religious leaders, working with men and boys, or the development of behavior science interventions that deal with gender stereotyping and other gender related biases.

<sup>3</sup> This recommendation aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends incorporating GBV issues into LEAP Communication processes, and ensuring Community Focal Persons (CFPs) are sensitized on GBV-related issues.

<sup>4</sup> This recommendation broadly aligns with MLGDRD & MOGCSP's (2023) GBV action plan which recommends engaging men in program activities targeting female beneficiaries in order to change intra-household dynamics/relations

- Involve men in all discussions relating female participation in order to get their buy-in and support towards deepening female empowerment.

#### **4) Agree on definition and criteria of macro-economic shocks**

- Definitions are key to identify when LEAP is most needed and ensure household registry can identify vulnerable groups of women in times of shocks to enroll them into the program and/or expand temporary access to transfers.

### **MID-TERM**

#### **1) Strengthen LEAP's potential to provide customized support to specific groups, particular old women.**

- Strengthen collaboration with NHIS to facilitate NHIS registration of old women, households with people with disabilities, women severely affected by economic shock, as well as advocating for girls and sexual and reproductive rights services to reduce risks of teenage pregnancies and forced marriages.
- Agree and mainstream common definition of old age between LEAP and NHIS.
- Enable automatic renewal options for old women (by extension all LEAP households) and ensure easily accessible pay points.

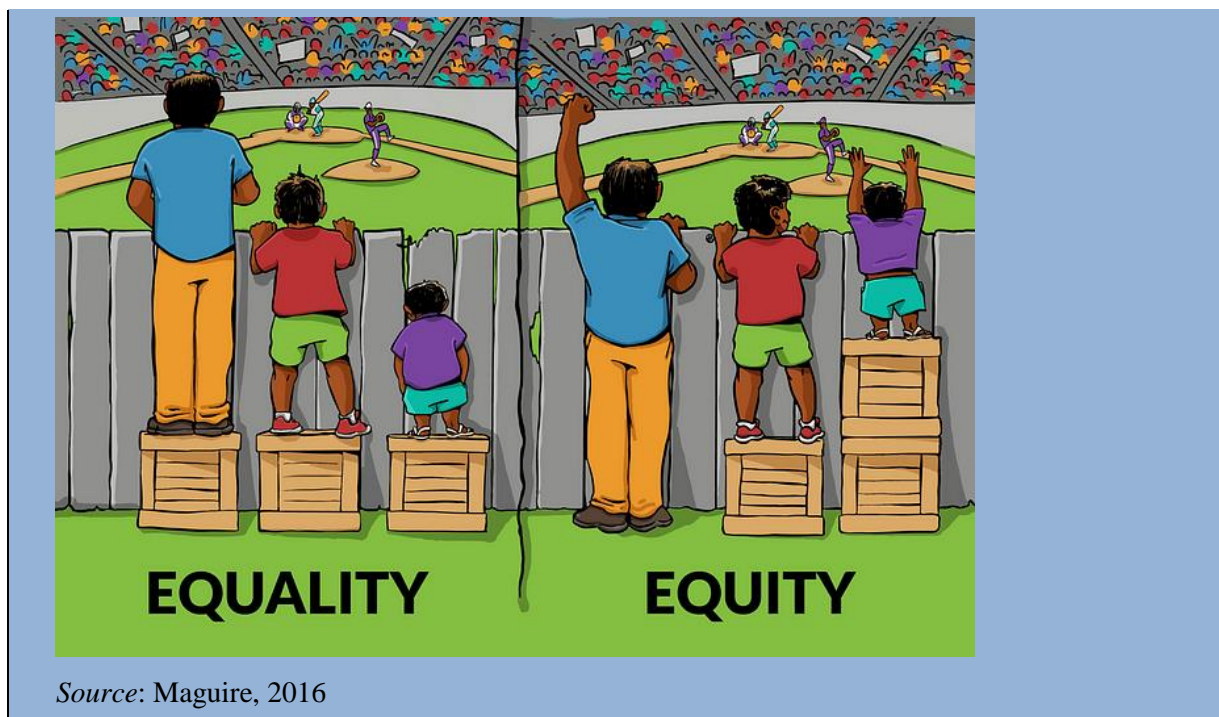
#### **2) Strengthen LEAPs potential to reduce the negative impacts of economic shocks.**

- Provide continuous training to educate women about prevention and resilience strategies against economic shocks. Specifically encourage village saving schemes as an informal social security mechanism.
- Ensure timeliness and continuity of LEAP during macro-economic shocks to reduce the burden on women.

### **LONG-TERM**

#### **1) Ensure equity by improving adequacy of the transfer for specific groups.**

- Review PMT to ensure that it includes gender-responsive proxy indicators that can identify poor women with a high care burden, old women, teenage mothers, and women facing economic shocks through collaboration with institutions such as development partners and GNHR.
- Deliver messaging about 1) the unpaid care burden of women, the costs of providing care, including the limited opportunities of women to engage in productive work due to time-poverty; 2) the vulnerability of old women, teenage mothers, and women facing economic shocks.
- Undertake action research to identify the acceptability of top-ups among recipients, community members and program staff as a means to compensate women with a high care burden and address the vulnerability of old women, teenage mothers, and women facing economic shocks.
- Test messaging about validating the unpaid care responsibilities of women and address the vulnerability of old women, teenage mothers, and women facing economic shocks.



## 2. The Ghana School Feeding Program (GSFP)

GSFP aims to increase school enrolment, attendance, and retention, reduce hunger and malnutrition, and boost domestic food production by providing children in public primary schools with one hot meal per day during the school term. While it thus predominantly targets children in primary schools, it also provides employment for caterers and farmers. Specifically, the group of caterers consists predominantly of women.

### **The program holds particular potential for addressing:**

- Women's vulnerabilities stemming from economic shocks.
- Teenage pregnancies and child marriages
- GBV

### **It also has the potential, though to a lesser extent, to address:**

- Women's underrepresentation in public decision-making at the micro level

To enhance the program's ability to tackle these problems, the GSFP should be revised in light of the following recommendations.

### **SHORT-TERM**

#### **1) Ensure uninterrupted operation of the GSFP, particularly in times of macroeconomic shocks.**

- Agree on definition and criteria of macro-economic shocks in order to identify when GSFP is most needed.
- Ensure timeliness and continuity of GSFP during macro-economic shocks to reduce the burden on women to provide food for their children and provide a means of income for caterers.

#### **2) Integrate transformative components to change harmful gender norms.**

- Integrate transformative components for caterers in order to change harmful norms that lead to teenage pregnancies and child marriages, and GBV. This can consist of critical group communications, deliberative discussions, or BCC trainings. For example, the



school health education program coordinators should contribute to raising awareness on gender norms in schools.

- Collaborate with Ghana Education Service and Ghana Health Service to discuss the appropriateness and feasibility of integrating transformative components for children (particularly those of age 10 and above) in order to change harmful norms that lead to teenage pregnancies and child marriages, and GBV.

## **MID-TERM**

### **1) Consider integrating complementary services to strengthen young girls' reproductive health.**

- Collaborate with Ghana Education Service and Ghana Health Service to discuss the appropriateness and feasibility of providing complementary services to children (particularly those of age 10 and above) in order to promote comprehensive reproductive health education.
- Collaborate with other stakeholders (e.g. Ghana Health Service, NGOs) in order to provide complementary services such as the distribution of sanitary pads, access to family planning initiatives, and menstrual hygiene management.

### **2) Increase women's participation in decision-making spaces.**

- Collaborate with the Department of Gender to strengthen mechanisms and modalities to encourage the participation of female caterers in decision-making.
- Craft sensitization messages to encourage female caterers to actively participate in program delivery decisions.
- Leverage sensitization and trainings for caterers to strengthen women's self-esteem and leadership skills

## **3. The National Health Insurance Scheme (NHIS)**

The NHIS aims provide social health insurance for all residents, ensuring easy access to healthcare, patient satisfaction, and improved health status. The NHIS package covers approximately 95 % of the most common causes of illness in Ghana, including comprehensive maternity care, inpatient and outpatient care, diagnostic testing, generic medicines, and emergency services.

### **The program holds immense potential for addressing:**

- Women's old age vulnerabilities
- GBV
- Teenage pregnancies and child marriages

### **To a lesser extent, it can also address:**

- women vulnerabilities arising from economic shocks

In order to maximize the program's effectiveness in addressing these problems, some adaptations are necessary.

## **SHORT-TERM**

### **1) Enhance access to NHIS for specific groups of poor women**

- Strengthen collaboration with the Ministry of Gender, Children and Social Protection in order to facilitate registration of old women, households with people with disabilities, and women severely affected by economic shocks<sup>5</sup>.
- Agree and mainstream common definition of old age between LEAP and NHIS as they are divergent at the moment (Old age under LEAP is 65 and NHIS is 70).
- Streamline and systematize the support provided by the department of social welfare and community development in linking old women (who are not on LEAP) to the NHIS under the indigent category.

## **2) Improve old women's access to adequate health care**

- Undertake a study to understand gaps and problems of old women to access health care and extent of coverage of medical treatments related to old age.
- Consider facilitating access to adequate health care for old women (e.g. through timely enrolment and automatic renewals and the expansion of benefit package to cover medical treatment related to old age).

## **3) Ensure that GBV victims have access to medico-legal services**

- Undertake assessment to examine access of GBV victims to medico-legal services – particularly including lifesaving treatments, psychosocial support, and testaments.
- Consider changing benefit package to eliminate fees for medico-legal services for GBV victims – particularly to cover lifesaving treatments, adequate psychosocial support, and testaments.<sup>6</sup>

## **4) Ensure effective communication about benefit package, particularly maternal health care**

- Craft and disseminate clear and easy-to-understand communications about benefit package.  
Develop effective communications to inform young women and teenage girls about the maternal health benefit package under NHIS.

## **4. Labor-Intensive Public Works (LIPW)**

LIPW aims to provide targeted rural poor households, including youth and women, with income-generating opportunities during the agricultural off-season in response to external shocks, through rehabilitation and maintenance of public or community infrastructure. LIPW enrolls more than 60 % of women.

### **LIPW has the potential to address the following key problems:**

- Women's underrepresentation in public decision-making at the micro level
- GBV
- Women's vulnerability to economic shocks

### **It also has the potential, though to a lesser extent, to address:**

- Teenage pregnancies and child marriages
- Women's unpaid caregiving responsibilities

While the policy design already includes a set of important gender provisions (e.g. provision of creches and childcare, maternity leave), alignment and further adjustments are necessary to

<sup>5</sup> This rec aligns with MLGDRD & MOGCSP's (2023) GBV action plan which stipulates the promotion of linkages between the LEAP program and the NHIS and the facilitation of the registration of LEAP beneficiaries onto NHIS.

<sup>6</sup> This rec also aligns with the MLGDRC's GBV action plan which calls for comprehensive healthcare support for GBV survivors.

optimize the program's effectiveness in addressing the key gender- and shock related problems in Ghana. Note that these align and deepen the recommendations provided by Partnership for Economic Inclusion (Duametu, 2023).

## **SHORT-TERM**

### **1) Increase women's participation in decision making spaces<sup>7</sup>**

- Prioritize females in the selection of duty bearers such as Community Facilitators, Trainers, Supervisors and within GRM committees and CBT teams.
- Craft sensitization messages to encourage women to become facilitators and committee members as well as actively participate in program delivery decisions.
- Leverage vocational trainings to strengthen women's self-esteem and leadership skills.
- Collaborate with the Department of Gender to strengthen mechanisms and modalities to encourage women's participation.

### **2) Integrate transformative components to change harmful gender norms<sup>8</sup>**

- Include awareness raising to change harmful norms that lead to the unequal distribution of unpaid care work, GBV, teenage pregnancies and child marriages, as well as low representation of women in public decision-making.
- Collaborate with the Department of Gender, CPs, and women's organizations in order to develop an adequate strategy to change gender norms. This can consist of critical group communications, deliberative discussions, engaging traditional and religious leaders, working with men and boys, or the development of behavior science interventions that deal with gender stereotyping and other gender related biases.
- Involve men in all discussions relating female participation in order to get their buy-in and support towards deepening female empowerment.

### **3) Ensure that GBV cases are handled adequately<sup>9</sup>**

- Strengthen referral mechanisms to LIPW for GBV survivors.
- Follow-up on reported/referred cases to assist with case management closure.
- Ensure that all duty bearers participate in GBV trainings and sensitization and handle GBV cases with care.

### **4) Ensure that gender provisions<sup>10</sup> are adequately implemented.**

- Ensure provision of creches and childcare attendants during programme activities<sup>11</sup>

<sup>7</sup> This recommendation aligns with the recommendation 1 by Partnership for economic Inclusion (Duametu, 2023, p. 10) as well as MLGDRD & MOGCSP's (2023) GBV action plan which stipulates that existing GBV units at DAs and the local communities are functional and have equal representation of women and men in the District GBV Committee.

<sup>8</sup> This recommendation broadly aligns with rec 2 & 3 by Partnership for Economic Inclusion (Duametu, 2023, p. 10) as well as MLGDRD & MOGCSP's (2023) GBV action plan which recommends engaging men in program activities targeting female beneficiaries in order to change intra-household dynamics/relations

<sup>9</sup> This recommendation aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends that GBV victims should be referred to district/ DSWCD Officers and other statutory referral centers for counselling or any other form of assistance they may require, follow-up on reported/referred cases to assist with case management closure, and that all actors are trained on SEA/SH risks mitigation plan and measures as well as sensitized on GBV preventions and project GM provisions.

<sup>10</sup> Including childcare, maternity leave, participation, transformative components and GBV modalities.

<sup>11</sup> This rec broadly aligns with rec 4 by Partnership for Economic Inclusion (Duametu, 2023, p. 10) as well as MLGDRD & MOGCSP's (2023) GBV action plan which recommends functional crèches and Caretakers at all sites.

- Strengthen commitment of all duty bearers to gender provisions and sensitize beneficiaries through adequate training<sup>12</sup>
- Ensure that the M&E framework incorporates gender provisions<sup>13</sup>

### **MID-TERM**

#### **1) Expand maternity leave to protect women during early pregnancy.**

- Exempt women from labor-intensive works once their pregnancy is medically certified and without requiring an alternate.
- Develop effective communications to inform women about their rights to maternity leave.

#### **2) Contribute to the development and up-take of social security interventions to provide a buffer against economic shocks.**

- Provide continuous training to educate women about prevention and resilience strategies against economic shocks.
- Encourage village saving schemes as an informal social security mechanism.

### **LONG-TERM**

#### **1) Send a strong message validating women's unpaid care responsibilities<sup>14</sup>**

- Craft and test messaging about the validation of women's unpaid care burden.
- Undertake action research to assess how men and boys can help address the care burden of women.

#### **2) Using LIPW as an entry point for social security**

- Develop more formal social security interventions using LIPW as entry point.

## **5. Productive Inclusion (PI)**

The PI intervention aims to promote productivity and employment opportunities for vulnerable populations, equip them with skills, enhance their business for development capacities to earn incomes and sustain their households. It is essentially a self-employment program targeted at individuals from low-income households participating in the LEAP and LIPW programs, who are between the ages of 18 and 65. PI sets aside at least a 60% quota for female participation but has achieved 71 % enrollment of women (see Duametu, 2023).

### **PI can play a crucial role in addressing:**

- Women's underrepresentation in public decision-making at the micro level.
- Women's vulnerability to economic shocks.

### **It also has the potential, though to a lesser extent, to address:**

<sup>12</sup> This rec also aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends periodic sensitization of the gender provisions, sensitization of the community on the gender provisions of the project (e.g., GM provision and benefits of women's enrolment in the project), and training manual with a gender module that reflects the gender needs of the project to sensitize and equip Service Providers with requisite knowledge and skills in gender mainstreaming e.g., SEA/SH Action plan and risks mitigating measures, compliance with the SEA/SH Code of Conduct

<sup>13</sup> This rec aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends monitoring exercises at selected sites to ascertain gender compliance, the circulation of ESS/Gender monitoring checklist to community Actors to assess information on GBV/SEA/SH and related issues, and quarterly gender monitoring/ assessment

<sup>14</sup> This rec also aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends advocating for achievable target to enable women/ vulnerable complete their daily tasks to enable them respond to their domestic needs

- Teenage pregnancies and child marriages
- Women's unpaid caregiving responsibilities
- GBV

In order to harness PI's complete potential, the following program modifications are essential. Note that many of these overlap with the recommendations provided for LIPW.

## SHORT-TERM

### 1) Increase women's participation in decision making spaces<sup>15</sup>

- Prioritize females in the selection of duty bearers such as Community Facilitators, Trainers, Supervisors and within GRM committees and CBT teams.
- Craft sensitization messages to encourage women to become facilitators and committee members.
- Leverage vocational/life skills training to strengthen women's self-esteem and leadership skills.
- Collaborate with the Department of Gender to strengthen mechanisms and modalities to encourage women's participation.

### 2) Integrate transformative components to change harmful gender norms<sup>16</sup>

- Include awareness raising to change harmful norms that lead to the unequal distribution of unpaid care work, GBV, teenage pregnancies and child marriages, as well as low representation of women in public decision-making.
- Collaborate with the Department of Gender, CPs and women's organizations in order to develop an adequate strategy to change gender norms. This can consist of critical group communications, deliberative discussions, engaging traditional and religious leaders, working with men and boys, or the development of behavior science interventions that deal with gender stereotyping and other gender related biases.
- Involve men and boys in all discussions relating female participation in order to get their buy-in and support towards deepening female empowerment.

### 3) Strengthen grievance redress mechanisms to attend to the special needs of women<sup>17</sup>

- Strengthen referral mechanisms to PI for GBV survivors.
- Follow-up on reported/referred cases to assist with case management closure.
- Ensure that all duty bearers participate in GBV training and sensitization and handle GBV cases with care.
- Ensure that GBV cases are handled adequately.

### 4) Ensure that gender provisions<sup>18</sup> are adequately implemented.

- Strengthen commitment of all duty bearers to gender provisions and sensitize beneficiaries through adequate training<sup>19</sup>

<sup>15</sup> This rec aligns with the rec 1 by Partnership for economic Inclusion (see Duametu, 2023, p. 10)

<sup>16</sup> This rec broadly aligns with rec 2 & 3 by Partnership for Economic Inclusion (see Duametu, 2023, p. 10) as well as MLGDRD & MOGCSP's (2023) GBV action plan which recommends engaging men in program activities targeting female beneficiaries in order to change intra-household dynamics/relations

<sup>17</sup> This rec aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends to orient beneficiaries on the project's gender provisions (SGBV risk/ prevention/ mitigation, GM platforms) to ensure that there are no incidents of GBV/SEA/SH in the targeting, selection/ orientation processes, to refer GBV victims to district/ DSWCD Officers and other statutory referral centers for counselling or any other form of assistance they may require, follow-up on reported/referred cases to assist with case management closure, periodic sensitization on the gender provisions/ GM to prevent incidences of GBV/SEA/SH.

<sup>18</sup> Including participation, transformative components and GBV modalities.

<sup>19</sup> This rec aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends to develop comprehensive gender-mainstreaming module to be incorporated in life skills training manual to address the

### 5) Expand access to creches and childcare attendants for PI beneficiaries.

- Ensure that the M&E framework incorporates gender provisions<sup>20</sup>

### MID-TERM

#### 1) Contribute to the development and up-take of social security interventions to provide a buffer against economic shocks.

- Provide continuous training to educate women about prevention and resilience strategies against economic shocks.
- Encourage village saving schemes as an informal social security mechanism.
- Develop more formal social security interventions using PI as an entry point.

#### 2) Expand vocational and business trainings to teenage daughters of beneficiaries as a mechanism of reducing teenage pregnancies as well as other female household members

### LONG-TERM

#### 1) Using PI as an entry point for social security for PI beneficiaries

## 4.2 Inter-sectoral Collaboration and Integrated Social Services

Strengthening the gender- and shock responsiveness of the entire social protection system in Ghana is an ambitious and complex task. Looking at the whole system requires focusing on how different social protection instruments hang together to provide solutions to the most pressing gender- and shock-related problems. **In practice, the systems approach inevitably requires collaboration and coordination between different stakeholders** and the MoGCSP plays a vital role in facilitating such coordination. The MoGCSP coordinates the efforts of Ministries, Departments, and Agencies (MDAs); Metropolitan, Municipal, and District Assemblies (MMDAs); the Private Sector; and Non-Governmental Organizations (NGOs) to ensure the well-being of women, girls, men, boys, and vulnerable individuals, including persons with disabilities, in Ghana.

**Inter-sectoral collaboration and coordination are indispensable when tackling the multifaceted challenges associated with unpaid care responsibilities.** Unpaid care work encompasses a diverse array of tasks, including domestic chores, childcare, and eldercare, predominantly performed by women, leading to time poverty and economic disadvantages. This issue permeates all levels of society, affecting women of different ages, ethnicities, and income levels. In order to address the unequal distribution of unpaid care work and work towards its recognition, reduction, and transformation of care responsibilities, it is essential to engage multiple sectors, programs, and stakeholders across various levels of governance.

**Inter-sectoral collaboration is also crucial for addressing the multifaceted problems of old age vulnerabilities, GBV, and teenage pregnancies.** Regarding the reduction of old age vulnerabilities among elderly women, it is vital to enhance collaboration between relevant programs and improve the registration processes and targeting methods. In terms of GBV, a

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gender needs of the project (GRM, GBV, SEA/SH), and to select Training Service Providers with requisite knowledge on gender, incorporate gender module in (ToT) training manual to reflect the gender needs of the project, and sensitize beneficiaries on project gender provisions including amongst others SWCES, GBV/SEA/SH risks/ prevention/ mitigations.

<sup>20</sup> This rec aligns with the MLGDRD & MOGCSP's (2023) GBV action plan which recommends circulating ESS/Gender monitoring checklist to Zonal PIOs and Community Facilitators to populate, undertake field monitoring visits to assess the training activities



holistic approach is necessary involving different departments and sectors responsible for prevention, immediate victim support, investigation and prosecution, as well as long-term assistance through economic and socio-psychological support. Finally, effective collaboration among various departments and sectors is also essential to prevent teenage pregnancies and child marriages and support teenage mothers and their children.

**The Integrated Social Services (ISS) initiative presents an important avenue for strengthening inter-sectoral collaboration among different departments, sectors, and partners.** Its main objective is to enhance the delivery of social services throughout the country by fostering collaboration between social welfare, social protection, and health actors at both the decentralized and national levels. Furthermore, the initiative aims to improve inter-sectoral referrals, including with NGOs, to ensure comprehensive support and services.

### 4.3 Moderating factors

In order to bring about systemic changes and enhance existing interventions, it is crucial to assess the feasibility of proposed modifications, taking into account potential challenges, moderating factors, and the political, financial, and bureaucratic resources required to sustain the proposed roadmap for strengthening the gender and shock responsiveness of Ghana's social protection system.

#### 1. Social norms and political will

Cultural beliefs and norms constitute a key challenge for successfully initiating and sustaining some of the proposed recommendations. This is particularly true for transformative components that change deep-rooted social norms about the position and responsibility of women in the Ghanaian society. Opposition to change can be raised by different stakeholders at any time of the policy process – including high-level policy makers, politicians, traditional and religious leaders, implementers, and men and women on the ground. In order to successfully launch transformative interventions, it is vital to work at all levels of governance - provide gender trainings, engage men and boys, undertake group discussions, invest time in explaining the reasoning in ways that can be understood easily.

#### 2. Funding

Insufficient funding and unsustainable financing mechanisms pose significant challenges in implementing the roadmap for strengthening the gender- and shock responsiveness of Ghana's social protection system. Indeed, the effective functioning of social protection programs and long-standing plans to scale them up have been hindered by inadequate allocation and delayed release of funds. Hence, the critical risk lies in the lack of financial resources to support additional initiatives and program modifications. In light of this, prioritizing key modifications appears indispensable.

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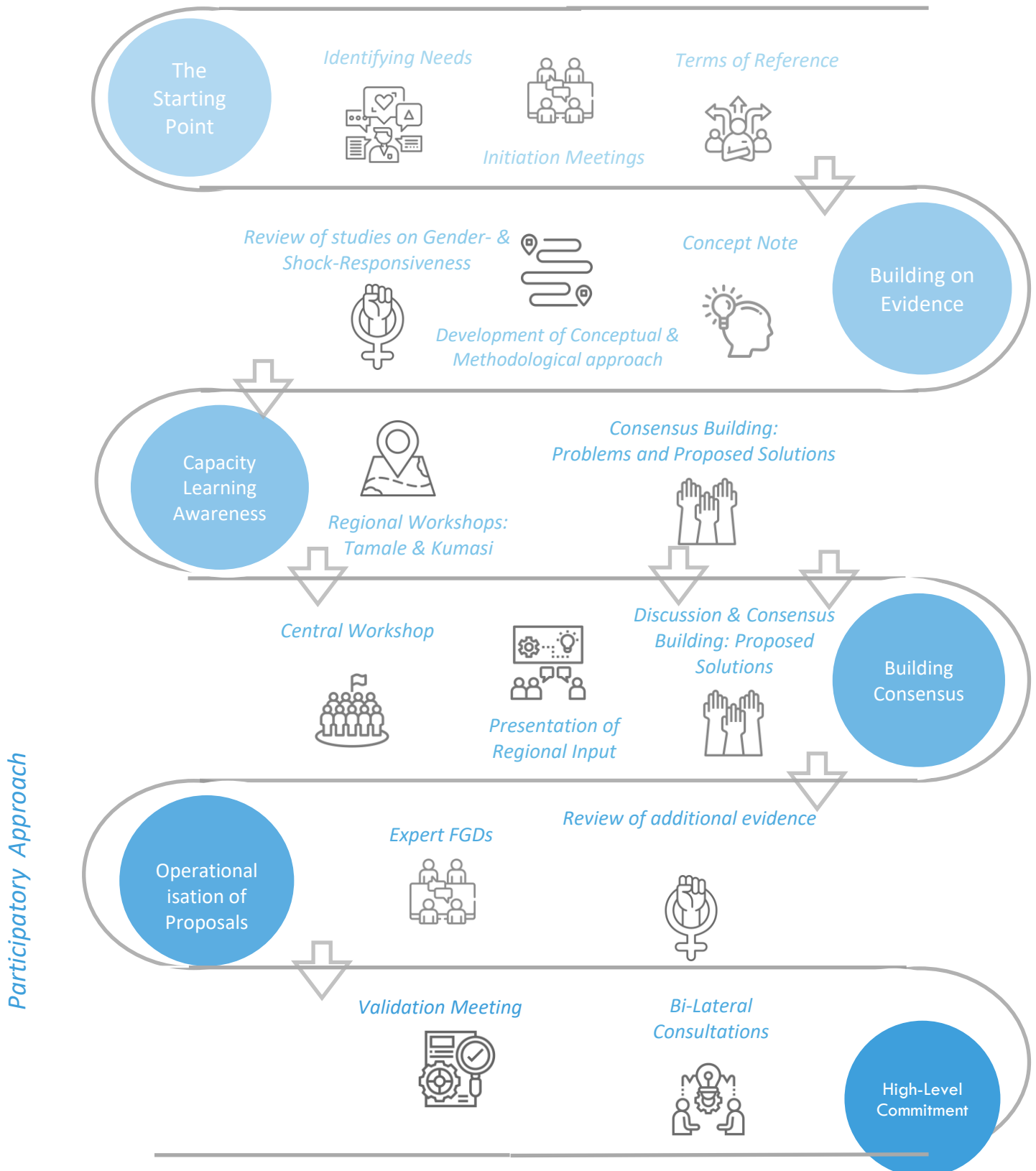


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## 6. Annex

### 6.1 Overview of Twin-Track Methodological Approach



## 6.2 Legal and policy framework

There are a number of legal and policy commitment supporting and aligning with this roadmap for strengthening the gender and shock-responsiveness of Ghana's Social Protection System. Specifically, this includes the National Gender Policy, the National Social Protection Policy, and the GBV Action Plan.<sup>21</sup>

### 1. National Gender Policy, 2015

The Policy seeks to mainstream gender equality and women's empowerment into national development processes. The Policy outlines five (5) commitments namely: (i) women's empowerment and livelihood; (ii) women's rights and access to justice; (iii) women's leadership and accountable governance; (iv) women's economic opportunities; and (v) gender roles and relations.

The overarching goal of this Policy is to mainstream gender equality and women's empowerment concerns into the national development process to improve the social, legal, civic, political, economic, and cultural conditions of the people of Ghana; particularly women and men, boys and girls in an appreciable manner and as required by national and international frameworks. The specific objectives are to:

- Accelerate efforts and commitments of government in empowering women (especially women with disability) to have safe and secure livelihood, access to economic opportunities, decent work to improve earnings while addressing disparities in education, socio-economic and cultural issues, health and agriculture, trade and related matters. The core issue here is about 'Women's Empowerment'.
- Speed up enforcement and domestication of ratified international treaties, policies and strategies adopted by the Government to tackle violence, discrimination and promote gender equality and women's empowerment nationwide. In pursuance of this objective the rights-based approaches will be emphasized. This objective addresses what the Policy classifies as 'Women's Right and Access to Justice'.
- Support the passage and implementation of an Affirmative Action Law and put in place transformative measures (including leadership development) that will enable women and men participate equally in achieving at least the 40% women representation in politics, on Boards and at all levels of decision making. In pursuance of this objective, a well-developed institutional capacity and a healthy political environment based on rule of law, government effectiveness, control of corruption, regulatory quality, will be promoted as necessary conditions for women's interest and rights. This objective area refers to 'Leadership and Accountable Governance for Women'.
- Improve women's economic opportunities including engendering macro-economic and trade policies so that the basic and strategic needs of both men and women are addressed. In pursuance of this objective, gender responsive budgeting, trade, tax literacy, access to credit and encouragement of a savings-culture among women will be enforced.
- Transform inequitable gender relations in order to improve women's status relative to that of men. In pursuance of this objective, state policies in all areas will be identified and monitored with a gender empowerment (GE) and women's empowerment (WE) lens to ensure equity compliance. The objective is to promote Gender Roles and Relations.

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<sup>21</sup> Note that this section draws heavily on MLGDRD & MOGCSP's (2023)

## **2. Ghana National Action Plan for the Implementation of the United Nations Security Council Resolution 1325 On Women Peace and Security (GHANAP 1325), 2020.**

The overall goal of the NAP 2020 is “to build inclusive, secure, and safe societies for women and girls in Ghana anchored on the tenets of United Nations Security Council Resolution 1325 (UNSCR 1325) (p. 13). The NAP is structured with reference to the main pillars of UNSCR 1325: participation; protection; prevention; and recovery and rehabilitation that would enable the country to achieve these objectives:

- 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
- Prevention of Violence against Women including Sexual, Gender-Based and Conflict related Violence

## **3. National Social Protection Policy, 2015**

The National Social Protection Policy provides a framework for delivering social protection coherently, effectively, and efficiently in a way that is holistic and properly targeted. It defines social protection for Ghana as “a range of actions carried out by the state and other parties in response to vulnerability and poverty, which seek to guarantee relief for those sections of the population who for any reason are not able to provide for themselves”. It provides an institutional framework for coordination and as well as stakeholder collaboration in monitoring and ensuring accountability. It is linked to a range of legal instruments and policies that provide a framework within which the obligations to various target groups may be justified, implemented, regulated, and advocated. In the short-term, the policy focuses on being rehabilitative, restorative, protective and facilitating. This includes the implementation of five flagship programs, namely, the LEAP program, the LIPW, the Ghana School Feeding Programme (GSFP), the National Health Insurance (NHIS) Exemptions and the Basic Education Capitation Grants. The medium-term efforts are preventive and promoting. The long-term orientation is transformation. Operationally, it proposes reforms to programming, targeting, funding, public understanding of social protection and knowledge management. The policy’s strategic imperatives are coordination and complementarity; emergency assistance; social welfare and facilitation services; productive inclusion; decent work; capacity and capability building; and mainstreaming gender and disability issues in social protection.

## **4. National Child and Family Welfare Policy, 2015**

Ghana's Child and Family Welfare Policy focusses on the prevention of violence, abuse and exploitation of children. It underpins a child protection system that will safeguard and respond to children and their families when needed and provide support to mitigate risks for vulnerable families. This Policy recognizes a child as a person under the age of 18. In line with the UN Convention on the Rights of the Child, the 1992 Fourth Republic Constitution of Ghana (article 28) and the Children’s Act 1998, (Act 560) (section 1). The policy describes childhood as a period when a person is under the authority, control and care of some persons considered as adults in society. The Policy defines welfare as guaranteeing the availability of the necessities of life as well as minimizing the levels of violence, exploitation, abuse and neglect.

## **5. Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH) Risk Mitigation Action Plan, 2023**

The Sexual Exploitation and Abuse (SEA) / Sexual Harassment (SH) Risk Mitigation Action Plan has been prepared to meet the requirements of the World Bank's Environmental and Social Framework (ESF) for the Ghana Productive Safety Net Project (2) project most particularly the Environmental and Social Standard (ESS2) on working conditions and the Standard on Community Health and Safety Labor (ESS4). The Action Plan (AP) details the operational measures to assess and mitigate the risks of GBV, most notably SEA and SH and how they will be integrated over the life cycle of the Project. This includes procedures for mitigating risks, reporting, responding and managing grievances related to such abuse.

## 6.3 Recommendations per Problem Areas and Programmes

	Overall	LEAP	GSFP	NHIS	LIPW	PI
<b>Economic Shocks</b>	<ul style="list-style-type: none"> <li>- Strengthen existing Social Assistance initiatives.</li> <li>- Rethink Productive Social Protection programs in light of women's unpaid care burden</li> </ul>	<ul style="list-style-type: none"> <li>- Train women on prevention and resilience strategies.</li> <li>- Define macro-economic shocks criteria.</li> <li>- Maintain timely and continuous LEAP during shocks.</li> <li>- Participate in gender trainings to address harmful norms.</li> <li>- Improve transfer adequacy for specific groups to ensure equity</li> </ul>	<ul style="list-style-type: none"> <li>- Define macro-economic shocks criteria.</li> <li>- Maintain timely and continuous GSFP during shocks.</li> </ul>	<ul style="list-style-type: none"> <li>- Collaborate with LEAP to register vulnerable groups affected by economic shocks.</li> </ul>	<ul style="list-style-type: none"> <li>- Implement gender provisions effectively.</li> <li>- Extend maternity leave for early pregnancy protection.</li> <li>- Train women on economic shock prevention and resilience.</li> <li>- Promote village saving schemes as social security mechanisms.</li> <li>- Establish formal social security interventions through LIPW.</li> </ul>	<ul style="list-style-type: none"> <li>- Implement gender provisions effectively.</li> <li>- Extend maternity leave for early pregnancy protection.</li> <li>- Train women on economic shock prevention and resilience.</li> <li>- Promote village saving schemes as social security mechanisms.</li> <li>- Establish formal social security interventions through LIPW.</li> </ul>



	Overall	LEAP	GSFP	NHIS	LIPW	PI
<b>Unpaid Care Responsibilities</b>	<ul style="list-style-type: none"> <li>- Expand care services.</li> <li>- Integrate care measures in Productive Social Protection programs.</li> <li>- Transform gender norms</li> </ul>	<ul style="list-style-type: none"> <li>- Engage in gender trainings and sensitization on harmful norms.</li> <li>- Enhance transfer adequacy for specific groups to ensure equity.</li> </ul>	/	<ul style="list-style-type: none"> <li>- Strengthen collaboration with LEAP to register vulnerable individuals affected by economic shocks.</li> </ul>	<ul style="list-style-type: none"> <li>- Promote awareness and collaboration to change harmful norms.</li> <li>- Ensure gender provisions implementation and expand maternity leave.</li> <li>- Address the unpaid care burden of women through messaging and research.</li> <li>- Reduce working hours for women in public works.</li> </ul>	<ul style="list-style-type: none"> <li>- Raise awareness to change harmful norms.</li> <li>- Collaborate with relevant stakeholders to develop effective strategies for changing gender norms.</li> <li>- Ensure proper implementation of gender provisions.</li> <li>- Expand access to childcare services for beneficiaries</li> </ul>
<b>Old Age Vulnerabilities</b>	<ul style="list-style-type: none"> <li>- Strengthen collaboration between LEAP and NHIS</li> <li>- Transform social vulnerabilities</li> </ul>	<ul style="list-style-type: none"> <li>- Collaborate with NHIS to facilitate registration for vulnerable groups.</li> <li>- Establish a common definition of old age between LEAP and NHIS.</li> <li>- Enable automatic enrollment and convenient pay points for elderly women.</li> <li>- Participate in gender trainings to address harmful norms.</li> </ul>	/	<ul style="list-style-type: none"> <li>- Collaborate with LEAP to register vulnerable groups affected by economic shocks.</li> <li>- Establish a common definition of old age between LEAP and NHIS.</li> <li>- Link non-LEAP eligible old women to NHIS under the</li> </ul>	/	/



	Overall	LEAP	GSFP	NHIS	LIPW	PI
		<ul style="list-style-type: none"> <li>- Improve transfer adequacy for equitable support</li> </ul>		<ul style="list-style-type: none"> <li>indigent category.</li> <li>- Facilitate access to adequate healthcare for elderly women.</li> </ul>		
<b>GBV</b>	<ul style="list-style-type: none"> <li>- Expand and Strengthen Immediate Action</li> <li>- Enhance Economic and Psychological Assistance</li> <li>- Address Root Causes and Transform Harmful Gender Norms</li> <li>- Strengthen Inter-Sectoral Collaboration</li> <li>- Address child marriage</li> </ul>	<ul style="list-style-type: none"> <li>- Train and sensitize duty bearers.</li> <li>- Integrate GBV messaging in routine communication activities.</li> <li>- Strengthen GBV referral pathways to LEAP for economic autonomy.</li> <li>- Collaborate on GBV referral to complementary services through the LEAP system.</li> <li>- Participate in gender trainings on harmful norms.</li> </ul>	<ul style="list-style-type: none"> <li>- Integrate transformative components for caters to change harmful norms.</li> <li>- Collaborate with Ghana Education Services to discuss integrating transformative components for children.</li> </ul>	<ul style="list-style-type: none"> <li>- Evaluate GBV victims' access to medico-legal services, including lifesaving treatments and psychosocial support.</li> <li>- Review benefit package to waive fees for medico-legal services</li> </ul>	<ul style="list-style-type: none"> <li>- Raise awareness to change harmful norms.</li> <li>- Collaborate to develop a strategy for changing gender norms.</li> <li>- Strengthen referral mechanisms for GBV survivors.</li> <li>- Ensure training and sensitive handling of GBV cases.</li> </ul>	<ul style="list-style-type: none"> <li>- Raise awareness to change harmful norms.</li> <li>- Collaborate to develop a strategy for changing gender norms.</li> <li>- Strengthen referral mechanisms for GBV survivors.</li> <li>- Ensure training and sensitive handling of GBV cases.</li> </ul>
<b>Teenage Pregnancies</b>	<ul style="list-style-type: none"> <li>- Strengthen existing Social Protection initiatives.</li> <li>- Promote Comprehensive Sexual Health Education</li> </ul>	<ul style="list-style-type: none"> <li>- Engage in gender training and sensitization.</li> <li>- Enhance transfer adequacy for equitable outcomes</li> </ul>	<ul style="list-style-type: none"> <li>- Integrate transformative components for caters to change harmful norms.</li> <li>- Collaborate with Ghana Education Services on</li> </ul>	<ul style="list-style-type: none"> <li>- Craft clear and accessible communications about benefit package.</li> <li>- Promote awareness of maternal health</li> </ul>	<ul style="list-style-type: none"> <li>- Raise awareness to change harmful norms.</li> <li>- Collaborate with relevant stakeholders to develop a strategy</li> </ul>	<ul style="list-style-type: none"> <li>- Raise awareness for norm change.</li> <li>- Collaborate on gender norm strategy.</li> <li>- Ensure proper implementation of gender provisions.</li> </ul>

	Overall	LEAP	GSFP	NHIS	LIPW	PI
	<ul style="list-style-type: none"> <li>- Integrate Transformative Initiatives into Social Protection Programs</li> <li>- Enhance Inter-Sectoral Collaboration</li> </ul>		<ul style="list-style-type: none"> <li>transformative components for children.</li> <li>- Explore integrating complementary services for young girls' reproductive health.</li> </ul>	<ul style="list-style-type: none"> <li>care benefits among enrolled teenage girls.</li> </ul>	<ul style="list-style-type: none"> <li>to change gender norms.</li> <li>- Extend maternity leave to support women during early pregnancy.</li> <li>- Offer vocational training.</li> </ul>	<ul style="list-style-type: none"> <li>- Expand vocational training to reduce teenage pregnancies</li> </ul>
<b>Participation in Decision-Making</b>	<ul style="list-style-type: none"> <li>- Strengthen existing productive social protection.</li> <li>- Transform social norms limiting women's participation in public decision-making</li> </ul>	<ul style="list-style-type: none"> <li>- Prioritize females in duty bearer roles and committees.</li> <li>- Encourage women to become facilitators and committee members.</li> <li>- Collaborate to enhance women's participation mechanisms.</li> <li>- Participate in gender trainings to address harmful norms.</li> </ul>	<ul style="list-style-type: none"> <li>- Collaborate with the Department of Gender to empower female caterers in decision-making.</li> <li>- Encourage active participation of female caterers in program delivery decisions through sensitization.</li> <li>- Enhance women's self-esteem and leadership skills through trainings.</li> </ul>	/	<ul style="list-style-type: none"> <li>- Prioritize females in selecting duty bearers and promote their active participation.</li> <li>- Encourage women's involvement as facilitators, committee members, and decision-makers.</li> <li>- Enhance women's leadership through vocational training.</li> <li>- Collaborate with the Department of Gender to strengthen mechanisms for women's participation.</li> <li>- Raise awareness and develop strategies to change harmful norms.</li> </ul>	<ul style="list-style-type: none"> <li>- Prioritize women in selecting duty bearers and promoting their participation.</li> <li>- Encourage women to join as facilitators and committee members.</li> <li>- Strengthen women's skills and confidence through vocational/life skills training.</li> <li>- Collaborate with the Department of Gender to enhance mechanisms for women's participation.</li> <li>- Raise awareness to change harmful norms.</li> <li>- Collaborate with relevant stakeholders to develop a strategy for gender norm change.</li> <li>- Engage men to support women's empowerment.</li> </ul>

	Overall	LEAP	GSFP	NHIS	LIPW	PI
					<ul style="list-style-type: none"> <li>- Engage men to support female empowerment.</li> <li>- Ensure effective implementation of gender provisions.</li> </ul>	

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