

Introduction and Overview



This Report investigates an important yet largely unexplored topic: the relationship between women's rights and welfare and the democratization and market-oriented transformation of Central and Eastern Europe and the former Soviet Union.

The 150 million women and 50 million girls who live in the 27 transition countries are not a special interest group. Women represent half of the population, and their particular concerns affect fundamental social questions. Typically, when women are at the lower steps on the gradient of advantage, this is because of the demands of their role in providing and caring for the new generation. This socially established linkage, rooted in childbearing, reinforces the bonds between the well-being of women and that of children. Women's experiences, however, also exert a tremendous influence on all of society, and women's progress is a sensitive indicator of human development in general.

Through its Regional Monitoring Reports, UNICEF has been examining the ways in which the collapse of the communist governments has affected the lives of children. This Report asks: Did gender equality exist behind the egalitarian rhetoric of communism? How have women fared under the emerging market democracies? Is the actual and potential contribution of women to healthy change fully recognized and realized?

The answers to these questions provide particular insights into people's lives in the transition countries, as well as into the links between development and gender equality. Indeed, women's rights and human development have been two of the most prominent social issues of the 20th century. In this light, the premise of this Report is that the transition offers an historical opportunity for the countries in the region to exercise genuine leadership in addressing gender questions and that women's broader participation is crucial if the social, economic and political targets of the transition are to be achieved.

Was there gender equality?

Discrimination against women blocks the development of nations just as it blocks progress for girls, women and their families. The 1979 UN Convention on the Elimination of All Forms of Discrimination against Women defines discrimination against women as "any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women . . . of human rights and

fundamental freedoms in the political, economic, social, cultural, civil, or any other field." All the transition countries are signatories of the Convention, as well as of the 1989 Convention on the Rights of the Child: this is a noteworthy declaration of intent.

So, how are these countries measuring up? Analysis of human development indices shows that the transition countries have a relative advantage in terms of gender equity and child and maternal health compared to countries at a similar level of development outside the region. This comparative edge is widely attributed to the historical achievement of the former governments in securing universal access to basic health care and education services and offering paid employment to most women.

Indeed, the Central European countries spent relatively large amounts on health and education services, and the Soviet Union had a ratio of physicians to population comparable to that of the richest nations in the world. In contrast to the situation in many other countries, there is no evidence that unequal treatment of girls caused gender differences in child and adolescent mortality or in basic educational attainment. Moreover, in the Baltic States, Russia and Ukraine, for example, the gender gap in labour force participation rates was comparable to that in Sweden, the leader in this regard among Western nations. The workforce participation rates of women in Poland, Romania and Azerbaijan were comparable to or higher than those in the United States or France, with the notable difference that, in the planned economies, women generally held full-time jobs throughout their working lives.

The Report finds that women's wages relative to those of men and women's representation among professionals and economic decision makers compare favourably to the levels in advanced market economies. This is linked to the generally significant attainments in the education of women – an asset which remains important in the new market environment. Women in the workplace had access to an extensive state-run system of family and childcare supports, including lengthy paid maternity leave, family allowances attached to wages, and nursery, kindergarten and after-school services for children.

From Czechoslovakia to Albania, from the Baltic to Central Asia, there was considerable diversity in terms of cultural traditions, lifestyles and degree of urbanization. This certainly influenced the average number of children born to families and the strength of kinship systems. Yet, at the same time, in many ways women's roles in the fam-

ily, including their contribution to and command over the household economy, were strikingly similar across the region. For example, the right of women to marry or initiate divorce was guaranteed in constitutions everywhere, despite traditions to the contrary in some places.

With a huge appetite for able labour, the state encouraged women to study, marry and have jobs and babies, and, where kinship support was weak, the state provided the means to help women manage the competing demands. These state-directed initiatives often favoured concrete advancements among women. However, many other apparent achievements were superficial rather than genuine, and women's well-being and their opportunities were often compromised under communism. Significantly, the underlying process was authoritarian rather than rights-based; a semblance of equity which often came closer to uniformity than genuine equality was imposed from the top down. Human rights and fundamental freedoms were denied; civil society was suppressed, and the family was neglected or viewed with suspicion.

When communist rule collapsed at the end of the 1980s and the beginning of the 90s, it left behind many basic economic and national issues unresolved, including the issue of gender equity. People did not immediately realize that the paternalistic communist state, despite all the proclamations, had actually failed to deal with fundamental questions of gender equality. These "missing achievements" were closely linked to the lack of market forces and the shortcomings in civil society – the same areas which the transition is supposed to address.

The missing links

The thinness of the veneer of equality under communism is revealed most graphically in the representation of women in parliaments, where women often accounted for as many as one-third of the seats – a share matched elsewhere in the world only in Nordic countries. This remarkable female presence disappeared during the first democratic elections in the region. This attests to the profound failure of the communist governments to cultivate gender equality which is legitimized and sustained by citizens.

The Report confirms the existence of additional weaknesses which must be dealt with.

- Women did not have equal career opportunities. They were poorly represented among party leaders and planners and among the directors of large state enterprises – the few top positions which really counted in these hierarchical societies. Occupational segregation – whereby women dominate in certain occupations and men in others – was considerable. The findings of this Report counter the frequent claim that the gender gap in wages in the transition countries does not reflect gender discrimination in the workplace. The in-depth investigation carried out for this Report could attribute only a rel-

atively small part of the 10-30 percent gap to differing job characteristics, skills, or experience.

- Health care was delivered by the state health care system. However, the returns were disappointing given the level of investment. For example, despite an emphasis on maternal and infant health care, there was large variance in maternal and infant mortality rates across the region, and the rates were often far above the targets of the World Health Organization. Health awareness and the need for healthy lifestyles were neglected, as evidenced by the widespread abuse of alcohol and the poor nutrition.
- Outside the context of work, there was little official social support for family life, and families functioned in isolation. Fertility rates among teenagers were high, often several times higher than the corresponding rates in Western countries. Services to help strengthen families and support women's capacity to prevent or cope with situations of risk were glaringly absent. The state applied too many last-minute, half-way measures: medical abortions rather than access to family planning services, or the separation of children from parents for placement in institutions instead of, for example, securing parental counselling.
- Despite laws ostensibly guaranteeing equality between women and men within marriage, the gender distribution of power in families remained one-sided. By taking over the responsibility for certain areas of family life, the state did not help women and men share these responsibilities more equally. Instead, it contributed to the weight of the "double burden" borne by women – long hours on the job followed by unpaid work at home. Data show that the total workload of women in Central and Eastern Europe averaged close to 70 hours per week, about 15 hours more than the workload of women in Western Europe.
- Another serious barrier to women's equality is the blanket of silence over violence against women that still covers the region. The evidence reviewed in this Report shows that violence against women is widespread, but that professionals in criminal justice, health care, social work, and education are largely untrained in recognizing and addressing violence against women, particularly domestic violence. This also represents an inheritance from the communist period.

These shortcomings confirm that the legacy of gender equality in the region is less robust than often assumed and raise concerns about whether and how these problems are going to be put on the agenda. By shattering the state monopoly over economic, social and political issues, the transition has exposed women to an environment in which the conditions for equality have yet to be explored.

New economic opportunities and risks

During the first half of the 1990s, GDP dropped by 15-25 percent in Central Europe, 35-45 percent in Southeastern

Europe and about 50 percent or more (with a few exceptions) in former Yugoslavia, the Baltic States, the western Commonwealth of Independent States, and the countries of the Caucasus and Central Asia. Economies have begun to rebound since then, but only Poland and Slovenia seem to have been able to surpass the level of output in 1989. Despite impressive growth in the private sector, many structural problems are still hindering economic recovery.

Market reforms and declines in output have led to large drops in real wages and pressure on employers to reduce the number of jobs. Losses in real wages – not infrequently larger than the falls in GDP – have been accompanied by considerable increases in wage differentials. The Gini coefficient, a common measure of the extent of wage inequality, has risen by one-third on average in Central and Southeastern Europe and by one-half in countries of the former Soviet Union. At the same time, governments have endured a huge drop in revenues, while their ability to raise taxes has not been adequately expanded.

Since 1989, an estimated 26 million jobs have been lost in the region – 13 percent of the pre-transition total. Available data suggest that almost 14 million of these jobs were held by women. Nonetheless, in the formal economy, women have managed to maintain their share of employment in the 40-50 percent range. Although the incidence of part-time work (a choice desired by many women) has increased in several countries, more than 90 percent of employed women still have full-time jobs. Yet, in parts of the region many jobs exist only on paper, and even the meagre wages many jobs provide are paid out after considerable delays.

Registered unemployment has soared in the former centrally planned economies, from almost zero to more than 10 million. Women represent a higher share of these jobless; six million women were on unemployment registers in 1997. In addition, more and more women and men who are without work are being excluded from these registers and are ineligible for unemployment compensation.

Economic change has affected women within the workforce, but also in the household. The need for two incomes in a household is still being felt, often even more strongly than was the case under communism, but it is more difficult to satisfy. The fact that both women and men have lost jobs in great numbers has undoubtedly influenced the gender balance of power within families, shifting sometimes towards the woman, sometimes towards the man.

Jobless women are more likely to become economically inactive, while men find work in the “grey” economy. Nonetheless, as the Report reveals, women often have a crucial role in ensuring household survival. As state commitments to childcare have shrunk, women’s responsibilities within the family have curtailed their ability to seek and find work. Enrolment rates in nurseries (for children up to age 2) have fallen across the region, most noticeably in the Baltic and western CIS countries, and nurseries have practically ceased to exist in the Czech

Republic and Slovakia. The number of kindergarten places is also declining in many countries.

The analysis finds that older jobless women and local communities have taken on a greater role in childcare. Meanwhile, falling fertility rates have reduced populations of young children by 10-50 percent in the region – a striking outcome. This can offer some immediate relief in economic and health terms to families and communities, but might generate several long-term economic and social problems.

There is evidence that in some countries employers are less willing to hire women and less willing to accommodate maternity and parental leaves. Analysis has found that, in Poland, because of their marriage status, unemployed married women, but not unemployed married men, are hindered from securing work.

Adequate, accessible and affordable childcare is crucial in the effort of families with young children to balance employment and household responsibilities. Government policy measures such as extended maternity and parental leave show some success in encouraging parents to stay at home to raise their children, but produce mixed results in terms of gender equity. Because of the reduction in childcare services and income support, the gender gap in wages has become more acutely felt.

However, a striking finding of the Report is that this gap has remained stable despite significant increases in overall wage inequality during the 1990s. The gender pay gap has widened the most in Bulgaria (which has been slow to reform) and then only by 5 percentage points. It has stayed the same in many countries and even declined in some, such as the Czech Republic, Hungary and Russia. Detailed analysis reveals that the strong educational attainment of women is a key factor. There is also some evidence that occupational segregation by gender has lessened during the transition.

At the same time, there is now a risk that gender segregation in employment is becoming linked to the type of ownership exercised by the employer. Thus, while women continue to fill public-sector jobs, men are making greater inroads in the private sector. As many as three-quarters of the employees in education and health care are women, and these fields account for a significant share of all female employment. Analysis shows that gender is a determinant in access to private-sector jobs, even independently of other factors. Women are also less likely than men to be self-employed or employers themselves. Still, available evidence suggests that women have established or own about one-quarter of new businesses – a promising start, given the recent emergence of entrepreneurial freedom in the region.

Women’s health and safety

A shocking and unanticipated deterioration in life expectancy accompanied the early years of the transition. Of 23 countries for which time series are available, male

life expectancy worsened in 22, and female life expectancy in 16. In many countries, the decline was small and only temporary; in others, the drop was large and more difficult to reverse. In Russia and Kazakhstan, the cumulative drop in life expectancy for men was 6.3 and 5.5 years, respectively, and among women 3.2 and 3.3 years. In 1997, life expectancy worsened or did not improve in Southeastern Europe, Estonia, Belarus, Moldova, Ukraine, and Turkmenistan – about one-third of the countries for which data are available.

It is increasingly recognized that women respond to health threats and medical treatments differently than men. This gender difference is apparent in the changes in life expectancy noted above, changes largely wrought by the strains of transition expressed through the poorer nutrition, unhealthier lifestyles, alcohol abuse, emotional distress, and violence which, according to some evidence, are more common among people with weak social networks.

The changes which have been triggered by the transition and which shape health have affected women both positively and negatively. In economic terms, women's health is influenced by lower incomes, greater income disparity and reduced funding for health care systems. Values and social environments are changing, and this is sometimes accompanied by healthier lifestyles, but not infrequently also by greater risk-taking behaviour.

Some indicators of maternal health have improved, demonstrating that the transition can harvest the previous investments in the health and education of women. Data show that infant mortality rates have remained largely stable or have declined, while maternal mortality rates have decreased across most of Central and Eastern Europe.

However, maternal mortality rates in Albania, Romania and most western CIS countries are still above the WHO target for Europe (15 maternal deaths per 100,000 live births), and the progress achieved in Russia during the 1980s has not continued during the 90s.

More frequent birth complications and worsening health status among infants are evidence of the poorer health of women as well. For example, in Belarus, the rate of haemorrhage and eclampsia has almost doubled; in Russia, the incidence of birth complications has almost tripled, and in many countries the proportion of low birth-weight babies has risen. These outcomes may in part be linked to demographic shifts, such as the higher share of births outside marriage, particularly to teenage mothers. However, women's poor nutrition and the erosion in access to services are also factors. In this regard, it should be noted that, in Central Asia, maternal mortality is still relatively high, often higher than it was in 1989.

Abortion remains common throughout the region, though the absolute number of legal abortions has declined in every country. Rates are especially high in Southeastern Europe (except Albania), western CIS and the Baltics (except Lithuania). The only countries where the number of legal abortions per 100 live births is around or below the

European Union average are Poland (where abortion laws became much more strict in 1993), Croatia, Azerbaijan, and Tajikistan. In Russia, there are two abortions for every live birth, that is, about 2.5 million abortions in 1997.

Though legal and usually performed by qualified health professionals, abortions still involve serious emotional and physical complications for women. Surveys show that around 70 percent of women feel depressed or traumatized by the experience. Abortion is a leading cause of maternal death, accounting for up to 20-25 percent of maternal deaths in some countries. The main reasons for persistently high abortion rates are inadequate access to family planning and little knowledge of reproductive health issues, especially among young women.

Young women are also particularly vulnerable to the increased incidence of "social diseases" in the region. There are indications that adolescent girls are catching up to both their male counterparts and Western European girls in alcohol and tobacco use. For example, evidence shows that the percentage of adolescent Latvian girls who smoke has doubled, as has the share of 15-year-old Polish girls who report having been drunk at least twice.

Some health threats are relatively new to the region, including drug abuse, HIV infection and trafficking in women for the purpose of sexual exploitation. The number of recorded HIV cases jumped from around 30,000 in 1994 to about 270,000 at the end of 1998, with an estimated 80,000 new infections in 1998 alone. This frightening surge is associated with intravenous drug use, which has been growing rapidly in parts of the region. About 70 percent of all HIV infections in Ukraine occur among drug users, and there is an important overlap between drug use and prostitution.

The booming sex industry across Central and Eastern Europe puts many women at very high risk. The negative impact of prostitution on the status of women in the transition countries cannot be understated. Prostitution affects perceptions about the role of women in society, places women in positions of economic and physical vulnerability and raises the risk to women of health problems and violence. There is evidence that the number of women from Central and Eastern Europe involved in street prostitution in many of the major cities of Western Europe is rising rapidly. Frequently, these women are forced migrants who have been coerced into prostitution through deception, kidnapping and intimidation.

There are also indications that violence against women, including domestic violence, is becoming more common. The culture of lawlessness seems to be spreading, and the rise in violent crime is alarming. Rape seems to be inadequately addressed through the criminal justice system, and cases of domestic violence do not even attract the attention of the courts. Indeed, domestic violence is not specifically recognized as a crime in some countries. In the weakened economy, women are more vulnerable to spousal violence, but also to sexual exploitation in the

workplace. These risks call for urgent improvement in the capacity of health professionals, social workers, police officers, and judicial authorities to provide adequate remedies and promote prevention.

Particularly disturbing is the use of violence against women, including rape and forced pregnancy, as weapons of war in ethnic conflicts. Estimates of the number of women raped as part of a deliberate pattern of abuse during the 1992-95 conflict in Bosnia-Herzegovina, in the former Yugoslavia, vary from 20,000 to 50,000. Women refugees and displaced persons – of which there are hundreds of thousands from Croatia to Tajikistan – are also vulnerable to sexual exploitation and abuse. New waves of physical, sexual and mental violence against women have been generated by the struggle in Kosovo in the Balkans, a region which has already experienced the tragic outcomes of ethnic strife.

Making the transition work for women

This Report makes clear that gender equality needs to be placed higher on the political agenda of the transition countries if they are to turn their impressive assets in human capabilities to full advantage. These countries face the enormous challenge of revitalizing civil society from the grassroots up.

It is critical that women act as agents of change in this process of linking political, social and economic reforms together into a foundation for development. The Report finds that, so far, female voices have been only faintly heard in the new democratic institutions of the region and that women politicians, ministers, ambassadors, and senior government decision makers are largely lacking. In most countries less than 10 percent of the parliamentarians are women, and the ratio of senior government posts occupied by women – 11 percent in Central Europe and 4 percent in CIS countries – is also very low.

Empowering women to act as agents of change requires both immediate action and long-term commitment in order to build women's participation in society at all levels. As the authority expropriated by the communist state from communities, families and individuals is regained by citizens, parents and entrepreneurs, there is an historic opportunity – and endless numbers of individual opportunities – for the gender balance of power also to be reset. Certainly, a broad-based women's movement which acts in concert with other equality-seeking organizations, civil institutions, economic actors, and governments is a primary conduit for such a process.

Reducing the role of the state is a basic goal of the transition, but government has a vital part to play in promoting the gender balance in society. Ways need to be found to reform, rebuild and sustain public services, such as health care, social care and education. Tax systems need to be reformed so that governments can raise revenues to pay for these services. National machinery for the advancement of women must be established, as has been done in several countries in the region. Using gender-based analysis in the

development of public policies – holding a gender lens to statistics and planning – is a recognized “best practice” which promotes equal outcomes for women and men. This involves paying special attention to issues particular to women and mainstreaming a gendered viewpoint.

The aim of this Report is to stimulate the development of national agendas and public policy frameworks for gender equality. The regional perspective offered by the analyses of the Report suggests that the following issues merit special focus.

- Mobilizing women and men within political parties to encourage women's participation in the democratic political process.
- Developing workplace policies and practices which expand the opportunities for women.
- Supporting women micro-entrepreneurs through business training and access to financing.
- Encouraging public discussion on gender issues and women's equality through grassroots organizations, the media and education and awareness campaigns.
- Developing a multi-faceted strategy to deal with violence against women.
- Promoting a fairer sharing between women and men of responsibility for child-rearing.
- Targeting public support for single parents, most of whom are women.
- Maintaining and strengthening women's educational attainment.
- Reaching WHO and UNICEF targets for maternal and child health.
- Favouring a broader life-cycle and social determinants approach to women's health.
- Focusing on and involving children and adolescents in the effort to achieve gender equality within families and communities.

Importantly, the principles which underpin the transition – the expression of diversity and genuine political representation, economic development and the expansion of choice – are the same values driving the movement for women's equality. They are simply somewhat different perspectives on the same process. In this light, the bid for women's equality should not be set apart from the transition, but should be a part of the transition. Equality cannot be imposed as it was under communism, but equality also cannot thrive in the wild as those who champion an unfettered marketplace would claim. Equality is a civilized and civilizing influence which needs to be carefully and constantly cultivated in order to advance human development. It is not a static state to be achieved; it is a living process to be continuously attended to.