

# Azerbaijan



# **AZERBAIJAN**

## **COUNTRY GENDER ASSESSMENT**

**East and Central Asia Regional Department and  
Regional and Sustainable Development Department  
Asian Development Bank**

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## Abbreviations

ADB	—	Asian Development Bank
CAR	—	Central Asian Republic
CBO	—	community-based organization
CDC	—	Center for Disease Control
CEDAW	—	Convention for the Elimination of all forms of Discrimination Against Women
CGA	—	Country Gender Assessment
CIS	—	Commonwealth of Independent States
ECD	—	early childhood development
FHH	—	female-headed household
fSU	—	former Soviet Union
GDP	—	gross domestic product
HDI	—	Human Development Index
HIV/AIDS	—	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HBS	—	Household Budget Survey
IDD	—	iodine deficiency disorder
IDP	—	internally displaced persons
IOM	—	International Organization for Migration
IRC	—	International Red Cross
LFS	—	Labor Force Survey
MDGs	—	Millennium Development Goals
MFI	—	microfinance institution
MMR	—	Maternal Mortality Ratio
NCWFGA	—	National Council on Women, Family and Gender Affairs
NGO	—	nongovernment organization
NPA	—	National Plan of Action (on Women's Issues)
OSCE	—	Organization for Security and Co-operation in Europe
PHC	—	primary health care
RHS	—	Reproductive Health Survey
SCRIDP	—	State Committee for Refugees and Internally Displaced Persons
SWCI	—	State Commonwealth for Women's Issue
SME	—	small and medium-sized enterprise
SPN	—	Sector Policy Notes
SPPRED	—	State Program on Poverty Reduction and Economic Development
SPPREAD	—	State Program on Poverty Reduction and Sustainable Development
SSC	—	State Statistical Committee

STIs	—	sexually transmitted infections
SWG	—	Sector Working Group
TBA	—	traditional birth attendant
TOR	—	terms of reference
UNDP	—	United Nations Development Programme
UNFPA	—	United Nations Population Fund
UNHCR	—	United Nations High Commissioner for Refugees
UNICEF	—	United Nations Children’s Fund
UNIFEM	—	United Nations Development Fund for Women
USAID	—	United States Agency for International Development
VAW	—	violence against women
WHO	—	World Health Organization

### GLOSSARY

rayon	—	district
Milli Meztis	—	Parliament
oblast	—	province
Milli QHT Forums	—	National NGO Forum
Sot	—	0.01 Ha or 100m <sup>2</sup>

### CURRENCY EQUIVALENTS

(as of 6 December, 2005)

Currency Unit	–	manat (AZM)
1.00	=	\$0.02
\$1.00	=	4,613 manats

### NOTE:

In this report, “\$” refers to US dollars.

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## **Executive Summary**

The shift from the command economy of the Soviet Union era to a new market economy has been a challenge for Azerbaijan. In the early transition years, employment fell as state-owned enterprises shut down, health indicators declined as funding to the former health system decreased, and poverty levels increased as many of the former state social protection programs were cut or abolished. In addition, the protracted war between Azerbaijan and Armenia over the territory of Nagorno-Karabakh left more than 800,000 internally displaced persons and refugees (IDP/Rs) requiring state assistance. Recovery from these events has been steady and Azerbaijan has experienced good economic growth over the last decade. A consistent commitment to policy and structural reform, combined with its vast gas and oil reserves, suggest that with sustained efforts Azerbaijan has considerable potential to reduce poverty levels over the next decade.

For women in Azerbaijan, the transition period has produced mixed and often gendered results. Women's formal employment levels have fallen considerably more than men's. More than one third of women in the 20–49-year-old age group are now defined as economically inactive. With fewer opportunities in the formal sector (including in the developing private sector), women have increasingly looked to the informal sector to supplement family income, although such work is usually unprotected and involves long hours for little pay. Despite showing incentive to seek out and often create employment opportunities in small and medium-sized enterprises (SMEs), women have also found it more difficult than men to access the credit, training, and skills development support that would enable them to expand and develop these income- (and employment-) generating opportunities.

Moreover, with the end of the Soviet Union, many state programs focusing on the needs of women, such as the system of family and child-care support, were eliminated, transferring this responsibility to women who were already struggling to balance and meet their paid and unpaid work responsibilities. The “triple shift” and poverty have also manifested themselves in women's and children's declining nutritional health indicators. High rates of anemia and iodine deficiency are seen, as well worrying levels of malnutrition and stunting in young children. In addition, growing gender disparities in political leadership at both the national and local levels have combined to undermine women's opportunities to influence the national political (and poverty reduction) agenda. Finally, the transition period has uncovered new types of female disadvantage, such as trafficking, the (re)emergence of traditional beliefs and practices, and health- and lifestyle-related risks—including high rates of gender-based violence.

### **Gender and Poverty in Azerbaijan: Background and Key Issues**

For many women in Azerbaijan, the end of the Soviet era signaled the beginning of a period of decreasing opportunities. Key losers in the large-scale job losses of the early transition period, women increasingly dominate the ranks of the unemployed and “economically inactive” population; suffer professional discrimination in the formal sector, where considerable horizontal

and vertical gender segregation persists; and increasingly find themselves marginalized in the developing private sector.

Women in Azerbaijan have responded to the challenge of unemployment in a number of ways. Many have found themselves pushed back into the home role where their labor in housework and as carers for children and, often, the elderly is unpaid and unacknowledged. Some of those who have been pushed out of formal sector employment, including many of this category of “home workers,” have reemerged in the informal sector, where they work at a variety of trades both inside and outside the home, juggling paid informal work with child care and domestic tasks. Some are working in subsistence farming, where hours are long, the work is arduous and intensive, and little opportunity exists to generate additional savings or income to protect them and their families from the smallest of income shocks. Very few women, and mostly those with some capital assets, have started small businesses; some have enjoyed success, with families and small communities providing support networks, including the provision of child care. These networks are, however, also under increasing pressure as everyone struggles to meet their basic needs in a difficult economic environment.

Addressing these issues is complex and requires comprehensive approaches that recognize and support women’s productive and reproductive roles, as well as their central role in the “care” economy. In addition to creating new opportunities and implementing appropriate employment retraining programs for women, provision of affordable and accessible child care in rural and urban areas, using integrated community-based models that provide both education and health care services, is important if women are to be enabled to engage in paid employment. Improving women’s access to economic resources and providing a supportive environment (e.g., business development advisory services, training, access to markets) for expanding women’s participation in the SME sector; putting in place legislation that defines and protects women’s equal employment opportunities (as well as legal protective measures against sexual harassment and discriminatory employment practices); and making policy commitments to creating fast-track opportunities for women’s promotion in the civil service are some of the additional ways in which opportunities for women can be expanded and supported. Central to each of these is the need for better assessment of the gender dimensions of the formal and informal sector (particularly in the face of reduced social services), as well as women’s participation rates and roles in the agricultural sector.

In the health care sector, high levels of nutritional deficiency among women and girls are of concern in Azerbaijan and, in addition to eroding women’s (productive) capabilities, also undermine their overall quality of life. In particular, the prevalence of anemia among women of childbearing age is extremely high: official statistics record one in six women (16.4%) as suffering from anemia in 2003 (SSC 2004:155). Survey data suggest that the real figure is significantly higher. More than one third of pregnant and nonpregnant women tested positive for anemia in the 2001 Reproductive Health Survey (RHS) (USAID/CDC/UNFPA et al. 2003: 119-120). Child malnutrition is also a major concern. One in five children in the poorer regions of Nakhchivan and the South and Southwest was found to be underweight and one in four is suffering from stunting. Iodine deficiency is a major nutrition problem for women and children. According to government data, more than half of pregnant women are iodine deficient (Quoted in ADB, 2003: 2). Although

official maternal mortality rates show a real decline since 1994, weaknesses in the reporting system may well be underestimating the actual situation (SSC, 2004: 135).

In education, emerging gender disparities in enrollments at tertiary and vocational education institutions and marked gender segregation in choices of study at this level suggest a possible widening gap in the skills base between men and women in the future. Affecting both boys and girls, the inadequate level of early child care facilities and programs could impact upon the capabilities of the current and future generations of children under 5 years unless addressed as a policy priority.

A number of potential entry points exist for addressing these capability-related issues. In the health care sector, improving access to affordable, quality healthcare services is critical to achieving lower maternal and infant mortality rates, particularly in rural areas, and needs to be supported by relevant and appropriate training and supervision of front-line health care workers to improve their skills in safe deliveries and the management of prevalent diseases such as diarrhea and acute respiratory infections. In addition, improved health behaviors, both preventive and curative, should be promoted among communities and households to address the major causes of childhood illness and death. Integrated early childhood development programs that combine early learning programs with preventive health service delivery, such as immunization, prevention, and control of micronutrient deficiencies and the promotion of infant and young child feeding practices (including breastfeeding), are also important. In the education sector, making policy commitments to encourage increased female enrollment in higher education, committing additional funding support to expanding and improving the quality of early childhood development (including kindergarten) programs, and revising school curricula and textbooks to remove stereotyped images of women's and men's roles are all ways in which women's capabilities can be strengthened.

In Azerbaijan, as in many other former Soviet Union states, women have experienced increasing levels of income and nonincome insecurity over the last decade. In particular, the loss of regular employment for large numbers of women and men and protracted periods of unemployment have eroded savings and assets; few of the poor are able to resist even small income shocks to their welfare. The simultaneous decline in the kind and amount of benefits paid through the social protection system and the considerable financial demands of the system of "informal" payments for education and health care has further contributed to the growing levels of economic insecurity experienced by many families. Increasing levels of trafficking in women and girls is another dimension of income insecurity (IOM 2002: 36) and trafficked women and girls also suffer high levels of physical insecurity, physical and emotional violence, and rape. Domestic violence is understood to be widespread, although rarely reported in Azerbaijan, where it is still seen as a "private matter" and frequently concealed.

In addition to increasing employment opportunities for women and providing appropriate support for promoting women's entrepreneurship, improving women's economic security requires ensuring that the social protection system provides a level of support adequate to protect women and their families from sudden income shocks. Moreover, proposed reforms of the system, particularly in key areas such as pensions, need to be expertly reviewed to ensure that they do not

discriminate against or disadvantage women or contain gender biases that will negatively impact on women's economic security. Similarly, women's equal access to assets needs to be assured, not only through the enforcement of legislation that guarantees such equity, but through improved awareness of those rights in the public and private sector, as well as within civil society. Ensuring that effective legal frameworks are in place and enforced to combat violence against women and trafficking is central to decreasing the levels of physical insecurity women face. These need to be supported by regular training of judicial, legal, medical, police, and migration staff on trafficking and violence issues, regular public information campaigns (including in schools and universities), and the provision of safe houses and psychological support and counseling.

Women have also experienced increasing disempowerment in the public domain. Their formal representation in political structures and administrative decision-making bodies has been considerably reduced, largely as a result of the removal of the 33% former Soviet Union (fSU) quota system. Between 1989 and 2004, women's representation in Parliament decreased from 40% to 6%, (or 13 of the 125 members of the present National Assembly). Women's representation at the local level is also very poor, and in the 2004 December municipal elections, only 4.0% of elected members were women (SSC 2004, SCWI 2005: data provided on request). Women's representation within the senior levels of the bureaucracy is also very low, with considerable gender imbalances at decision-making levels in all Ministries. As of 2004, nine out of ten senior management positions in the civil service were occupied by men; only one out of 29 Ministers/Heads of Committees was a woman—and that was in the State Committee for Women's Issues.

While women's low political participation rates can be increased through the setting of targets, this needs to be supported by a policy commitment to conduct national, regional, and village-level campaigns aimed at encouraging and increasing women's participation in governance structures at all levels; in addition, gender awareness training should be conducted for staff in those structures at all levels. Approval of the equal employment opportunity legislation that is currently being revised, framed by an effective enforcement structure, would provide a solid legal framework for guaranteeing women's equal rights in the workplace. Changing traditional attitudes and beliefs that restrict women's employment after marriage and childbirth and women's promotion prospects will require longer-term strategic interventions that combine workplace awareness raising and training in both the public and private sectors.

### **Government Strategies**

Although some government policies and programs address gender issues to a limited degree (e.g., education and health care), gender mainstreaming at the strategic policy formulation and development level is not being routinely implemented at present. The three government policy documents that consider gender and poverty issues in some detail are the State Program on Poverty Reduction and Economic Development (SPPRED), which is the key policy document outlining the Republic of Azerbaijan's approach to poverty reduction; the National Plan of Action on Women's Issues 2000–2005 (the NPA); and the national Millennium Development Goals (MDGs) targets and commitments.

The first SPPRED, which spans the period 2003–2005, does consider a number of the gender issues identified in this assessment in a separate chapter on gender issues and within some of the sector programs such as education and health care, although gender is not mainstreamed consistently throughout the document’s analysis and diagnosis of the various dimensions of poverty, or in the policy matrix and budget. The NPA, which outlines the Republic’s gender strategy, does identify a number of the most pressing gender issues in Azerbaijan, as well as actions to overcome them, although many do not have a specific timeframe for implementation or identify indicators or outcomes against which progress can be monitored. The Government’s commitment and approach to achieving the eight MDGs outlined in the 2000 Millennium Declaration is being finalized to include modified national targets and indicators (see Table 2). It is recognized that these targets and indicators should be integrated and synergistic with those in the new SPPREAD for the years 2006–2015.

This assessment makes a number of general recommendations for improving gender mainstreaming within government strategies for poverty reduction, which, taken together with the various sector recommendations, could increase women’s opportunities, strengthen their capabilities, empower them to more effectively participate in and influence decision-making institutions, and increase their physical and economic security. In summary these include the following:

- Evaluate the implementation progress of gender initiatives in and gender impacts of SPPRED 2003–2005, before identifying and developing gender mainstreaming mechanisms and actions to be implemented in SPPREAD. This would provide a strategic framework for developing appropriate and effective gender mainstreaming initiatives in the SPPREAD document and assist the Sector Working Groups (SWGs) that have been formed to guide the SPPREAD formulation process.
- Mainstream gender in SPPREAD so that gender issues are considered and addressed within and across each sector assessment and at the macro level. Covering the period 2006–2015 and to be formulated with the support of nine SWGs (including a separate group on gender), SPPREAD provides a clear window of opportunity to mainstream gender across all sectors and to ensure that the policy and program measures identified are properly resourced.
- Align the gender equality goals and objectives of the key national policy instruments, with a view to ensuring that they are consistent as to goals and objectives and contain relevant and measurable performance indicators, define outcomes, and clearly specify responsible agencies and timeframes for implementation. The SPPREAD process provides an entry point to develop a synergy between these various policy documents.
- Build the capacity of the State Committee on Women’s Issues and Gender Focal Point Network and provide sufficient resources to enable them to meet their mandate effectively.

- Integrate the MDGs by identifying key gender issues within each of the targets, appropriate policy and program level entry points, and measurable indicators for monitoring progress.
- Re-invigorate the Intersectoral Gender Council so that it can also have an input into the development of the new NPA, the SPPREAD process, and the setting of MDG national targets. Ensure that the Council is chaired by someone of high rank with decision-making influence if it is to command authority within the Government.
- Undertake a gap analysis of gender-related information requirements and improve the quality and scope of collection of sex-disaggregated statistics and indicators in all sectors.

### **ADB Gender Strategy**

The early stage of ADB's lending operations in Azerbaijan provided considerable opportunities to effectively mainstream gender at both strategic and operational level of country program. Four strategic areas of focus frame the current Country Strategy and Program Update (CSPU 2005–2006), including: (i) assistance for IDPs, (ii) agriculture and rural development (flood mitigation and micro and rural finance development), (iii) social infrastructure (water supply and sanitation), and (iv) transport. In addition, ADB's has focused on assisting the formulation and implementation of SPPREAD (2006-2015) through the provision of technical assistance (TA). The TA will assist the Government in integrating the achievement of MDG into its development planning and implementation process. One of the TA output is to support working group in preparing gender action plan for SPPREAD and integrating gender indicators into the MDG monitoring system.

Many of the gender issues and concerns identified in this assessment are directly relevant to ADB's sector work in the strategic areas of focus within the CSP of 2006-2010 (ADB 2004a); these need to be mainstreamed into operational planning at every opportunity.

Assisting the IDP population, which remains one of the most poor and disadvantaged groups in the country, has been identified in the CSPU (2005–2006) as a key strategic area of focus. As noted in this CGA, significant gender issues persist within the IDP/R population including high levels of unemployment, the poor health status of refugee women and children, and indications that the dropout rates for girls at the secondary school level are increasing due to unsuitable schooling conditions and pressures to work or marry.

ADB's key areas of focus within the agriculture and rural development sector are flood mitigation and micro and rural finance development. Effective gender mainstreaming in flood mitigation and rehabilitation projects requires recognizing and responding to women's multiple roles and responsibilities in the agricultural sector.

Although a considerable number of women have successfully accessed microcredit through the formal sector, the scope for expanding such access in rural areas and support women in establishing SME's is considerable. To address the problem of underdeveloped financial services, which have impeded rural development, ADB is providing support to increase bank and microfinance activities in rural areas and communities outside Baku. This assistance follows from the recent decree for the development of regions outside Baku, is listed as a specific measure for poverty alleviation in the SPRRED, and has been accorded particularly high priority by the Government.

The shortage of safe water and sanitation impacts particularly upon the poor and specifically upon women. In particular, it is women who are usually responsible for purchasing water, collecting it, and transporting it, and who care for household members who fall ill as a result of unhygienic water and sanitation facilities. As both managers and users of water, women are usually aware of water-related problems and have concrete suggestions for their improvement. ADB's involvement in the water supply and sanitation sector aims to expand and upgrade infrastructure, support institutional reform for decentralized service delivery, and establish new water utilities with adequate operational and managerial capacity.

ADB's involvement in the early childhood development (ECD) subsector responds to the priority accorded to addressing child health and education concerns in the SPPRED and will contribute to progress toward key health-related MDGs by addressing malnutrition, morbidity, and mortality issues in ECD.



## **Chapter 1**                      **Gender and Poverty in Azerbaijan**

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### **A.     Poverty in Azerbaijan**

Azerbaijan is an independent Republic of approximately 86,600 square kilometers, situated in the southeastern area of the Caucasus region; it borders Iran to the South, Armenia to the west, Georgia and Russia to the north, and the Caspian Sea on the eastern border. Outside the capital, Baku, which consists of 11 administrative units or *rayons*, the country is divided into 65 administrative units (including 59 rayons and 6 cities) and the autonomous republic of Nakhchivan (consisting of 6 rayons and the capital, Nakhchivan city). Azerbaijan became independent in 1991. Azerbaijan, with vast oil and gas reserves, is wealthy in natural resources, and both oil and natural gas are expected to continue to be the major sources of export revenue in the foreseeable future.

Azerbaijan has a population of 8.2 million. Azerbaijanis, the predominant ethnic group, make up about 89% of the total population; Russians (3%), Dagestani (3%) and Armenians (2%) are the largest ethnic minorities (USAID 2005). Approximately 51% of the country's population live in urban areas. Around one quarter of the population are under 15 years of age and 6% are over the age of 65. Women make up 51% of the population. Life expectancy at birth has been increasing over the last 2 decades; in 2003, it was 75 years for women and 70 years for men, with no significant rural/urban variations (SSC 2004a: 127–129).

After the collapse of the Soviet Union in 1991, Azerbaijan and Armenia, both former republics of the Soviet Union, engaged in a protracted war over the territory of Nagorno-Karabakh and in 1994 reached a cease-fire agreement. Armenia still occupies 20% of Azerbaijan. The war left Azerbaijan with some 790,000 internally displaced persons and refugees (IDP/Rs); 570,000 Azerbaijani ethnics displaced from Nagorno-Karabakh and the surrounding occupied territories and 220,000 Azerbaijani residents who fled Armenia and relocated to Azerbaijan when the war began. Representing approximately 10% of the population, they constitute the largest proportion of IDP/Rs concentrated in one country of the Caucasus region (UNHCR 1999).

Despite its natural oil and gas wealth, reducing poverty is the major challenge for Azerbaijan. According to the 2003 Household Budget Survey (HBS), close to 3.7 million people, or about 44.7% of the total population, lived in poverty in 2003, consuming less than AZM178,850 (\$36.50) per capita per month. Among these, a group of 800,000 persons, or 9.6% of the total population, lived in extreme poverty with monthly consumption below AZM124,137 (\$25.50 per month) (Republic of Azerbaijan 2003). While the proportion of the population living in absolute poverty has decreased since 2002 from 46.7% to 44.7%, relative poverty<sup>1</sup> has increased over the 2002–2003 period from 8.8% to 12.0%.

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<sup>1</sup> The value of the “relative poverty line” for the 2003 HBS was calculated at AZM129,684, or 70% of median consumption expenditure.

The poverty rates have shifted between rural/urban areas since 2001. In 2001 the HBS reported a higher incidence of income poverty among urban households, a trend that continued in 2002 with 47.8% in urban areas and 45.4% in rural areas. The 2003 HBS, however, reports slightly higher rural poverty rates of 45.3% compared to 44.1% for urban areas and 35.4% for the capital and main population center, Baku. On the basis of these figures, it appears that urban poverty rates have been decreasing over the last 2 years, while rural poverty rates are remaining static.

Poverty has a strong regional dimension in Azerbaijan. Absolute poverty rates in regions such as Nakhchivan (59.2%) and Mughan-Salyan (52.9%) are substantially higher than in northern regions such as Shaki-Zagatala (40.3%), or in southern regions such as Lankaran–Astara (42.3%) (Table 1). Almost one in five people in Nakhchivan lived in extreme poverty in 2003, and extreme poverty rates were over 10% in Absheron-Guba, Shirvan, and Ganja-Gazakh for the same period, but significantly lower in Baku (6.8%) (Republic of Azerbaijan 2005a: 27).

**Table 1. Poverty Incidence by Categories of the Population** (individuals)

Categories of the Population	Poverty levels (%)		
	Absolute Poverty Line (AZM178,850)	Relative Poverty Line (AZM129,684)	Extreme Poverty Line (AZM124,137)
Total population	44.7	12.0	9.6
Urban	44.1	13.5	11.2
Rural	45.3	10.3	7.9
Nakhchivan AR	59.2	21.2	16.9
Absheron-Guba	45.7	15.2	13.9
Mughan-Salyan	52.9	10.7	8.2
Ganja-Gazakh	49.1	13.9	10.8
Shaki-Zagatala	40.3	11.5	7.8
Lankaran-Astara	42.3	7.4	5.4
Shirvan	51.6	14.6	12.9
Garabagh-Mil	44.2	11.3	9.1
Baku	35.4	9.0	6.8

AZM = Azerbaijani manat.

Source: Republic of Azerbaijan, 2005a: 27.

The risk of poverty increases with household size, for both absolute and extreme poverty. The lowest poverty rates are among single-person households (5.4%) and increase significantly as the number of household members increases, to 45.8% for households with five members and 57.0% for households with six or more members. Households without children are also considerably less poor than households with children. The figures are 55.4% for a household with 3 children and 62.7% for a household with 4 or more children. The HBS also found that compared to the 23.2% of households without children living below the absolute poverty line, 47.4% of households with children were below this line. (Republic of Azerbaijan 2005a: 28).

The relationship between poverty and educational attainment of the household head is positive. Those with less than a secondary education are not only have a higher incidence of absolute poverty (45.0%, compared with 28.6% for those with higher education), but are also twice as likely to live in extreme poverty (10%, compared with 4.4%). These findings are consistent with both the 2001 and 2002 HBS.

The 2003–2004 Progress Report of the SPPRED notes significant differences between male- and female-headed households (FHHs). Male-headed households are more likely to be living in absolute poverty (40.3%) compared with FHHs (28.5%). Investigation of the data used has identified some key reasons for the result. First, only a modest to small share (19.4%) of FHHs was used in the HBS sample. Second, the size of the FHHs in the HBS sample is relatively small (70% of FHHs consist of not more than three members and the overall poverty level for households with three members is comparatively low at 21.4%) (Republic of Azerbaijan 2005a: 28–29). This finding suggests again that household size rather than the gender of the household head is the more significant factor influencing poverty risk.

In addition to the substantial levels of income poverty in Azerbaijan, nonincome poverty resulting from lack of access to affordable quality services is an increasing concern. While Azerbaijan has retained a high level of educational attainment, with enrollments close to 100% at primary level, government expenditures are low and considerable financial support is provided by parents for recurrent expenditures, maintenance, library books, and other teaching materials. These “informal” costs of education place a burden on families, especially the poor. A review of the health care sector also suggests that many people lack adequate access to affordable quality services and that the system is under considerable stress. Rising out-of-pocket expenses (informal costs) for health care are also a feature of the system in Azerbaijan, which has suffered from steadily declining government expenditures since 1995. The decline places significant financial burdens on consumers, with the poor least able to meet these extra costs.

IDP/Rs are especially vulnerable to the many dimensions of both income and nonincome poverty. Almost one in two IDP/Rs is unemployed, according to a recent World Bank/United Nations Development fund (UNDP) Survey; unemployment levels are even higher outside Baku (Cited in World Bank 2003). Many work in the informal sector, where they are extremely vulnerable to exploitation and work long hours, often in poor conditions. IDP/Rs as a group are characterized by having few assets, including limited access to agricultural land; a heavy dependence on government transfers and exemptions; poor standards of housing; limited access to sanitation and direct water supplies; worrying rates of infant neonatal mortality; poor nutritional levels, especially among women and children; and declining enrollments in secondary education. These combine to make them particularly vulnerable. Recognizing this, numerous development partners have supported targeted poverty reduction programs for the IDP/R communities, although growing resentment among the non-IDP/R poor population has recently prompted a shift toward more integrated poverty reduction efforts.

Attesting to these many dimensions of poverty, many of the poor who participated in the SPPRED process provided their own accounts of the impact of the transition period on their lives,

noting in particular the decline in employment opportunities and access to affordable and quality health care services, as well as clean water and sanitation. A large number of the poor, and particularly those in rural areas, also attested to feelings of hopelessness and apathy and were skeptical about the prospects for a visible improvement in their living standards in the near future. Social exclusion as a result of loss of employment networks and migration were also reported (Republic of Azerbaijan 2003: 143).

## **B. The Gender Dimensions of Poverty in Azerbaijan**

For many women in Azerbaijan, like many men, the transition period has exacted considerable costs. Many continue to struggle against increasing poverty rates, high levels of unemployment, a decline in access to quality basic services, and the (re)emergence of traditional gender stereotypes that limit their personal, social, economic, and political freedoms. This gender assessment captures the gender dimensions of poverty in Azerbaijan within an analytical and conceptual framework of (i) decreasing opportunities, (ii) eroding capabilities, (iii) increasing levels of insecurity, and (iv) increasing disempowerment. The following discussion summarizes these dimensions, which are discussed in detail in the report.

### **1. Decreasing Opportunities for Women**

In Azerbaijan, as in many other states of the former Soviet Union (fSU), decreasing opportunities for women have included loss of employment and persistent unemployment; growing marginalization, in both the public and private formal sector workforces; vertical and horizontal segregation in the labor market, with significantly fewer women than men being appointed to senior decision-making posts; unequal wages; and increasing levels of time poverty resulting from the triple burdens of child-care, household labor, and paid (formal or informal) work. Moreover, limited access to credit and technical support for the development of small and medium-sized enterprises (SMEs) has constrained the considerable potential demonstrated by women in the transition period to start up and manage their own enterprises.

#### **a. Loss of Employment and Persistent Unemployment**

The transition period resulted in an unprecedented loss of jobs for women and men in Azerbaijan. In 1990, women constituted almost half of the formal workforce in Azerbaijan; by 2004, the situation had changed dramatically: one in six women of working age in urban areas was classified as unemployed. In 2003, the Labor Force Survey (LFS) found that only 59.5% of working-age women (i.e., between 16 and 56 years) were economically active, compared with 83.6% of working age men (i.e., 16–61 years).

#### **b. Occupational Segregation and Wage Differentiation**

As the new market economy has expanded, women have become increasingly concentrated in its lower-paid sectors (such as teaching) and remain underrepresented at senior levels of management in both the private and public sector. In 2004, only 11.4% of senior decision-making

posts in the Government were occupied by women (SCWI; data provided on request). Women are also more likely than men to be in low-paid jobs, “nonstandard” work (i.e., part-time, temporary, home-based), and the informal sector, where their rights are unprotected, working conditions are poor, and earnings are small. According to the 2004 Labor Force Survey, 17% of women who reported themselves as employed defined themselves as engaging in a “private entrepreneurial activity without forming a legal person” which suggests informal sector work (SSC 2004b: 31). Although the principle of equal wages for equal work is guaranteed by law in Azerbaijan, the concentration of women in lower-level positions (which also pay less) in the public and private sectors has led to significant disparities in wages in many sectors. Even in sectors in which women dominate the workforce, such as health care and social services (where there are 5.6 times as many women as men), women’s wages were only 54.4% that of men’s in 2003, largely because they occupy few of the better-paid jobs (Republic of Azerbaijan 2005a: 57–58).

### **c. Time Poverty**

For women in Azerbaijan, “time poverty” is a concrete reality, as they struggle to meet the demands of the triple shift of unpaid child care, home-based work, and often additional income-generating work in the formal or informal sector. In addition, the decline in state-supported services for the vulnerable, particularly the elderly, as well as the rising out-of-pocket or informal costs of prolonged health care, has meant that many women are also responsible for caring for the elderly and the frail at home in addition to their usual tasks. For many women, particularly in rural areas, this time poverty is compounded by the lack of availability of safe water and the need to purchase, transport, and prepare water for daily consumption. Further analyses of women’s and men’s daily time use in Azerbaijan would help to define this dimension of poverty further and permit the development of national policies that recognize, take full account of, and address women’s multiple responsibilities.

### **d. Constraints to the Expansion of Women’s Entrepreneurship**

The establishment of SMEs in Azerbaijan has consistently been identified as one of the most promising ways to diversify the economy and create employment.<sup>2</sup> Official statistics, while not focusing on women entrepreneurs specifically, do indicate that not only are considerable numbers of women engaged in their own businesses (17.0%) (SSC 2004a: 195), but that income from this self-employment is the primary income source for a significant proportion of women (17.6%) (SSC 2004a: 200).

Although sources of credit have increased considerably in recent years, both institutional and cultural barriers remain, preventing women from accessing credit and other financial services such as savings and remittance services—especially in the formal banking sector. The inability to meet collateral requirements and difficulties in negotiating their way through banking regulations

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<sup>2</sup> The World Bank, the International Labour Organization, the United Nations Economic Commission for Europe, and the United Nations Development Programme have all identified expansion of the SME sector as a key poverty reduction strategy.

and requirements, as well as a lack of responsiveness from largely male lending officers, have all been cited by women as constraints to establishing SMEs in Azerbaijan. Instead, many women source funds from immediate family members, relatives and friends (ILO 2004). The scope for developing appropriate formal mechanisms to support the financing of women's SMEs in Azerbaijan—and for providing complementary business training and advisory services in both central (i.e., Baku) and regional centers—is considerable.

## **2. Erosion of Women's Capabilities**

This assessment also notes that women's capabilities are also being eroded in various ways. High rates of nutrition-related disorders, including significant levels of maternal and childhood anemia and iodine deficiencies can significantly undermine women's productive capacities and impose extra direct and indirect costs on households as a result of chronic ill-health. Low levels of awareness of contraceptive methods and preventive behaviors for HIV/AIDS and STD keep women from controlling their own health outcomes; furthermore, the continued use of abortion as a method of birth control has serious consequences for women's reproductive health. In the education sector, indications are that attendance of girls at senior secondary levels is decreasing and gender segregation of courses at the vocational and tertiary educational level is growing.

### **a. Poor Nutrition**

Poor nutrition is one of the most serious health issues in Azerbaijan, and women and children are especially vulnerable. The State Statistical Committee (SSC) has estimated that in 2003, 16.4% of all pregnant women suffered from anemia (ILO 2004: 155). In contrast, the 2001 Reproductive Health Survey (RHS), which tested 1,906 women of childbearing age throughout the country, found a 40% prevalence rate overall: 38.4% of pregnant and 40.2% of nonpregnant women tested positive for anemia, and in the Central and Southern regions of the country rates were even higher (54.1% and 49.0%, respectively) (USAID/CDC/UNFPA et al, 2003: 119–120). Prevalence of iron deficiency anemia among pregnant women in 2001 was found to be 52.5%, according to government data (quoted in ADB 2003b: 2).

### **b. Increasing Risk of HIV/AIDS Transmission and High STD Rates**

While prevalence rates of HIV/AIDS are low in Azerbaijan, with only 596 registered cases (80% of which are men), the risk is that they could increase rapidly unless preventive measures are taken. Moreover, it is thought that the number of active female cases may well be higher than official data suggest, due to lack of confidential testing and counseling and support services. Growing rates of (largely men's) migration to Russia and Turkey, combined with women's (and men's) low level of awareness of preventive measures, places women at real risk. The RHS found that 72% of women could not spontaneously state any major way of avoiding HIV infection, and less than 1% could name three or more preventive behaviors (USAID/CDC/UNFPA et al, 2003: 282–283). Growing rates of trafficking of women and girls are also of concern, as many of them are forced into sex work, where they become highly vulnerable to HIV and sexually transmitted infections (STIs).

**c. Gender Differences at Vocational and Tertiary Level**

Significant gender disparities are emerging in enrollments in the tertiary and vocational education sector. Larger numbers of men compared to women are opting for tertiary study at higher educational institutions. They make up 53.4% of all enrollments, compared with 46.6% for women (SSC 2004b: 171). More than twice as many men are enrolled in vocational institutions as women (69.5% vs. 30.5%) (SSC 2004b: 164). Men's enrollment in nonstate higher education institutions, at 56.6%, is also significantly higher than women's, at 43.4%, suggesting that men are enjoying greater access to these paying institutions. Gender segregation in courses taken by women and men at tertiary level is also considerable. Women opt for courses sectors such as education, public health, and social sciences, where pay is low, and men in geology, construction, economics, and management.

**3. Increased Levels of Insecurity**

The problem of increased levels of insecurity being experienced by many women is one of the less studied aspects of nonincome poverty, but one that nevertheless has the potential to undermine women's opportunities and capabilities. In particular, increasing economic insecurity has consequences. It has forced many women into low-paid jobs in the informal sector and produces tensions within the household as savings are eroded and assets sold to meet the costs of daily survival. The growing rates of trafficking are clearly related to women's increased levels of insecurity. Most women cite poverty as the primary push factor. Moreover, disturbing levels of domestic violence in Azerbaijan pose a direct threat to women's and children's physical and emotional security, well-being, and health.

**a. Increasing Economic Vulnerability**

When over 40% of the population of Azerbaijan lives in absolute poverty and almost one in 10 lives in extreme poverty (Republic of Azerbaijan 2005a: 27), poverty and economic vulnerability define the daily lives of many men, women, and children. Few of the poor, including women, are able to resist even the slightest income "shocks" to their welfare and even those households not defined as poor are experiencing increasing rates of transient poverty, because they have few assets or savings to cushion the fall-out from loss of employment or even the loss of an elderly member of the family who contributes pension income. Moreover, the breakdown of family and community kinship obligations and the weakening of traditional social networks has weakened the social safety net upon which many poor women and men have long relied.

**b. Weak and Inadequate Social Protection**

The end of the Soviet Union also meant an end to many of the social protection programs that had been provided by the state, including health care, child-care centers, and a generous pension system. For many women, the dismantling of these support systems has meant not only a loss of the sizeable social protection transfers that contributed directly to their real incomes, but has also shifted many of the responsibilities of the former state to the household where they are

expected to do the bulk of the ensuing work. A 2003 assessment by the World Bank concluded that due to lack of targeting, overall social protection spending did not make a major contribution to poverty reduction (World Bank 2003: 107).

**c. Growing Rates of Trafficking**

Trafficking of women and girls is a growing problem. Azerbaijan is known as a source, transit, and destination country for victims. Internal trafficking is also taking place, primarily from regional areas to Baku, mainly for the purposes of sexual exploitation. Interviews with victims of trafficking by the International Organization for Migration (IOM) suggest that poverty combined with limited hopes for the future are primary push factors.

**d. Increase in Violence Against Women**

The transition period has been characterized by the increase of violence against women (VAW) in its many forms, including sexual harassment in the workplace, assaults, rapes, and domestic violence (physical and emotional). Although the data are insufficient to determine the scope of the problem because large numbers of cases are unreported, the existing information paints a grim picture. While accurate figures are difficult to obtain, the 2001 RHS found that one in every four women reported that they had been subject to physical violence in the month prior to the survey (USAID/CDC/UNFPA et al, 2003: 293). An International Red Cross survey of both resident and IDP/R communities found that 43% of the married women surveyed had experienced violence in their current relationship (IRC 2004:11).

**4. Increasing Disempowerment of Women**

In Azerbaijan, as in many other fSU states, the transition period has been marked by women's increasing disempowerment, as their representation in political structures at the national and local level has plummeted and appointments to senior decision-making posts in the Government have decreased dramatically. Many women have also noted growing disempowerment within the home and the community, where restrictive gender stereotypes and attitudes have (re)emerged and coalesced with decreasing employment opportunities to reinforce the role of women as wives, mothers, and carers within the home and community.

**a. Decrease in Political Leadership Positions**

The transition period in Azerbaijan has been characterized by a significant decrease in political leadership positions for women at all levels. In 2004, women made up only 10.4% (13 out of 125) of members of the National Assembly, down from 40% representation in the Supreme Soviet in 1989 (State Committee for Women's Issues: data obtained by request). The proportion of women in local-level government is even lower. In the municipal elections in December 2004, only 4.0% of elected members were women. The level of women's participation in party politics is also extremely low; gender issues are also not systematically addressed within the platforms of the

major political parties and are not perceived to be “key” election issues, even though around 50% of voters are women.

**b. Low Number of Women in Decision-Making Levels in Government**

The number of women employed in government positions in Azerbaijan is also very low compared with the numbers of men, particularly at senior levels. In 2004, 88.4% of all senior decision-making posts in the Government were occupied by men. Even in ministries that had a large and tangible “female” client group, such as the Ministry of Agriculture, men occupied 96% of all decision-making posts (SCWI: data obtained on request). Moreover, of the 29 ministers and heads of state ministries and committees, only one is a woman—and she heads the SCWI. Women appointed to decision-making posts are also largely confined to certain ministries that deal with sectors commonly perceived to be “female,” such as Health, Culture, and Social Protection, rather than sector ministries such as taxes, Internal Affairs, and Finance.

**c. Pervasive Gender Stereotypes and Patriarchal Attitudes**

Pervasive gender stereotypes and attitudes prevail in Azerbaijan and contribute to women’s growing sense of disempowerment. Following independence, the majority of the newly independent states, including Azerbaijan, failed to address gender inequality in the home, reinforcing the perception of women as mothers and family caretakers, rather than as individuals and independent actors in the public sphere. Such views are at the heart of the significant discrepancies between *de jure* and *de facto* equality in Azerbaijan. Many women report growing pressure on them to marry young, have children, and remain in the home taking care of immediate and extended family members, and do not feel encouraged to pursue careers over the longer term. In the Azerbaijan RHS (2001), nine out of 10 women interviewed believed that they needed their husbands’ permission to get a job; the same number noted that men should have the final say in family matters (USAID/CDC/UNFPA et al., 2003: 205).



The principal policy document outlining the Republic of Azerbaijan's approach to poverty reduction is the Azerbaijan Poverty Reduction Strategy Paper (PRSP), the State Program on Poverty Reduction and Economic Development, known as the SPPRED. The first SPPRED (2003–2005) was approved in February 2003, and two progress reports have been prepared to date covering the years 2003 and 2004. A final progress report for the year 2005 will be prepared in 2006. Preparations for the next SPPRED, known as SPPREAD 2006–2015 are already underway and include an extensive participatory process that will inform the development of the principal strategic directions and goals for the program's 10-year time-span. In addition, the Government has commenced an extensive process of identifying national formulations and targets for the Millennium Development Goals (MDGs), which are expected to be finalized by the end of 2005.

**A. The 2003–2005 SPPRED**

The 2003–2005 SPPRED was developed following a broad-based participatory process that engaged both government officials and representatives of civil society. The process was coordinated by the SPPRED Secretariat in the Ministry of Economic Development, which has the mandate to act as the focal point for SPPRED strategic planning, development, monitoring, and reporting. Fifteen Sector Working Groups (SWGs) provided the main mechanism for consultations at the official level and Sector Policy Notes (SPNs) provided the basis for initial discussions, as well as the subsequent consultative process that took place around the country. Roundtable discussions among members of the Government, Parliamentarians, and development partners (including international organizations and nongovernment organization [NGOs]) were held over several months to examine sector priorities and develop a national strategic framework for the SPPRED (Republic of Azerbaijan 2003: 272–279). In recognition of the need to build capacity for poverty analysis, a Poverty Monitoring Unit (PMU) was also established at the SPPRED Secretariat and continues to play a key role in the monitoring and analysis of poverty trends throughout the country, as well as identifying data weaknesses and gaps.

**1. Strategic Directions in the SPPRED**

The product of this participatory process was the SPPRED 2003–2005. It is a well-structured document that begins with an analysis of the dimensions of poverty in Azerbaijan, including a demographic profile; an analysis of the incidence of poverty and its rural/urban dimensions and the way in which poverty has manifested itself within different sectors such as health care, education, and employment; and a subsection on gender and poverty. It then provides an economic analysis that examines the impacts of the transition process to date, the achievements so far, and the key challenges that lie ahead.

Following this analysis, six strategic directions are identified within the SPPRED for achieving its overall goal of poverty reduction and economic development:

- facilitating an enabling environment for growth of income-generating opportunities;
- maintaining macroeconomic stability;
- improving the quality of and equity in access to basic health care and education services;
- improving infrastructure (including roads, delivery of utility services, communications, and irrigation);
- reforming the current system of social protection to give more effective protection to the vulnerable; and
- improving the living conditions and opportunities for the 1 million IDP/Rs of the Nagorno-Karabakh conflict.

Details of the actual measures for achieving these strategic goals are outlined in several subsequent chapters, which address the social and economic policies required for poverty reduction, as well as the need for an appropriate institutional framework underlined by public administrative and judicial reform, decentralization, and the need to combat corruption. Gender issues are addressed within the chapter on social policies. A key but somewhat marginalized part of the SPPRED is the “Policy Matrix,” which is presented in Appendix 1 of this CGA and outlines in detail each of the identified measures and actions for achieving each of the strategic goals, the implementation schedule, responsible bodies, indicators to measure progress, and financing. While the Policy Matrix contains a number of gaps and shortcomings, particularly with regard to the identification of indicators, and is extremely ambitious in its scope, it does provide the most comprehensive overview of the Government’s proposed activities for the SPPRED implementation period.

## **2. Gender and the 2003-2005 SPPRED**

Gender issues are primarily addressed within two separate sections of the SPPRED document. In the diagnostic section on poverty in Azerbaijan, which includes a brief (one-page) section on “Gender and Poverty” (Section 1.6), and in the section outlining “Social Policies Aimed at Poverty Reduction,” where a section on “Gender Policy” (Section 3.8) is included. The Policy Matrix does not address gender issues specifically, although it does state at the outset that “gender factors have been considered in all of the activities and policies mentioned in the matrix” (Republic of Azerbaijan 2003: 159).

An analysis of the complete SPPRED 2003–2005 document, however, suggests that gender issues have not been effectively mainstreamed in the document, neither in the analysis and diagnosis of the various dimensions of poverty that are presented in the first part, nor in the responses to poverty that are presented in the second half. As a result, gender issues outside the allocated gender chapter appear in a piecemeal and fragmented fashion.

The diagnostic section of the SPPRED 2003–2005, for example, addresses only employment issues such as labor market segregation and high levels of female unemployment, and

critically ignores the significant, but as yet unexplored, gender and poverty dimensions of the informal sector and the impact of a weakened social protection system. Similarly, while the “gender policy” section attempts to highlight some key gender issues in sectors such as employment, education, and health care, the section is disconnected from the remainder of the document, no time frames are given for implementation of specified actions, no responsible agencies are identified, no budget is attached to their implementation, and no indicators are identified for monitoring progress. Appendix 1 also presents a summary of the extent to which gender issues are addressed within each chapter and section of the SPPRED; it shows that gender issues are treated with some elaboration only in the section specifically dedicated to “gender equality,” with a brief mention of gender issues in only 7 out of a total of 43 other sections.

Although a Gender Focal Point has been appointed within the PMU, the appointment was not a dedicated position. The Focal Point is responsible for managing a number of SPPRED sector focus areas in addition to addressing gender issues. This workload has considerably limited the extent to which the Focal Point has been able to effectively undertake his/her gender mainstreaming role; limited additional financial and human resources to undertake key Focal Point responsibilities (e.g., monitoring and review of gender-related initiatives) has compounded the problem.

## **B. Gender Mainstreaming and the SPPREAD**

The formulation of the SPPREAD (2006–2015) is expected to build and improve upon the participatory processes that informed SPPRED and provide an informed analysis of the (sector) dimensions of poverty, as well as a detailed assessment of the financing required to achieve the identified actions. This preparatory process provides a timely opportunity to ensure that a gender mainstreaming approach is taken, with regard to the participatory processes as well as in the SPPREAD document itself. Assessing the effectiveness and impact of gender mainstreaming in the SPPRED should be a precursor to this process, permitting the identification of lessons learned and improvements at both the policy and program level. See Appendix 2 for mainstreaming entry points in SPPRED and for SPPREAD.

Central to improving gender mainstreaming in the SPPREAD is the need to consult with women themselves. About their priorities and concerns as well as proposed strategies for resolving the most pressing issues. Although the SPPRED participatory process has been identified as a model for PRSP development, the Government has acknowledged that the levels of women’s participation were inadequate. Only 38% of the respondents in the first two rounds of questionnaires were women and only 10% of the participants in the focus group discussions. Improving the gender balance in the participatory process should therefore be a key priority for the SPPREAD formulation process. This may require developing alternative participatory mechanisms (e.g., women-only focus group discussions, meetings with women’s NGOs, meetings in communal locations for women at appropriate times when they are able to attend) and broadening the information campaign so that it also effectively captures a female audience.

In addition, while the SCWI was included in the 2003–2005 SPPRED Working Group process and did actively participate in a number of SWGs, limited staff resources constrained its capacity to be fully engaged in all SWGs or ensure that gender was effectively mainstreamed in all SPNs. The creation of a separate SWG for Gender within the SPPREAD formulation process is a positive step forward, although a mechanism needs to be created so that the SCWI can fully engage in all aspects of the formulation process, including participation in all of the SWGs and the formulation of all SPNs (or their equivalents). In addition, it will be important that the gender initiatives identified in the SPPREAD be consistent with and complementary to the National Plan of Action (NPA) on Women’s Issues, which is also due for revision in 2005, and include clearly defined goals, targets, activities, and indicators for which appropriate budgets are provided.

Ensuring that the SCWI and the SPPRED Secretariat have the dedicated human resources for these tasks and establish procedures that will ensure that they can work closely together at both the strategic and sector priority-setting levels is vital. This will require a fully dedicated gender position in the SPPRED Secretariat, who would serve as a liaison between the SCWI, the Gender Focal Points, the Intersectoral Council and civil society groups in the identification of key gender issues, as well as strategic entry points within SPPREAD for addressing them.

### **C. The Millennium Development Goals: Integrating National Goals and Targets**

The SPPRED Secretariat has been taking the lead in coordinating the development of appropriate national-level targets and indicators for the MDGs and will remain the central focal point within the Government for coordination of the MDG process. Over the last 12 months the Secretariat has continued this work; a draft list of targets and indicators is expected to be finalized by late 2005. The United Nations agencies are also playing an active role in promoting and facilitating national-level discussion on MDG targets and indicators. The United Nations Development fund for Women (UNFPA) has taken on the lead role for MDGs #3 and #5; the United Nations Children’s Fund (UNICEF) for MDGs #2, #4, and #6; and UNDP for #1, #7, and #8. Appendix 3 presents a summary of international and national target MDGs for Azerbaijan.

While broad agreement has been reached around these national targets, the work of setting appropriate national-level indicators has been complex and constrained by statistical difficulties, including a lack of relevant benchmark data, weaknesses in the current statistical data sets (including significant gaps in sex-disaggregated data) and discrepancies between traditional official data and the results of independent surveys, especially in regard to the basic health statistics. (In particular, the differences are considerable between the results of the Multiple Indicator Cluster Survey [MICS] of 2001 [UNICEF/SSC 2000] and government statistical data on key indicators such as infant, under-5 and maternal mortality). The Government is aware of the need to strengthen the national statistical capacity in order to monitor the MDGs and, more broadly, the SPPRED.

Appendix 3 considers these further by highlighting the gender dimensions of each of the identified national targets and indicators that are briefly highlighted in the discussion below. In the process of further refining the MDGs, targets, and indicators at the national level, Azerbaijan is developing additional indicators for many of the MDGs and targets. Efforts should be made to

ensure that these indicators include a gender dimension as far as possible and that appropriate support (both financial and administrative) is provided to enable the collection of relevant data.

### **1. MDG #1. Eradicate Extreme Poverty and Hunger**

As noted in chapter 1, while absolute poverty has decreased to 44.7%, relative and extreme poverty has increased to 12.0% and 10.0%, respectively. Moreover, while urban poverty rates have decreased by 3.7%, rural rates have decreased only marginally. Overall poverty rates are now higher in rural areas (45.3%) than in urban areas (44.1%). Azerbaijan has noted that it has a better chance than most other Commonwealth of Independent States (CIS) countries of meeting MDG #1, providing that efforts are continued to use oil revenues prudently; the non-oil sector is developed prudently, through an improved investment and business environment; and a more equitable distribution of the benefits of economic growth is ensured. In addition to tracking absolute poverty rates, it will be important for Azerbaijan to monitor the scale of income inequality within the country continually and develop appropriate measures to distribute the benefits of economic growth equitably.

The International MDGs include several indicators for Goal #1 relating to the prevalence of underweight children under 5 years old and the proportion of the population below the minimum level of dietary consumption. As noted previously, the UNICEF MICS 2000 survey found high rates of stunting and underweight children in this age group in Azerbaijan. Addressing this issue will require a comprehensive approach, involving the strengthening of the primary health care (PHC) system, including service delivery and the promotion of healthy lifestyles in adults and good growth in children through effective community mobilization programs.

### **2. MDG #2. Achieve Universal Primary Education**

In Azerbaijan, enrollment rates in basic education (grades 1–9) are fairly close to 100%, although dropout rates are higher for the poor than the nonpoor. Sector concerns relate more to quality, including the need to build the skills and knowledge necessary to meet the challenges of an increasingly globalized economy. Achieving this national MDG will therefore require a focus on improving the quality of education provided, including educational outcomes. Improving the collection of gender disaggregated data is also important. In particular, calculation of net as well as gross enrollment rates is important, as are regular surveys of school attendance rates for boys and girls. Gender-sensitive learning materials also need to be developed, and given the considerable segregation in the current labor force, could also seek to broaden girls' academic and professional aspirations by depicting women in a wider range of occupations.

### **3. MDG #3. Promote Gender Equality and Empower Women**

As noted above, while enrollment rates at the primary level are close to universal and do not show significant gender differences, female attendance rates at the secondary level are a concern, particularly among poor rural girls. Significant disparities in the vocational training sector are also a concern. More than twice as many men (69.5%) as women (30.5%) enroll at vocational

institutions and considerable gender segregation occurs in fields of study, with women dominating in sectors such as education, health care, and natural sciences that are lower-paid and men in the higher-paid sectors such as geology, engineering, and economics. To achieve this MDG, interventions will need to be developed to encourage more women into the tertiary education sector and to expand their choices in educational specialization. However, this will also require labor market adjustments to provide women with opportunities to use those skills. Addressing the higher levels of female-to-male inactivity and unemployment rates is therefore central to achievement of this MDG.

#### **4. MDG #4. Reduce Child Mortality**

Monitoring progress on this MDG is complicated by data uncertainties and disparities. For example, while the SSC baseline was 24.8 deaths per 1,000 live births for 2001 and 19.9 deaths in 2003, the Azerbaijan RHS (1996–2000) placed the figure at a much higher 88.4 deaths per 1,000 live births. Once the baselines figures are agreed on, it will nevertheless be important to ensure that administrative data are complemented by regular and similar sample size/design survey data, such as the RHS. A key difficulty with available data sets to date has been the lack of sex-disaggregated statistics that would enable the effective tracking of the gender dimensions of mortality rates.

Nevertheless, available figures suggest that many infant (and maternal) deaths in Azerbaijan are associated with caregivers' lack of knowledge/early recognition of the danger signs of diseases and infections, and could therefore be prevented if care-seeking behaviors are improved. For example, the MICS (UNICEF 2000) showed only 34% of caretakers know at least two danger signs of childhood diseases and a Mercy Corps study (2002) showed that less than 5% of families know the danger signs. In addition, the increase of early (before age 20) pregnancies in Azerbaijan<sup>3</sup> is of concern, because such pregnancies are known to increase the risks to both mother and child, including low birth weight, pre-term birth, stillbirth, neonatal accidents (cerebral damage), infections, hemorrhage, anemia, and mortality. Promotion of improved health behaviors among communities and households, both preventive and curative, to address the major causes of childhood illness and death, as well as improving access to quality pre- and postnatal care, are therefore central to achieving this MDG.

#### **5. MDG #5. Improve Maternal Health**

Monitoring progress on this MDG is also complicated by data uncertainties and disparities. At present, the only survey data available are derived from the UNICEF MICS 2000 survey, which gives estimates of maternal mortality rates for 1988 at 79 per 100,000 births. In 2000, the official maternal mortality ratio (MMR) was 37 deaths per 100,000 births and in 2003 the SSC figures were 18.5 per 100,000 live births. As the 2003/2004 SPPRED Report notes, "the real level of maternal mortality probably lies somewhere between official and survey estimates" (Republic of Azerbaijan 2005b: 43). These figures clearly need to be supplemented by regular survey data of

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<sup>3</sup> The RHS (2001) reported an increase in the proportion of women who had their first birth before the age of 20 from 12% among women currently 40–44 years of age to 22% in women 20–24 years of age.

similar sample and size. In particular, both administrative and survey data need to provide further information on MMRs by income group, location (i.e., rural/urban and regional differences), and distinctions between the general population and the IDP/R population.

Azerbaijan could reduce its MMR by three quarters by the year 2015 (i.e., to 9.3 per 100,000 live births) with increased public health spending and strengthened PHC and maternal and child health care programs, especially in rural areas. Improved definition for both administrative and survey data would also enable the targeting of specific vulnerable groups (i.e., poor rural women, IDP/R women). Moreover, improving the utilization rates of trained birth assistants among poor and refugee women could also have a positive impact on reducing the MMRs for this group.

## **6. MDG #6. Combat HIV/AIDS, Malaria, and Other Diseases**

The prevalence rate of Azerbaijan citizens infected with HIV is believed to be low by regional standards, although the actual extent is not known, because sero-prevalence surveys are limited and behavioral surveys are lacking. UNAIDS/WHO has estimated that in 2004, as many as 2,800 adults and children could be infected with HIV, noting that this remains a conservative estimate (UNAIDS/WHO 2004).

Although published data are scarce, available evidence also strongly suggests that migration (including temporary labor migration) increases the risk of contracting HIV. Increases in the numbers of trafficked women and girls in recent years is of particular concern, especially as many of them are forced into sex work in destination countries, where they become highly vulnerable to HIV and other STIs. Very low levels of female awareness of HIV/AIDS are also a problem. The 2001 RHS finding was that one in four Azeri women have never heard of HIV/AIDS, and 72% of women could not spontaneously state any main way of avoiding HIV infection (USAID/CDC/UNFPA et al. 2003: 282–283). Increasing public awareness of HIV/AIDS, including taking preventive measures, identifying and working with key vulnerable groups (e.g., temporary labor migrants, sex workers, injecting drug users [IDUs]), and expanding confidential testing facilities will be crucial if Azerbaijan is to successfully meet this MDG.

According to the WHO Global Tuberculosis Control Program, Azerbaijan is a Directly Observed Treatment Short-Course (DOTS) Category 2 country, defined as pilot phase and less than 10% coverage. Political commitment and additional resources are needed to expand coverage from the current 4% to 100% in order to meet the MDG goal of reversing the spread.

## **7. MDG #7. Ensure Environmental Sustainability**

Azerbaijan is poor in terms of available water resources. Available estimates from the 2003 HBS are that 31% of the population have no access to a central water supply, an improvement over previous years but still below desirable levels. Access to a central water supply was almost five times higher in urban (67.9%) than in rural areas (14.2%), and 60.8% of the rural population have no access to a water supply at all (Republic of Azerbaijan 2005b: 51–52). The UNICEF MICS 2000 survey also found considerable variations in access to safe drinking water between different

regions and by income group (UNICEF/SSC 2005: 20). Ensuring that drinking water meets basic quality standards and is available to all remains a challenge; regular assessments have not yet been undertaken in all regions and towns.

The shortage of safe water impacts heavily on the poor, and on poor women especially, because women bear the brunt of the additional workload involved, including queuing for water, storing it, and treating it (i.e., through boiling). Purchasing water at a higher price from merchants or having to go to public water sources may also be having impacts on intrahousehold allocations for other essential items, such as food, transport, and funds available for education of children. Achieving this MDG will be central to improving the health of women and their families; reducing time commitments for water collection and treatment has the potential to increase women's opportunities to engage in other productive work. However, an improved focus on gender issues in the provision of safe water and improved sanitation, including mechanisms for women's full participation in project design and implementation, is required if these positive benefits are to be realized.

## **8. MDG #8. Develop a Global Partnership for Development**

Azerbaijan's key targets for MDG #8 focus on increasing foreign direct investment (FDI) and exports in the non-oil sector and containing foreign debt, with baselines and exact targets still to be defined. In addition, making the benefits of information and communications technology (ICT) available to the general public has been identified as a target for this MDG.

While Azerbaijan has successfully attracted FDI into the oil sector, the sector remains very capital-intensive and employs only a small fraction of the total labor force. Increasing FDI in the non-oil sector is therefore particularly important to Azerbaijan's efforts to stimulate employment, decrease unemployment, and reduce income poverty. It is critical that efforts in this regard be gender sensitive and seek to address existing gender inequalities in the labor market, including women's high levels of unemployment and economic inactivity relative to men and their increasing marginalization in the private sector (as both employers and employees). Developing specific strategies within these targets to increase women's employment opportunities, encourage and support female entrepreneurship, and enforce and monitor the principle of equal pay for equal work are important if existing gender inequalities in the labor market are to be effectively reversed. Moreover, widening the scope of employment opportunities available to women in the non-oil sector could encourage more women to expand their choices in educational specialization and thereby contribute to the achievement of MDG #3.

Finally, it is important that efforts to expand ICT to the general public take into account the special needs of women in both urban and rural areas and promote easy access as well as support initial training and skills development. In particular, evaluating ways in which to address gender issues within the National Information and Communication Strategy developed in 2004 could provide a framework for subsequent interventions.

## **D. Recommendations**

Following are recommendations for integrating the MDGs and national goals and targets:

- Undertake a gender-aware policy appraisal that identifies the implicit and explicit gender issues in sector, macro-, and microeconomic policies and allied resource allocations; assesses whether the policy will continue or change existing inequalities between men and women and patterns of gender relations; and make adjustments that promote gender equality as appropriate.
- Evaluate the implementation and impact of gender initiatives in SPPRED 2003–2005 prior to identifying and developing gender mainstreaming mechanisms and actions to be implemented in SPPREAD. This would provide a strategic framework for developing appropriate and effective gender mainstreaming initiatives in the SPPREAD document. Such an evaluation would also be of key importance for each of the SWGs formed to guide the SPPREAD formulation process.
- Mainstream gender in SPPREAD. The current formulation of SPPREAD affords a real window of opportunity to ensure that gender is effectively mainstreamed at all points of the SPPREAD process, from the identification of key concerns and issues, through the preparatory participatory process, to the formulation of strategic policy goals and objectives and the development of gender-sensitive indicators to track progress. At every point, from problem identification and analysis to policy and program formulation, the gender dimensions of poverty should be identified and analyzed; and appropriate, and if necessary different, policy and program solutions considered.
- This assessment recommends that a dedicated staff position with responsibility for gender issues be established within the SPPRED Secretariat that would work with the SCWI to install gender mainstreaming at all stages of the formulation process. Mainstreaming gender throughout the SPPRED implies apportioning sufficient budget allocations at line ministry level for achieving defined program objectives. SPPREAD also provides an opportunity to consider introducing (possibly initially at the municipal level) gender budgeting approaches.
- Undertake a gap analysis of sex-related information requirements and improve the collection of sex-disaggregated statistics and indicators in all sectors. Effective gender mainstreaming begins with ensuring that sector policies are informed by sex-disaggregated data and an awareness that policy decisions impact on the lives of women and men in different ways. Although the HBS has considerably improved the collection of quality sex-disaggregated data, significant information gaps remain that need to be addressed if the policy directions and programs identified in the next NPA and SPPREAD are to be effectively targeted as priority areas of need. Undertaking a gap analysis of information weaknesses and additional studies/surveys focused on addressing these gaps would considerably enhance and strengthen the HBS data. Moreover, the collection of sex-disaggregated data in Azerbaijan, while improving, is still weak. The annual

publication *Women and Men in Azerbaijan* (SSC 2004a) needs to be strengthened with a view to including more sex-disaggregated data in key areas such as employment, health care, education, and migration.

- Integrate and Align the MDG targets and indicators with those in SPPREAD and NPA. Further consideration needs to be given to integrating the remaining MDG goals and targets and ensuring that those targets are in synergy with the SPPREAD process. The process of integrating the remaining MDGs and identifying key indicators, as well as appropriate policy and program level entry points, should be undertaken with the guidance of the SCWI and the SPPRED Secretariat and with the full participation of all ministries, relevant NGOs, and civil society organizations, as well as development partners. In addition, clear and measurable indicators of progress in achieving each of the national targets that will be agreed on need to be identified and made consistent with the indicators identified in SPPREAD.

## **Chapter 3 National Laws, Institutions, and Policies Promoting Gender Equality**

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This section considers in detail the principal institution responsible for gender issues in Azerbaijan, the SCWI, outlining its organizational structure, key activities, and key constraints. The section then proceeds to consider the NPA on Women's Issues, 2000–2005, which is the key policy document framing the Government's commitment to gender equality and identifying a program of activities up to the end of 2005.

### **A. International Commitments and Legal Framework**

Since independence, the Republic of Azerbaijan has ratified almost all essential international documents on the protection of women's rights. In August 1992, it signed the UN Convention on the Political Rights of Women, and in 1995 became a party to the UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), agreeing to the Optional Protocol in 2001. In 2004, Azerbaijan submitted its second and third reports to CEDAW. In March 2000, the President of Azerbaijan signed the Decree "On Implementation of the State Women's Policy in the Republic of Azerbaijan." The Decree is a brief statement of policy intent and, in addition to providing for equal representation of women and men at the decision-making level in all state bodies, encourages the Cabinet of Ministers to ensure that gender equality provisions are taken into account in the implementation of economic reforms and confirms the importance of collecting sex-disaggregated data that meet international standards.

Article 25 of the Constitution defines the right to equality, guarantees the equality of rights and freedoms irrespective of sex, and prohibits the limitation of human and civil rights and freedoms on grounds of sex. The Employment Act also includes the principle of equality between men and women in the exercise of the right to work and free choice of employment. In 2004, the SCWI drafted Equal Opportunity legislation, which, if enacted, obliges state bodies of the Republic to guarantee the provision of equal rights and equal opportunities to women in civil service and private sector employment, salaries, and entrepreneurship, as well as the equal right to property and education; and defines the role and functioning of the complaints process.<sup>4</sup>

Under Article 131 of the Criminal Code of the Republic, actions that prevent women from fully participating in public social and cultural activities and therefore significantly violating their rights are subject to criminal penalties, if they are associated with the use or threat of use of force. At present, no separate laws relate to VAW, although separate measures for the protection of women who have been subjected to violence are contained in articles 109, 110, 116, and 128 of the Criminal Code. The Code itself, however, contains no notion or definition of "domestic violence". Measures for the social protection of the family, including large families with children under 16 years of age, are contained in the Labor Code, the Act on Paid Leave, the Act on Citizens' Pension

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<sup>4</sup> The legislation is currently being reviewed and should be finalized in 2005.

Insurance, the Act on Employment of the Population of the Azerbaijani Republic, the Act on State Policy Towards Youth, and a number of other laws.

## **B. Institutions and Policies to Promote Gender Equality**

### **1. The State Committee for Women's Issues**

The SCWI was established by the Decree of the President in 1998 with a far-reaching mandate, including monitoring the implementation of the state policy on gender (the NPA on Women's Issues—see below); mainstreaming gender concerns into legislation, public policy, and state programs and projects; and facilitating the preparation and dissemination of sex-disaggregated statistics and information. In addition, the SCWI has established its own goals. These include developing appropriate national policy in the field of women's employment; improving cooperation between state structures, national, and international organizations; assessing and disseminating information on women's rights legislation, including reforms as appropriate; and providing assistance to refugee and IDP women, as well as women from low-income families. The SCWI is responsible for the annual production of reports on gender issues as well as reporting to the CEDAW and other UN Committees. At present the SCWI consists of 21 employees in four sections.

The chairperson of the SCWI is appointed by the President and is supported by a first vice chair and two vice chairs. The four sections include the Department on Women's Rights and Social Protection (3 employees); the Department on International Relations (3 employees); the Department on General Issues (2 employees); the Department on Financial-Economic Issues (3 employees), plus seven technical and support staff. Staff and programs are funded in the same annual budget package and in 2003, total funding was AZM568.5 million, representing 0.038% of total government expenditure (SCWI: data provided on request).

Although the SCWI is part of the executive arm of the Government and has a mandated gender mainstreaming function, it is not clear how this mainstreaming function should be implemented and very limited resources have been made available to support its realization. Defining a clear longer-term (e.g. 5-year) and annual work plan against (the NPA) the Committee's mandated goals and objectives and specifying the resources (human and financial) required to implement that it would provide a framework for action as well as a tool for monitoring and evaluating progress and impact.

In recent years, the SCWI has recognized the importance of building stronger networks with women's NGOs and civil society groups to promote gender equality goals, support the Committee's work toward achieving those goals and facilitate active collaboration on gender issues between the Government and civil society. In particular, the Committee has sought to develop stronger networks in both Baku and the regions. Sustaining and further expanding these efforts is critical, particularly given the Government's commitment to increase the level of women's participation in the development of SPPREAD. Moreover, the limited funding of the Committee's

program of work will require the building of strategic and working partnerships to enable it to meet its own policy and program objectives, as outlined in the current NPA, and those of the future.

Since 2002, SCWI has collaborated with the Steering Committee on Equality Between Women and Men of the Council of Europe and held several workshops on democratization, women's rights, and achieving a balanced participation of women and men in political and public decision making. The Committee also translated into Azeri and distributed among governmental and nongovernmental organizations the recommendations of the Committee of Ministers of the Council of Europe on protection of women against violence, trafficking in human beings for the purposes of sexual exploitation, and the balanced participation of women and men in political and public decision making. Two Nationwide Congresses of Women were also held, in 1998 and 2003. In addition, the Committee has commenced work on a National Human Development Report on Gender Attitudes, supported by UNDP and the Norwegian Government. The survey, which will explore gender attitudes and values within civil society, is the first its kind in a CIS country; the results will form the basis of the 2005 UNDP Human Development Report for Azerbaijan.

A key focus of the SCWI over the last 18 months has been the review of legislation to ensure that it promotes gender equality goals and objectives. In particular, the Committee has drafted a bill on Equal Opportunity, which consists of five chapters and 20 articles covering all areas of public life except family issues. This legislation would oblige state bodies of the Azerbaijan Republic to guarantee legal equality of women and men in political, public, economic, social, cultural, and other areas; provide equal opportunities at all levels, including employment; and put in place concrete measures to prevent discrimination based on sex. The legislation is currently being redrafted by the experts from the national Parliament Office; it is hoped that the revised draft will contain a specific definition of "discrimination" upon which the legislative provisions can be framed.<sup>5</sup>

The SCWI is member of the State Commission on the SPPREAD and is actively participating in the SWG discussions that are framing the priority focus areas for programs. However, resources are limited, and this may constrain the extent to which the Committee has the capacity to ensure that gender mainstreaming takes place throughout the SPPRED priority-setting and formulation process. The Committee has commenced the process of identifying the gender dimensions of poverty in Azerbaijan as an input to that process and has begun to identify appropriate actions, as well as indicators for monitoring progress. The SCWI will also be responsible for developing a separate paper on gender issues within the SPPREAD, which is expected to provide the framework for the next NPA, ensuring that, unlike its predecessor, the NPA will be consistent with the poverty priorities set out in the SPPRED.

#### **a. Gender Focal Points**

Gender Focal Points were appointed in all central government ministries and committees in 2000, as well as at the regional government level, with a view to improving gender mainstreaming

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<sup>5</sup> Information obtained in SCWI staff interviews during the CGA field visits in October 2004 and April 2005.

at both the policy and program level, including the implementation of relevant provisions of the NPA on Women's Issues. The Focal Points also participate in working groups established by the SCWI to discuss different documents to be adopted at the national (interministerial) level.

While their mandate is broadly understood, Focal Points have no clear, written terms of reference (TORs) for their work and often are unclear as to what their specific role should be and how they should fulfill it. In addition and of critical concern, they are expected to undertake requested tasks in addition to their normal workload, without financial support or other resources. Moreover, few have been provided with appropriate training for their tasks. Ensuring that these Gender Focal Points have clear TORs and have dedicated time to undertake their work, as well as resources to support initiatives, is therefore fundamental to their ability to contribute successfully to the achievement of gender equality goals and objectives. Provision of broad-based gender training as well as development of specific (e.g., sector) gender analysis skills is also important to ensuring that the network can effectively contribute to improved gender mainstreaming at the national and regional levels.

#### **b. Intersectoral Council**

An Intersectoral Council, comprising the Gender Focal Points and representatives of women's NGOs, supports the work of the SCWI and the implementation of the NPA on Women's Issues approved in 2000. However, the Intersectoral Council has not met at regular intervals and from 2003–2004 held no meetings at all. While potentially an effective instrument to guide and monitor the work of the SCWI, the Council also requires capacity building and strengthening so that it can provide the Committee with the expert advice and support it requires, as well as encourage and facilitate the implementation of the NPA and gender mainstreaming within the Government (and its Committees).

### **2. The National Gender Equality Policy and Plan of Action on Women's Issues, 2000–2005**

In March 2000, the President of the Republic of Azerbaijan signed the Decree “On Implementation of the National Gender Policy in the Republic of Azerbaijan.” A brief statement of policy, the decree seeks to promote equal representation of women in government, provide refugee and internally displaced women with opportunities to work, ensure provision of equal opportunity for women along with men in all programs of economic reform and mandates, and a review of legislation to ensure that gender equality principles are effectively mainstreamed. The NPA on Women's Issues (2000–2005) is a more detailed document that seeks to implement the National Gender Equality Policy (contained in the Decree); it was drafted by the SCWI and approved by the Cabinet of Ministers in March 2000 (SCWI, Azerbaijan 2000). The process of developing the NPA included all government ministries and committee structures, as well as some participation from NGOs. An Intersectoral Council (see paragraph above) was tasked with monitoring the implementation of the NPA and providing support and advice as required.

The NPA is broadly structured in accordance with the areas of concern identified in the Beijing Platform for Action of 1995. Twelve strategic objectives provide the framework for 95 activities to be implemented over the 5-year time span of the NPA, with each activity identifying the relevant Executing Agency as well as the proposed timeframe for completion. The strategic objectives and the activities within each of them are outlined in Table 2.

While the NPA provides a broad framework for action and identifies some key gender issues that need to be addressed at both the national and regional levels, it needs further refinement and modification to ensure that identified activities are framed by realistic and achievable targets that are time-bound. The inclusion of clear indicators and outcomes should also permit improved assessment of progress and impact.

Although the NPA follows the outline of the actions presented in the Beijing Platform for Action, further analysis of how these apply to Azerbaijan would be useful. In particular, the relationship between the NPA and the National Gender Equality Policy is not clear and needs to be more carefully defined. Furthermore, it needs to be clarified how the NPA supports the Government's National Gender Equality Policy commitments. The NPA would also be strengthened by an analysis of the key issues and problems in each of the strategic areas, thereby providing the framework to link the strategic objectives to the activities identified.

A key task of the Intersectoral Council is to assist the SCWI in monitoring the implementation of the NPA. In the absence of regular meetings, annual monitoring reports for the NPA should have been prepared but have not been. During the CGA field work, it also became clear that few ministries were aware of the content of the NPA; that even the Gender Focal Points were not fully aware of the activities that had been outlined in the NPA and were relevant to their Ministry and/or sector. In addition to ensuring that the Council meets at regular intervals and is equipped to undertake its NPA monitoring role, further efforts are needed to raise awareness of the NPA within ministries and committee structures and enable them to incorporate its objectives into their sector policies, strategies, and programs. The final and most crucial constraint that has limited the effectiveness of the NPA has been the lack of funding attached to it. No budget was drafted for implementation of any of the 95 specified activities and no funding was, therefore, provided.

**Table 2. The National Plan of Action: Strategic Objectives and Activities**

Strategic Objective	Number of Identified Activities
Women in the Economy	15
Women and Education	9
Women and Health Care	9
Women and Violence	6
Women and Armed Conflicts	7
Women Refugees and IDPs	8
Women's Human Rights	8
Women and the Media	6
Women and the Environment	4
Girls	9
Participation of Women in Power and Decision-Making Processes	7
Links with International Women's Organizations	7

IDP = internally displaced person.

Source: State Committee for Women's Issues 2000.

The preparation of a new NPA in the next year provides an opportunity to develop a concrete framework for action that is clearly linked to both international and national commitments, identifying concrete and measurable goals and objectives and clearly stated indicators for measuring progress and a more effective process for regular monitoring and review. Developing improved mechanisms for ensuring the participation of NGOs and civil society will be critical if the plan is to be responsive to the national context and harness the considerable and growing potential of civil society to achieve gender equality.

### **C. Recommendations**

Following are the recommendations for clarifying the Government's commitment to gender equality, aligning the key policy documents that frame that commitment, and identifying a program of activities up to the end of 2005.

- Align the gender equality goals and objectives of the key national policy instruments. Efforts should be made, as far as possible, to align the gender equality goals and objectives of the key policy instruments. Since the NPA is to be revised and reformulated in 2005, the process of setting MDG indicators is still underway, and the SPPREAD formulation process is now taking place (with a separate working group on gender), the opportunity exists for this alignment to take place, particularly if effective mechanisms are developed to link them during their respective formulation phases.
- Ensure that the next NPA contains clear goals and objectives, is tracked through an effective monitoring and reporting system, and is properly resourced. In addition to ensuring accountability for the policy/program commitments made in the document, this will provide a clear framework for the work of SCWI.
- Build the capacity of the SCWI and Gender Focal Point network. Building capacity within the SCWI is essential if its members are to meet their mandate effectively. In particular, both the SCWI and the Gender Focal Point network need sufficient financial and human resources to undertake their tasks. Gender Focal Points need dedicated staff positions with clear TORs—supported by adequate financial resources—to implement agreed tasks, and regular training to enable them to do this effectively.
- With adequate resources, the SCWI's program of work at the *oblast* (province) and rayon level could be further developed with a view to ensuring that the forthcoming SPPREAD participatory process fully addresses gender issues.
- Reinvigorate the Intersectoral Gender Council and give it an input into the formulation of the new NPA as well as the SPPREAD and MDG national targets/indicators that are being formulated by the SPPRED Secretariat. The Council can provide an important central link for each of these processes and ensure that goals, objectives, and targets are consistent, synergistic, and—very important—adequately funded and supported. Ensuring that the Council is chaired by someone of high rank with decision-making authority is important if it is to command authority within the Government.

### A. Gender Dimensions of the Formal Labor Market

For many women in Azerbaijan in the active working-age groups, the transition has been defined by job losses, protracted periods of unemployment, and contracting employment opportunities in both the public and private sector. While one in six women of working age in urban areas is classified as unemployed (Table 3), this figure is widely thought to underestimate the actual extent of unemployment, since many women do not officially register as unemployed. In 2003, the Labor Force Survey (LFS) found that only 59.5% of working-age women (16–56 years of age) were economically active, compared with 83.6% of working age men (16–61 years of age).

**Table 3. Economically Active and Nonactive Population of Working Age (%)**

	Urban and Rural Areas		Urban Areas		Rural Areas	
	Women	Men	Women	Men	Women	Men
<b>Level of economic activity of population</b>	59.5	83.6	53.8	80.6	67.4	87.4
<b>Unemployment rate</b>	12.5	9.8	17.3	12.2	7.2	7.1

*Source:* Republic of Azerbaijan, 2005b: 56.

While the high levels of female “inactivity” rates have been partly attributed to women’s choosing to stay at home to raise children (SSC 2004c: 36), such explanations mask women’s lack of choices and opportunities and their restricted options in a tight formal labor market that is increasingly employing men. As Table 3 highlights, the pattern of higher economic activity rates for men compared with those of women is consistent for both urban and rural areas. Economic activity rates for women in urban areas (53.8%) are also considerably lower than activity rates for rural women (67.4%), possibly as a result of women being engaged in work on small agricultural household plots.

Men’s and women’s inactivity rates differ considerably across all age groups (Table 4). The biggest gaps in inactivity rates are in the 25–39-year age group, where women are five to six times more likely to be “economically inactive” than men. Women’s much higher inactivity rates in this age group coincide with the average age of marriage for women in Azerbaijan of 23.7 years and therefore the commencement of their child-bearing years. Although further research is required to establish the reasons behind this pattern of inactivity rates, it is possible that both a reluctance on the part of employers to engage women for whom maternity leave and maternity leave payments are likely to be paid, as well as pressure from husbands and families to stay at home, are combining to keep women out of the economically active group.

**Table 4. Male/Female Inactivity Rates by Age Group**

	Age									
	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65+
<b>Male</b>	16.4	5.5	4.2	4.8	5.2	7.3	9.7	19.9	57.5	87.9
<b>Female</b>	36.7	33.1	35.2	33.0	29.6	32.1	47.9	67.1	87.4	95.3

Source: Republic of Azerbaijan 2005b: 57.

While jobless women are more likely to become economically inactive, and more men than women find work in the informal economy (Table 5), the term “economic inactivity” masks the crucial role played by women in ensuring household survival, from being responsible for the nutrition and health care of their families to developing appropriate household coping strategies to deal with often fluctuating states of poverty.

**Table 5. Composition of the Inactive Population by Gender in 2004 (%)**

Occupation	Total	Men	Women
Students Studying Daytime, Pupils of Senior Classes	21.8	33.5	16.4
Pensioners (Old Age)	36.2	42.1	33.4
Pensioners (Disability)	8.2	15.3	5.0
Individuals Receiving Income from their Property	3.6	9.1	1.0
Individuals Engaged in Housework (Including Child Care and Care of Elderly/ Sick Relatives)	30.3	0.0	44.2
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>

Source: SSC 2004.

### 1. Increasing Marginalization in the Private and Public Sectors

The privatization process has not benefited women in significant numbers. As the 2002 UNDP *Human Development Report* for Azerbaijan has noted, the first privatization cycle covered areas such as services, public catering, food processing, and trade, all areas that traditionally employ women (40%). Furthermore, 74% of women who were employed by the privatized units lost their jobs and only 7% of the newly registered SME properties belong to women. According to research conducted to assess the conditions of women and privatization, 83% of employed women are unhappy with the privatization of enterprises in which they are employed (UNDP 2002).

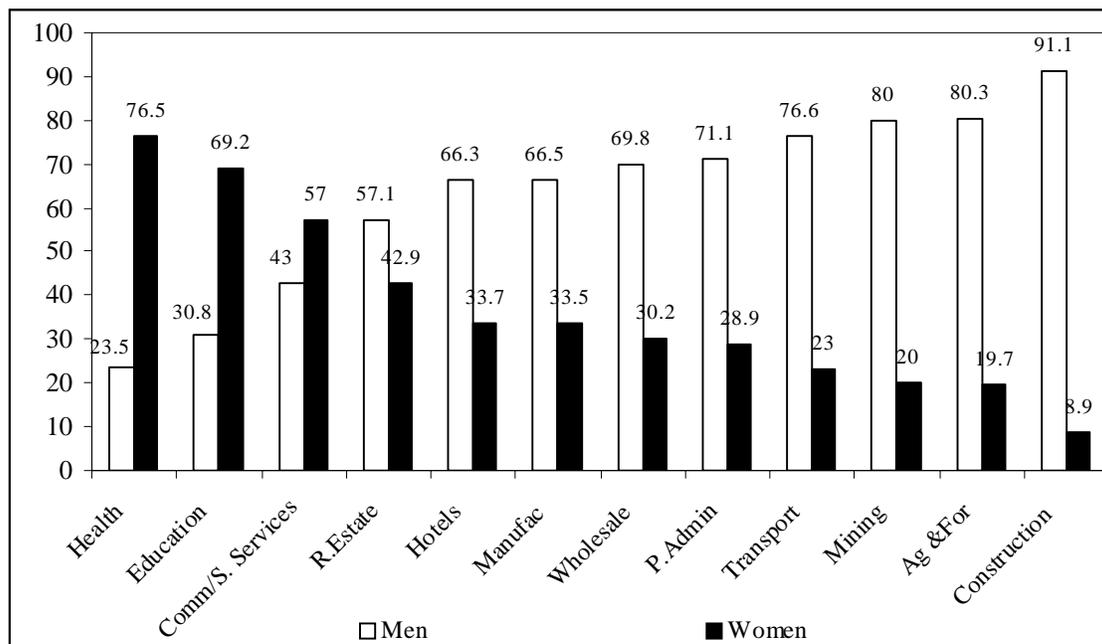
Discrimination against women in hiring and promotion is widely reported, and supported by available LFS data that reveal significant gender segregation in the public and private sectors; the private sector has increasingly become a “male” domain. While women’s employment rates in the public sector are considerably lower than men’s overall, the public sector is still the largest employer of women—32.3% of total working women in 2004. At the same time, women made up only 9% of employees in nonstate enterprises (SSC 2004a: 195). Employer surveys, in addition to helping to establish labor requirements and the “match” with the current skills base in the working population, could also assess the extent to which such gender preference in employment is taking

place and why. Analyzing and addressing the barriers to women's participation in the private sector is critical if women are to be equal partners, participants, and beneficiaries of Azerbaijan's economic development and growth.

## 2. Vertical and Horizontal Labor Market Segregation

The disparity in men's and women's wage rates in Azerbaijan is considerable, even though the principle of equal wages for equal work is guaranteed by law. This is largely due to the persistence of significant vertical gender segregation in the labor force, with relatively few women occupying senior positions in most sectors. A sample survey undertaken by the SSC in 2002 found that even in sectors in which women dominate the workforce (Figure 1), such as health care and social services (where 5.6 times as many women as men are employed), women's wages were only 54.4% that of men's, largely due to the predominance of men in senior decision-making (and better paid) positions.<sup>6</sup> A similar pattern is found in the education sector, where twice as many women as men are employed but their average wage is only 77.7% that of men's wages (Republic of Azerbaijan 2005a: 57–58).

**Figure 1. Female/Male Sectors of Employment (%)**



Source: SSC 2004a: 183.

<sup>6</sup> See Chapter VII, Table 10. Women and Men in Decision-Making Posts in Government, 2004, which notes that only 11.6% of decision-making positions in government are occupied by women.

While women dominate the formal workforce in sectors such as education, health care, and community and social services, they constitute a minority of formal workforce employees in almost all other sectors. The limited data available suggest that this horizontal gender segregation is a growing trend and should be closely monitored and analyzed over the period of SPPREAD; appropriate interventions should be designed and implemented to remedy gaps. If this is indeed the case, it would imply the need to develop appropriate policies and programs to increase women's participation rates in "nontraditional" sectors—not just as a question of equality, but as a way of addressing the significant levels of women's unemployment. Qualitative analyses of the constraints faced by women to employment in certain workforce sectors would be central to shaping the development of such policies and programs.

### **B. Gender Dimensions of the Informal Sector**

In Azerbaijan, as in many fSU countries, economic transition has coincided with a significant contraction in formal employment opportunities and reduction in real wages, seriously undermining the Government's ability to provide social security. Rising and persistent unemployment, the high costs of further education, the absence of public child-care facilities and the high cost of private substitutes, the lack of start-up capital to launch small businesses, the lack of business skills and market knowledge, and the cumbersome and often daunting procedures associated with entry into what is perceived as the predominantly "male" formal private sector, have all combined to push women into informal sector employment.

Although official data are limited on the size and structure of the informal labor market, anecdotal evidence suggests that women make up a large share of it—as shuttle traders, market vendors, home workers, and paid carers. The 2004 LFS notes that 17% of women who reported themselves as employed defined themselves as engaging in a "private entrepreneurial activity without forming a legal person," which suggests informal sector work (SSC 2004c: 31). The growing numbers of women seeking credit to start up and/or continue privately run small informal-sector businesses also indicates that in contrast to the Soviet period, many women may now be operating outside the formal sector. Despite these sizeable numbers and their implications for the development and implementation of poverty reduction strategies, the informal sector (female and male) is largely ignored in the Azerbaijan SPPRED.

Although many women find fewer obstacles to their entry into informal sector employment, such employment usually involves long hours of work, little pay, and difficult conditions that in some cases (i.e., street vendors) can pose risks to personal security. Home-based work, while providing some solution for women who cannot afford child care, offers very poor financial returns on their labor, isolates them, and increases their levels of time poverty as they juggle the triple shift of home-based work, child care, and domestic tasks. Moreover, the absence of any form of social protection, such as sick leave, maternity leave, or pension contributions, leaves informal sector workers extremely vulnerable to poverty in the present and in the future.

Many of the low-skilled informal activities undertaken by women are also heavily stigmatized, particularly in the fSU, where job status and education are still very highly regarded.

Anecdotal evidence gathered during the CGA fieldwork suggests that references to the “greater flexibility of women” to adapt to conditions in the post-transition period often refers to women’s preparedness to take on “any job,” including work in the informal sector—in contrast to men’s unwillingness to take on jobs at levels lower in status than their previous jobs in the fSU. A number of women also noted that their informal sector work was a logical response to their husbands’ continued unemployment and unwillingness to engage in “low-level” work, the lack of formal sector opportunities for women (particularly in the over-30 age group) and the urgent need to meet the family’s basic requirements.<sup>7</sup>

Further research and analysis of the gender dimensions of the informal economy is clearly important, not only to increase the visibility of the sizeable percentage of women working within it, but to provide an improved understanding of its contribution to economic growth and its links with poverty. In addition to gathering more reliable data on the numbers of women and men engaging in the informal sector in rural and urban areas and across regions and their profiles (i.e., age and income group), it is also important to better understand the drivers behind their shift to the informal sector and what are the perceived benefits as well as constraints. In particular, identifying what incentives and support are needed to encourage women into the formal sector could have important implications for poverty reduction strategies, particularly in countries such as Azerbaijan where stimulating private sector (and non-oil) growth is a key development strategy.

### **C. Women’s Entrepreneurship and Credit**

In Azerbaijan, the establishment of SMEs has consistently been identified as one of the most promising ways to diversify the economy and create employment programs.<sup>8</sup> SMEs have, to some extent, filled the void left by the decline of the traditional large enterprises, and small-scale private sector activity has grown in recent years as considerable numbers of both formal and increasingly informal sector businesses have been established. However, administrative barriers, including complicated processes for business registration and establishment, lack of finance, and inadequate infrastructure have combined to seriously constrain the considerable potential.

As in many other of the fSU republics, very little analysis has been done of the extent of and barriers to women’s entrepreneurship in Azerbaijan in the transition period. Moreover, despite considerable anecdotal evidence that women have responded to decreasing employment opportunities in the formal sector by establishing informal-sector businesses, ranging from street trading and market vending to home-based work, assessments of the potential for expanding the SME sector have been “gender neutral” and have not adequately considered or addressed ways in which women’s participation could be more actively supported and expanded.

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<sup>7</sup> Information gathered from individual interviews and group discussions with women during the October–November 2004 CGA fieldwork.

<sup>8</sup> ADB, The World Bank, ILO, UNECE and UNDP have all identified expansion of the SME sector as a key poverty reduction strategy.

Official statistics, while not focusing on women entrepreneurs specifically, indicate that not only are considerable numbers of women engaged in their own businesses (17.0%), but that income from this self-employment is the primary income source for a significant proportion of women (17.6%) (SSC 2004a: 200). These figures do not separate out formal and informal sector entrepreneurs, but they indicate that for many women, small businesses have become a viable and indeed indispensable employment and income alternative.

According to a 2004 ILO-sponsored survey of women's entrepreneurship development in Azerbaijan, the "average" female entrepreneur is aged 35 years and above, formerly employed, with a higher (i.e., university level) education, married and with an average of 2–4 children. In the southern regions and in and around Mingechevir, women's educational levels were marginally lower, although 55% of the women still had obtained a full secondary education and around 33% had higher education levels (ILO 2004). While further, more detailed studies are required, this would imply that most women entrepreneurs are well educated, with considerable previous employment expertise and skills. Most women predictably cited the need to contribute to the family budget as the primary reason for seeking to start an SME.

Many women wishing to establish an SME cite limited access to sources of financing, including credit, as a key barrier. Inability to meet collateral requirements, difficulties in negotiating their way through the maze of banking regulations and requirements, as well as a lack of responsiveness from largely men lending officers, have combined to push women away from the formal financing sector; most source funds from immediate family members, relatives, and friends and, less often, their own savings. In the ILO study cited above, none of the respondents received funding support from banks, credit institutions, or international organizations; the majority reported that they had obtained funds from spouses or other family members. This would suggest that the scope for developing appropriate formal mechanisms to support the financing of women's SMEs in Azerbaijan is considerable; so is providing complementary business training and advisory services in both central (i.e., Baku) and regional centers.

A key first step would be to undertake an analysis of the barriers to women's access to credit in different regions of the country, including a review of the lending practices of the most active microcredit organizations, many of which are operated by international NGOs such as World Vision, the Norwegian Refugee Council, Oxfam, and the Agricultural Cooperative Development International. In addition, microfinance is provided by larger actors such as FINCA, Shorebank (funded by the United States Agency for International Development [USAID]), the Azerbaijan Microfinance Bank (European Union-funded) and the Bank of Baku (supported by the European Bank for Reconstruction and Development).

The provision of microcredit in Azerbaijan faces some challenges, however, and assessing the extent to which these may be deterring women from starting up SMEs in both urban and rural areas will also be important. In particular, no legislative regulatory framework exists for microfinance, nor any overall policy and strategy for development of the sector. Microfinance institutions (MFIs) and credit unions are not mandated to attract deposits, thus constraining their capacity to generate resources and offer a range of financial services to members. Nor can any

MFI mobilize deposits and lend them to enterprises and individuals in rural areas (ADB 2003: 2–3). The Asian Development Bank (ADB) currently supports a technical assistance project to the sector to address these and other related issues as well as undertake assessments of business opportunities for and constraints on the poor (ADB 2003: 2–3).

Many women have also identified “cultural” and “social” barriers to starting up SMEs— notably, the common conception that “business” is a man’s domain and that, while women’s participation is acceptable and often essential, women are less readily accepted publicly and privately as business proprietors and leaders. Women have noted that these values especially permeate the male-dominated banking sector, where it is often difficult to obtain advice or loans without the support of a spouse or male relative. In the ILO survey, women also noted bribery and corruption as major impediments to the establishment of small businesses (ILO 2004: 21).

A 2002 United Nations Economic Commission for Europe Conference that considered women’s entrepreneurship in Eastern Europe and the CIS countries also noted the importance of ICT in creating strategic opportunities for the expansion of women’s entrepreneurship, particularly given the lack of supportive business and professional networks among women in the region (Box 1). In addition to providing access to new technologies and markets for women, ICT can enable the building of such networks, through which information on a range of key areas, including credit and financing opportunities can be shared (UNECE 2002: 77–88).

**Box 1. The Importance of Women’s Business Networks**

Creating women’s business networks is especially important in Azerbaijan where traditional views, behaviors and attitudes related to women’s role in society are deeply rooted in the country’s culture and history. The unfavorable social climate affects especially women who are trying to develop activities in male-dominated sectors such as the manufacturing sector or capital markets.

—Sayali Safarova, President, “Memar SS”, Azerbaijan

*Source:* UNECE 2002: 95.

Creating the conditions for the development of women’s entrepreneurship and SMEs in Azerbaijan will require the elimination of gender-specific barriers as well as the provision of targeted support. Women need access to networks (trade and business associations), information and training, as well as to assistance in financing their businesses, including consultancy and advisory services, improving access to credit, finding business partners, and accessing markets. Improving the climate for women’s entrepreneurship must, however, also focus on the banking and small business sector itself, and on creating an enabling environment that encourages and supports women’s participation.

**D. Gender Dimensions of the Rural Economy**

Agriculture plays a central role in Azerbaijan’s economy. In 2003, the sector contributed 14% of GDP (6.5% of total exports) and employed 41% of the workforce, although wages were

only 27% of the average monthly nominal wage.<sup>9</sup> In rural areas, over 90% of the population have access to land and engage in farming. After the breakup of the Soviet Union, agricultural output declined rapidly by more than 50% during 1991–1995 and only recovered in 1997 after the adoption of land privatization and other reforms promoting market-oriented production, free market prices, and the liberalization of procurement and trade policies. Agriculture remains the second largest economic sector after oil (World Bank, 2004a: 2).

The current SPPRED has placed considerable emphasis on the development of the non-oil sector, particularly agriculture, as a strategy for decreasing rural poverty and reducing differences in living standards between Baku and other regions. In the context of preparing a Rural Development Strategy, the Government has focused on a broad range of institutional reforms, including land reform, as well as improving farmers' access to assets (e.g., livestock and equipment), inputs such as improved seeds and fertilizers, extension services and training, and credit facilities. The SPPRED also supports improving access to and the quality of rural infrastructure services as crucial means for improving the living standards of the rural population and providing a foundation for increased private sector activity. The Presidential Decree on measures to accelerate socioeconomic development and the State Program on Socioeconomic Development of Regions, 2004–2008, call for comprehensive regional development measures that include improvement of infrastructure and utility service provision, especially in rural areas and small districts.

While progress has been substantial to date in many areas of the reform process, poverty in Azerbaijan's rural areas remains acute. The 2003/2004 SPPRED Monitoring Report suggests that in contrast to previous years, urban poverty in 2003 was lower than rural poverty (44.1% for urban areas compared with 45.3% for rural areas) (Republic of Azerbaijan 2005a: 27). This shift is worrying and needs to be carefully tracked. As noted above, regional differences in rural poverty rates are also considerable: poverty rates are high in regions such as Nakhchivan and Sirvan but much lower in Shaki-Zagatala and Lankaran. No data are currently available on poverty rates for female and male heads of household in rural areas; this is an area which requires further investigation and analysis.

Like women in urban areas, women in rural areas have borne many of the reforms' most detrimental impacts. In particular, the former state and collective farms, on which many rural women were formally employed, maintained an entire infrastructure of support services that were crucial for women, children, and the elderly. These consisted of kindergartens, schools, hospitals, libraries, and other facilities, many of which were largely run by female staff. With transition and reform came the dismantling of this social infrastructure and most of the support services that it provided, including state-supported child care. Consequently, women also lost their jobs in significant numbers. Facing a loss of both employment within the formal sector and access to social services (such as child-care facilities that would enable them to engage in formal sector

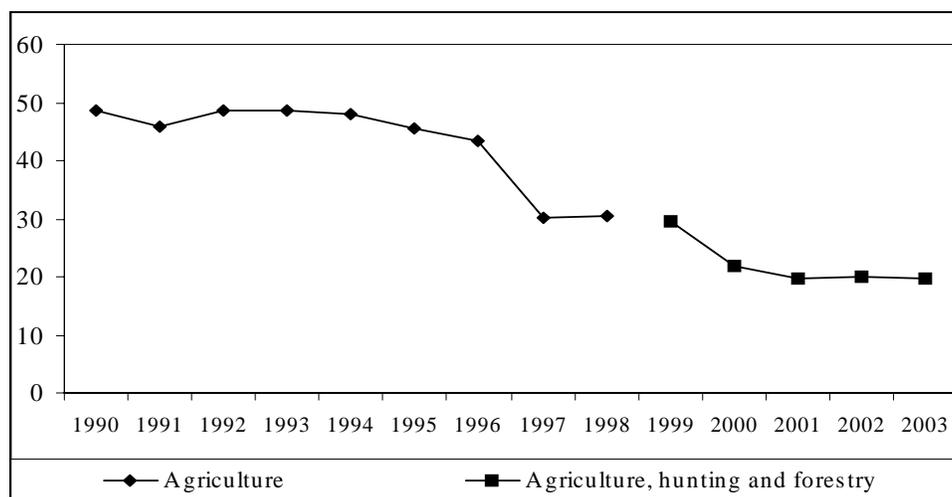
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<sup>9</sup> Specifically, average monthly nominal wages and salaries in the agriculture sector in 2003 were AZM115,691 per month, compared with the average monthly wage of AZM415,836 per month for the month of December 2003. SSC 2005.

employment), women returned to the home, where traditional values and attitudes re-emerged that emphasized their “traditional” roles as caregivers and homemakers.

Many of these trends continue. Although women represent 20% of the 41% of the economically active population who are currently employed in agriculture, the share of women working in the sector has declined over the last 10 years. Data from the SSC show that whereas 48.6% of employees in the agriculture sector were women in 1990, this level had declined to 30.6% by 1998 (Figure 2). By 2003, only 19.7% of all employees in the combined agriculture, hunting, and forestry sector were women, a decrease from 29.6% in 1999, when the SSC began combining employment data from these three sectors. This suggests that not only has women’s employment in the formal agricultural sector declined dramatically over the last decade, but also that the pattern of decline is continuous. Data on average female wages compared with male wages in agriculture are not currently available; this is an important data gap that needs to be addressed.

**Figure 2: Female Employees in the Agricultural Sector, 1990–2003 (in %)**



Source: SSC 2005.

In the early 1990s, rural Azerbaijan had relatively high levels of access to infrastructure. However, the disintegration of the state and collective farms once responsible for operating agricultural supply chains and maintaining infrastructure in rural areas, coupled with inadequate resource allocation, led to a rapid decline in rural services and infrastructure. This resulted in a decrease in the living standards of the 4 million people (50 % of the population) in rural areas. A recent Social Assessment for the World Bank Rural Investment Project (2004) found that while poverty is widespread in rural areas, relatively better off areas enjoy better infrastructure conditions and access to services. This pattern was consistent for basic infrastructure such as roads, energy, and water supply, as well as social infrastructure such as schools and health care facilities.

Thus, poorer communities face additional obstacles in accessing markets, because their transaction costs are higher than those of richer communities, due to their poorer infrastructure conditions (World Bank 2004a: 66). In particular, deficiencies in public services, such as access to adequate sanitation and safe drinking water, marketing centers and health services affect poor rural women disproportionately by increasing workloads and time commitments needed for meeting basic family needs; as a result, their opportunities to engage in other productive activities are reduced. With the loss of state-supported child care and elderly facilities, women in rural areas have also been faced with increasing responsibilities to care for children and the elderly, usually in addition to additional income-generating work in the informal sector.

In addition, fewer women household heads than men are landowners, and women heads of household tend to own smaller-sized plots. For the 66.4% of men household heads who stated that they had access to land, the average plot size was 70.3 sot (100 m<sup>2</sup> or 0.01 hectare [ha]), compared to 46.6 sot for the 55.7% of women household heads who stated that they had access to land. For both women and men, however, the main type of plot was a backyard plot and its primary use was balanced evenly between personal consumption (41.1% for women and 41.6% for men) and consumption and marketing purposes (50.6% for men and 47.3% for women). Only 1.5% of women and 1.9% of men used the land only for marketing purposes, underlining the important role that subsistence farming is playing in the day-to-day survival of the average rural household (SSC 2004b: 189).

Underlining these negative impacts has been a lack of systematic gender analysis in agricultural policy and programs. The policy document *The State of the Agricultural Sector and Principal Ways of its Development, 2002–2015*, which outlines the key problems in the sector as well as the Government's policy and strategies, does not address gender issues, even though many of the sectors described in the policy, including farm development, crop production, animal husbandry, and food processing, clearly employ significant numbers of women. Nor does the policy consider women's central role within the family as a food producer and provider. In short, although many policy makers are aware that many farmers are women, gender issues are neglected at the policy level, with the result that women's contribution to agriculture is poorly understood and their specific needs ignored in development planning and implementation.

At present, some positive steps are being taken to address gender issues within the Rural Development Program for Mountain and Highland Areas, which is implementing the Livestock Development Project for Rural Women. The project seeks to assist women in mountainous and highland areas by providing in-kind credit (i.e., pregnant heifers) for a period of 3 years. Preliminary results from the project are promising and show increases in income levels among the target group. This is at present the principal project focusing on rural women farmers in Azerbaijan.

#### **E. Social Protection Programs**

The end of the Soviet Union also meant a decrease in the number and scope of social protection programs that had been provided by the state, including health care, guaranteed paid

maternity leave, child-care centers, and a generous pension system. For many women, the dismantling of these support systems has meant not only a loss of the sizeable social protection transfers that contributed directly to their real incomes, but has also shifted many of the responsibilities of the former state to the household, where they are expected to do the majority of the work.

The current social protection system in Azerbaijan is built on two principal components: a social insurance system that provides mandatory insurance for old age, illness, disability, and unemployment; and a social assistance scheme that provides noncontributory, tax-financed cash benefits targeted to the vulnerable or the poor. In principle, the first component provides the means to mitigate social risks, while the second provides enhanced coping capacity for the poor and the vulnerable. The current level of budgetary resources committed to these social protection programs has been between 5% and 6% since 1995 (World Bank 2003: 107).

These programs may have helped to prevent an increase in poverty levels among certain groups, but their limited size and scope and very low financial contributions are inadequate to meet the needs of the extreme poor. In particular, the amount of the average nominal pension represented 67% of the poverty line in 2003 and pensions for old age, disability, and loss of family head represented 69%, 74%, and 52% of the poverty line, respectively. Moreover, except for disability pensions, other pension amounts were all even further below the extreme poverty line of AZM124,137 per month (Republic of Azerbaijan 2005a: 33–34).

A recent assessment by the World Bank (2003) has concluded that due to lack of targeting, overall social protection spending does not make a major contribution to poverty reduction (Republic of Azerbaijan 2004a: 108). In addition, the assessment found that social assistance benefits (such as child allowances) were too small to reduce the consumption deficit of the poor, and that the remaining poverty after all social protection benefits are received remained an estimated 49.6% of the population in 2001.

Nevertheless, pensions are and will remain a key income source for more than one fifth of the total population, including large numbers of women. According to the 2003 HBS, these benefit payments, together with study grants and social grants, provide the basic income source for 19.5% of the population. Significantly, pensions provide the second major source of income for 16.2% of urban dwellers, after hired work in the public sector (22%), as well as 19.3% of rural dwellers after work in a personal ancillary job of some kind (33.7%).<sup>10</sup> By gender, pensions are the basic source of income for 9.5% of the women who were surveyed, compared with 5.5% of men.

Pensions have historically been very important in preventing old age poverty among women and the fSU is no exception. Under the former Soviet pension system, credit was given to

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<sup>10</sup> This excludes the category “dependent,” which provides an income source for 29% of the total urban population, many of whom are women. Interestingly, only half as many rural dwellers (15.6%) classified themselves as dependent. This could be consistent with higher formal employment rates among rural women than among urban women (45% in contrast to 41.1%), as well as possibly higher levels of informal economic activity among rural women (SSC 2004: 211).

women for years spent out of the labor force to have children, women with 20 years' service were allowed to retire at age 55 (5 years earlier than the normal retirement age for men); and 55%–85% of wages were replaced, depending on the age at which a person retired. Since women tend to live longer and have few to no formal asset holdings, pensions provided the primary source of income for the last 15 years of many of their lives (Castel and Fox n.d.: 1). Moreover, the different working histories of men and women, and the greater likelihood of women's being lower-income earners and having shorter and more disrupted working careers (to give birth to and raise children, for example), suggest that reforms that tie pension rights more closely to contributions could affect women adversely.

## **F. Recommendations**

Following are the recommendations for the formal and informal labor markets, entrepreneurship and credit, the rural economy, and social protection.

### **a. Labor Market and Informal Sector**

- Put in place legislation on Equal Employment Opportunity (EEO), sexual harassment, and discriminatory employment practices, and establish effective commissions or other institutions to promote and enforce equal opportunities.
- Make policy commitments to creating fast-track opportunities for women's promotion in the civil service and set targets for appointment of women at middle/senior management level in both central and municipal government.
- Take action to remove structural and legal barriers as well as stereotypical attitudes to gender equality at work, addressing gender bias in recruitment, working conditions, occupational segregation, discrimination in social protection benefits, women's occupational health and safety, and unequal career opportunities. This should include awareness-raising campaigns and gender analysis training, particularly aimed at (but not limited to) middle- and senior-level managers.
- Implement employment retraining programs that take into account demand for skills and are specifically targeted at unemployed women.
- Recognize and respond to women's child-care responsibilities by supporting the cost of child care for female employees.
- Provide professional/management development programs targeted at female employees in central/municipal government structures.
- Undertake further studies of the (formal and informal) labor market to better understand gender-based distortions, including male/female inactivity rates and gender assessments of the scale of temporary and illegal labor migration and the time/income and other impacts of such migration.
- Undertake comprehensive employer surveys to determine labor market needs and develop appropriate vocational and other training programs for women and men.

**b. Entrepreneurship and Credit**

- Analyze the reasons for women's low participation in the SME sector, with a focus on identifying constraints and strategies for overcoming them.
- Support women's participation in the SME sector by targeting business training programs and support services to women; increase women's access to finance, through the banking sector and otherwise, by creating special financial advisory services and lending opportunities; simplify lending processes so that rural women can effectively make use of credit facilities, and promote agricultural credit programs that lead to new areas of productive activity for women, e.g., agro-based processing and marketing of produce.
- Increase women's formal role in the rural sector by increasing access to assets such as land, livestock and equipment; inputs such as seeds and fertilizers; labor-saving technologies; services such as transport and facilities; and extension services and training. This should include the provision of skills development training for women in agrobusiness entrepreneurship, and extension support services, including market outlets.

**c. Rural Economy**

- In agricultural policy statements, explicitly identify strategies for enhancing women's participation; productivity; and access to resources, inputs, support services and market outlets.
- Undertake closer monitoring of the gender impacts of the land reform process, including assessments of women's actual versus statutory control over land resources.
- Set targets for women's participation in the planning, implementation, and evaluation stages of all the programs and projects of the Ministry of Agriculture and other relevant ministries.
- Ensure that all land titling databases are sex-disaggregated, that women's rights to land are explicitly recognized and understood (e.g., through information and awareness-raising strategies) by women as well as men, that land registration procedures are accessible and responsive to women, and that women receive copies of and understand their rights in relation to land titles.
- Undertake studies on the gender impact of existing macro- and microagricultural policies (including structural adjustment policies), particularly on women farmers from landless, marginal, small and female-headed households; and redesign policies in cases where adverse impacts on women are identified.

**d. Social Protection Programs**

- Recognize that social protection programs are not gender neutral and that income shocks will affect men and women differently.

- Ensure that all proposed reforms to or proposals for social protection programs are based on a thorough gender analysis and take into account the different needs of men and women, and ensure that they do not discriminate against or disadvantage women (e.g., pension reforms).
- In the context of both social protection policy and program development, identify particularly vulnerable groups (poor female heads of households, single parents) and ensure that adequate social safety nets are in place to protect these groups.

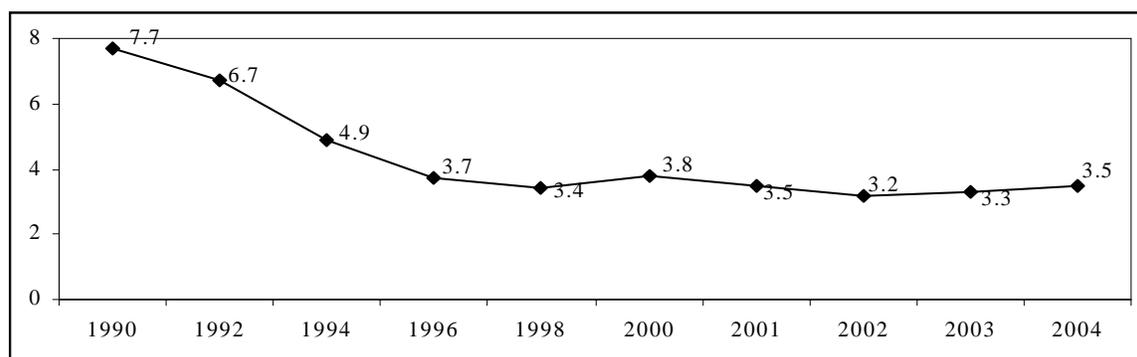
## Chapter 5 Gender Dimensions of Human Development

### A. Gender Issues in Education

At independence, Azerbaijan inherited a relatively well-developed education system with an extensive network of educational institutions at all levels operated by a large trained staff. The 1989 census indicated an overall literacy rate of 99.6% and, while statistics from this period tend to err on the positive side, it is widely agreed that education was close to universal. Nearly all children up to the age of 15 were provided with a place in an educational institution regardless of gender, regional location, or income level.

Since the early 1990's, Azerbaijan has struggled to sustain its previous educational outcomes, even as evidence mounted of declining achievement levels, considerable gaps between official enrollment figures and actual attendance, very low teacher salaries and related high teacher turnover rates, and an eroding school infrastructure. Moreover, many parents attest to the increasing informal costs of education, usually in the form of extra payments to teachers and schools for both essential learning materials and classroom extras, school trips, and—in some cases—for additional attention for their children. Such costs impose heavier burdens on the poor than the nonpoor. A significant decline in government expenditures on the education sector over the last decade, from 7.7% of GDP in 1990 to 3.5% of GDP in 2004, has placed considerable stress on the school system and been a key contributing factor to the current difficulties (Figure 3).

**Figure 3. Government Education Sector Expenditures as % of GDP, 1990–2004**



Source: SSC: figures provided on request.

A key problem in assessing these and other features of the education sector in Azerbaijan is the limited range of reliable statistics in general and sex-disaggregated data and indicators in particular. Moreover, as noted in the Government of Azerbaijan-UNICEF Master Plan of Operations, 2000–2004, the data that are available may contain internal biases, due both to links between school attendance rates and budget allocations and the reluctance of parents to report lack

of attendance and dropouts (UNICEF 2002: 8). Although efforts are being made to enlarge the collection and use of gender statistics in the education sector, further efforts are required (including efforts toward gender assessments of achievement levels) to develop and implement effective policy and program interventions.

The current educational system in Azerbaijan consists of 11 years of free schooling at three levels: primary (grades 1–4, ages 6–9), basic education (grades 5–9, ages 10–14) and general secondary (grades 10–11, ages 15–16). Technical secondary schools or vocational secondary schools take young adults aged 15–17.

### **1. Early Childhood Education**

Access to early childhood education has declined significantly since the Soviet period and is far behind desirable levels. Existing preschool institutions, except a few private kindergartens, are all financed by the Government and preschool education is not compulsory. Early childhood care and education institutions are of several types: nurseries, kindergartens-nurseries, kindergartens, and kindergartens-primary schools (kindergartens housed within primary schools). Nurseries serve children mostly in the 1–3-year age group.

Between 1990 and 2003, the number of pre-schools decreased from 2,185 to 1,777 (consisting of 37 day nurseries, 1,190 combined nursery-kindergartens, 546 kindergartens, and 4 kindergarten-primary schools) (SSC 2003); previously, most preschools were in rural areas, but the dismantling of the old system means that most pre-schools are now located in urban areas (1,107 out of 1,777 or 57%).

Costs are also beyond the reach of most families: public kindergartens charge around \$10–\$20 per month (despite an official rate of just \$0.20 per month) and private kindergartens \$50–\$350 per month.<sup>11</sup> These costs are beyond the reach of most families; so some pool resources and/or engage elderly parents to assist with child care, but many women with children in this age group have taken on the role as unpaid childcare providers themselves, reducing their capacity to work in formal sector employment.

Official data show that the number of children in preschool institutions in 2003 (as a percentage of the number of children in the age-group) is only 20% (SSC 2003). The UNICEF MICS 2000 estimated that only 11% of children aged 36–59 months were attending an organized early childhood education program such as kindergarten or community childcare; more boys (12.2%) were estimated as attending than girls (10.5%). The MICS showed a strong correlation between attendance and poverty levels: 21.2% of children from rich households attended programs, 12% of middle class children, but only 5.5% of children from poor households (Figure 4). Regional variations were also strong. Attendance in the Baku area was 20.2%, but in Nakhchivan it was only 2.7% and in the South, only 0.9%. Moreover, the relationship between attendance and the educational level of mothers was strongly positive: 28% of university-educated mothers placed

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<sup>11</sup> Costs obtained through interviews with parents during CGA fieldwork in October 2005.

their children in care, compared with only 7.4% of mothers with secondary or less education. Interestingly the survey indicated higher rates of attendance among IDP/R households (15.3%) than resident households (11%), pointing to the considerable efforts that have been made by the Government and NGOs to expand the number of early childhood education program places for IDP/R households (UNICEF/SSC 2000: 16–17).

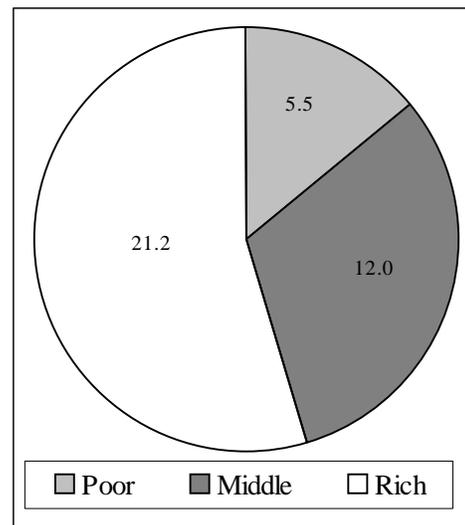
The decline in the availability of and access to pre-schools in Azerbaijan has had significant gender impacts on women, who are expected to fill the void and take on the job of unpaid child care, thereby decreasing their capacity to engage in formal sector employment. The lack of access to early childhood care and pre-schools also has additional impacts on children and the schooling system. Children who begin primary school with no preparation tend to face greater social and academic hurdles and are less ready to make the learning gains in primary grades that can increase their academic success in higher grades. Primary schoolteachers are also affected, since the lack of pre-schools often means that a larger proportion of students has lower-order skill development, requiring changes in curriculum and pedagogy to accommodate a changing student population.

## 2. Basic and Secondary Education

Official estimates for drop-out rates during the compulsory cycle (Grades 1–11) are very low—around 1%–2% (World Bank 2003: 85)—but survey data show that actual attendance rates are lower than enrollment rates suggest. The UNICEF MICS found that attendance rates were 88.4% among primary school children, although no significant variations were seen in boys' and girls' primary school attendance either by region, rural-urban location, or household wealth. However, differences in overall attendance rates were seen between various regions. In the West and Southwest, 6% fewer girls and boys attended school (85.1%) than in Baku (91%) (UNICEF/SSC 2000: 17).

It is likely that many, if not most, of those who are not in school—poorer urban children, rural and isolated children, IDP/R children, and street/working children—are out of school because of financial hardship/opportunity costs of schooling. Unfortunately, sex-disaggregated data on out-of-school children are not available, but reports are increasing that rural girls at secondary-school levels are particularly vulnerable to being pressured by their families to withdraw from education to undertake other paid/unpaid work, protect their “morality,” and/or prepare for early marriages (UNICEF/SSC 2000: 11–7). Regular detailed assessments of girls' and boys' attendance/

**Figure 4: Attendance of Children Aged 36–59 Months in Early Childhood Education Programs**



Source: UNICEF/SSC, 2000: 17.

participation and achievement rates by income group, location (rural/urban/region) and different levels of schooling are required to better establish whether gender inequality in access to education has emerged over the last several years.

Educational outcomes may also be affected by the large numbers of children who may be engaging in other “work” in addition to schoolwork, although the available evidence does not suggest a gender differential with regard to these working children. The UNICEF MICS 2000 found that 13% of the children aged 5–14 who were surveyed are “currently working,” which was defined as children who were doing paid or unpaid work for someone other than a household member or for more than 4 hours of housekeeping tasks per day. In particular, the survey pointed to large variations across regions. One in five children in Nakhchivan was found to be working, compared with only one in 25 children in Baku. Only 5% of children in nonpoor households were defined as working, compared with 22% in poor households.

### **3. Quality Concerns**

Enrollment rates remain relatively high in Azerbaijan at the primary and secondary school levels, but concern is rising that the quality of educational outcomes has deteriorated greatly over the transition period (World Bank 2003: 81, UNICEF 2002). The World Bank study notes the declining quality of educational outcomes and explains that, in addition to lack of basic materials and supplies in classrooms, poor teacher salaries and the deteriorating conditions in the school environment have prompted many of the best teachers to leave the system and demoralized the existing teaching staff (World Bank 2003: 89, UNICEF 2002: 15–16).

A 2002 survey undertaken by the SSC also suggests both parental and teacher dissatisfaction with educational outcomes. More than half of the teachers surveyed (55.3%) reported that poor teaching materials hampered them from undertaking their teaching tasks effectively, and 35.2% noted that a lack of new schoolbooks was a major impediment to learning. Similarly, 50.4% of parents and 46.3% of students identified the need for improvements in the quality of teaching (SSC 2002).

In recent years, various observers have also expressed concern about the quality of textbooks in Azerbaijan, including UNICEF and the World Bank. Efforts have been made, with varying success, to create textbooks that are more relevant to Azeri culture and reflect modern pedagogical approaches. This has led to a series of newly designed textbooks. However, little attention seems to have been paid to gender bias in the texts, despite the considerable international research that has shown a clear correlation between poor achievement levels among girls and textbooks that are of poor quality, limit girls’ academic and professional aspirations, and are irrelevant to their experiences. A UNICEF evaluation of a Grade 2 reader, for example, found that it depicts men and boys three times as often as women and girls and that, while it presented a wide range of occupations and activities for men, it presented very few for women (UNICEF 2002: 15–16).

#### **4. Vocational and Tertiary Education**

Vocational and tertiary education has become crucial over the transition period. Many workers of the fSU found their existing skills and qualifications inappropriate to the needs of the developing market economy, which demanded new skills, such as foreign languages and computer literacy. Unfortunately, however, no employer surveys have been undertaken in Azerbaijan that could provide more detailed information on the needs and expectations of employers, from which vocational training programs could be developed. Such surveys would enable better matching of skills training programs to employment demand, for women and men. Such surveys would also better inform the development of appropriate courses in the tertiary education sector by improving the match between the content of courses being provided, employer skill requirements, and employment opportunities.

The vocational and tertiary education sector in Azerbaijan is characterized by a large drop in enrollments compared with those at the compulsory levels of education; disparities in enrollment rates by income groups are significant. Beyond the age of 16, enrollment rates drop off sharply: only 13% of young adults aged 17–24 are enrolled in postsecondary institutions. Only 9% of young adults (17–24) from poor families are enrolled in such courses, compared with 15% of nonpoor young adults, and the poor tend to be enrolled in vocational and technical institutions rather than universities (World Bank 2003: 86). This suggests that poverty reduction strategies could target the poor by focusing on improving the quality of education provided in the vocational sector and ensuring a better match between course choices and employment opportunities, while simultaneously seeking to expand women's participation rates.

Significant gender disparities also emerge in enrollments in the tertiary and vocational education sector. Larger numbers of men compared with women are opting for tertiary study at higher educational institutions: men make up 53.4% of all enrollments compared with 46.6% for women (SSC 2004: 171), even though differences in the proportion of men and women in the primary tertiary education age groups are not significant (49.7% women to 50.3% men in the 20–24-year-old age group) (SSC 2004: 127). More than twice as many men (69.5%) as women (30.5%) are enrolled at vocational institutions (SSC 2004: 164). Men's enrollment in nonstate higher education institutions, at 56.6%, is also significantly higher than female enrollment, at 43.4%, suggesting that men are enjoying greater access to these paying institutions. The reasons for this—including the possibility that as a result of women's narrowing opportunities in the formal employment sector, families are choosing to commit scarce resources to sons' rather than daughters' tertiary study—need to be further explored.

Choices of study at higher educational institutions are also very gendered. Women tend to opt for courses in fields such as education, public health, and social sciences and men in geology, construction, economics and management (Figure 5).

It is not clear whether women's choices in educational specialization are influenced by the growing segregation of the labor market, changing values/attitudes regarding "appropriate" female professions, or a mixture of both. This is an area that could benefit from further analysis and research. What is clear is that many women are choosing fields of study such as education (i.e., teaching), for which professional salaries are low and where, despite their numbers, they are not well represented at the managerial/administrative level.

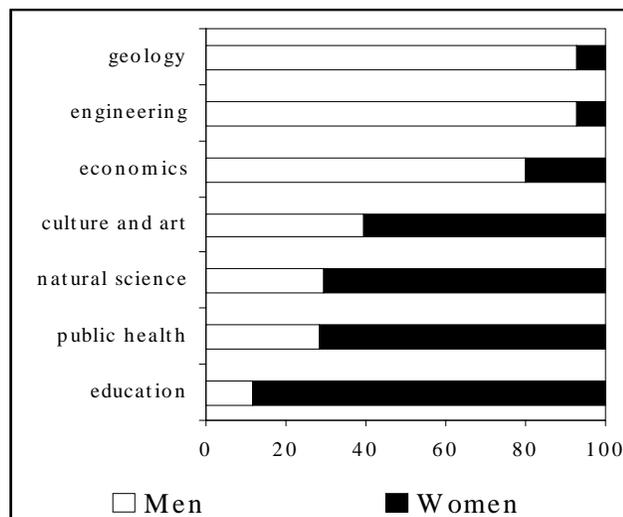
### 5. Gender and Literacy

Although further research is required, the UNICEF MICS on literate adults aged 15 years and over highlighted some gender differences in literacy levels by both income group and location. In particular, whereas 95% of poor men were "literate," only 86.9% of poor women were so classified; only 88.6% of rural women compared to 96.4% of rural men were defined as literate; and major variations occurred within the various regional areas outside Baku (where literacy rates for men and women were almost equal). In Nakhchivan, for example, 94.6% of men were defined as literate, compared with 86.8% of women. In the South, rates were even lower: women's were only 85.1%, compared with 96.5% for men. This suggests that literacy levels in the fSU are not as high as commonly suggested, and if true, this has significant implications for the delivery of programs to the poor and within the regions (UNICEF/SSC 2000: 19). It should be noted that official data from the 1999 census for the corresponding age group differs significantly from the MICS data, which show literacy rates of 98.2% for women and 99.5% for men (SSC 2004a: 161).

### B. Gender Issues in Health

A key difficulty with assessments of gender issues in health care in Azerbaijan is the very high discrepancies between official data, as reported by the SSC, and other data such as the USAID/UN 2001 RHS. Moreover, some data relating to key health indicators, such as iodine deficiency disorders (IDDs), are either not available or in some cases available only for women (e.g., anemia). In the case of anemia, the SSC 2004 data provide information only for pregnant women and not for the general population, including children. Sex-disaggregated regional data are not also readily available, limiting the extent to which more focused geographical analyses and interventions can be made. Improving the availability, breadth, and accuracy of health care data on both men and women and in all regions is therefore critical to developing effective policy and delivering effective programs.

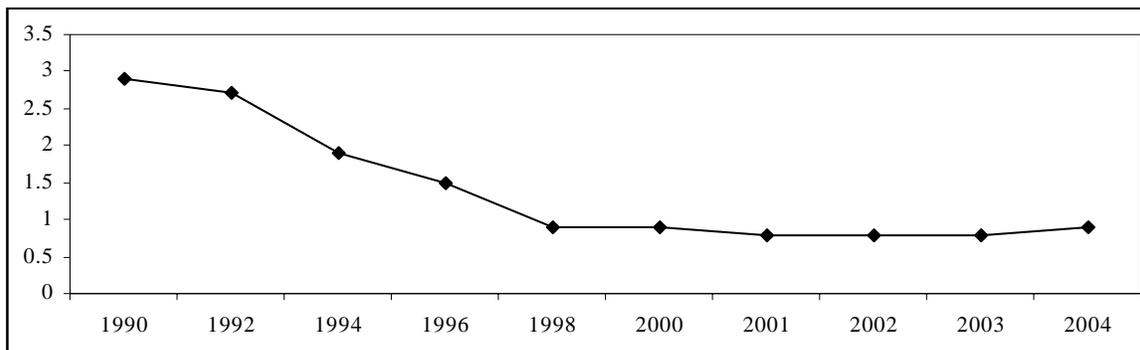
**Figure 5. Distribution of Students in Higher Education by Field of Study (%)**



Source: SSC 2004: 168–169.

Nevertheless, an assessment of both Government data and data from other sources highlight convergent areas of concern, including high anemia rates among women and children, the continued widespread use of abortion as a contraceptive method, declining maternal health indicators, disturbingly high levels of malnutrition among children and high rates among adults, and high under-5 child mortality rates. Health care data for men is generally weak in Azerbaijan, but available data show high and growing rates of alcoholism and drug dependency and a significant increase in TB infections. The increasing incidence of HIV/AIDS and the high levels of VAW are discussed in separate subsections below. Significant decreases in government health expenditures over the last 10 years have led to serious declines in both access to and quality of services, as well as increased levels of informal out-of-pocket expenses from patients in exchange for health care services. (Figure 6)

**Figure 6. Government Healthcare Expenditures as % of GDP, 1990–2004**



Source: SSC: provided on request.

### 1. Maternal Mortality Rates

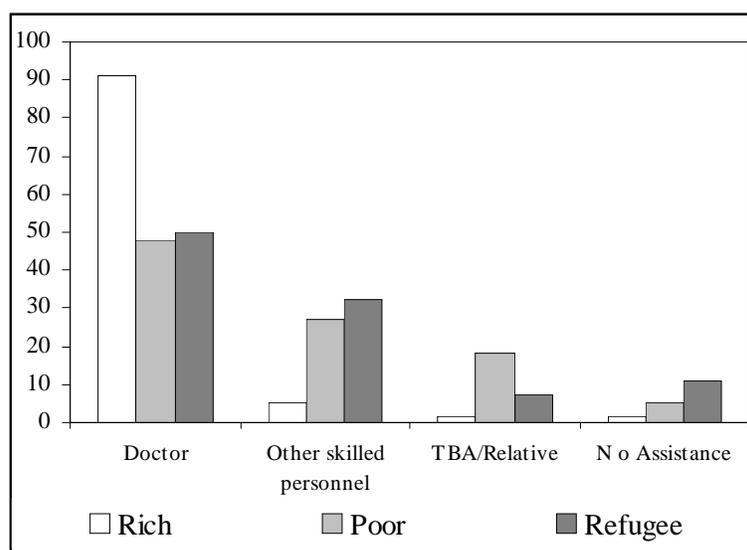
Official government statistics show fluctuating MMRs since the early 1990s, from 17.6 per 100,000 live births in 1992 to a high of 43.8 in 1994 and a decline to 18.5 in 2003. The concern, however, is that neither the measurement of mortality rates nor the final statistics are accurate enough for policy and program interventions to be made, particularly in view of the clear discrepancies between official statistics and survey data (UNICEF/SSC 2000: 45, SSC 2004: 135). For example, official statistics for 1988/89 show an MMR of 28.6 per 100,000 births, whereas the UNICEF MICS, which re-examined data for this period, found an MMR of 79 per 100,000 births, almost 3 times the official rate. In seeking to account for underestimation within the national information system, UNICEF, UNFPA and WHO have estimated a maternal mortality rate of 94 per 100,000 births (ADB 2005b), in contrast to the official figures of 37.6 (SSC 2004a: 135).

Such discrepancies point to weaknesses in the system of reporting in the public health system (such as misclassification of causes of death) and possibly a decline in the use of public facilities from which official statistics are generated. Indications are, for example, that the deterioration in access to and quality of maternal health care services and rising “informal” costs

have led to an increase in home deliveries and the use of traditional birth attendants (TBAs), particularly in rural areas. Deaths following home deliveries are much less likely to be reported (World Bank 2003: 18). The UNICEF MICS 2000, for example, found that while skilled assistance at delivery was provided in 87.5% of births, discrepancies in this attendance were significant for rich and poor, resident and IDP/R, and urban and rural women (see Figure 7). The RHS (2001) found that almost 36% of rural women delivered at home, twice the rate of urban women. Home deliveries were also relatively high among those with low levels of education or low socioeconomic status (39% and 36%, respectively), IDP/R and non-IDP/R women living in conflict-affected areas (41% and 35%), and those with no prenatal care (48%) USAID/CDC/UNFPA et al. 2003: 79–80).

Early pregnancy, that is, a pregnancy before the age of 20, poses a particular threat to the psychological and physical well-being of adolescents who have not yet reached maturity and affects the nutritional status of the mother as well as the fetus, as both have to compete for growth. The increased risk of early pregnancy includes low birth weight, pre-term birth, stillbirth, neonatal accidents (cerebral damage), infections, hemorrhage, anemia, and mortality (ADB 2005b: 5). Early pregnancy can also have negative impacts upon the education of adolescent girls and limit career choices and earning potential.

**Figure 7. Women Aged 15–49 with a Birth in the Last Year by Type of Personnel Assisting at Delivery (2000)**



Source: UNICEF/SSC, 2000: 45.

The RHS (2001) reported an increase in the proportion of women who had their first birth before the age of 20 from 12% among women currently 40–44 years of age to 22% for women 20–24 years of age (USAID/CDC/UNFPA et al. 2003: 32). Given that 86% of first pregnancies are terminated through induced abortion, one should expect that more than one quarter of adolescents have been pregnant before they reach the age of 20 (ADB 2005b: 5).

To draw clear conclusions, it will be necessary to monitor more closely and regularly both the MMRs and the different types of pre- and postnatal care being used by women (including the use of TBAs). Such analysis is particularly crucial for the development of effective and efficient policy and program interventions for the forthcoming PRSP. Capacity building at both national and

local government level, in both the collection and analysis of data, is also clearly required and needs to address the tendency to focus on the presentation of positive (at the possible expense of accurate) results.

## 2. Infant and Under-5 Child Mortality Rates

The official data indicate some recent improvements in the under-5 mortality rate, but like the MMR, the evidence from alternative assessments and household surveys suggests that a significant part of this improvement may be due to underreporting, as well as differences in the definition of live births, rather than actual improvements in health status. For example, whereas the official rates for the period between 1991 and 2000 for neonatal mortality rates averaged 4.2 deaths per 1,000 live births, the Azerbaijan RHS (2001) estimated an average of 38.1 per 1,000 births (USAID/CDC/UNFPA et al. 2003: 103). Similarly large discrepancies are found in comparing postneonatal mortality and infant mortality rates (Table 6). Unfortunately, neither official statistics nor the RHS provide sex-disaggregated data.

In addition to early neonatal causes of mortality, acute respiratory infections (particularly pneumonia), diarrheal diseases, and other infectious diseases are major causes of infant and child deaths. Malnutrition exacerbates the gravity of infections and is therefore an important underlying cause of child mortality, in the sense that many child deaths would not have occurred had these children not been malnourished. The WHO has thus estimated that malnutrition is associated with over half of all child deaths worldwide (ADB 2005b: 6).

**Table 6. Infant, Neonatal, and Postneonatal Mortality Rates (per 1,000 live births):  
Comparison between Official Rates and Azerbaijan Reproductive Health Survey, 2001**

Year	Official Mortality Rates			Azerbaijan Reproductive Health Survey		
	Neonatal Mortality Rate (NNMR)	Post-neonatal Mortality Rate (PNNMR)	Infant Mortality Rate (IMR)	NNMR	PNNMR	IMR
1991	5.3	19.6	25.0			
1992	4.5	21.5	26.0			
1993	4.6	24.0	28.6	41.2	44.7	85.9
1994	4.8	21.4	26.2			
1995	4.5	19.8	24.3			
1996	3.8	17.0	20.8			
1997	3.7	15.9	19.6			
1998	3.6	13.0	16.6	34.1	40.3	74.4
1999	4.0	12.6	16.5			
2000	3.2	9.6	12.8			
<b>1991–2000</b>	<b>4.2</b>	<b>17.3</b>	<b>21.5</b>	<b>38.1</b>	<b>42.7</b>	<b>80.8</b>

*Source:* USAID/CDC/UNFPA et al. 2003: 104

### **3. Contraceptive Prevalence and Awareness**

At the time of the dissolution of the Soviet Union, contraceptive prevalence in the USSR was estimated to be around 30%, lower in the Caucasus and Central Asian Republics and higher in East European republics. Before 1990, USSR health statistics reported Azerbaijan as having the lowest use of contraception in the fSU countries, at 7% (USAID/CDC/UNFPA et al, 2003: 135). Following independence, only a limited number of national surveys on contraceptive prevalence have been conducted, among which the 2001 Azerbaijan RHS and the UNICEF (2000) survey are considered the most indicative.

According to the 2001 RHS, nearly three out of four women stated that they wanted more information about contraception, including 85% of women aged 20–24 years. Moreover, contraceptive prevalence among Azeri women in marriage was very low; only 55% of married women reported using any method of contraception in the month preceding the survey, and less than one quarter of those women used a modern method, mainly the intra-uterine device (IUD) (6%) (USAID/CDC/UNFPA et al, 2003: 137). Significantly, among the same group, 45% of women reported an unmet need for effectively limiting childbearing (USAID/CDC/UNFPA et al, 2003: 169).

Seventy-eight percent of women who were using contraceptives were using traditional methods such as withdrawal; 93% of those using traditional methods stated that their major reason for doing so was fear of side effects (90%), ignorance of contraceptive methods (71%), cost (61%), and, lack of access to contraceptives (53%) (USAID/CDC/ UNFPA et al, 2003: 147). It is important to note that partner preference still plays a key role in determining contraceptive use. Almost half the women surveyed (49%) stated that they do not use modern contraceptive methods due to partners' preference for traditional ones (USAID/CDC/ UNFPA et al, 2003: 147). Almost half of the women surveyed (46.8%), however, did not know when was the most likely time in their menstrual cycle for pregnancy to occur, suggesting that combined with the above mentioned factors, they exercise very limited control over reproduction.

### **4. Abortion/Selective Sex Abortion**

In Azerbaijan, as in many other republics of the fSU, induced abortion has been the main method of fertility control over the last decade. While official statistics indicate a real decline in the abortion rate, alternative data suggest that abortion rate is still high, but abortions in the private sector, as well as many taking place outside clinical settings, are underreported. While official data note 0.3 abortions per woman aged 15–49 years between May 1998 and April 2001, the RHS notes a rate of 3.2 abortions per woman, or an abortion-to-live-birth ratio of three abortions to each live birth. Unfortunately, no national sample surveys on induced abortions have been undertaken against which to compare these two data sets, making this a key future priority if reproductive health policy and programs are to be adequately informed.

A significant discrepancy in recent official population data suggests that selective sex abortion may be taking place. The 2003 data from the SSC show a significant sex distribution gap

between boys and girls in the 0 age group: 46.0% girls compared to 54.0% boys, a pattern also reflected in the 1–4 age group, which has 46.3% girls and 53.7% boys. Even if child mortality rates (for which sex-disaggregated data are not readily available) are considered, such significant differences in the proportion of girls to boys requires further assessment. This difference translates into 259,500 girls in the 0–4 age group compared with 301,400 boys, or 41,900 fewer girls. Significantly, the balance between boys and girls evens out more in the 10–14- (48.7% girls to 51.3% boys) and 15–19-(48.9% girls to 50.3% boys) year-old age groups, suggesting that this trend toward a larger proportion of boys being born is recent (SSC 2004a: 127). Gender differences in live births over the last several years are also significant. In 2003, for example, there were 52,168 live girl births compared to 61,299 boy births (45.9% compared to 54.1%) (SSC 2004a: 137).

## **5. Poor Nutrition**

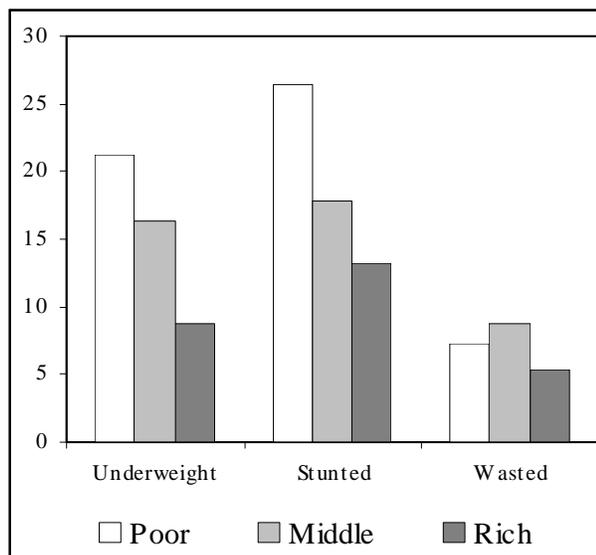
Poor nutrition is a major issue in Azerbaijan. While it is more profound among the poor, it is also increasingly evident among the more affluent sections of the population. In particular, chronic energy deficiency (or underweight) and anemia are leading causes of low birth weight as well as maternal mortality.

The prevalence of anemia among women of childbearing age is extremely high in Azerbaijan, and impacts upon both mother and child health as well as productivity. Once again, the divergences in the SSC figures and those in the RHS are significant, but both are sufficiently high to warrant serious attention. The SSC has estimated that in 2003, 16.4% of all pregnant women suffered from anemia (SSC 2004a: 155). In contrast, the RHS, which tested 1,906 women of childbearing age throughout the country, found a 40% prevalence rate overall: 38.4% of pregnant women and 40.2% of nonpregnant women tested positive for anemia. Rates were higher in the Central and Southern regions of the country (54.1% and 49.0%, respectively) (USAID/CDC/UNFPA et al. 2003: 119–120). Prevalence of iron-deficiency anemia among pregnant women was found to be 52.5% in 2001, according to government data (cited in ADB 2003b: 2).

Child malnutrition is of particular concern and although very limited (i.e., only national) sex-disaggregated data are currently available, the poor general indicators suggest the need for urgent interventions in all regions of Azerbaijan. In 2000, the UNICEF/SSC MICS found that 18.4% of all girls and 15.3% of all boys under 5 years were underweight and that one fifth (20.1% of all girls and 19.2% of all boys) were stunted. Almost 8% of all children under 5 suffered from wasting or were too thin for their height and 7% of all children were severely stunted (UNICEF/SSC 2000: 21) (Figure 8).

The survey also found a higher prevalence of underweight and stunting among rural children than among their urban counterparts, although gender-disaggregated data are unfortunately not available. Children in the Baku region fared better than those from other regions on all three nutritional indices measured (underweight, stunting, wasting); children in the poorer regions of Nakhchivan and the West and Southwest fared the worst with one in five children found to be underweight and one in four suffering from stunting. Although poorer and IDP/R households had more malnourished children overall, middle-income households also showed relatively high rates: 16.4% of children underweight and 17.8% stunted (UNICEF/SSC 2000: 22). A strong correlation was found between the mother's educational level and nutritional status. Children of mothers educated to college/university level were least likely to be underweight or stunted compared with children of mothers with less education (UNICEF/SSC 2000: 21–22).

**Figure 8. Percentage of Underweight, Stunted, and Wasted Children by Income Group**



Source: UNICEF/SSC, 2000: 22.

Although data are not regularly collected on childhood anemia, a prevalence rate of 31.8% among Azeri children aged 12–59 months found in the 2000 UNICEF/SSC MICS suggests that screening should be a routine part of early childhood health care programs. Anemia was found to be highest amongst children in the 12–23-month age group (56.9%), and taken together, these figures suggest a serious public health problem (USAID/CDC/UNFPA et al, 2003: 117). Data on iodine deficiency is particularly weak in Azerbaijan, but a 1999 survey found a 86% prevalence of IDD in high-risk rayons (ADB 2003b: 2). Moreover, the strong correlations found between high levels of malnutrition and anemia and early learning performance suggest that these health issues have implications for the education sector.

Childhood diarrhea and ARIs are the leading causes of child deaths in Azerbaijan. The 2000 UNICEF/SSC MICS found that in the 2 weeks preceding the survey, 21.7% of children under 5 years had experienced diarrhea; extremely high rates were found in Nakhchivan (35%) and among IDP/R households (26%) (ADB 2003b: 28). Children most prone to diarrhea were those making the transition from being breast fed; since the mean duration of exclusive breast feeding is only 0.4 years in Azerbaijan this is a major concern (ADB 2003b: 101). Official (SSC) statistics for 2003 show diseases of the respiratory system to be leading cause of deaths in the 1–14-year-old age group for both girls and boys (SSC 2004a: 133).

## **6. Men's Health Issues**

Alcohol and drug dependency among men are growing in Azerbaijan and in overall terms, men are much more prone to alcohol and drug dependence than women. According to official SSC data, male alcoholism rates are 13.5 per 100,000, in contrast to female rates of 0.1 per 100,000 (SSC 2004a: 153). It is widely understood, however, that these figures underrepresent the actual situation in Azerbaijan. Men's alcohol dependence is cited as a major "family" problem by many women who are often victims of alcohol-related male violence. The number of rehabilitation or treatment centers for alcoholism and drug dependency in Azerbaijan at present is limited. Men are also heavy smokers. One in five (22.9%) men in the 20–29 age group, one in two men in the 30–39 (52.4%) and 40–49 (56.7%) age groups smokes an average of 16 cigarettes per day (SSC 2004a: 147). Specially targeted interventions are required to address these problems. In addition to raising public awareness of the health and psychosocial problems associated with alcohol and drug dependency (including cigarettes), the provision of confidential counseling and support and treatment centers should be key priorities.

TB is also a major health issue for men in Azerbaijan and although women are also susceptible, men constitute the major proportion of both newly emerged and ongoing cases of active TB. The concern that administrative data may not reflect actual incidence levels is serious. Of the total active TB cases, 77.2% were men, and TB incidence is three times higher for all age groups (SSC 2004a: 150).

The lack of data and information on other possible male health problems, including anemia, IDD, and nutrition rates is serious and constrains the development of appropriate and effective program interventions. This data gap needs to be closed and improvements in the collection and analysis of gender-disaggregated data in the health care sector should ensure that both women and men are included in data sets and in survey target groups.

## **7. Gender and HIV/AIDS**

As of 1 January 2004, 596 HIV cases had been registered in Azerbaijan. Men make up 80% of these registered cases and the available data note that 45% of HIV-positive cases were infected outside the country, mainly in Russia and the Ukraine, which are key employment destinations for Azerbaijan men. This suggests that migration (including temporary labor migration) increases the risk of HIV. Increases in the numbers of trafficked women and girls in recent years is of particular concern, because many of them are forced into sex work in destination countries, where they become highly vulnerable to HIV and other STIs.

Although the total infection rates appear low in comparison with the rest of the region, it is widely agreed that available national statistical data do not reflect the true picture of the problem and that, in particular, the number of active female HIV cases is much higher than official data suggest, due to a lack of access to confidential HIV testing and counseling services (UNAIDS/WHO 2004: 1–2). UNAIDS/WHO has estimated that as of 2004, as many as 2,800 adults and children could be infected with HIV, noting that this remains a conservative estimate

(UNAIDS/WHO 2004: 1–2). The results of a WHO-supported survey implemented in late 2003 also showed much higher figures than available statistical data. Among injecting drug users (IDUs), HIV prevalence was high (16,5%), including 13% in the capital Baku and 19.5% in Lenkoran (UNAIDS/WHO 2004: 1–2).

IDUs comprise the dominant mode of transmission (63% of all cases) (UNAIDS/WHO 2004: 1–2). Since the number of drug users in Azerbaijan—an estimated 300,000–400,000—is quite high, and 50% to 60% of them inject heroin (UNAIDS/WHO 2004: 2), the potential for further growth of HIV infection rates is strong. Increasing the focus of national preventive efforts toward IDUs as a target group should therefore be a key priority.

In 1996, the President of Azerbaijan signed a decree establishing the “Law Prevention of HIV/AIDs Distribution,” which made HIV testing mandatory for blood donors and donors of other biological liquids, organs, and tissues. The mandatory policy has since been abolished, however, and access to voluntary HIV testing and especially counseling remains extremely limited. Only about 2.3% of the total population was tested for HIV in 2003 (UNAIDS/WHO 2004: 2).

Levels of public awareness of HIV/AIDS are very low and remain a problem in Azerbaijan. Further support is needed to increase the dissemination of accurate information in both urban and regional centers. The 2001 RHS found that one in four Azeri women had not heard of HIV/AIDS and that only 1 in 5 who were aware of the disease knew that it could be present with no symptoms. This lack of awareness and understanding of the disease is important, as women who do not know the virus could be present without symptoms could place themselves at risk if they have sexual intercourse with an apparently healthy HIV-infected individual. As to prevention, only 1 in 12 women spontaneously mentioned the use of condoms as a possible preventive behavior, less than 3% of women independently identified HIV testing as a form of prevention, 72% of women could not spontaneously state any main way of avoiding HIV infection, and less than 1% could name three or more preventive behaviors (USAID/CDC/UNFPA et al. 2003: 282–283).

The survey’s results also noted that specific subgroups of women in Azerbaijan are less educated about HIV/AIDS transmission and prevention, including younger women, rural residents, women with lower educational and socioeconomic levels, and sexually inexperienced women. This implies that although public information and awareness-raising campaigns are important in general, they also need to target specific groups of women and develop appropriate strategies to do so. In particular, the lack of awareness among younger and sexually inexperienced women suggests that the educational system could play a greater role in information dissemination and awareness-raising programs.

## **8. Gender-Based Violence**

Gender-Based Violence (VAW) is still widely perceived as a “private” matter in Azerbaijan, rarely spoken about openly and frequently concealed. In particular, few women or men understand domestic violence, including psychological violence and marital rape, to be a criminal offence, suggesting an urgent need to increase public awareness of the issue and bring it into the

public domain. A 2004 study by the International Rescue Committee (IRC) found that denial was usually the first response to questions about VAW, due to both a sense of shame and the fact that some kinds of violence, particularly intimate partner violence (e.g., hitting and slapping), were widely understood to be normal (IRC 2004: 11).

Obtaining accurate data on incidence levels is therefore challenging. In particular, the fact that women are unlikely to report crimes of violence is reflected in the minimal number of cases being reported through the Ministry of Justice. In 2002, 317 cases were registered regarding crimes of violence against women and in 2003, just 289. In 2000, only 39 cases of rape were registered in Azerbaijan and only 46 in 2003 (IRC 2004: 11). Many report that in addition to feeling ashamed and afraid to report such crimes, the reporting process is complicated and traumatic, and the police, the medical profession, and the judicial process offer little protection and support. Moreover, the failure to observe confidentiality, particularly in nonurban areas, reinforces women's sense of shame and ostracism.

Because official data is either lacking or unreliable, a number of international organizations have undertaken studies in recent years to better assess the magnitude of the problem, with a view to developing appropriate program responses. The 2001 RHS, which was supported by a group of donors including USAID and the UNFPA/United Nations High Commissioner for Refugees (UNHCR), found that of the 7,668 women respondents, almost 30% reported verbal abuse, 25% reported physical abuse, and 10% sexual abuse by a partner or ex-partner; 84% of those reporting one kind of abuse also reported other kinds as well (e.g., verbal and physical/sexual abuse) (USAID/CDC/UNFPA et al. 2003: 293). In a Pathfinder International study in six regions in Azerbaijan, of the 178 respondents, 28% reported being the victim of physical violence from their husband or partner in the month prior to the survey; over 5% reported violent incidences occurring more than five times that month (IRC 2004: 11). The same survey found that 43% of the married women surveyed experienced violence in their current relationship (IRC 2004: 4).

The Government's response to VAW remains slow and although various government documents, including the 2000 Presidential Decree "On the Implementation of State Women's Policy in the Azerbaijan Republic" raise the issue and identify activities to address it, a lack of financial and human resources has meant that programs have not yet been implemented at the national level. At present, government-supported counseling services for victims of violence, safe houses where women can find refuge, or free legal advice networks that could support and guide women through the legal process are all nonexistent. Training for officers of law enforcement bodies has been minimal, and although some additional training has been provided through NGOs and UN agencies, this has only been able to reach a small proportion of the national police force.

At the legislative level, considerable gaps remain. Although the Criminal Code (Article 109) makes the rape or sexual abuse of a woman punishable by imprisonment for a period of 3 to 7 years, no specific article on marital rape is found in the Code. Statistics regarding cases reported to the police and cases prosecuted are unfortunately not readily available, so assessment of the effectiveness of the judicial process is difficult.

NGO responses to VAW are gathering momentum, but remain still underresourced and fragmented. Some quality research has been undertaken by organizations such as Symmetry, the Center for Legal Assistance to Migrants, Pathfinder International, and the Azerbaijan Sociological Association, although their findings have not been widely circulated. Some broad-based information and awareness-raising campaigns have taken place, including several television advertisements by the Center for Psychological Counseling and public service announcements by World Learning and Inter-news, with support by USAID. Legal assistance is currently being provided by the Azerbaijan Young Lawyers Association and the Women’s Crisis Centre, which offer telephone hotlines and legal consultants on staff to offer advice to women.

### **C. Recommendations**

Following are recommendations on education and health care.

#### **1. Education**

- Undertake regular assessments of female/male enrollments, attendance rates, and learning outcomes at primary and secondary school levels and develop appropriate policy and program interventions to address emerging gaps and issues.
- Assess the reasons for and develop appropriate strategies to address lower female enrollments in higher education.
- Commit additional resources (human and financial) to expanding quality early childhood care facilities, including preschools.
- Introduce gender awareness training as a mandatory component of all teacher training programs (e.g., early childhood, primary, secondary, and tertiary).
- Revise school curricula and textbooks to remove stereotyped images of men’s and women’s roles and promote behavior that does not validate or condone gender inequality and gender-specific violence.
- Regularly analyze labor force requirements (including gender barriers) so that vocational and other higher education programs can better correspond to labor market demands.
- Develop institutional capacity (e.g., through regular training) for collection, analysis, and reporting of sex-disaggregated data at all levels of central and municipal government responsible for the management of the education sector.

#### **2. Health Care**

- Strengthen PHC programs that provide pregnant women, new mothers, and their families with access to quality pre- and postnatal care, as well as basic information about breastfeeding and diet, appropriate micronutrient supplements, birth spacing, immunizations, and basic newborn care.
- Develop human resources (including front-line health workers) within the health sector by providing relevant and appropriate training and supervision to improve

skills in (i) case management of prevalent diseases, such as diarrhea and ARIs; (ii) preventive health service delivery, such as immunization and the various strategies for the prevention and control of micronutrient deficiencies; (iii) promotion of infant and young child feeding practices, including breastfeeding; and (iv) providing maternal (prenatal, intrapartum and postnatal) care.

- Expand family planning services that increase awareness, availability, and affordability of contraceptives and regularly monitor early pregnancy rates and the use of abortion as a contraceptive measure, developing program responses to address further increases as appropriate.
- Regularly monitor male and female birth rates, particularly with a view to assessing whether sex-selective abortion is taking place, and develop appropriate responses.
- Promote improved health behaviors among communities and households, both preventive and curative, to address the major causes of childhood illness and death and poor adult nutrition (e.g., IDD, anemia).
- Undertake assessments of childhood immunization coverage for girls and boys in all regions and among all income groups (including IDP/Rs), identifying key constraints and issues.
- Undertake regular (male/female) client/beneficiary assessments of the quality of and access to health care services, to better inform policy and program improvements.
- Identify and target women and men at “high risk” of contracting HIV/AIDS and STIs and develop appropriate policy and program responses (e.g., appropriate education and information programs, referral, and treatment services) for these target groups.
- Improve the availability of and access to free confidential HIV/AIDS testing facilities in Baku and the regions and ensure that they are sensitive to women’s special needs (i.e., for female doctors/nursing staff).
- Support national awareness campaigns (i.e., through schools, universities, government workplaces) on gender-based violence (including trafficking) and establish adequate and effective levels of support for victims of violence, including crisis centers, safe houses, and counseling and referral services.
- Ensure that laws on VAW and trafficking are effectively enforced.
- Support the provision of regular training programs for judicial, legal, medical, social, educational, police, and migration staff on avoiding the abuse of power leading to VAW; sensitize such personnel to the nature of gender-based violence.
- Develop and support legal literacy training programs for women and men at various levels, including within institutions, central and local government, security forces including the police, the armed forces and migration staff, educational institutions, and among rural and urban women.



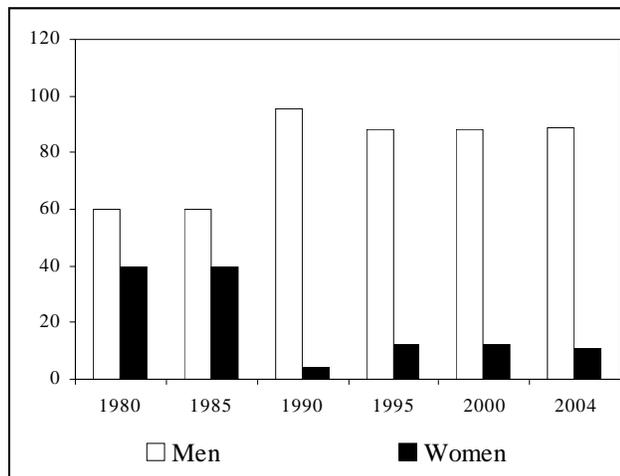
## Chapter 6 Gender, Political Participation, and Civil Society

### A. Gender and Governance Issues

Women's participation in politics and governance structures in Azerbaijan has declined sharply in the transition period, although their participation is nowhere legally restricted. Although it has been suggested that the large numbers of women appointed to political posts in the Soviet era camouflaged their relatively low degree of influence, particularly within the senior echelons of government, women still made up 40% of the Supreme Soviet of the Azerbaijan Republic in 1989, largely due to the quota system that set the level of women's representation at a minimum of 33%. Within 1 year of independence, women's representation had declined to only 6% (Figure 9). In 2004, only 13 of the 125 members of the National Assembly were women. At the municipal level (where quotas of 33% were also set for women in the District Councils of Working People Deputies in the Soviet era), the weak representation of women is even more pronounced. In the most recent municipal elections held in December 2004, only 4.0% of elected members were women (State Women's Committee: data obtained on request).

Women's participation in party politics is also extremely low. At present no quota system exists to guarantee a percentage of female representation. With so few women in decision-making positions within party structures, an increase in the numbers of women nominated to party tickets and eventually elected to Parliament is unlikely. In two parties, the Musavat Party and the Party of National Independence of Azerbaijan, women occupy 20% of positions in decision-making bodies; in the Azerbaijan Popular Front Party this figure is 15%, and in the Azerbaijan Democratic Party, 9% (State Women's Committee: data obtained on request). Gender issues are not systematically addressed within the platforms of the major political parties and are not perceived to be "key" election issues, even though around 50% of voters are women.

**Figure 9. Gender Composition of Parliament, 1975–2004**



Source: SSC 2004: 205.

Women clearly feel constrained to enter the party political arena, although the reasons for this remain unclear and require further research. Some women have highlighted the "male" nature of the political domain and the fact that space for women's "voice" is limited, as is internal support

for addressing what are perceived to be “women’s issues.” Others have highlighted women’s lack of awareness and knowledge of the political process and suggested that women require specialized support and training to enter politics. Still others note with concern the (re)emergence of traditions and customs that limit women’s activities in the “public” domain and their mobility to attend party meetings, particularly in the evenings; moreover, engaging in politics requires extra time that they simply do not have in addition to both their paid and unpaid (i.e., household domestic) work. Finally, the costs of registration and campaigning are relatively high and beyond the means of many women, for whom the average family income only meets essential living costs.<sup>12</sup>

The proportion of women employed within senior levels of Government is also very low compared with that of men; most women occupy junior or administrative (i.e., non-decision-making) posts. As Table 7 highlights, gender imbalance is considerable in all ministries: 562 senior management positions out of a total of 636, or 88.4%, are occupied by men. At present, only 1 of 29 Heads of State Ministries and Committees is a woman: the current Head of the State Committee for Women’s Issues (State Women’s Committee: data obtained on request). Moreover, considerable sector-level segregation exists, as the few women who are in management positions are confined to ministries such as Health, Culture, and Social Protection, which are broadly perceived to be “female” sectors, unlike Finance, Taxes, or Internal Affairs. Recruiting women into management streams within the public sector or fast-tracking the careers of women who have demonstrated management potential are not matters of active policy, suggesting that the current pyramidal management structure of the public service is likely to persist for the foreseeable future.

Recognizing the existing considerable imbalances, the NPA on Women’s Issues (2000–2005) includes the strategic objective of increasing women’s participation in power and the decision-making process and several measures to increase women’s participation and representation, such as ensuring women’s equal participation in government decision-making processes and promoting the active participation of women in municipal elections and political parties (SCWI 2000). However, as the above data on women’s low levels of representation in senior levels in government as well as political processes indicate, these objectives have yet to be realized, and more concrete steps are still required to implement them. In particular, the absence of any budget for NPA activities seriously constrains the SCWI from undertaking any activities other than their core functions. Promoting women’s increased participation in politics and representation at decision-making levels has not been a key focus of donor support to date and the minimal activities that have been undertaken have had limited impact.

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<sup>12</sup> This information is based on individual interviews as well as group discussions undertaken with women in urban and rural areas during the CGA fieldwork in October, 2004.

**Table 7. Women and Men in Decision-Making Government Positions, 2004**

<b>Ministry<sup>a</sup></b>	<b>Total</b>	<b>Number of Women</b>	<b>% of Women</b>
Ministry of Health	14	6	43
State Statistics Committee	40	16	40
Ministry of Culture	22	7	32
Ministry of Labor and Social Protection	25	6	24
Ministry of Economic Development	17	4	23.5
State Committee on Refugees and IDPs	9	2	22
Ministry of Fuel and Energy	20	4	20
Ministry of Ecology and Natural Resources	31	4	13
Ministry of Finance	63	8	12.5
Ministry of Foreign Affairs	43	3	7
Ministry of Youth, Sport and Tourism	27	2	7.5
Ministry of Taxes	30	2	6.5
Ministry of Agriculture	56	2	3.5
Ministry of Internal Affairs	239	6	2.5
<b>Total</b>	<b>636</b>	<b>74</b>	<b>11.6</b>

IDP = internally displaced person.

Note: <sup>a</sup> Includes only ministries for which data were readily available.

Source: State Women's Committee: date provided on request.

## **B. Civil Society Organizations Addressing Gender Issues**

Estimates of the number of registered NGOs in Azerbaijan vary widely. In 2002, the Ministry of Justice registered 1,400 organizations (of which 50 described themselves as women's NGOs), although it is generally agreed that only a handful of these are active (OSCE, 2002: 1). These organizations are involved in a wide range of activities across different sectors, including the environment, humanitarian relief, IDP/R assistance, and work with street children and the disabled. An NGO Directory has recently (September 2005) been compiled and provides the names and addresses and work areas of all registered NGOs in Azerbaijan. Women's NGOs represent a relatively small segment of the overall NGO sector and have tended to focus their work on certain issues such as VAW, trafficking, and the IDP/R population.

The Government has begun to recognize that reducing poverty and improving Azerbaijan's human development indicators will require increased collaboration and consultation with NGOs and civil society groups. It made a considerable effort to involve community and NGO

representatives in the preparation of the SPPRED 2003–2005 and it is expected that the participatory process will be further strengthened in the development of the forthcoming SPPREAD. Increasing the participation of both women's NGOs and individual women at the regional and community level will receive greater emphasis. ADB has been supporting this process through the SPPRED Secretariat and supporting nationwide awareness-raising activities conducted by the NGO Forum.

The NPA on Women's Issues, which the SCWI developed and which provides the framework for government action on gender issues, also affirms the important role of women's NGOs in the development process and calls for their greater participation in development initiatives, as well as the formation of stronger links with international women's NGO networks. The SCWI has also established an Intersectoral Council which includes both government and NGO representatives to monitor the implementation of state policy on gender.

Although women's NGOs in Azerbaijan are growing in both numbers and outreach, they face considerable constraints. Lack of adequate funding is a key issue. Many women's NGOs have yet to develop the international and regional networks and outreach through which such support can be sourced. Community financial contributions to the work of women's NGOs remain very low to nonexistent, making them largely unsustainable in the absence of high levels of donor support. Donor dependency has also meant that the work of many NGOs is driven by donor priorities as much as by their own perceptions of specific community needs. In general, lack of funding has also contributed to the considerable competition that exists among NGOs. Most women's NGOs, however, operate on a very limited budget and are only able to undertake activities with the support of volunteers. Lack of both financial and human resources has limited the extent to which many of these organizations have been able to plan and implement broader-based training and capacity-building programs, although such skill development programs are sorely needed.

Information in the community and in the Government about the role and capacity of women's NGOs is generally lacking and results in weak constituency relations. The USAID 2003 Azerbaijan NGO Sustainability Index, which conducts community surveys as a core part of its assessment of NGOs' public image, found that public awareness of NGOs and their activities in Azerbaijan remains low. Only 22 % of the population knew about NGOs operating in their community. Many NGO representatives acknowledge that not enough is being done to promote NGOs and their activities and although some NGOs have websites, publish promotional brochures, and use various forms of media to disseminate information about their organizations, the public reach and effectiveness of these mechanisms is limited. Part of the difficulty is that few women's NGOs have the regional presence and/or networks that are required to garner such support; most are based in Baku or the major urban centers. Sustained regional presence in turn requires financial resources that, as noted, are severely limited.

The operating environment for NGOs is improving, but registration procedures can be lengthy and complicated and an appropriate legal framework that could provide tax and fiscal benefits is lacking. Organizational capacity varies widely and is most developed amongst those NGOs with international links and networks, such as the Soros Foundation and Save the Children

Fund, which have full-time staff, clear leadership structures that delineate authority and responsibility, and transparent financial accountability mechanisms.

In recent years, efforts have been made to improve cooperation between NGOs in general and women's NGOs in particular. Several different NGO coalitions exist, including the National NGO Forum (*Milli QHT Forumu*), which acts as an umbrella organization and focal point for more than 200 NGOs, including a number of women's NGOs, and has branches in five regions. The Azerbaijan Gender Information Centre also coordinates training programs and undertakes research in selected areas. At present, however, no government/donor/NGO consultative mechanism is in place, nor any specific forum or mechanism through which gender-related activities and issues could be more specifically coordinated and considered. Such a "gender consultative forum" would not only improve the exchange of information on gender program and policy issues at the sector level, but would provide an opportunity to share lessons learned, avoid duplication of activities, and thereby improve the effectiveness of program and project delivery. It would also support the Government's NPA on Women's Issues, which identified improvement of information and communication between women's NGOs as a key priority.

### **C. Contributions of International Development Partners**

Various international organizations have been actively supporting gender equality and gender mainstreaming initiatives over the last decade.<sup>13</sup> Within the United Nations family, agencies such as UNDP, UNIFEM, UNICEF, UNFPA, WHO, UNHCR and the World Food Program (WFP) have taken a lead on gender mainstreaming initiatives and have also supported capacity building of the SCWI and women's NGOs in various regions, including Baku. In 2004, UNDP and the Government of Norway announced their joint support for the preparation of a National Human Development Report on Gender Attitudes in Azerbaijan. The report will present the findings of the first national survey of gender attitudes and is the first such survey to be conducted in a CIS country. It is expected to highlight the nature of gender roles and relations in Azerbaijan and be used as a tool to stimulate a national debate on gender values and attitudes and inform improved policy making and program formulation. UNIFEM assistance to Azerbaijan has focused primarily on its project, "Women for Conflict Prevention and Peace building in the Southern Caucasus," which commenced in 2001 and aims to support women's efforts in conflict transformation and peace building in Azerbaijan, Armenia, and Georgia. In addition to this project, UNIFEM has supported various conferences and meetings on the Beijing+10 process, as well as promoting equal opportunities for women, and provided some capacity building support for the SCWI.

UNICEF has a range of programs focused on early childhood nutrition and education, a number of which focus on women and girl children. These include providing vitamin A supplements to remedy deficiency disorders; campaigns for Universal Salt Iodization to eliminate iodine deficiency; and the Baby-Friendly Hospital Initiative, which seeks to promote hospital reforms and improve conditions for pregnant women and newborns. UNICEF has also been working closely with the Ministry of Education to integrate a program of Active Learning into the

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<sup>13</sup> As it is not possible to summarize all of these programs, only a few are highlighted here.

curriculum to improve the quality of teaching nationwide. More than 80% of UNFPA's assistance in the current program is targeted at the support of the reproductive health sector. Major areas of focus include contraceptive and logistics support to establish a network of family planning clinics in Azerbaijan, strengthening reproductive health services and training capacity for service providers, supporting the national AIDS program, supporting women's NGOs in expanding community-based service delivery programs, integration of family planning services in the primary health care system, and training service providers in modern methods of contraception.

UNHCR has been working in Azerbaijan since early 1990, its efforts largely concentrated on the half million IDPs resulting from the still unresolved conflict with Armenia over Nagorno-Karabakh. In addition, the agency has been working with national authorities to develop its newly-established asylum system and improve conditions for vulnerable urban IDPs, including many women. A community center providing literacy programs and a range of other services, including separate programs for women, has been established in Baku. One of the key objectives in UNHCR's Country Operational Plan for 2006 is to minimize further the occurrence of sexual and gender-based violence among the refugee and asylum-seeker population by expanding awareness programs, including trafficking of women at risk, and promoting effective reporting mechanisms. Assisting the IDP/R community through a range of nutritional supplementation, food for work, and other rehabilitation programs has also been the primary focus of WFP assistance to Azerbaijan; gender mainstreaming is incorporated in all the agreements of WFP's Azerbaijan Country Office with the Government and the NGOs.

Several development partners are focusing their efforts on migration and trafficking issues, including the International Organization for Migration (IOM) and the Operation for Security and Co-operation in Europe (OSCE). IOM, with support from a range of donors, has several concurrent projects focusing on building government capacity in the development of migration policy, developing the skills and expertise of local NGOs on migration issues, monitoring migration movements, awareness raising of potential migrants on risks and consequences of irregular migration, especially smuggling, countertrafficking, and return and reintegration. Gender issues are central to IOM's work and it is increasingly working with government and NGO partners to improve gender mainstreaming at all levels. The OSCE's mandate, which focuses on legislative reforms in the fields of elections, mass media, civil society, building government and NGO partnerships, and training police and penitentiary officers, includes working on both gender and youth issues as a crosscutting theme. In addition to supporting the promotion of gender equality mechanisms through the NPA on Women's Issues, it is supporting the SCWI's efforts to introduce legislation on domestic violence and to establish women's counseling centers across the country. The Office also supports the Office for Democratic Institutions and Human Rights women's network in Azerbaijan. The OSCE assisted the Government in the preparation of the National Action Plan on Combating Traffic in Human Beings, which was adopted in 2004, and is continuing to support several antitrafficking initiatives, including the creation of two NGOs that will run a national toll-free help line and the country's first secure shelter for trafficking victims.

In early 2004, USAID completed a Gender Assessment for Azerbaijan with a view to identifying further entry points for mainstreaming gender concerns in operational procedures and at

the sector level (USAID 2004). USAID has been especially active in the areas of SME development and support for the expansion of microcredit institutions and services, as well as supporting health care and reproductive health programs. The Ministry of Health and UNICEF, with USAID support, will undertake a National Demographic and Health Survey in 2005–2006 that will provide sex-disaggregated data on a wide range of health care indicators (including nutrition), as well as access to services. These much-needed data should inform the development of more effective and possibly targeted interventions for men and women in the health care (including reproductive health) sector. The World Bank undertakes gender and social assessments in the design of projects and has also considered undertaking a national gender assessment in the near future. The International Fund for Agricultural Development (IFAD) has been supporting a gender mainstreaming initiative in its Rural Development Program for Mountainous and Highland Areas project, which is being implemented in the Gabala district. This has included the appointment of a gender specialist to the project and has focused on providing targeted assistance to the poorest women in the project implementing locations.

#### **D. Recommendations**

- Undertake assessments of the constraints and impediments to women's greater participation in local and national government political structures and make appropriate policy and program recommendations. Support public awareness campaigns at central, regional, and local government level aimed at encouraging and increasing women's participation in governance structures.
- Consider setting targets for women's participation in local government decision-making structures and their representation at the oblast and rayon level.
- Implement gender-equality awareness-raising programs at all levels of government that include training in gender analysis and mainstreaming techniques.
- Develop effective mechanisms, at the local, regional, and national government level for regular consultations with women's NGOs, community-based organizations (CBOs), and civil society representatives and ensure that key issues identified are effectively addressed in government policies and programs.
- Provide support for capacity building and strengthening of NGOs and CBOs working on gender issues in Baku and in the regions and improved coordination of activities.
- Establish a coordination mechanism (e.g., a gender consultative group or similar) through which development partners, including the United Nations, international and multilateral organizations, and international NGOs can meet on a regular basis, share information, and exchange lessons learned on gender issues, as well as encourage and support gender mainstreaming in donor-supported activities.
- Ensure that development partners continue to advocate gender-equality principles in their policy and program work, including the requirement to observe gender equity principles in the engagement of project staff; in the design, monitoring and evaluation of projects; and in policy dialogue with government at all levels.



**A. Internal/External Labor Migration**

Worsening economic conditions, often underlined by long periods of unemployment, have been cited as the major push factors for the increasing rates of both internal (rural to urban) and external (temporary/illegal) migration in recent years; most migrants cite employment opportunities and hence income as the primary pull factors (IOM 2001: 25).<sup>14</sup> IOM has also noted that a significant increase in cross-border movements is expected in Azerbaijan as a result of reforms taking place to further develop the economy, including contracts with oil companies to deliver its crude to the West and the revival of the “Silk Road” route. Increasing levels of transit migration through Azerbaijan, including migration of women and girls trafficked from neighboring Russia, Ukraine, and Central Asia to Turkey and beyond, has also been noted, and further complicate ongoing efforts by the Government, international organizations, and NGOs to provide improved information, protection, and support for potential and returning illegal migrants.

Although accurate data are difficult to obtain, a 2001 IOM survey of 769 potential migrants (i.e., migrants who had undertaken the first steps toward migration) from seven regions in Azerbaijan found that two fifths (41.5%) of potential migrants were women. Most were between 20 and 30 years of age. Significantly less intended female migration was seen from regions such as Khanlar, Guba, and Hachmaz (30.6%, 13.3% and 22.2%, respectively), most likely because of greater restrictions on women’s mobility in these areas. Just over half the women were single (55.8%). In contrast, the survey recorded higher numbers of men migrants overall, with the largest group between 25 and 35 years of age. Nearly 60% of men migrants were married (IOM 2001: 25).

The research confirmed the initial assumption that both Turkey and Russia serve as the main transit countries for irregular migration, offering Azerbaijan migrants a range of clandestine migration possibilities. Potential migrants do apply to smugglers for assistance in migration, both in Azerbaijan and transit countries, and nearly 50% of those who so believe the work of the smugglers to be legal. Living in difficult economic conditions, the migrants have to sell their apartments or borrow money to pay up to US\$3,000 to the intermediary in order to obtain valid travel documents, including a passport and Schengen visa (for travel to most European Union member states), allowing the migrant to enter the destination country legally. The report confirms that, given the limited legal opportunities, potential migrants depend entirely on smugglers in their efforts to move abroad (IOM 2001: 9).

The flow of women migrants at risk of being trafficked is noticeably increasing, as many of them apply to private agencies or individuals recruiting young women for unspecified work

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<sup>14</sup> A 2001 IOM survey of potential migrants in seven regions of the country found that 60% of all respondents cited the perceived attractive opportunities of finding some kind of employment abroad and of improving their living conditions as the major reasons for migrating abroad (IOM 2001).

abroad. Resorting to smugglers in an attempt to emigrate is particularly dangerous for women migrants, as they can become easy prey for traffickers. The vulnerability of female migrants to sexual abuse and exploitation and reproductive health risks, including HIV and other sexually transmitted diseases, should not be underestimated.

A 2004 USAID gender assessment noted that when the reasons for the large scale of men's migration in some rural areas are probed, responses included the need to be a breadwinner for the family, a lack of flexibility in adjusting to changing market conditions (or refusal to take a low-paying or less prestigious "woman's job"), and the need to make money in order to get married. The results of this migration are often negative on the family, both when the man is gone and the woman is left to manage everything alone (including heavy agricultural work), and when he returns—perhaps in ill health from difficult working conditions and/or STIs from unprotected sex (USAID 2004: 8). Further analysis of the reasons for and impact of male/female internal/external migration (including the size and role of remittances) would provide important information upon which appropriate programs could be developed.

## **B. Trafficking of Women and Children**

Trafficking of women and children (and to a lesser extent men and boys) is a growing and serious problem in Azerbaijan. Azerbaijan is known as a country of origin and transit for trafficked women and girls, who are primarily trafficked for purposes of sexual exploitation. The primary destination countries are Turkey and the UAE (Box 2). Women are usually trafficked through sophisticated and well-organized international crime networks that maintain powerful national and international connections enabling them to operate across both land and air borders. Azerbaijan's geographical location, particularly its close proximity to the source countries of eastern Europe (such as Moldova, Ukraine, Russia, and Armenia) and destination and transit countries such as Turkey, make it particularly strategic for these trafficking networks (Clean World Social Union for Civil Rights 2004: 27). Internal trafficking is also taking place, primarily from regional areas to Baku, mainly for the purposes of prostitution.

Interviews with victims of trafficking by the IOM suggest that most trafficked women are in the 19–35 year old age group, have a maximum of secondary school education, come from rural areas, and are unemployed. Poverty combined with limited hopes for the future are primary push factors: 82% of all respondents in a recent (2002) IOM survey of trafficked persons defined themselves as very poor and all of them stated they accepted offers in order to improve their own and their families' living conditions. The same report also noted that the need to secure income in situations where men can no longer provide financial support to their families makes women particularly vulnerable to traffickers, especially because they are unfamiliar with the risks involved. Other vulnerable groups include children from poor marginalized families, as well as street children; the IOM notes that almost every fifth missing person in Azerbaijan is a child under 18 years of age (IOM 2002: 36). Evidence also shows that smaller numbers of men and boys are being trafficked to Turkey for purposes of forced labor (IOM 2002: 20).

### Box 2. The Case of Lala

Lala was recruited in her native Ujar in 2001, when she was 17, by a woman who advised her that a big company in Baku was hiring girls to work in their office. Instead, Lala and two other girls were brought to Sumgayit and handed over to the woman's sister, Sveta, who prepared new documents and passports for all the girls. She was then taken to Baku in the company of several persons including a man who boarded the flight with her to the UAE as her "husband."

On arrival in Dubai, Lala's passport and visa were given to a Syrian national who kept her for 3 weeks and repeatedly raped her. She was then returned to Sveta and placed in an apartment with several other girls from Azerbaijan and was forced to service 8–9 men a day. Sveta arranged meetings with clients and an Azerbaijani taxi driver took the girls to their clients and then home again. When asked why she had not sought assistance, Lala said "Look, who am I to these people? Everything is under their control. Sveta and her relatives bring girls from rural areas to Sumgayit and arrange documents... to bring them here. The taxi driver is not an outsider but one of them. Even the money we try and send home is controlled by them. I've never called home: I want them to believe I am working in Baku"

*Source:* IOM 2002: 30.

Qualitative evidence suggests that most victims are trafficked by friends, relatives and acquaintances, although trafficking rings also work under the guise of private "travel" and employment recruiting agencies. Although fees range up to \$1,500, many victims pay nothing initially and agree to "repayments" to be taken from their salaries once they commence work. Once in their destination countries, women frequently suffer from extortion and indebtedness and receive only token payments; network bosses take most of their earnings. Passports and identity papers are frequently confiscated, making it difficult for women to escape or seek assistance from the authorities. Many are physically abused and suffer from STIs and other related health problems (Clean World Social Union for Civil Rights 2004, IOM 2001).

Trafficking is not specifically criminalized in the Azerbaijan criminal code and provisions for slavery, rape, coercion into prostitution, and inducing a minor into prostitution are used to prosecute trafficking crimes. The Government in 2004 reported 106 trafficking-related investigations, ten of which resulted in convictions, a decrease from 20 convictions in 2003 (US Department of State 2005).

Azerbaijan was rated as a "Tier 2 Watch List" country for a second consecutive year in 2005 by the US State Department because of its "inability to show evidence of increasing efforts to combat trafficking over the reporting period." The report noted that although the Government's efforts remained in preliminary stages of implementation, "government recognition and acknowledgement of the problem increased and progress was made in a few notable areas, particularly in the drafting of anti-trafficking legislation and amendments to the criminal code." (US Department of State 2005). In 1996, Azerbaijan joined the 1949 Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others, followed by active participation in drafting the Protocol in Palermo, after which Azerbaijan joined the

Trafficking Protocol in December 2000, which was ratified by the Milli Mejlis (Parliament) in May 2003.

These UN Conventions are the basis of Azerbaijan's National Action Plan Against Trafficking in Human Beings, which was adopted and endorsed by Presidential Decree on 6 May 2004. The purpose of the document is to suggest a complementary and coordinated range of actions, which will provide the Government with the appropriate tools to prevent the spread of human trafficking and to effectively prosecute criminals and protect its actual and potential victims.

Essential measures identified by the National Action Plan include improving the legal framework, assigning a National Coordinator, creating a special police department against human trafficking under the Ministry of Internal Affairs, and ensuring the protection of victims and supposed victims of human trafficking crimes. One of the goals of the National Action Plan is to bring the Republic of Azerbaijan legislation into line with the respective UN Conventions and supplementary Protocols and other international documents in the area of combating human trafficking, as well as making amendments to the Constitution with regard to recognition of human trafficking as a criminal act in accordance with the above documents.<sup>15</sup>

The National Action Plan also promotes the adoption of a law on combating human trafficking, in order to ensure identification of general principles in the fight against human trafficking, a framework for its arrangement, and the responsibilities of authorities fighting against human trafficking; implementation of preventive measures on human trafficking; physical, psychological, and social rehabilitation and repatriation of victims of such crimes; and accomplishment of other tasks set out in the National Action Plan. In particular, the Plan foresees the establishment of a secure accommodation to protect victims, suspected victims, and witnesses and a help line to provide a free-of-charge and permanent (7 days a week, 24 hours a day) communication service for victims and potential victims of human trafficking crimes (IOM 2002: 35–46).

The NPA on Women's Issues includes measures to address trafficking and specifically identifies the ratification of international conventions related to the human trade and trafficking and strengthening of national legislation as key objectives. In addition, it notes the need to develop appropriate measures to address the causal factors of trafficking.

The IOM and some local NGOs<sup>16</sup> have been at the forefront of trying to determine patterns of trafficking, identify the most vulnerable groups, and highlight gaps in policy and legislative and operational frameworks. In particular, they have undertaken survey work on victims, which has

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<sup>15</sup> The present Criminal Code identifies a number of articles as acts that constitute trafficking and sexual exploitation, but does not yet envisage separate articles directly covering the issue of trafficking. The National Action Plan foresees the inclusion of articles in the Criminal Code considering attraction of persons into prostitution with the purpose of trafficking as aggravated crime (IOM 2002: 35–46).

<sup>16</sup> For example, the "Clean World" Social Union for Civil Rights conducted a survey of trafficking victims in 2004, with financial support from the John Hopkins Institute (Clean World Social Union for Civil Rights, 2004).

helped to identify how victims are trafficked and highlights the well-connected nature of trafficking networks, including significant levels of corruption among border and law enforcement officers in countries of origin and destination. This also shows the immediate need for the provision of training for these officers and more stringent supervision of visa and border controls, as well the need for legal reform that would make trafficking a crime in the penal code. In addition, measures are needed to protect victims or to refer them to NGOs and improve the dissemination of information on trafficking in urban centers and rural areas.

### **C. (Re)Emergent Traditions and Practices**

The concern is growing that traditional beliefs and practices may be (re)emerging in Azerbaijan and that these may undermine efforts to achieve greater equality and increase women's opportunities and levels of empowerment. The debate is considerable, however, as to whether such beliefs are newly emergent and driven by external factors, including the growing influence of Islam within the country, or whether in fact many of these beliefs are customary in origin and were merely suppressed rather than eradicated during Soviet rule. In fact, not only may both explanations be plausible, but it is possible that in combination they may prove to be a considerable impediment to the implementation of gender equality policies and programs (Box 3).

A 2004 Social Assessment for a World Bank Rural Investment Project found that in most rural areas, middle-aged and elderly men typically make decisions and participate in meetings where important matters are decided. Women's role in decision making was very limited, although certain groups of women, most usually those with a higher education such as teachers and doctors, did seek to actively take a larger role in these processes. For the most part however, the assessment found that women were not consulted and did not participate in community meetings or decision making. Notwithstanding these practices, a very high percentage of villagers, 67% of women and 63% of men, did not think that the viewpoints of women were fully represented in the decision-making processes (World Bank 2004a: 60).

Although the 2001 RHS did not explore the origins of gender beliefs and attitudes, its findings regarding women's own perceptions of their role and position are also cause for concern. Among respondents, more than nine out of 10 agreed that a women needs her husband's permission to get a job and that men should have the final say in all family matters. Significantly, however, the number of women agreeing with these statements declined as education levels and socioeconomic status increased (USAID/CDC/UNFPA et al. 2003: 204). More than two thirds of women (70%) thought that child care was a women's job, although agreement declined to 51.2% for women with a university/postgraduate education; 83.6% of university-educated women agreed with the first statement compared with 97.1% of women with secondary education or less (USAID/CDC/UNFPA et al. 2003: 204).

A key difficulty with such surveys is the omission of men's attitudes and beliefs and the ways in which these influence both family and community values and beliefs. Nor is the basis for such beliefs fully explored, making attribution difficult. In response to these questions, UNDP and the Government of Norway provided support for a 1-year project that will analyze women's and

men's gender attitudes and values across the country through a national-level survey. The project, which is being implemented in partnership with the SCWI, is the first of its kind in the CIS region; the results will provide the basis for the 2004 UNDP *Human Development Report* for Azerbaijan. The survey is both timely and critical and will explore both rural/urban and regional attitudes and values and the way in which they impact upon women's daily lives, in in the "public" and the "private" sphere.

**Box 3. May You Have Seven Sons and Only One Daughter**

Traditional Azerbaijani weddings include many small ceremonies and rituals, of which the ritual of asking for seven sons and one daughter is just one. Most often, on the day of wedding the groom and his family come to the bride's house, where a small ceremony takes place in which the groom's younger brother ties a red band around the future bride's waist and recites the following poem:

Anam, bajim, giz gelin	My mother, my sister, my sister-in-law
Eli, ayagi duz gelin,	A bride without any flaws
Yeddi ogul isterem,	I wish you to have seven sons
Birje dene giz gelin.	And only one daughter-bride.

*Source:* Traditional Azeri Verse (Bavati).

**D. Gender, the Environment, and Natural Resources**

Azerbaijan completed a National Environmental Action Plan (NEAP) in 1998 and a Biodiversity Strategy and Action Plan in 2000. In 2001, Azerbaijan established a Ministry of Environment. It has also ratified most of the key international conventions on environmental matters, including the United Nations Framework Convention on Climate Change (1995), the Convention on Biodiversity (2000), and the Convention on Combating Deforestation (1998).

Such policy frameworks and action plans are crucial for Azerbaijan, which is one of the most environmentally damaged countries in the fSU and facing some serious environmental challenges. For 70 years, it was one of the principal oil-producing regions of the fSU and a center for industry, including large chemical, petrochemical and metallurgical complexes. Significant levels of environmental damage resulted, including widespread pollution of the Caspian Sea and surrounding areas. The continued lack of availability of reliable energy supplies, soil erosion and salinity, and inadequate safe water supplies in rural (and some urban) areas are also key environmental issues which, if left unaddressed, could seriously undermine current efforts to promote sustainable development and reduce poverty.

The Caspian Sea is also one of the world's richest sources of sturgeon, one of most valuable fish in the world. At the retail level, caviar is potentially a \$1 billion-a-year industry. Caspian caviar constitutes 90% of world production and has historically been a major earner of foreign exchange for Azerbaijan. During the past 2 decades, however, the annual reported sturgeon catch has dropped precipitously, from 25,000 tons during the 1980s to an estimated 1,000 tons in 1997, or a 96% drop. This drop in stocks was the result of inadequate resource management,

unsustainable legal and illegal sturgeon fishing, and a decline in the output of sturgeon hatcheries in the countries bordering the Caspian. While gender assessments of women's role in the fisheries sector in Azerbaijan have not been routinely undertaken, it is clear that women have been affected by both the direct loss of employment (in factories and associated industries) and the loss of family income as a result of their husbands' unemployment. Chlorine plants have produced serious mercury contamination in the area around the city of Sumgait; efforts (with World Bank assistance) are now being made to address these. A World Bank assessment team found that mercury contamination has already occurred in the Caspian and a separate World Bank study in 1998 in the Sumgait area found infant mortality rates six times higher than those of the surrounding areas (World Bank 2004a: 60).

The inconsistent supply of gas and electricity has forced many households to switch to less convenient and more polluting sources of energy. According to the 2003/2004 SPPRED Monitoring Report, 92.4% of rural households still do not have adequate access to gas supplies. For heating, households near forest areas have typically turned to fuelwood. Before independence, Azerbaijan could rely on cheap wood imports from Russia, but today fuel wood comes largely from local forests, resulting in alarming rates of deforestation. Based on a preliminary estimate, demand for fuelwood exceeds sustainable annual fuel wood yields in certain areas by up to ten times (World Bank 2001: 3). In Azerbaijan, as in many other parts of the world, the responsibility for collecting wood for cooking and heating most often rests with women; therefore, women bear the brunt of increased workloads caused by diminishing wood supplies as a result of deforestation. In particular, in addition to increasing the time and energy spent gathering firewood, deforestation often results in women carrying heavy weights for long distances, with consequences for their health. The need to conserve firewood then affects the family diet, decreasing variety and nutritional content, with a further deleterious effect on health. Detailed assessments of women's role in fuelwood collection, including time/labor inputs, or women's role in the forestry sector more generally are not available in Azerbaijan and are critical if effective forestry policies and programs are to be developed and implemented.

Although the Government of Azerbaijan has put in place a Forestry Action Plan which envisages large-scale reforestation of the worst affected areas, the Plan does not specifically address key gender issues, such as defining men's and women's productive and reproductive roles with regard to forest resource management, including in planting, protecting or caring for seedlings and small trees, as well as in planting and maintaining homestead woodlots and plantations on public lands. Nor are issues relating to women's and men's formal and informal rights to land (ownership/access and use) addressed. Addressing these gender dimensions would have major implications for ownership rights to forest land and its byproducts, decision-making processes in the selection of species for new plantings, and forest management.

The provision of safe, reliable and sustainable water supply and sanitation services in Azerbaijan is still inadequate, particularly in secondary towns and rural areas, and this has serious implications for public health. Although detailed studies of water quality have been limited, high levels of contamination have been found in water sources and discharge of sewage water into surface water is a major problem (Republic of Azerbaijan 2004: 37–38). An ADB survey of water

quality in the three secondary towns of Agdash, Gochay, and Nakhchican found that water quality was worsened by contamination from polluted shallow groundwater and leaky distribution pipes and noted that the impact of water-borne diseases on morbidity and mortality rates was high in these areas (ADB 2004b: 55). Poor sanitation facilities, particularly in rural areas, compound these health risks.

The specific sources and quality of water in Azerbaijan vary considerably by region, urban-rural residence, and household wealth. According to the 2002 HBS, although 62.0% of the total population have access to improved water sources, including piped water, public tap, borewell/tubewell, protected well, or protected spring or rainwater, a large proportion of those are in urban (85.3%) rather than rural (30.9%) areas (Republic of Azerbaijan 2004: 38). Supply in Baku is also intermittent. Water is available on average of 22 days per month for 4 hours per day. These water shortages tend to affect lower income households more adversely, as they spend a higher proportion of income on coping strategies (World Bank 2001).

The UNICEF MICS 2000 also found considerable variation in access to safe drinking water between different regions and by income group. The lowest access was recorded in the South (65.1%) and Nakhchivan regions (68.4%); relatively higher access rates were found in the West/Southwest (73.9%) and Baku (94.4%). According to the survey, only 51.9% of the poor had access to safe water, compared with 78.2% of those in middle-income groups (UNICEF/SSC 2000: 20). The survey also found significant differences by region and income group for access to sanitary facilities: 55.4% of urban residents had access to improved sanitary facilities (flush toilets/pour flush latrines and improved pit latrines), but only 1.4% of rural residents have similar access; most rural residents still use traditional pit latrines (69%) or open pits (29.3%) (UNICEF/SSC 2000: 20).

The shortage of safe water impacts particularly on the poor and poor women. The ADB survey noted above found that costs for water supply and sanitation make up a considerably higher proportion of total expenditures for the poor than for the rich and that people that do not have access to a central water supply have to purchase water at a higher price from merchants or go to public water sources. Women bear the brunt of the additional workloads involved, including queuing for water, water storage, and treatment (i.e., boiling) (ADB 2004b: 55).

The Government has recognized that improvements to the WSS sector are critical and has begun institutional reforms in the water supply and sanitation sector, including the creation of an independent joint stock company for Greater Baku and decentralization of responsibility for municipal water and wastewater services to local governments. In June 2004, a Presidential Decree (no. 252) was issued “On Improvement of the Water Supply Management in the Azerbaijan Republic,” which sets out a strategy for improved supply of quality water. Achieving Target No. 10 of the MDGs, “Halving by 2015, the proportion of people without sustainable access to safe drinking water,” is feasible in Azerbaijan, providing the Government gives sufficient priority to the provision of safe water in secondary towns and rural areas in its public investment program.

**E. Recommendations**

**1. Migration and Trafficking**

- Encourage safe migration through information campaigns underlining the risks of accepting promises of work in other locations and ways of mitigating those risks (e.g., registration at destination, traveling with other men and women, emergency contact details, etc.). Such information (posters, leaflets, etc.) should be located at high traffic points, such as bus depots and marketplaces and should address health as well as physical safety issues.
- Use antitrafficking resources more effectively, through greater collaboration between the Government (national and local), NGOs, and international organizations on migration and trafficking issues, including regular sharing of information and data and joint preventive, emergency support (including shelter), and counseling activities.
- Strengthen awareness of gender issues among government officials at border locations and their capacity to respond effectively (i.e., through appropriate referrals and provision of protection as appropriate).
- Include safe migration/antitrafficking activities in road construction projects, using local NGOs and community organizations as appropriate.
- Ensure full implementation of the National Action Plan to Combat Trafficking and enforcement of antitrafficking legislation, including increasing the number and scope of trafficking investigations and formalizing a victim referral and protection system.
- Provide appropriate financial and human resources (including female staff) and training to the anti-trafficking police unit, including training on gender issues.

**2. (Re)Emergent Traditions and Practices**

- Work with local governments, women's NGOs, and community organizations to encourage women's greater participation in decision making at the community level. This may require the provision of NGO capacity-building programs, particularly in rural areas.
- Support information campaigns that underline women's equal rights (e.g., to education, health, land and assets, political participation, etc.). Such campaigns are often most effective when supported by persons of influence in the community and/or government.
- Support surveys and assessments that seek to identify the ways in which traditional attitudes and beliefs influence and impact upon gender roles in and outside the home.
- Widen women's choices by improving their access to employment retraining schemes, financial services, and business management programs, supported by accessible and affordable child-care programs and services.

- Eliminate traditional gender stereotypes in educational materials at preprimary, primary, secondary, and tertiary levels and within the workplace.
- Support gender equality awareness-raising programs within the community, including within local government structures, employer organizations and Chambers of Commerce, religious groups, youth groups, and among elected representative bodies, religious leaders and other influential members of the community.

### **3. Environment and Natural Resources**

- Ensure that environment policies and action plans recognize women's and men's respective roles with regard to the different dimensions of environmental conservation and management and that gender issues are effectively mainstreamed into and addressed by such policies and plans.
- Ensure that emergency planning procedures to cope with natural disasters (e.g., for floods) take into account and respond to women's specific needs (e.g., for shelter, sanitation).
- Ensure that environmental projects include the full participation of women, promote and build upon their knowledge and expertise, and decrease their workloads and health risks. This may require gender training for government/project staff involved.
- Improve the scope and quality of information on women's and men's roles in conserving the environment and preserving biodiversity in Azerbaijan, focusing in particular on sectors such as fisheries, agriculture, and forestry.
- Undertake studies of the gender impacts of environmental damage in Azerbaijan, particularly but not limited to the extensive water and soil pollution in the Abseron Peninsula. In addition to assessing income impacts, the studies should evaluate health and reproductive impacts such as MMRs, child mortality/morbidity rates, and the numbers of difficult births and birth defects.

## ***Chapter 8* Gender, Poverty, and the IDP/Refugee Population**

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Eleven years after the signing of a ceasefire, the conflict between Azerbaijan and Armenia over Nagorno-Karabakh remains unresolved and prospects are still bleak for the return of some 575,000 Azeris who were displaced in the early 1990s from the disputed region and surrounding districts occupied by Armenian forces. The Azerbaijani Government has worked with the international community, including ADB, for a number of years to respond to the needs of the IDP/R and in July 2004 the Government put into place a new program to improve living conditions and encourage greater self-reliance within the IDP/R community. However, national and international efforts have not been sufficient to meet its significant needs, and international interest and financial assistance have been waning. Many of the IDP/R continue to live in precarious circumstances; many are still unable to meet even their most basic needs and are heavily dependent on development assistance.

IDP/Rs are especially vulnerable to the many dimensions of both income and nonincome poverty. High rates of unemployment; few assets, including limited access to agricultural land; a heavy dependence upon government transfers and exemptions; poor standards of housing; limited access to sanitation and direct water supplies; worrying rates of infant neonatal mortality; poor nutritional levels, especially among women and children; and declining enrollments in secondary education all combine to identify IDP/Rs as a particularly vulnerable group requiring targeted interventions. A recent assessment by the World Bank/UNDP (HBS on IDPs, 2001) indicates that although IDP/Rs as a group do not have significantly lower incomes than other groups, they are very vulnerable to other dimensions of poverty.

A key difficulty with poverty assessments of the IDP/R population is that they have usually been done in isolation from broader poverty assessments and/or have only focused on a small segment of the IDP/R population (i.e., the 2001 HBS, which only included 8% of the IDP/R population). Moreover, even more recent assessments such as the 2002 World Bank/UNDP assessment, which was the first major attempt to compare the IDP/R population with the resident population, lack a strong gender analysis of poverty and have collected only limited sex-disaggregated data. Although one of the six main strategic goals of the SPPRED program is to “improve the living conditions and opportunities of the refugee and IDP population,” the Government has acknowledged that the data sources from which to monitor implementation of this overall aim are limited (Republic of Azerbaijan 2004: 43). In particular, although the State Committee for Refugees and IDPs (SCRIDP) collects administrative data on the numbers and living places of this segment of the population, and also on the type of accommodation in which the IDP households live, little sex-disaggregated data is available that could help to better determine income and nonincome poverty differentials by gender. Identifying clear indicators to monitor poverty levels by gender and establishing systems to regularly collect data against which progress on those indicators can be effectively measured should therefore be a key priority in SPPREAD.

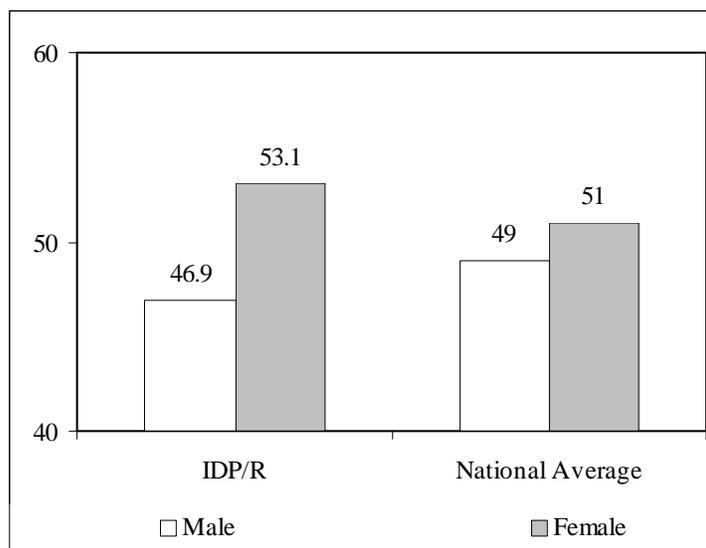
## A. Employment

Unemployment is a major problem for both men and women IDP/Rs. According to a 2002 World Bank/UNDP Survey, 47% of IDP's are unemployed, and unemployment levels are higher in areas outside Baku. Male IDP/Rs outside Baku were 2.6 times more likely to be unemployed as surrounding residents, and women three times more likely to be unemployed (World Bank 2003: 29). Only 16.9% of IDP/R households received income from wages and salaries; almost one third (29.3%) of income was sourced from the range of benefits currently provided.

Many IDP/Rs, including many women, are known to be working in the informal sector, although no surveys have been undertaken to establish who is undertaking such work (by gender and by age, for example), what kind of work is being undertaken, and the contribution this work makes to family income and well-being. Furthermore, while it is understood that many IDP/R men and some women are engaged in labor migration, both within the country and externally, no detailed assessments of the gender dimensions of this trend and its impacts upon families and communities who have been left behind has been done. Anecdotal evidence gathered during the CGA study suggests that a considerable number of temporary FHHs exist within IDP/R communities as a consequence of men's labor migration. Such households are under particular stress; because remittances from absent husbands or other male income earners are often limited, women are left with the complete responsibility for the care of dependent children and other family members, including elderly parents or relatives. Home gardens, small trading, and home-based work such as sewing are some ways in which women have sought to cope, but the scope for further supporting and increasing women's income-earning potential is clearly considerable. Increasing women's access to credit, while important, needs to be supported by more holistic programming that not only provides skills-based and financial management training but also provides market access for goods and produce.

Demographic analysis (Figure 10) reveals a significant difference between the number of men and women IDP/Rs. The current gender imbalance considerably exceeds the national average indicator of 51.0% women and 49.0% men. Women prevail among the working-age and fertile-age groups; for more

**Figure 10: Gender Structure of IDP/Refugee Population, 2001 (%)**



Source: UNDP 2002.

than 100,000 of these women, no corresponding male peers exist (UNDP 2002). Although no analysis of this trend has been undertaken to date, development organizations working in the IDP/R communities have attributed this to the growing numbers of internal/external men migrants who leave their primary place of residence in search of employment.

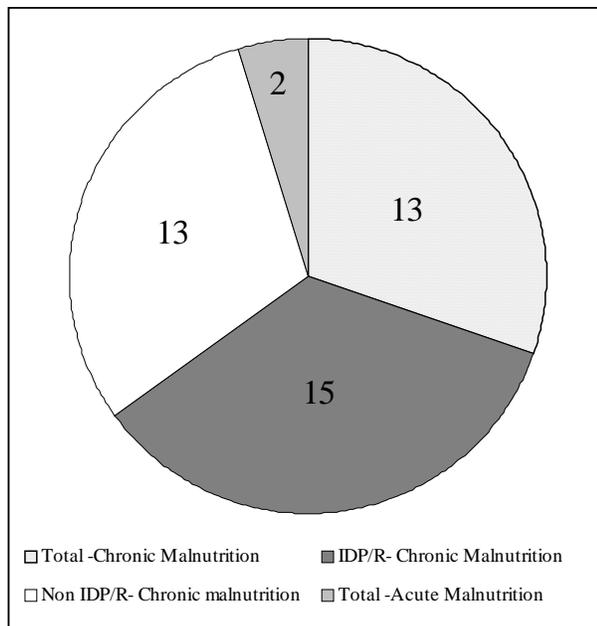
**B. Health Care**

The very poor health status of refugee women and children is one of the most pressing gender issues within the IDP/R community and one that requires urgent and continued attention. The results from the 2001 Azerbaijan RHS highlight very high (39.0%) anemia levels among IDP/R women; 43% of surveyed IDP/R women in the 35–39-year-old age group are anemic. The survey also showed very high anemia rates among IDP/R children, mirroring trends in the non-IDP/R population (Figure 11) (USAID/CDC/UNFPA et al. 2003: 118). The UNICEF MICS 2000 showed that only 42.6% of IDP/R households were consuming iodized salt and, although the consumption levels were similar to those of non-IDP/R households, this still remains well below desirable levels (UNICEF/SSC 2000: 24.). Regular sex-disaggregated data, which track nutrition level by location (rural-urban/by region), age, or socioeconomic status, are not available, limiting the extent to which interventions can be effectively targeted at groups most in need.

Infant mortality rates among IDP/R communities are also significantly higher than among non-IDP/R communities, with 105.9 deaths per 1,000 live births for IDP/Rs compared with 71.5 for non-IDP/Rs. Twice as many deaths are occurring in the neonatal period (62.8 compared with 32.1) suggesting inadequacies in the quality and possibly accessibility of care in the immediate postnatal period (USAID/CDC/UNFPA et al. 2003: 101). This may or may not be connected to the significant numbers of IDP/R women who are still giving birth at home and the gap between birth and the first post-partum medical visit. In the 2001 RHS, 40% of IDP/R women reported giving birth at home and 18.7% said that more than 2 months had elapsed between delivering a live birth and her first post-partum visit (USAID/CDC/UNFPA et al. 2003: 87).

Poor housing conditions represent another crucial issue for Azerbaijan’s IDP/Rs. Many IDP/Rs continue to live in substandard or temporary shelters, including camps,

**Figure 11: Prevalence of Chronic and Acute Malnutrition Among IDP/R and non-IDP/R Children Aged 3–59 Months**



Source: USAID/CDC/UNFPA et al. 2003: 111.

trains, half-constructed buildings, makeshift houses, and on roadsides. Tens of thousands of IDP/Rs continue to live in the remaining seven tent camps in the country. Others have found accommodation with friends or relatives, or live in occupied public buildings, such as schools and tourist and health facilities. The living conditions typical of the shelters where IDP/Rs live are particularly harsh. In addition to insufficient protection from rain and extreme temperatures in winter and summer, overcrowding, insufficient sanitation facilities, and a sporadic water supply are frequent. Visits made to occupied buildings during the CGA study found most IDP/R families living in crowded conditions in single rooms, with chronic damp in the ceilings and floors and a lack of sanitary conditions, including no direct access to water. In one building block occupied by IDP/R families in Mingachevir, one unsanitary pit toilet served more than 15 families (an estimated 70 people) and seeped extensively into nearby rooms. This confirms surveys by international organizations that have found that two thirds of all IDP/R households in rural areas are living in one-room accommodations, and only 18% have direct access to water (Republic of Azerbaijan 2004: 430). Babies, young children, pregnant and new mothers, and the old and infirm are particularly vulnerable to the health risks posed by such unsanitary living conditions.

### **C. Education**

Although gender differences in education and literacy levels within the IDP/R population or between the IDP/R community as a whole and the general population, do not appear to be significant, it is widely acknowledged that school attendance by IDP/R children is poor, largely due to difficulties with both access and the affordability of school materials (Republic of Azerbaijan 2004, UNDP 2002, Norwegian Refugee Council 2004). The UNDP 2002 Human Development Report for Azerbaijan noted that only 5.2% of IDP/R families felt that they were completely able to afford school supplies. A survey by the NGO SIGMA in 2001 found that only 62.4% of school-age children in the survey area attended school and that 21.8% of them did not attend school at all (UNDP 2002). Moreover, in 2002 the SCRIPD reported that the number of teenagers over 16 with incomplete secondary education (37.8%) is twice as high as the national level.

A 2003 assessment by Oxfam and the NGO ARAN of schools situated within the central regions (Agdam, Tartar, Goranboy, Mingachevir, Barda, Yevlakh) found that approximately 37% had been occupied by the IDPs and that conditions for teaching were satisfactory in only two schools out of 21 surveyed. Most problems were related to the close proximity of IDP/R living quarters and school classrooms and included permanent conflicts between the IDP/Rs and parents of pupils and school staff, with some violent incidents; lessons being disrupted by the day-to-day household tasks of resident IDP/Rs, such as cooking and washing in corridors; cancellation of lessons due to lack of available classrooms; reduced lesson duration from 45 minutes to 35 minutes; classes being held in unsuitable rooms because the better rooms were occupied by the IDP/Rs; and female students being harassed by young men living in the buildings, with the result that school attendance by girl pupils in higher grades had decreased (Oxfam 2003: 12–13).

Up-to-date assessments of school attendance rates by gender for all age groups need to be made. In addition to access and affordability issues, also seek to identify any gender-based

constraints that may exist, including, for example, economic pressures to work, either in the home or in the formal/informal sector, or early marriage.

#### **D. Gender-Based Violence**

Gender-based violence is reported as widespread within the IDP/R community, although figures are difficult to obtain. A 2004 study by the IRC, which included focus groups from IRC's beneficiary population (segments of the IDP/R population) found that 43% of married women reported intimate partner violence in their current relationship, including emotional abuse, physical violence, and rape (IRC 2004: 27). Despite these trends, programs to prevent and respond to violence against women in IDP/R communities in Azerbaijan are sorely lacking.

Sexual behavior and practices are not openly discussed in Azerbaijan and prostitution remains largely "hidden," although both national and international NGOs working within IDP/R communities report that it is entrenched within many of their communities. A recent report (2005) noted that the number of prostitutes operating in roadside teahouses and hotels was increasing, possibly due to the increase in FHHs. The report also noted interviews with camp-based health-care providers, who reiterated concern about prostitution, and assumed that some of those she examined for STIs were engaged in the sex trade (Ward 2005: 74).

#### **E. Recommendations**

- Strengthen primary health care programs for the IDP/R community that provide pregnant women, new mothers, and their families with access to quality pre- and postnatal care, as well as basic information and services supporting breastfeeding, nutrition, birth spacing (contraception), immunizations, and basic newborn care. This should include the promotion of improved health behaviors among communities and households, both preventive and curative, to address the major causes of childhood illness and death and poor adult nutrition (e.g., IDD, anemia).
- Undertake assessments of childhood immunization coverage for girls and boys in all regions and among all income groups (including IDP/Rs), identifying key constraints and issues.
- Build communication strategies on HIV/AIDS and STIs into projects and ensure that accessible and affordable referral and treatment services are available that are sensitive to women's special needs (i.e., for female doctors/nursing staff, etc.).
- Continue to support programs that improve and expand housing and sanitation facilities for IDP/R communities, taking into account women's specific needs (i.e., for separate and safe washing/sanitary facilities), especially for FHHs (e.g., secure housing).
- Undertake regular assessments of school attendance rates and learning achievements by gender for all age groups, identifying any gender-based constraints that may exist (e.g., economic pressures to work or marry early) and develop appropriate interventions at school and community levels to address those constraints.

- Support awareness campaigns (i.e., through schools, CBOs, NGOs) on gender-based violence (include trafficking) and establish adequate and effective levels of support for victims of violence, including crisis centers, safe houses, and counseling and referral services.
- Expand women's access to appropriate skills training and business management programs and credit facilities that will enable them to engage in income-generating activities.
- Develop institutional capacity (e.g., through regular training) within the SCRIDP for collection, analysis and reporting of gender-disaggregated data at all levels of central and municipal government responsible for the management of the education sector.

## ***Chapter 9*    Mainstreaming Gender into ADB Operations**

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### **A.     Gender in the Country Strategy and Program**

ADB's public sector lending operations in Azerbaijan commenced only in late 2003. Four strategic areas of focus frame the current Country Strategy and Program Update (CSPU 2005–2006), including (i) assistance for IDPs, (ii) agriculture and rural development (flood mitigation and micro- and rural finance development), (iii) social infrastructure (water supply and sanitation), and (iv) transport. These sectors will continue to be the focus of ADB operations for 2004–2005, after which a new CSP will be formulated to cover 2006–2010 (ADB 2004a). In addition, ADB's policy dialogue has focused on assisting the implementation of the SPPRED 2003–2005 through the provision of advice to SWGs on refugees and IDPs, rural development, and fiscal policy.

The early stage of ADB's lending operations in Azerbaijan provided considerable opportunities to effectively mainstream gender at both the strategic and operational level of the country program. Many of the gender issues and concerns identified in this assessment are directly relevant to ADB's sector work in the strategic areas of focus within the CSPU; these need to be mainstreamed into operational planning as well as policy dialogue at every opportunity. It is also critical that these gender issues be effectively mainstreamed in the SPPREAD and support provided to enable this if necessary. The following section provides some strategic recommendations for gender mainstreaming to be considered in the formulation of the 2006 Country Strategy and the subsequent Country Gender Strategy.

### **B.     General Recommendations for Gender Mainstreaming in the Country Strategy and Program**

- Ensure that social and gender analysis (including sex-disaggregated baseline data) informs project design, identifying constraints to women's and men's full and equal participation and making recommendations to overcome those constraints as appropriate.
- Develop project gender action plans and/or gender strategies that contain clear objectives and targets linked to the project framework, are tracked through an effective monitoring and reporting system, and are adequately resourced (financial and human).
- Ensure that such action plans/strategies include gender capacity-building support (including, for example, training in gender analysis, collection of sex-disaggregated data) for Executing Agencies and other project staff, so that they have the understanding and tools to effectively achieve the project's gender-related objectives and targets.
- Ensure that participation strategies include women and men as managers and users, and that monitoring and evaluation is participatory and gender-inclusive.

- Support gender equity in the appointment of project management staff in Executing/ Implementing Agencies and Units and ensure wage parity for all men and women project staff in the field and at project management level.
- Monitor current and emerging gender gaps regularly in all dimensions of poverty (e.g., income/nonincome) and identify and support appropriate strategies and interventions to remedy those gaps.
- Institutionalize sex-disaggregated data in Project Implementation and Management Units and regularly collect and report project data disaggregated by sex to track indicators for women and men and girls and boys and identify and remedy gender gaps as appropriate.
- Identify, support and, work in projects with women's NGOs/CBOs. As this CGA has noted, further strengthening of women's NGOs/CBOs, particularly in rural areas where most poor women live, is central to enhancing women's leadership and participation in governance structures, and ADB projects could actively contribute to this by encouraging their participation and building their institutional capacity through project activities.
- Identify ways in which ADB operations can support government efforts to promote gender equality.
- Identify specific areas in which support could be provided for strengthening and capacity building of the SCWI, including the Gender Focal Point network.

### **C. Sector Recommendations for Gender Mainstreaming in the Country Strategy and Program**

The following recommendations draw from the analysis of gender issues in the previous chapters and specifically focus on the sector priorities identified within the current CSP. They may be applied, as appropriate, to both ongoing and pipeline projects.

#### **1. Assistance for Internally Displaced Persons**

Assisting the IDP population, which remains one of the poorest and most disadvantaged groups in the country, has been identified as a key strategic area of focus. As noted in this CGA, significant gender issues persist within the IDP/R population, including high levels of unemployment, the poor health status of refugee women and children, and indications that the dropout rates for girls at the secondary school level are increasing due to unsuitable schooling conditions and pressures to work or marry. Trafficking and prostitution of IDP/R women and girls is also widely acknowledged and gender-based violence within the IDP/R community is reported as widespread.

A project to provide basic social infrastructure is programmed for 2005–2006 and may include one or more of the following activities: (i) continued support for the improvement of IDPs' housing conditions and the construction of new settlements, (ii) improvement of education opportunities for IDP children and young adults, and (iii) support for immediate livelihood and income-generating opportunities.

Possible strengthened project interventions could include the following:

- Undertake detailed gender assessments of the project populations, including the collection of (baseline) sex-disaggregated health, education (enrollments/attendance and outcomes), housing, employment (including informal sector employment), and income data that would be reviewed at regular intervals to better track gender issues as well as the impact of project interventions on men and women.
- Ensure that project components related to the provision of credit and establishment and financing of SMEs provide full and equal access to women as well as men and target both equally for participation in related training and skills development programs.
- Improve awareness among IDP/R women *and* men of STIs/HIV/AIDs and other reproductive health issues, and raise awareness of trafficking (modalities) and VAW.
- Develop baselines and undertake regular monitoring within project areas and among (women/men and children) beneficiaries of nutrition levels, with a particular focus on tracking wasting, anemia, and IDD rates and developing appropriate interventions. This should further enable tracking of the impact of project interventions on nonincome poverty levels and is critical if other project interventions are to be effective, as poor nutrition significantly undermines educational achievement and productive capacity.

## **2. Agriculture and Rural Development**

ADB's key areas of focus within the agriculture and rural development sector are flood mitigation and micro- and rural finance development.

### **a. Flood Mitigation**

ADB's involvement in flood mitigation is an immediate response to assist the Government to address serious, recurring floods. These usually occur in spring and early summer (major floods occurred in 1988, 1997, 1999, and 2002) and have caused widespread loss of life and property. Average annual damage from floods over the 1980–1990 period is estimated at \$20 million. In addition to causing widespread infrastructure damage, flood damage to agricultural land and loss of livestock reduces the income-earning opportunities of the rural poor and often causes the nonpoor to fall into poverty. Without protection from floodwaters, the whole rural asset base in certain areas is at risk.

Effective gender mainstreaming in flood mitigation and rehabilitation projects requires recognizing and responding to women's multiple roles and responsibilities in the agricultural sector. In addition to food preparation, child care, and other household management activities, women in Azerbaijan engage in a wide number of agricultural activities, including sowing, weeding, hoeing, harvesting, and storing crop produce; women also dominate in other key family

livelihood activities, such as backyard livestock raising, dairy production, and nursery and orchard operations. All of these activities are seriously affected by floods. The shortage of safe water and poor sanitation conditions during and following floods also directly affects women, who are primarily responsible for water management at the household level.

Possible strengthened project interventions could include the following:

- Build the institutional capacity of key line ministries (e.g., State Amelioration and Irrigation Committee, Ministry of Ecology and Natural Resources, Forestry Development Department) to address gender issues in their daily work, for example, through the provision of project-related social and gender experts and gender-analysis training.
- Ensure that women participate fully in the management of water, forestry, and other resources foreseen under projects.
- Ensure that women have equal access to job opportunities created through flood rehabilitation work and that special measures to encourage their participation are taken as necessary.
- Utilize projects, as appropriate, to improve the understanding of women's and men's relationship to the environment and their respective roles in environmental management, including the management of water and forestry resources, and utilize such information to develop appropriate community-based mitigation and rehabilitation programs.
- Ensure that public information campaigns to raise public awareness on appropriate land use (i.e., to prevent and mitigate against floods) effectively target and mobilize women.

#### **b. Micro and Rural Finance Development**

To address the problem of underdeveloped financial services, which have impeded rural development, ADB is providing support to increase bank and microfinance activities in rural areas and communities outside Baku. This assistance follows from the recent decree for the development of regions outside Baku, is listed as a specific measure for poverty alleviation in the SPRRED, and has been accorded particularly high priority by the Government.

As this CGA has noted, although a considerable number of women have successfully accessed microcredit through the formal sector, the scope for expanding such access in rural areas and supporting women in establishing SMEs is considerable. In addition to developing appropriate strategies to remove the “cultural” and “social” barriers to women's starting up SMEs, it is necessary to open up women's access to networks (trade and business associations) information, training, consultancy and advisory services, and markets. Improving the climate for women's entrepreneurship must also focus on the banking and small business sector itself, and on creating an enabling environment that encourages and supports women's participation.

Possible strengthened project interventions could include the following:

- Undertake detailed reviews of women's demand for, access to, and constraints on accessing credit, to enable the development of project strategies that support and expand women's access to credit and the development of SMEs.
- Involve women as well as men in the design of financial service packages.
- Build in activities that seek to increase gender sensitivity in business development services and banking and improve consultation services for women.
- Include measures to improve the gender sensitivity of employers' organizations and assist them to develop stronger links with associations of women entrepreneurs.
- Ensure that projects that propose amendments to existing laws and regulations governing credit unions are expertly reviewed for their gender implications and impacts (if any) and make and implement appropriate recommendations.
- Ensure that micro- and rural finance development projects seek to sensitize project partners and stakeholders, including MFIs, banks, and relevant government agencies, to the specific constraints faced by women in accessing credit; provide capacity-building assistance as required to ensure that these constraints are effectively addressed.
- Encourage MFIs to recruit women field workers, trainers, and advisory and support staff.
- Include activities that strengthen women's entrepreneurial skills, including training, retraining, special education programs, and comprehensive advisory and support services.
- Consider providing technical and financial support to organizations assisting and training women entrepreneurs in creating SMEs.

### **3. Social Infrastructure**

ADB's key areas of focus within the social infrastructure sector are water supply and sanitation and early childhood development.

#### **a. Water Supply and Sanitation**

ADB's involvement in the water supply and sanitation sector aims to expand and upgrade infrastructure, support institutional reform for decentralized service delivery, and establish new water utilities with adequate operational and managerial capacity. To this end, ADB has provided an investment project to rehabilitate water supply and sanitation services in the secondary towns of Goychay, Agdash, and Nakhchivan that will improve the living and health conditions of people in the three towns through better access to a safer water supply and sanitation services. An associated advisory technical assistance will strengthen the capacity of the Government in the efficient regulation of water supply and sanitation services and promote integrated water resources management.

The shortage of safe water and sanitation impacts particularly upon the poor and specifically upon women. In particular, it is women who are usually responsible for purchasing water, collecting it, and transporting it, and who care for household members who fall ill as a result of unhygienic water and sanitation facilities. As both managers and users of water, women are usually aware of water-related problems and have concrete suggestions for their improvement.

Possible strengthened project interventions could include the following:

- Provide gender awareness training to executing and implementing partners to ensure that they have the skills to consider and address gender issues at the policy as well as project implementation level.
- Ensure that women are properly represented on project water resource management committees.
- Include women in training for operation and maintenance of water utilities, including at the community level.
- Ensure that client surveys carried out under projects (i.e., on satisfaction with services) include at least 50% women, since women are primarily responsible for water and sanitation services, particularly water collection and transport, and are most aware of the problems with services, and have concrete suggestions for improvements.

#### **b. Early Childhood Development**

ADB's involvement in the ECD subsector responds to the priority accorded to addressing child health and education concerns in the SPPRED (and SPPREAD) and will contribute to progress toward key health-related MDGs by addressing malnutrition, morbidity, and mortality issues in ECD. As this assessment has noted, the concerns about the nutrition and health status of pregnant women, mothers with young children, and children under 5, which have both income and nonincome poverty dimensions, are serious and pressing.

The positive impacts of effectively mainstreaming gender into ECD projects and programs are considerable. In particular, providing pregnant women, new mothers, and their families with pre- and postnatal care, basic information about breastfeeding and diet, appropriate micronutrient supplements, birth spacing, and basic newborn care can significantly reduce the maternal, infant, and under-5 mortality rates and improve overall health care status. Effective ECD programs can also reduce public expenditures for education and health care services by decreasing grade repetition and morbidity. Moreover, increasing the availability of and access to quality child care programs enables women to engage in income-earning activities and often releases siblings from child care responsibilities, improving the potential rates of primary school enrollment, retention, and performance.

Possible strengthened project interventions could include the following:

- Ensure that gender awareness training is part of all pre-school teacher/teacher and other training supported under ECD projects.
- Ensure that learning materials are gender sensitive and do not contain stereotyped images of the roles of men and women.
- In addition to undertaking sex-disaggregated data collection and analysis of pre-school interventions, regular (sex-disaggregated) monitoring of nutritional deficiencies such as anemia, IDD, stunting, wasting, and malnutrition within different age/income/resident and IDP/R groups should be undertaken, analyzed, and used as a basis for improving interventions in this related sector.
- Undertake regular assessments of boys'/girls' enrollment/attendance/achievement rates at preschool institutions and develop appropriate policy and program interventions to address imbalances.
- Ensure that project interventions to increase and improve nutritional awareness and ECD within families focus on women and men as well as boys and girls, and develop appropriate forums/modalities to ensure their full and active participation.
- Provide gender awareness and gender analysis training (particularly in relation to methods of effective data collection) to community health care providers (i.e., at the local level) in ECD projects and programs.

#### **4. Transport**

ADB's assistance to the transport sector focuses on physical rehabilitation, institutional reform of sector institutions, and development of major regional road linkages. The geographic focus of ADB's assistance is on areas outside Baku, as a means of fostering more balanced regional development. The Government recently accorded higher priority to rehabilitation of the two main highway corridors (central and north-south), in line with the State Program on Socio-Economic Development of the Regions for 2004–2008. ADB's projects are aimed at improving two segments of the central road corridor and one segment of the north-south road corridor. ADB's policy dialogue in the sector may include enhancing the policy-making and regulatory capacity of the transport ministry, improving road safety, reducing vehicle emissions, and introducing private participation in road maintenance.

Road maintenance and construction projects can make and have made an important contribution to reducing poverty. In addition to improving access to local/international markets and services, improved road networks can provide additional income-earning opportunities for the communities through which road corridors pass and improve access to key social infrastructure, including educational and health facilities. At the same time, such projects can have negative impacts, which have specific gender dimensions. Increased vulnerabilities to trafficking rings, labor exploitation in now accessible labor markets, and STIs and HIV/AIDS transmission are risks that can be mitigated, if appropriate gender analysis takes place at project design and effective measures for addressing negative impacts are built into projects at implementation. The following list identifies some tools and entry points for ADB projects in this sector.

Possible strengthened project interventions could include the following:

- Monitor positive/negative impacts of roads projects on women and men, including poverty rates in affected communities, temporary/illegal migration flows, STI/HIV/AIDS incidence, and the emergence of trafficking networks.
- Ensure that components addressing human trafficking, STIs, and HIV/AIDS) are incorporated into all roads projects and that such components address relevant gender issues effectively.
- Build the capacity of Government officials to effectively track (female/male) migration flows and to intercept and prosecute human traffickers and smugglers.
- Utilize infrastructure in road project areas (i.e., bus depots/marketplaces) to provide information and advice on (the dangers/modalities of) trafficking and temporary (e.g., work) migration and STIs and HIV/AIDS prevention.
- Set targets for women's employment on roads projects as appropriate, particularly in the areas of repairs and maintenance.
- Build into projects awareness raising/prevention campaigns for construction/transport workers of HIV/AIDS and STI transmission and the harm caused by and risks involved in using the services of commercial sex workers.
- Build in regular rapid assessments by NGOs or CBOs familiar with the region/communities around the project area to assess trafficking and (sex-disaggregated) migration flows and impacts over time.

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**Appendix 1.**

**Gender and the SPPRED**

<b>Ref. No.</b>	<b>Chapter Title</b>	<b>No Mention of Gender Issues</b>	<b>Brief Mention of Gender Issues</b>	<b>Gender Issues Treated with Some Elaboration</b>
<b>Chapter 1</b>	<b>POVERTY IN AZERBAIJAN</b>			
1.1	Demographic Background		X(1 line)	
1.2	Poverty Incidence	X		
1.3	Poverty Profile		X (1 para)	
1.4	Urban/Rural Poverty	X		
1.5	Regional Differences in Living Standards	X		
1.6	Gender and Poverty			X
1.7	Income Distribution and Inequality	X		
1.8	IDPs and Refugees		X (2 paras)	
1.9	Social Protection System	X		
1.10	Employment		X (2 lines)	
1.11	Health			X
1.12	Education		X(I para)	
1.13	Children and Poverty	X		
1.14	Environment	X		
<b>Chapter 2</b>	<b>CURRENT ECONOMIC STATUS</b>			
2.1	The Macroeconomic Background	X		
2.2	Achievements	X		
2.3	The Challenges	X		
<b>Chapter 3</b>	<b>SOCIAL POLICIES AIMED AT POVERTY REDUCTION</b>			
3.1	Social Insurance and Social Assistance Reform	X		
3.2	Social Protection of Vulnerable Groups	X		
3.3	Labour Market, Wage and Employment Policy	X		
3.4	Education Reform		X (1 para)	
3.5	Promotion of Culture and Protection of Cultural Heritage	X		
3.6	Health Sector Reform		X (2 paras)	
3.7	Promotion of Sports and Physical education	X		

Ref. No.	Chapter Title	No Mention of Gender Issues	Brief Mention of Gender Issues	Gender Issues Treated with Some Elaboration
3.8	Gender Policy			X
3.9	Social Policy and the IDP/Refugee Population	X		
<b>Chapter 4</b>	<b>ECONOMIC POLICY AND POVERTY REDUCTION</b>			
4.1	Maintaining Economic Stability	X		
4.2	Tools for Balanced Growth	X		
4.3	Sectoral Strategies for Balanced Growth	X		
<b>Chapter 5</b>	<b>INSTITUTIONAL FRAMEWORK FOR THE POVERTY REDUCTION STRATEGY</b>			
5.1	Public Administration Reform	X		
5.2	Juridical reforms	X		
5.3	Decentralization: Role of Municipalities in Poverty Reduction	X		
5.4	Combating Corruption	X		
<b>Chapter 6</b>	<b>THE PARTICIPATORY PROCESS</b>			
6.1	Role, Significance of Participatory Component	X		
6.2	The Main Players	X		
6.3	Empirical Evidence	X		
6.4	Main Findings			X
6.5	Achievements and Drawbacks	X		
6.6	Possible ways to Deepen and Broaden the Process	X		
6.7	The Information Campaign: Public Eradication of Poverty	X		
<b>Chapter 7</b>	<b>IMPLEMENTATION, MONITORING AND EVALUATION</b>			
7.1	Selection of Monitoring and Evaluation Indicators			X
7.2	Data Sources and Instruments	X		
7.3	Institutional Capacity	X		

Source: Authors' researches.

Appendix 2.

The Gender Dimensions of Poverty: Potential Entry Points within SPPRED 2003–2005 and for SPPREAD

Gender /Poverty Dimension	Relevant SPPRED 2003-2005 Chapters	Potential Entry Points for Gender Mainstreaming	Inputs (Studies/Training/Key Actions Required)
<p><b>Decreasing opportunities for women</b></p>	<ul style="list-style-type: none"> <li>• Employment (Chapter 1.10).</li> <li>• Labor Market, Wage and Employment policy (Chapter 3.3).</li> <li>• Public Administration Reform (Chapter 5.1).</li> <li>• Juridical Reforms (Chapter 5.2).</li> <li>• Decentralization: Role of Municipalities in Poverty Reduction (Chapter 5.3).</li> <li>• Economic Policy and Poverty Reduction (Chapter 4).</li> <li>• Implementation, Monitoring and Evaluation (Chapter 7).</li> </ul>	<ul style="list-style-type: none"> <li>• Pass legislation on Equal Employment Opportunity (EEO), sexual harassment, and discriminatory employment practices and establish effective commissions or other institutions to promote and enforce equal opportunity.</li> <li>• Make policy commitment to creating fast-track opportunities for women’s promotion in the civil service.</li> <li>• Set targets for appointments of women at middle/senior management level in both central and municipal government.</li> <li>• Take action to remove structural and legal barriers as well as stereotypical attitudes to gender equality at work; address gender bias in recruitment, working conditions, occupational segregation, discrimination in social protection benefits, women’s occupational health and safety, and unequal career opportunities.</li> <li>• As a key policy priority, identify the development and installation of employment retraining programs that take into account demand for skills and are specifically targeted at unemployed women.</li> <li>• Support women’s participation in the small and medium-sized enterprise sector by targeting business training programs and support services to women.</li> <li>• Increase women’s access to finance, including through the banking sector, by creating special financial advisory services and lending opportunities.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide technical advice and capacity building assistance on the development of EEO and related legislation.</li> <li>• Recognize and respond to women’s child-care responsibilities by supporting the cost of child care for female employees.</li> <li>• Increase awareness of EEOs in government (central and municipal) through provision of training, particularly to middle- and senior-level managers.</li> <li>• Provide professional/management development programs targeted at women employees in central/municipal government structures.</li> <li>• Undertake further studies of the (formal and informal) labor market to better understand gender-based distortions, including male/female inactivity rates.</li> <li>• Undertake gender assessments of the scale of temporary and illegal labor migration and the time/income and other impacts.</li> <li>• Undertake comprehensive employer surveys to determine labor market needs and develop appropriate vocational and other</li> </ul>

Gender /Poverty Dimension	Relevant SPPRED 2003-2005 Chapters	Potential Entry Points for Gender Mainstreaming	Inputs (Studies/Training/Key Actions Required)
		<ul style="list-style-type: none"> <li>• Increase women’s formal role in the rural sector by increasing access to assets such as land, livestock, and equipment; inputs such as seeds and fertilizers; labor-saving technologies; and services, such as transport and facilities and extension services and training.</li> <li>• Introduce (possibly at municipal level initially) gender budgeting approaches.</li> <li>• Recognize in economic policy statements the implications of unpaid work in social reproduction include the time devoted to caring for the family and community members and the sick; collecting fuel and water; and cooking, cleaning, and teaching children.</li> <li>• In agricultural policy statements, explicitly mention strategies for enhancing women’s participation, productivity, and access to resources, inputs, support services and market outlets, and clarify that the term “farmer” refers to both male and female producers.</li> <li>• Ensure that in all sectors, policy is developed based on sex-disaggregated data and an awareness that policy decisions impact on the lives of women and men in different ways.</li> </ul>	<p>training programs for women and men.</p> <ul style="list-style-type: none"> <li>• Analyze the reasons for women’s low participation in the small and medium-sized enterprise sector with a focus on identifying constraints and strategies for overcoming them.</li> <li>• Provide skills development training for women in agrobusiness entrepreneurship and extension support services, including market outlets.</li> <li>• Undertake closer monitoring of the gender impacts of the land reform process, including women’s actual versus statutory control over land resources.</li> <li>• Set targets for women’s participation in the planning, implementation, and evaluation stages of all programs and projects of the Ministry of Agriculture.</li> <li>• Ensure that all land titling data bases are gender-disaggregated.</li> <li>• Ensure that women receive copies of land titles and both women and men are registered as heads of household.</li> <li>• Simplify lending processes so that rural women can effectively make use of credit facilities; promote agricultural credit programs that lead to new areas of productive activity for women, e.g., agrobased</li> </ul>

Gender /Poverty Dimension	Relevant SPPRED 2003-2005 Chapters	Potential Entry Points for Gender Mainstreaming	Inputs (Studies/Training/Key Actions Required)
			<p>processing and marketing of produce.</p> <ul style="list-style-type: none"> <li>• Evaluate the policies that underlie budget appropriations to identify their likely impact on men and women and analyze whether the policies are likely to reduce, increase, or leave unchanged the degree and pattern of gender differences.</li> <li>• Collect information on how household members utilize their time through household time-use data surveys disaggregated by gender (and age), with a view to revealing connections between the Government's budget and household time budgets.</li> <li>• Undertake gender-aware policy appraisal that identifies the implicit and explicit gender issues and allied resource allocations; assess whether the policy will continue or change existing inequalities between men and women (and groups of men and women) and patterns of gender relations.</li> <li>• Undertake studies on the gender impact of existing macro- and microagricultural policies (including structural adjustment policies), particularly on women farmers from landless, marginal, small and female-headed households, and redesign policies</li> </ul>

Gender /Poverty Dimension	Relevant SPPRED 2003-2005 Chapters	Potential Entry Points for Gender Mainstreaming	Inputs (Studies/Training/Key Actions Required)
			<p>in cases where adverse impacts on women are identified.</p> <ul style="list-style-type: none"> <li>• Develop institutional capacity for collection, analysis, and reporting of gender-disaggregated data at all levels of central and municipal government.</li> <li>• Undertake regular and ongoing capacity building in gender awareness, analysis and planning throughout government structures, not only in the social sectors; and provide general and sector-specific training directly related to knowledge gaps identified by policy makers themselves.</li> </ul>
<b>Erosion of Capabilities</b>	<ul style="list-style-type: none"> <li>• Education (Chapter 1.12)</li> </ul>	<ul style="list-style-type: none"> <li>• Make policy commitments to monitor female and male enrollment and attendance rates regularly and undertake regular, gender-disaggregated assessments of learning outcomes.</li> <li>• Make policy commitment to encourage increased female enrollments in higher education.</li> <li>• Commit additional finances to early childhood care facilities, including pre-schools and training of pre-school staff.</li> <li>• Introduce gender awareness training in teacher training programs.</li> <li>• Revise school curricula and textbooks to remove stereotyped images of the roles of men and women and promote behavior that does not validate or condone gender inequality and gender-specific violence.</li> </ul>	<ul style="list-style-type: none"> <li>• Undertake assessments of female/male enrollment/attendance rates at basic and primary level and develop appropriate policy interventions.</li> <li>• Undertake regular assessments of the learning achievements of boys and girls and develop appropriate policy responses.</li> <li>• Regularly analyze labor force requirements (including gender barriers) to enable vocational and other higher education programs to better correspond to labor market demands.</li> <li>• Develop institutional capacity (e.g., through regular training) for collection, analysis, and reporting of gender-disaggregated data at all</li> </ul>

Gender /Poverty Dimension	Relevant SPPRED 2003-2005 Chapters	Potential Entry Points for Gender Mainstreaming	Inputs (Studies/Training/Key Actions Required)
	<ul style="list-style-type: none"> <li>Health (Chapter 1.11)</li> </ul>	<ul style="list-style-type: none"> <li>Make policy commitments to institutionalize the collection and analysis of gender-disaggregated data at all levels of the health system, to track health indicators and identify and remedy gender gaps as appropriate.</li> <li>Make policy commitments to develop and implement public awareness programs on nutrition, with a particular focus on the poor, including poor women and children.</li> <li>Make policy commitments to increasing access to maternal health care services using the MDG #5 targets as the framework.</li> <li>Make policy commitment to reducing child mortality using MDG #4 targets as the framework.</li> <li>Make policy commitment to supporting complete childhood immunization against serious communicable diseases, setting appropriate targets over the SPPRED period.</li> <li>Make policy commitments to combat HIV/AIDS, malaria, and other diseases (particularly tuberculosis) using MDG #6 targets as the framework.</li> </ul>	<p>levels of central and municipal government.</p> <ul style="list-style-type: none"> <li>Undertake gender assessments of all proposed health care reforms to ensure that they will not impose extra work/care burdens on women.</li> <li>Undertake regular (male/female) beneficiary assessments of health care services to inform policy and program improvements.</li> <li>Undertake regular surveys of MMRs and child mortality rates to complement existing administrative data.</li> <li>Undertake assessments of childhood immunization coverage in all regions and among all income groups.</li> <li>Undertake an assessment to identify “high-risk” groups of women and men as a basis for developing appropriate policy/program responses.</li> <li>Target women at high risk of STI’s (including sex workers, trafficked persons, spouses of migrant workers and migrant workers themselves) and develop appropriate education and information programs, referral and treatment services.</li> <li>Develop institutional capacity (e.g., through regular training) for collection, analysis, and reporting</li> </ul>

Gender /Poverty Dimension	Relevant SPPRED 2003-2005 Chapters	Potential Entry Points for Gender Mainstreaming	Inputs (Studies/Training/Key Actions Required)
			of gender-disaggregated data at all levels of central and municipal government.
<b>Increasing Insecurity</b>	<ul style="list-style-type: none"> <li>• Social Insurance and Social Assistance Reform (Chapter 3.1).</li> <li>• Social Protection of Most Vulnerable Groups (Chapter 3.2).</li> </ul>	<ul style="list-style-type: none"> <li>• Pension programs that do not discriminate against or disadvantage women.</li> <li>• Social protection programs that do not discriminate against or disadvantage women.</li> <li>• Policy commitment to support a national awareness campaign (i.e., through schools, universities, government workplaces) on VAW.</li> <li>• Policy commitment to provide safe houses and support (i.e., counseling) services to victims of violence.</li> <li>• Policy commitment to support regular training programs for judicial, legal, medical, social, educational, and police and migration staff to avoid the abuse of power leading to violence against women and sensitize such personnel to the nature of gender-based violence.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that all proposed reforms to or proposals for social protection programs are based on a thorough gender analysis, take into account the different needs of men and women, and do not discriminate against or disadvantage women (e.g., pension reforms).</li> <li>• In the context of both social protection policy and program development, identify particularly vulnerable groups (poor female heads of households, single parents) and ensure that adequate social safety nets are in place to protect these groups.</li> <li>• Undertake a national assessment of extent of VAW in different regions and the level of current support services provided with a view to identifying gaps and needs.</li> <li>• Develop appropriate training programs.</li> <li>• Develop and support legal literacy training programs for women and men at a range of levels including within institutions at central government and local government level, security forces including the police, armed forces and migration staff, educational institutions and amongst rural and urban women.</li> </ul>

Gender /Poverty Dimension	Relevant SPPRED 2003-2005 Chapters	Potential Entry Points for Gender Mainstreaming	Inputs (Studies/Training/Key Actions Required)
<b>Increasing Disempowerment</b>	<ul style="list-style-type: none"> <li>• Public Administrative Reform (Chapter 5.1).</li> <li>• Decentralization: Role of Municipalities in Poverty Reduction (Chapter 5.3).</li> <li>• The Participatory Process (Chapter 6).</li> </ul>	<ul style="list-style-type: none"> <li>• Policy commitment to supporting public awareness campaigns at central, regional and local government level aimed at encouraging and increasing women’s participation in governance structures.</li> <li>• Consider setting some targets for women’s participation in local government decision making.</li> <li>• Consider setting some targets for female representation at the Oblast and District level.</li> </ul>	<ul style="list-style-type: none"> <li>• Undertake an assessment of the constraints and impediments to women’s greater participation in local and national government political structures and make appropriate policy and program recommendations.</li> <li>• Implement gender-awareness and analysis training for all local government officials.</li> <li>• Develop regular mechanisms, at the local, regional, and national level, for consultations with civil society representatives and NGOs/CBOs and ensure that women are fully represented at those consultations.</li> </ul>

CBO = community-based organization; EEO = equal employment opportunity; HIV/AIDS = human immunodeficiency virus/acquired immunodeficiency syndrome; IDP/R = internally displaced people/refugees; MDG = Millennium Development Goal; NGO = nongovernment organization; SPPRED = State Program on Poverty Reduction and Economic Development; STI = sexually transmitted infection; VAW = violence against women.

*Source:* Author’s researches.

### Appendix 3.

#### Millennium Development Goals Azerbaijan: International and National Targets

International MDG	National MDG
<p><b>Goal #1</b> Eradicate extreme poverty and hunger.</p> <p><b><u>Targets</u></b></p> <ol style="list-style-type: none"> <li>Between 1990 and 2015 halve the proportion of people living on less than \$1 per day.</li> <li>Between 1990 and 2015 halve the proportion of people suffering from hunger.</li> </ol>	<p><b>Goal 1</b> Reduce income poverty.</p> <p><b><u>Targets</u></b></p> <ol style="list-style-type: none"> <li>Between 2002 and 2015, reduce the proportion of people whose per capita monthly consumption expenditure is below the country's absolute poverty line.</li> <li>Between 2002 and 2015, reduce the proportion of people in extreme poverty. Halve the share of the population below the extreme poverty line.</li> </ol>
<p><b>Goal #2</b> Achieve universal primary education.</p> <p><b><u>Target</u></b></p> <ol style="list-style-type: none"> <li>Ensure that by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.</li> </ol>	<p><b>Goal 2</b> Achieve near-universal secondary education.</p> <p><b><u>Target</u></b></p> <ol style="list-style-type: none"> <li>Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of secondary schooling (11 grades).#</li> </ol>
<p><b>Goal #3</b> Promote gender equality and empower women</p> <p><b><u>Target</u></b></p> <ol style="list-style-type: none"> <li>Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015.</li> </ol>	<p><b>Goal 3</b> Promote gender equality and empower women</p> <p><b><u>Target</u></b></p> <ol style="list-style-type: none"> <li>Maintain gender equality in primary and secondary education, and improve gender equality in higher education.</li> </ol>
<p><b>Goal #4</b> Reduce child mortality.</p> <p><b><u>Targets</u></b></p> <ol style="list-style-type: none"> <li>Between 1990 and 2015, reduce the under-5 mortality rate by two thirds.</li> </ol>	<p><b>Goal 4</b> Reduce child mortality.</p> <p><b><u>Targets</u></b></p> <ol style="list-style-type: none"> <li>Between 1990 and 2015, reduce the under-5 mortality rate by two thirds.</li> </ol>
<p><b>Goal #5</b> Improve maternal health.</p> <p><b><u>Target</u></b></p> <ol style="list-style-type: none"> <li>Between 1990 and 2015, reduce the maternal mortality ratio by three quarters.</li> </ol>	<p><b>Goal 5</b> Improve maternal health.</p> <p><b><u>Target</u></b></p> <ol style="list-style-type: none"> <li>By 2015, reduce the maternal mortality ratio to the level of 1990 and maintain at this level.</li> </ol>
<p><b>Goal #6</b> Combat HIV/AIDs, malaria, and other diseases</p> <p><b><u>Targets</u></b></p> <ol style="list-style-type: none"> <li>Have halted by 2015, and begun to reverse, the spread of HIV/AIDS.</li> <li>Have halted by 2015, and begun to reverse, the incidence of malaria and other major diseases.</li> </ol>	<p><b>Goal 6</b> Combat HIV/AIDs, malaria, and other diseases</p> <p><b><u>Targets</u></b></p> <ol style="list-style-type: none"> <li>Have halted by 2008, and begun to reverse, the spread of HIV/AIDS.</li> <li>Have halted by ___ (year to be decided) and begun to reverse, the incidence of malaria; give specific targets for TB and brucellosis</li> </ol>

International MDG	National MDG
<p><b>Goal #7</b> Ensure environmental sustainability.</p> <p><b>Targets</b></p> <p>9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.</p> <p>10. By 2015, halve the proportion of people without sustainable access to safe drinking water.</p> <p>11. By 2020, have achieved a significant improvement in the lives of at least 100 million slum dwellers.</p>	<p><b>Goal 7</b> Ensure environmental sustainability.</p> <p><b>Targets</b></p> <p>9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.</p> <p>10. By 2015, halve the proportion of people without sustainable access to safe drinking water.</p> <p>11. To be selected.</p>
<p><b>Goal #8</b> Develop a global partnership for development.</p> <p><b>Targets</b></p> <p>12. Develop further an open, rule-based, predictable, nondiscriminatory trading and financial system.</p> <p>13. Address the special needs of the least developed countries. Address the special needs of landlocked countries and small island developing states.</p> <p>14. Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term.</p> <p>15. In cooperation with developing countries, develop and implement strategies for decent and productive work for youth.</p> <p>16. In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.</p> <p>17. In cooperation with the private sector, make available the benefits of new technologies, especially information and communications.</p>	<p><b>Goal 8</b> Develop a global partnership for development</p> <p><b>Targets</b></p> <p>12. Increase foreign direct investment in the non-oil sector.</p> <p>13. Increase exports in the non-oil sector.</p> <p>14. Develop further an open, rule-based, predictable, nondiscriminatory trading and financial system through joining the World Trade Organization.</p> <p>15. Prepare a draft overseas development assistance strategy as an emerging donor.</p> <p>16. Keep foreign debt at an acceptable level.</p> <p>17. Make the benefits of information and communications technology available to the general public.</p>
	<p><b>Goal 9</b> Establish and strengthen good governance.</p> <p><b>Targets</b></p> <p>18. By 2015, reform state systems of public administration, legislation and policy in accordance with European Union standards of justice, the rule of law, and market economies.</p> <p>19. Increase transparency in extractive industry.</p>

Source: Republic of Azerbaijan, 2005b: 147–165.

#### Appendix 4.

#### International and National MDG Formulations and their Gender Dimensions

International MDG	National MDG	Gender Dimensions/Actions
<p><b>Goal #1</b> Eradicate extreme poverty and hunger.</p> <p><b>Targets</b></p> <ol style="list-style-type: none"> <li>Halve between 1990 and 2015 the proportion of people living on less than \$1 per day.</li> <li>Halve between 1990 and 2015 proportion of people suffering from hunger.</li> </ol>	<p><b>Goal 1</b> Reduce income poverty.</p> <p><b>Targets</b></p> <ol style="list-style-type: none"> <li>Reduce between 2002 and 2015, the proportion of people whose per capita monthly consumption expenditure is below the country's absolute poverty line.</li> <li>Reduce between 2002 and 2015 the proportion of people in extreme poverty. Halve the share of the population below the extreme poverty line of the country.</li> </ol>	<p>Monitor and report annually on income and consumption poverty by gender of household head and include both resident and IDP/R households.</p> <p>Undertake research /surveys to uncover the different coping strategies between male- and female-headed households including IDP/R households.</p> <p>Should the trend of higher levels of poverty in male-headed households persist, undertake a separate study to determine the reasons for this, possibly as part of the studies noted above.</p> <p>“Gender” poverty gap analyses (i.e., of depth of poverty).</p> <p>In analyses of consumption/income inequality, take into account gender of household heads and their poverty/inequality levels (i.e., use Gini coefficient analyses for male/female headed households).</p> <p>Monitor women’s and men’s average wages annually against poverty line.</p> <p>Monitor prevalence of stunting and wasting in children (&lt;14 years ) by gender at regular intervals through surveys.</p> <p>Monitor prevalence of goiter (IDDs) and anemia in children (&lt;14 years) by gender.</p> <p>Determine and regularly monitor number of working children (5–15 years) by gender.</p>
<p><b>Goal #2</b> Achieve universal primary education.</p> <p><b>Target</b></p> <ol style="list-style-type: none"> <li>Ensure that by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.</li> </ol>	<p><b>Goal 2</b> Achieve near-universal secondary education.</p> <p><b>Target</b></p> <ol style="list-style-type: none"> <li>Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of secondary schooling (11 grades).</li> </ol>	<p>Girls’ full access to upper secondary and higher education, particularly in rural areas is of concern- may have regional and urban/rural dimensions.</p> <p>Track and monitor indications of falling attendance rates for girls at secondary level, particularly amongst IDP/R communities.</p> <p>Closely monitor quality of schooling and educational outcomes for girls and boys.</p> <p>Improve data on net as well as gross enrollment rates for girls and boys; closely monitor attendance rates by gender.</p>

International MDG	National MDG	Gender Dimensions/Actions
<p><b>Goal #3</b> Promote gender equality and empower women.</p> <p><b>Target</b></p> <p>4. Eliminate gender disparity in primary and secondary education, preferably by 2005, and at all levels of education no later than 2015.</p>	<p><b>Goal 3</b> Promote gender equality and empower women.</p> <p><b>Target</b></p> <p>4. Maintain gender equality in primary and secondary education, and improve gender equality in higher education.</p>	<p>As above.</p> <p>Monitor rates of female university entrance, which may be decreasing.</p> <p>Share of women in wage employment in nonagricultural sector considerably lower than that for men and lack of wage parity.</p> <p>Considerable horizontal and vertical segregation in nonagricultural labor force.</p> <p>Only 10.4% of seats in National Parliament are held by women.</p> <p>Overall female “inactivity “ rates (41.5% in 2003) are high.</p> <p>High levels of informal sector economic activity by women are reported, but as yet cannot be quantified.</p> <p>Barriers to expanding women’s entrepreneurship are considerable.</p>
<p><b>Goal 4</b> Reduce child mortality.</p> <p><b>Targets</b></p> <p>5. Reduce by two thirds, between 1990 and 2015, the under-5 mortality rate.</p>	<p><b>Goal 4</b> Reduce child mortality.</p> <p><b>Target</b></p> <p>5. Reduce by two thirds, between 2001 and 2015, the under-5 mortality rate.</p>	<p>At present child (neo-natal, post-neonatal and infant) mortality rates are not provided by gender; regularize this in collection and reporting of data.</p> <p>Ensure that definition of “live births” conforms with standard WHO definition.</p> <p>Complement official data by regularly undertaking (sex-disaggregated) surveys, as some households may not be reporting deaths to health facilities.</p> <p>UNICEF MICS (2000) found that 18% of the poor and 5% of IDP/R households had only a TBA or relative assisting with birth and that 5% of the poor and 10.7% of IDP/Rs had no assistance at birth. Such surveys undertaken regularly will help to monitor these indicators and may help to establish if there are links between skilled assistance at birth and mortality rates. In addition, improving access to skilled assistance at birth for vulnerable groups, such as the poor and IDP/R’s, could be a key priority.</p>
<p><b>Goal #5</b> Improve maternal health.</p> <p><b>Target</b></p> <p>6. Reduce by three-quarters, between 1990 and 2015, the</p>	<p><b>Goal 5</b> Improve maternal health.</p> <p><b>Target</b></p> <p>6. Reduce the maternal mortality ratio by 2015 back</p>	<p>As above regarding skilled assistance at birth.</p> <p>Differences between administrative and survey data on MMRs are significant. Agree on and regularly monitor baselines through both administrative and survey data.</p> <p>The 2001 RHS reported only half of married women (55%) use any</p>

International MDG	National MDG	Gender Dimensions/Actions
maternal mortality ratio.	to the level of 1990 and maintain at this level.	<p>contraceptive method and just under half (45%) report an unmet need for effectively limiting childbearing. Ensuring that women have adequate contraceptive information, awareness, and access is critical to enabling family planning/child spacing and improving maternal health. The 2001 RHS reported an abortion rate of 3.2 abortions per women (in contrast to official finding of 0.3 abortions per women for women aged 15–49). Abortions (particularly early abortions) may therefore be underreported, including in the “private” sector. Links between repeated abortions and maternal health have been clearly established and undertaking regular surveys may be the most effective way to monitor this key indicator.</p> <p>Many women are reporting difficulties in accessing quality affordable health care; the “informal” extra costs are often prohibitive for average families, let alone for the poor. Improving access to quality affordable health care for pregnant women is therefore a critical dimension of improving MMRs.</p>
<p><b>Goal 6</b> Combat HIV/AIDS, malaria, and other diseases.</p> <p><b>Targets</b></p> <p>7. Have halted by 2015, and begun to reverse, the spread of HIV/AIDS.</p> <p>8. Have halted by 2015, and begun to reverse, the incidence of malaria and other major diseases.</p>	<p><b>Goal 6</b> Combat HIV/AIDS, malaria, and other diseases.</p> <p><b>Targets</b></p> <p>7. Have halted by 2008, and begun to reverse, the spread of HIV/AIDS.</p> <p>8. Have halted by 2015 and begun to reverse the incidence of malaria; give specific targets for TB and brucellosis (date to be decided).</p>	<p>Awareness among women in Azerbaijan of HIV/AIDS and its transmission modes is very low and poor. The 2001 RHS reported that 72% of women could not spontaneously state any main way of avoiding HIV infection and less than 1% could name 3 preventive behaviors. Improve women’s and girls awareness of HIV/AIDS through schools, universities, workplaces, and other forms to achieve this target.</p> <p>Also improve information on and access to free contraceptives (including condoms).</p> <p>Increasing rates of trafficking place women and girls at greater risk of contracting HIV/Aids and other STIs. Provide information in Baku, the regions whence many trafficked women and girls are drawn, and at airports and border transit points.</p> <p>The availability of and access to free confidential testing facilities in Baku and the regions is still very limited and needs to be sensitive to women’s special needs (i.e., for female doctors/nursing staff etc.). Male TB rates remain particularly high and at present no data on male/female death rates from TB are available. Improve free access to TB testing and treatment (e.g., through DOTS through primary health care facilities for men and women to achieving this target.</p>

International MDG	National MDG	Gender Dimensions/Actions
<p><b>Goal #7</b> Ensure environmental sustainability.</p> <p><b>Targets</b></p> <p>9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.</p> <p>10. Halve, by 2015, the proportion of people without sustainable access to safe drinking water.</p> <p>11. By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.</p>	<p><b>Goal 7</b> Ensure environmental sustainability.</p> <p><b>Targets</b></p> <p>9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.</p> <p>10. Halve, by 2015, the proportion of people without sustainable access to safe drinking water</p> <p>11. To Be Chosen.</p>	<p>Data on women’s and men’s roles in environmental conservation and preserving biodiversity in Azerbaijan, which are fundamental to ensuring that policies and programs to reverse the loss of environmental resources if effective, are not available. Such analyses are necessary and resulting data may also be important to the development of sector data in areas such as agriculture/irrigation, forestry, fisheries, and water supply and sanitation.</p> <p>In particular, information gaps exist for women’s roles in sectors such as fisheries, agriculture, and forestry, limiting the extent to which effective gender-mainstreamed environmental policies and programs can be developed.</p> <p>Environmental damage in Azerbaijan is severe, yet no recent studies have been done of the impact of such damage (including extensive water and soil pollution in the Abseron Peninsula) on the health and productive capacities of the affected populations, particularly women and children. In particular, studies that track key indicators such as MMRs, child mortality/morbidity rates, difficult births, and birth defects are needed in affected areas and the data compared with general population data to track divergences (if any) and make appropriate policy and program interventions.</p> <p>Provision of clean and reliable water supply and sanitation services is still inadequate in Azerbaijan, with strong regional variations. The UNICEF MICS 2000 reported that in poorer regions, such as Nakhchivan, access to clean drinking water was only 68.4%. The shortage of clean water impacts upon the poor and specifically poor women, who are largely responsible for water purchase, transport, storage, treatment, and disposal. Water and sanitation projects must therefore ensure the full participation of women as primary water users and ensure that activities promote and build upon their knowledge and expertise and decrease their workloads and health risks. Gender training for government/project staff involved in WSS projects is also essential.</p>
<p><b>Goal #8</b> Develop a global partnership for development.</p>	<p><b>Goal 8</b> Develop a global partnership for development.</p>	

International MDG	National MDG	Gender Dimensions/Actions
<p><b>Targets</b></p> <p>12. Develop further an open, rule-based, predictable, nondiscriminatory trading and financial system.</p> <p>13. Address the special needs of the least developed countries.</p> <p>14. Address the special needs of landlocked countries and small island developing states.</p> <p>15. Deal comprehensively with the debt problems of developing countries through national and international measures to make debt sustainable in the long term.</p> <p>16. In cooperation with developing countries, develop and implement strategies for decent and productive work for youth.</p> <p>17. In cooperation with pharmaceutical companies, provide access to affordable, essential drugs in developing countries.</p> <p>18. In cooperation with the private sector, make available the benefits of new technologies, especially information and communications.</p>	<p><b>Targets</b></p> <p>12. Increase foreign direct investment in the non-oil sector.</p> <p>13. Increase exports in the non-oil sector.</p> <p>14. Develop further an open, rule-based, predictable, nondiscriminatory trading and financial system through joining the World Trade Organization.</p> <p>15. Prepare of a draft overseas development assistance strategy as an emerging donor.</p> <p>16. Keep foreign debt at an acceptable level.</p> <p>17. Make available the benefits of information and communications technologies for the general public.</p>	

International MDG	National MDG	Gender Dimensions/Actions
	<p><b>Goal 9</b> Establish and strengthen good governance.</p> <p><b>Targets</b></p> <p>18. By 2015, reform overall state systems of public administration, legislation, and policies in accordance with European Union standards of justice, rule of law. and market economies.</p> <p>19. Increase transparency in extractive industry.</p>	

DOTS = directly observed treatment short-course; IDD = iodine deficiency disorders; IDP/R = internally displaced people/refugees; MICS = Multiple Indicator Cluster Survey; RHS = Reproductive Health Survey; TB = tuberculosis; TBA = traditional birth attendant; UNICEF = United Nations Children’s Fund; WSS = water supply and sanitation.

Source: Authors’ researches.

**Appendix 5.**

**Nongovernment Organizations in Azerbaijan Working on Gender Issues**

<b>Name of NGO</b>	<b>Area of Activity</b>	<b>Contact Person</b>
Azerbaijan Gender Association “Symmetry”	Protection of women’s rights, reproductive health, gender and the environment, gender and IDP/R population.	Kamilla Dadashova 493 40 56
Azerbaijan’s Women’s Mejlis “Sevil”	Protection of women’s legal rights, women’s entrepreneurship development.	Rafiga Azimova 498 51 22, (050) 348 76 61 sevil@bgt-az.com
AREAT (Scientific research center)	Research on gender issues.	Ali Abbasov Yelena Kasumova 491 00 98 areat@azeronline.com
Baku Association of Women of Azerbaijan	VAW, women’s entrepreneurship development, research on gender issues.	Zarifa Salahova 493 19 02 zarifa_salahova@yandex.ru
Institute of Gender Problems	Women and politics; supports and promotes women’s participation in political processes; training of women leaders.	Sevil Zeynalova 499 31 47 sevil@bgt-az.com
Creative Women Association	Promotion of cultural exhibitions, concerts.	Afag Huseynova 495 97 28 afag_h@yahoo.com
D. Aliyeva Society “The Protection of Women’s Rights”	Protection of women’s, children’s, and youth’s rights.	Novella Jafarova 492 91 66, 497 21 08 n_jafarova@azeri.com
“Umid” Society of Mothers	Provision of financial and in-kind assistance to vulnerable groups (e.g., aged, children).	Susen Ahmedova 439 29 97, 438 54 20
“Gender and Human Rights” Research Union	Supports and promotes women’s participation in political processes; research on gender issues.	Rena Mirzezadeh 439 37 47 mirrena54@mail.az

Name of NGO	Area of Activity	Contact Person
Gender Research Center	Research/training on gender issues, focus on gender mainstreaming approaches.	Lidiya Rasulova 492 14 75 lidiyarasulova@yahoo.com gencent.wuaz@azeurotel.com
“Woman and Development” Center	Focus on providing support to women and children in sectors such as education, income generation.	Parvin Mammadova 492 79 20 elmira@awdc.baku.az
Young Lawyers’ Union	Awareness-raising campaigns on women’s rights.	Nadir Adilov 497 32 47, 449 94 14 office@aylu.az
Humanitarian Association of Jewish Women	Provides medical and psychological help to women and promotes the rights of Jewish women.	Larisa Reykhrudel 440 36 27, 495 25 44 jwoar@azeurotel.com
“Women in Oil Industry” Society	Focus on the role of women in the oil industry, including issues relating to the environment and reproductive health.	Solmaz Hajiyeva 467 78 42, (050) 357 61 58 neftchigadin@mail.az
Azerbaijan Gender Information Center	Promotes the use of information technology to women through information campaigns, training, and support.	Yelena Kasumova 438 99 72 info@gender-az.org
“Kamillik” Women’s Charitable Society	Assistance to refugees and IDPs, including promotion of gender equality principles and protection of women’s rights.	Asmet Mamedova 455 22 13, 455 24 14
“Mothers and Children of Victims of War” Charitable Center of Nasimi district	Provides charitable assistance to families of war victims.	Zemfira Taghizadeh 440 44 43
“Sensiz” Charitable Society	Support for single heads of households and families without income from employment.	Zemfira Rahimova 474 43 13

<b>Name of NGO</b>	<b>Area of Activity</b>	<b>Contact Person</b>
Women Crisis Center	Provides emergency medical and psychological assistance to victims of violence.	Matanat Azizova 434 33 76 wcc@online.az
Azerbaijan Feminist Group	Civil society gender education and awareness programs provides support to victims of violence and trafficking.	Rena Tahirova 492 80 71 tamilla@azeurotel.com
“Family and Society” Association	Civil society gender education and awareness programs; provides support to victims of violence.	Faiza Aliyeva 493 83 73 falievarep@azeronline.com
Family Crisis Center	Provides emergency medical and psychological assistance to victims of violence, including children.	Leyla Ismayilova 448 42 32, leyla@cpc.az
The Union of Economist Women of Azerbaijan	Promotion and support of women’s entrepreneurship development, research on gender and economic issues, promotion of women’s legal rights.	Najiba Qahramanova 454 11 96 nadjiba@hotmail.com
“Ecosphere” Social-ecological Center	Gender and environment awareness and promotion programs.	Firuz Sultanzadeh Zuleykha Aliyeva 492 43 48, (050) 332 00 34 ecosphera@azeurotel.com
Society of Disabled Women	Protection of disabled women’s rights, including rights to employment.	Mahluga Rahimova Firuz Babayeva 434 99 88, 469 39 49 office@oxfam1.baku.az
“Havva” Charitable Center	Assistance to women of Azerbaijan, participation in international women’s movement.	Solmaz Yusifova 493 07 52, 494 15 73
Charitable Society “Help for Pregnant Women and Women with Infants”	Assistance to pregnant women refugees and IDPs.	Museyib Aliyev 432 39 35, 438 64 93 aliev-musejeb@mail.ru
Association of Women Managers	Promotion and support of women’s entrepreneurship development; research on gender and economic issues; provision of training on business planning, management and marketing.	Gulnara Zamanova 498 40 27, 447 43 06 root@turan3.baku.az

<b>Name of NGO</b>	<b>Area of Activity</b>	<b>Contact Person</b>
“Women and Modern World” Social Charitable Center	Promotion and support of women’s entrepreneurship development, support for single female heads of household.	Sudaba Shiraliyeva 439 83 26 womenmworld@hotmail.com
Research Center on Women’s Problems	Civil society gender education and awareness programs, support and promotion of women’s participation in political processes, training of women leaders, promotion and support of women’s role in peace building and conflict resolution.	Sajida Abdulvahabova 439 66 88, 497 78 42 women.institute@azeurotel.com
Azerbaijan Women’s Society	Assistance to female refugees and IDPs.	Zemfira Verdiyeva 492 74 87
International Center on Social Research	Supports and promotes women’s participation in political processes, research on gender issues.	Gizilgul Abbasova 440 02 38 llemb@icsr.inbaku.com
“Martyrs’ Mothers” Charitable Center	Support to the families of victims of Garabagh war.	Rafiga Askerova 441 50 23 rafigaaskerova@mail.ru
“Clean World” Public Union for Citizens’ Rights	Prevention of VAW, trafficking; protection of women’s rights; awareness-raising campaigns.	Mehriban Zeynalova 497 10 58 meri@azinet.com
“Women with university education”	Prevention of VAW, trafficking; protection of women’s rights; awareness-raising campaigns; promotion and support of women’s role in peace building and conflict resolution.	Tamam Jafarova 492 67 52 tjafarova59@mail.ru
“Yuva” Humanitarian Center	Provides assistance and support to women from national minorities.	Rena Tahirova 438 70 17, 438 42 58 tamilla@azeurotel.com
“Shams” Young Women’s Center (Mingechevir city)	Support for programs targeted at young women; promotion and support of women’s initiatives from Southern Caucasus.	Tarana Seyidova (147) 4 74 05, (055) 771 27 88 taranaseidova@yahoo.co.uk
“Peasant” (Khachmaz district)	Support for programs targeted at young women in health care, education and other sectors.	Yegana Asadova 3 30 25