Gender Equity in the Context of the Millennium Development Goals in Turkey

Millennium Development Goals

The Millennium Development Declaration was the culmination of 10 years of UN summits and meetings. Signed by many nations in 2000, the declaration set in motion a plan to collaborate to reach the goals by 2015. With further refinement towards a practical, measurable plan, which was released in 2005, the Millennium Development Goals (MDGs) became an ambitious and concrete way to attack the greatest global challenges (UN MDG Homepage 2009). There are 8 goals: End Poverty and Hunger, Universal Education, Gender Equality, Child Health, Maternal Health, Combat HIV/AIDS, Environmental Sustainability and Global Partnership (UN MDG Homepage 2009). Though the third and fifth goal specifically addresses gender, in reality all of the goals have gender nuances and implications. While I believe it can be considered great progress that gender equality related goals have their own category, it is also important to recognize that all development projects take place in a gendered context. Furthermore gender relations remain highly contextual to time and place and uniform recommendations and goals for “progress” can be problematic. What may be considered empowering to one group of people may be seen as constrictive or inappropriate to another. The following is a brief analysis of the gender implications and progress being
made towards each of the relevant MDGs in Turkey, with a specific emphasis on the third goal.

Introduction to Turkey

Turkey bridges east and west both geographically and in many ways culturally as well. It is of strategic significance to many nations because of its geographic location and its neighbors. It is a large country with a population of approximately 74 million (World Bank 2007). The majority of the population now lives in urban areas (73%), a drastic change from the 50’s when almost half of the population lived in rural locations (World Bank 2007). The largest ethnic minority in Turkey are the Kurds at 18%, who live predominantly in the south-eastern region, while 70% of the population is Turkish (CIA 2008). 99.8% of the population are Muslim (mostly Sunni) (CIA 2008).
Turkey overall is not a poor country with a GDP of 656 billion, however about 20% of the population still live below the poverty line (calculated at about $4/day PPP) (World Bank 2007). Unemployment in Turkey overall is about 10% and inflation 9% (World Bank 2007). But these statistics hide realities about underserved populations such as women, children and rural citizens. As in many nations, these populations are disproportionately affected by poverty, unemployment, and lack of medical services. For instance 32% of those who live in rural areas are below the poverty line (Turkish Statistical Institute 2008). Household size is another direct indicator of poverty. Families with more children are at higher risk for poverty. 42% of households with 7 members or more live below the poverty line (Turkish Statistical Institute 2008). Young children are also slightly more likely than the average population to live below the poverty line, 25% of children younger than six are in poverty (Turkish Statistical Institute 2008). Education level is also significant in determining likelihood of poverty. About 35% of those who are illiterate live below the poverty line (Turkish Statistical Institute 2008). This is especially significant in the context of gender because there is a significant gap in literacy rates between males and females in Turkey. Only 79% of women over the age of 15 are literate in Turkey, compared to 95% of men (CIA 2004). Turkey does receive official development aid from a number of sources including the World Bank, USAID, and the European Union. Current development areas identified by these donors include: transportation, education, health, renewable energy, small and medium enterprise development, water distribution and sanitation, and democracy building. So while overall many citizens in Turkey enjoy a high standard of living there are still
pockets that remain underserved and gender equity is certainly a priority area in terms of development.

**Gender Related Statistics in Turkey**

Some significant factors when considering gender and development in Turkey are included in the following section. While it is important to look at macro-data such as overall employment rates by gender and GDP/capita, there are also subtler pieces of information that help to elucidate a more complete picture of gender relations on the individual and household level.

Division of labor within the household is one useful way to analyze productivity beyond the other common indicators. Surveys completed in 2006 indicate the following breakdown of household labor responsibilities:

<table>
<thead>
<tr>
<th>Task</th>
<th>Men (%)</th>
<th>Women (%)</th>
<th>Women w/ Household Members (%)</th>
<th>Relative (non household) (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cooking</td>
<td>2%</td>
<td>87%</td>
<td>9.6%</td>
<td>.8%</td>
</tr>
<tr>
<td>Small Repairs</td>
<td>68.4%</td>
<td>6.7%</td>
<td>6.4%</td>
<td>4%</td>
</tr>
<tr>
<td>Daily Shopping</td>
<td>33.3%</td>
<td>37.7%</td>
<td>26.8%</td>
<td>1.3%</td>
</tr>
<tr>
<td>Payment of Monthly Bills</td>
<td>69.1%</td>
<td>17%</td>
<td>10%</td>
<td>2.8%</td>
</tr>
</tbody>
</table>

(Turkish Statistical Institute 2006)

This roughly indicates that while women maintain the majority of household responsibilities they are less likely to have control over the household budget and monetary empowerment within their family.
In terms of family composition the vast majority of people in Turkey live in nuclear families (80%) (Family Structure Survey - Turkish Statistical Institute 2006). Extended families comprise the next largest block at 13%. These statistics shift slightly to favor extended families in rural areas.

Infant mortality rates hover around 26/1,000 live births (as compared with around 7/1,000 in the U.S.) and there is no significant variance between male and female infant mortality (CIA 2009). This has improved greatly over the last ten years. Also improving is the number of women who are medically attended during child birth, now roughly 80% (Institute of Population Studies 2003). However rural women are much less likely than their urban counterparts to have access to medical facilities (65% of rural women give birth in a medical facility). Fertility rates have been declining and are about half of the rates in thirty years ago at 2.2 children/woman (Institute of Population Studies 2003).

**MDG Progress in Turkey**

**Goal 1 – Eradicate Extreme Poverty and Hunger**

Women have higher rates of poverty than men, rural citizens are at more risk than urban and children more than adults. In fact the percentage of women living under the poverty line actually increased slightly from 2002-2003. Inflation, unemployment, lack of high paying non-agricultural jobs are cited as the main causes of this increase (UN MDG Report 2005). As the next section will demonstrate education is directly linked to both salary and also employment participation making these goals interrelated in Turkey.
Goal 2 – Universal Primary Education

The gap between male and female enrollment in primary education has significantly decreased from 1990-2004, it went from a 12% gap to a 2% gap in this time. Turkey has made significant strides over the last 20 years to improve primary education across the board with 94.8% of males and 92.3% of females completing 8 years of primary education (UN MDG Report 2005). The policies that have led to this success have been mainly infrastructural including building more schools, improving bussing, and increasing boarding facilities in some areas. Supplies have also been given free of charge to poorer students (free bussing, free lunch, free uniforms). There are however still significant gaps based on gender. Cost of schooling is listed as the primary reason for lack of female enrollment, followed by lack of interest in school (UN MDG Report 2005). Interestingly here there is also an urban and rural divide, with urban respondents more likely to cite financial concerns and lack of interest more common amongst rural respondents. As with many challenges in development this reveals that singular solutions are unlikely to produce the desired results. Cultural and value changes that may lead to increasing interest in school in rural areas would not be effective in solving the financial or economic constraints of the urban populations.

Education also has significant ramifications for future participation in the formal economy on the part of women. In Turkey about 69% of women who complete higher education enter the workforce compared with just 30% of those who are high school graduates (DGSPW 2001). So narrowing the gender gap in school enrollment in this case
would also seem to improve overall economic opportunities for women. This is a good example of how many gender goals are interrelated and connected. It is impossible to identify one singular task or goal, gender development must be considered in all its complexity.

**Goal 3 – Promote Gender Equality and Empower Women**

As is evident in the other goal, all the MDGs touch on the topic of gender equality. It is significant however to consider this as a specific goal unto itself. The indicators for this goal revolve primarily around education, employment, and political participation.

In terms of political participation in Turkey gender is interesting to analyze. If you look only at the statistics presented in the MDG country report for Turkey prepared jointly by the UN and Turkish government it appears that Turkey is making great gains in political participation. That is because only data from 1991-2005 is utilized for women’s participation in national governance. However a longer term approach reveals at the national level women experienced a marked decline in participation from 4% in the 30’s to less than 1% in the late 70’s and back up to about 4% in 2002. Since then there has been gradual improvement, with the percentage in 2007 resting at 8% (Turkish Grand National Assembly 2007). Participation in local governments however has not followed this trend. About 98% of local government positions such as mayors and provincial leaders were male as of 2004 (Ministry of the Interior 2004).
As addressed in the earlier heading under primary education, the gender gap is narrowing. It is significant also to note the highest quintile of the population reports over 96% school enrollment rates for both sexes. This makes overall socio-economic development important for gender equity in school enrollment (UN MDG Report 2005). Literacy rates for women, especially amongst youth 15-24, are also steadily improving. However literacy rates for older women are not improving as rapidly as their male counterparts and remain a concern (UN MDG Report 2005). This bodes well for the future of young women however presents challenges for women over 25 well into the future.

Wage employment in Turkey is particularly low, especially in the context of its Eastern European neighbors. The baseline in 1990 for women engaged in non-agricultural employment was about 15%, and increased very slowly until 2004 when the rate was about 20%. The goal is 35% by 2015 (UN MDG Report 2005). As addressed above, achieving greater gender equity in secondary and tertiary education is likely to help achieve this goal of more active formal sector employment for women in Turkey based on past trends.

**Goal 4 – Reduce Child Mortality**

When considering that the bulk of domestic duties fall to women in Turkey, child welfare falls heavily into the hands of women. Improving education for women on the importance of breastfeeding, access to healthcare, immunizations, and the like, will significantly impact the likelihood of this goal being met. For instance in Turkey
specifically, “Many new mothers are encouraged by elders, or are forced by work commitments, to wean their newborn at the earliest opportunity” (UN MDG Report 2005). Therefore increasing education and buy-in of mothers, relatives, and employers on the health benefits of breastfeeding will help to achieve the goals of improved infant health. Rates of exclusive breastfeeding are increasing and were at 20% in 2003 (UN MDG Report 2005). This is one instance where goals for more female participation in the workforce may interfere with another MDG for reduction in infant mortality unless policies are effectively enacted to provide options for breastfeeding mothers in the workplace. The overall picture of how women spend their time and use their limited resources must be carefully considered.

**Goal 5 – Improving Maternal Health**

“The frequency of maternal mortality in its simplest form is the most preliminary and striking indicator of women’s status in society” (UN MDG Report 2005). This is a bold statement, but perhaps defendable. Women’s access to healthcare, especially skilled attendance during labor and delivery, is crucial to their very survival. Access to healthcare includes many factors. Sometimes physical access to medical facilities, sometimes financial ability to pay for services, sometimes cultural acceptance of seeking medical treatment and attitudes that women hold themselves in regards to care. In Turkey rural women are much more likely give birth without skilled attendance, and women with less education are also more likely to give birth without a skilled attendant. This is due to geographic and economic reasons according to women surveyed (UN MDG Report 2005), though national averages are improving across the board in this area.
Even reliable data in regards to maternal death as a result of childbirth is not available in Turkey. There are many estimates based on a variety of methods, but I think the lack of data itself is revealing about the status of women in this regard. Better information would be an indication that ministries and officials find such information significant enough to invest in and by extension that the health of women is significant enough to invest in.

**Goal 6 – Combat HIV/AIDS and Malaria**

Rates for HIV/AIDS infection in Turkey according to national statistics is very low. However it is likely that it is under-reported for cultural and religious reasons. Relative ignorance about AIDS and also the rareness of condom use as the primary form of birth control make Turkish populations vulnerable to higher rates of infection. This is especially significant for younger women who have a higher risk of contracting the disease and may have little voice over condom use with their sexual partners (UN MDG Report 2005).

**Goal 7 – Environmental Sustainability**

In many nations women have a particularly important role to play in this MDG. In the case of Turkey so many of the strides to be made are at a national policy level and require infrastructural change beyond the purview of private citizens. The main gender implications for this goal would therefore seem most related to the impact that women might have if they were more significantly represented in government affairs.
Conclusion

The successful accomplishment of 6 of the 8 MDGs in Turkey all hinge on improved gender equality in one way or another. Development in any nation is interconnected and complex between many disciplines. I think that the Turkish NGO, Women for Women’s Human Rights, makes the current situation in Turkey very clear: “There are very few social services and programs that enable women to translate the legal rights they have gained since the founding of the Republic from the written page into everyday life” (WWHR 2009). Legislative and structural progress is being made which will support current and future efforts towards gender equality and the achievement of the MDGs. However the work now lies at the grassroots level with the nitty gritty work of cultural and attitudinal change to reach not only the MDGs but also greater equity and empowerment for women in Turkey.

Works Cited


